

Education, Children and Families Committee

10am, Tuesday, 5 March 2013

Children and Young People's Health and Wellbeing

Item number	8.2
Report number	
Wards	All

Links

Coalition pledges	P1 , P5
Council outcomes	CO4
Single Outcome Agreement	SO3

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Executive summary

Children and Young People's Health and Wellbeing

Summary

Good progress is being made towards achieving the commitments within the Integrated Plan for Children and Young People and the Children and Families Service Plan that our children and young people are physically and emotionally healthy. The priorities for action focus on sexual health, substance misuse, emotional health and wellbeing and child healthy weight.

Recommendations

The Committee is recommended to:

1. note the work to date to address the priority actions;
2. note the Plan to address areas for improvement.

Measures of success

Overall progress is measured using a suite of indicators within the Integrated Plan for Children and Young People and the Children and Families Service Plan to ensure that our children and young people are physically and emotionally healthy. All have challenging targets and progress is regularly monitored and reported through Senior Management Team and Committee as well as to the Children's Partnership.

Several areas of work within this area were selected as examples of good practice during the recent Joint Inspection of Children's Services in Edinburgh.

Financial impact

All work identified in this area is delivered within existing budgets.

Equalities impact

All work within this area seeks to address inequalities both in terms of provision of resources and impact on outcomes for children and young people. There are no negative impacts arising from this work.

Sustainability impact

There are no adverse economic, social or environmental impacts resulting from these areas of activity.

Consultation and engagement

All areas of work highlighted in the report include significant elements of consultation and engagement with children and young people and with wider groups of stakeholders, appropriate to the content of the work.

Background reading / external references

None

Children and Young People's Health and Wellbeing

1. Background

- 1.1 The work taken forward under this heading contributes to the Strategic Outcome: Our children and young people are physically and emotionally healthy.
- 1.2 The objectives of the work are to develop effective policies, sustainable programmes and flexible resources which support the delivery of health improvement services for children, young people and families in schools, establishments and community settings.
- 1.3 The specific priority actions are designed to improve children and young people's health outcomes in the following key areas: emotional and mental health, sexual health, child healthy weight and drugs and alcohol misuse.

2. Main report

- 2.1 **Mental Health & Emotional Wellbeing:** 65 schools and early years settings have engaged with Growing Confidence: 68 schools engaged with the pupil well-being questionnaire with responses from over 11,600 P3-P7 pupils this year: 202 vulnerable pupils benefited from attending Seasons For Growth groups this year: 469 staff (including Head Teachers) have been trained in Confident Staff, Confident Children this year: 408 parents/carers have benefited from Raising Children with Confidence, of these a quarter came from positive action areas. 95% of parents/carers found the course valuable, 91% said that it had a positive impact on their relationship with their children and 47.5% said they had observed positive changes in their children directly attributable to their attendance at the course. The results of the survey have shown 77% of primary children saying they can usually work out a way to deal with a problem (up from 72%) and 88% saying they ask for help when they need it (up from 86%). Growing Confidence has now been fully mainstreamed and is developing work into the secondary sector as well as building on the previous work within early years and primary settings. This whole area of work was held up as an example of good practice in the recent inspection process
- 2.2 **Sexual Health and Wellbeing:** the multi-agency five year vision for sexual health in Lothian (2011 – 2016) includes: that there are fewer unintended pregnancies; and that people make confident and competent decisions about sex. Sexual Health Seminars continue to be delivered to S5 pupils and the

inspection process highlighted this as an example of good practice in our secondary schools. Feedback from 1,002 pupils last year gave the seminar an overall acceptable score of 89% (up from 85% the year previous). 93% totally or mostly agreed the seminar helped them understand how to protect themselves and their partners from sexual risks: 92% of pupils totally or mostly agreed that the seminar made them feel more confident at being able to have a healthy sex life at a time that was appropriate: 95% of pupils totally or mostly agreed that they would recommend the seminar to other schools and the same amount also agreed that it was a valuable addition to their schools sexual health programme.

A Risk Taking Behaviours Programme has been developed to evolve this seminar into a programme for S4 pupils that looks at sex, drugs and alcohol in a more integrated manner. This programme will be tested in 2 high schools and modified accordingly. This will help us take forward an approach which is becoming more prevalent across Lothian and nationally and the work within City of Edinburgh will feed into a national approach to Risk Taking Behaviours which is being coordinated by Health Scotland.

The latest data available for teenage pregnancy rates are from 2008-10 and the table below shows that in Edinburgh the overall rates (for young women aged under 20) continue to decline and demonstrate better than national average performance. However, the rate for under 16s is higher than the national average and work to address this will continue to be a priority for the coming year.

Teenage pregnancy rates (expressed as per thousand and averaged over 3 years)						
	Aged <16		Aged <18		Aged <20	
	2007/09	2008/10	2007/09	2008/10	2007/09	2008/10
Edinburgh	8.1	8.3	41.3	37.8	46.8	42.6
Scotland	7.6	7.4	39.9	37.9	52.9	50.2

2.3 **Substance Use (tobacco, alcohol and drugs):** the substance misuse statistics from the Scottish Schools Adolescent Lifestyle and Substance Use Survey (2010) show general improvement, mirroring national statistics.

- The percentage of young people in Edinburgh drinking once a week or more has reduced from 32% in 2006 to 18% in 2010
- The percentage of young people in Edinburgh who are regular smokers reduced from 14% in 2006 to 13% in 2010

- The percentage of young people in Edinburgh who have used or taken drugs in the previous month reduced from 15% in 2006 to 11% in 2010.

The development of a Service Specification and care pathways for a Young People's Substance Misuse Service will be complete in February 2013 with service development to take place from April 2013. Key stakeholders / service providers have been integral to the development process and this will meet an identified gap in service provision currently.

A needs assessment of services for children and families affected by parental substance misuse was completed in December 2012. Agencies involved in the process included NHS Lothian (midwifery, adult treatment, Public Health, Child and Adolescent Mental Health Services, school nursing), City of Edinburgh Council (Children & Families Social Work, Residential Care, Youth Offending, early years), and voluntary sector (support services for Children Affected by Parental Substance Misuse (CAPSM), young carers, befriending). The recommendations from the report include implications for service development and workforce development and the implementation of these will be taken forward in partnership by the Children, Young People & Families Sub-Group of Edinburgh Alcohol and Drug Partnership whose priorities include 'The impact of parental alcohol and drug use on children and young people is reduced'.

A Children and Families worker is currently located for one session a week in the South East Recovery Hub in Edinburgh with a view to improving co-ordination of adult treatment services with those working with CAPSM to increase early intervention. Early indications are positive with a growing number of referrals in the first months of operation. Only one of the families referred to date had existing social work involvement demonstrating that these are appropriate and timely referrals.

63 Children & Families staff, Police and voluntary sector youth workers have benefited from Alcohol Brief Interventions training.

Strong partnership working evidenced particularly through the Children, young people and families Sub Group and Commissioning Group of the Edinburgh Alcohol and Drug Partnership. Funding allocated to priority areas of work as a result (eg Long Acting Reversible Contraception in South Edinburgh, staffing within Throughcare and After Care team and upskilling the early years workforce in respect of alcohol and drug issues).

- 2.4 **Child Healthy Weight** Edinburgh's partnership approach to child healthy weight extends across physical health (healthy eating and physical activity) and emotional health and wellbeing. The revised 2011 child healthy weight HEAT target required that 2,268 overweight and obese children in Lothian, at or above the 91st body mass index centile, underwent an intervention over three years. Edinburgh's response addresses prevention at a population level as well as providing treatment (Get Going weight management programme) for higher risk

children and their families. The obesity rate at P1 in Edinburgh is generally improving with the latest figure (2010/11) of 9.4% - representing approximately 356 children - below the national average of 10.1% for the first time. Work in this area was one of the illustrations of good practice highlighted in the recent Joint Inspection of Children's Services with particular emphasis placed on strong partnership working and the engagement of children, young people and families in the programmes.

Extensive consultation resulted in Primary school work (P1-7, whole school approach), secondary school programmes (S3 girls) and community-based programmes with parents/ carers including child development sessions. The evaluation of the most established primary school programme was positive with a measurable impact in intervention schools vs control schools in knowledge and attitudes for healthy eating and physical activity. We continue to recruit schools into this programme.

2.5 Health Promoting Units The Children and Families Service Plan also has a target that all residential care units will be accredited at Tier 2 of a 3 Tier model of health promotion by March 2015. There is a multi agency steering group which oversees this accreditation process which is defined in clear guidance for all units. 75 % of units are expected to submit at Tier 2 by March 2013: the units still to achieve a Tier 1 award are expected to do so by this same date and to begin working on Tier 2.

2.6 Future Actions In addition to consolidating these areas of work, future plans include:

- To work collaboratively with colleagues within CEC and NHS Lothian to produce a guide for schools on promoting positive mental health and signposting to resources and services as required. Test in minimum 2 high schools
- Test Risk taking Behaviours Seminars and evaluate impact and levels of engagement and satisfaction: modify programme accordingly for citywide roll-out
- Development of effective ways of gathering Edinburgh data on substance use and misuse, sexual health and risk taking behaviours through pupil surveys
- Increase efforts to prevent pregnancies in under 18s and address inequalities in sexual health which currently exist in most deprived areas as against most affluent (7.9 times higher in under 16s, 6.9 times higher for under 18s).

3. Recommendations

The Committee is recommended to:

3.1 note the work to date to address the priority actions

3.2 note the Plan to address areas for improvement.

Gillian Tee

Director of Children and Families

Links

Coalition pledges	P1. Increase support for vulnerable children, including help for families so that fewer go into care P5. Seek to ensure the smooth introduction of the Curriculum for Excellence and that management structures within our schools support the new curriculum
Council outcomes	CO4. Our children and young people are physically and emotionally healthy
Single Outcome Agreement	SO3. Edinburgh's children and young people enjoy their childhood and fulfil their potential
Appendices	None