

**Manchester Health and Wellbeing Board
Report for Resolution**

Report to: Manchester Health and Wellbeing Board – 9 March 2016

Subject: Joint Strategic Needs Assessment for Children and Young people

Report of: Director of Children’s Services
Director of Public Health

Summary

Overseeing the production of the Joint Strategic Needs Assessment (JSNA) is one of the statutory responsibilities of the Health and Wellbeing Board. A report on the development of the Children and Young People’s JSNA was presented to the Manchester Health and Wellbeing Board in November 2015. This is a progress report on the JSNA for Children and Young People in Manchester.

Recommendations

The Board is asked to:

- i) Note the report
- ii) Sign off the development of the JSNA for Children and Young People as a completed action

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	Giving every child the best start is crucial to reducing health inequalities across the life course. What happens before and during pregnancy, in the early years and childhood has lifelong effects on many aspects of health and wellbeing in adulthood from obesity, heart disease, mental health, educational achievement and economic status. The work described in this report contributes to improving the health and wellbeing of children and young people and getting them off to the best start.
Educating, informing and involving the community in improving their own health and wellbeing	Public health work with children and their families involves working with them to improve their knowledge and

	understanding of health issues and access interventions as early as possible when required.
Moving more health provision into the community	Many children's health services are community based. For example, School Health Services working in schools and health visiting services working in community clinics or with outreach workers in children's centres.
Providing the best treatment we can to people in the right place at the right time	Children's health services are well placed to identify need and offer Early Help and interventions to prevent problems from escalating.
Turning round the lives of troubled families	Children's health services contribute to work with troubled families, offering support and interventions for children and their families.
Improving people's mental health and wellbeing	Various services described in this report contribute to improving the emotional health and wellbeing of mothers,
Bringing people into employment and leading productive lives	As well as mainstream education provision for children and young people a number of services support work with mothers to look at their education and training and employment needs
Enabling older people to keep well and live independently in their community	

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

The JSNA for Children and Young People can be accessed through the JSNA website at http://www.manchester.gov.uk/info/500230/joint_strategic_needs_assessment/6797/children_and_young_peoples_jsna".

The in-depth reports section of the website also contains more up-to-date and detailed topic information relevant to Children and Young People.

1. Introduction

- 1.1 The Children and Young People's Joint Strategic Needs Assessment (JSNA) has been updated to improve the health outcomes of children and young people in Manchester. The JSNA requires a multi-agency approach to the collation, analysis, presentation and publication of data, research and intelligence relating to the health and wellbeing of children, young people and families across the city. The development of the Children and Young People's JSNA serves as a springboard for the development of JSNAs for other parts of the life course, including adults and older people.
- 1.2 Having an effective JSNA for children and young people is also one of the key criteria used by OFSTED to judge the standard of local authority children's services and those service provided in partnership with others, such as the NHS and police. The City Council and partners must demonstrate that their decisions have been informed using detailed and relevant knowledge about local communities and specific groups, including looked after children and care leavers, contained in the JSNA. In addition, the refreshed JSNA also supports the work of third sector organisations, for example, by informing funding applications to other bodies.
- 1.3 The JSNA is the vehicle for developing insight from service users, removing barriers to delivery and reducing duplication across partners. It is a 'living' resource that will be continually expanded and refreshed over time through consultation with key stakeholders and will incorporate the views of children and young people as standard good practice.
- 1.4 One of the priorities is to ensure that people working within the city are aware of the updated JSNA and know how to use it to inform their work to improve the health and wellbeing of children and young people. The JSNA will ensure that local strategies for addressing poor health and care outcomes in Manchester are underpinned by a strong evidence base in terms of the range and effectiveness of services to support children, young people and families.
- 1.5 The refreshed version of the JSNA can be accessed through the Manchester City Council website at www.manchester.gov.uk/jsna. Each section and topic area has been through a quality assurance process by a small team reporting to the Director of Children's Services and Director of Public Health before being uploaded onto the website.

2. JSNA Topic areas

- 2.1 The multi-agency approach adopted in the JSNA will mean that each topic will vary in terms of its content and methodological approach. The first cut of all of the sections and topic areas have now been completed. These provide the basis for engaging with key stakeholders over the coming months. It is evident that some of the topic areas will be able to include the views of children and young people and their families through the good user involvement mechanisms that already exist. However, it is acknowledged that for other areas more time will be required to ensure appropriate involvement.

- 2.2 The structure list of topics for inclusion in the JSNA for Children and Young People is provided in the table below. These have been agreed in discussion with partners and the collation of material has been coordinated by the Manchester Public Health Team, drawing on the expertise of a wide range of individuals, agencies and groups in the City.

Table One: Structure and Topics in the JSNA for Children and Young People

Setting the Scene – Local Context	Demographics - number of children in Manchester, ethnicity, why we need to focus on children and young people’s health and wellbeing
Wider Determinants of Health	Child and Family Poverty, Education (including school readiness, attendance, attainment, children missing from education), Housing and homelessness, Deprivation
Pre-conception and Pregnancy	Smoking in pregnancy, Smoking at time of delivery, Antenatal care
Infancy and Early Years	Perinatal and infant mortality, Low birth weight, Breastfeeding, Communication – speech and language therapy
Childhood	Oral health – tooth decay, Childhood Obesity
Adolescence	Under 18 conceptions, Young people’s sexual health (sexual transmitted infections, Chlamydia screening etc), Smoking, alcohol and drug use, 16-18 year olds not in education, employment or training (NEET), Physical activity and fitness, Healthy eating and weight (including positive self image), Safety - from sexual exploitation, domestic and interpersonal violence, accidents and psychological safety
Mental Health & Emotional Health and Wellbeing	Impact of parental mental ill health, Emotional resilience, Self harm and suicide
Accidental injuries	Types of injuries, prevention of accidental injuries
Immunisation programmes	Childhood primary immunisation programmes, Rotavirus immunisation, Hepatitis B vaccination, Measles, mumps and rubella (MMR) vaccination, Vaccination against cervical cancer (HPV)
Safeguarding	Referrals to Children’s Social Care, Assessments in Children’s Social Care, Children in need, Child protection, Neglect, Child Sexual Exploitation, Emergency admissions to hospital, Deaths in childhood/vulnerable babies, Female Genital

	Mutilation, Domestic Abuse
Key Groups	Looked After Children and Young People, Care Leavers, Children with special educational needs and disabilities, Children with long term conditions (asthma, diabetes, epilepsy), Refugee and asylum seekers (including unaccompanied children), Children and young people experiencing domestic violence and abuse, Children of prisoners, Young LGBT people, Young Carers, Families at risk (Confident and Achieving Work), Teenage Parents, Young Offenders (including young people in custody)

2.3 To date, 26 separate chapters have been published on the JSNA website covering a wide range of topics relevant to children and young people (and their families) from pre-conception and pregnancy through to infancy and early years and adolescence, as well as on specific issues, such as mental health and emotional health and wellbeing, early help, safeguarding and Looked After Children. The refreshed version of the JSNA for Children and Young People JSNA was approved at the Children's Board in January 2015 and presented to the Young People and Children Scrutiny Committee on 23 February 2016. The comments from the Committee on specific topic areas and suggestions for further analysis of data (e.g. childhood accidents) will be followed up.

3. Next Steps

3.1 The development of a refreshed JSNA for children and young people provides an opportunity to strengthen communication and engagement surrounding the JSNA as a whole. This will ensure that commissioners are not only more aware of the JSNA but also better able to use and contribute to it. Training and other support materials for commissioners and for use by the wider user community will be developed in order to increase people's understanding and encourage the better use of information in the JSNA. There will be a mix of approaches to this, including knowledge and intelligence, sharing through workshops, as well as written communication with partners. Initial discussions have been held with MACC and we will be exploring their role in the JSNA process in 2016/17. We plan to develop an action plan for the rollout of JSNA to cover other age groups over the next year.