

2019/20

Annual Public Health Report

Helping
Every Child
to Thrive





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Introduction

Sutton is a great place for families to settle, raise their children, and enjoy a good quality of life. The majority of local children have supportive families, access to good education and services, and a strong sense of community. These factors help them to thrive and succeed.

However, in Sutton, as in most other parts of London, too many children are not able to benefit from the opportunities and support available to them. This year, the Annual Public Health Report describes some of the key challenges which can prevent children from thriving and in particular focuses on three key priorities which Sutton partners have identified in our Sutton Health and Care Plan:

- school readiness
- the mental wellbeing of children and young people
- supporting families and children with special educational needs.

Each of these themes is explored in more detail in this report to illustrate the role that families, communities, the voluntary sector and services all play in supporting children to thrive and achieve their potential. This approach is helpful to understand the complexity of each of these priorities and to demonstrate how tackling them goes beyond the remit of a single agency or organisation to solve. Our ambition in Sutton is to build on our excellent track record of partnership working and health and social care integration to provide a 'system-wide approach' to improve outcomes for all of our children.

We hope that this call to action stimulates discussion and helps local partners, from all sectors, to commit to finding ambitious solutions to tackle the barriers that reduce the opportunities for children to reach their full potential.



Dr Imran Choudhury
Director of Public Health



Ruth Dombey
Leader of the Council



Background

Sutton is a relatively affluent borough with good schools. This makes it a popular place to raise children. Most children and young people living in Sutton thrive because they are supported and nurtured by parents and carers who are:

- happy and healthy with a network of supportive friends and relatives
- educated and able to make informed decisions to promote their child’s health and happiness
- in regular work that provides a steady household income, sufficient to meet their needs
- living in a home that is safe and warm
- able to access appropriate services when they need them
- living without fear of discrimination.

This gives children the best start in life, helping to protect them from factors that could impact their development and life chances.

However, despite Sutton’s affluence, there are variations within the borough that can affect a child’s chances to ‘start well’. These inequalities can have lifelong implications because of their impact on a child’s health, wellbeing, education and development. Reducing inequalities is vital both for families living in Sutton and for the future productivity and prosperity of the local economy.

Population

Sutton has a population of approximately 205,900 people, a quarter of whom are aged 19 years or younger. The wards with the highest percentage of 0-19 year olds are St. Helier and Wandle Valley.

Sutton Population estimates by age group and gender, 2018¹

Persons			Males		Females	
Numbers	%		Number	%	Number	%
0–4	14,100	7%	7,300	7%	6,800	6%
5–9	14,600	7%	7,500	7%	7,000	7%
10–14	12,800	6%	6,600	7%	6,300	6%
15–19	10,700	5%	5,600	6%	5,100	5%
0–19	52,200	25%	27,000	27%	25,200	24%
All ages	205,900	100%	100,500	100%	105,400	100%

Source: ONS 2016-based subnational population projections

The population of children and young people is expected to grow

According to ONS estimates, Sutton's population will grow by 8% during the next decade. In the same period, the population of children and young people (aged 0 to 19 years) is expected to increase by 10%. This is higher than London (7%) and England (5%). The wards estimated to have the highest increase of children and young people are Sutton North (22%), Wandle Valley (19%) and Sutton Central (16%). Our growing population of children and young people means that there will be increased demand for school places and children's services in Sutton.

Sutton is becoming more diverse

Sutton has become increasingly diverse over the last decade. In 2018, nearly 1 in 2 primary school children in Sutton were from minority ethnic groups. The changing ethnic composition of the community has implications for how we plan and deliver services. For example, some groups access health services differently, and different languages might create communication challenges for families, schools and services. Schools and health and care professionals can help by tailoring the advice and support they give to children and families.

Non – UK parents

In 2017, **47.3%** of all live births in Sutton (1,250 babies) were to non-British mothers. This was above the national average (**34.8%**) but lower than London.



Source: PHE Fingertips

First Language

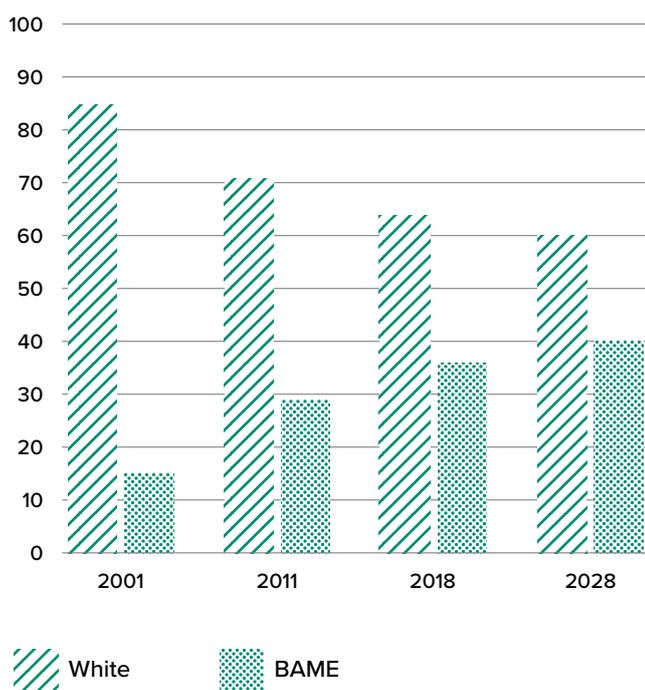
In Sutton's primary schools, **30.5%** of children have a first language other than English. This is higher than the England average (**21.2%**).

In Sutton's secondary schools, **24.2%** of children have a first language other than English. This is also higher than the average for England (**16.6%**).



Source: LAIT

Graph to show the change to the white and BAME populations in Sutton



Source: TBC

Inequalities

Girls born in Sutton have an average life expectancy of 84.3 years, and boys 80.8 years. Nationally, the equivalent figures are 83.1 and 79.6 respectively. However, life expectancy at birth varies across the borough. Children born in more affluent parts of Sutton are expected to live between 6-7 years longer than children born in less affluent circumstances.²

This variation is also reflected in the number of years that babies born in Sutton will live in good health. On average, children born in the least deprived parts of Sutton will spend an extra 3-5 years in good health than those born in the most deprived areas.³

Giving children in Sutton the best start in life is a fundamental part of improving health and reducing health inequalities. Reducing health inequalities means giving everyone the same opportunities to lead a healthy life, no matter where they live or who they are.



Source: Public Health England

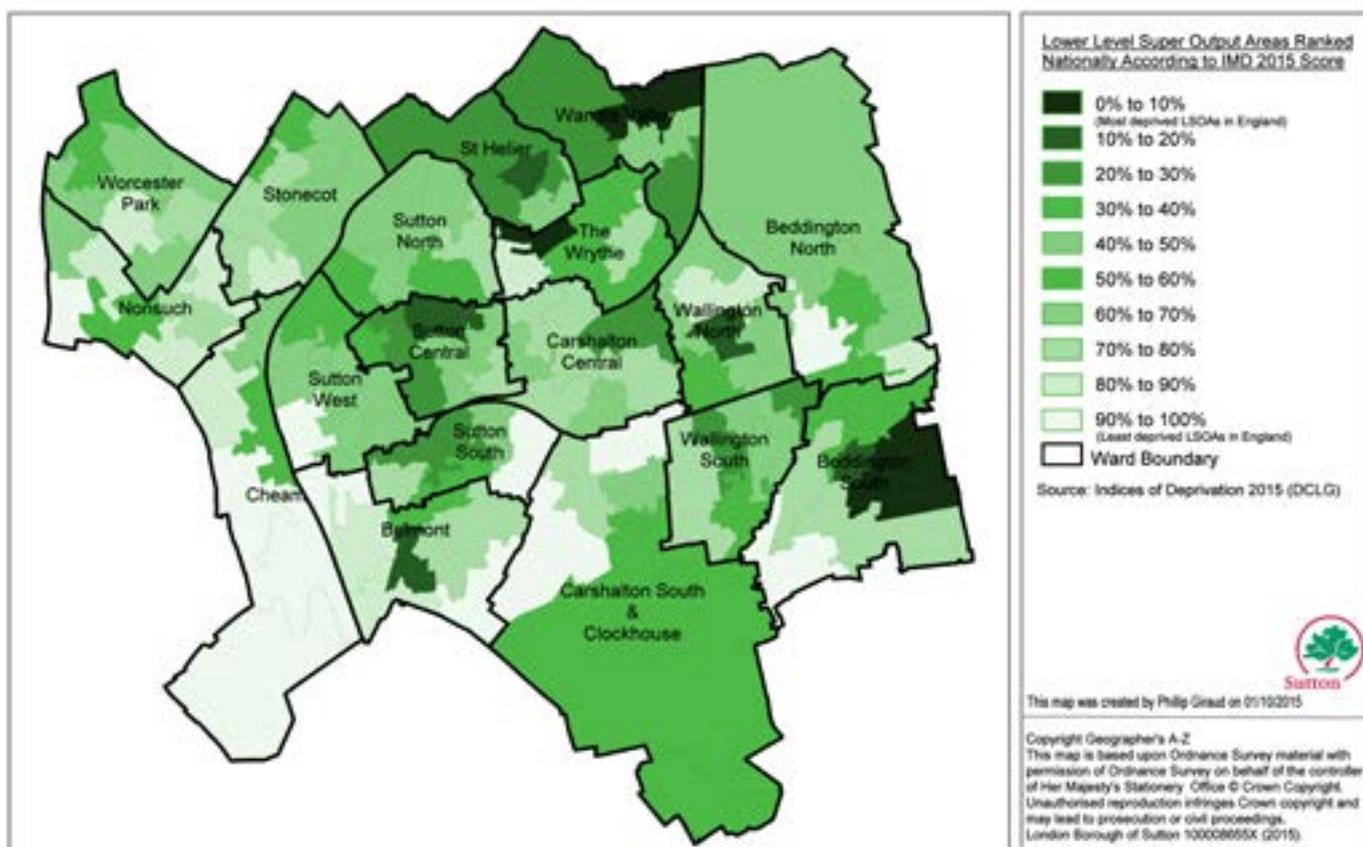
The circumstances in which people are born, grow, live, work, and age are referred to as the social determinants of health. There is a social gradient across many of these determinants and children who are growing up in more deprived parts of Sutton often suffer disadvantages, from educational attainment through to employment prospects. The conditions and environment that a child is born into can make it more likely that they will need support because of poverty, homelessness, educational attainment, or adverse childhood experiences.

Childhood Poverty

In 2016, it was estimated that 3,850 (9.8%) children in Sutton were living in poverty. This was lower than the average for England (17.0%) and London (18.8%).

The ward with the highest percentage of children living in poverty was St Helier (18%), while the ward with the lowest percentage was Cheam (4.3%).⁴

Income Deprivation Affecting Children Index Indicies of Multiple Deprivation 2015, Lower Super Output Areas (LSOAs) by Nationally Ranked Deciles



Source: Sutton JSNA

Policy change and welfare reform

Over the last few years, there have been a number of changes to the welfare and benefits system. These ambitious reforms were put in place to simplify the process of claiming benefits and to support people into employment. However, there is growing evidence that austerity policies have disproportionately impacted families with children, particularly those already at the greatest risk of poverty. These include lone parents, families already on low incomes, larger families, families with young children, and families where someone is disabled.⁵

In Sutton, there are a range of organisations which are committed to supporting families increase their income through employment and the maximisation of benefits. These include the Council's Welfare Reform team, Sutton Citizens Advice Bureau and Christians Against Poverty.

Health and housing

A warm, safe home is a place where children and families can connect to their community, school, work and services. Children thrive in routines and environments which are familiar to them. By contrast, the instability and unfamiliarity of temporary accommodation provides a significant barrier to children starting well. In Sutton, a large number of homeless families are living in temporary accommodation. These circumstances can create uncertainty that impacts upon a child's physical and mental health and their education, relationships and safety.⁶

Evidence suggests that children who have been living in temporary accommodation for more than a year are three times more likely to experience mental health problems, such as anxiety and depression, compared to their non-homeless peers.⁷ Homelessness also affects parents and disrupts family life. It can lead to social isolation and create challenges that make it harder to support and nurture a child.⁸ Not having a permanent address can make it harder to register for services or to receive information about childhood vaccinations or appointments. Families placed in temporary accommodation outside of Sutton may have further to travel to school. This can isolate children from friends, and affect their academic attendance and performance.⁹

Food Banks

Last year the Trussell Trust reported an increase in the use of food banks by Universal Credit claimants.



In Sutton, **955 vouchers** were issued for the Food Bank between January and December 2018. Of the people who attended, **31.6%** did so because of low income, **21.0%** because of benefits delay and **17.5%** because of changes to their benefits. **18%** were families and **20.5%** were single parents.

Source: Sutton Food Bank

Homeless households living in temporary accommodation



Since 2014 there has been an increase in homeless households living in temporary accommodation.



637 homeless households living in temporary accommodation.



In 2017, nearly **45%** of placements in temporary accommodation were outside of Sutton.



864 children living in temporary accommodation at this time.

Sutton Council is committed to tackling this problem by increasing the number of new and affordable council houses and by helping to drive economic growth and investment within the borough.¹⁰ The Council also provide advice and information for

people at risk of homelessness, while a range of local organisations (including the Council’s Welfare Reform team and Sutton Citizens Advice Bureau) support people struggling with debt and rent arrears.

Low income and educational attainment

Children growing up in less affluent families in Sutton are more likely to do worse at school than other children.¹¹ Eligibility for free school meals (FSM) is used as a proxy measure for socioeconomic disadvantage. In education, eligibility for FSM is used to monitor the gap in achievement between children from low income families and their more affluent classmates. In Sutton, as elsewhere in the UK, this gap in achievement is already evident when children begin school and it persists throughout compulsory education (ages 5-18).

In Sutton, children who are eligible for FSM are overrepresented in pupil referral units and are more likely to be excluded from school than their peers. In 2016-17, half of all pupils with a fixed period exclusion in Sutton were eligible for FSM.

Pupils eligibility for FSM

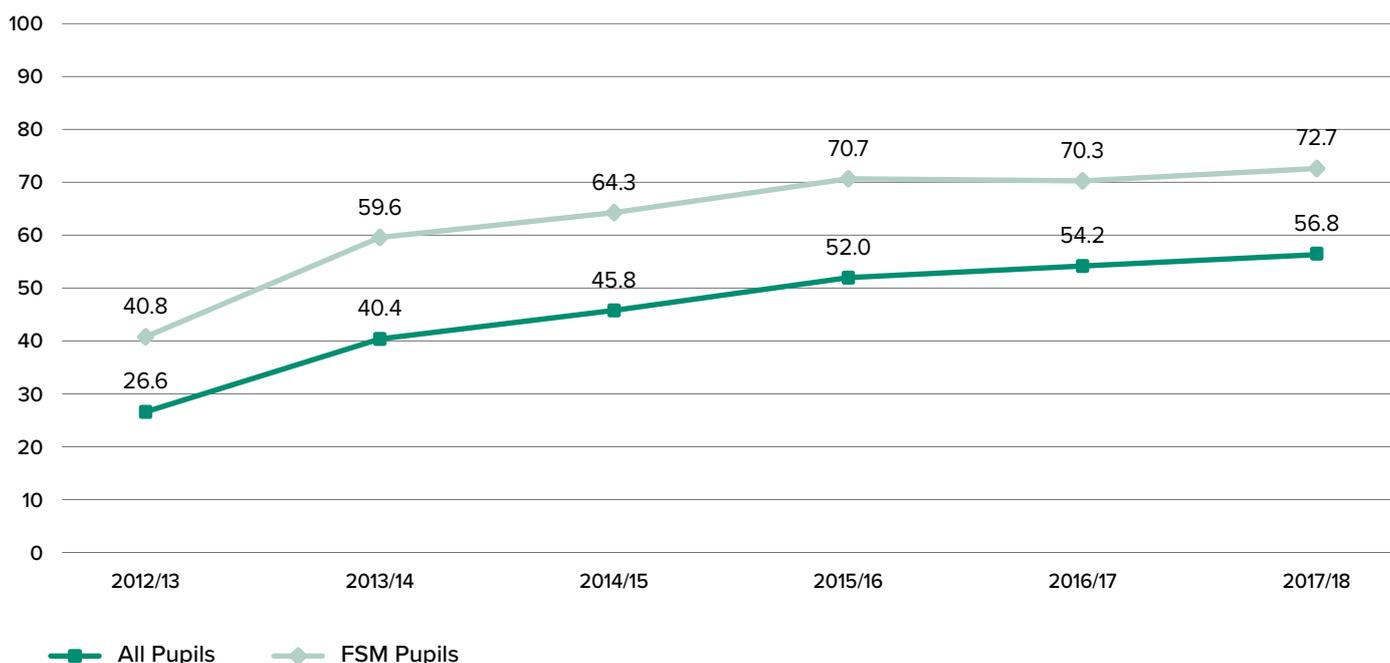


72% of children are achieving a good level of development at the end of reception.



This is significantly less for children who are claiming FSM. Only **56.8%** of these children are achieving a good level of development at the end of reception.

Gap in the percentage of children achieving a good level of development at the end of reception between all children and children receiving a FSM, Sutton



Source: PHE Fingertips

Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) are traumatic events that affect children while growing up. These experiences include physical and emotional abuse, neglect, parental mental illness, substance misuse and domestic violence. Experiencing ACEs, without supportive adults in a child's life, can cause what's known as toxic stress. This excessive activation of the stress-response system can have long lasting effects on the body and brain. The more ACEs a child experiences, the more likely they are to struggle with poor academic achievement, poor employment prospects, and substance abuse later in life.

While children who suffer ACEs have an increased risk of poor outcomes, many who experience ACEs do not suffer these effects. Supporting children and families to reduce sources of toxic stress, develop supportive relationships and strengthen core life skills, are all practical ways to mitigate the harmful impact of ACEs.

This QR code is a link to a film to raise awareness of ACEs, their potential to damage health across the life course and how different organisations can play a role preventing them and supporting those affected.



Parental Substance misuse

Most parents and carers who drink alcohol or use drugs do so in moderation and don't present an increased risk of harm to their children. However, parents and carers who misuse substances often have chaotic, unpredictable lifestyles, meaning that they struggle to provide their children with safe care and clear boundaries.¹² In these environments, children's lives may lack routine and they may take on caring roles, helping out at home or providing their parents with support.

In Sutton, parents affected by substance misuse issues are supported by the Inspire Partnership, which is a community drug and alcohol service for anyone over the age of 18 years.

Preventing ACEs in future generations could reduce levels of:



Early Sex
(before age 16)
by 33%



Unintended teen pregnancy
by 38%



Heroin/crack use
(life time)
by 59%



Violence victimisation
(past year)
by 51%



Smoking
(current)
by 16%



Binge drinking
(current)
by 15%



Violence perpetration
(past year)
by 52%



Incarceration
(lifetime)
by 53%



Cannabis use
(lifetime)
by 33%



Poor diet
(current < 2 fruit and veg portions daily)
by 14%

Source: www.cph.org.uk

Domestic Abuse

Children’s well-being is also affected by their emotional environment. Living with domestic abuse can make it harder for parents to support their children. Domestic violence is an issue in Sutton, accounting for more than a third (38%) of all incidents of violence with injury in the borough. However, as domestic abuse is a crime that often goes unreported, the actual number of cases is likely to be higher.¹³ Low income, economic strain, and benefit receipt are all risk factors for domestic abuse.¹⁴

A partnership of organisations are working together to tackle domestic abuse in Sutton. The Domestic Abuse Transformation Programme has secured additional investment to improve services, including work with schools. ‘Not Alone in Sutton’ is a local resource developed to provide advice and information to support people concerned or experiencing domestic abuse.

Children receiving support from Children’s Services

Children in Sutton who have experienced ACEs may need support from Children’s services. Children’s safeguarding partnership arrangements are overseen by the Local Safeguarding Children’s Board. Sutton’s Multi-Agency Safeguarding Hub (MASH) is the single point of referral. The main aim of the MASH is to improve the quality and efficiency of information sharing and decision making between agencies to ensure the best outcomes for children and young people. The Council also supports children requiring protection, children in care (including fostering and adoption), and young people leaving care.

Troubled Families is a programme of targeted intervention for families with multiple problems, including crime, anti-social behaviour, truancy, unemployment, mental health issues and domestic abuse. In Sutton, families that have been identified for the programme are assigned a key worker who can act as a single point of contact. The key worker engages with the family and develops a plan to tackle any issues that they are facing. They also help to link and refer the family to a range of supportive services.

Areas	2018 rate per 10,000 children		
	Children in Need	Children with a Child Protection Plan	Looked after Children
England	341.0	45.3	64.0
London (outer)	327.2	37.3	45.0
Sutton	328.6	55.8	45.0

Source: LAIT

Summary

The next sections of the report focus on: school readiness, resilience and mental wellbeing and SEND. These are the key areas that partners agree offer the best opportunity to intervene and reduce inequalities for children and young people in Sutton.



School Readiness (0–5 years)

Getting ready for school starts at birth, and school readiness at age 5 has a strong impact on a child's future educational attainment and life chances. Evidence shows that modifiable factors in a child's early experience can greatly affect their learning and development. Early identification of these needs can support children to thrive at school socially, emotionally, cognitively and physically.

The first 1,000 days

The first 1,000 days (which include the nine months of pregnancy and the first two years of the baby's life) are an important opportunity to influence a child's physical and emotional health and wellbeing. In this

period of rapid growth and development, family circumstances, and the decisions that a family makes about lifestyle, food and nutrition, can have lifelong implications for the child.

Encouraging a healthy pregnancy



Source: Public Health England

Emotional wellbeing in pregnancy

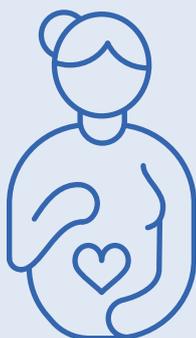
Mental illness is one of the biggest health risks during pregnancy. Anyone can develop mental health problems during pregnancy or in the first year after birth, but mothers who have experienced previous depression, poverty, migration, extreme stress, domestic abuse or poor social support are at greater risk.¹⁵

When perinatal illness is not recognised or treated effectively, it can affect the mother-baby relationship and have long-term effects on children's emotional, social and cognitive development. Ensuring that all women in Sutton receive access to the right type of care during the perinatal period is a key priority. The Sutton Perinatal and Infant Mental Health Network is bringing professionals together to improve outcomes for families in Sutton.

Maternal mental health

In Sutton, **2,651** women gave birth in 2016. During the perinatal period, it is estimated that **568** were affected by common mild mood changes and **318** by common mental health problems, including anxiety disorders and depression. The risk of developing more severe mental health conditions is lower but does increase after childbirth.

Source: PHE Fingertipss



Perinatal Mental Health

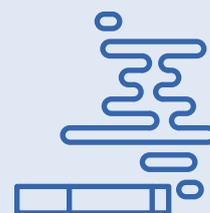
Sutton's Perinatal and Infant Mental Health Network draws together a range of organisations and individuals that have frequent contact with the mother, baby and family during the perinatal period. The network are committed to integrating and improving physical and mental health care for women during and after pregnancy. The network (which includes maternity, general practice and health visiting services) has developed a range of projects including a toolkit for healthcare professionals, training, a local Perinatal Mental Health Support Group, and a peer support service.

Lifestyle and pregnancy

Pregnancy can be a strong incentive for women to make lifestyle changes. Stopping smoking, cutting out alcohol and keeping to a healthy weight are all ways that women can improve the chances of a healthy pregnancy.

Smoking during pregnancy

142 women were still smoking at the time of delivery in Sutton in 2017/18, equivalent to **6.5%** of all women who gave birth that year. Although this proportion is similar to London (5%) and significantly lower than England (10.8%), this still means that one in every 15 babies born in Sutton was at increased risk of premature birth, low birthweight and unexpected death in infancy.



Source: PHE Fingertipss

Stopping smoking during pregnancy both reduces the risk of harming the unborn child, and the risk of harming the baby, through exposure to secondhand smoke, after birth. There is good evidence that early interventions can improve smoking cessation outcomes.^{16 17} Rates of smoking in pregnancy in Sutton have remained fairly constant since 2010 while nationally, rates have fallen. In Sutton, midwives support women wanting to quit smoking by encouraging them to attend local pharmacies, which are commissioned to deliver smoking cessation services.

The QR code provides a link to a short film about the Sutton Perinatal and Infant Mental Health Network and the work they are doing.



Breastfeeding

Studies have suggested that breastfeeding has a positive impact on children's emotional development and their attachment with their mother. Secure attachment can positively impact a child's resilience and their physical and mental health.

Breastfeeding provides the baby with nutrition and protection from infection. Breast fed babies experience a number of benefits during childhood, with lower rates of gastroenteritis, respiratory infections, obesity and allergies than non-breastfed

babies.¹⁸ However, not all babies born in Sutton share these advantages, and breastfeeding rates tend to be lower amongst young mothers and those from more disadvantaged groups. Any period of breastfeeding provides health benefits for both baby and mother. The longer the time spent breastfeeding, the greater these benefits are. The Department of Health recommends exclusive breastfeeding for the first 6 months.

Breastfeeding

In Sutton, **83.0%** (2016-2017) of women started to breastfeed their baby after they were born, which was better than the national average (74.5%). The proportion still breastfeeding 6-8 weeks later fell to around **60%** but was still above the national average (42%).



Source: PHE Fingertips

UNICEF Baby Friendly Initiative

Although breastfeeding is not an easy choice for every mother, creating the right environment to promote and support breastfeeding is crucial. In Sutton, St Helier's Hospital Maternity Services has achieved UNICEF Baby Friendly gold accreditation and Sutton's Health Visiting service is working towards gold accreditation. The UNICEF UK Baby Friendly Initiative provides a robust evidence-based framework to ensure that good quality support is available across the community for all mothers and babies, whether breastfeeding or bottle feeding.

Childhood vaccinations

Childhood immunisation programmes support good health and early development, and reduce the risk of the spread of preventable infectious disease. Childhood vaccination programmes also protect vulnerable members of the community from serious infectious diseases, such as measles, whooping cough and diphtheria. Protecting children from infectious diseases can reduce school absence and avoid hospital admissions.

Although there has been a recent increase in the uptake of the measles, mumps and rubella vaccination (MMR), the proportion of children in Sutton who receive two doses of MMR vaccine by age 5 years (82.1%) remains lower than England (87.2%). Coverage in Sutton is significantly lower than the **95%** recommended by the World Health Organisation.

Source: PHE Fingertips

Parenting

A nurturing caregiving relationship is vital for all children and good parenting provides a buffer against adversity. Parenting is an important modifiable risk factor for mental health problems in children and promoting healthy parenting is a key way to reduce this risk. Research shows that support for families should focus on the quality of parent child relationships, parenting styles, and infant and child

nutrition (including breast-feeding and healthy eating). Parental mental illness and parental lifestyle behaviours such as smoking, and drug and alcohol misuse are also important risk factors for childhood mental health problems. Timely identification and early intervention can support families and avoid these problems from escalating.¹⁹

Speech and language development

The ability to use and understand language is essential for all children. Learning to talk helps children to manage their emotions and communicate feelings, build relationships and learn to read and write. Children learn language in a relatively short space of time which is why the preschool years are so crucial, with parents and early years workers playing a vital role in encouraging children’s communication development.

Language difficulties can predict problems with learning and may also indicate issues with behaviour and mental health.²⁰ It is therefore important that they are recognised early. Health visitors are in a unique position to identify problems and to refer children who need support to speech and language therapy services. In Sutton, nearly 1 in 10 children fail to reach the expected level of development in communication skills by the age of 2 ½ years, similar to the England average.²¹

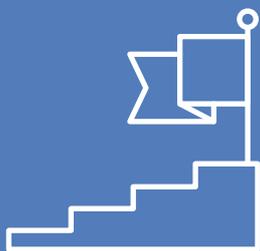
What are we doing now?

The Healthy Child Programme

The Healthy Child Programme is at the heart of Sutton’s public health services for children and families. These services cover care from 28 weeks of pregnancy through to age 5. The Healthy Child Programme is a universal service which offers additional services for families needing extra support. The programme comprises of screening, health and development reviews, and advice to support children’s physical and emotional development. This programme is led by health visitors in collaboration with other health professionals, including GPs, midwives, paediatricians and Portage.

Development Reviews

In Sutton, **96.6%** (2017-18) of children aged 2-2½ were offered a development review as part of the Healthy Child Programme. Of those attending a review, **86.0%** had reached or were above the expected level of development in communication, gross motor, fine motor, problem solving and personal-social skills.



Source: PHE Fingertips

The Healthy Child Programme: Pregnancy to age 2



Prenatal: 28 weeks

Antenatal contact

- Antenatal care and screening
- Health and social care assessment.



Birth to 8 weeks

New birth review / 6–8 week review

High impact areas:

- transition to parenthood and the early weeks
- breastfeeding
- maternal mental health.



Aged 1

9–12 month review

High impact areas:

- healthy weight, healthy nutrition
- managing illness and unintentional injuries.



Aged 2: ready to learn

2–2½ year review

High impact areas:

- health and wellbeing and development aged 2.

Children's Centres and the Family Information Service

Sutton's children's centres provide a range of community health services, and parenting and family support for families with children under five. Children's centre staff are well placed to promote lifestyle messages, as well as opportunities for free childcare entitlement to families.

In Sutton, children's centre administrators are Family Information Service (FIS) trained. They are able to provide free information and advice for children and young people aged between 0-19 (and up to the age of 25, if the young person has an additional need). The FIS holds up to date information about Ofsted-registered childcare providers which residents can use to locate registered childminders, day nurseries and preschools in Sutton.²² They also signpost welfare and benefits advice and promote Healthy Start to families.

Ensuring families have access to good childcare

Access to good quality, early years childcare supports children's early language, literacy, and numeracy skills. Every 3 or 4 year old child (and some 2 year olds) is entitled to 15 hours of free childcare each week from an approved childcare provider. 3 or 4 year old children with working parents may be entitled to 30 hours per week. These entitlements are promoted to Sutton residents through children's centres, the Family Information Service (FIS), health visitors, childcare providers and the Council's communications team.

Community Paediatrics and Children's Therapies

In Sutton, the community paediatric service is based at Queen Mary's Hospital for Children, which is on the St Helier Hospital site. The team offers specialist medical assessment and support for children and young people with a range of conditions (including developmental disorders, and social communication disorders like Autism and Aspergers). The Therapy services (Speech and Language Therapy, Physiotherapy and Occupational Therapy) work closely with this team, and with parents, carers, health and education professionals, to support children in becoming as independent as possible.

Local Initiatives

Collaboration between the Healthy Child programme and children's centres.

To support children and families most effectively, services need to be accessible and coordinated. This relies upon close working relationships between organisations. In 2016, Sutton's Healthy Child services were brought into children's centres for the first time. This move brought teams with complementary skills and objectives together in one site. Staff have forged close working relationships, allowing families to benefit from more convenient, joined-up care.

Voluntary Sector and Community Services

There are a number of voluntary services that provide in-the-community services for families and parents. One example is Home-Start - working to support families with young children. The service is largely delivered by Sutton-based parents who are trained to support other families in need of practical and emotional support. This includes;

- One to one support
- Parenting programmes run throughout the year
- Advocacy support
- Supporting parents affected by domestic abuse
- Signposting to services across the borough.

Summary

Sutton Health and Care partners are committed to build on excellent services by exploring opportunities to improve integration. They will work with partners from the wider system, to tackle complex issues like housing, social isolation and service fragmentation for children and young people. Their collaborative knowledge and insights from education, corporate care and housing will inform the Sutton Children's Review to ensure the best use of available resources.



Resilience and mental wellbeing (5–19 years)

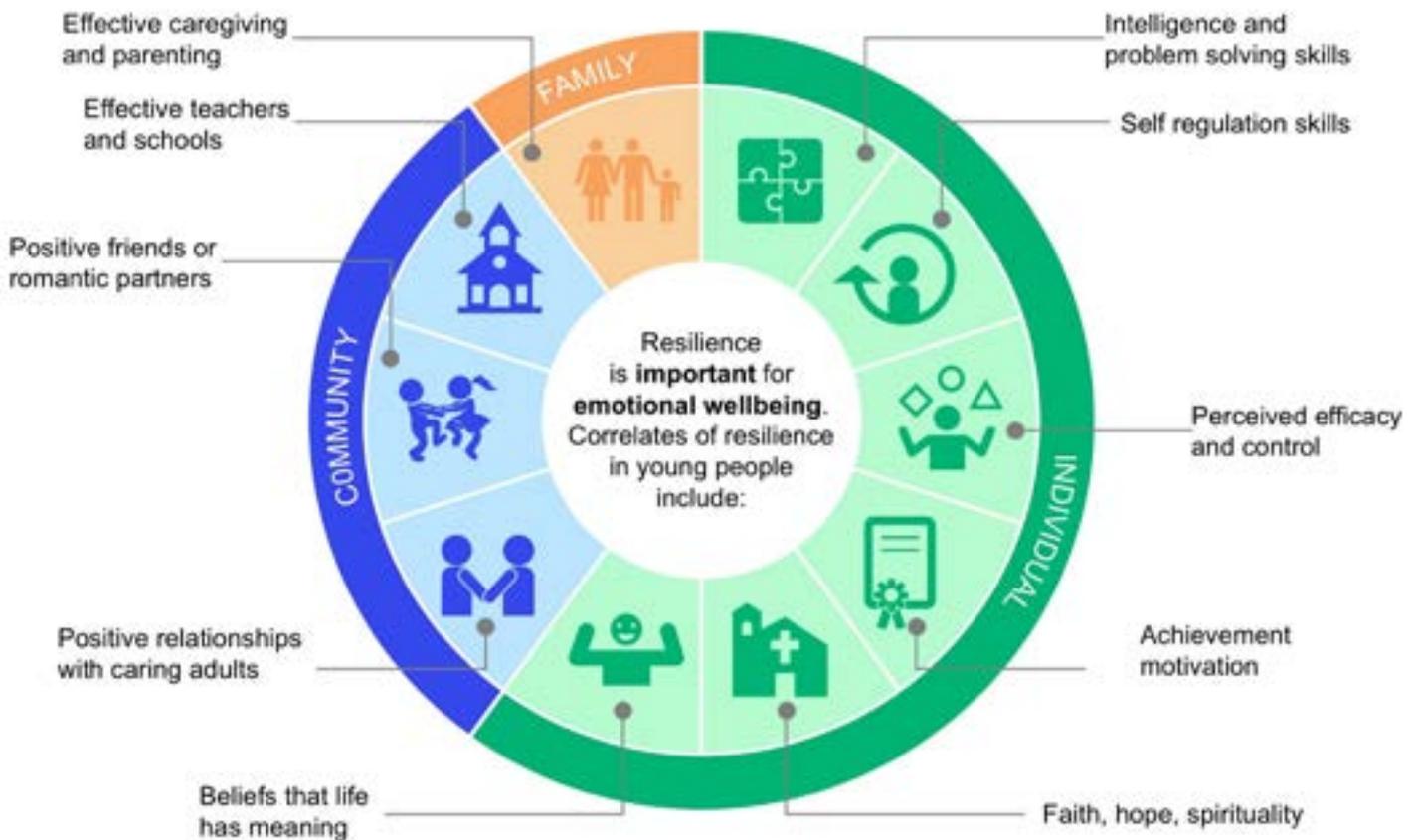
Emotional resilience

Children and young people face changes and setbacks as they grow up. Those who have developed resilience tend to be better at coping with these ups and downs and are more likely to bounce back from adversity. Emotional resilience is not just limited to major life events, but applies to common day-to-day challenges too.

Resilience, positive relationships and a sense of belonging are all linked to lower levels of health harming behaviour and self-harm.

Building resilience

(the ability to cope with adversity and adapt to change)



Source: PHE²³

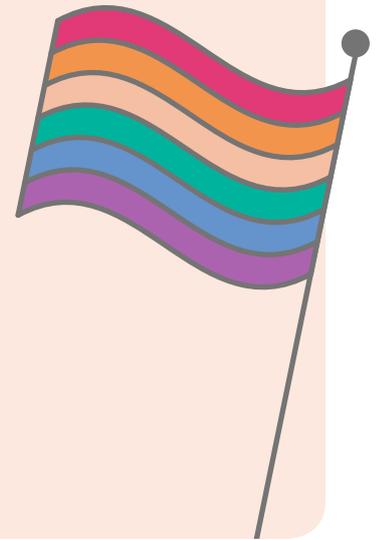
Growing up

To understand more about some of the challenges and setbacks that young people can face growing up in Sutton, Healthwatch asked secondary school pupils to take part in a mental health survey.²⁴ The survey took place between January – July 2018, and 5,146 young people took part. The most common issues that pupils reported during the previous month were exam pressure, sleep problems, issues relating to their appearance or body image, and feeling lonely.

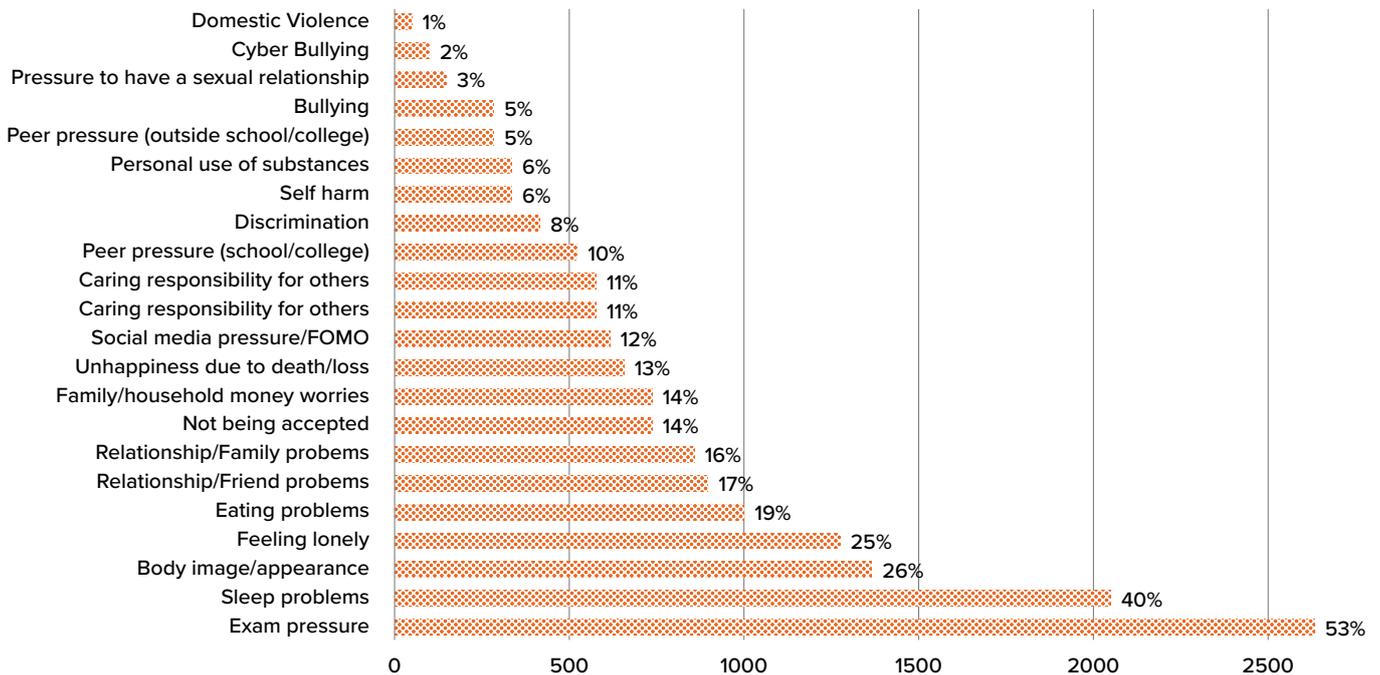
These issues were similar when student groups were compared by sex and ethnicity. However, the survey showed that loneliness, issues with body image, and eating problems were more prevalent among LGBT students than their heterosexual peers. LGBT students were also more likely to report issues with suicidal thoughts and self-harm.

LGBT Group @ Sutton Youth

LGBT Group @ Sutton Youth meets regularly in Sutton. It is for children aged 13-19 years old. LGBT volunteers offer information, advice and guidance on all LGBT issues. The group is inclusive and offers a safe space for young people to explore who they are.



Issues that young people had experienced in the last month



Source: Sutton Healthwatch Survey (2018)

It is worth noting that, although the survey found that school and academia were significant stressors for some secondary school pupils, school is an important way that children and young people build resilience. Education can encourage healthier lifestyles,

reduce social stressors, and provide access to employment opportunities that protect against later-life disadvantage. School can also give children a sense of belonging and a supportive social network.

Screen time

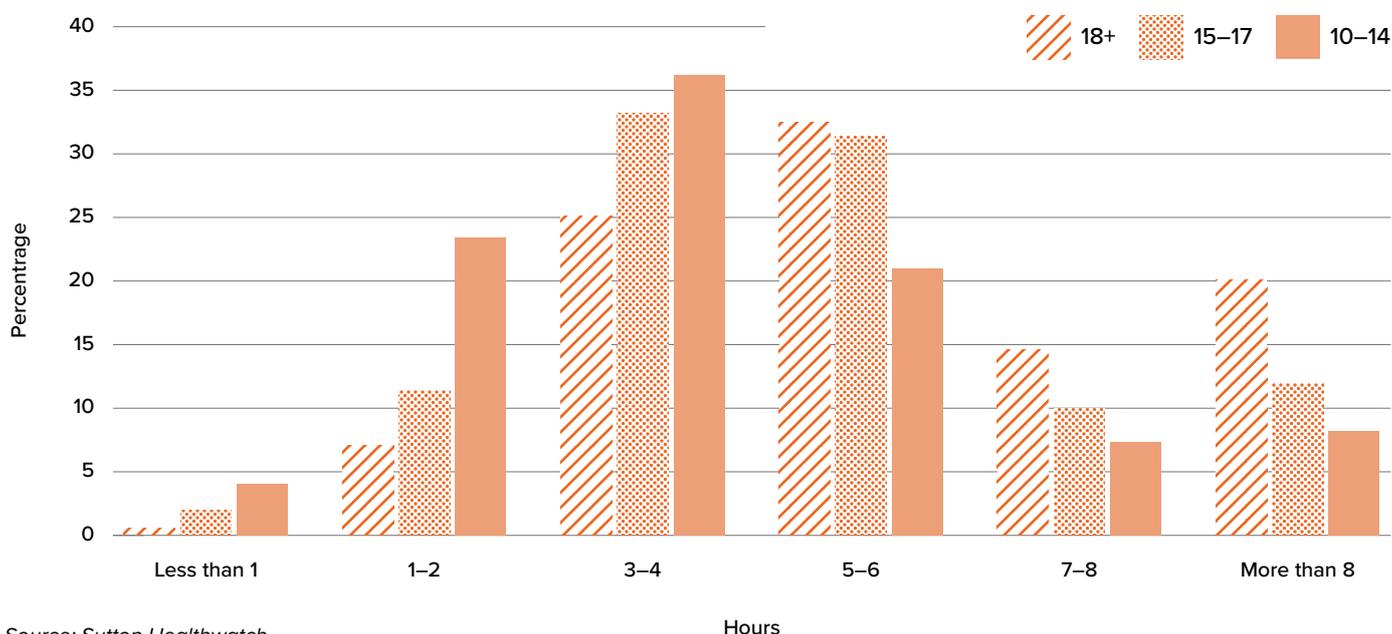
The Sutton Healthwatch survey confirmed that use of screens has become part of children and young people’s daily lives. Screens are now the way to access educational and health resources, entertainment, socialise and shop. Although these are often positive developments, screen time can displace other activities and make children less active. It might also expose children to harmful content and activities, such as pornography and sexting, which can negatively influence their views and beliefs, particularly about developing relationships and respectful behaviour.

The use of screens at bedtime has been linked to children having poorer sleep, and the Royal College of Paediatricians and Child Health recommends that children don’t use screens for an hour before bed and keep screens out of their bedroom at night. Although a review of evidence has not proven a clear link between screen-based activities and mental health problems, the Chief Medical Officer has made a number of recommendations for parents to keep children safe and healthy.

These include:

- be a good role model – parents should give their children proper attention and quality family time and never assume they are happy for pictures to be shared
- not using phones and mobile devices at the dinner table – talking as a family is very important for development
- talking as a family about keeping safe online and about cyberbullying and what children should do if they are worried
- making sure children take a break from screens every two hours by getting up and being active
- not using phones when crossing a road or doing any other activity that requires a person’s full attention
- keeping screens out of the bedroom at bedtime.

Average hours spent viewing an electronic screen



Source: Sutton Healthwatch

Sutton Healthwatch Survey

The Healthwatch survey revealed that the time pupils spend viewing an electronic screen (TVs, DVDs, computer, smart phone, tablet etc.) ranges from less than an hour to **7-8 hours** a day. The most frequent response was **3-4 hours** a day for both boys (35%) and girls (33%).



Mental Health Disorders

Mental health disorders are a leading cause of health-related disabilities in children and young people. Too often these disorders have long lasting impacts, with implications for a young person's future educational attainment, employment prospects, relationships and health.



A national survey, published this year, confirmed that the prevalence of mental health disorders amongst children and young people increases with age.²⁵

Applying the prevalence rates from this study to Sutton's population would suggest that there are nearly 5,000 young people aged between 5 and 19 years with a mental health disorder.

The same survey highlighted that:

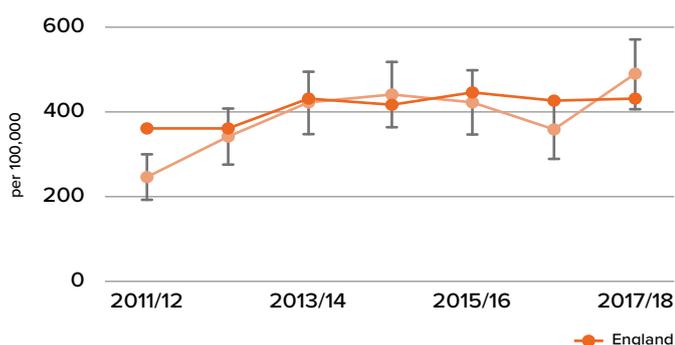
- One in four young women aged 17 to 19 years have a mental health disorder, with higher rates of emotional mental health disorders and self-harm among this group
- One in three LGBT young people aged 14 to 19 years have a mental health disorder
- Living in a low-income household, or with a parent in receipt of income-related benefits, is associated with higher rates of emotional, behavioural and autistic spectrum disorders in children aged 5 to 19 years
- Social and family circumstances affect the rate of mental health disorders amongst children and young people. In particular, poor parental physical and mental health, adverse life events and not participating in clubs or organisations outside of school were all associated with higher rates of mental health disorders.

Self-Harm

Self-harm is when somebody hurts themselves on purpose. It can happen when a young person is feeling anxious, depressed, stressed or bullied. Self-harm is a term that describes a wide range of behaviours, including drug and alcohol abuse, as well as physical self-harming. Girls are more than twice as likely as boys to self-harm. Almost half of children who identify as LGBT self-harm.²⁶

In Sutton, 112 young people aged 10-24 years were admitted to hospital as a result of self-harm in 2016-2017. Of those admitted, 16 were aged 10-14 years and 58 were aged 15-19 years. The rate of admissions for self-harm among children and young people in Sutton (10-24 years) has remained similar to the national average for the past six years, but consistently above the London average.

Hospital admission as a result of self-harm (10-24 years) Sutton and England.



Sutton LSCB self-harm protocol

In Sutton, the Local Safeguarding Children Board (LSCB) publish the self-harm protocol. This protocol, which is informed by national and local learning, ensures that partnership responses are effectively coordinated in Sutton.

Source: <https://www.suttonlscb.org.uk>

Risky Behaviours

Adolescents and young adults take more risks than any other age group and some risky behaviour is a normal part of growing up. While some young people enjoy this time, others find it more challenging and relationships, exam pressures and family tensions can increase the chance of binge drinking, substance misuse, and early sexual activity.

In Sutton, although the overall picture is positive, each year a number of young people are admitted to hospital for conditions that are related to drug taking and alcohol. Evidence suggests that young people are more likely to engage in risky behaviour if they have a mental health problem, have experienced domestic violence and sexual exploitation, or are not in education, employment or training (NEET).²⁷

Alcohol

In Sutton, between 2015-2016 and 2017-2018, there were **45** hospital admissions for alcohol-specific conditions among under 18s. Of those admitted, 13 were male and **32** were female. The rate of admissions was similar to the national average. Over time, the rate of admissions in Sutton has fallen, reflecting the national trend.



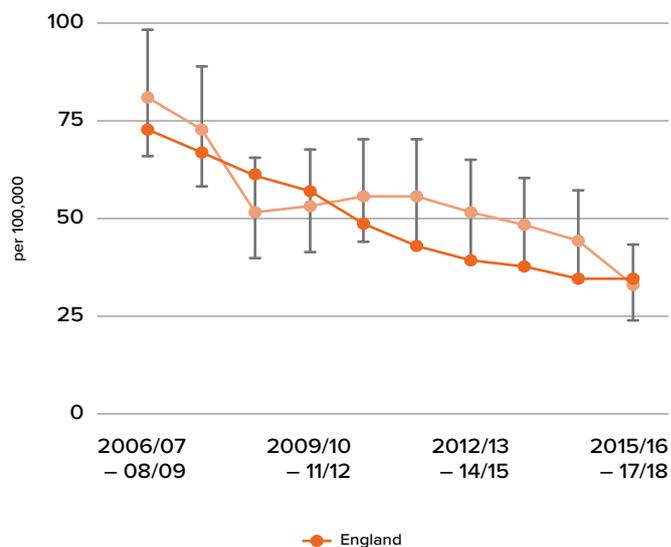
Substance misuse

In Sutton, between 2016 and 2018, there were **61** admissions due to substance misuse (15-24 years). The rate of admissions was similar to the national average. Over time the rate of admissions in Sutton has reflected the national trend.



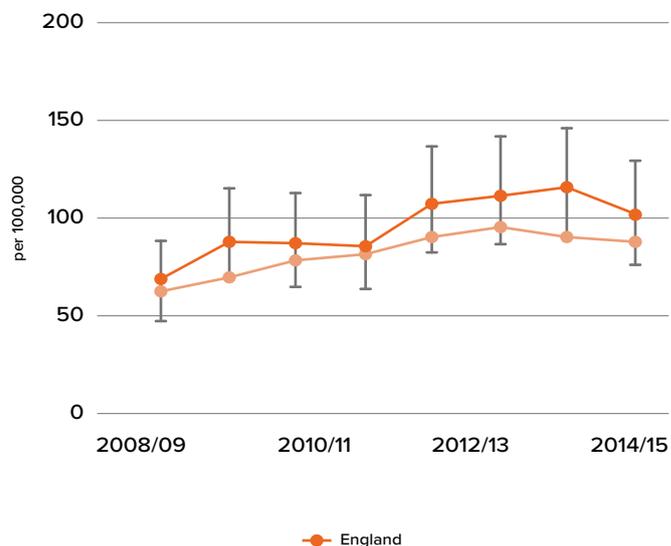
Source: PHE Fingertips

Admission episodes for alcohol-specific conditions, under 18s, Sutton and England



Source: Public Health England²⁸

Hospital admission due to substance misuse (15-24 years) Sutton and England



Source: Public Health England²⁹

Obesity

Obesity can be harmful to children and young people's emotional wellbeing. It can increase the chance of bullying and low self-esteem. Being obese during childhood increases the likelihood of becoming an overweight adult and increases the chance of developing diseases such as heart disease, diabetes and cancer.

The National Child Measurement Programme (NCMP) measures the height and weight of children in reception (aged 4-5 years) and Year 6 (aged 10-11 years) to assess the proportion of overweight and obese children within primary schools. Recent figures for Sutton show that 17.9% of reception class children are overweight and obese.

This figure increases significantly at year 6 (33.2%).³⁰ The number of obese children is not evenly distributed across Sutton, and childhood obesity disproportionately affects those who live in low income households.

The link between physical activity and obesity is well established. A wealth of evidence shows that physical activity has significant benefits for physical and mental health. It can help prevent chronic conditions and diseases, including some cancers, heart disease, type 2 diabetes and depression.

Nationally, the survey found that boys (20%) are more likely to be active every day than girls (14%). The gap between boys and girls who are active every day gets wider after Years 5-6 (ages 9-11). The Daily Mile is one simple way to increase the amount of physical activity that children do. Each day, children leave the classroom for fifteen minutes to run or jog with their classmates. This helps children to improve their fitness, health and concentration in the classroom. In 2017 Public health has worked with the Sutton School Sports Partnership to encourage primary schools to include the Daily Mile as part of the school day.

Prevalence of excess weight amongst children in Sutton (2017-2018)



- **Age 4–5**
More than **1 in 6** are overweight or obese



- **Age 10–11**
Nearly **1 in 3** are overweight or obese.

Levels of physical activity in Sutton children (2018)

- Approx **17.7%** of children and YP take part in at least 60 mins of sport and physical activity every day
- Approx 27.4% sit below this threshold taking part in 60 mins + of sports and physical activity across the week
- Approx 29.7% do less than average of 30 minutes of sport and physical activity a day.

Source: *The Active Lives Survey (2018)*³¹

Whole System Approach to Obesity

The causes of obesity are numerous and complex. Tackling these causes involves collaboration between the Government, families, schools, health services and the Council. Five areas in England have piloted a Whole System Approach to Obesity (WSAO). Resources from these projects will be available nationally later this year.

In 2013, Amsterdam introduced a WSAO. As part of the programme, all organisations promoted the same three messages: eat and drink healthily, get enough exercise and get a good night's sleep.

The principle at the heart of the programme is that the healthy choice should be the easy choice. Scan the QR code below to watch a short film about the the city's approach.



What are we doing now?

Universal services

The school nursing service delivers the Healthy Child Programme (HCP) for all children and young people aged 5-19. School nurses work closely with schools, parents and local services. The school nursing service focuses on key priority areas, including³²:

- building resilience and improving emotional health and wellbeing
- keeping children safe, managing the risks they are exposed to and reducing harm
- promoting healthy lifestyles – including reducing childhood obesity and increasing physical activity
- maximising achievement and learning
- supporting additional health needs
- supporting transition and preparing children for adulthood.

Schools

All schools have an important role to play in supporting the mental health and wellbeing of children.³³ In Sutton, each primary school has two or more Emotional Literacy Support Assistants (ELSAs). Secondary schools offer young people a range of support, that includes learning about mental health as part of their PSHE (personal, social, health and economic education). Schools are supported by the school nursing team. The Sutton's Child and Adolescent Mental Health Service (CAMHS) Nurse for self-harm also works closely with schools.

Schools also have a safeguarding role, and all have a designated safeguarding lead who liaises with external agencies to ensure that children and young people are protected from harm. Primary and secondary schools promote online safety to their pupils. They are supported by an Education E-Safety Advisor, employed by Cognus, who can offer teacher training, ad hoc telephone advice, class lessons and school assemblies.

Local Initiatives

Mental Health in Schools Trailblazer

The South West London Health and Care Partnership has secured trailblazer funding for children and young people's mental health. As part of the programme, schools in Sutton, Merton and Wandsworth are piloting the role of mental health support workers and introducing new services.

The trailblazer-funded mental health support teams will give children and young people extra support with their mental health and emotional wellbeing. They will offer both one-to-one support and group treatment sessions for children and young people and, where needed, provide referrals to specialist CAMHS.

The new services will include: online peer support for young people, mental health first aid training for teachers, courses to empower parents to talk to their children about emotional wellbeing, an improved single point of access for children and adolescent mental health services (CAMHS), and a directory of support services. Working with schools, the service will promote a whole school approach to mental health.

Children and Adolescent Mental Health Service (CAMHS)

CAMHS assess and treat young people with emotional, behavioural or mental health difficulties. The CAMHS Transformation plan sets out how key partners will collaborate to reshape the way that these services are delivered in Sutton.³⁴ In Sutton, there are a range of resources available to help young people to cope with the pressure of exams during March, April and May. They are published on the Off the Record website.

Cognus

Cognus provides advice and support for schools, children, young people and families, as well as the statutory education services on behalf of Sutton Council. The team includes a wide range of professionals and provides universal and targeted services, for those who need it most. The team includes educational psychologists, therapists, teachers and practitioners.

London Healthy Schools Programme

The Healthy Schools programme encourages schools to enhance and build upon the work they do to help children learn about health and healthy choices. Schools are given awards for the work they do within the programme. Schools that have taken part in the awards have seen benefits such as reduced incidence of bullying, improved behaviour and improved attendance. In Sutton, 35 schools have the bronze award, 10 silver and four gold.

Summary

There are a range of organisations and services in Sutton that support children and young people to build resilience and develop positive mental health. Sutton Health and Care partners are committed to ensuring that a local emphasis on prevention, partnership working and learning from the Trailblazer all contribute to achieving the best outcomes for children and young people.

Voluntary and Community Sector Organisations

A number of voluntary and community sector organisations in Sutton offer support to children and young people facing challenging or difficult circumstances.

Sutton Young Carers provides a range of specialist and targeted support to children and young people (aged 8-25 years) who have caring responsibilities for a family member with a physical, mental or long term illness, or who misuses alcohol or substances.

Clubs and activities

There are a large number of clubs and activities happening every week in Sutton.

One example is Junior parkrun. This 2k run is held in Nonsuch Park each Sunday morning at 9.00am. The event is free, and is open to children aged 4 to 15 years. More than 200 children participate each week.

This QR code provides a link to a short film called **'Being a Young Carer'**. In the film, Beth shares her experiences of peer support. It is one of series of 'Community Conversations' made by local charity Hearts and Minds.





Children with special educational needs and disabilities (SEND)

Children and young people in Sutton living with special educational needs and disabilities (SEND) are a diverse group with a wide spectrum of needs. These can affect how they communicate, learn, perceive the world and cope with emotional challenges.

According to the Department for Education, a child has Special Educational Needs or Disability if they:

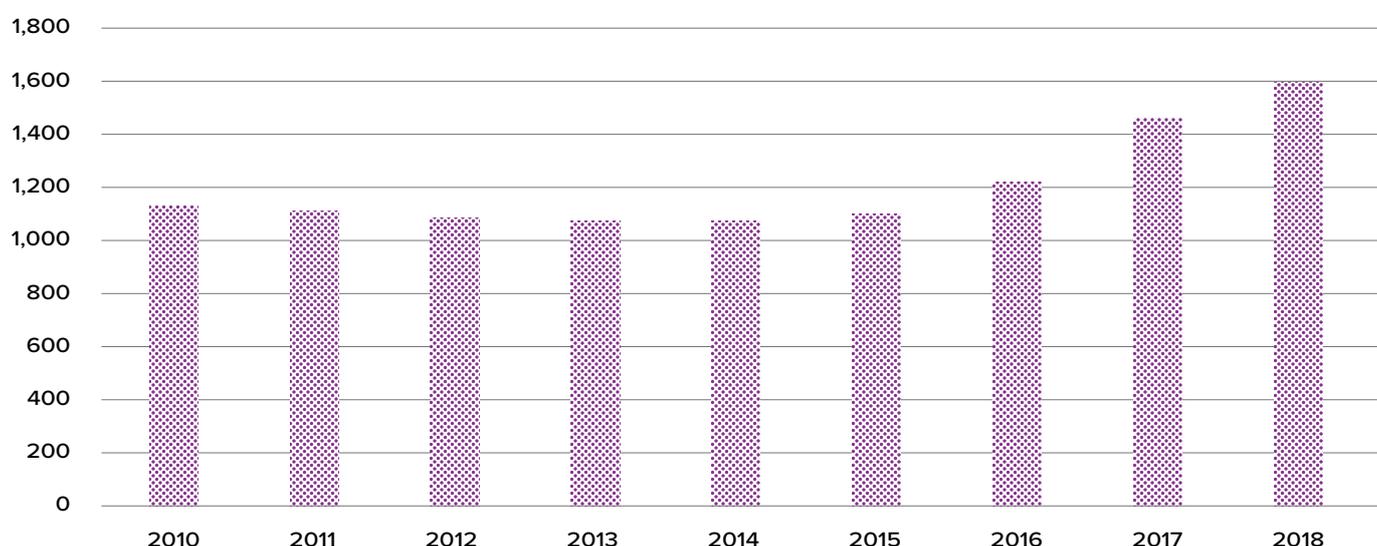
- Have a significantly greater difficulty in learning than the majority of children of the same age, or
- Have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for children of the same age in mainstream schools.³⁶

In Sutton, as in all areas, most children and young people with Special Educational Needs have their needs met in local mainstream settings through the school's SEN support. However some children and young people need more help to make their progress in learning than a mainstream setting's resources can provide. For these children and young people, an Education, Health and Care Needs Assessment

may be needed to identify the resources from education, health, and social care that will support the achievement of their outcomes. If the assessment demonstrates that additional resources are required, an Education, Health and Care Plan (EHCP) will be issued, and will be reviewed at least annually. These legal documents also explain how the support will prepare the child or young person for adulthood. An EHCP can be issued between the ages of 0 and 25 years.

Prior to the introduction of EHCPs in 2014, the number of statements remained fairly stable but since 2015, the number of EHC Plans has increased by nearly 45%. This is in part explained by the extension of the age range from 16/19 to 25, and partly by increased demand.

Change in the number of statements/EHCPs maintained by Sutton Council



Source: Department for Education (2018) Statement of SEN and EHCP Plans England (by local authority).

There is a strong link between poverty and SEND and children from low-income families face particular barriers that prevent them from growing up into more affluent adults. Many factors play a role, including the qualifications they gain as part of their education and their diminished chances of finding well-paid work as an adult.³⁷

Having a child with extra needs can be challenging and many families in this situation experience isolation. In Sutton a range of organisations are involved in supporting families, children and young people. The complexity of the system can make it difficult for parents to know where to go for advice.

What are we doing now?

Local Offer website

To make the system more straightforward, information and advice is available on the Council's Local Offer website. All local authorities must publish a "local offer" including details of what support services they have available for children with special educational needs and disabilities. In Sutton information is available via the Local Offer website.

Sutton Information, Advice & Support Services (SIASS)

Sutton Information, Advice & Support Services (SIASS), provided through Cognus, offers advice and support about SEND to parents and carers, and children and young people. The service covers SEN and disabilities and matters relating to health and social care, local policy and practice, the Local Offer and personal budgets. SIASS offers support and advice to school staff working with children and young people with SEND and offer training to school Special Educational Needs Coordinators (SENCO).

Sutton Parent Forum

Sutton Parent Forum is run by parents of disabled children for parents of disabled children who live in the London Borough of Sutton. The Forum provides a collective voice to inform service providers of the needs of all disabled children, young people and their families in Sutton.

Short Breaks

Short breaks offer opportunities for children to spend a few hours a week in an activity provided by local voluntary sector organisations or organised by their parents through a direct payment. Sutton's Children With Disabilities service offered a Short Break to around 500 children in 2018.

Preparation for Adulthood

Each young person's transition into adulthood is unique. To reflect this, a range of factors that affect the pathways to adulthood need to be considered, bringing together the partnership and developing the right opportunities in the Local Offer.

The key areas to focus on are:

- Opportunities for further education, training and employment
- Being as independent to the best of their ability, this can include housing options
- Taking and feeling part of the community (leisure and social activities)
- Be in good health.

It is also important to help young people and their families to manage with the move from child-centred services to adult-oriented systems.³⁸

Sutton has identified the period in the young person's life between the ages of 16-25 years as an important period in preparing for and acclimatising to adulthood and are focusing social care resources on this period. In addition, the NHS "10 Year Forward View" sets out an objective to develop 18-25 teams as an addition to current Adult Mental Health teams in order to improve the experience of transition of young people experiencing mental and emotional distress.



Conclusion

This report has highlighted some of the positive work that is happening across Sutton to make the borough a great place to raise a family. However it also shines a light on a real story of inequality and how some of our children simply do not get to benefit from the opportunities that are on offer in Sutton.

Such inequalities are deep-rooted and beyond the scope and remit of any one single agency or organisation to address. Therefore an increased breadth and intensity of partnership work is required if Sutton wants to move beyond a picture of simply having 'good services' and evolve into a place with an 'excellent system' for children.

In particular there needs to be a greater system focus on improving outcomes in relation to:

- school readiness
- the mental wellbeing of children and young people
- supporting families and children with special educational needs.

Over the last eighteen months Sutton has made some tremendous progress to drive forward health and social care integration. The realignment of children's community health services in April of this year under the Sutton Health and Care Alliance is a bold step to begin to join up care for children and young people in Sutton. Other developments such as the emerging Integrated Care Place in Sutton and stronger partnership working with schools now provide a strong platform on which to accelerate our ambition to help every child in Sutton to thrive.

Looking forward this report recommends that:

- 1.** The London Borough of Sutton reviews operational processes to better align work between health visiting/ school nursing, early help and children's social care
- 2.** Sutton Health and Care partners conduct a joint children's review to focus on improving outcomes in the three key areas of concern raised in this report
- 3.** The current Outcome-based Commissioning Reviews being conducted by LBS consider how wider services and support, including support from the voluntary sector, could be used to maximise opportunities, advice and support for children and young families in Sutton.

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Appendix

Alternative links to films included in the report with a QR code

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