

TITLE OF REPORT: Child Health Profile 2015

REPORT OF: Carole Wood, Director of Public Health

SUMMARY

The purpose of this report is to provide an overview of the current Child Health Profile published in June 2015, to outline the areas of good and poor performance relating to child health and wellbeing outcomes for Gateshead.

1. Background

The Child Health Profile produced annually by Public Health England (previously the Department of Health) presents a picture of child health and wellbeing for each Local Authority. The 2015 profile was published in June of this year. The profile reports on 32 indicators, across 5 health domains as outlined in **appendix 1**. The profile can be used by the Local Authority and partners to improve health and wellbeing of children through targeting resources to tackle health inequalities.

The data within the profile provides a wide range of information of issues affecting child health, including childhood poverty, early life and infant mortality, breastfeeding rates, obesity, teenage conceptions, educational performance and youth crime. The data presented outlines our local Gateshead position against the regional average, England Average, worst and best. The traffic light system identifies if Gateshead is significantly worse (red), better (green) or not significantly different (yellow) to the England average.

Local Government, health services and partners can use this valuable tool to help understand the needs of their community, and assist in improving the health and wellbeing of children and young people living in Gateshead.

Public Health England's Child and Maternal (ChiMat) Health Intelligence Network website provide an interactive map, online profile and additional health information to create further maps, charts and detailed reports to support child health. A link to the website can be found here: www.chimat.org.uk

2. Current Picture

The current profile provides an overview of the local child population in comparison to the region and England. Gateshead is reported to have 22% of the total population between the ages of 0-19yrs, and of those 7.7% are from an ethnic minority group. Overall the health and wellbeing of children and young people in Gateshead is generally worse than the England average; however 16 out of the 32 indicators are better or not significantly different to the England average.

2.1 Key Findings

- The level of child poverty in Gateshead is worse than the England average with 22.1% of all children aged 16 years or under living in poverty.
- The level of obesity for Gateshead children aged 4-5 years has gone up to 10.5% and for 10-11 years this has come down to 20.7%. The England average level of obesity in children aged 4-5 years is 9.5% and 10-11 years olds is 19.1%
- Immunisations uptake in Gateshead is above the England average. The health and wellbeing of children in Gateshead is generally worse than the England average. Infant and child mortality rates are similar to the England average.
- There is an increase in the number of hospital admissions as a result of self harm for young people 10-24. Gateshead is significantly worse than the England average.

2.2 Changes in Performance

The profile enables us to monitor improvements or changes in health and wellbeing outcomes through comparison to previous profiles looking for any trends. To provide a brief snapshot of the current improvements or changes within the 2015 profile, comparison has been made between the indicators presented in 2014 profile and the 2015 profile. A summary of the improvements and any changes are presented below. A note of caution is required when comparing the 2014 position with the 2015 position, as the data does not give us a true indication of trend unless 3 year rolling averages are considered. Further analysis of trend data using at least 3 years data will be presented at committee to support this report.

Indicators showing improvement in 2015

- Increase in Children in Care immunisations
- Increase in Children achieving a good level of development at the end of Reception
- Reduction in First time entrants to the Youth Justice system
- Reduction in Children in Poverty (under 16)
- Reduction in Family homelessness
- Reduction in Children in Care
- Reduction in Children killed or seriously injured in road traffic accidents
- Reduction in Obese children (10-11yrs)
- Reduction in Hospital admissions due to alcohol specific conditions
- Reduction in Smoking status at time of delivery
- Increase in Breastfeeding initiation
- Increase in Breastfeeding prevalence at 6-8 weeks

Indicators not showing improvement in 2015

- Increase in Infant mortality
- Increase in A&E attendances (0-4yrs)
- Increase in Hospital admissions due to substance misuse (15-24yrs)
- Increase in hospital admissions due to asthma
- Increase in low birthweight of all babies
- Increase in Obese children (4-5yrs)
- Increase in hospital admissions as a result of self harm (10-24yrs)

2.3 Change in Measures

The profile released in March 2015 included two new changes and a further change for 2016;

- Indicator 6 – in 2014 this was referred to as *Acute* sexually transmitted infections (inc. Chlamydia). In 2015 this has changed to *New* sexually transmitted infections (inc. Chlamydia)

In addition to this, indicator 6 and Indicator 26 (breastfeeding prevalence at 6-8 weeks) did not have their significance tested. The government have indicated that the Children in poverty (under 16 years) measure is to be changed for future Child Health Profiles.

3. Summary

The Child Health Profile for 2015 provides an overview of child health and wellbeing for Gateshead showing that many areas of children and young people's health have shown some improvement compared to the 2014 profile, particularly the improvement of children achieving a good level of development at the end or Reception (Indicator 7) as well as an improvement in the levels of obesity in children aged 10-11 (Indicator 18). It is also worthwhile noting that despite significant changes to the welfare system there has been a reduction in the number of Children under 16 in Poverty and Family Homelessness. However it does also highlight areas for concern such as the increase in A&E attendances in children aged 0-4yrs, an increase in levels of child obesity in Children aged 4-5yrs and an increase in the number of hospital admissions as a result of self harm.

4. Recommendations

The Overview and Scrutiny committee is asked to consider and comment on whether it is satisfied with performance to date.

Contact: Emma Gibson

Ext : 2845



Gateshead

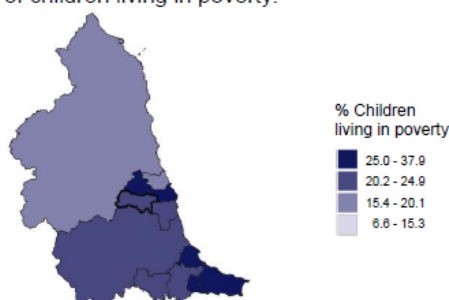
This profile provides a snapshot of child health in this area. It is designed to help the local authority and health services improve the health and wellbeing of children and tackle health inequalities.

The child population in this area

	Local	North East	England
Live births in 2013			
	2,297	28,961	664,517
Children (age 0 to 4 years), 2013			
	11,800 (5.9%)	151,800 (5.8%)	3,414,100 (6.3%)
Children (age 0 to 19 years), 2013			
	44,900 (22.4%)	594,200 (22.8%)	12,833,200 (23.8%)
Children (age 0 to 19 years) in 2020 (projected)			
	44,900 (22.0%)	595,100 (22.3%)	13,325,100 (23.6%)
School children from minority ethnic groups, 2014			
	1,827 (7.7%)	27,895 (8.9%)	1,832,995 (27.8%)
Children living in poverty (age under 16 years), 2012			
	22.1%	23.6%	19.2%
Life expectancy at birth, 2011-2013			
Boys	77.4	78.0	79.4
Girls	81.2	81.7	83.1

Children living in poverty

Map of the North East, with Gateshead outlined, showing the relative levels of children living in poverty.



Contains Ordnance Survey data

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Data sources: Live births, Office for National Statistics (ONS); population estimates, ONS mid-year estimates; population projections, ONS interim 2012-based subnational population projections; black/ethnic minority maintained school population, Department for Education; children living in poverty, HM Revenue & Customs (HMRC); life expectancy, ONS.

Key findings

Children and young people under the age of 20 years make up 22.4% of the population of Gateshead. 7.7% of school children are from a minority ethnic group.

The health and wellbeing of children in Gateshead is generally worse than the England average. Infant and child mortality rates are similar to the England average.

The level of child poverty is worse than the England average with 22.1% of children aged under 16 years living in poverty. The rate of family homelessness is better than the England average.

Children in Gateshead have average levels of obesity: 10.5% of children aged 4-5 years and 20.7% of children aged 10-11 years are classified as obese.

The MMR immunisation rate is better than the England average. The immunisation rate for diphtheria, tetanus, polio, pertussis and Hib in children aged two is better than the England average.

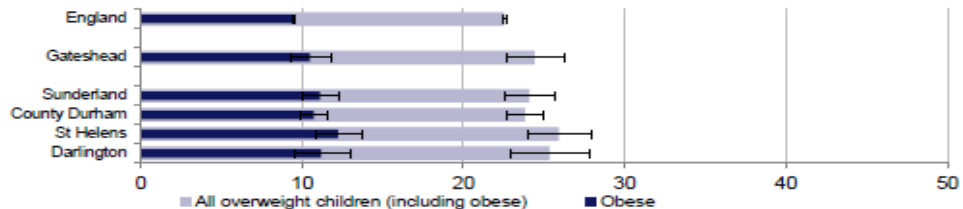
There were 360 children in care at 31 March 2014, which equates to a higher rate than the England average. A higher percentage of children in care are up-to-date with their immunisations compared with the England average for this group of children.

Any enquiries regarding this publication should be sent to info@chimat.org.uk.

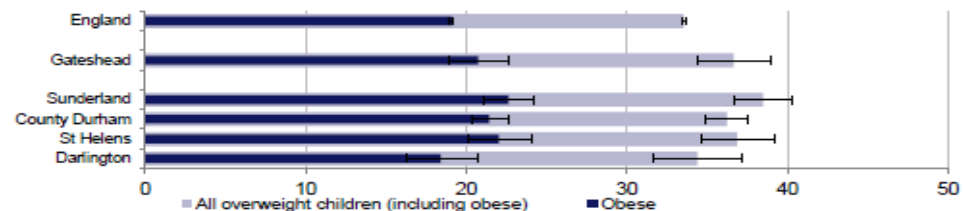
Childhood obesity

These charts show the percentage of children classified as obese or overweight in Reception (aged 4-5 years) and Year 6 (aged 10-11 years) by local authority compared with their statistical neighbours. Compared with the England average, this area has a worse percentage in Reception and a worse percentage in Year 6 classified as obese or overweight.

Children aged 4-5 years classified as obese or overweight, 2013/14 (percentage)



Children aged 10-11 years classified as obese or overweight, 2013/14 (percentage)

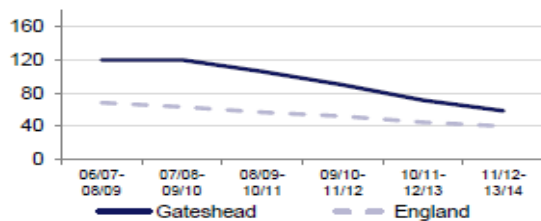


Note: This analysis uses the 85th and 95th centiles of the British 1990 growth reference (UK90) for BMI to classify children as overweight and obese. I indicates 95% confidence interval. Data source: National Child Measurement Programme (NCMP), Health and Social Care Information Centre

Young people and alcohol

In comparison with the 2006/07-2008/09 period, the rate of young people under 18 who are admitted to hospital because they have a condition wholly related to alcohol such as alcohol overdose is lower in the 2011/12-2013/14 period. The admission rate in the 2011/12-2013/14 period is higher than the England average.

Young people aged under 18 admitted to hospital with alcohol specific conditions (rate per 100,000 population aged 0-17 years)

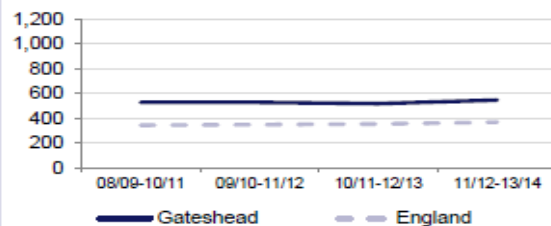


Data source: Public Health England (PHE)

Young people's mental health

In comparison with the 2008/09-2010/11 period, the rate of young people aged 10 to 24 years who are admitted to hospital as a result of self-harm is similar in the 2011/12-2013/14 period. The admission rate in the 2011/12-2013/14 period is higher than the England average*. Nationally, levels of self-harm are higher among young women than young men.

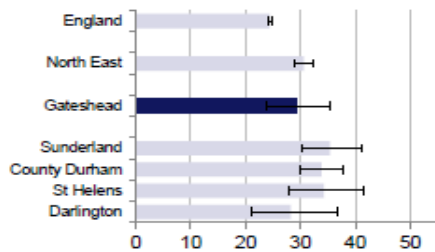
Young people aged 10 to 24 years admitted to hospital as a result of self-harm (rate per 100,000 population aged 10 to 24 years)



*Information about admissions in the single year 2013/14 can be found on page 4
Data source: Hospital Episode Statistics, Health and Social Care Information Centre

These charts compare Gateshead with its statistical neighbours, the England and regional average and, where available, the European average.

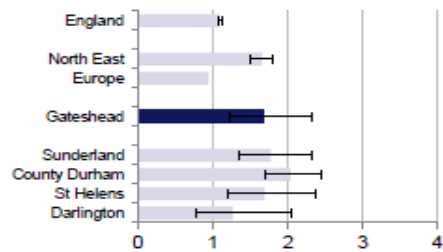
Teenage conceptions in girls aged under 18 years, 2013 (rate per 1,000 female population aged 15-17 years)



In 2013, approximately 29 girls aged under 18 conceived for every 1,000 females aged 15-17 years in this area. This is similar to the regional average. The area has a similar teenage conception rate compared with the England average.

Data source: ONS

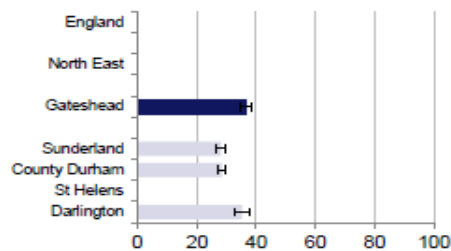
Teenage mothers aged under 18 years, 2013/14 (percentage of all deliveries)



In 2013/14, 1.7% of women giving birth in this area were aged under 18 years. This is similar to the regional average. This area has a higher percentage of births to teenage girls compared with the England average and a higher percentage compared with the European average of 0.9%*.

Data source: Hospital Episode Statistics, Health and Social Care Information Centre
* European Union 27 average, 2013. Source: Eurostat

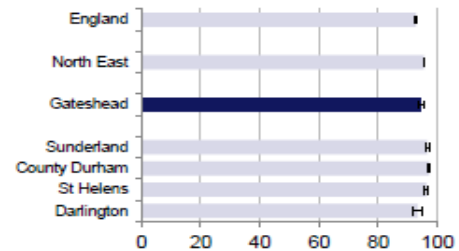
Breastfeeding at 6 to 8 weeks, 2013/14 (percentage of infants due 6 to 8 week checks)



In this area, 36.4% of mothers are still breastfeeding at 6 to 8 weeks. 68.2% of mothers in this area initiate breastfeeding when their baby is born. This area has a lower percentage of babies who have ever been breastfed compared with the European average of 89.1%*.

* European Union 21 average, 2005. Source: Organisation for Economic Co-operation and Development (OECD) Social Policy Division
Data source: PHE

Measles, mumps and rubella (MMR) immunisation by age 2 years, 2013/14 (percentage of children age 2 years)



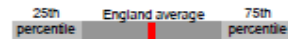
Compared with the England average, a higher percentage of children (94.6%) have received their first dose of immunisation by the age of two in this area. By the age of five, 91.5% of children have received their second dose of MMR immunisation. This is higher than the England average. In the North East, there were 311 laboratory confirmed cases of measles in young people aged 19 and under in the past year.

Data sources: Health and Social Care Information Centre, PHE

Note: Where data is not available or figures have been suppressed, no bar will appear in the chart for that area.

The chart below shows how children's health and wellbeing in this area compares with the rest of England. The local result for each indicator is shown as a circle, against the range of results for England which are shown as a grey bar. The red line indicates the England average. The key to the colour of the circles is shown below.

- Significantly worse than England average
- Not significantly different
- Significance not tested
- Significantly better than England average
- ◆ Regional average



	Indicator	Local no.	Local value	Eng. ave.	Eng. Worst		Eng. Best	
Premature mortality	1 Infant mortality	11	4.9	4.1	7.5		1.7	
	2 Child mortality rate (1-17 years)	6	16.3	11.9	22.8		3.0	
Health protection	3 MMR vaccination for one dose (2 years)	2,186	94.6	92.7	78.3		98.3	
	4 Dtap / IPV / Hib vaccination (2 years)	2,264	97.9	96.1	81.6		99.1	
	5 Children in care immunisations	245	96.1	87.1	27.3		100.0	
	6 New sexually transmitted infections (including chlamydia)	897	3,749.1	3,432.7	8,098.4		1,899.8	
	7 Children achieving a good level of development at the end of reception	1,283	56.6	60.4	41.2		75.3	
	8 GCSEs achieved (5 A*-C inc. English and maths)	1,227	58.5	56.8	35.4		73.8	
Major determinants of ill health	9 GCSEs achieved (5 A*-C inc. English and maths) for children in care	-	-	12.0	8.0		42.9	
	10 16-18 year olds not in education, employment or training	450	7.2	5.3	9.8		1.8	
	11 First time entrants to the youth justice system	89	500.4	440.9	846.5		171.0	
	12 Children in poverty (under 16 years)	7,555	22.1	19.2	37.9		6.6	
	13 Family homelessness	109	1.2	1.7	10.8		0.1	
	14 Children in care	360	90	60	153		20	
	15 Children killed or seriously injured in road traffic accidents	8	22.6	19.1	48.3		8.2	
	Health improvement	16 Low birthweight of all babies	174	7.5	7.4	10.4		4.6
		17 Obese children (4-5 years)	224	10.5	9.5	14.2		5.5
		18 Obese children (10-11 years)	367	20.7	19.1	26.8		10.5
19 Children with one or more decayed, missing or filled teeth		-	25.8	27.9	53.2		12.5	
20 Under 18 conceptions		103	29.3	24.3	43.9		9.2	
21 Teenage mothers		36	1.7	1.1	2.5		0.2	
22 Hospital admissions due to alcohol specific conditions		23	58.8	40.1	100.0		13.7	
23 Hospital admissions due to substance misuse (15-24 years)		33	138.9	81.3	264.1		22.8	
Prevention of ill health	24 Smoking status at time of delivery	332	15.0	12.0	27.5		1.9	
	25 Breastfeeding initiation	1,498	68.2	73.9	36.6		93.0	
	26 Breastfeeding prevalence at 6-8 weeks after birth	796	36.4	-	19.4		77.4	
	27 A&E attendances (0-4 years)	13,423	1,137.0	525.6	1,684.5		252.7	
	28 Hospital admissions caused by injuries in children (0-14 years)	474	144.2	112.2	214.1		64.4	
	29 Hospital admissions caused by injuries in young people (15-24 years)	459	194.1	136.7	291.8		69.6	
	30 Hospital admissions for asthma (under 19 years)	80	187.5	197.1	509.1		54.6	
	31 Hospital admissions for mental health conditions	31	77.1	87.2	391.6		25.6	
	32 Hospital admissions as a result of self-harm (10-24 years)	214	626.5	412.1	1,246.6		119.1	

Notes and definitions - Where data is not available or figures have been suppressed, this is indicated by a dash in the appropriate box.

- 1 Mortality rate per 1,000 live births (age under 1 year), 2011-2013
- 2 Directly standardised rate per 100,000 children age 1-17 years, 2011-2013
- 3 % children immunised against measles, mumps and rubella (first dose by age 2 years), 2013/14
- 4 % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2 years, 2013/14
- 5 % children in care with up-to-date immunisations, 2014
- 6 New STI diagnoses per 100,000 population aged 15-24 years, 2013
- 7 % children achieving a good level of development within Early Years Foundation Stage Profile, 2013/14
- 8 % pupils achieving 5 or more GCSEs or equivalent including maths and English, 2013/14
- 9 % children looked after achieving 5 or more GCSEs or equivalent including maths and English, 2014 (provisional)
- 10 % not in education, employment or training as a proportion of total age 16-18 year olds known to local authority, 2013
- 11 Rate per 100,000 of 10-17 year olds receiving their first reprimand, warning or conviction, 2013

- 12 % of children aged under 16 living in families in receipt of out of work benefits or tax credits where their reported income is less than 60% median income, 2012
- 13 Statutory homeless households with dependent children or pregnant women per 1,000 households, 2013/14
- 14 Rate of children looked after at 31 March per 10,000 population aged under 18, 2014
- 15 Crude rate of children age 0-15 years who were killed or seriously injured in road traffic accidents per 100,000 population, 2011-2013
- 16 Percentage of live and stillbirths weighing less than 2,500 grams, 2013
- 17 % school children in Reception year classified as obese, 2013/14
- 18 % school children in Year 6 classified as obese, 2013/14
- 19 % children aged 5 years with one or more decayed, missing or filled teeth, 2011/12
- 20 Under 18 conception rate per 1,000 females age 15-17 years, 2013
- 21 % of delivery episodes where the mother is aged less than 18 years, 2013/14

- 22 Crude rate per 100,000 under 18 year olds for alcohol specific hospital admissions, 2011/12-2013/14
- 23 Directly standardised rate per 100,000 (age 15-24 years) for hospital admissions for substance misuse, 2011/12-2013/14
- 24 % of mothers smoking at time of delivery, 2013/14
- 25 % of mothers initiating breastfeeding, 2013/14
- 26 % of mothers breastfeeding at 6-8 weeks, 2013/14
- 27 Crude rate per 1,000 (age 0-4 years) of A&E attendances, 2013/14
- 28 Crude rate per 10,000 (age 0-14 years) for emergency hospital admissions following injury, 2013/14
- 29 Crude rate per 10,000 (age 15-24 years) for emergency hospital admissions following injury, 2013/14
- 30 Crude rate per 100,000 (age 0-18 years) for emergency hospital admissions for asthma, 2013/14
- 31 Crude rate per 100,000 (age 0-17 years) for hospital admissions for mental health, 2013/14
- 32 Directly standardised rate per 100,000 (age 10-24 years) for hospital admissions for self-harm, 2013/14

