

Better health outcomes for children and young people

Our pledge



“The foundations for virtually every aspect of human development – physical, intellectual, and emotional – are laid in early childhood.”

(Marmot)

Children and young people growing up in England today are healthier than they ever have been before. Health care and social changes have had dramatic impacts. Previously common killer diseases are now rare. More children with serious illnesses and disabilities are surviving into adulthood and the infant mortality rate has fallen to less than a quarter of what it was at the beginning of the 1960s.

But international comparisons and worrying long-term trends demonstrate there is room for improvement, with poor health outcomes for too many children and young people compared with other countries. A smaller group of more vulnerable children – such as looked after children – suffer much worse outcomes. The variation in outcomes and quality of healthcare for children and young people is unacceptable. The clear evidence that pregnancy and the earliest years are critical to the future health and wellbeing of children and adults and that evidence-based early interventions can have significant positive impacts does not always inform how services are commissioned.

The need for improvement is not new; numerous reports have highlighted the issues. Individual initiatives have led to improvements in specific areas, but have not resulted in the system wide changes required to improve outcomes. What is new is the opportunity to ensure the focus on outcomes in the new health and care system includes children and young people clearly and explicitly, from conception through to adulthood.

We are committed to improving the health outcomes of our children and young people so that they become amongst the best in the world.

System-wide change is required to achieve this and each part of the system, at each level, has a vital contribution to make. To this end we pledge to work in partnership, both locally and nationally, with children, young people and their families.

Our shared ambitions are that:

- 1** Children, young people and their families will be at the heart of decision-making, with the health outcomes that matter most to them taking priority.
- 2** Services, from pregnancy through to adolescence and beyond, will be high quality, evidence based and safe, delivered at the right time, in the right place, by a properly planned, educated and trained workforce.
- 3** Good mental and physical health and early interventions, including for children and young people with long term conditions, will be of equal importance to caring for those who become acutely unwell.
- 4** Services will be integrated and care will be coordinated around the individual, with an optimal experience of transition to adult services for those young people who require ongoing health and care in adult life.
- 5** There will be clear leadership, accountability and assurance and organisations will work in partnership for the benefit of children and young people.

We all have a part to play in promoting the importance of the health of our children and young people.

Through our joint commitment and efforts we are determined to:

- **reduce child deaths** through evidence based public health measures and by providing the right care at the right time;
- **prevent ill health for children and young people and improve their opportunities for better long-term health** by supporting families to look after their children, when they need it, and helping children and young people and their families to prioritise healthy behaviour;
- **improve the mental health of our children and young people** by promoting resilience and mental wellbeing and providing early and effective evidence based treatment for those who need it;
- **support and protect the most vulnerable** by focusing on the social determinants of health and providing better support to the groups that have the worst health **outcomes**;
- **provide better care for children and young people with long term conditions and disability** and increase life expectancy of those with life limiting conditions.

Because

- the all-cause mortality rate for children aged 0 – 14 years has moved from the average to amongst the worst in Europe¹
- 26% of children's deaths showed 'identifiable failure in the child's direct care'²
- more than 8 out of 10 adults who have ever smoked regularly started before 19³
- more than 30% of 2 to 15 year olds are overweight or obese⁴
- half of life time mental illness starts by the age of 14⁵
- nearly half of looked after children have a mental health disorder and two thirds have at least one physical health complaint⁶
- about 75% of hospital admissions of children with asthma could have been prevented in primary care⁷

Building momentum

At national level a new **Children and Young People's Health Outcomes Board**, led by the Chief Medical Officer, will bring together key system leaders in child health to provide a sustained focus and scrutiny on improving outcomes across the whole child health system.

A new **Children and Young People's Health Outcomes Forum** will provide both ongoing expertise in child health and offer constructive challenge to the next phase of this work. The Forum will hold an annual summit involving the CMO to monitor progress on child health outcomes and make recommendations for their improvement.

The Children and Young People's Health Outcomes Forum report and system response can be found at <http://www.dh.gov.uk/health/2012/07/cyp-report/>

For the very first time, everyone across the health and care system is determined to play their part in improving health outcomes for children and young people.

¹ Wolfe I, Cass H, Thompson MJ et al. Improving child health services in the UK: insights from Europe and their implications for the NHS reforms. *BMJ* 2011; 342:d1277

² CEMACH report 2008

³ Healthy Lives, Healthy People – our strategy for public health in England. Department of Health (2010)

⁴ Health Survey for England 2010

⁵ Kessler R, Angermeyer M, Anthony J et al. Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative. *World Psychiatry* 2007 Oct; 6(3):168-76

⁶ DfE Outcomes for children looked after as at 31 March 2012

⁷ Asthma UK. Wish you were here – England (2008).