



department for
children, schools and families



*Department
of Health*

Healthy lives, brighter futures

The strategy for children and young people's health

EXECUTIVE SUMMARY



A commitment from
The Children's Plan





EXECUTIVE SUMMARY

- 1 Children and young people are healthier today than they have ever been. Medical, technological, social and economic advances have radically cut infant mortality rates and given many children and young people a healthier start to life than they could ever have enjoyed before. There is more support for parents, children and young people in promoting health and wellbeing and in meeting additional health needs. There are: thousands more professionals with specialist skills working with children; new Sure Start Children's Centres providing integrated services; reduced waiting times for access to healthcare; and new sources of information and advice. There is also a greater focus on health and wellbeing in our schools and colleges, and more choice over how to access healthcare.
- 2 To deliver our 2020 ambition of making England the best place for children to grow up, we need to support families in securing world-class health and wellbeing outcomes for their children. This means continuously driving up the quality of our services for all parents and children, and ensuring that those improvements are reflected in the experience of services for children, young people and their families. At the same time it means doing more for the most vulnerable, to reduce the persisting inequalities in health and wellbeing outcomes for different groups. Better support in the early years and through childhood and adolescence will lay the foundation for better health and life chances into adulthood, so this strategy sets out how we will build on progress through the achievement of:
 - world-class health outcomes
 - services of the highest quality
 - excellent experiences in using services
 - minimising health inequalities.
- 3 Parents are the key to achieving the best physical and mental health and wellbeing outcomes for their children. This strategy sets out the principles of the relationship between parents and services, and will establish what parents and their children can expect from their services. These principles are that:
 - Mothers and fathers are provided with the information they need to help their children lead healthy lives, with local areas setting out what parents will be able to receive in their communities.
 - Public sector settings provide healthy environments and encourage children and young people to make healthy choices.
 - The right services are in place to meet the specific health needs and expectations of children and their families.
 - Extra support is provided for those from the most disadvantaged backgrounds.
- 4 These ambitions underpin the policy recommendations that follow – recommendations that seek to cement, not replace, the standards and ambitions set through the *National Service Framework for Children, Young People and Maternity Services* (see Annex A) and the *Every Child Matters* programme for improving outcomes for children. And they build on the consistent approaches of the *NHS Next Stage Review* and *The Children's Plan*, details of which are set out in Chapter 2. The policies that follow will help to ensure that our existing ambitions for children, young people and families are realised and that improvement continues.

5 This strategy sets out the plans for universal, targeted and specialist support across three life stages – early years and pregnancy; school-age children; and young people – as well as the additional support for children and young people in need of acute or ongoing healthcare. It also sets out how the delivery system can be supported in taking forward the recommendations – in particular, how the range of services in contact with children and young people can work better together, and with families, to achieve common aims. In accordance with our commitment to implementing the United Nations Convention on the Rights of the Child, this strategy is underpinned by the general principles and basic health and welfare articles of the convention.¹

Pregnancy and the early years

6 During pregnancy and the early years of their children's lives, parents have access to a wide range of services in support of their children's health, from midwives to childcare practitioners. But the extensive consultation with parents, children and young people undertaken to develop this strategy has demonstrated that we can do more to provide further support for parents and their children at this time.

7 One of the key principles underpinning this strategy is to ensure that parents get the information they need to support their children's health. **Local areas will be expected to set out what children and families can expect from their health services locally** – to help them to access the support they need, when they need it, from pregnancy through to services aimed at young people up to the age of 19.

8 To ensure that the right services are in place to meet the needs and expectations of children and their families, additional improvements will be made to antenatal and early years services. In doing so, the focus will be on ensuring that the right services, support and advice are available for all parents, and that more intensive support is given to the most vulnerable. The improvements include:

- **Further development of the health visitor workforce** to deliver the Healthy Child Programme.
- **The development of a new Antenatal and Preparation for Parenthood programme** that, following successful testing, will help engage parents, including those from more disadvantaged backgrounds.
- **The expansion of the successful Family Nurse Partnership Programme**, which provides intensive support from highly trained nurses for the most vulnerable first-time mothers. It will be expanded from 30 to 70 sites by 2011, with a view to rolling out this support for the most vulnerable first-time young mothers across England over the next decade.
- **A strengthened role for Sure Start Children's Centres** – both through additional health-based programmes, focusing on reducing obesity and smoking, and by ensuring that each centre has access to a named health visitor.

¹ www.unicef.org/crc/

School-age children

- 9 As children grow up they become increasingly aware of health-related matters and can be expected to take on additional responsibility for their own health and wellbeing. Schools and school health services, GP practices, paediatricians, children's services (including behaviour support and social care services), child and adolescent mental health services and others play a hugely important role in supporting children and families to lead healthy lives. Health and wellbeing is central to the concept of the 21st Century School.
- 10 To support local areas:
- **An improved Healthy Child Programme for school-age children will be developed**, which will set out what services should be available to all parents in all areas.
 - The role of schools in promoting pupils' health will also be supported through **strengthening the National Healthy Schools Programme**.
 - **The creation of a world-class system of PE and sport, offering 5- to 16-year-olds 5 hours a week** – a significant contribution to the exercise they should undertake – and giving them high quality sports in the run-up to, and after, the London 2012 Olympics.
 - **Pilots will be established to build the evidence base on the impact of extending free school meal criteria to a greater number of pupils** (including, in some areas, by putting in place free school meals for all primary pupils).
 - We will **improve the quality and consistency of Personal, Social, Health and Economic (PSHE) education and intend to make it statutory within the curriculum**.

Young people

- 11 Adolescence is not only a key transition point between childhood and adulthood, it is a distinct developmental stage in its own right, characterised by dramatic physical and neurological changes, and emotional development.
- 12 This strategy sets out a number of proposals to help ensure that young people are given access to healthier opportunities:
- The PE and Sport Strategy for Young People includes a **commitment to offer 16- to 19-year-olds three hours high quality sports a week**.
 - **The 'You're Welcome' standards will be rolled out across England**, so that all young people, wherever they live, will be able to access young people-friendly health services.
 - **A new campaign to increase young people's knowledge of effective contraceptive methods** will be launched, backed by increased investment of around £27 million a year from 2008-09² in contraceptive services in a range of settings.

² Throughout this document the use of a hyphen (-) denotes reference to a financial year, e.g. 2008-09. The use of a slash (/) denotes reference to an academic year, e.g. 2008/09.

Services for children with acute or additional health needs

- 13** Ensuring that services are of high quality and are responsive to the needs and expectations of those who use them is especially important when children and young people have acute or additional health needs, including disabled children and children with complex health needs.
- 14** To support children and families with acute or additional health needs, the strategy highlights features of safe and sustainable services including managed clinical networks and sets out steps to improve information; secure the right skills and roles; personalise care; and redesign services. The strategy:
- **Establishes the funding available in the NHS over three years for palliative care and end-of-life services, short breaks, community equipment and wheelchair services for disabled children and young people – this funding will total £340 million in NHS allocations over the three years 2008-09 to 2010-11, including £30 million to meet commitments made on palliative care and end-of-life care, in addition to the £340 million revenue funding already announced by DCSF for the Aiming High for Disabled Children programme for children's services.**
 - **Sets out plans to test and expand new approaches to the provision of services –** for example by extending the learning from innovative work on wheelchair services by Whizz-Kidz and Tower Hamlets PCT to other parts of London.
 - **Promises that all children with complex health needs have an individual care plan by 2010,** to support co-ordinated care for children with complex health needs when navigating between numerous different services.

Making it happen: system-level transformation

- 15** The individuals and organisations that lead, plan, commission and ultimately deliver child health services are crucial to the success of this strategy. They are the commissioners of health promotion services and services for children who are sick or who have ongoing, additional health needs. And they are the frontline staff working with children and families.
- 16** In order to support these individuals and organisations in working together to deliver improvements for children and their families, the Government will:
- **Promote joint leadership and strengthen local accountability arrangements for children's health,** including putting Children's Trust Boards on a statutory footing, and transforming the Children and Young People's Plan from a local authority plan into one owned by the Children's Trust Board.
 - **Promote action to ensure that all organisations with responsibility for child health and wellbeing are fulfilling their statutory responsibilities for safeguarding children.**
 - **Improve the engagement of GPs with Children's Trusts,** by setting an expectation that directors of children's services will consult with primary care trusts (PCTs) to secure GP membership on Children's Trust Boards.
 - **Introduce a high-level joint commissioning guide** to support local authorities and health bodies (in particular PCTs) to commission child health services – the guide is being published alongside this strategy.

- **Promote better use of data, including development of minimum child health datasets and models for the planners and commissioners of services**, for example to improve local authorities' and PCTs' understanding of the complex relationship between child health spend and children's health outcomes.
- **Strengthen the child health workforce** – through work that will help SHAs assess the roles, skills and capacity they need in their local children's workforce, for example whether there are sufficient health visitors; to help expand their trained paediatric workforce, including community children's nurses and paediatricians; and through work on extending GP training being led by the Royal College of General Practitioners.
- **Further promote the voice of children and young people**, through commitments to ensure that children and young people's views are given prominence in future assessments of healthcare organisations.
- **Ensure that robust arrangements are in place to promote and ensure the quality of health services.**

