
CHILDREN AND YOUNG PEOPLE PUBLIC HEALTH OVERVIEW 2017

SUMMARY REPORT

Purpose of the Report

1. To provide an overview of a number of Public Health programmes in relation to children and young people (CYP).
2. Programmes include information about the Darlington Children and Young People's Profile 2017 and the Healthy Lifestyle Survey 2016 as means of assessing need. The report includes by information on the 0-19 Years Child Health Service and the Darlington Children and Young People Healthy Weight Action Plan.

Summary

Child Health Profile 2017

3. In order to understand local need and plan services to improve the health and wellbeing of local children and young people the Darlington Child Health Profile (**Appendix 1**) is one of the tools used for analysis.
4. The 2017 profile provides a snap shot of child health in Darlington covering 32 indicators within the domains of: premature mortality, health protection, wider determinants of ill health, health improvement and prevention of ill health. It compares over time, children's health and wellbeing in Darlington with the rest of England.
5. The profile shows that the majority of children's experience of health and wellbeing in Darlington is generally good with 19 of the 32 reported indicators for Darlington are better or similar when compared to England The profile however highlights the inequalities in outcomes that exist for specific vulnerable groups of children and families.
6. There are some improvements in the 2017 profile on previous years; the under 18 conceptions rate has continued to decrease and is now similar to the England average. Smoking status at time of delivery has shown a significant improvement.
7. The Health Profile highlights oral health as an area for improvement as the percentage of children aged 5 years with decayed, missing or filled teeth is significantly worse than the England average. Further details on elements of the profile is attached in **Appendix 2**; Darlington Child Health Profile 2017 Report.

8. Oral health improvement is an element of the Darlington CYP Healthy Weight Action Plan (**Appendix 3**) due to the contribution that sugar reduction makes in tackling both obesity and dental decay.

Healthy Lifestyles Survey 2016

9. A further tool in understanding local need is the Healthy Lifestyles Survey (HLS) which gathers and analyses information from children and young people in Darlington about their attitudes and behaviours across a range of health related topics using systematic evidence based methodology.
10. This information once analysed is used to inform strategic planning service delivery and practice by the local authority and other partners and stakeholders including the NHS, local schools and academies and Police.
11. The secondary school surveys 2016 headline messages include: that nearly 9 out of 10 of those surveyed in Year 9, Year 10 and Year 11, had never had sex, 1 in 8 smoke regularly, 1 in 10 have tried illegal drugs and just over half have had a drink of alcohol.
12. In the primary school survey 2016 8 out of 10 pupils reported feeling stressed. Homework, schoolwork and SATs were the main reported reasons for pupils' stress, followed by "dealing with emotions" as a reason for stress. Most stated they had supportive family.
13. In **Appendix 4** the Power Point presentation provides key messages of the HLS. Full reports can be found at the following link <http://www.darlington.gov.uk/health-and-social-care/public-health/children-and-young-people/healthy-lifestyle-surveys/>.

0 – 19 Years Child Health Service

14. The 0-19 Child Health Service contract commenced in April 2016 with a new service specification to deliver the Healthy Child Programme in Darlington by Harrogate and District Foundation Trust (HDFT). The emphasis of the service is to focus on outcomes that will be achieved from the delivery of the Healthy Child Programme in Darlington.
15. The contract has been in place for 18 months and key milestones have been achieved. This includes a single point of access and a recognisable brand for the service which reflects the principles of the new service and makes it easily identifiable and accessible for service users and families.
16. Early Help means providing help for children and families as soon as problems start to emerge, or when problems may start to emerge in the future, and is designed to reduce or prevent specific problems from escalating or becoming entrenched. The 0-19 Child health Service Contract supports Early Help through the provision of universal and targeted services. Examples include continence support provided to family by the School Nurse team. This intervenes early to avoid ongoing impacts of bedwetting on the child and family. This avoids poor self-esteem in the child,

minimises the financial impact on the family and identifies any underlying health problems.

17. Key performance indicators and outcomes for families and children have improved including breastfeeding rates, maternal visits and developmental checks. A new core offer has been developed and agreed with local schools and academies in the borough.

Darlington Childhood Healthy Weight Action Plan

18. The Childhood Healthy Weight Action Plan (**Appendix 3**) is a multi-agency plan that is being developed with a range of stakeholders including families and children to both implement the national action plan; 'Childhood Obesity: A Plan for Action' (2016) locally and to identify and co-ordinate local actions to tackle overweight and obesity in childhood.
19. The plan highlights the complexity of the contributory causes of obesity in children, and therefore requires a broad range of stakeholders to achieve objectives and outcomes.
20. Darlington's 2015/16 obesity rates for children in Reception class (aged 4-5 years) and in Year 6 (aged 10-11 years) are above the national average.
21. Recent trend data from the national child measurement programme (NCMP) September 2017 indicates that Darlington is similar to the national pattern. Obesity is stabilising in Reception age (4-5 years) girls and there is a downward trend in obesity in Reception age boys. By Year 6 children (10-11 years) there is a significant upward trend in obesity among both boys and girls. Inequalities continue to widen between the most deprived and least deprived children across both sexes and year groups.
22. The Childhood Healthy Weight Action Plan aims to increase the proportion of Darlington children leaving primary school with a healthy weight by being a health promoting town which creates conditions for having a balanced diet and a physically active lifestyle.
23. It has 3 elements:
 - to transform the environment so that it supports healthy lifestyles
 - to provide information and advice to children and families
 - To support services working to tackle excess weight
24. Work has commenced to identify the contributory factors in Darlington including the impact of the obesogenic environment, access to healthy eating, physical activity and information about options and opportunities.
25. The plan highlights the sugar reduction agenda as an important element in tackling obesity. The latest national evidence on sugar, "Sugar Reduction; The Evidence for Action" (2015) recommends that average population maximum intake of sugar should be halved: it should not exceed 5% of total dietary energy. As well as the

consumption of sugar sweetened drinks should be minimised by both adults and children.

Recommendations

26. It is recommended that Children and Young People’s Scrutiny Committee:

- (a) Note the contents of the report and the activity and actions described.
- (b) Support a continued focus on improving outcomes and reducing health inequalities for children and young people in Darlington.

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Director of Public Health

Background Papers

Sugar Reduction: The Evidence for Action Public Health England (October 2015)
Childhood Obesity: A Plan for Action (August 2016)

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S17 Crime and Disorder	There are no implications arising from this report.
Health and Well Being	The report has recommendations to improve the health and wellbeing of the whole population.
Carbon Impact	There are no implications arising from this report.
Diversity	There are no implications arising from this report.
Wards Affected	All
Groups Affected	All
Budget and Policy Framework	There are no implications arising from this report.
Key Decision	No
Urgent Decision	No
One Darlington: Perfectly Placed	Falls under, ‘More people healthy and independent’, ‘Children with the best start in life’ ‘More people active and involved’ ‘Enough support for people when needed’
Efficiency	There are no implications arising from this report.
Impact on Looked After Children and Care Leavers	These vulnerable groups are in receipt of services and are represented in plans.

