

# STATES OF JERSEY



## **DRAFT STRATEGIC PLAN 2015 – 2018 (P.27/2015): FOURTH AMENDMENT**

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**Lodged au Greffe on 14th April 2015  
by Deputy G.P. Southern of St. Helier**

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**STATES GREFFE**

**PAGE 2 –**

After the words “in the attached Appendix” insert the words –

“, except that in the chart on page 18 of the draft Plan after row 5.1 there shall be inserted an additional row as follows –

	<b>Desired Outcome</b>	<b>Key Areas of Focus</b>
5.2	Commitment to the ‘First 1001 days’ agenda made real	Extend statutory maternity leave to 26 weeks paid out of Social Security contributions  Expand capacity for free nursery places from 20 to 30 hours per week  Increase the number of health visitors to meet the UK recommended level for average caseload of preschool children

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DEPUTY G.P. SOUTHERN OF ST. HELIER

## REPORT

Since the last election, we have all heard many times of the commitment, often passionate, expressed by each and every Minister to the “1001 Days agenda”. This commitment has made its way into the Strategic Plan as part of one of 6 areas of focus under the new Priority 5 “Service Delivery and Funding”, as follows –

*“Reduce demand on services by investing in early interventions, such as promoting healthier lifestyles and the 1001 Days initiative.”.*

The need for action which goes beyond the remit of one Minister is illustrated on page 9 under the “Improving Education” section, where the report states –

*“Our focus must extend beyond the education system to encompass the critical early years of our children’s lives. The ‘1001 Critical Days’ initiative recognises that the early years of life are a crucial period and key to brain development. The way in which we care for and treat children during these formative years shapes their lives. We need to review the services provided by different agencies, particularly for children in vulnerable families, identifying any gaps and finding solutions.”.*

To leave such a major initiative in the hands of a single department, and one that faces enormous challenges to its ability to deliver its core services in the face of £10 million cuts to its budget, appears to me to risk failure. The targets for delivering results from the 1001 Days initiative will require the concerted efforts of the Health and Social Services, Education and Social Security Departments, with strong leadership from the Chief Minister.

The research conducted by the UBS Optimus Foundation, *Identifying mechanisms for promoting early child development (ECD) in Jersey*, presents a much more ambitious vision when it asks –

**“Can Jersey be made the world’s best place to grow up?”.**

The authors of this report answer in the positive, thus –

*“Although there are a number of barriers to Jersey becoming an exemplar for high-quality ECD practice, the island has many social and institutional strengths, many excellent services and many excellent practitioners and service managers. Services are however often fragmented and all the services are limited by the poor quality of data.*

*If Jersey is to transform itself into a world leading centre for ECD, and there is little doubt that this could be achieved, there would need to be strong institutional leadership and advocacy. The States now have a firm commitment to the ‘First 1001 Days’ agenda and the impending establishment of an Early Years Taskforce is an important development.”.*

This amendment seeks to place the 1001 Days agenda at the heart of the Strategic Plan. When the Plan talks of “reducing demand on services,” it must be recognised that any such reductions will not be delivered in the short term, but over a much longer term. This is a major invest to save initiative and deserves more concrete actions than just a commitment to “promote” lifestyle changes.

The amendment places 3 goals, all of which can be measured, as markers of progress over the 3 years of the Strategic Plan.

### **1. 26 weeks statutory maternity leave**

This is an essential element to ensure that minimum standards of maternity leave are accessible and affordable to mothers. The report describes the current situation as follows –

*“...some employers currently provide paid leave of up to six months. The general pattern at present among most working families appears to be of taking around four months, paid for from savings. We understand that breast feeding is initiated by most mothers, but continuation beyond six weeks is relatively uncommon, reportedly due to early return to work.”*

### **2. Extend free nursery places to 30 hours**

The report points out the wide variety of child care arrangements, along with the standards and costs associated with them as follows –

*“Day nurseries, other forms of child care and preschool education are offered in many settings throughout Jersey. There are around 20 day nurseries, generally offering child care for children aged 0–5 years for up to 10 hours per day all year round. Eight pre-schools are available during term time only, generally 5–6 hours per day for children aged 2–5. Sixteen States pre-schools are based in primary school premises and are also open up to six hours per day during term time.*

*Preschool nursery provision is supported by the States: children are entitled to 20 hours of term-time nursery provision from the September after their third birthday. Many parents choose to supplement this provision. There are around 75 registered family child carers (child-minders) providing care for up to six children and a further 50 accredited nannies, which are particularly of use to families with more than one child and unusual work patterns such as shift work.*

*The costs of child care are high. Full time care for children aged 0–3 years generally costs £5–8 per hour, or £855–£1368 per month whether provided in centres or by a registered family child carer. The cost of child care for families with two pre-school children is therefore commonly in the region of £2,000 per month. Costs for nannies are slightly lower, at around £10 per hour.*

*Lone parents and parents with low income therefore struggle to afford centre-based child care and often seek less formal arrangements with care provided by family or friends. Some parents are entitled to claim Childcare Tax Breaks and the Childcare Component of Income Support. The JCCT provides some additional financial help with childcare to some families who could not otherwise afford it. This appears to be provided on the basis of health visitor referral. Some parents are forced to place their children in illegal child care settings with much lower costs (sometimes paying as little as £1 per hour, or*

*payment made in kind). The scale of illegal child care is not known. Many other families come to informal arrangements with family members or friends, and we heard evidence that these arrangements are often unsatisfactory and sometimes border on illegality.”.*

### **3. Increase the number of health visitors to meet the UK recommended level for average caseload of preschool children**

*“Health visiting is entirely provided by Family Nursing and Homecare, which is a charity, in large part funded by the Jersey States. Midwives hand over the care of mothers and babies to health visitors on the 10th postnatal day. Women identified as vulnerable in pregnancy (as a result of mental health problems, learning difficulties, substance misuse or other social difficulties) have recently been notified to the health visiting team for consideration for recruitment to the Maternal Early Childhood Sustained Home Visiting service (MECSH). This high quality and relatively intensive service involves at least monthly visits from mid-pregnancy to the end of the child’s second year. The programme is structured and is quality assured through supervision by a clinical psychologist or the team leader: four health visitor posts have been created specifically to support the introduction of MECSH across the full workforce. The MECSH programme is only available to mothers who have a level of competence in English.*

*There are 14.8 whole-time equivalent health visitors on Jersey (including the four new posts), so the average caseload of preschool children is at least 330 which is above the nationally recommended figure in the UK of 250.*

*We heard a number of reports that many families do not know the name of their health visitor. The challenges faced by the health visiting service are thus substantial: although some families receive an excellent service through MECSH, these families have to have their vulnerabilities identified antenatally. There is good evidence that only around half of all substantial problems likely to benefit from intensive health visiting input are identifiable at this early stage 5–7. There may be some capacity for intensive health visiting input outside the MECSH system but it is not clear that this is readily available. The commonly used system of weekly visits to children in the care system but looked after at home is much less common in Jersey than in the UK. Health visitors offer a 24-month developmental assessment but only around 60% of families take up this offer.”.*

To meet the UK recommended caseload for pre-school children would require an additional 5 health visitors.

In the words of Professor Wilson and Dr. Marryat, the authors of the UBS report –

*“In summary, we believe that there is potential for Jersey to become a pathfinder/demonstrator site for enhancing ECD at population level in the developed world, and there are already many excellent services and an excellent policy environment. Meeting the challenges in optimising ECD for all the children in Jersey will require some modest investments in a range of child and family services but equally importantly a strong commitment to measuring outcomes and establishing what works best in the Jersey context.”.*

If members wish to see that “strong commitment” translated into action in the MTFP later in the year, then support for this amendment to the Strategic Plan is, I believe, an essential first step.

**Financial and manpower implications**

As stated by the Council of Ministers in the financial and manpower statement accompanying the Draft Strategic Plan, any additional financial and manpower implications for this amendment will need to be brought forward in specific policy proposals and the Medium Term Financial Plan.