# Joint Forward Delivery Plan for Children and Young People

Greater Manchester Integrated Care Partnership



"Giving every child and young person the best start in life".

## **Foreword**

We want to ensure that children and young people across Greater Manchester have the best possible start in life and have their physical and mental health supported as they grow up to become young adults. We recognise that we have variation in the availability and quality of services across Greater Manchester and demand for services means longer waiting times for assessment and treatment for some of our children & young people. We must continue to work collectively to tackle these issues whilst also focussing on early intervention and prevention whilst ensuring that our children & young people and their families can access support when they need it.

Through this Joint Forward Delivery Plan, underpinned by our commitment to put the voice of children & young people at the heart of the way we design and deliver services, we have set out our activity that seeks to achieve this aim. The plan will be overseen by groups set up by partner organisations, that have a critical role in improving the health of our children & young people and collective responsibility for reducing the health inequalities in our city-region.



### **Ambition**

Greater Manchester is passionate about ensuring that all our children and young people get the best start in life and are cared for, nurtured and supported to grow up well and achieve their ambitions in life.

'Giving every child and young person the best start in life'

### **Vision**

An integrated approach to improving outcomes for children and young people and tackling inequalities that puts the needs and experience of children, young people and families at the heart of our ambitions.

## The vision for Greater Manchester is a city region where:

- Everyone has an opportunity to live a good life,
- Everyone experiences high quality care and support where and when they need it,
- Everyone has improved health and wellbeing, and
- Health and care services are integrated and sustainable.

# Challenges for Children and Young People in Greater Manchester

Children growing up in Greater Manchester are from diverse backgrounds and communities, and the degree of challenge they face varies significantly between the ten boroughs and neighbourhoods within them.

The Joint Forward Plan presents an opportunity for local authorities, NHS Greater Manchester and partners to build on improvements already made and continue to work together to ensure that all our children and young people get the best start in life.

Greater Manchester is home to **654,086** children and young people aged **0-17** (inclusive). The population of this age group **increased by 7.2%** between 2011 and 2021, compared to an increase of **3.9% in England overall.** 

## **Infant**mortality rate



(compared to 3.9 in England<sup>2</sup>)

## Known smoker

at the time of delivery

**49.2%** 

(compared to 8.8%<sup>3</sup>)

#### 2 year olds

at or above expected level of development

**₹77.5%** 

(compared to 80.5% in England4)

## Predicted Speech, Language and Communication need

21-39% across GM localities

(compared to UK prevalence rate 8-10% of all children, up to 50% for those growing up in low-income households)

## Children and young people with an **Education**, **Health and Care Plan**

**4.8%** 

(compared to 4.3% in England)

## Children and young people with a SEND Support Plan

**13.2%** 

(compared to 13% in England<sup>5</sup>)

## 5 year olds with visibly obvious dental decay

**\$33%** 

(compared to 24% nationally<sup>6</sup>)

0-5 year olds admitted to hospital due to dental cavities and decay

259 per 100,0

(compared to 179 in England?)

## **Overweight**

4-5 year olds

**9.2%** 

(compared to 8.8% in England8)

10-11 year olds

**23.9%** 

(compared to 22.7% in Englands

Rate of children and young people aged 8 to 25 in 2023 in England with a probable

mental health condition

**20.3%** 

(compared to 12.5% in 2017<sup>10</sup>)

First time entrants to criminal justice system

196 per 100,000

(compared to 149 in England<sup>15</sup>)

Children and young people admitted to hospital due to asthma

**1 202** per 100,000

(compared to 122 in England<sup>11</sup>)

**0-24 years olds** living in an area of deprivation

**\$58.3%** 

(compared to 35% nationally<sup>12</sup>)

Cared for 0-18 year olds

92.1 per 10,000

(compared to 70.5 in England<sup>13</sup>)

**0-18 year olds** open to children's social care services

405 per 10,000

(compared to 339 in England<sup>14</sup>)





## **Children and Young People Voice**

The Children & Young People (CYP) System Group has set out a firm commitment to actively involve children and young people in its decision making. Building on the existing practice within localities and services, the CYP System Group will support young people to develop a young person's shadow panel. The shadow panel will work with the CYP System Group to embed the Lundy Model of participation and will amplify young people's voices within mental, physical and public health.



## **#BeeWell survey data**<sup>16</sup>

Average life satisfaction and mental wellbeing scores of young people in GM are lower than those of young people in England (in studies using the same measures as #BeeWell).



In 2023,

83%

of Year 10 pupils in GM said that they have hope and feel optimistic for their future. This is an improvement from

> 72% in 2020 and 81% in 2022.

14%

of young people in GM report high levels of emotional difficulties.

This has improved from around 16% in both 2021 and 2022.

Young people in GM eligible for free school

#### meals

reported eating healthy food

less often (47%) than their peers

(61%).

441% of Year 10 pupils in GM say they do **not** get enough **sleep**.

## **Our commitments**



#### **Shared Ambitions:**

Having a shared vision, shared principles and set of priorities for Greater Manchester children & young people.



#### **Resourcing & Commissioning:**

Taking a partnership approach and longerterm view to resourcing our priorities through shared responsibility and transparency of available resources.



#### Work in partnership with VCSE sector and communities themselves:

Recognising and valuing the work of the VCSE sector on improving health outcomes for children & young people.



#### **Tackling inequalities:**

Understanding and responding to inequalities as part of our work to improve outcomes for children & young people.



#### **Early intervention & prevention:** A central

component of our strategy for improving outcomes for children & young people and tackling inequalities at both universal and targeted levels.



#### Innovation & shared learning: sharing and

adopting innovative practice and sharing learning in the field of children & young people's health and wellbeing.



#### Children and young people's voice:

Incorporating the voice and rights of children & young people in decision-making that affects the support they receive in the community and acute settings.



#### Shared leadership, governance, reporting and accountability:

appropriate governance with clear lines of accountability for shared priorities including a commitment to better understand and respond to variation across the city-region.



#### **Child Development in the Early Years**

Taking an integrated approach to early years, recognising the importance of the first 1,001 critical days and responding to the detrimental impact of Covid-19 on the development of children aged 0-5 years old.

#### Includes:

- Embedding early years pathways through Family Hub infrastructure to ensure a consistent 'Start for Life' offer across GM localities that meets the 'go further' expectations of the national Family Hubs programme.
- Full implementation of the Saving Babies' Lives Care Bundle.

#### **Outcomes:**

- Clear, evidence-based offer to support early years child development across different tiers of need.
- Reduced variation across GM through shared standards embedded in local commissioning models and joint approaches to early years interventions and workforce support.
- Reduction in early neonatal deaths and stillbirth rates
- Reduction in maternal mortality rates.
- Smoking at the time of delivery rate reduced to 4% or less by 2026.

#### **SEND and School-Age Children Wellbeing**

A commitment to addressing inconsistencies in the offer across Greater Manchester and improve the wellbeing of school-age children with special educational needs and disabilities (SEND), Learning Disabilities and Autism (LDA), and Speech, Language and Communication (SLC) needs.

#### **Includes:**

- Review and redesign of the GM neurodevelopmental pathway.
- Roll-out the Balanced System® approach to Speech, Language & Communication.

#### **Outcomes:**

- Fully integrated neurodevelopmental pathway in place.
- Neurodivergent young people will be better supported with their mental health and have access to support pre and post diagnosis.
- Improved school experience for neurodivergent CYP in GM.
- Whole system, redesigned Speech, Language and Communication pathway in place aligned to Balanced System<sup>®</sup> principles and outcomes.
- Reduced variation in access to SLC support across GM and increased consistency in support offered in schools, colleges and community settings

## Long-Term Physical Conditions (CORE20PLUS5)

Supporting children and young people to live healthier lives and live well with long-term conditions through equitable, effective and efficient management of diagnosed health conditions.

#### Includes:

- Asthma
- Epilepsy
- Diabetes
- Oral health

#### **Outcomes:**

- Children will receive developmentally appropriate care as they transition from child to adult long term condition health care services.
- Children with asthma will be more confident to self-manage their condition and have appropriate adult and peer support around them, leading to improved wellbeing.
- More children with diabetes who are overweight will receive the support they need to manage their weight resulting in improved wellbeing and a reduction in complications from excess weight.
- CYP with epilepsy will receive equitable service provision regardless of where they live in GM.

#### **Mental ill Health**

Responding to the rise in the number of children & young people seeking support for mental ill health through a focus on earlier support and preventing escalation in the community, whilst also having the right pathways in place for those in crisis.

#### Includes:

- Mental Health Support Teams (MHST) in schools
- Child and Adolescent Mental Health Services (CAMHS)
- Crisis support
- Perinatal mental health provision

#### **Outcomes:**

- More schools with Mental Health Support Teams.
- Standardisation of the core CAMHS service available in the ten local areas in GM.
- Reduced variation in CYP community mental health services access, experience and outcomes.
- Increased availability of specialist perinatal mental health community care and support.

#### **Risk and Complex Care**

Understanding and responding to the specific health needs of children and young people who are vulnerable, at risk or have complex care needs, and those requiring palliative and end of life care.

#### Includes:

- Project Skyline
- · Palliative and end of life care

#### **Outcomes:**

- 10 new children's homes opened under 'Project Skyline', ensuring that GM cared for children with complex need can remain in their local area.
- Fully integrated health offer to meet the needs of the children and young people living in Skyline homes.
- Babies, children and young people will have their palliative care needs identified earlier.
- A reduction of crisis hospital admissions at end of life which could be managed in the community.

#### **Family help**

Working towards a shared vision of family help – supporting families to get help when they need it from the right places and people in their communities.

#### **Includes:**

• Development of Family Hubs

#### **Outcomes:**

- Improved access to a joined-up family support offer for families within communities.
- Opportunities for earlier intervention for families that need help, leading to a reduction in demand for highercost, crisis level services.
- More integrated early years and health services available in communities.



#### **June**

• Completion of Asthma Friendly Schools pilot scheme

2025

#### **January**

• Full implementation of the 'Saving Babies Lives Care Bundle' of evidence-based best practice to reduce perinatal mortality.

#### **February**

 Transition pathways in place ensuring that children with long term conditions (asthma, diabetes and epilepsy) receive developmentally appropriate care as they transition from children's to adult health care services.

#### March

- 40 primary schools across GM to be PINS (Partnership for Inclusion of Neurodiversity in Schools) trained, aiming to improve the school experience for pupils with SEND by empowering schools to support neurodiverse children.
- The first cared for children to be placed within a Greater Manchester owned and managed children's home under 'Project Skyline' – GM's new shared children's residential care service.
- Epilepsy Specialist Nurse provision levelled-up to a ratio of 1 nurse to every 250 patients.
- Standardisation of the core CAMHS service available in the ten local areas in GM.

#### March

- Redesigned Speech, Language and Communication pathway in place, aligned to the Balanced System® model, reducing variation across GM.
- Development of a sustainable, long-term neurodevelopmental pathway, which is needs-led and put intervention and support before diagnosis, supported by a unified pathway and multi-disciplinary team.

#### ICB governance

#### **Locality PBP Committees**

Bolton Bury Manchester Oldham Rochdale

Stockport

Rochdale Salford

m Tameside ale Trafford

#### Audit Committee

- Assurance of systems & Processes
- Deep dives

Non-Risk Reporting Committee

Remuneration

#### **Risk Reporting Statutory Committee**

Integrated

**Care Board** 

**Finance** 

People & Culture

Primary Care

**Quality & Performance** 

**Executive Committee** 

Population & Public Health Committee

Workstreams reporting to committees:

**Finance** 

Finance Estates People & Culture

People & Culture Workforce OD

Primary Care

Primary Care Medical

GM Clinical Effectiveness Group Nursing & Quality Groups

GM Safeguarding Locality Quality Group

Quality & Performance Oversight

Patient Safety Strategy Group

AACC Steering Group System Quality Group (Inc ASC) **Executive Com-**mittee

Strategy

Comms & Engagement

Digital VCSE

Corporate Services

Information Governance Population Health Committee

Population Health

Net Zero

EPRR Adult Social Care

PCCA

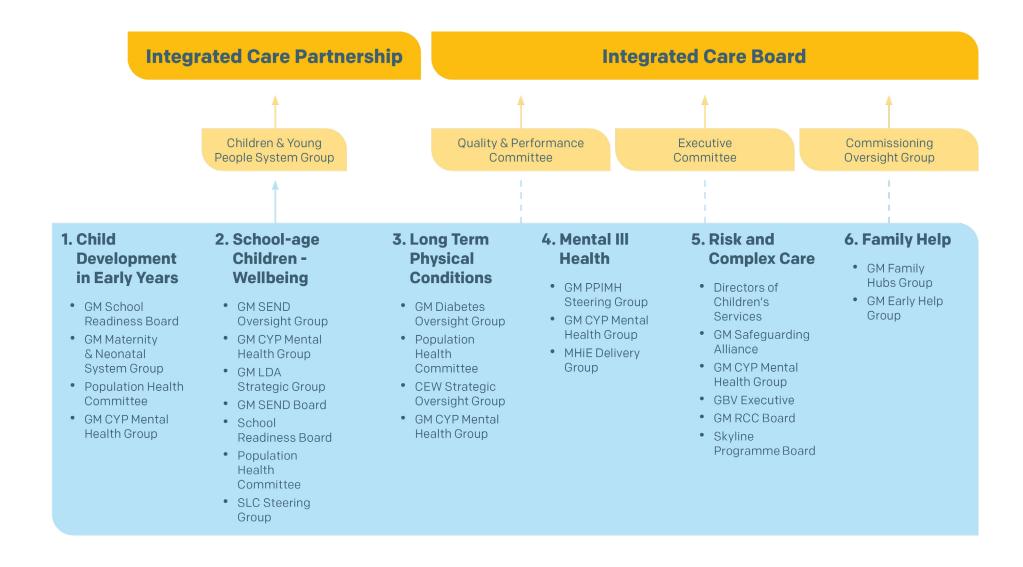
GM Cancer Group, GM Elective Recovery & Reform Group, GM UEC System Group (Inc: ASC)

Maternity & Neonatal Spec, Commissioning Diagnostics & Pharmacy

**System Groups** 

MH Delivery Group, CYP, Sustainable Services, Digital.

## **Joint Forward Delivery Plan Governance**



#### References

- <sup>1</sup>Census 2021, Office for National Statistics <u>Census - Office for National Statistics</u>
- <sup>2</sup>Rate per 1000 live births, 2020-2022 Office for Health Improvements and Disparities Child and Maternal Health statistics
- <sup>3</sup> 2022/23 Office for Health Improvements and Disparities <u>Child and Maternal Health</u> statistics <u>Data from April-September 2023</u>
- <sup>4</sup> Ages & Stages Questionnaire 3 (ASQ-3), <u>Child development outcomes at 2 to</u> 2.5 years: quarterly data 2023/24
- <sup>5</sup>2022/23 academic year <u>SEND in England 2022/23</u>
- 6 2021/22 Office for Health Improvements and Disparities Child and Maternal Health statistics
- <sup>7</sup>Hospital admissions per 100,000 0-5 year olds, 2020/21-2022/23 - Office for Health Improvements and Disparities <u>Child and Maternal Health statistics</u>
- 8 2022/23 Office for Health Improvements and Disparities Child and Maternal Health statistics
- 9 2022/23 Office for Health Improvements and Disparities <u>Child and Maternal Health statistics</u>
- <sup>10</sup> Children's mental health services 2022-23, Report of the Children's Commissioner <u>Children's mental health services 22-23 report</u>
- <sup>11</sup>0-18 year olds, 2022/23 Office for Health Improvements and Disparities Child and Maternal Health statistics
- <sup>12</sup> CYP aged 0-24 living in the 30% most deprived LSOAs. Office of National Statistics, Census 2021. <u>Census 2021</u>
- <sup>13</sup> Rate per 10,000 under 18 year olds, Financial Year 2022/23. <u>Children looked</u> after in England statistics 2022/23
- <sup>14</sup> Number of CIN at the end of the financial year 2022/23 <u>Children in need statistics</u>
- 15 2022 Office for Health Improvements and Disparities <u>Child and Maternal Health statistics</u>
- 16 2023 #BeeWell survey of Year 8 and Year pupils in Greater Manchester #BeeWell Programme

