

# Lancashire Children and Young People's Plan Consultation – Fylde summary



This document should be read alongside the Lancashire Children and Young People's Plan (CYPP) consultation report. This Fylde summary contains the priorities which have emerged from the Children and Young People joint strategic needs assessment (JSNA) and which are recommended to be included in the CYPP for 2011 to 2013. The Lancashire report represents the main vehicle for consultation with partners and with children and young people on the direction taken by the new CYPP.

The JSNA has been delivered using a true partnership approach, by engaging with experts and partners across Lancashire to involve them in the interpretation of intelligence on the needs of our children and young people. The JSNA has been overseen by a multi agency project team made up of these experts, which interpreted the intelligence and the evidence base. The Lancashire Children's Trust placed a great emphasis on locality needs being met and as such, whilst reading this document you may find that the needs identified do not match the priorities that the national evidence base would suggest. We would ask any partners who feel strongly that a priority has been missed to supply us with the local evidence to support its inclusion. Any queries on the JSNA analysis, including requests for a copy of the summary of the evidence base should be sent to [jsna@lancashire.gov.uk](mailto:jsna@lancashire.gov.uk). The final JSNA document will be disseminated towards the end of 2010.

We are providing this document to partners to ask for their opinions on the suggested priorities. We would ask that you read this document and respond to the following consultation questions:

- 1. Are you in agreement with the priorities which have been identified?**
- 2. Are there other priorities you would like us to consider?**
  - a. If so, what local evidence is there to support their inclusion?**
- 3. How does your service/organisation/sector contribute to the priorities?**

The remainder of this report will include:

- A summary of Fylde's children and young people
- The priorities for the Children and Young People's Plan

## **A summary of Fylde**

**There are approximately 15,500 children and young people in the district of Fylde for whom the JSNA and the Children and Young People's plan are being developed.**

**If Fylde were a population of 100 children and young people:**

- 22 would be aged 4 and under, 28 would be aged between 5 and 9, 27 would be between 10 and 14 and 22 would be 15 to 19.
- 83 would be from white ethnic groups, 15 from Asian ethnic groups and 2 from other black and minority ethnic groups.
- By 2013 there would be 5 fewer children and young people aged 0-19 living in Fylde, although the reduction would not be uniform across the age groups:
  - There would be no additional children aged 0 to 4 and 1 additional children aged 5 to 9; but
  - There would be 3 fewer children aged 10 to 14 and 3 fewer young people aged 15 to 19.
- 29 children would be only children, 47 would live in families with a sibling, 18 in families with two other siblings and 6 in families with three or more other siblings.
- 80 would live in properties owned by their family, 12 in privately rented properties and 7 in socially rented accommodation.
- 24 children would live in areas classed as being in the most deprived 50% nationally, none of which would live in areas classed as being in the 10% most deprived nationally.
- 7 would be referred to social care under safeguarding arrangements, 1 of which would be re-referred within one year
- 2 would be a victim of crime in any year
- none would be looked after by the authority
- 2 children would have a learning disability and 1 would have autistic spectrum disorder
- 2 would have a physical disability

- 20 would have emotional wellbeing and mental health problems, 10 of which would have a diagnosable mental disorder
  - 4 would have an emotional disorder including anxieties, phobias and depression, 5 would have a conduct disorder and 1 would have hyperactivity disorder
- 1 would be providing care for a significant adult in their life

**There are approximately 650 children born in Fylde each year. A baby boy born in Fylde could expect to live 78 years whilst a baby girl could expect to live 82 years. If Fylde were made up of 100 babies:**

- Fewer than 70 mothers would have been seen by a midwife by 12 weeks of gestation
- 99 mothers would be screened for hepatitis B, HIV and syphilis. At most, one mother would be tested positive for each
- 99 mothers would be tested for rubella and 1 would be found to be AB (antibody) negative, meaning an increased vulnerability to rubella infection
- 5 infants would be born to young women: 1 infants would be born to mothers aged under 18 and 4 to mothers aged 18 or 19 years.
- 23 would be born to mothers aged 35 or over, 4 of which would be to those aged 40 or more years.
- 62 would be spontaneous births, 13 would be assisted with forceps or ventouse, and 24 would be born by caesarean section (11 of which would be elective)
- 6 would be born at a low birth weight
- 20 mothers would be smoking at the time of the birth
- 10 mothers would experience post natal depression
- 31 would never be breastfed
- Only 34 would still be breastfed at 6 to 8 weeks of age.
- 5 would be registered with only the mother's name

- 95 infants would receive all required immunisations by their 1<sup>st</sup> birthday, but only 89 would still be up to date with immunisation by their 5<sup>th</sup> birthday.
- 89 infants would receive the MMR vaccination by their 2<sup>nd</sup> birthday, 94 would receive the single vaccination by their 5<sup>th</sup> birthday but only 87 would have received both first and second doses by this time
- There would be 113 admissions to hospital for this cohort before the age of one year, 9 for respiratory infections and 3 for intestinal infectious diseases.
- There would be 38 emergency admissions to hospital for this cohort before the age of one year, 9 for acute upper respiratory infections and 3 for intestinal infectious diseases.

**There are approximately 4,300 children attending primary schools in Fylde. If Fylde were made up of 100 primary school children:**

- 95 would belong to a white ethnic group.
- 1 would belong to an Asian ethnic group.
- 11 would be eligible for free school meals
- 2 would have a statement of special educational needs
- 1 would be a persistent absentee from school
- There would be 8 admissions to hospital for the 5 and 9 cohort, 1 due to injury, poisoning and other external causes.
- There would be 4 emergency admissions to hospital for the 5 and 9 cohort, 1 due to injury, poisoning and other external causes.
- 81 would achieve level 4 at key stage 2
- none would be underweight in reception year, and 23 would be overweight or obese
- none would be underweight in year 6 and 27 would be overweight or obese.
- 25 would experience some form of tooth decay, and amongst them there would be an average of four decayed teeth.

**There are almost 3,200 children of secondary school age living in Fylde. If Fylde were made up of 100 secondary school children:**

- 97 would belong to a white ethnic group.
- 1 would belong to an Asian ethnic group.
- 9 would be eligible for free school meals
- 2 would have a statement of special educational needs
- 4 would be persistent absentees from school
- There would be 8 admissions to hospital for the 10 to 14 cohort, 2 for diseases of the digestive system and 2 for diseases of the genitourinary system.
- There would be 5 emergency admissions to hospital for the 10 to 14 cohort, 2 for diseases of the digestive system and 1 due to injury, poisoning and other external causes.
- 67 would achieve 5 GCSEs at grades A\* to C including English and maths.
- As many as 24 may smoke by the end of secondary school and 8 of these would buy illicit tobacco
- 80 would drink alcohol, 71 of which would binge drink and 40 of which would drink alcohol at least once a week.
- 22 would try drugs
- 23 would have an emotional disorder; 10 of which will be girls and 13 boys.

**There are more than 3,400 young people aged 16 to 19 in Fylde. If Fylde were made up of 100 young people:**

- 1 would be killed or seriously injured in a road traffic accident
- There would be 13 admissions to hospital for the 15 to 19 cohort, 2 related to pregnancy and child birth, and 2 due to injury, poisoning and other external causes.
- There would be 5 emergency admissions to hospital for the 15 to 19 cohort, 1 related to pregnancy and child birth and 1 due to injuries, poisoning and other external causes.
- 65 would not participate in the recommended levels of physical activity
- 8 would not be in education, employment or training.

- 27 would be tested for Chlamydia and 1 would test positive
- 1 would become pregnant
- 3 would be involved in crime
- 1 would be homeless
- 1 would have anorexia nervosa and 2 bulimia

## Priorities for the CYPP

The Children and Young People joint strategic needs assessment identified key areas of need for children and young people in Lancashire, which are discussed in the main consultation document. These have been incorporated into six priorities for the Lancashire Children and Young People's Plan:

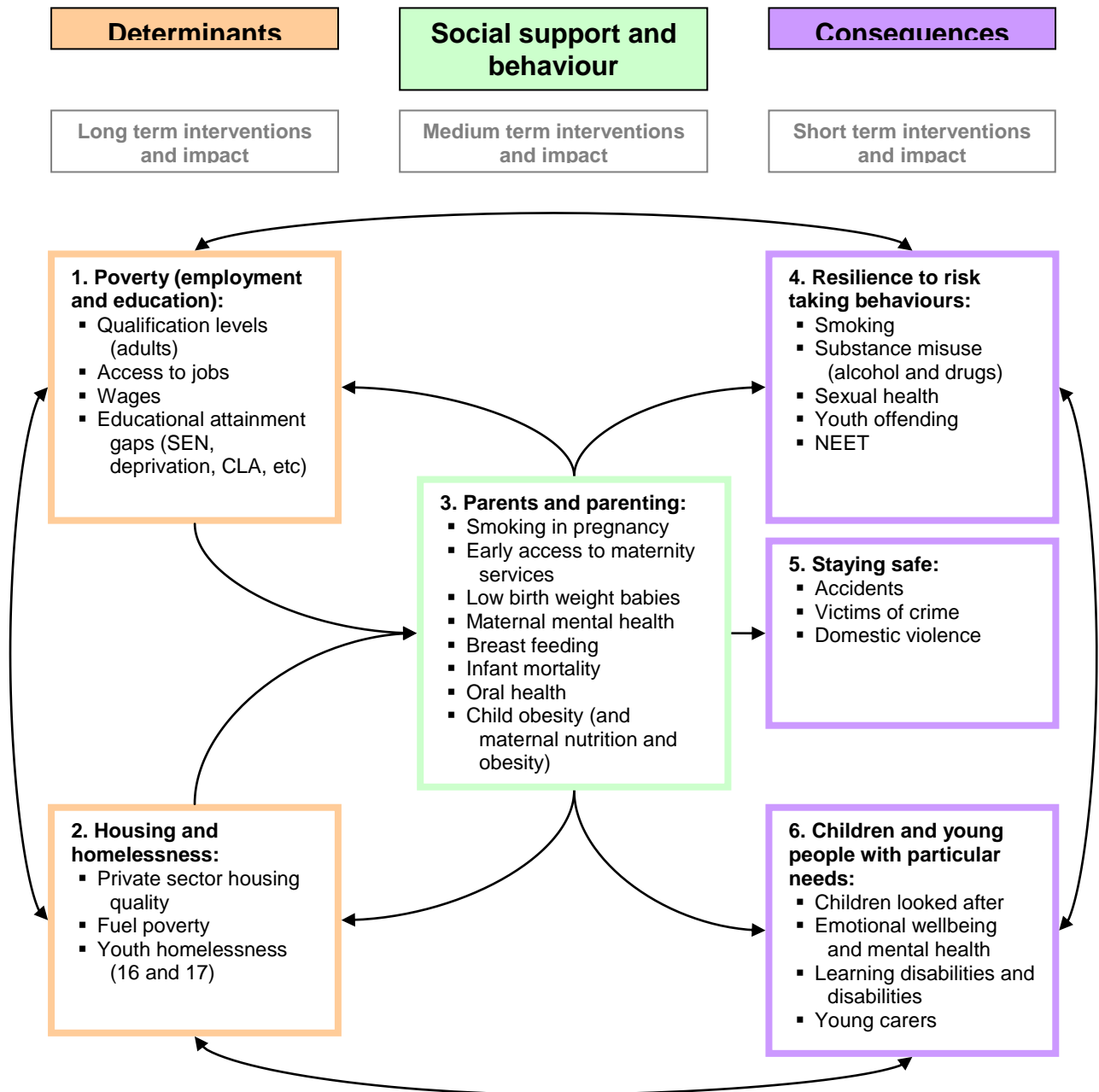
1. **Poverty (employment and education)**
2. **Housing and homelessness**
3. **Parents and parenting**
4. **Resilience to risk taking behaviours**
5. **Safeguarding**
6. **Children with particular needs**

Using a life cycle approach (see Lancashire CYPP consultation report for an explanation of the life cycle approach) brings into focus that there are causal pathways in the lives of children and young people and interventions should focus on preventing poor outcomes but at the same time dealing with outcomes that have already occurred and those which would still be unavoidable even if we were successful in tackling the determinant based priorities.

The six priorities are therefore split with some considered determinants of outcomes for children and young people, others related to social support and behaviour, which lead to outcomes and the outcomes themselves. Interventions must take place at all points to lessen the negative impact on the lives of children and young people and reduce any cumulative effects and intergenerational patterns.

It is also not enough to simply focus on children however, as many of the determinants of outcomes for children will stem from the significant adults in their lives. Interventions to affect outcomes for children and young people must therefore also be focused on those significant adults. For example, children are born into poverty because their parents are in poverty. This may be related to the unavailability of work or their inability to obtain employment because of low skills and qualifications. Strong, positive relationships between parents and children are associated with child wellbeing and improved outcomes. For example, parental interest in, and support with, education and their involvement in the school community are associated with higher levels of achievement. A lack of focus on parents will prevent any major improvements for children.

Clearly it will not be possible for the priorities to be delivered by the Children's Trust alone. The identified needs of adult qualifications, access to jobs, wages, private sector housing and fuel poverty are clearly under the primary control of authorities responsible for adult services, housing strategies and economic development. Rather, the priorities related to these needs highlight areas where there is already action taking place and the Trust's role should be to link in and provide the children and young people perspective.



Below is a summary of indicators related to the needs identified and the numbers of children who are likely to be affected in the district. In order to provide further perspective to support districts in determining their local priorities, the figures for Fylde have been highlighted against those for other similar districts within the county. These similar districts have been identified based upon measures of place and of population.

Measures of place identify districts of similar characteristics according to the area clusters provided by the Office for National Statistics and the Indices of Deprivation. For Fylde, three districts were found to be similar based upon their deprivation status: South Ribble, Chorley and Ribble Valley. One similar district within Lancashire was found for Fylde based upon the ONS area classification: Wyre.

Measures of population identify districts of similar characteristics according to Mosaic, a geodemographic segmentation tool provided by Experian. Mosaic was used to profile Fylde's population and identify the main household groups in the district. The other districts were profiled against Fylde's profile to identify the most similar populations. Using this system identifies similar districts of South Ribble, Ribble Valley and Wyre.

For Fylde, four comparator authorities have therefore been identified within Lancashire: Chorley, South Ribble, Ribble Valley and Wyre.

**Fylde's indicators of need for children and young people**

Priorities and indicators of needs	Numbers affected	Rates and proportions								Comments and notes on data
	Fylde	Fylde	Chorley	South Ribble	West Lancs	Wyre	Lancs	North West	National	
<b>Poverty</b>										
Qualification levels (adults)	195	2%	14%	5%	25%	16%	25%			Number and % of children aged 0-15 living in the 20% most deprived parts of Lancashire
Availability of jobs	195	2%	14%	5%	25%	16%	25%			Number and % of children aged 0-15 living in the 20% most deprived parts of Lancashire
Wages	1,495	11%	13%	11%	17%	15%	19%		22%	Number and % of children aged 0-15 living in poverty defined as their households are in receipt of Child Tax Credit, Income Support or Job Seekers Allowance where their reported income is less than 60% of median income.
Educational attainment gaps	735	10%	11%	11%	15%	13%	15%		17%	The number and % of children eligible for FSM 2009/10
	161	2%	2%	2%	2%	2%	2%		3%	The number and % of children with a statement of special educational needs 2009/10
	31	22	40	28	55	25	52		55	The number and rate of looked after children per 10,000 population, March 2010
NEET	94	8%	12%	3%	7%	7%	7%	7%	6%	Number and % of all young people aged 16-18, March 2010
<b>Housing and homelessness</b>										

## Intelligence for Healthy Lancashire (JSNA)

Priorities and indicators of needs	Numbers affected	Rates and proportions								Comments and notes on data
	Fylde	Fylde	Chorley	South Ribble	West Lancs	Wyre	Lancs	North West	National	
<b>Private sector housing quality</b>	1953	3%	3%	3%	2%	3%	3%			Crude estimates. Housing Strategy Statistical Appendix data used to calculate proportion of 'unfit' property in Lancashire then this was applied to the number of 0 to 19 year olds living in private sector housing in each district, calculated by using Census. % of all people aged 0-19 living in poor quality private sector housing
<b>Fuel poverty</b>	2307	15%	11%	10%	12%	16%	15%			Crude estimate based on proportion of households in each district (2006 data from Department for Energy and Climate Change) applied to 0 to 19 populations  Estimates of the proportion of households in poverty, Department for Energy and Climate Change
<b>Youth homelessness</b>	19	1%	1%	1%	2%	1%	1%			Numbers and proportions from data of Young People Service 2010
<b>Parents and parenting</b>										
<b>Smoking in pregnancy</b>	127	20%	19%	19%	19%	20%	20%	14%	19%	Numbers of births where mother still smoking, district data uses PCT prevalence and district births  PCT smoking prevalence rates
<b>Ante-natal early booking</b>	206	68%	47%	47%	47%	68%		55%	62%	Based upon PCT rates of early booking and births data 2009/10  PCT rates booked by 12 weeks

## Intelligence for Healthy Lancashire (JSNA)

Priorities and indicators of needs	Numbers affected	Rates and proportions								Comments and notes on data
	Fylde	Fylde	Chorley	South Ribble	West Lancs	Wyre	Lancs	North West	National	
Low birth weight babies	38	6%	5%	7%	6%	6%	7%		7%	% of live births of low birth weight
Maternal mental health	64	10%	10%	10%	10%	10%	10%	10%	10%	Based upon national prevalence of post natal depression
Breastfeeding	199	69%	67%	67%	67%	69%	68%		73%	Based upon PCT prevalence of breastfeeding and births data 2009/10 PCT breastfeeding initiation rates
Infant mortality	7	3.8	5.2	4.4	5	5.4	5.3	5.3	4.8	Infant mortality numbers and rates per 1,000 live births, 2006-08
Oral health	1124	26%	40%	40%	40%	26%	37%	38%	31%	Applied oral health survey 2007/08 prevalence to primary children numbers Oral health survey 2007/08
Child obesity	123	22%	21%	20%	23%	23%	22%	23%	23%	proportions in reception year measured to be overweight or obese from 2008/09 NCMP
	173	27%	30%	32%	32%	30%	31%	33%	33%	proportions in year 6 measured to be overweight or obese from 2008/09 NCMP
<b>Resilience to risk taking behaviours</b>										
Smoking	1240	24%	24%	24%	24%	24%	24%	22%		North West trading standards 2009 survey prevalence. Proportion applied to 14-17 population
Substance misuse (including alcohol)	619	40%	40%	40%	40%	40%	40%	38%		North West trading standards 2009 survey prevalence of young people drinking at least once a week. Proportion applied to 14-17 population
Youth offending	62	7.3	8.3	9.6	10.1	10.7	9.3			Number and rate per 1,000 population age 10-17 of first time entrants to the Youth Justice System, 2009/10

## Intelligence for Healthy Lancashire (JSNA)

Priorities and indicators of needs	Numbers affected	Rates and proportions								Comments and notes on data
	Fylde	Fylde	Chorley	South Ribble	West Lancs	Wyre	Lancs	North West	National	
Sexual health	1116	27%	30%	30%	30%	27%	27%		24%	PCT coverage rate of Chlamydia tests applied to population numbers, 2009/10
	124	29.5	39.5	38	36.1	35.4	42.1	45.7	40.9	Teenage conceptions numbers and rate per 1,000 young women aged 15-17 2006 to 2008
Things to do	1262	40%	40%	40%	40%	40%	40%		33%	Tellus4 survey proportion of young people who do not agree that there were enough activities for them to go out and do on Friday and Saturday nights as reported to Tellus4 survey. Proportion applied to secondary age population Lancashire prevalence does not reveal district differences
<b>Safeguarding</b>										
Accidents	8	51	94	82	96	85	91			Annual average numbers and rate per 100,000 killed and seriously injured children and young people aged 0-19, 2004-08
Victims of crime	359	15.6	27.3	46.8	23.8	24.9	26.6			Victimisation rate and numbers. Victims per 1,000 0-19 year olds. MADE data 2009/10
Domestic violence	414	Approx 3%	Approx 3%	Approx 3%	Approx 3%	Approx 3%	Approx 3%			Council of Europe studies estimate 6% of women experience domestic violence over their lifetimes. According to the British Crime Survey, approximately half of victims live with children. These proportions were applied to estimates of households with children based upon child benefit claimants to give estimates of incidence of domestic violence affecting children and young people in one year
<b>Children with particular needs</b>										

## Intelligence for Healthy Lancashire (JSNA)

Priorities and indicators of needs	Numbers affected	Rates and proportions								Comments and notes on data
	Fylde	Fylde	Chorley	South Ribble	West Lancs	Wyre	Lancs	North West	National	
<b>Looked after children</b>	<b>31</b>	<b>22</b>	40	28	55	25	52		55	Numbers and rate per 1,000 children and young people in Lancashire
<b>Emotional wellbeing and mental health</b>	<b>0</b>	<b>0%</b>	3%	3%	19%	11%	21%			Numbers and % of children aged 0-15 living in those areas ranked as having wellbeing levels in the bottom 20% nationally using the Child Wellbeing Index. Child wellbeing index and ONS population estimates 2007
	<b>409</b>	<b>4.30%</b>	4.30%	4.30%	4.30%	4.30%	4.30%	4.30%	4.30%	ONS survey, 4.3% of children aged 5 - 16
<b>Learning disabilities and disabilities</b>	<b>107</b>	<b>7</b>	9	12	5	6	8			Numbers and rate per 1,000 children and young people in Lancashire. FIND and ONS population estimates
	<b>244</b>	<b>Approx 2%</b>	Approx 2%	Approx 2%	Approx 2%	Approx 2%	Approx 2%	Approx 2%	Approx 2%	Emerson & Hatton (2004) estimated LD rates: 0.96% of 5-9 population, 2.26% of 10-14 population and 2.67 of 15-19 population
<b>Young carers</b>	<b>134</b>	<b>13</b>	20	17	21	19	20			JSNA modelled estimates of young carers in Lancashire