

<b>Title of paper:</b>	0 to 5 years Area Profiles at Children's Centre Geography areas	
<b>Report to:</b>	Councillor Mellen / Children and Young Peoples Partnership	
<b>Date:</b>	June 2015	
<b>Relevant Director:</b>	DPH (Interim) Alison Challenger	<b>Wards affected:</b> all
<b>Contact Officer(s) and contact details:</b>	Lynne McNiven, Consultant in Public Health	
<b>Other officers who have provided input:</b>	Sarah Diggle Dale Burton Sarah Quilty	

#### Relevant Children and Young People's Plan (CYPP) priority or priorities:

<b>Safeguarding and supporting children and families:</b> Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties and provide a safe environment in which to thrive.	X
<b>Promoting the health and wellbeing of babies, children and young people:</b> From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.	X
<b>Supporting achievement and academic attainment:</b> All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for independence, work or further learning.	X
<b>Empowering families to be strong and achieve economic wellbeing:</b> More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.	X

#### Summary of issues (including benefits to customers/service users):

- The health and well-being of children in Nottingham is generally worse than the England average for both 0-4 and 5-19 year olds.
- More than a third of Nottingham's children are living in poverty. Children are particularly susceptible to economic and social deprivation resulting in unfair inequalities in health that contribute to generational cycles of deprivation.
- These inequalities mean delayed early development, lower educational achievement, lower aspirations and mental well-being and poorer health outcomes for many of the City's children which continue into adulthood.
- Focusing on prevention and early intervention has a vital role to play in improving child health outcomes and breaking the cycle of health inequalities within families.
- As part of the changes introduced through the Health and Social Care Act 2012, from April 2013 responsibilities for the commissioning of child public health services (age 5-19 years) transferred from the NHS to Local Authorities, offering a valuable opportunity to improve health outcomes and address health inequalities for children in Nottingham.
- The local authority will become responsible for commissioning public health services for 0-5

year olds from October 2015. This will provide further opportunities to ensure a coordinated pathway of evidenced based preventative health care for all children from birth, all the way through their crucial developmental during preschool and school years.

Improving health and reducing health inequalities in Nottingham can be challenging. The development of health, social and educational outcomes profiles for each Children's Centre area allows everyone involved in the improvement of children's outcomes to have access to a concise, evidence based document which gives them the information they need. The profiles therefore make an important contribution to OFSTED requirements for Children's Centre's to understand the needs of families within their area.

Access to up to date population information is crucial when commissioning and delivering services such as Public Health Nursing in Schools, Health Visiting, Family Nurse Partnership, Children's Centre services, etc.

The 0-5 Years Area Profiles for 2015 for each of the seven Children's Centre Areas are all completed as well as a summary documents which summarises data across all seven areas. The profiles have been uploaded to Nottingham Insight. The profiles can be found here:

<http://www.nottinghaminsight.org.uk/f/123196/Library/Public-Health/0-5-Years-Area-Profiles-2014-15/>

#### **Recommendations:**

<b>1</b>	Children and Young People's Partnership to examine the detail of the reports for individual Children Centre areas and utilise the content.
<b>2</b>	Children and Young People's Partnership to examine the detail of the reports for individual Children Centre areas and comment on the content.
<b>3</b>	Support the approach towards prevention and early intervention and the role it has to play in improving child health outcomes, breaking the cycle of health inequalities in Nottingham City and suggest ways of encouraging all agencies to utilise the evidence within the 0 to 5 years profiles and work together to offer children and young people in Nottingham City the best start in life and realise their full potential. This begins before birth and continues through the early years of life and throughout school years.

## **1. BACKGROUND AND PROPOSALS**

### **(Explanatory detail and background to the recommendations)**

Nottingham City is an 'Early Intervention City' and as such we already recognise that improving the health and social outcomes of our children and young people is not only emotionally driven, it makes economic sense too. The future prosperity of the City is undoubtedly intertwined with a healthy population which will have the ability to achieve their optimum potential throughout their life course. The interdependencies between health and social outcomes are inseparable and these cannot be altered in isolation. This is reflected in the very comprehensive drive forward between agencies to achieve a fully coordinated approach to systematically reduce health and social inequalities across the City.

The best possible health underpins a child's or young person's ability to flourish, stay safe and achieve as they grow up; and lifestyles and habits established during childhood, influence a

person's health throughout their life. The need to ensure all children within Nottingham get the support they need to obtain the best start in life is clear.

As a Nottingham 'Early Intervention Community' we must make sure we use the various health and social indicators available to highlight areas where we could improve performance and be confident that we are working together to guarantee sustainable gains in health and social outcomes for children and young people.

Reducing Health inequalities and improving health, social and educational outcomes for children is not easily achieved. The evidence clearly shows that any one agency on its own will not have sufficient impact to guarantee a reduction in the gap currently observed between populations. Actions need to be executed in partnership with all agencies involved in the wider causes and outcomes of child health inequalities.

To achieve sustainable change requires a high level strategic understanding of the current outcome data which allows a coordinated approach. Public Health will continue to support services and strategies by providing high quality data analysis and interpretation which will support a wide range of partner agencies to direct their services and make certain the reduction in child health inequalities remains high on everyone's agenda.

The 0-5 Years Area Profiles for 2015 are all completed and have been uploaded to Nottingham Insight. The profiles can be found here:

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## **2. RISKS**

**(Risk to the CYPP, risk involved in undertaking the activity and risk involved in not undertaking the activity)**

None

## **3. FINANCIAL IMPLICATIONS**

None

## **4. LEGAL IMPLICATIONS**

None

## **5. CLIENT GROUP**

**(Groups of children, young people or carers who are being discussed in the report)**

All colleagues interested in understanding the interdependencies between health and social outcomes and the impact of the wider determinants on health inequalities.

## **6. IMPACT ON EQUALITIES ISSUES**

**(A brief description on how many minority groups are being engaged in the proposal and how their needs are being met: This section includes traveller and refugee families. The themes of the Shadow Boards – children and young people; parents and carers; equalities issues and the voluntary and community sector should be considered here.**

Consulted on widely with colleagues and partners

## **7. OUTCOMES AND PRIORITIES AFFECTED**

**(Briefly state which of the CYPP priorities will be addressed)**

This detailed information will support all areas of the Children and Young People's Plan

## **8. CONTACT DETAILS**

Lynne McNiven  
Consultant in Public Health

[Lynne.McNiven@nottinghamcity.gov.uk](mailto:Lynne.McNiven@nottinghamcity.gov.uk)

Mobile Number: 07950260419

Direct Line: 0115 876 5429