

# Children and Young People's Partnership

A meeting of Children and Young People's Partnership was held on Wednesday, 19th April, 2017.

**Present:** Martin Gray (Chair),

Jane Barker, Bev Bearne, Sarah Bowman-Abouna, Rhona Bolland, Cllr Mrs Ann McCoy, Jen Wilson, Janet Mackie, Amanda Taylor, Steve Rose, Jo Heaney

**Officers:** Michael Henderson

**Also in attendance:**

**Apologies:** Priti Butler, Chris Davies, Diane McConnell, Liz Boynton, Helen Barker, Emma Champley, Hazel Ducker, Maryssa O'Connor

## 1 **Declarations of Interest**

There were no declarations of interest.

## 2 **Minutes of the meeting held on 22 March 2017**

The minutes of the meeting held on 22 March 2017 were confirmed as a correct record.

Reference was made to the Domestic Abuse Strategy and it was explained that the Strategy had been agreed by the Domestic Abuse Steering Group and would be presented to the Health and Wellbeing Board on 26th April 2017, then Cabinet in May and Council in June. It was agreed that the prevention element of the strategy was crucial and all partners needed to 'work up stream' as much as possible.

It was noted that the Trust's maternity services was seeing more and more pregnancies where Domestic Abuse, within the family, was a feature.

## 3 **Poorly Child**

Members received a presentation relating to the CCGs Poorly Child Pathway (paediatrics non- elective admissions). The presentation included data around children and young people's referrals to A and E, waiting times and admissions to hospital.

It was explained that the CCG were looking to reduce the number of unplanned admissions to hospital, whilst making sure people's needs were still being met.

There was a rising trend of non-elective admissions for children and the CCG was looking at ways of reversing this trend.

It was suggested that, sometimes, people used services unnecessarily and a culture had developed that had undermined people's knowledge and willingness to manage minor childhood illnesses themselves. There was a danger that a generation of people was being created whose first inclination was to go to services for help, rather than self-caring.

The majority of children being admitted to hospital were under six with a large proportion of those being under three. The most common reason was viruses/high temperatures. It was explained that sometimes children needed to be stabilized, before being sent home. There was, often, a fine line between children being well, and presenting as quite poorly.

It was agreed that partner organizations could have a role in assisting to empower and support families to self-care for their children. There would need to be consistent messages from a range of organizations for this message to be successful.

It was noted that work was on-going with GPs to understand what presentations they would refer to hospital.

Members discussed the potential role of pharmacist in advising on childhood illnesses.

There was a lengthy discussion relating to a NHS Child Health App, which provided very useful information, to parents, on how to deal with minor illnesses. It was agreed that Partners would promote the app within their organization.

Members discussed the importance of pushing prevention messages too e.g. parents quitting smoking, reducing cold damp homes, accident prevention, promoting breast feeding.

The Partnership was sensitive to the potential of issuing confusing messages to parents, in terms of when they should, and should not, ask for medical help for their children. It was noted that in terms of neglect, a failure to seek medical help for your child, when necessary, was likely to be a safeguarding issue. That said it was recognized that short bouts of high temperatures and/or diarrhoea, typically, didn't justify any intervention by a health professional.

It was suggested that it may be helpful to form a focus group of parents to try and understand what circumstances and concerns lead them to take their children to A&E, or GP.

It was also suggested that, where parents were repeatedly and unnecessarily taking their child to medical services then some kind of intervention could be undertaken with those parents.

It was agreed that it would be useful to understand the cost of unnecessary admission to hospital and /or attendance at A&E.

RESOLVED that:

1. the presentation and discussion be noted and actioned as appropriate.
2. Partners promote the use of the app described above during its contact with members of the public.

#### **4 Joint Health and Wellbeing Strategy and the Joint Strategic Needs Assessment**

Members considered a report that provided:

- an update on the Joint Strategic Needs Assessment (JSNA) process for discussion.
- a proposed process for reviewing the Joint Health and Wellbeing Strategy (JHWS).
- an update on the changes resulting from the disestablishment of the Tees Valley Public Health Shared Service (TVPHSS).

Members noted that the process relating to updating the JSNA included a role for the Children and Young People's Partnerships in terms of identifying leads to progress work on topics and develop data. The Partnership would also be involved in quality control of topics and identifying links and synergies across topics.

Members noted indicative timescales for the development of the Joint Health and Wellbeing Strategy. This included the establishment of a task and finish group, reporting to the Board, to lead on and coordinate the work of refreshing the JHWS. It was envisaged that the Strategy would be available for approval around April 2018.

It was noted that topics would be presented to the Partnership and would fit in with themes identified on the Forward Plan.

It was suggested that consideration be given to including a Housing representative on the Task and Finish Group.

RESOLVED that the report and discussion be noted.

#### **5 Forward Plan**

Members noted and agreed the Forward Plan.

Reference was made to including:

- open access youth work and 13 - 19 out of school leisure activity (Steve Rose/ Laurayne Featherstone).
- ASD Work (Jo Heaney)

RESOLVED that the Plan be updated.