

Recommendations

- Partners in the city, including the Health and Well-being Board & Children's Trust Board should ensure that service planning for children and young people continues to reflect the growing numbers of children living in the city. [HWB/CTB]

0 to 19 years old Children

- Take action to reduce infant mortality and low birth weight, particularly in the most deprived parts of the city, by continuing to improve early access to high quality universal maternity services including the number of women booking into maternity care by 12 weeks of pregnancy. [CCG/ UHL/ LA]
- Routine antenatal visits should be used to raise awareness of the impact of alcohol and smoking during pregnancy, improve the uptake of smoking in pregnancy services and provide evidence-based advice and support on healthy weight in pregnancy. [CCG/UHL/ LA]
- Breastfeeding initiatives including peer support, through the city's 0-19 Healthy Child Programme and in maternity services need to be maintained and developed. This should include a specific focus on supporting women living in areas with the highest levels of deprivation. [LA/ UHL/LPT]
- Maintaining high coverage of immunisation and vaccination against infectious disease in pregnancy and childhood remain important ways of protecting children's health and reducing avoidable demand for health services. This should continue to be closely monitored locally by the Leicester, Leicestershire & Rutland Health Protection Board in conjunction with NHS England. [LLRHP/NHSE]
- Intelligence from the National Child Measurement Programme should be used to identify and work with schools to promote healthy weight, reduce obesity and tackle underweight. This should be done by continuing to support the Food for Life programme, local growing schemes and by working with partners to engage children and their families in physical activity. Schools in more deprived areas and where obesity or underweight levels are high should be targeted. [LA]
- Increase the uptake of funded early year's education for 2 and 3 years olds in high quality facilities. [LA]
- Schools, colleges, the local authority and health services should continue to collaborate and build upon on current momentum to enable all children to achieve good educational and personal outcomes that prepare them for adulthood.
- Continue to reduce the incidence of poor oral health and reduce the number of children who required tooth extractions under general anaesthetic in Leicester, by expanding the uptake of fluoride varnish application and through the city's Healthy Teeth, Happy Smiles programme [LA/NHSE]
- Determine ways to increase the school readiness of Leicester's children by targeting the factors that affect their transition (e.g. language development, motor development, and social/emotional development) through the city's 0-19 Healthy Child Programme [LA/NHS]

20 to 24 Year Old Young People

- The circumstances and economic and emotional pressures on young people are complex. Therefore more work is needed to understand the specific needs of young people in Leicester not living independently and not in employment, education or training.
- In light of the automatic housing benefits for 18 to 21 year olds ending in April 2017, a review of the types of local housing available to young people should be conducted to ensure there is an adequate supply of affordable housing.
- A specific needs assessment is needed to better plan and resource services for young adults with SEND and their transition to adult services.

Mental Health

- Ensure the integrated approach between mental health services, social services, education, offender management services and adult mental health continues to be strengthened. [NHS/YOS/LA]
- Ensure that the results of the local Children's Survey are used to better understand & intervene early to improve the mental health of children and young people to reduce preventable mental illness and improve children's well-being [LA/NHS/HWB]
- Promote resilience to mental illness in schools, by working with schools to develop whole-school approaches to enabling good mental health & well-being. [LA/NHS]

Looked After Children

- Commissioners of health services for children and young people should consider requiring client information to be recorded in an electronic format that is easily interrogated to facilitate understanding of population health needs and monitoring of performance beyond statutory assessments. [CCG/LPT]
- Accelerate the work with the Youth Offending Service to reduce the proportion of LAC being convicted, having a final warning or reprimand during the year. [YOS/LA/Police]
- Continue work through the Local Children Safeguarding Board on Neglect to address this issue at a population level. [LA/ NHS/other partners]

Youth Offending

- In line with the Full Joint Inspection's recommendation, a reporting system that allows for easy identification of the health needs for young people known to YOS should be implemented. These health needs include the physical and sexual health needs and speech, language and communication needs. [YOM]
- Improve the multi-agency Health and Social Care pathways and planning for young offenders to manage risks (to health and wellbeing and for reoffending). [YOS/YOM/NHS]
- Provide a more streamlined approach to client care through a shared YOS Health Care Plan for young people. These Health Care Plans should involve parents to ensure that parents receive appropriate support before the young person reaches a state of crisis. [YOM/YOS/other partners]

Female Genital Mutilation

- Increase community engagement on FGM to ensure proper safeguarding and to better educate communities on the health impacts of FGM. [LA/CTB/LSCB]
- Ensure that the care of FGM victims is integrated between mental health services, social services and physical health services. [LA/NHS]
- Promote training on the risk factors and signs of FGM to health, social care and education [LA/NHS]
- Continue the monitoring and auditing of compliance with FGM safeguarding procedures across all partners and relevant agencies. [LA/ LSCB/NHS]

Child Sexual Exploitation

- The use of CSE assessment tools across agencies should be improved to ensure all children at risk or subjected to CSE are identified in a timely fashion.
- Improve communication between agencies where CSE referrals have been made. Additional multi-agency training is needed to further facilitate this.
- The CSE Hub should continue to build upon the coordination and sharing of key information to provide a better understanding of CSE, its prevalence and how to continue tackling this issue.

Gypsies and Travellers

- Health and social services should continue to improve community engagement with these communities to determine the best ways to improve their health and well-being. While we have some understanding of their needs, how to improve their care and their health is not clear.
- More understanding and flexibility by health and social care agencies is necessary to allow for effective community involvement and improved care. This may include ensuring staff and commissioners have a better understanding of Gypsy and Traveller communities, their health literacy, social structures and their behaviours.