TORBAY COUNCIL

Overview and Scrutiny

Subject: 0-25 Services – To review the scope of 0-25 Services, including obesity, face to face one year old and 2- to 2.5-year-old checks, update on vaccine take up and oral health.

Director: Lincoln Sargeant and Nancy Meehan Cabinet Member: Hayley Tranter and Nick Bye

1. Introduction

This report provides an overview of health and development for children and young people in Torbay. It considers the data, key issues and details some of the interventions and programmes for child weight, physical activity, oral health, and immunisation rates for those aged 0-19. The report examines face-to-face developmental reviews at ages one and 2.5, outlining the processes and outcomes of the checks as well as detailing local interventions that support child development.

There are limitations when addressing the health needs for people transitioning to adulthood aged 19-25 with Special Educational Needs and Disabilities (SEND) and/or with care experience, as oral health, weight and immunisations data for this age group falls within adult services.

2. Child weight

This section provides data on child weight in Torbay and the links to deprivation and children with SEND. It also explores data sets for breastfeeding and diabetes as health indicators for weight. The section discusses current interventions and programmes designed to tackle the issue of childhood weight.

The Data

The National Child Measurement Programme (NCMP) measures the height and weight of children in Reception (ages 4-5) and Year 6 (ages 10-11) in England. This program helps monitor the prevalence of obesity and underweight among children, providing data by age, sex, deprivation, and ethnicity. The most recent Torbay NCMP data (2022/2023) shows 21.1% (245) of all Reception age and 36.1% of all Year 6 children are overweight. Torbay Reception data has improved, and Torbay is now better than the England value, Year 6 remains static.

Rates of overweight children in Torbay are notably higher in more deprived areas. For 2022/23, the rates of overweight children in the most deprived decile were 25.7% for Reception and 44.5% for Year 6, compared to 16.9% and 25.9% in the least deprived decile.

Children in deprived areas are also more likely to have a recognised Special Educational Need (SEN). The proportion of pupils with SEND is higher in these areas. Currently, NCMP data does not specifically include SEND information. However, it is assumed that children with SEND are more likely to be classified as overweight due to the observed correlations between SEND and deprivation, as well as between weight and deprivation.

Studies have shown that breastfeeding can reduce the risk of obesity in children and can lead to health benefits in adulthood. There has been a marked improvement in breastfeeding prevalence at 6-8 weeks with Torbay (49.8%) now better than the England average (49.2%) for the first time in over 10 years.

Diabetes data is a significant indicator of unhealthy weight due to the correlation between body weight and developing diabetes Type 2. There is no specific diabetes data set for children and young people, however the Quality and Outcomes Framework (QOF) includes the prevalence of diabetes among patients aged 17 and over. For Torbay the Diabetes QOF prevalence is at 8.1% and is worse than the England value which is 7.5%. There has been a steady increase year on year for 10 years of reporting (6.4%-8.1%). Children and young people diagnosed with diabetes will be increasing in line with overall diabetes prevalence.

Interventions and Programmes

Aside from the NCMP, the Local Authority do not directly commission weight management provision for children and young people in Torbay, however Public Health collaborates with commissioned services and wider partners to reduce rates of overweight and obesity across the life course though a targeted and whole systems approach. Some examples for Torbay include:

- Complications of Excess Weight (CEW) Community Pilot: A multi-disciplinary teambased service to improve food, nutrition, physical activity, and overall health outcomes while reducing BMI in a targeted group of neuro-divergent/SEND children and young people at Combe Pafford School. This ICB-funded scheme, developed with Torbay Council, builds on several national pilots. Depending on outcomes, there is potential to broaden numbers, eligibility, and include self-pathways via primary/secondary care.
- Breastfeeding: UNICEF Baby Friendly Initiative (BFI) Gold accreditation was awarded
 to Torbay's Public Health nurses' team for their collaborative work on supporting
 families with infant feeding and parent infant relationships. The team were
 recognised for their supportive and kind culture when supporting parent to
 breastfeed. Alongside this, Hitch have been commissioned to develop and infant
 feeding research and marketing campaign that addresses local barriers to
 breastfeeding.

- Body Image Workshops: Commissioned activities to combat the effects of social media on body image, focusing on weight, currently being researched as a joint approach across Devon.
- Vegetable Uptake: Commissioned activities to increase knowledge, consumption, and cooking of vegetables in school settings, currently being researched.
- School Food: Activities to maximize Free School Meal (FSM) uptake for Key Stage One (KS1), such as an agreed opt-out model for Devon. Currently, 20% of eligible children are not receiving FSM, compared to a 10% national average.
- Healthy Start Vouchers: Maximizing uptake of means-tested vouchers to assist with buying fruit, vegetables, and milk.
- Healthy Schools: Providing advice for whole school staff and parents on food and nutrition for children and young people.
- Torbay Neighbourhood Growing Programme: Using unused council land for community groups to grow fruit and vegetables, supporting cooking skills, utensil/white goods access, and measures to combat fuel poverty.

3. Child physical activity

This section looks at data taken from relevant surveys relating to physical inactivity and the impact inactivity has on children and young people. It details Torbay on the Move as a model that aims to improve physical activity across the area including for children and young people and covers some of the activities and interventions associated with the programme.

The Data

Data from the Adult Active Lives Survey and Children & Young People's Survey shows that almost half of children and young People are physically inactive. The impact of physical inactivity and obesity falls hardest on those from lower income backgrounds with the inactivity figure for adults significantly rising to one in three.

The percentage of Torbay children and young people reported as physically active has dropped by 11% in the last twelve months. This means that less of our Torbay children and young people are meeting the Chief Medical Officer guidelines of taking part in sport and physical activity for an average of 60 minutes or more every day.

Interventions and Programmes

Torbay on the Move was launched in 2021 as a series of recommendations that sought to increase physical activity levels in Torbay. Consultation with partners has increased our understanding of the strengths of Torbay and the opportunities for making a difference for our communities.

The Torbay on the Move strategy aims to support and encourage residents to be active in a way that works for them and at a level that provides significant benefits to physical and

mental wellbeing. The vision for Torbay on the Move is 'More people, more active, more often.'

Eight Strategic Outcome Themes have been identified for Torbay on the Move: · Active Environments · Active Travel · Active Schools · Active Health · Active Clubs · Active Places · Active for All · Active Workforces.

Delivery relating to children and young people to date includes:

- The Healthy Selfie Trail
- School Streets in Brixham
- Creating Active School Pilots at Paignton Academy and Ellacombe Academy
- Cared for Children event in partnership with the British Triathlon Foundation
- Delivery of Learn to Ride and L1, L2 and L3 Bikeability
- Opening School Facilities Programme
- Stormbreak Surge Programme Engagement
- Partnership working with the Youth Sport Trust to deliver programmes such as the Set for Success Programme with the Wimbledon Foundation and Athlete Mentor Programmes.
- Walking and Cycling Plan: Promoting sustainable, low-cost, low impact means of active travel.

Future delivery focus is on building partnerships, incorporating existing activity into the sector and considering how new ideas can be developed across Family Hubs, Early Years setting, education settings, youth clubs and mental health support teams.

4. Child oral health

This part of the report considers the data associated with poor dental health for children and young people in Torbay including access to dental services and hospital admissions for tooth extractions. The section considers the association between poor oral health and wider social and health outcomes and describes some of the key local interventions aimed at addressing the issue.

The Data

Children with dental problems may have poorer diets due to dental pain, have higher levels of school absenteeism as well as impaired concentration due to pain and interrupted sleep. Severely decayed teeth will often require extraction under general anaesthetic, exposing small children to low but significant life-threatening complications. Extractions in early years may also require extensive follow up including orthodontics.

As of September 2024, there were 2921 Torbay residents on the NHS dental waiting list, 2795 adults and 233 children/young people. This represents an increase of 107 children and young people since the last reporting period of December 2023. The access rate for dental services for children and young people is better than the England value. The percentage of children in care who have had their teeth checked is the same as the England value.

Hospital admissions for tooth decay for 0-19 years (caries as primary diagnosis) for 2022/2023 was 597 per 100,000 population (England 236 per 100,000 and the Southwest 240 per 100,000). There has been a 6.8% increase from 2021/2022 which is a smaller percentage increase than England (15%) and the Southwest (10%) but is still the highest rate in the Southwest with most admissions in the 5-9 age group.

Both Epidemiological Surveys for dental caries, Year 6-year Children (2023) and 5-Year-olds (2022) show an improvement – Torbay is no longer an outlier and in both cases are lower than the Southwest and England value.

Interventions and Programmes

Public Health has the mandatory duty for oral health in the population across the life course, but do not have the responsibility for dentistry. Since July 2023 this function has moved across from the NHS to the ICB and presents an opportunity for joint improvement and delivery as the issues of oral health and dental access are intrinsically linked.

Accordingly, there is a high degree of collaboration/joint delivery with the ICB, Devon County Council and Plymouth City Council as outlined in the joint delivery projects below and overseen by a new ICB Oral Health Steering Group established earlier this year.

Torbay oral health interventions and programmes of delivery are increasingly interconnected and system wide. Some examples include:

- Supervised Toothbrushing_in early years settings (Year 2 & Nurseries). 33 of 36 primary schools have signed up to the scheme, including Mayfield special school. This is an NHS contract but delivered in conjunction with Public Health nurses. It is a whole school approach but includes specific SEND measures such as tailored toothpaste and specialist training for teachers. Early Years settings in IMD deciles 1-5 are prioritised.
- Open Wide Step Inside is an evidence-based education programme for Year 2 children delivered in the classroom by Peninsula Dental School Oral Health Educators. 27 of 36 schools completed the programme in 2023/2024.
- First Dental Steps oral health education and pathway to NHS dentists for families with children under 1. This is an NHS contract but is delivered in conjunction with Public Health via Health Visiting. The lack of available NHS Dentists means families are currently being seen by Community Dentistry while on the NHS waiting list.
- Oral Health Education via Family Hubs_— Community Dentistry have trained Hub staff
 on brief intervention and toothbrush packs (paste and brushes) supplied by Public
 Health nurses for distribution to families attending the Hubs.

Examples of planned oral health interventions for Torbay include:

- Supervised Toothbrushing delivery within Family Hubs_(Home Dental, same provider for main NHS contract in schools
- Supervised Toothbrushing to Children in Care (semi-dependent 16-18). Delivery as above.

Public Health teams in Devon alongside Peninsula Dental School have negotiated with Devon ICB to secure NHS Dental contractual underspend to re-invest in Torbay to fund a suite of mitigating oral health interventions to offset the impact of reduced dental provision on children and young people in Torbay, as evidenced in the high rate of extractions under general anaesthetic in the 0-19 population.

This programme represents a significant re-investment in the Devon oral health system at approximately £1m a year for 5 years. As a result, interventions include:

- Extend Supervised Toothbrushing to cover Index of Multiple Deprivation (IMD) deciles 6-10 and include independent nurseries
- Establish a new fluoride varnish scheme to cover all primary schools in IMD deciles 1 The full procurement process applies. Alongside supervised toothbrushing,
 Fluoride varnishing is the best evidence-based population level intervention to implement
- Extending Open Wide Step Inside to cover all primary schools in IMD deciles 1-6.

The Oral Health Steering Group will oversee a new communications campaign, both workforce and public facing that will outline current programmes designed to improve dental access and oral health in the population as well as an update on emergency dental measures. This campaign was put on hold until the new Government plans regarding the national Dental Recovery Plan are known.

5. Immunisations

This section considers immunisation rates relating to children and young people in Torbay and discusses some of the activities associated with improving vaccine uptake.

The Data

Most immunisation data is managed by NHS England who stipulate information can be shared for management purposes only and is not to be published in the public domain. Data within this section is taken from the Public Health Outcomes Framework (PHOF) compiled by the Office for Health Improvement and Disparities (OHID).

The routine vaccination schedules for children from infancy to pre-school is designed to protect them from various serious diseases, including from:

- Measles, Mumps, and Rubella (MMR)
- Diphtheria, Tetanus, and Pertussis (DTaP)
- Polio (IPV)
- Haemophilus influenzae type b (Hib)
- Hepatitis A and B
- Chickenpox (Varicella)
- Pneumococcal disease
- Rotavirus

Influenza

For 2022/2023, Torbay had significantly higher rates of uptake across all infant and preschool vaccines when compared to the England average, although the majority sit slightly below the national target.

Vaccines are also given in the school setting, including those against the human papillomavirus (HPV), for both girl and boys aged 12-14 years, Meningococcal ACWY which protects against four types of meningococcal disease (aged 14 –15 years), and flu nasal vaccine annually.

School vaccination uptake rates across Devon are lower than the national target. HPV is a specific area for improvement. Latest published rates for 2022/23 are 67% for girls and 63% for boys for single doses, against England figures of 71% and 65%.

Childhood flu vaccine uptake is at or around the England average.

A particular issue locally is for the measles, mumps and rubella vaccine (MMR) second dose which is recorded at 89% for the latest publish year 2022/23. Although this is above the England rate of 85%, it needs to be above 95% to achieve heard immunity.

Respiratory syncytial virus (RSV) vaccination has been introduced for pregnant women from 1 September 2024, with vaccine given from 28 weeks to protect the infant in the early years of life. Torbay local maternity leads have an active programme in place.

Interventions and Programmes

The Vaccination and Screening Team (VaST), part of NHS England are responsible for commissioning the immunisation service in Torbay, and Kernow Health Community Interest Company (CIC) deliver the school aged immunisations in Torbay. Public Health is working locally with VaST, Kernow and local partners on activities to increase uptake.

Torbay Public health is part of the Devon wide Maximising Immunisation Uptake Group (MIUG), who look at actions to improve uptake across all programmes, with a current focus on MMR and school vaccinations.

Kernow Health CIC cover Devon, Plymouth and Torbay schools, and are actively working with schools to improve uptake across all school age vaccinations, including flu and HPV.

Public Health actively work with partners to improve childhood and maternal immunisation uptake, some activities include:

- Work with the vaccine maternity nurse to promote uptake of new RSV vaccine for pregnant women.
- Promotion of pertussis vaccine in pregnant women due to increase in cases.
- Continue work with VAST and school age immunisations provider to target schools with low vaccination uptake.
- Presentations in secondary and primary school assemblies.

• Work closely with Public Health nurses and Family Hubs to promote immunisation uptake.

6. One and 2.5 Year Developmental Reviews

This section considers the mandated health and development reviews at age one and 2.5, detailing the review process, outcomes from the health checks and discusses some of the integrated support available to children and families.

Health and Development Reviews

Mandated development reviews for children at age one and 2.5 years are part of the health and development checks provided by Public Health nurses. These reviews are designed to ensure that a child's development is on track and to address any concerns parents/carers may have.

The Public Health nurses see children and their families for development reviews either in a Family Hub or at home if the family are known to Children's Social Care. In 2023/2024, around 90% of children within the age range received a review. For children not seen for a review, primarily because the family chose not to engage, safeguarding processes are followed to ensure there are no concerns.

At both development reviews, the Public Health nurses along with the parent/carers use an evidence-based tool called Ages and Stages Questionnaires (ASQ) that are tailored to the child's exact age and can be used to determine potential additional support needs.

Children are assessed through the ASQ on communication, gross motor, fine motor, problem solving, personal-social and are scored for each domain. Children fall within the following categories:

- Low requires intervention and ongoing support
- Monitor requires low level intervention and review
- Pass is at an expected level of development

Children who fall within the monitor area are reassessed as part of a Torbay child development pathway, those in the low category and needing specialist intervention are referred to appropriate services.

All consenting families whose children fall within the low area receive referral to the Local Authority under Section 23 of the Education Act. A Section 23 notification is a formal process used by health professionals to inform the local authority if they identify a child under compulsory school age who has or is likely to have a SEND. Between October 2023 and September 2024 there were 126 Section 23 notifications made to the LA. There is no comparison data available for previous years as the process began in October 2023.

The Data

One-Year Review

Alongside the ASQ, this review typically includes checking the child's growth (weight and height), physical development, oral health and general health. The Public Health nurse will also discuss with the parent/carer their child's diet, sleep patterns, and any vaccinations they might need. The table below provides ASQ outcome data for the one-year development review for 2023/2024.

ASQ outcomes for the one-year development review by domain and score category 2023/24

	Low		Monitor		Pass	
Domain	No.	%	No.	%	No.	%
Communication	26	2.8%	94	10.1%	812	87.1%
Gross Motor	195	21.0%	102	11.0%	633	68.1%
Fine Motor	38	4.1%	76	8.2%	816	87.7%
Problem Solving	45	4.9%	74	8.0%	808	87.2%
Personal-Social	40	4.3%	75	8.1%	814	87.6%

2.5-Year Review

This review is more comprehensive and includes a detailed assessment of a child's physical, emotional, and social development. The public health nurse will check the child's speech and language development, motor skills, and social interactions through the ASQ assessment and interaction with the child. At this review the Public Health nurse and the parent/carer will also use a tool called Early Language Identification measure (ELIM) an evidence-based tool that can identify speech and communication needs early.

ASQ outcomes for 2.5 year development review by domain and score category 2023/24

	Low		Monitor		Pass	
Domain	No.	%	No.	%	No.	%
Communication	90	9.0%	90	9.0%	815	81.9%
Gross Motor	60	6.0%	73	7.3%	862	86.6%
Fine Motor	29	2.9%	131	13.2%	834	83.9%
Problem Solving	66	6.6%	56	5.6%	874	87.8%
Personal-Social	65	6.6%	88	8.9%	838	84.6%

Based on ASQ scores, the percentage of children achieving a good level of development at 2.5 years has increased by 1.7 percentage points from 77.9% in 2021/22 to 79.6% in 2022/23. It has gone from red to amber due to the slight increase and because England has had a decrease (from 81.1% to 79.2%). What is worth noting is that the Torbay percentage has decreased from pre-Covid levels as in the table below. In 2022/23 it has not further declined.

Children achieving a good level of development at 2.5 years, 2017 – 2023

	Torbay	England
2017/18	91.1%	83.3%
2018/19	87.2%	84.1%
2019/20	91.4%	83.3%
2020/21	84.0%	82.9%
2021/22	77.9%	81.1%
2022/23	79.6%	79.2%

Interventions and Programmes

Children identified as needing moderate or specialist interventions based on their developmental reviews receive assistance from a broad range of interconnected support from:

- Torbay LA Children's Social Care
 - Early Years Settings
 - Portage Home visiting educational service for pre-school children with SEND
 - Home Learning Environment
 - Early Years Consultant
 - o Family Hubs
- Torbay 0-19 Service (commissioned by Public Health and Children's Services)
 - Public Health nurses
 - Action for Children
- NHS Devon
 - Child and Family Health Devon (CFHD) Speech and Language Therapy (SALT)

Torbay services involved in early development and families have designed and implemented a local integrated pathway for the 2.5 ASQ development review, which has led to improved communication across provision including with nurseries and child minders. The overarching aim of the pathway is to ensure children access support at the earliest opportunity, improve systems and processes associated with the developmental reviews, and reduce the number of escalations and Section 23 Notifications.

In September 2024, Section 23 Notification meetings were expanded to include all Torbay providers involved in supporting children identified from their developmental reviews as needing specialist support and increased to taking place twice termly.

With the aid of government grant funding for Family Hubs Start for Life, Torbay has expanded and enhanced childhood development and school readiness interventions for

children falling in the moderate or low areas of development. Despite uncertainty around the continued funding, this enhanced offer of support will continue to be provided through Children's Social Care and Public Health commissioned services. Examples of the support offer available to children and families requiring moderate to specialist support includes:

- NHS Devon Child and Family Health Devon (CFHD) Speech and Language Therapy
- NHS Devon CFHD Speech and Language Therapist based at St Edmund's Family Hub
- Children's Social Care The Portage service One-on-one Small Steps groups for preschool children displaying additional needs. The portage team also provides workshops each term at each Family Hubs venue on developing independence skills, total communication and supporting play and interaction.
- Children's Social Care The Home Learning Environment (HLE) outreach worker
 provides Chat, Play, Read support to families, many of whom experience social
 anxiety. As a result, a parenting group, People Supporting Parents and Children to
 Learn Together, was developed that supports families to develop parent interactions
 and support speech, language and communication, and personal, social, emotional
 development.
- 0-19 Service Action for Children provide one-on-one talk and play sessions for children experiencing moderate support needs. They also run developing toddler and Let's Talk and Play sessions, the most accessed provision in the Family Hubs. Action for Children programmes are offered in all three Family Hubs in Torbay.
- 0-19 Service Public Health nurses provide one-on-one support to children and families.
- Chat, Play, Read Across the sector, the Chat, Play, Read initiative is promoted widely and families are guided on how to bring activities that promote communication and learning development into everyday life.

7. Conclusion

In summary, this report highlights the current situation of child health and development in Torbay and the data reveals both progress and ongoing challenges in all areas. While there are areas of improvement, significant challenges remain. Addressing these issues requires a coordinated effort from the local authority, health services, education, community organisations and families to ensure that all children and young people in Torbay can achieve optimal health and development outcomes. Continued focus on reducing disparities, particularly for those in deprived areas and with SEND, will be crucial in making further progress.