

FAMILIES OVERVIEW AND SCRUTINY COMMITTEE 8 September 2016

TITLE OF REPORT: Child Health Profile for Gateshead 2016

**REPORT OF:** 

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### SUMMARY

The purpose of this report is to provide an overview of the current Child Health Profile published in June 2016. The paper will highlight areas of good and poor performance relating to child health and wellbeing outcomes for Gateshead.

### 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 area. 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.
- 2. The data within the profile provides a wide range of information on issues affecting child health, looking at early life and infant mortality, levels of breastfeeding, obesity, teenage conceptions, educational performance and youth crime. The data presented outlines the 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.
- 3. Organisations can use this tool, as part of the Joint Strategic Needs Assessment process, to help understand the needs of their community, enabling the identification of priorities for improving the health and wellbeing of children and young people living in Gateshead.
- 4. Public Health England's Child and Maternal (ChiMat) Health Intelligence Network website provide and 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: <a href="http://www.chimat.org.uk">www.chimat.org.uk</a>.

#### **Current Picture**

- 5. The current profile provides an overview of the local child population in comparison to the region and England. Gateshead is reported to have 22.5% of the total population between the ages of 0-19yrs, and of those 8.5% are from an ethnic minority group.
- 6. 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.

# **Key Findings**

- 7. Key findings from the Child Health Profile 2016 for Gateshead are summarised below:
  - The level of **child poverty** in Gateshead is **significantly worse** than the England average with 21.3% of all Children aged 16 years or under living in poverty.
  - Children in Gateshead have average levels of **obesity** that are **similar** to the England rate: 9.5% of children aged 4-5 years and 19.9% of children aged 10-11 years are classified as obese. The England Average level of obesity in children aged 4-5 years is 9.1% and 10-11 years olds is 19.1%
  - Immunisation uptake in Gateshead is **above** the England average and above the required 90% immunisation level.
  - 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 has been a decrease in the number of hospital admissions as a result of **self-harm** for young people 10-24. Gateshead is however still **significantly worse** than the England average.

# Changes in Performance

8. 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 2016 profile, comparison has been made between the indicators presented in 2015 profile and the 2014 profile. A summary of the improvements and any changes are presented below. A note of caution is required when comparing the 2015 position with the 2016 position, as the data does not give us a true indication of trend unless looked at with 3 year rolling averages. Further analysis of trend data using at least 3 years data will be presented at committee to support this report.

## Indicators showing improvement in 2016

- Reduction in Infant Mortality (aged under 1)
- Reduction in Child Mortality (1-17yrs)
- 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 Children in Care
- Reduction in Children killed or seriously injured in road traffic accidents
- Reduction in Low birthweight of term babies
- Reduction in Obese children (4-5yrs)
- Reduction in Obese children (10-11yrs)
- Increase in Breastfeeding prevalence at 6-8 weeks
- Reduction in A&E attendances (0-4yrs)
- Reduction in rate of Hospital admissions caused by injuries in children (0-14yrs)
- Reduction in Hospital admissions caused by injuries in young people (15-24yrs)
- Reduction in Hospital admissions as a result of self-harm (15-24yrs)

### Indicators not showing improvement in 2016

- Decrease in MMR vaccination for one dose (2 years)
- Decrease in Dtap/IPV/Hib vaccination (2 years)
- Decrease in Children in care immunisations.

- Increase in 16-18 year olds not in education, employment or training
- No change in the rate of family homelessness
- No change in rate of Under 18 Conceptions
- Increase in Teenage Mothers
- No change in Hospital admissions due to alcohol specific conditions
- Increase in Hospital admissions due to substance misuse (15-24yrs)
- Increase in Smoking status at time of delivery
- Decrease in Breastfeeding initiation
- Increase in hospital admissions due to asthma
- Increase in hospital admissions due to mental health conditions

## **Changes in the Health Profile Measures**

- 9. The Child Health Profile 2016 for Gateshead released in March 2016 included two new changes and a further change for 2016;
  - Indicator 6 in 2015 was referred to as new sexually transmitted infections (Inc. Chlamydia). As of 2016 this has been removed as an indicator.
  - Indicator 19 Hospital admissions for dental caries (1-4yrs) has been newly added for the 2016 profiles
  - Indicator 7 GCSEs achieved (5 A\*-C Inc. English and Maths) is only a single years data due to reforms of the key stage 4 performance measurement data and cannot be compared to earlier data
  - Indicator 20 (U18 Conceptions) still contains the same value as the previous 2015 profile. The most recent 2014 data release was not in time for the 2016 profile to be updated.
  - Indicator 8 has not been updated and still does not contain a local value.

## Summary

- 10. The Child Health Profile for 2016 provides an overview of child health and wellbeing for Gateshead showing that many areas of children and young peoples health have shown some improvement compared to the 2015 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) an decrease in levels of child obesity in Children aged 4-5yrs (indicator 16).
- 11. However the Child Health Profile also highlights areas for concern such as an increase in hospital admissions due to mental health conditions (Indicator 13) and an increase in smoking status at time of delivery (Indicator 24).

#### Recommendations

- 12. Families Overview and Scrutiny Committee is asked to:
  - a. The committee is asked to note the content of the report
  - b. Receive future reports which detail specific areas of concern and provide trend analysis showing change over at least 3 years data

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