To: Thanet Health & Wellbeing Board

From: Esme Chilton, Chair of the Thanet Children's Board

Date: 17 July 2014

Subject: 'Our Children, Our Future' workshop held on 24 June 2014

#### 1. Context

In September 2013 a Children's Summit was held in Thanet when key leaders in children's health, education and social care met to discuss and examine joint ambitions that can make a difference to the health and wellbeing of the children in Thanet.

At the Summit there was a real willingness among leaders to work better together to improve outcomes for children and young people in Thanet. There was a clear consensus that joint governance of all commissioners and alignment of resources was essential, taking mutual responsibility for supporting delivery of all sectors' statutory targets through a joint plan. It was agreed this should happen in one place under the single leadership of a Thanet Children's Board. At the Summit it was also recommended that a follow up workshop be arranged to take this work forward.

## 2. Background

Between 2010-13 local children's services arrangements operated at a district level across Kent and comprised 12 Local Children's Trust Boards (LCTBs), including Thanet. The 12 LCTBs supported the Kent Children and Young People's Joint Commissioning Board (CYPJCB), the strategic commissioning partnership body with the aim of improving outcomes for all children and young people in Kent (now replaced by the Children and Young People's Health & Well Being Board).

After a period of consultation in 2012 on proposals regarding what local children's services arrangement should be in place to support the Kent CYJCB, it became clear there was a need to ensure more effective joint commissioning with the health service and other key partners and promote integrated service delivery. In January 2014 Jenny Whittle, Cabinet Member for Children's Specialist Services took the decision that the best working arrangement at a local level was to operate at a CCG Health & Well Being Board level rather than on a district basis. As a result, the LCTB arrangement has ended and has been replaced by Children's Sub Committees aligned to the Health & Well Being Board boundaries.

In Thanet the Children's Sub Committee is known as the Thanet Children's Board (TCB) and is chaired by Esme Chilton, former Chair of the Thanet LCTB. Board membership is still to be finalised. The Thanet Children's Board will report to the Thanet HWBB and the Children and Young People's Health & Well Being Board (CYPHWBB).

## 3. 'Our Children, Our Future' Workshop

The purpose of this workshop was to build upon the positivity from the Children's Summit, to share views on how a new Board could work in the future, identify key priorities, to look at how resources can be better aligned, to set challenging, high aspiration goals and to explore further how this integrated approach can add value.

#### **Format**

The morning workshop was held on 24 June at Global Generation's venue in Margate, led by Esme Chilton and facilitated by Andrea Higginbottom from the Universal Improvement Company who had been commissioned by KMCS to assist with the event.

The workshop comprised 17 people from all the key agencies in Thanet. It began with a 'scene setting' from the TCB Chair and briefings from Public Health, the CCG, Education and Specialist Children's Services, to understand better what each other does.

## Feedback from the morning

Delegates were asked to give their views on the Board's role and remit and what key pieces of work they felt were required this year. They were also tasked to look at the five health priorities, taken from Andrew Scott Clark's 'Aspirations for CYP in Thanet' to discover what is and what is not working cross agency and to think more imaginatively about future approaches and possible solutions.

#### Purpose of the Thanet Children's Board

- to be responsible for developing a Thanet specific plan to improve CYP services
- to determine targets for CYP in Thanet and agree a joint focus
- to ensure its plan is communicated to all partners and delivered jointly by service providers
- act as a catalyst for accessible, life changing programmes for CYP in Thanet
- to provide a conduit for information and data sharing
- to report back findings to Thanet HWBB and the Children and Young People's HWBB.
- to improve health and well-being outcomes for CYP in Thanet

## Key pieces of work required during the Board's first year

- real time mapping of what is happening to spot trends and evidence change
- support the Thanet Teenage Pregnancy Local Implementation Group/Alcohol Local Implementation Group
- support the opening of a termination clinic in the local area
- develop one new initiative for CYP in Thanet

#### <u>HWBB Target - Reduce smoking prevalence of smoking mothers</u>

- working education giving facts around smoking, minimum pricing, national programme to make smoking antisocial, Baby Clear, Stop Smoking Services, training staff on smoking cessation
- not working information sharing, effective, timely data
- work required train all staff in Smoking Cessation Level 1, GP and Midwife advice, integrated campaign and greater community insight, e.g. SILK, tobacco control using legal powers by Trading Standards
- wish list 'Truth' campaigns in schools, one stop shop for the whole family 'learn plus behaviour', direct support to pregnant women and new mums in CCs, free training.

### HWBB Target - Increase the prevalence of breast feeding

- working midwives' support in CCs, CC courses, GP support, breast feeding peer support volunteers, NCT breast feeding services, Family Nurse Partnership
- not working tackling inequalities, hard to reach women, 'nudge rather than stick'
- work required better training re infant feeding, education through PH campaigns, normalise breast feeding, educate young men and fathers
- wish list more peer support in both hospital and community, universal core service
  that contacts every pregnant woman and 'breastfeeding is welcome here' and 'its
  normal to use a pump' campaigns

### HWBB Target- Reducing alcohol specific stays in hospital for the under 18s

- working intervention (KCA), turing point at QEQM, Healthy Schools initiatives and education re alcohol in schools, voluntary and third sector community interventions e.g. Street Pastor Scheme, HOUSE campaign, licencing review for underage sales
- not working some community interventions need reviewing
- work required increase use of mentors, coaches and others who activity engage young people to tackle the issues causing them to drink, focus on sport and music, increase in harm-reduction schemes, relevant educating by people who have 'been there'
- wish list licensing strengthened, ABI scratch cards, more positive role models both outside and within the family and long term confidence gained through aspirational educational programmes with better access to schools.

## <u>HWBB Target- Reduction in the teenage conception rates</u>

- working relationship education (also reduces domestic abuse), teenage pregnancy
  case loading midwives to reduce second pregnancies, sexual health app, teenage
  conception group
- not working unsure of the effectiveness of sex education and the school nurse
- work required C Cards in as many places as possible, good advice at accessible local preventative walk-in services, develop safe spaces for YP to talk about sex and

- relationships and a better understanding of why the conception rate is so high locally.
- wish list campaigns, myth busting, develop long term education programmes that celebrate YP skills and interests beyond academic success with workshops in schools and colleges that engage and shock, life coaching, sexual health workers in every YP venue.

## HWBB Target- Delivering the universal child health promotion programme to all Thanet children

- current problems poor access to schools, poor immunisation and vaccination uptake, with non-engagement of some families, engaging with ethnic minorities and those most in need, reducing inequalities.
- work required need to deliver services in places where families attend, targeted immunisation programme, improved GP access, PSHE delivered in schools for students and families, more physical activity and focus on adolescents in different settings
- wish list expand services out of pharmacies, increased use of educational facilities, CCs, schools, universal language support in GP practices and provision of correct support for minorities, extend Public Health England campaign about child health.

#### <u>Safeguarding</u>

It was felt that for the TCB to work effectively, it will need to address key Safeguarding priorities and support Early Help interventions addressing specific issues around domestic abuse, children in care, and child sexual exploitation. This could be achieved through the Board's integrated plan and the joining up of services, for example working more closely with the Thanet Community Safety Partnership, and better information and data sharing between agencies, better referral paths as well as better communication with and between schools in Thanet. It will also need to establish good links with the Kent Children's Safeguarding Board.

Children's Centres were also seen as key to this work, using them as service provision hubs from which agencies could work in a more integrated way to develop physical, mental and emotional health and resilience.

# 4. Actions going forward

- Identify and invite key people from Health, Education and Social Care in Thanet (including VCS) to join the TCB and set meeting dates for the next year
- Mapping exercise of agencies/key strategic groups and their roles/remit
- Establish clear two way communication channels with all agencies involved in the provision of CYP services in Thanet
- Identify sub groups, for example Safeguarding, where issues of mutual concern, emerging challenges and new areas of work can be explored and need identified at a very local level, and invite project leaders to take these key pieces of work forward
- Identify resources available to the TCB to support delivery of key pieces of work.