# Bury Health and Wellbeing Board

Title of the Report	Priority 1 Bi-Annual Progress Report
Date	24 September 2015 – deferred and carried forward to 17 December 2015
Contact Officer	Mark Carriline
HWB Lead in this area	Mark Carriline

1. Executive Summary				
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Is this report for?	Information	Discussion X	Decision	
Why is this report being brought to the Board?	At request of Board to update on progress against Priority 1			
Please detail which, if any, of the Joint Health and Wellbeing Strategy priorities the report relates to. (See attached Strategy)  Living_well_in_Bury_ Making_it_happen_to	Priority 1, Ensuring a positive start to life for children, young people and families			
Please detail which, if any, of the Joint Strategic Needs Assessment priorities the report relates to. (See attached JSNA)  Bury JSNA - Final for HWBB 3.pdf	s			
Key Actions for the Health and Wellbeing Board to address – what action is needed from the Board and its members? Please state recommendations for action.	For informati	on		
What requirement is there for internal or external communication around this area?	N/A			
Assurance and tracking process – Has the report been considered at any other committee meeting of the Council/meeting of the CCG Board/other stakeholdersplease provide details.	Children's Trust Board and Starting Well Partnership Board (under 5 healt outcomes); SEND Implementation			

## 2. Introduction / Background

It has been agreed that the Children's Trust Board owns and oversees the successful delivery of Priority 1 of the Health & Wellbeing Strategy.

The Health and Wellbeing Board Terms of Reference state;

"The Board will oversee and receive reports from a set of sub groups which will focus on the delivery of key targeted areas of work. The sub groups will report directly to the Health and Wellbeing Board. Provisions that apply to the HWB would also apply to any sub groups of the HWB."

In order to ensure effective governance and accountability for delivering priority 1, it was agreed that:

• The minutes from Children's Trust Board will be made available to the Health & Wellbeing Board and will be circulated for information on a regular basis. The Health & Wellbeing Board is a public meeting and therefore all documents are available to the public.

November Children's Trust Board minutes attached (draft)

• A detailed work plan would be created detailing key work streams to deliver against each action of the priority and a set of local indicators developed to measure progress against the actions. See below...

ACTIONS	MEASURES OF SUCCESS	Detailed Actions	Timescales	Responsible Officer	Responsible group	Update on progress
1. Improve health and developmental outcomes for under 5's	Improve health outcomes for under 5's  A higher proportion of children will be school ready	See Starting Well Partnership report attached  Report for the Health and Well Being	See Starting Well Partnership Board report attached	Director Public Health	Starting Well Partnership	See Starting Well Partnership Board report attached
2. Develop integrated services across education, health & social care which focus on the needs of the child, especially those with the most complex needs	SEND reforms implemented	See CYP&C ½ yr report attached  CYPC Departmental Plan Progress Report  See attached SEND Progress report  Dec 15 SEND update.docx	There are various timescales – see attached CYP Dept Progress Report and SEND Progress report attached	Assistant Director Learning & Culture, CYP & Culture	SEND Implementation Group	See CYP&C ½ yr report attached and attached SEND Progress report
3. Support positive and resilient parenting, especially for families in challenging circumstances	Fewer children making repeat entry into social care systems Children move from care into high quality permanence Children in care stable placements	See CYP&C ½ yr report attached  CYPC Departmental Plan Progress Report	See CYP&C ½ yr report attached	Assistant Director Social Care, CYP & Culture	CYP & Culture	See CYP&C 1/2 yr report attached

4. Narrow the	Improvements in	See CYP&C ½ yr report	See CYP&C ½	Assistant	CYP & Culture	See CYP&C
attainment gap	the differences in	attached	yr report	Director		½ yr report
amongst vulnerable groups	levels of educational attainment across the borough and between groups	CYPC Departmental Plan Progress Report	attached	Learning & Culture, CYP & Culture		attached

#### Health & Wellbeing Strategy Measures Dashboard - January 2015

#### Priority 1 - Ensuring a positive start to life for children, young people and families

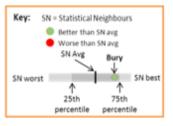
#### Measures:

- 1. a) Improved health outcomes for under 5s
  - b) A higher proportion of children will be school ready
- 2. Implemented the SEND reforms
- 3. a) Fewer children making repeat entry to social care system
  - b) Children move from care into high quality permanence
  - c) Children in care in stable placements

= Bury is in lowest quartile (of SN)

4. Improvements in the differences in levels of educational attainment across the borough and

#### between groups



NB: No significance implied

17.0 Currently analysed in comparison to other NW authorities

The data below are nationally-published indicators that can be matched to the Strategy measures shown above. Where data is available, they show how Bury is doing in relation to similar Local Authorities, and over time.

4 di) Educational progress of children with English as an additional language KS2-KS4 (Englisi 72.0 | Currently analysed in comparison to other NW authorities

4 d ii) Educational progress of children with English as an additional language KS2-KS4 (Maths 72.0 | Currently analysed in comparison to other NW authorities

More indicators will be added following discussions and development.

#### Trend Late SN SN Burv Statistical SN SN Bur Burv Time Source st Rank Strategy Measure Number and Indicator Neighbours Target Wor Bes Description Avg Best Trend Frame which e Upda 1- heat, range st 11-ward is te Ψ Best in 22.4 PHOF Smoking status at time of delivery 13.6 17.2 13.2 13.2 2013/14 2 % of maternities Nov-14 Best in 78.9 55.5 Breastfeeding initiation 69.7 65.7 78.9 2013/14 3 % of infants Nov-14 PHOF ? Breastfeeding prevalence at 6-8 weeks after birth 37.6 46.3 31.2 46.3 2013/14 % of infants due a 6-8 week check PHOF 36.1 Nov-14 Bellee Ikan SH ang 5.5 1a iv) Infant Mortality 4.3 3.0 3.0 2010-12 rate per 1,000 live births PHOF 4.6 May-14 Best in 1.9 0.6 1a v) Tooth decay in Children aged 5 1.3 1.3 0.6 2011/12 avg no of dmf teeth Nov-13 PHOF Best in 1b i) % achieving good level of development at end of reception 57.1 37.7 57.1 51.2 48.0 2012/13 % of eligible pupils Feb-14 PHOF Deller Ban SH ang 1b ii) % with FSM status achieving good level of development at the end of reception 31.7 32.2 42.5 19.4 42.5 2012/13 6 % of eligible pupils Feb-14 PHOF % of Y1 achieving the expected level in phonics screening check 75.8 Bellee Ban SHang 62.4 % of eligible pupils 65.7 69.8 75.8 2012/13 Feb-14 PHOF Deller Ban SHang 1b iv) % of Y1 with FSM status achieving expected level in phonics screening check 55.8 62.8 45.7 62.8 2012/13 53.6 % of eligible pupils PHOF Feb-14 2 i) Number of EHC plans in place Annual 2 ii) Number of families accessing personal budgets Annual 3 a) A reduction in repeat child protection plans 19.7 16.5 10.1 24.2 10.1 2013/14 % of CP plans which were repeats ? 3 bi) Percentage of children moving out of care into permanence - adoption 19.3 26.0 10.0 26.0 2013/14 % of CYP leaving care that were adopted. ? 3 b ii) Percentage of children moving out of care into permanence - special guardianship orders 15.0 12.1 19.0 6.0 19.0 2013/14 % of CYP leaving care that were made subject to SGOs. ? 3 c) Long term placement stability for children and young people in care 68.6 73.0 53.0 73.0 2013/14 % CLA for 2.5+ urs in same placement 2+ urs ? 4 a i) Gap between pupils eligible for FSM and their peers achieving the expected level - KS 2 Currently analysed in comparison to other NW authorities 2013/14 % point gap ? 4 a ii) Gap between pupils eligible for FSM and their peers achieving the expected level - KS 4 Currently analysed in comparison to other NW authorities 2013/14 % point gap ? % point asp 4 b) The SEN/non SEN gap achieving 5 A\*-C GCSE inc. English and Maths **223** Currently analysed in comparison to other NW authorities 2013/14 ? 4 c i) Educational progress of CYPIC KS2-KS4 (English) 28.0 Currently analysed in comparison to other NW authorities 2013/14 ?

2013/14

2013/14

2013/14

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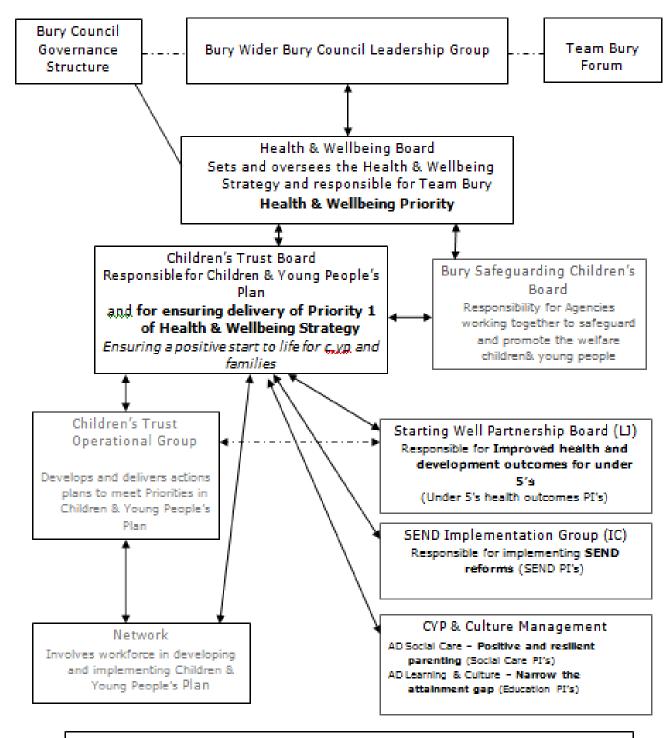
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'Hal anailable an naluen fue 4 SHn weer not published on PHOP for data quality reasons

4 c ii) Educational progress of CYPIC KS2-KS4 (Maths)

• A governance framework would be provided for The Children's Trust Board

## Governance Framework, Priority 1 of the Health & Wellbeing Strategy



#### Participation Strategy

Voice of child and young person in all services and decisions that affect them

 Exception reports to the Health & Wellbeing Board would be submitted as and when required.

#### No exception reports have been submitted

### 3. key issues for the Board to Consider

Key issues for the board to consider are:

- The content of the workplan provided
- The governance structure of The Children's Trust Board provided
- The Local Performance Indicators identified by the Childrens Trust Board

#### 4. Recommendations for action

For the Health and Wellbeing board to note the content of the progress report.

5. Financial and legal implications (if any)
If necessary please seek advice from the Council Monitoring Officer Jayne
Hammond (J.M.Hammond@bury.gov.uk) or Section 151 Officer Steve
Kenyon (S.Kenyon@bury.gov.uk).

N/A

6. Equality/Diversity Implications. Please attach the completed Equality and Analysis Form. If necessary please seek advice from the Principal Officer-Equalities Mary Wood(M.Wood@bury.gov.uk).

N/A – no new or changed policy, procedure, strategy or working practice

#### CONTACT DETAILS:

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Date: 17 December 2015