

<b>DECISION-MAKER:</b>	<b>HEALTH AND WELLBEING BOARD</b>
<b>SUBJECT:</b>	<b>CHILDREN AND YOUNG PEOPLE'S STRATEGY</b>
<b>DATE OF DECISION:</b>	<b>2 MARCH 2022</b>
<b>REPORT OF:</b>	<b>CABINET MEMBER FOR HEALTH AND ADULT SOCIAL CARE</b>

<b><u>CONTACT DETAILS</u></b>			
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<b>STATEMENT OF CONFIDENTIALITY</b>	
None	
<b>BRIEF SUMMARY</b>	
<p>This report sets out the key developments undertaken over the last two years to improve outcomes for Children and Young People in Southampton and priorities for improving outcomes moving forward.</p> <p>It invites partners to consider how they can work together to deliver these priorities as a whole system.</p>	
<b>RECOMMENDATIONS:</b>	
	(i) To note progress to date against the Southampton Health and Care Strategy Start Well priorities and the Destination 22 Programme.
	(ii) To note the priorities and key deliverables as set out in the new Children and Young People's Strategy 2022 – 2027.
	(iii) For the Health and Wellbeing Board to hold the Council and its partners to account and support the system change required for delivering the Children and Young People's Strategy – and particularly to consider how partners can take a more collaborative approach and contribute towards a whole system effort to address the challenges identified at Paragraph 11 and as set out in more detail in Paragraph 14.
<b>REASONS FOR REPORT RECOMMENDATIONS</b>	
1.	Southampton City Health and Wellbeing Board has identified the health and wellbeing of children and young people as one of its key priorities and has requested an update on plans and priorities.

2.	<p>Children and young people aged 0-24 make up 36.4% (94,605) of Southampton's population. Improving outcomes for children, young people and their families, and particularly with a focus on the early years, will not only benefit a significant part of the city's population but will also have a beneficial impact for the future of Southampton, as "a City of opportunity where everyone thrives" – supporting each of the 3 key priorities: Economic growth with social responsibility; Skills and employment and Healthier and safer communities. It is known that the health and wellbeing in the first years of a person's life, particularly from conception until 5 years of age, has a significant impact into adolescence and adulthood. Giving every child the best start in life is endorsed as the most important recommendation for reducing health inequalities in the Marmot Review as it can break the links between early disadvantage and poor outcomes later in life.</p>
3.	<p>There is a strong case for improving the health and wellbeing of children and young people in Southampton, who, as an age group, are relatively more disadvantaged than the rest of the population. About 1 in 5 children are in low income families and will experience poor housing, family debt and financial anxiety, and food insecurity. 18% of children live in the most deprived areas of the city, compared to 12% for the overall population. By the age of 3 there are already disparities in cognitive, developmental, social and wellbeing levels between those children living in more deprived areas and others, and this gap continues to widen throughout childhood. Early prevention and intervention are about building protective factors and reducing harm at the earliest stage, so children and young people have the best opportunities to thrive. <i>"The period from pregnancy to age 3 is when children are the most susceptible to environmental influences. Investing in this period is one of the most effective ways to help eliminate extreme poverty and inequality, boost shared prosperity and create the human capital needed for economies to diversity and grow"</i> (UNICEF, World Bank and World Health Organisation, Nurturing Care Framework).</p>
4.	<p>In summary the key challenges for the city in relation to improving outcomes for children and young people are:</p> <ul style="list-style-type: none"> <li>- A high rate of Looked After Children: As of the end of July 2021 there was a total of 511 Looked After Children – a rate of 95 per 10,000 compared to 65 for England as a whole.</li> <li>- High rates of Neglect &amp; Domestic Abuse: Southampton ranked highest among comparators for the rate of cruelty to children offences with 215 cruelty to children offences recorded in 2019/20, which is a 14.4% increase compared to the previous year. 52.2% of Southampton High Risk Domestic Abuse (HRDA) referrals have children and young people in the household (Apr '18 to March '20).</li> <li>- Mental Health: in Southampton it is estimated that 11.7% of 11-19-year olds have a mental health condition, which is becoming more prevalent. Over 1 in 100 15-19-year olds have had a hospital admission for self-harm, nearly twice that of England. Mental health has worsened during the pandemic and there has been a significant peak in Children and Young People seeking mental health support.</li> <li>- Obesity: The proportion of obese children in Southampton increases significantly between reception and year 6. By year 6, 37.6% of children</li> </ul>

	<p>in Southampton are overweight with nearly a quarter obese. This is significantly worse than England but reflects a growing national trend. In terms of physical health, due to the partial closure of schools, early years settings, clubs and activities it is likely that there will be a rise in childhood obesity, particularly amongst more economically deprived children.</p>
<p><b>ALTERNATIVE OPTIONS CONSIDERED AND REJECTED</b></p>	
5.	Not Applicable
<p><b>DETAIL (Including consultation carried out)</b></p>	
	<p><b>Progress to date – Key Developments</b></p>
6.	<p><b>Destination 22:</b> In 2020/21 Children’s Services embarked on an ambitious internal transformation programme: Destination 2022. The overall aim for the programme is to improve the outcomes, opportunities and the life chances of children, young people, and families in Southampton against the following workstreams:</p> <ul style="list-style-type: none"> <li>• Early Help</li> <li>• Young People</li> <li>• Accommodation and Residential Homes</li> <li>• Special Educational Needs and Disabilities (SEND)</li> <li>• Safeguarding</li> <li>• Recruitment and Retention</li> <li>• Outcomes, Infrastructure and Innovation</li> </ul>
7.	<p>Destination 2022 will deliver a number of improvements (to go live from this Spring onwards) to the way that children’s services are delivered locally, including:</p> <ul style="list-style-type: none"> <li>- Additional investment of over £2M, which is being used to recruit additional social workers and other essential workers across the service. In addition, &gt;£400k has been invested in a Workforce Academy, which is driving forward the service’s systemic practice model which is focussed on trauma informed practice.</li> <li>- Changes to the “front door” which will integrate the Multiagency Safeguarding Hub (MASH) and Early Help Hub into a single Children’s Resource Service, taking all referrals into children’s services; and a reconfiguration of social work into localities</li> <li>- A remodelled Early Help service, based in localities, with social care embedded to better respond to need and intervene earlier with more streamlined referral pathways and a stronger focus on evidence based, time limited interventions for families. The service will also be looking to improve engagement and co-ordination with community-based organisations who can support families</li> <li>- A new multidisciplinary Young People’s service, based in localities, with the development of a Young Person’s Hub to increase the timeliness of decision making and work with young people and their families restoratively. The service seeks to reduce duplication and remove</li> </ul>

	<p>service specific referral criteria/ thresholds, reduce duplication and connect with a wider youth offer. Key aims include reducing the numbers of first time entrants into the Youth Justice System and reducing the number of 16 and 17 year olds presenting as homeless as well as enhancing education, employment, and training options for young people.</p> <ul style="list-style-type: none"> <li>- Reducing the number of young people who are placed in residential provision out of the city by scoping and implementing an inhouse children’s home model of short and long term provision</li> <li>- A redesign of services for children with special educational needs and disabilities (SEND) which will see the Jigsaw integrated health and social care service remodelled to provide support into localities, enhancement of the short break offer (particularly for children with neurodiversity), and a strengthened Early Help Offer</li> <li>- Implementation of a Family Safeguarding Model building on an emerging evidence base that shows a range of benefits for organisations that are working with families affected by domestic abuse, parental mental health and/or parental substance and alcohol misuse.</li> </ul>
8.	<p><b>A Child Friendly City</b> – alongside Destination 22, work has continued to make Southampton a Child Friendly City, working towards the goal of accreditation with UNICEF by 2024/25.</p>
9.	<p><b>Start Well</b> – alongside the Destination 22 programme, the Southampton Health and Care Strategy sets out a number of key ambitions for whole system work to improve outcomes for children and their families with a roadmap for the first 3 years (2020 – 2023), some elements of which have already been described above (year of the child, early help, local residential provision):</p> <div style="display: flex; flex-direction: column; gap: 10px;"> <div data-bbox="316 1272 454 1451"> <p>Year 1 2020/21</p> <ul style="list-style-type: none"> <li>• Year of the Child</li> <li>• Early Help locality model</li> <li>• Local foster care offer expanded</li> <li>• Two mental health support teams in schools established</li> <li>• Phoenix specialist family service goes live</li> <li>• Implementation of children’s psychiatric liaison service</li> </ul> </div> <div data-bbox="316 1473 454 1653"> <p>Year 2 2021/22</p> <ul style="list-style-type: none"> <li>• Children’s Hospital at Home service goes live</li> <li>• Expansion of mental health support teams in schools and a whole school approach to mental health and wellbeing</li> <li>• Employment and training opportunities expanded for young people</li> <li>• Perinatal mental health services expanded for women and partners</li> <li>• Development of local residential provision</li> </ul> </div> <div data-bbox="316 1675 454 1854"> <p>Year 3 2022/23</p> <ul style="list-style-type: none"> <li>• 0-25 year service offer in place</li> <li>• Expansion of mental health support teams in schools</li> <li>• Employment and training opportunities further expanded for young people</li> </ul> </div> </div>
10.	<p>Below is a summary of developments which have been progressed over the last two years against the Start Well road map:</p> <ul style="list-style-type: none"> <li>• Improving MH and Wellbeing: <ul style="list-style-type: none"> <li>• <b>Mental Health Support Teams in Schools</b> – the first wave of teams went live in Spring 2021 and a further two teams went live</li> </ul> </li> </ul>

	<p>January 2022, covering 90% of the whole city’s school and college populations. The teams deliver cognitive behavioural therapy (CBT) based interventions to children with low level anxiety and low mood and work with schools to assist in their development of whole school approaches to emotional wellbeing.</p> <ul style="list-style-type: none"> <li>• <b>Children’s Acute Psychiatric Liaison</b> – New service went live in July 2021 to work with A&amp;E and the wards to support young people presenting to hospital with emotional and mental health problems.</li> <li>• <b>Youth Workers in A&amp;E</b> – this pilot with No Limits has proven a successful resource in supporting young people with a range of difficulties including housing, substance misuse, advice and information, diverting them into services available in the community.</li> <li>• <b>NHS 111</b> - Implementation of crisis support for all ages through the NHS 111 Mental Health Offer with Child and Adolescent Mental Health Service (CAMHS) and Adult Mental Health nurses available 24/7 for immediate assessment and support. Pathways into No Limits for support from the voluntary sector have also been developed.</li> <li>• <b>Interagency Early Intervention</b> – there are plans to expand the Building Resilience and Strengths Service from April 22, which is a joint children’s health and social care team focussing on those children and young people with the most complex needs, to work in the new Early Help and Young People’s locality teams (described above) supporting frontline staff with advice, assessment and joint case working. In addition the service will be expanding its community crisis offer (into weekends and evenings) and therapeutic offer for vulnerable young people including looked after children.</li> <li>• <b>Phoenix Service</b> – this service was implemented in September 2020 and funding has been agreed for its continuation. The service supports women who have had multiple infants taken into care with the aim to break the cycle – the service is currently working with 21 women and will be extended to work with a further 24 in 2022/23. A new trauma informed therapeutic support pathway is also being commissioned from Yellow Door to work with women in the Phoenix Service.</li> <li>• <b>Children’s hospital at home</b> – this service is due to start in March 22 and will support families to manage minor child illnesses in the community through combination of telephone support and home visiting, reducing pressure on A&amp;E.</li> </ul>
	<p><b>What Key Challenges Remain</b></p>
<p>11.</p>	<p>Whilst much has been achieved in the last 2 years, a number of outcomes have remained challenging to improve, in particular:</p> <ul style="list-style-type: none"> <li>- <b>Tackling the impact of child poverty and deprivation with a focus on the early years</b> - As highlighted in Paragraph 3, the impact of deprivation is already evident by the age of three between those children living in more deprived areas and others. There is therefore a</li> </ul>

	<p>strong need to focus on those living in the most deprived parts of the city to promote their health and wellbeing, nutrition, safety and security and opportunities for early learning. Those that live in the most deprived quintile of Southampton have poorer outcomes across several areas, including child poverty, breastfeeding, maternal smoking, obesity, educational attainment, disability and proportion of looked after children.</p> <ul style="list-style-type: none"> <li>- <b>Improving preparation for adulthood for vulnerable young people</b> – as evidenced by feedback from local parents/young people about the transition process, rates of young people not in employment, education or training (NEET) and the numbers of care leavers not in suitable accommodation. Currently 54% of Southampton care leavers aged 17/18 year olds are reported to be in suitable accommodation compared to 86% amongst our statistical neighbours and 10.7% of Southampton 16/17 year olds are not in education, employment or training (NEET), which is the 4th highest NEET rate in England (6.8%) and the highest in the South East (7.8%).</li> <li>- <b>Improving children and young people’s emotional and mental wellbeing</b> – as evidenced by increasing referrals to specialist CAMHS (84% higher this year to date compared to the same period pre-Covid levels), high numbers of young people presenting in emotional distress to hospital A&amp;E departments (82% increase in presentations to the psychiatric liaison/self harm pathway over the last 5 months compared to the same period last year) and feedback from local children and young people. Additionally there are gaps in support for infant mental health. Some of the most influential years for children’s developing emotional wellbeing is in infancy and in the under 5s.</li> <li>- <b>Reducing childhood obesity</b> – As evidenced by a particularly large rise in obesity in children in year R last year. In 2020/21 a third of year R were overweight or obese (compared to 28% for England). The level of overweight and obese year 6 children also increased in 2020/21 and is similar to England average with 40% overweight or obese, and a quarter obese.</li> </ul>
	<p><b>The new CYP Strategy – SOUTHAMPTON CHILDREN AND YOUNG PEOPLE’S STRATEGY 2022-2027</b></p>
<p>12.</p>	<p>In April 2022, the Council will be publishing a new Children and Young People’s Strategy, building on the plans already in progress. The strategy will encompass health and care, education and the wider determinants of health and wellbeing and will set out 4 priorities:</p> <p><b>Good start in life:</b></p> <ul style="list-style-type: none"> <li>• Children and young people will have the best start in life, with a particular focus on providing evidence-based prevention and early intervention services and programmes as part of Southampton’s Integrated Early Help &amp; Prevention offer, which support parents and carers to develop positive nurturing relationships with their child and promote the conditions that enable them to thrive. This will include promoting breastfeeding as the first choice of infant feeding, promoting physical activity and healthy eating and speech, language and communication.</li> </ul>

- Vulnerable families are identified early and supported, with a particular focus on those impacted by poverty and deprivation.
- All children are supported to reach their full potential and achieve their aspirations

**Live safely:**

- Services will work together to improve lives and outcomes for all children, young people, and their families
- All children and families get the help they need at the earliest opportunity, within their own communities
- All children and young people, live safely within their homes and families
- Organisations supporting all children and families will work to a common practice framework
- All children and young people will be at the heart of our response
- Young people at risk of harm in the community will receive effective help and protection.

**Be happy and healthy:**

- Improving lives of all children
- Children and young people have positive social, emotional, and mental health
- Ensure education settings are inclusive and promote the wellbeing of pupils and staff
- Children and young people adopt healthy attitudes and habits and enjoy physical activity and healthy eating in everyday life for benefits to their physical and mental health
- Children and young people have a positive, informed approach to risk taking
- Children and young people are able to participate and have a voice
- We will ensure that the transition for YP with specific needs from children to adult health and social care services is seamless and that they do not go without services because they reach a specific age.

**Learn and achieve:**

- Focus on improving educational progress and attainment
- All children and young people experience suitable, high-quality education that meets their individual needs and enables them to achieve their aspirations
- All young people are provided with suitable and high-quality post-16 education, employment, and training
- Work in partnership with education providers to raise standards for all children and young people
- Provide sufficiency of high quality early years and school places.

13.	<p>Underpinning these four priorities, the Strategy will continue to reinforce the following principles which have been core to delivery of Start Well and the Destination 22 programme:</p> <ul style="list-style-type: none"> <li>• <b>Early intervention, prevention and inclusion:</b> investing in prevention, working with schools and communities to identify needs and deliver services as early as possible, to meet needs at the right time, in the right place and in the right way.</li> <li>• <b>Relationship based work:</b> building relationships and making change together with: All children, young people, families and carers; One another (colleagues); Schools and colleges; Partners (health, police, voluntary and cultural sectors) and local communities</li> <li>• <b>Locality working:</b> bringing our services closer to the communities they serve by changing how and where we work.</li> <li>• <b>A skilled and stable workforce:</b> building and developing confident, multi-skilled teams and future leaders through a strong learning and development offer and “high support, high challenge” culture, enabling more consistent relationships with children, families, schools and partners.</li> </ul>
	<p><b>Tackling the key challenges: A Whole System Effort</b></p>
14.	<p>To deliver the Children and Young People’s Strategy and particularly to address the key challenges highlighted in Paragraph 11 will require a whole system effort which will require services, whether they are working with adults or children, in health, education, social care or the community, to work collaboratively. Health and Wellbeing Board partners are particularly asked to consider and promote whole system action in the following four areas:</p> <ol style="list-style-type: none"> <li>1. <b>Tackling the impact of child poverty</b> <ul style="list-style-type: none"> <li>- At a preventative level, what further action could the city take to promote the three prime areas of early child development: personal, social and emotional development; communication and language; and physical development, with a particular focus on those areas of the city impacted by poverty and deprivation?</li> </ul> </li> <li>2. <b>Improving the preparation for adulthood</b>, particularly for young people with neurodiversity and for care leavers, who struggle to engage with education, employment and training and can often find themselves in unsuitable accommodation <ul style="list-style-type: none"> <li>- How might adult and children’s services work together more effectively to support young people prepare for adulthood?</li> <li>- How can partners contribute to increasing employment and training opportunities for vulnerable young people across the city?</li> </ul> </li> <li>3. <b>Improving children and young people’s emotional and mental wellbeing</b> <ul style="list-style-type: none"> <li>- The I Thrive model for whole system action to improve mental health is being rolled out across the city. I Thrive is a trauma-informed, needs led and evidence based approach, which recognises that “mental health” is “everyone’s business” and identifies how organisations can contribute to a continuum of support.</li> </ul> </li> </ol>



	<ul style="list-style-type: none"> <li>- What more can partners do to promote the mental health and emotional wellbeing of children and young people, particularly in the early years?</li> </ul> <p><b>4. Reducing childhood obesity</b></p> <ul style="list-style-type: none"> <li>- How can partners better support whole families to achieve/maintain a healthy weight through activity and eating well and to have the knowledge and skills to enable healthy habits in their babies and young children?</li> </ul>
15.	<p>The HWBB is also asked to note that there are potentially a number of opportunities to secure additional investment from national funding streams which have recently been announced (as part of the 3-year spending review) to deliver the Best Start for Life vision published last year. These include:</p> <ul style="list-style-type: none"> <li>- Start for life - £10million available nationally to develop and publish a Start for Life offer with a further £50million available to improve breastfeeding support. Both these areas would support further development of Southampton's integrated 0-19 early help service offer and link with a range of initiatives within the city aimed at improving health and well-being.</li> <li>- Parent programmes - £50million available nationally for developing and delivering parenting programmes which is a key area we are developing as part of the Destination 22 programme.</li> <li>- Infant and perinatal mental health - £100million available nationally.</li> <li>- Family hubs - £70million available nationally for the development of family hubs. This would enable us to build on integrated working between SCC and NHS Solent as well as increasing co-ordination and engagement with private and voluntary sector providers in the city. This may also support the child friendly city vision.</li> </ul> <p>Further guidance is awaited regarding the bidding process; however Southampton will have a strong case owing to its local needs assessment and its having strong strategies in place.</p> <p>HWBB partners are asked whether they can support the bidding process both in terms of contributions and bid writing/coordination capacity.</p>
<b>RESOURCE IMPLICATIONS</b>	
<b><u>Capital/Revenue</u></b>	
16.	Detailed resource implications are considered as part of the development of business cases for individual services/projects.
<b><u>Property/Other</u></b>	
17.	Whilst not specifically a focus of this report, partners may wish to consider opportunities where collective use of estate can support whole system effort to address the key areas identified above. This could include co-location of teams or co-location of clinics/services.
<b>LEGAL IMPLICATIONS</b>	
<b><u>Statutory power to undertake proposals in the report:</u></b>	

18.	Children's Act 1989 and Children & Young Peoples Plan (England) Regulations 2005
<b><u>Other Legal Implications:</u></b>	
19.	The delivery of the Council's statutory children's services functions is subject to a range of pervasive legislation including but not limited to the Equalities Act 2010, the Human Rights Act 1998, the Crime & Disorder Act 1998 and the Data Protection Act 2018. The Plan and implementation activities are wholly in compliance with the powers and duties set out in these Acts.
<b>RISK MANAGEMENT IMPLICATIONS</b>	
20.	Not applicable
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
21.	The Southampton Health and Care Strategy 2020/2025 Start Well programme and the Children and Young People's Strategy – 2022 – 2026 contribute to achieving the Council's overall priorities of: Economic growth with social responsibility; Skills and employment and Healthier and safer communities as set out in its Southampton City Strategy 2021-2025. They particularly contribute to: Southampton City Council's Health and Wellbeing Strategy 2017 – 2025.

<b>KEY DECISION?</b>	<b>No – Discussion paper</b>
<b>WARDS/COMMUNITIES AFFECTED:</b>	All
<b><u>SUPPORTING DOCUMENTATION</u></b>	
<b>Appendices</b>	
1.	None

**Documents In Members' Rooms**

1.	None
<b>Equality Impact Assessment</b>	
<b>Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.</b>	<b>No – ESIA's are carried out at an individual project level</b>
<b>Data Protection Impact Assessment</b>	
<b>Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.</b>	<b>No</b>
<b>Other Background Documents</b>	

**Other Background documents available for inspection at: None**

<b>Title of Background Paper(s)</b>	<b>Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)</b>
1.	None