Rotherham Health and Wellbeing Strategy

Aim 2: Children and young people achieve their potential and have a healthy adolescence and early adulthood

Ian Thomas
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Board sponsor: Ian Thomas, RMBC
Supported by: Shafiq Hussain VAR & Tracy Guest YWCA

- Reduce the number of young people at risk of child sexual exploitation
- Reduce the number of young people experiencing neglect
- Reduce the risk of self-harm and suicide among young people
- Increase the number of young people in education, employment or training
- Reduce the number of young people who are overweight and obese
- Reduce risky health behaviours in young people
The story in Rotherham

Reduce the number of young people at risk of child sexual exploitation

- Responding to historical short comings
- Some indications that ‘on line’ and street grooming increasing
- No. of CYP presenting at risk of CSE: 352 (15/16)
- Governance: Improvement Board / Plan, Safeguarding Children’s Board, CSE sub group
- Services: MASH, Evolve, VCS commissioned services, Barnardos ‘Reach Out’
The story in Rotherham

Reduce the number of young people experiencing neglect

- Approx. 10% of new referrals to social care have primary reason neglect (455 in 2015/16).
- Reality much higher. Other factors for neglect: Domestic violence, parental substance misuse and mental health issues
- Neglect: ‘rungs of ladder’ / continuum of need
- 2,231 open children’s social care cases at the end of 2015/16 (1,430 CIN, 369 CPP, 432 LAC)
- Child protection plans started in the year, where neglect is main category or a feature, 304 (15/16) 51.9% of all new CPPs.
- Services not specifically designed for ‘neglect’
The story in Rotherham

Reduce the risk of self-harm and suicide among young people

- Mortality from Suicide and Injury Undetermined 2010-2014 in 0-19 years: 5 males 0 females
- Self-harm is recognised in Rotherham as an area of concern particularly among health professionals and young people.
- However, nationally data collected suggests we do well compared to England averages for Self-Harm although suicide is slightly above average.
The story in Rotherham

Increase the number of young people in education, employment or training

<table>
<thead>
<tr>
<th></th>
<th>15/16</th>
<th>16/17 (June 16)</th>
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</thead>
<tbody>
<tr>
<td>Rotherham:</td>
<td>5.26%</td>
<td>5.6%</td>
</tr>
<tr>
<td>Statistical neighbours:</td>
<td>5.16%</td>
<td>5.6%</td>
</tr>
<tr>
<td>Regional:</td>
<td>4.76%</td>
<td>4.9%</td>
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<tr>
<td>National:</td>
<td>4.2%</td>
<td>4.5%</td>
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Rotherham NEET Cohort: as at 01/08/16

525: 273 [52%] male
     252 [48%] female
The story in Rotherham

Reduce the number of young people who are overweight and obese

• In Rotherham 9.9% of 4-5 year olds were identified as obese (2014/15), higher than the England average of 9.1%.

• This figure more than doubles at Year 6 as 21.6% of 10-11 year old pupils in Rotherham were identified as obese, worse than the England average of 19.1%.

• Rotherham ranks similarly among Children’s Services statistical neighbours (6th of 11 including Rotherham at Reception, 2nd highest at Year 6).
The story in Rotherham

Reduce risky health behaviours in young people

Some of the contributory factors:

• Sexual Health – chlamydia 1738 per 100K (Nat Ave 1887, target 2,300) *aged 15-24, in 2015*
• Teenage pregnancy - 28.9 per 1,000 (Nat ave 26.4) *aged 15-17, in 2014*
• Alcohol and Drugs – 3yr average 21.4 hosp. admissions for alcohol per 100K (Nat ave 36.6) *aged 0-17, 2012-2015*
• Smoking - 7.2% regular smokers (Nat ave 5.5%) *aged 15, 2014/15*
• Self esteem
• Self harm – 312 hosp. adm per 100K, (Nat ave 399), *aged 10-24 in 2014/15*
• School absence – 5.3% (Nat ave 4.6%) *aged 5-15 in 2014/15*
• Domestic abuse (general) – 30 per 1,000 pop (Nat ave 20.4) *aged 16+, 2014/15*
Aim 2: Workshop: 5 August 2016

- Over 40 attendees from across partnership, inc. reps from:
  - RMBC, Police, Healthwatch, Public Health, VCS & Training Providers
- Six focus group workshops, considered each objective:
  - What’s the situation in Rotherham
  - What currently works well
  - Are there any gaps
  - Priority areas
- Participants came up with key actions for each objective…
Reduce the number of young people at risk of child sexual exploitation…

1. Focusing more work on perpetrators: leading on research and preventative work starting in primary schools

2. Keeping the public engaged; communicating current messages through public campaign
Reduce the number of children and young people experiencing neglect…

1. Develop a consistent understanding of identifying neglect

2. Develop assessment tool / shared responsibility

3. Think Family Model
Reduce the risk of self-harm and suicide amongst young people...

1. Targeting young people at key transition points in their lives, by linking through peer support
Increase the number of YP in education, employment or training

1. NEETs case conference approach, supported by Early Help
2. All providers ‘around the table’ focusing on NEETs
3. Pre 16 alternative provision - partners around the table working collaboratively to provide a suitable offer
Reduce the number of children and young people who are overweight and obese

1. School Pilot: a different approach than the existing weight screening programme, using a ‘whole school approach’
Reduce risky health behaviours in young people

1. Campaign that addresses ‘respect’ both for self and others: e.g. personal space, community

2. Resilience: encourage all adults in child’s life to address resilience with young people

3. Organise a similar event as today’s workshop with schools: open dialogue and encourage conversation
Discussion

• Do these actions feel correct?

• Is there one or two areas that the HWb Board think should be prioritised?

• What can partners offer to support the priorities?
Thank you!

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Health and Wellbeing Strategy:
http://www.rotherham.gov.uk/hwp/homepage/6/joint_health_and_wellbeing_strateg