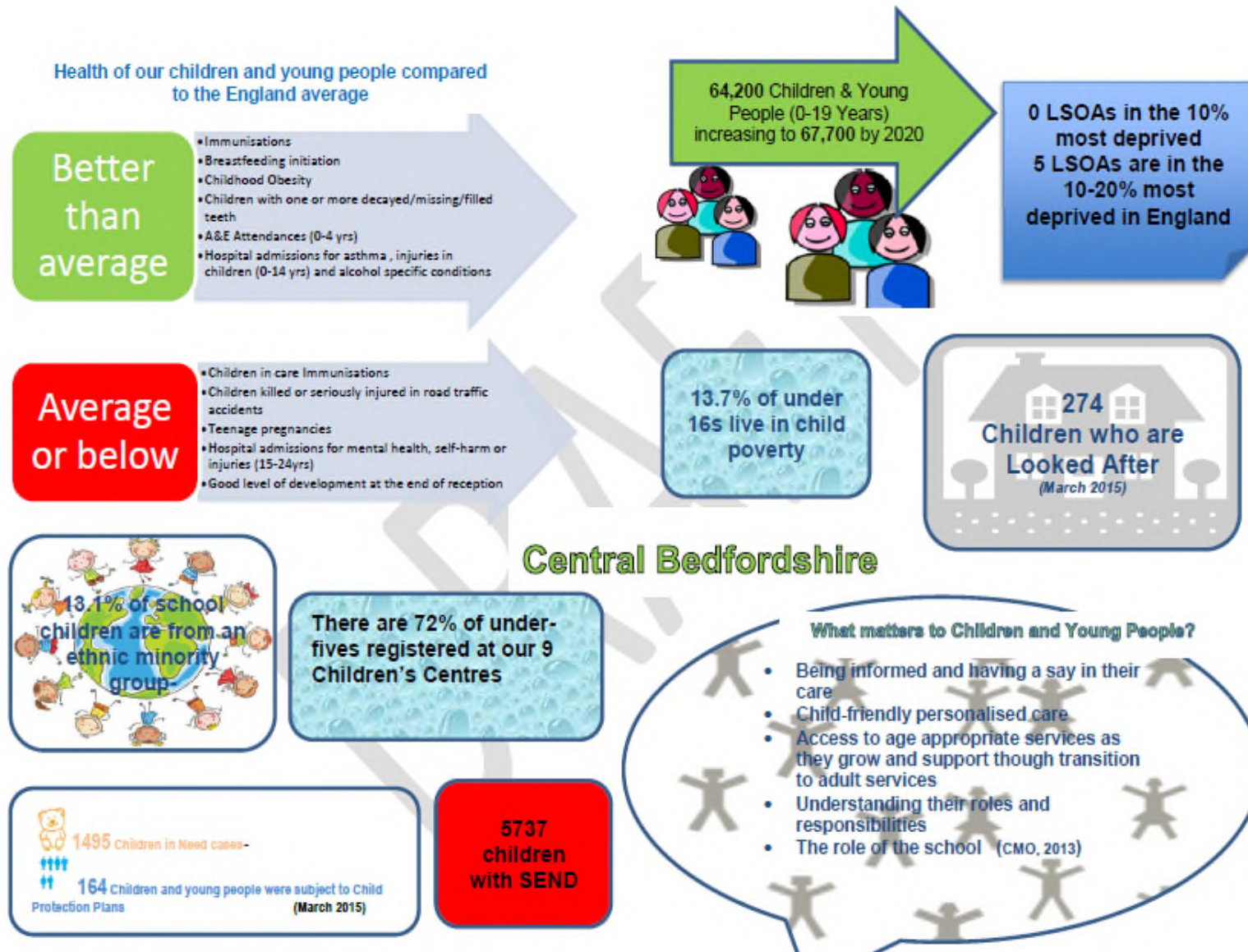


Health and Wellbeing of Children and Young people in Central Bedfordshire

December 2015

Linda Willis- Public Health

Headlines Central Bedfordshire

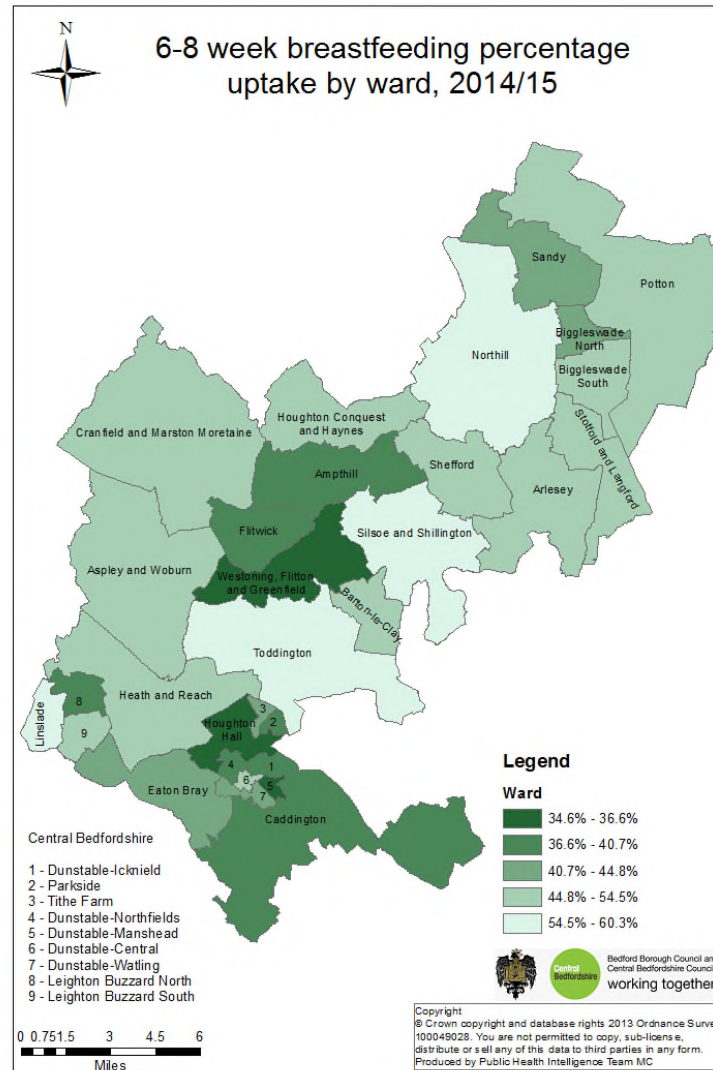


Six High Impact Pathways- full and effective delivery of the Healthy Child Programme

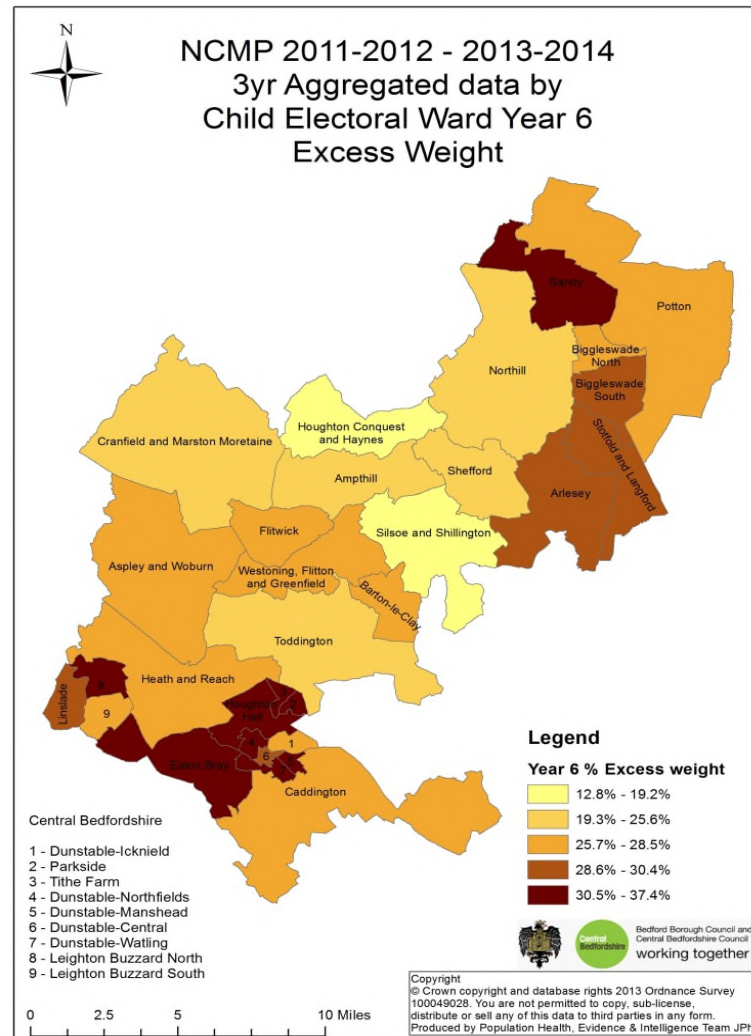
- Transition to parent hood and the early weeks
- Maternal mental health
- Breastfeeding
- Healthy weight, healthy nutrition
- Managing minor illness and
- reducing accidents
- Health wellbeing and development of the child at age 2- two year old review



High Impact pathways-Breastfeeding



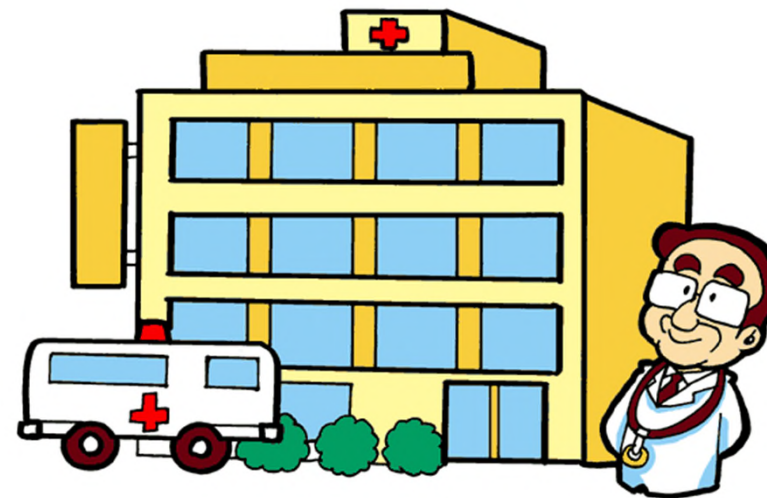
High Impact Pathways-Healthy Weight, Healthy Nutrition



High Impact Pathways-managing minor illness and reducing accidents (reducing hospital attendance/admissions)

Central Bedfordshire:

- There were 5753 A&E attendances (0-4 years) in 2013/14: 338.6 per 1,000
- Best in the country is 252.7 per 1,000
- 460 emergency hospital admissions caused by injuries in children (0-14 years) in 2013/14. Rate of 95.3 per 10,000
- Best in the country is 64.4 per 10,000



hospital

Key Indicators of child health-Health, Wellbeing and Development of the Child at Age 2 – Two year old review (integrated review) and support to be ‘ready for school’

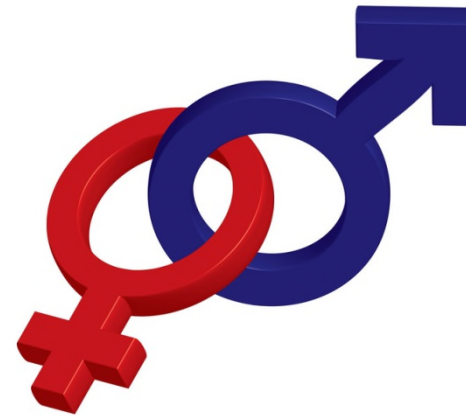
Central Bedfordshire:

- In 2013/14, 57.2% children achieved a good level of development at the end of reception
- 2014/15 to improvement to 63.6%
- Below the national level of 66.3%
- best area in the country 77.5%.



Key Indicators of child health

- Vaccinations
- Dental health
- Mental health
- Smoking
- Drugs and alcohol
- Sexual health
- Teenage pregnancy



Key Indicators of child health

Vaccinations

Measles, Mumps and Rubella

- First dose is 95.8% -national average 92.7%
- Best area in the country 98.3% (2013-14)

Human Papilloma Virus

- Better than the England average; 91.2% (2013/14),
- Best areas over 95%.



Dental health

- Children aged 5 with one or more decayed, missing or filled teeth-16.4% (national average 25% 2012)
- Best area-12% (2012)



Mental health

- 3585 children aged 5-16 have a mental disorder, with a higher number seen in the 11-16 year old age group and in boys.
- Amongst 16-19 year olds a further 1,650 will have a disorder

Key Indicators of child health

Smoking

- 7.1% of 15 year olds are estimated to currently smoke -similar to the national average

Drugs and alcohol

- The hospital admission rate due to **alcohol related conditions** is 21/100,000
- National average 40.1/100,000 - best rate in the country is 13.7/100,000.
- The rate of hospital admissions due to **substance misuse** is 76.3/100,000 which is similar to the national average -best in the country -22.8/100,000






Sexual health

- 2,397 new diagnoses of sexually transmitted infections per 100,000 people aged 15-24 in 2013 -England average - 3433/100,000.

Teenage pregnancy

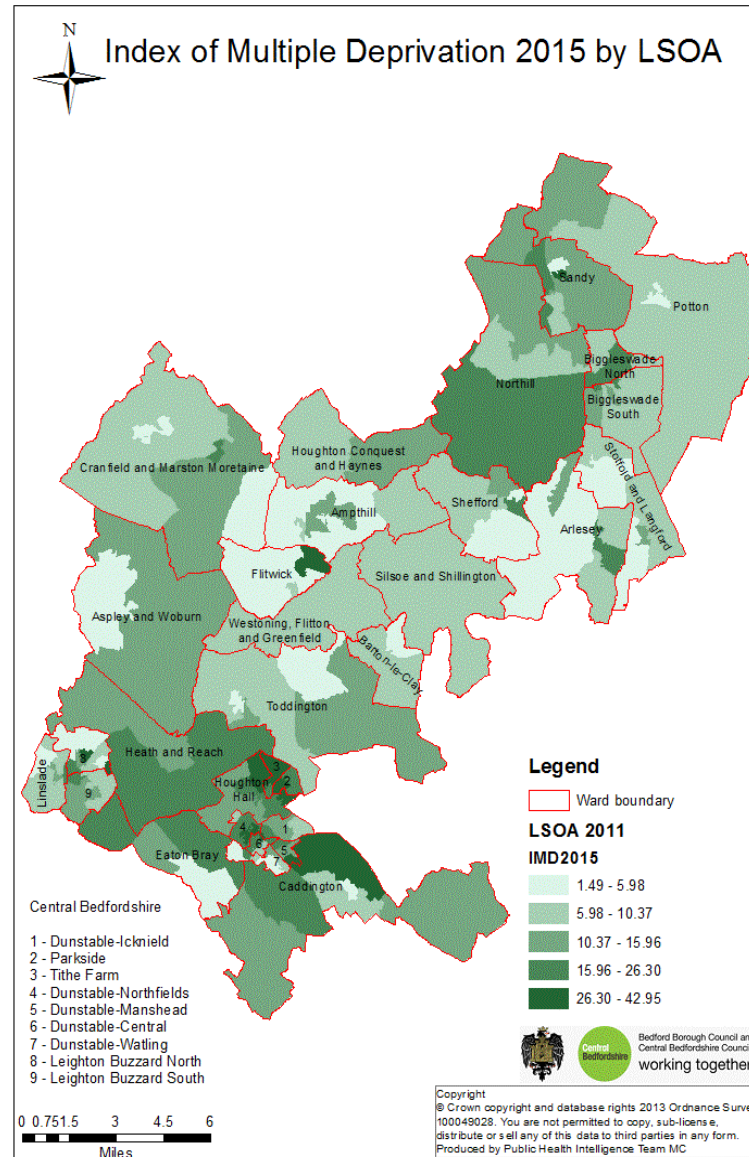
- The 2013 rate was 19.9 per 1000 (actual number 92)
- This is a reduction of 26% from the 2012 rate of 26.7 per 1000 (actual number 125)
- Rates are slightly lower than the South Midlands and Hertfordshire Public Health England Centre rate and the national rate.
- There are 3 higher rates wards. These are Manshead, Tithe Farm and Northfields.

Worse than England average for Central Bedfordshire Council in the 2015 Child Health Profile

Number	Indicator	2015				Trend 2011-2015 profiles	Central Bedfordshire Values				
		CB Value	England Average	England Worst	England Best		2011	2012	2013	2014	2015
6	New sexually transmitted diseases (including chlamydia) per 100,000 (2013)	2,397.1	3,432.7	8,098.4	1,899.8				2,610	2,250	2,397
7	Children achieving a good level of development at the end of reception % (2013/14)	57.2	60.4	41.2	72.3			55.0	62.3	49.1	57.2
24	Smoking status at time of delivery % (2013/14)	12.6	12.0	27.5	1.9			12.6	14.1	13.0	12.6
26	Breastfeeding prevalence at 6-8 weeks after birth % (2013/14)	44.6	-	19.4	77.4				45.8	46.4	44.6
31	Hospital admissions for mental health conditions per 10,000 (2013/14)	87.9	87.2	391.6	25.6			47.9	44.4	94.5	87.9

- There is only one indicator of the 32 in the national child health profiles which is significantly below the national average and that is the proportion of children achieving good development at the end of reception. Although this has gone up by 8.1 percentage points it remained rag rated red as the England average went up by 8.7 percentage points.
- 'Hospital admissions for mental health conditions' has gone down from 94.5 to 87.9 per 10,000 population age 0-17 years, but it is still about double what it was in 2013. It is slightly worse than the England rate of 87.2 per 10,000.

Inequalities



Aiming for best- average is not good enough!

The absolute numbers of children with different health problems reveals there are still far too many who have poorer health than they could have. Compared to the best in England:

- **Not Breastfeeding at 6-8 weeks**
around 50% **The best- 18.5%**
- **Overweight or obese children**
around 20% **The best-12%**
- **A&E attendances age 0-4 (2013-14)**
35% **The best-25%**
- **Children not achieving a good level of development at the end of reception (2014-15)**
36.4% **The best-24.7%**

Children with Complex Needs

- Some children have a complex collection of medical problems. Examples of these are children with some chromosomal abnormalities, severe learning difficulties or with neurological problems such as severe cerebral palsy. These children require high levels of specialist care
- A number of children are not able to access the care they need in Bedfordshire and are placed in provision in other areas.
- The majority of these placements involve needs relating to learning disabilities, autism and behavioural, emotional or social difficulties. The gaps in local services that result in these out of area placements mostly relate to the intensity and complexity of the services needed and the lack of ability to provide out of hours services to families in crisis locally.
- Conditions needing input from Speech and Language Therapy, Epilepsy support, Physiotherapy and Occupational Therapy services are the most often identified and we need to ensure that there is good access to these services locally for children with SEND aged 0-25.

What young people say

How you feel mentally is very important and there should be services to help with this

Young people need support to build good relationships and know who to trust

Families need support to help the young people around them

Young people should be able to **access health services easily and know it will be confidential**

People who work in young people health services should **know how to be/talk with young people and not judge them**

People who work in health services **need to support young people to ask for help** because it is very difficult

It should be **quick and easy** to access health support

Health services should be available to **help young people help themselves** before things get too tricky/get really bad

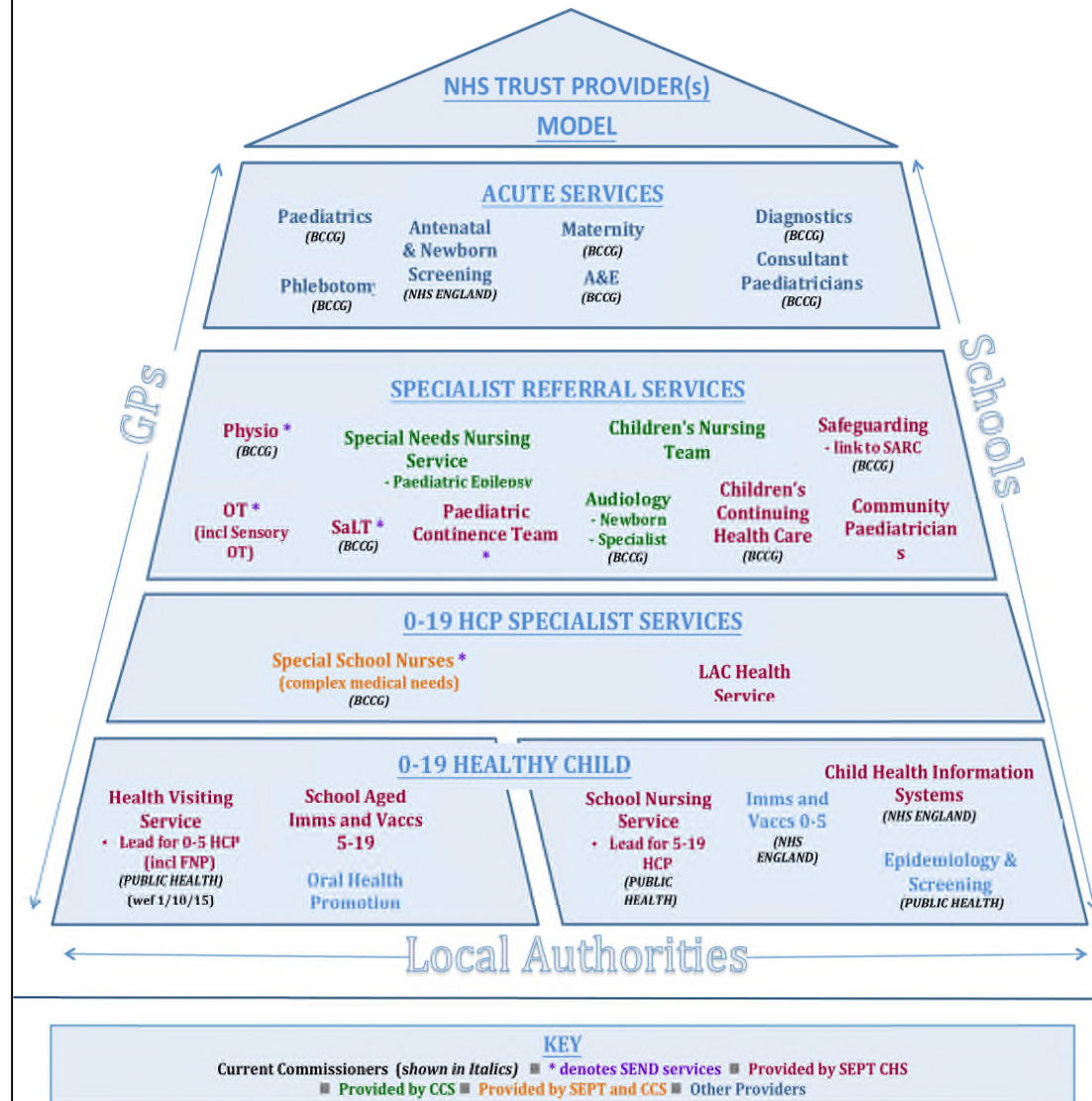
Health services should **use the internet and different types of media**

Schools should provide lots of opportunities to learn/talk about health and wellbeing including relationships

Health services should **share important information with other health services** so that a young person does not have to keep telling their story over and over again

Health services should **ask young people what they think and then really listen** and make changes if necessary

**Health Services
for Children and Young People
0-19 (25 years SEND) across
Bedford Borough and Central Bedfordshire
Scope of Commissioning for Community Health Services**



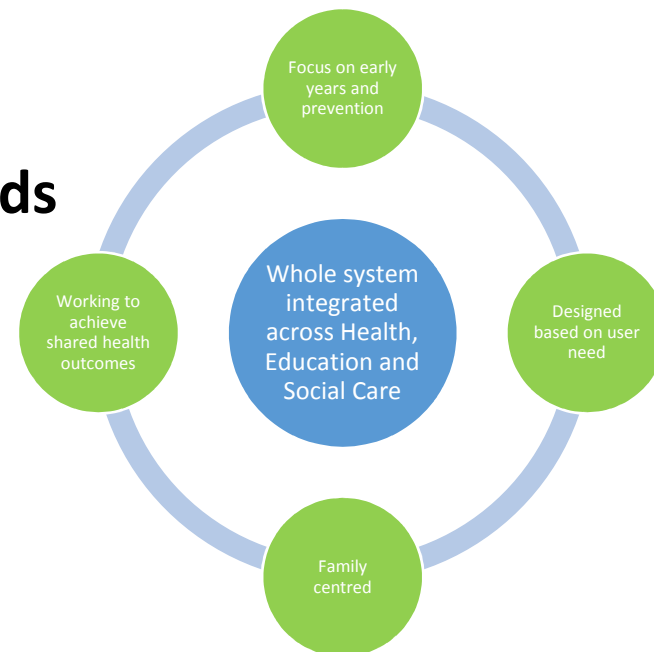
Opportunities



- Commission services for children and young people in a more joined up way
- Make the most of opportunities to integrate health services with education and social care – services are not all family centred
- Reduce avoidable attendances to A and E and admissions to hospital
- Pathways and communication with acute services can be improved
- Establish more robust pathways between services
- Make services more accessible, with a single point of access
- Make services less fragmented - there are currently eighteen different services in operation.
- Share information more effectively between organisations and services
- Reduce variation in services across and between Local Authority areas

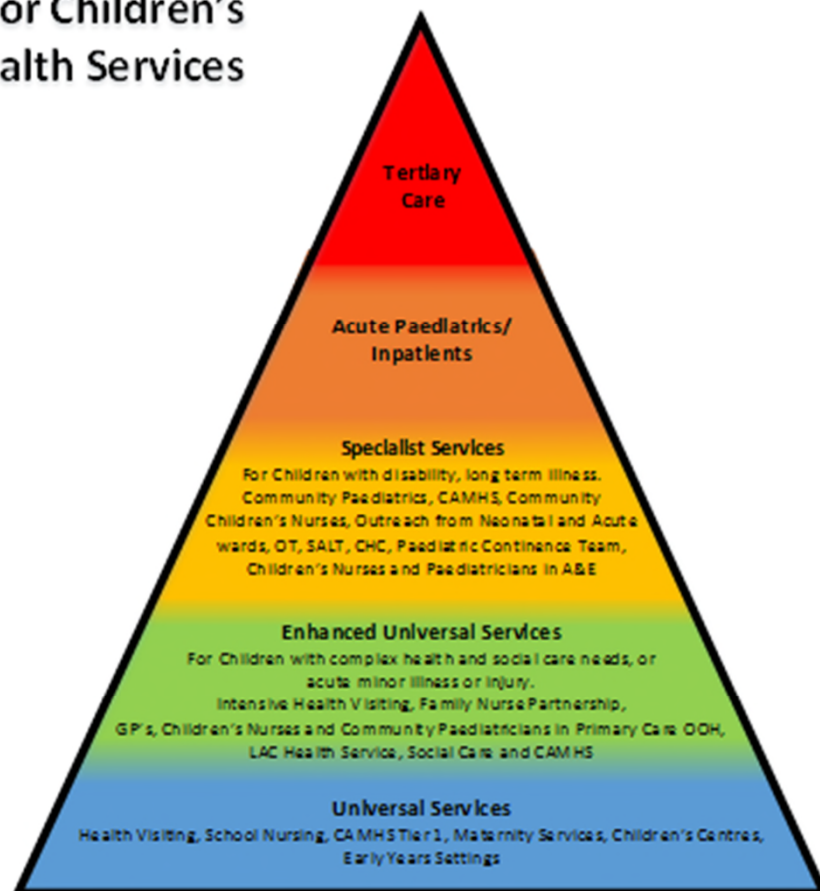
Improving health outcomes- best practice: Characteristics of an Effective Community Health System for Children and Young People

- **Focus on Early Years and Prevention**
- **Integration**
- **Family Centred**
- **Flexible Design Based on User Needs**
- **Shared Outcomes**

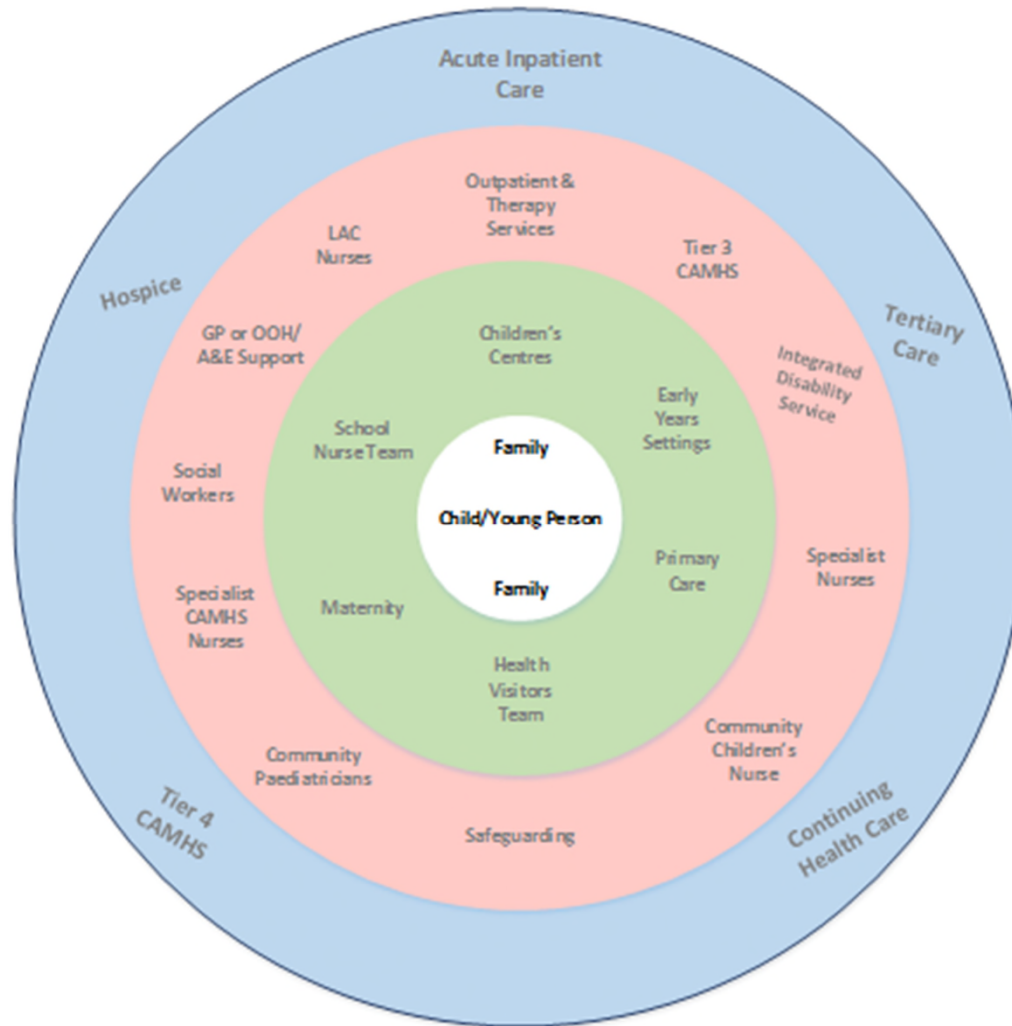


Levels of care

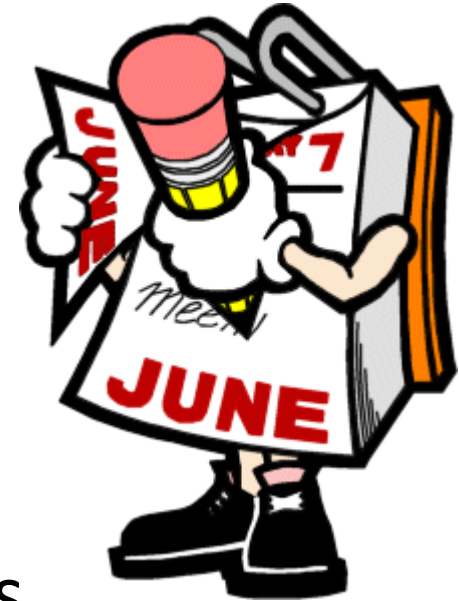
Future Model for Children's Community Health Services



Designing a model



Timescales



- Develop new service specifications
November – January 2015
- Procurement process- start by March 2016
- New service go live April 3rd 2017