

## Appendix A

### Development of the next JSNA Executive Summary (Identified issues for possible inclusion)

Link to Central Bedfordshire JSNA:

<http://www.centralbedfordshire.gov.uk/health-and-social-care/jsna/default.aspx>

Link to the last Executive Summary:

[http://www.centralbedfordshire.gov.uk/Images/CB%20JSNA%20Summary%202014%20\(2\).tcm6-58568.pdf#False](http://www.centralbedfordshire.gov.uk/Images/CB%20JSNA%20Summary%202014%20(2).tcm6-58568.pdf#False)

#### 1. Section: Starting Well

A child's experience in the early years has a major impact on their future life chances and is crucial to reducing health inequalities across the life course. Starting well is about meeting needs from pregnancy to birth and through the first few years of life. *Current Executive Summary.*

Key Issue	Starting Well: Points to be considered
<b>Smoking at the Time of Delivery (SATOD)</b>	<ul style="list-style-type: none"><li>Q2 monitoring of this measure by the Trust Board shows that this measure is on track (with good performance at BCCG level) – however, consideration may need to be given to the rates at Luton and Dunstable Hospital (referenced in the JSNA chapter).</li></ul> <p>Under review with chapter lead.</p>
<b>Maternal Obesity</b>	<ul style="list-style-type: none"><li>Increasing the take up of Maternal Obesity Programmes to improve outcomes for mother and baby.</li><li>(The last Executive Summary references that 'in the southern part of Central Bedfordshire, fewer pregnant women access maternal obesity support.')</li></ul> <p>Under review with Chapter Lead.</p>
<b>Maternal Mental Health</b> <b>Perinatal Mental Health</b>	<ul style="list-style-type: none"><li>Annual Director of Public Health Report 2014 recommends action in a number of key areas to improve children and young people's mental health including: <i>Ensure excellent maternal mental health:</i><ul style="list-style-type: none"><li>Identify women early who have poor mental health through antenatal and postnatal maternal mood assessments</li><li>Ensure that the ante and postnatal pathways for maternal mental health are followed and women have access to high quality and timely support for mental health illness</li></ul></li><li>Future in Minds publication and Local Transformation Plans.</li></ul>
<b>Breastfeeding Rates</b>	<ul style="list-style-type: none"><li>There is a 'drop-off' between the number of women who start to breastfeed and are still breastfeeding 6 weeks later.</li><li>Breast feeding rates at 6-8 weeks in Central Bedfordshire show a decrease with increased deprivation.</li></ul>

<b>Childhood Excess Weight</b>	<ul style="list-style-type: none"> <li>Review 2014/15 data to be published mid December 2015.</li> </ul>
<b>Teenage Pregnancy</b>	<ul style="list-style-type: none"> <li>There has been a downward trend in the under 18 conception rates in Central Bedfordshire since 2010, with the greatest reductions seen in the under 16s.</li> <li>Targeted work within the hotspot wards continues to be a priority.</li> </ul>
<b>Child Poverty</b>	<p>Reference to the latest data for children in low income families (recently published 'As at' 31 August 2013) and review geographical neighbour performance.</p> <p>Include reference to:</p> <ul style="list-style-type: none"> <li>Those eligible for Free School Meals</li> <li>Levels / areas of deprivation</li> </ul>
<b>School Readiness</b>	<ul style="list-style-type: none"> <li>Good Level of Development 2015 provisional results.</li> <li>Reference to 3 key areas identified through Children's Trust research considered important to improving outcomes: <ul style="list-style-type: none"> <li>Improve communications with parents and professionals</li> <li>Improve assessment and observation</li> <li>Develop clear pathways for children who are identified as needing support in order to be ready for school</li> </ul> </li> <li>Include reference to the School Readiness workstream as a key element within the Partnership Vision for Education 2015-19. 3 key areas above are being considered by this workstream.</li> </ul>
<ul style="list-style-type: none"> <li>TBC – antenatal care, ensuring all eligible two year olds will be able to attend high quality childcare providers.</li> </ul>	

## 2. Section: Developing Well

Developing well is about understanding the needs of the population between the ages of 5 and 19. This includes understanding the anticipated needs for children and young people in schools and colleges and the developing health of this age group. *Current JSNA Executive Summary.*

Key Issue	Developing Well: Points to be considered
<b>Attainment:</b>	<ul style="list-style-type: none"> <li>Considering latest data across key stages.</li> <li>Include narrowing the gap in performance between children who are disadvantaged and those who are not / Looked After Children / Children eligible for Free School Meals.</li> </ul>
<b>Early Help - TBC</b>	<ul style="list-style-type: none"> <li>In April 2014 the 'single front door' Access and Referral Hub was launched. Since it was launched the Access and Referral Hub has dealt with 10,898 enquiries.</li> <li>Need to consider the further development of the 'one front door' with partners (Access and Referral Hub).</li> <li>Consider emerging population growth and needs, and whether the right Early Help services are in place.</li> </ul>
<b>Looked After Children</b>	<ul style="list-style-type: none"> <li>The main reason for children and young people entering care in the year ending March 2014 was abuse or neglect (reported in 84% of cases referred</li> </ul>

Key Issue	Developing Well: Points to be considered
	<p>to Children's Social Care).</p> <ul style="list-style-type: none"> <li>Improving placement stability for looked after children and support to care leavers.</li> <li>Children and Young People's Voice report 2015: key issues identified include the importance of maintaining relationships when Looked After Children change placements and the important role that placement stability plays in emotional well-being.</li> <li>Links to health services – Looked After Children nurse, specialist needs.</li> <li>Mental health of Looked After Children</li> </ul>
<b>Unaccompanied Asylum Seeking Children</b>	<ul style="list-style-type: none"> <li>There has been an increase in the arrival of Unaccompanied Asylum Seeking Children in Central Bedfordshire - include information on needs and implications for the Local Authority.</li> </ul>
<b>Referrals to Children's Social Care</b>	<ul style="list-style-type: none"> <li>Abuse and neglect is the highest primary need for those children referred to Central Bedfordshire Children Social Care.</li> </ul>
<b>Child and Adolescent Mental Health /</b>  <b>Eating Disorders /</b>  <b>Self Esteem /</b>  <b>Self Harm/</b>	<ul style="list-style-type: none"> <li>National data estimates the rates of mental health problems in males between the ages of 5-10 years is almost twice that of females (10.4% vs 5.9%) and the rate in females increases to narrow this gap by the ages of 11-15 years (12.8% for males and 9.65% for females). There are an estimated 1,100 males and 595 females aged 5-10 years with a mental health problem in Central Bedfordshire and 1,260 males and 905 females aged 11-15. <i>Calculated from applying national prevalence to Central Bedfordshire population (Exeter database 2014).</i></li> <li>The Annual Director of Public Health Report 2014 recommends action in three key areas to improve children and young people's mental health including: Help children to become more resilient: <ul style="list-style-type: none"> <li>Health and early years practitioners should develop and agree pathways and referral routes that define how practitioners will work together, as a multidisciplinary team, across different services (NICE guideline PH40)</li> <li>Ensure practitioners have the knowledge, understanding and skills they need to develop young people's social and emotional wellbeing (NICE guideline PH20)</li> <li>Provide a curriculum that promotes positive behaviour and successful relationships and helps reduce disruptive behaviour and bullying (NICE guideline PH20 Mental health and behaviour in schools: Department for Education. June 2014)</li> </ul> </li> </ul> <p>Increase the early identification of children who are at risk of poor mental health earlier and ensure that they have access to appropriate services.</p> <ul style="list-style-type: none"> <li>Reference Future in Mind / Transformation Plan.</li> <li>Health related behaviour and perception survey (SHEU Survey) Spring 2014 showed that pupils (Year 6, 8 10) in Central Bedfordshire who took part were less likely to get high self-esteem scores compared to the wider SHEU sample. 3099 pupils were involved in the survey. Consider by gender.</li> <li>In Autumn 2015 schools are being invited to take part in a health related behaviour survey for children in years 4, 6, 8, 10 and 12 focusing on their emotional health and wellbeing. Consider results once available.</li> <li>A small proportion of self-harming behaviour has life-threatening consequences resulting in emergency hospital admission and sometimes death. In 2013/14 there were 115 A&amp;E admissions for self-harm in Central Bedfordshire (children and young people 10-19 years old). In previous years, admissions for self-harm were three to four times more common in girls than boys, consistent with national findings. In 2013/14 however the gap appeared</li> </ul>

Key Issue	Developing Well: Points to be considered
	<p>widen and admissions for self-harm were nearly eight times more common in girls than boys.</p>
<b>Alcohol</b>	<ul style="list-style-type: none"> <li>Balding Survey results collected spring term 2014 from a sample of Year 10 (14 – 15 year olds), Year 8 (12 – 13 year olds) and Year 6 (10 – 11 year olds).</li> </ul>
<b>Parental Issues</b>  <b>Domestic Abuse / Substance Misuse / Parental Mental Health</b>	<ul style="list-style-type: none"> <li>The Central Bedfordshire Safeguarding Children Board Annual Report 2014/15 provides details of challenges faced including 'ensuring the effectiveness of safeguarding support for children living with the consequences of domestic abuse, parental mental ill health and parental substance misuse'.</li> </ul> <p><b>Domestic abuse:</b></p> <ul style="list-style-type: none"> <li>In Central Bedfordshire the Relay Project supported by Bedfordshire Police and the local authority continues to alert schools to children whose parents have been involved in a domestic violence incident. 1749 alerts were made to schools by the end of March 2015 and 133 out of 139 schools have received a notification from the Relay Team. The Relay Team deals with an average of 25 domestic violence incidents a week (and more than 40 children). Further information on the difference the Relay service is making.</li> <li>Ensuring that domestic abuse in families with children and young people is identified as early as possible and improving support to the whole family to reduce repeat incidents and their impact on children and young people. Current JSNA Executive Summary.</li> </ul> <p><b>Substance misuse:</b></p> <ul style="list-style-type: none"> <li>The percentages of clients in treatment for substance misuse living with children or pregnant are lower in CBC than nationally and this may indicate further work needs to take place to review how this is recorded and that assessment and recording of those living with children is being under-reported. Review with chapter lead.</li> </ul> <p><b>Adult Mental Health:</b></p> <ul style="list-style-type: none"> <li>The number of people with a mental health condition in Central Bedfordshire is predicted to rise, primarily as a result of the changing population structure.</li> <li>To the period 2016, the largest absolute increase is in neurotic disorders where it is estimated that 1 in 6 adults experience some sort of neurotic disorder over their lifetime, the most prevalent type being mixed anxiety and depression.</li> </ul>
<b>Child Sexual Exploitation</b>	<ul style="list-style-type: none"> <li>Consider the broader issue of 'risks to adolescents' and harmful sexual behaviour.</li> <li>During 2014/15, in 72 assessments of young people, child sexual exploitation was identified as a factor and 35 young people were referred to the Child Sexual Exploitation Panel.</li> <li>Tackling child sexual abuse by ensuring all agencies working with children and young people are aware of risk factors, signs of abuse and exploitation and what to do if they suspect that it is taking place.</li> </ul>
TBC - Youth Offending, Children with Special Educational Needs and Disabilities, Young Carers, Sexual Health.	