



# The health and wellbeing of children and young people in Cambridgeshire and Peterborough

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Prepared by : Public Health Information Cambridgeshire County Council

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### Summary

### Demography

There are almost 181,000 children and young people aged under 18 years living in Cambridgeshire and Peterborough, with 30% aged under 5 years, 39% primary school aged and 30% secondary school aged. Peterborough and Huntingdonshire have the highest numbers of preschool children and these areas, along with South Cambridgeshire, have the highest number of school children. Over the next 5 years it is forecast that the child and young people population will increase by 11% in Cambridgeshire (14,000 more children) and 14% in Peterborough (6,800 more children). Births forecasts are relatively stable over the next 10 years, with an average of 60 more births per year in Cambridgeshire and less than 10 per year in Peterborough (there are currently over 10,000 births a year across the area). In general the proportion of population from Black and Minority Groups is relatively low in Cambridgeshire (11%), however the proportions in Cambridge City (26%) are similar to those seen in Peterborough (28%). Both areas have relatively large Asian and Mixed Ethnic Group populations. At the time of the 2015 school census there were 957 pupils who had registered as Gypsy/Roma or of Traveller Irish Heritage, with the largest populations in Peterborough, Fenland and South Cambridgeshire. Around 3 out ten children in Peterborough and 1 in 5 in Cambridgeshire live in lone parent families. A significantly higher proportion of children in Peterborough (21.9%) live in poverty compared to Cambridgeshire (12.1%) and England (18.6%). At county level Cambridgeshire has relatively low levels of child poverty but there are areas within the county, especially to the north of Fenland, parts of Cambridge City and pockets in other districts, which have rates that are comparable to Peterborough.

### Wider determinant of health

Generally pupil's levels of development in Reception and Year 1, including those on free school meals, fares worse locally, in both Cambridgeshire and Peterborough, than seen nationally. Girls have higher levels of school readiness and phonic screening than boys, but remain significantly worse than England. GCSE attainment in Cambridgeshire is higher than seen nationally, and Peterborough attainment is significantly lower. Cambridgeshire appears to have high proportions of school absence compared to England. There are downward trends in the number of young people who are not in education, employment or training in both areas, although Peterborough remains higher than England. Around 1 in seven pupils are registered as having special educational needs in both areas. Cambridgeshire appears to have a high proportion of learning disabled pupils, especially with moderate learning difficulties, and both local authorities have high proportions of children on the autism spectrum. The percentage of pupils with speech, language or communication needs is significantly lower than England in 2015 in both local authorities. There is a downward trend in the rate of first time entrants to the youth justice system in both areas, with Peterborough's rates now similar to the national average. Family homelessness appears to have recently increased in Peterborough.

#### Health improvement

Live birth rates are significantly high in Peterborough and Fenland compared to the national average. Around 1 in 15 births in Cambridgeshire (lower than nationally) and 1 in 12 in Peterborough (around national average) are of low birth weight (under 2,500g). Low birth weight full term babies is higher, but not significantly higher, in Peterborough than Cambridgeshire and England. In recent years there has been a slight increasing trend in low birth weight term babies in both Cambridgeshire and Peterborough. Around 1 in ten mothers are current smokers at the time of delivery. Historic data suggests that such smoking rates are significantly high in Peterborough, but this is being masked by the new single figure

reported by Cambridgeshire and Peterborough CCG. Breastfeeding initiation rates are high in Cambridgeshire compared to England, with rates being around the national average in Peterborough. Fenland, however, has significantly low rates. Breastfeeding noticeably drops by 6-8 weeks in all areas, with Fenland continuing to have low prevalence. There appears to be an increasing trend in breastfeeding uptake and continuation in Cambridgeshire, with rates remaining relatively static in Peterborough. Teenage conceptions are significantly high in Peterborough, but rates have noticeably decreased over the last 15 years, and are now almost half the rate they were in 1998. In 2014/15 there were 89 teenage mothers across the area, with rates high in Peterborough.

In general positive lifestyle behaviours in children and young people in Peterborough are not as favourable as in Cambridgeshire as a whole, and are round the national average. Smoking rates in 15 year olds are around the England average in both areas. Hospital admissions for alcohol appear to be on the increase in Peterborough, which is against the national trend. Both Cambridgeshire and Peterborough are experiencing notable increases in hospital admissions for substance misuse. Obesity and excess weight rates are low in Cambridgeshire compared to the England rate, with rates in Peterborough around the national average. There are however hotspots in both areas where recorded excess weight prevalence is relatively high Detection rates for chlamydia in Peterborough are double that of Cambridgeshire.

### Mental health

It is estimated that 1 in ten children have a diagnosable mental health problem nationally, with a higher proportion in secondary school (7.7%) than primary school (11.7%). Locally these estimates suggest that there are approximately 4,800 primary school children and 5,300 secondary school children with a diagnosable mental health disorder across Cambridgeshire and Peterborough. The prevalence of conduct disorders decreases with age, whilst there is a noticeable increase in the prevalence of emotional disorders in older children. Local modelling on estimated mental health need at a low geographical level suggests that needs are higher in all districts than based on straight prevalence, with the most noticeable increase expected in Cambridge City. Hospital admissions due to self-harm are significantly high in Cambridgeshire and Peterborough compared to England. The latest data suggests that there has been a decline in such admissions are due to self-poisoning and most occur at home. It is estimated that 12% of women may require additional support and/or appropriate onward referral for mental health problems during pregnancy and/or the postnatal period. This equates to just over 1,000 women a year in Cambridgeshire and Peterborough.

### Health protection

Both Cambridgeshire and Peterborough are meeting the national targets (90%) for the majority of childhood immunisations and vaccinations. The exceptions are two dose MMR at age 5 and Peterborough is also low for Human Papilloma Virus (HPV) vaccination in girls aged 12-13 years. In recent years MMR uptake in Peterborough has been increasing, however, there appears to be a downward trend in Cambridgeshire. Until the latest time period reported Peterborough was meeting the target for HPV vaccination. It is important to note that Cambridgeshire and Peterborough are not meeting the coverage needed for herd immunity (95%) in the majority of immunisations and therefore increasing uptake remains a priority.

Almost all babies in Cambridgeshire and Peterborough have bloodspot screening. Cambridgeshire has a significantly low proportion of newborns having their hearing screened.

#### Social care

As at 31 March 2015 there were 4,888 children in need across Cambridgeshire and Peterborough, with rates significantly high in Peterborough (406.6 per 10,000) and significantly low in Cambridgeshire (227.6 per 10,000) compared to England (337.3 per 10,000). Around 17.0% of children in need in Cambridgeshire had a disability recorded, mainly learning disabilities and autism/aspergers, noticeably higher than the national average (13.0%) and Peterborough average (11.5%). Almost three-quarters of children in need in Cambridgeshire and two-thirds of children in Peterborough had 'abuse or neglect' recorded as their primary need. Cambridgeshire appears to have a higher proportion of primary needs for child's disability or illness and low proportions of family in acute stress and family dysfunction compared to England. Peterborough has higher proportion of family dysfunction than Cambridgeshire. Domestic violence and mental health were the highest factors identified at the end of assessment in both areas, including alcohol and drug misuse in Peterborough. At the end of 2014/15 there were 618 children in Cambridgeshire and Peterborough subject to a child protection plan, with rates significantly high in Peterborough compared to England. At the same time there were 876 children looked after across the area, again with rates significantly higher in Peterborough than England. Rates of children looked after are decreasing slightly in Peterborough, but remain notably higher than England, and increasing slightly in Cambridgeshire, but remain notably lower than England. Of the 335 children who had been looked after for at least a year at 31st March in Cambridgeshire, 94% were up to date with their immunisations, 96% had their teeth checked by a dentist and 97% had their annual health assessment. The respective proportions for the 250 Peterborough children were 92% for immunisations, 90% for dental check and 88% for annual health assessment.

### **Health services**

A&E attendances in children aged under 5 years are significantly high in Peterborough compared to England, with a notable increasing trend. Hospital admissions for accidental and deliberate injuries in 0-4 years is high in Huntingdonshire compared to England.

Almost 45% of total hospital costs in children and young people are in children aged under 5 years, mainly due to a large emergency hospital admission rate. Younger children tend to be admitted as an emergency due to respiratory and viral infections, whilst the majority of admissions in young teenagers is as a result of fracture and then poisoning by drugs (prescription) in older teenagers. Planned admissions are high for nonsuppurative otitis media, tonsils and adenoids in all age bands. Outpatient attendances are highest in 0-4 year olds.

Over a third of children in Peterborough have one or more decayed, missing or filled teeth, significantly higher than England.

### Mortality

There are on average 26 infant deaths a year in Cambridgeshire and 13 deaths in Peterborough, with rates decreasing in both areas, and most notably in Peterborough. Rates of stillbirth, perinatal mortality, neonatal mortality and postneonatal mortality are higher in Peterborough than Cambridgeshire, but both areas have rates that are statistically similar to the national average. Cambridgeshire has a significantly low stillbirth rate. There on average 20 deaths a year in children and young people aged 1-17 years across Cambridgeshire and Peterborough, with rates higher, but not significantly higher, in Peterborough compared to Cambridgeshire and England. The latest data suggest that there has been a decrease in such deaths in Peterborough.

### Introduction

Routinely available data on the health and wellbeing of children and young people in Cambridgeshire and Peterborough are presented in this briefing, with the aim of informing children's commissioning and service specifications. Where possible data are presented at district level and trends shown to indicate patterns of change, which could help with future planning.

Data are presented on demographics, wider determinants of health, mental health, health improvement, health protection, social care, health service usage and mortality.

Colour coding is used throughout the report to determine where indicators are significantly higher, lower or similar to the national average. It is important to note that in some instances being higher or lower than the national average does not necessarily indicate a poorer situation than experienced nationally. For example, some of the special educational needs indicators are locally higher than England, but this may be a reflection of local services or true higher prevalence.

Key to colour coding

Statistically significantly higher/worse than England Statistically similar to England

Statistically significantly lower/better than England

### Demography

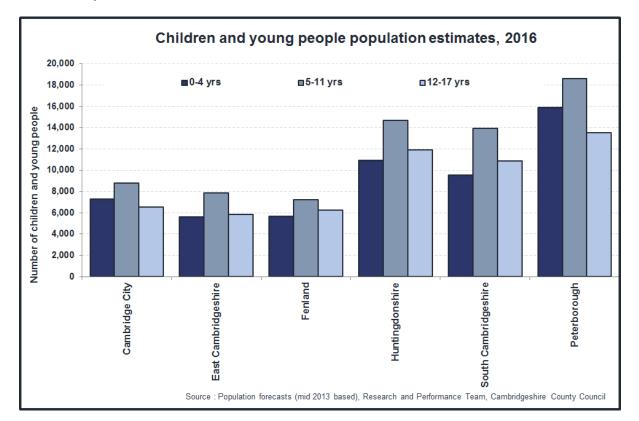
### **Population estimates**

It is estimated that there are almost 181,000 children and young people aged under 18 years living in Cambridgeshire and Peterborough, with Peterborough, Huntingdonshire and South Cambridgeshire having the highest numbers within the area. These three districts also have the highest number of preschool children, primary school children and secondary school children in their populations.

Table 1: Cambridgeshire and Peterborough estimated population, 2016

Districts		Number				Percentage of C&P total				
	0-4 yrs	5-11 yrs	12-17 yrs	Total	0-4 yrs	5-11 yrs	12-17 yrs	Total		
Cambridge City	7,300	8,800	6,500	22,600	13.3%	12.4%	11.8%	12.5%		
East Cambridgeshire	5,600	7,800	5,800	19,300	10.2%	11.0%	10.5%	10.7%		
Fenland	5,700	7,200	6,300	19,200	10.4%	10.1%	11.5%	10.6%		
Huntingdonshire	10,900	14,700	11,900	37,500	19.9%	20.7%	21.6%	20.7%		
South Cambridgeshire	9,500	13,900	10,900	34,300	17.3%	19.5%	19.8%	19.0%		
Cambridgeshire	39,000	52,500	41,400	132,900	71.0%	73.8%	75.3%	73.5%		
Peterborough	15,900	18,600	13,500	48,000	29.0%	26.2%	24.5%	26.5%		
Cambridgeshire and Peterborough	54,900	71,100	55,000	180,900	100.0%	100.0%	100.0%	100.0%		

Source: Population forecasts, mid 2013 based, Research and Performance Team, Cambridgeshire County Council



### Chart 1: Population estimates, 2016

### **Population forecasts**

Over the next five years the population aged under 18 years old is forecast to increase by 11% (14,000 more children) in Cambridgeshire and 14% (6,800 more children) in Peterborough. Within Cambridgeshire the largest increases, in terms of actual numbers, are expected in South Cambridgeshire and Huntingdonshire. Cambridge City and East Cambridgeshire are forecast to experience the highest proportional increases of children, with 14% more children aged under 18 years by 2021.

By 2021 it is expected that there will be 8% (3,000) more preschool children in Cambridgeshire; 12% (6,400) more primary school aged children and 12% (4,800) more secondary school children. The corresponding increases in Peterborough are; 7% (1,200) preschool, 19% (3,500) primary school and 16% (2,200) secondary school. In the longer term i.e. 2026 it is expected that there will be slightly less preschool children in Peterborough than in 2021 and that the general rate of overall increase is less between 2021 and 2026 than 2016 to 2021. There will continue to be a steady increase in children and 12 to 18 years. This is a reflection of the ageing of the younger age bands over time.

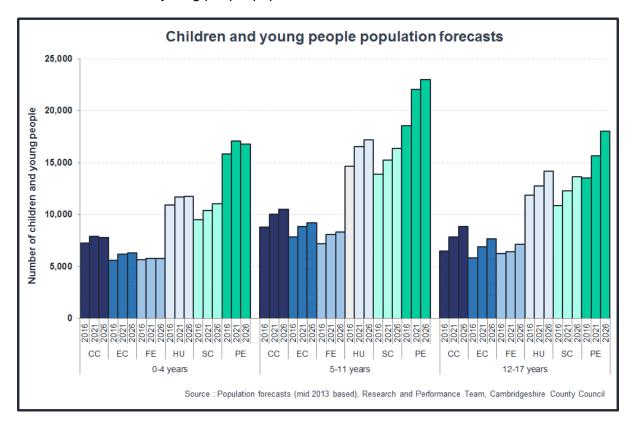
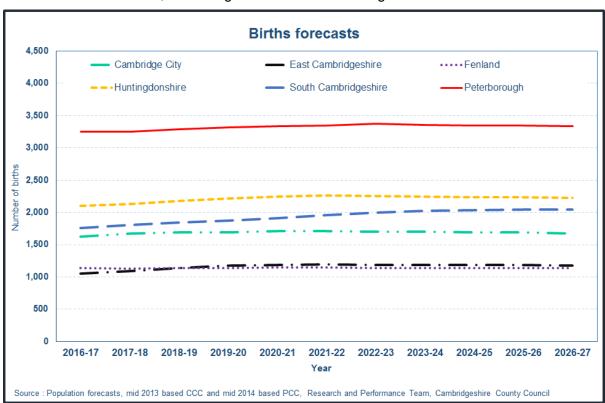


Chart 2: Children and young people population forecasts, mid 2013 based.

Over the next 10 years Cambridgeshire County Council demographers have forecast that births will increase by 7.5% in Cambridgeshire (578 births) and by 2.7% in Peterborough (87 births). The largest increases within Cambridgeshire are predicted in South Cambridgeshire (16.1%, 283 births) and East Cambridgeshire (12.0%, 127 births).





### Ethnicity

The ethnicity of school pupils is recorded as part of the annual school census. The table and chart below show the ethnicity of primary and secondary school pupils combined. Cambridge City and Peterborough have relatively high proportions of Black and Minority Ethnic (BME) groups. Both areas have higher proportions of Asian (especially Peterborough) and mixed ethnic groups (especially Cambridge) compared to the other districts in Cambridgeshire.

At the time of the census there were 957 school pupils registered as Gypsy/Roma or Traveller of Irish Heritage, with the highest numbers in Peterborough (322 children, 33% of total), Fenland (188 children, 20%) and South Cambridgeshire (183 children, 20%).

Ethnic group		CC	EC	FE	HU	SC	CCC	PCC	Total
Number of pupil	S	11,862	11,482	12,790	22,471	19,844	78,449	33,930	112,379
White	White British	57.7%	85.2%	83.1%	84.5%	81.8%	79.7%	55.0%	72.2%
	White Irish	0.8%	0.2%	0.1%	0.2%	0.4%	0.3%	0.2%	0.3%
	Any Other White	14.9%	6.9%	10.4%	5.7%	6.7%	8.3%	16.0%	10.6%
	Total	73.4%	92.4%	93.7%	90.5%	88.9%	88.3%	71.1%	83.1%
Black	Black African	1.3%	0.4%	0.4%	0.7%	0.6%	0.7%	2.2%	1.1%
	Black Caribbean	0.5%	0.0%	0.1%	0.1%	0.1%	0.2%	0.5%	0.3%
	Any Other Black	0.4%	0.1%	0.2%	0.2%	0.2%	0.2%	0.6%	0.3%
	Total	2.3%	0.5%	0.7%	1.1%	0.9%	1.1%	3.2%	1.7%
Asian	Bangladeshi	3.6%	0.3%	0.2%	0.4%	0.3%	0.8%	0.2%	0.6%
	Indian	3.1%	0.4%	0.3%	0.7%	1.3%	1.1%	2.5%	1.5%
	Pakistani	0.8%	0.1%	0.2%	1.2%	0.4%	0.6%	13.0%	4.4%
	Any Other Asian	3.2%	0.6%	0.6%	0.9%	1.3%	1.3%	2.2%	1.6%
	Total	10.6%	1.5%	1.3%	3.2%	3.3%	3.8%	17.9%	8.1%
Mixed	Mixed White/Black African	1.2%	0.6%	0.3%	0.6%	0.5%	0.6%	0.9%	0.7%
	Mixed White/Black Caribbean	1.9%	0.4%	0.5%	1.0%	0.8%	0.9%	1.6%	1.1%
	White and Asian	2.2%	1.3%	0.8%	1.1%	1.6%	1.4%	1.5%	1.4%
	Any Other Mixed	2.9%	1.8%	0.8%	1.4%	1.8%	1.7%	1.4%	1.6%
	Total	8.2%	4.2%	2.3%	4.1%	4.7%	4.6%	5.4%	4.8%
Chinese		2.0%	0.4%	0.2%	0.4%	0.7%	0.7%	0.4%	0.6%
Gypsy/Roma	Gypsy/Roma	0.9%	0.6%	1.3%	0.3%	0.5%	0.6%	0.9%	0.7%
and Travellers	Traveller of Irish Heritage	0.1%	0.1%	0.2%	0.1%	0.4%	0.2%	0.1%	0.1%
	Total	0.9%	0.7%	1.5%	0.3%	0.9%	0.8%	0.9%	0.9%
Any Other Ethn	ic Group	2.6%	0.4%	0.3%	0.5%	0.6%	0.8%	1.0%	0.8%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

### Table 2: Ethnicity, school pupils, January 2015

Source: School Census, January 2015, Cambridgeshire County Council and Peterborough City Council Note: CC Cambridge City EC East Cambridgeshire FE Fenland HU Huntingdonshire SC South Cambridgeshire CCC Cambridgeshire County Council PCC Peterborough City Council

### Household composition

Peterborough and Fenland have the highest proportions of dependent children living in lone parent families across the area. Fenland has the highest proportion of dependent children living in cohabiting couple families.

District	Married or same sex civil partnership couple family			Cohabiting couple family			Lone	Number of dependent		
	Non-step family	Step family	Total	Non-step family	Step family	Total	Male parent	Female parent	Total	children
Cambridge City	59.2%	3.7%	62.9%	12.9%	2.3%	15.3%	2.2%	19.6%	21.9%	11,205
East Cambridgeshire	61.7%	5.3%	67.1%	13.0%	3.0%	16.1%	2.1%	14.8%	16.9%	10,366
Fenland	47.1%	6.2%	53.3%	14.5%	4.8%	19.3%	3.6%	23.8%	27.4%	10,996
Huntingdonshire	57.6%	6.1%	63.6%	12.2%	3.5%	15.7%	2.5%	18.2%	20.7%	20,836
South Cambridgeshire	66.3%	4.6%	70.9%	10.9%	2.2%	13.1%	2.1%	13.9%	16.0%	18,625
Cambridgeshire	59.1%	5.2%	64.3%	12.5%	3.1%	15.6%	2.5%	17.7%	20.1%	72,028
Peterborough	48.9%	5.3%	54.3%	12.5%	3.4%	15.9%	3.1%	26.7%	29.8%	24,280
England	51.5%	5.0%	56.5%	11.9%	3.0%	14.9%	3.1%	25.5%	28.7%	6,408,564

Table 3: Household composition, dependent children, 2011

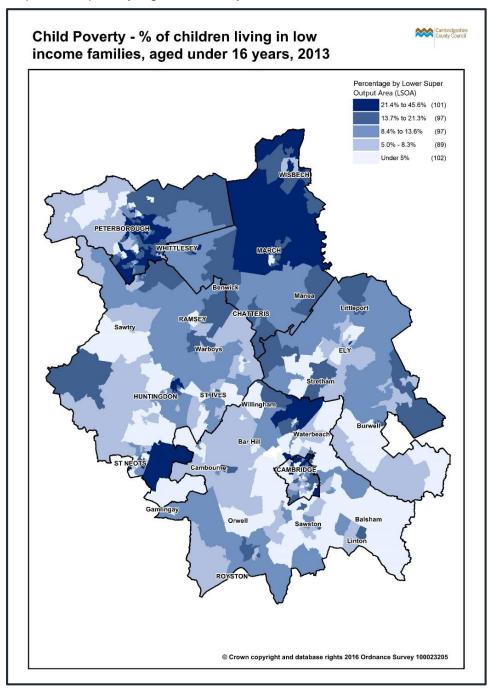
Source: Table DC1114EW, Census 2011, ONS

### Child poverty

Around 1 in 8 children in Cambridgeshire live in poverty (12.1%) compared to more than 1 in 5 in Peterborough (21.9%). Cambridgeshire is significantly better than the England average (18.6%), and Peterborough significantly worse.

The map below presents child poverty data at Lower Super Output Area (LSOA). The darker areas have the highest proportions of children aged under 16 years living in low income families (children living in families in receipt of out of work benefits or tax credits where their reported income is < 60% median income). The pattern of actual numbers of children living in poverty closely correlates to the areas with the highest proportions.

There are hotspots of child poverty throughout the Cambridgeshire and Peterborough, with noticeably high concentrations in north Fenland and the cities of Peterborough and Cambridge.



Map 1: Child poverty, aged under 16 years, 2013

In 2015 8,161 (9.9%) of all pupils were known to be eligible for and claiming free school meals in Cambridgeshire and 5,706 (16.7%) in Peterborough, significantly higher than the England average of 15.2%.

### Wider determinants of health

### Education

### School readiness

The percentage of children achieving a good level of development is significantly low in Peterborough compared to England, with Cambridgeshire around the national average. Good development is noticeably higher in girls than boys. Cambridgeshire has seen an increase in overall development that is in line with the national upward trend. There has been an upward trend in Peterborough but there was a noticeable decrease between 2013/14 and 2014/15, which has widened the gap between the Peterborough and England percentages.

Table 4: Percentage of children achieving a good level of development at the end of reception, 2014/15

District	Ma	Male		nale	Total	
	Number	%	Number	%	Number	%
Cambridgeshire	2,218	59.1	2,587	73.0	4,805	65.8
Peterborough	862	53.4	1,016	69.5	1,878	61.1
England		58.6		74.3		66.3

Source: Public Health Outcomes Framework, Fingertips, PHE

Cambridgeshire has a significantly low proportion of pupils with free school meal status achieving a good level of development at the end of reception compared to England, for both boys and girls. Peterborough has around the national average for both sexes. The proportions are noticeably lower in boys than girls.

Table 5: Percentage of children with free school meals achieving a good level of development at the end of reception, 2014/15

District	Ма	ale	Fem	ales	Total		
	Number	%	Number	%	Number	%	
Cambridgeshire	132	37.3	170	48.9	302	43.0	
Peterborough	140	45.3	146	61.9	286	52.5	
England		42.6		60.3		51.2	

Source: Public Health Outcomes Framework, Fingertips, PHE

Cambridgeshire and Peterborough have significantly low proportions of Year 1 pupils achieving the expected level in the phonic screening check compared to England, for both boys and girls. Girls have a noticeably higher attainment level than boys.

Table 6: Percentage of Year 1 pupils achieving the expected level in the phonics screening check, 2014/15

District	Male		Ferr	nale	Total		
	Number	%	Number	%	Number	%	
Cambridgeshire	2,546	70.6	2,851	78.9	5,397	74.8	
Peterborough	983	64.9	1,113	74.9	2,096	69.8	
England		73.0		80.8		76.8	

Source: Public Health Outcomes Framework, Fingertips, PHE

Cambridgeshire and Peterborough have got significantly low proportions of Year 1 pupils with free school meal status achieving the expected level in the phonic screening check

compared to England, for both boys and girls. Girls have a noticeably higher attainment level than boys.

Table 7: Percentage of Year 1 pupils with free school meals achieving the expected level in the phonics screening check, 2014/15

District	Ma	ale	Fem	ales	Total		
	Number	%	Number	%	Number	%	
Cambridgeshire	170	46.1	215	60.2	385	53.0	
Peterborough	147	56.5	154	60.6	301	58.6	
England		59.5		70.1		64.7	

Source: Public Health Outcomes Framework, Fingertips, PHE

### GCSE attainment

In 2014/15 59% of pupils in Cambridgeshire and 48% of pupils in Peterborough achieved 5 A\*-C GCSE's (including English and Maths), with proportions being significantly high in Cambridgeshire and significantly low in Peterborough compared to England. Data on GCSE attainment for children in care are unavailable for both areas due to small numbers and suppression rules on the data.

Table 8: GCSEs achieved (5 A\*-C including English and Maths), 2014/15

District	All children				
	Number	%			
Cambridgeshire	3,502	58.9			
Peterborough	1,045	48.4			
England		57.3			

Source: Children's Health Profile, Fingertips, PHE

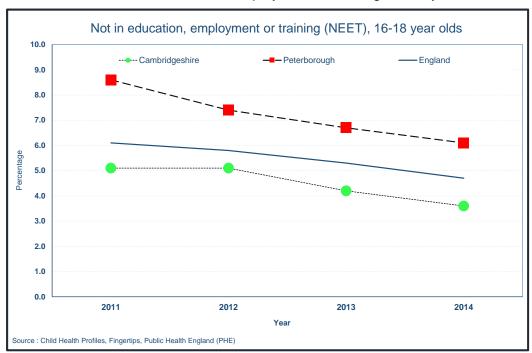
### Pupil absence

In 2013/14 Cambridgeshire (4.72%) had a significantly high proportion of children aged 5-15 years who had been absent from school (authorised and unauthorised), based on half days missed, compared to England (4.51%). The proportion in Peterborough is around the national average (4.66%).

Source: Children's benchmarking tool, Fingertips, Public Health England

### Not in education, employment or training (NEET)

The proportion of young people aged 16-18 years who are not in education, employment or training is significantly high in Peterborough (6.1%) and significantly low in Cambridgeshire (3.6%) compared to England (4.7%). Both areas are experiencing downward trends in rates at the same speed as seen nationally.





### Special Educational Needs (SEN)

In 2015 over 14,200 pupils (15.4%) in Cambridgeshire and 5,500 pupils (15.7%) were registered as having a special educational need, around the same as the national average (15.4%). Both areas had significantly higher proportions of pupils with statements compared to England. The percentage of pupils with speech, language or communication needs was significantly lower than England in 2015 in both local authorities

Table 9: Special Educational Needs

Indicator	Time period	Cambrid	lgeshire	Peterb	orough	England
		Number	%	Number	%	
% of school pupils with						
Special educational need	2015	14,257	15.4%	5,508	15.7%	15.4%
A statement	2015	3,028	3.27%	1,247	3.56%	2.80%
Learning disability	2014	4,608	4.98%	1,950	5.57%	4.97%
Behavioural, emotional and social support needs	2015	1,630	1.79%	568	1.68%	1.66%
Speech, language or communication needs	2015	1,467	1.58%	557	1.59%	2.26%
Austism spectrum disorder	2015	1,079	1.17%	436	1.24%	1.08%
Social, emotional and mental health needs	2015	1,889	2.04%	668	1.91%	2.00%
		Number	Rate	Number	Rate	
Children known to schools (rate per 1000 pupils)						
Moderate learning difficulties	2014	2,333	25.2	983	28.1	28.6
Severe learning difficulties	2014	357	3.9	111	3.2	3.8
Profound and Multiple Learning Difficulty	2014	112	1.2	86	2.5	1.29
Learning disabilities (excludes specific difficulties such as dyslexia)	2014	2,802	30.3	1,180	33.7	33.7

Source: Special Educational Needs, January 2015, Department For Education



Significantly lower than England Significantly higher than England Similar to England

### Crime

In 2014 there were 193 first time entrants to the youth justice system in Cambridgeshire and 74 in Peterborough, with rates significantly lower in Cambridgeshire than England and rates in Peterborough around the national average. There is a downward trend in the rates in both areas.

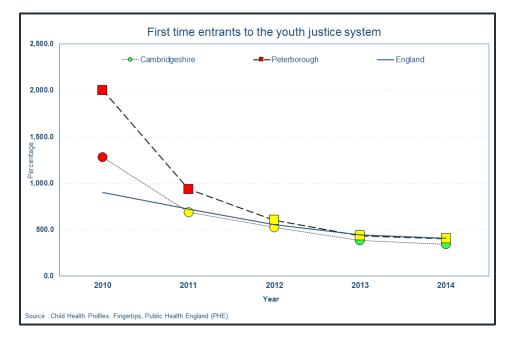


Chart 5: Trend in first time entrants to the youth justice system

### Family homelessness

In 2014/15 there were 425 Cambridgeshire households with dependent children or pregnant women accepted as unintentionally homeless and eligible for assistance and 249 in Peterborough, with the associated rates significantly higher in Peterborough than England. The number of acceptances in Peterborough increased from 181 in 2013/14 to 249 in 2014/15. The trend has remained fairly static in Cambridgeshire.

Source: Child Health Profiles, Fingertips, Public Health England

### Health improvement

### **Births**

In 2014 there were 7,269 live births in Cambridgeshire and 3,134 in Peterborough, with rates significantly higher in Peterborough and significantly lower in Cambridgeshire compared to England. The rate in Peterborough was 38% higher than Cambridgeshire, however, within Cambridgeshire Fenland had a significantly high rate compared to England. The rate in Cambridge City is very low due to their population structure i.e. large student numbers.

Districts	Number of live births	Birth rate per 1,000 female population aged 15 - 44	95% confidence intervals
Cambridge City	1,421	44.1	(41.9 - 46.4)
East Cambridgeshire	1,035	65.5	(61.8 - 69.5)
Fenland	1,118	66.6	(63.0 - 70.5)
Huntingdonshire	1,966	62.5	(59.8 - 65.2)
South Cambridgeshire	1,729	62.8	(60.0 - 65.7)
Cambridgeshire	7,269	58.7	(57.4 - 60.0)
Peterborough	3,134	80.8	(78.1 - 83.5)
England	661,496	62.2	(62.1 - 62.4)

Table 10: General Fertility Rates, 2014
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Source: Indicator Portal, Health and Social Care Information Centre (HSCIC)

### Low birth weight

In 2014 6.4% of live and still births in Cambridgeshire weighed under 2500 grams and 8.0% in Peterborough, compared to 7.4% nationally. The proportions in East Cambridgeshire, South Cambridgeshire and Cambridgeshire were significantly lower than the England average.

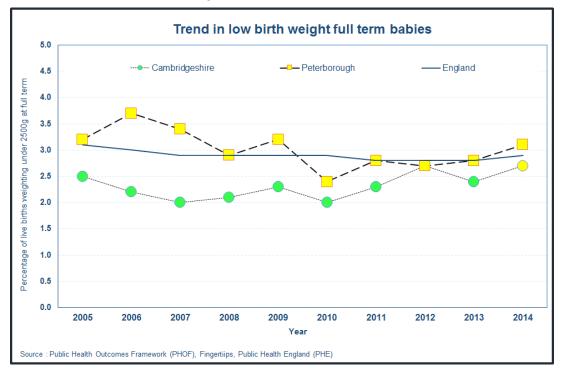
In total there were 269 full term babies born that were of low birth weight, with a higher, but not significantly higher, proportion in Peterborough than England.

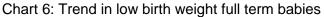
Districts	All births			Term births			
	Number of live and still births < 2500 grams	% of all births	95% confidence intervals	Number of live and still births < 2500 grams	% of all births	95% confidence intervals	
Cambridge City	99	6.9	(5.7 - 8.4)	38	3.0	(2.2 - 4.1)	
East Cambridgeshire	56	5.4	(4.2 - 6.9)	18	2.0	(1.2 - 3.1)	
Fenland	78	7.0	(5.6 - 8.6)	30	2.9	(2.0 - 4.1)	
Huntingdonshire	141	7.2	(6.1 - 8.4)	62	3.4	(2.6 - 4.3)	
South Cambridgeshire	90	5.2	(4.2 - 6.3)	30	2.0	(1.4 - 2.8)	
Cambridgeshire	464	6.4	(5.8 - 6.9)	178	2.7	(2.3 - 3.1)	
Peterborough	251	8.0	(7.1 - 9.0)	91	3.1	(2.6 - 3.9)	
England	48,284	7.4	(7.3 - 7.4)	17,231	2.9	(2.8 - 2.9)	

Table 11:	I ow birth	weight	under	2 500a	2014
		woigin,	unuci	z,000y,	2017

Source: Child Health Profiles, Fingertips, Public Health England

Peterborough low birth weight of full terms babies fluctuates annually, with a more recent upward trend. Generally rates in Cambridgeshire has been significantly lower than England, but there has been an increasing trend in recent years so that the most recent rate is now similar to England. The numbers are relatively small and are prone to fluctuation.





### Mothers who smoke at the time of delivery

In 2013/14 one in 10 mothers across Cambridgeshire and Peterborough were smokers at the time of delivery. Data are unavailable for the separate authorities as it is currently a CCG indicator. However, data for previous years are available for the separate PCTs.

In 2012/13 18.0% of mothers in Peterborough were smokers compared to 12.7% in England and 13.0% in Cambridgeshire. The trends in both areas indicate that this pattern was consistent and it can therefore be assumed that smoking rates in mothers remains high in Peterborough and relatively low in Cambridgeshire, which has been masked when the two areas were combined for the new data reporting.

Source: Public Health Outcomes Framework, Fingertips, Public Health England

### Breastfeeding

In 2013/14 83.0% of mothers initiated breastfeeding in Cambridgeshire, which fell to 56.2% by 6-8 weeks, though this increased slightly to 58.3% in 2014/15 (note : 2014/15 breastfeeding initiation data is unavailable for Cambridgeshire due to data quality issues).

In 2014/15 Fenland had significantly low breastfeeding initiation rates and 6-8 week prevalence compared to England. In Peterborough 72.9% of mothers initiated breastfeeding, which had decreased to 43.9% by 6-8 weeks. Both these proportions are similar to the national average.

District	Breastfeeding initation			Breastfeeding prevalence at 6-8 we		
	Number of babies	%	Note	Number of babies	%	Note
Cambridge City	1,491	89.5	2013/14	1,199	72.6	2014/15
East Cambridgeshire	398	-	Data quality issues	580	61.1	2014/15
Fenland	856	68.8	2014/15	487	37.3	2014/15
Huntingdonshire	1,544	80.9	2014/15	999	51.0	2014/15
South Cambridgeshire	643	-	Data quality issues	950	-	Data quality issues
Cambridgeshire	5,860	83.0	2013/14	4,215	58.3	2014/15
Peterborough	2,137	72.9	2014/15	1,226	43.9	2014/15
England	471,561	74.3	2014/15	276,688	43.8	2014/15

#### Table 12: Breastfeeding initiation and prevalence at 6-8 weeks

Source: Public Health Outcomes Framework, Fingertips, Public Health England

The chart below presents the trend in breastfeeding initiation (top section of chart) and prevalence at 6-8 weeks (bottom section of chart). Both areas are showing increases in breastfeeding prevalence rates at 6-8 weeks, the opposite of the national falling trend.

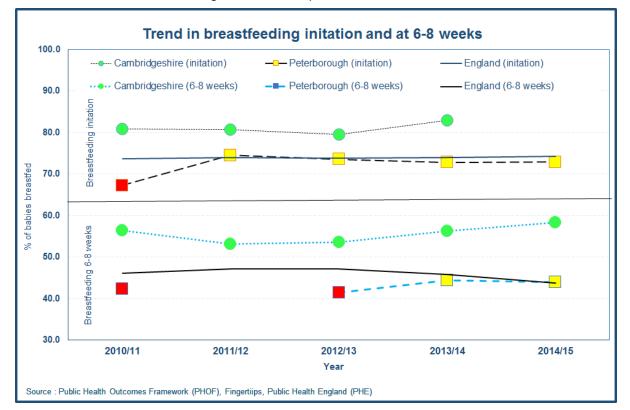


Chart 7: Trend in breastfeeding initiation and prevalence at 6-8 weeks

### **Teenage conceptions**

In 2014 there were 171 conceptions in females aged under 18 years in Cambridgeshire and 102 in Peterborough, with rates significantly lower in Cambridgeshire and significantly higher in Peterborough compared to England. Within Cambridgeshire Cambridge City had the highest rate followed by Fenland, neither differ significantly to England. Peterborough had a significantly low proportion of conception in under 18 year olds that led to abortion.

District	Number of conceptions	Under 18 conception rate per 1,000	% leading abortion
Cambridge City	37	23.1	62.2
East Cambridgeshire	20	13.7	60.0
Fenland	38	22.5	44.7
Huntingdonshire	49	16.1	59.2
South Cambridgeshire	27	9.8	51.9
Cambridgeshire	171	16.2	55.6
Peterborough	102	30.2	34.3
England	21,282	22.8	51.1

Table 13: Teenage conceptions, aged under 18 years, 2014

Source: Public Health Outcomes Framework, Fingertips, Public Health England

Both Cambridgeshire and Peterborough are showing decreasing trends in teenage conception rates, most notably in Peterborough.

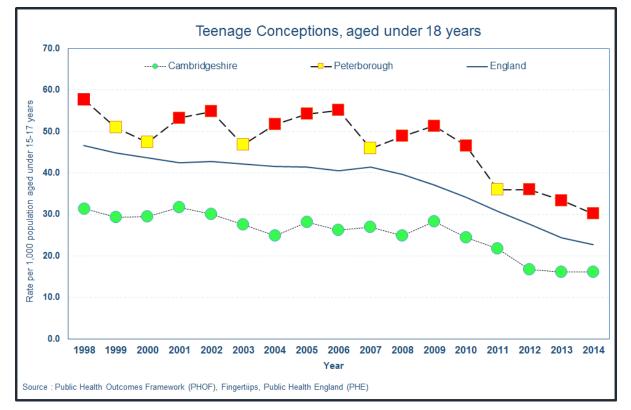


Chart 8: Trend in teenage conceptions, aged under 18 years

In 2014/15 there were 89 teenage mothers across Cambridgeshire and Peterborough, with rates significantly higher in Peterborough than both Cambridgeshire and England.

### Abortions

Just under 20% of abortions in under 25 year olds are repeat abortions in Cambridgeshire and almost a quarter in Peterborough, with rates being significantly lower in Cambridgeshire and around the national average (27%) in Peterborough. A fifth of abortions in under 25 year olds are following a previous birth in Cambridgeshire, significantly lower than the national average. This increases to 43% in Peterborough and is significantly higher than England.

Source: Sexual Health Profiles, Fingertips, Public Health England

### Lifestyles

### Excess weight

In 2014/15, 7.4% of Reception children in Cambridgeshire were classed as obese with a further 12.2% overweight pupils. In Peterborough there were 9.8% obese Reception aged children, with a further 11.5% overweight children. The rates in both areas did not differ significantly to England. Within Cambridgeshire, Fenland (22.4%) and East Cambridgeshire (19.5%) had the highest proportions of 4-5 year olds with excess weight and again did not differ to the national average.

Over the same time period 15.0% of Year 6 pupils in Cambridgeshire were measured to be obese, with a further 12.2% overweight pupils. Fenland had the highest proportion of Year 6 pupils with excess weight, at 32.6%, similar to the national average. In Peterborough the proportion of obese Year 6 was 17.9% pupils and a further 14.3% overweight pupils, with both proportions being similar the national average.

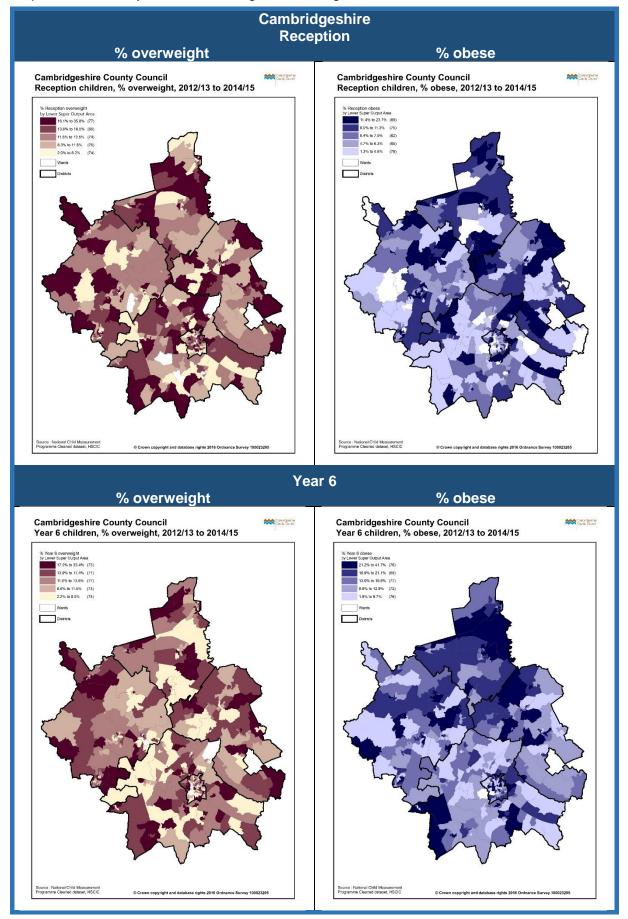
District	Re	ception	Year 6		
	% Obese	% Overweight (includes obese)	% Obese	% Overweight (includes obese)	
Cambridge City	6.1	17.3	14.6	25.4	
East Cambridgeshire	6.9	19.5	14.4	27.2	
Fenland	9.9	22.4	18.8	32.6	
Huntingdonshire	8.1	20.0	15.5	27.5	
South Cambridgeshire	6.3	18.8	12.6	24.5	
Cambridgeshire	7.4	19.6	15.0	27.2	
Peterborough	9.8	21.3	17.9	32.2	
England	9.1	21.9	19.1	33.2	

### Table 14: Proportion of obese and overweight, 2014/15

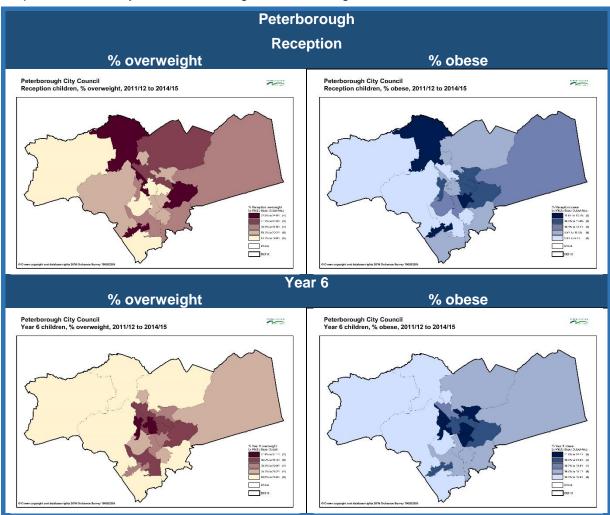
Source: NCMP profile, Fingertips, Public Health England

The maps below show the proportion of obese and overweight pupils by low geographical area. It is important to note that the scales differ by map i.e. the maps are not comparable between local authorities or between excess weight groups or between age groups.

There appears to be little direct correlation with deprivation in either year group or in the excess weight group. In general obesity doubles between the start and end of primary school.



Map 2: Child obesity and excess weight, Cambridgeshire, 2012/13 – 2014/15



### Map 3: Child obesity and excess weight, Peterborough, 2011/12 - 2014/15

### Smoking

In 2014/15 around 1 in 12 children aged 15 years were current smokers in Cambridgeshire (8.2%), with around 1 in 11 in Peterborough (9.1%). Both areas are around the national average of 8.2%.

Source: Public Health Outcomes Framework, Fingertips, Public Health England

#### Alcohol

There are on average 42 hospital admissions a year due to alcohol-specific conditions in Cambridgeshire and 20 in Peterborough in under 18 year olds, with the associated rates being similar to the England average in both areas.

Table 15: Alcohol specific hospital admissions, aged under 18 years, 2012/13-2014/15

District	Number of hospital admissions	Rate per 100,000
Cambridge City	17	26.5
East Cambridgeshire	13	22.9
Fenland	26	44.9
Huntingdonshire	47	42.5
South Cambridgeshire	22	21.7
Cambridgeshire	125	32.0
Peterborough	59	42.9
England		36.6

Source: Alcohol profiles, Fingertips, Public Health England

There is an apparent upward trend in alcohol specific hospital admissions in under 18 year olds in Peterborough. The opposite is true in Cambridgeshire where there has been a downward trend until recent years where the rates appear to have stabilised.

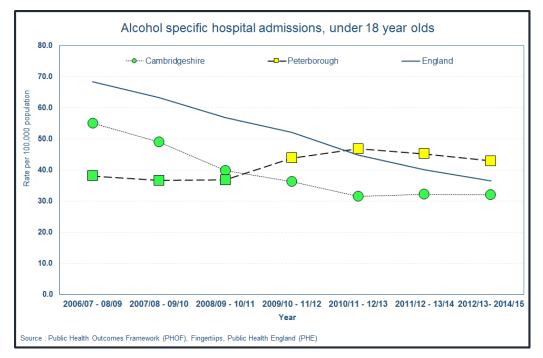


Chart 9: Trend in alcohol-specific hospital admission, under 18 year olds

### Substance misuse

For the time period 2012/13 – 2014/15 there were 264 admissions to hospital by 15-24 year olds due to substance misuse across Cambridgeshire and Peterborough, with rates significantly lower in Cambridgeshire and around the national average in Peterborough.

Both Cambridgeshire and Peterborough are experiencing an upward trend in such admissions, as is the national trend.

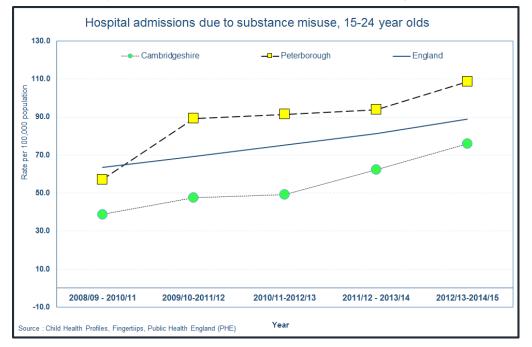


Chart 10: Hospital admissions for substance misuse, 15-24 year olds

#### Sexual health

In 2014 a quarter of young people aged 15-24 years were screened for chlamydia in Cambridgeshire, with a slightly higher proportion screened in Peterborough (27.1%). Both areas were significantly higher than England (24.3%). The chlamydia detection rate in people aged 15-24 years in Peterborough (3,404 per 100,000 population) is around double that of Cambridgeshire (1,557 per 100,000 population) and higher than seen nationally (2,012 per 100,000 population).

In 2014 a fifth of women aged under 25 years in Cambridgeshire chose a long acting reversible contraceptive (LARC) excluding injections as their main method of contraception at Sexual and Reproductive Health Services. The proportion was significantly higher in Peterborough (22.3%) than nationally (20.1%).

Source: Sexual Health profiles, Fingertips, Public Health England

### Mental Health

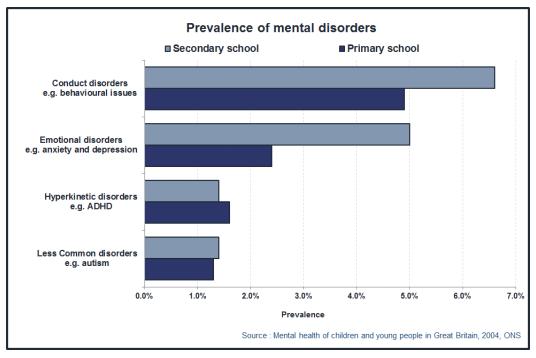
### Prevalence

It is estimated that around 1 in 10 children nationally have a diagnosable mental health disorder, 1 in 13 in primary schools (aged 5-10 years) and 1 in 9 in secondary school (age 11-15 years). Local prevalence data are unavailable. If national estimates are applied to local population it can be expected that there are around 4,800 primary school children and 5,300 secondary school children with a diagnosable mental health problem in Cambridgeshire and Peterborough.

District	5-10 year olds	11-15 year olds	Total
Cambridge City	600	600	1,200
East Cambridgeshire	500	600	1,100
Fenland	500	600	1,100
Huntingdonshire	1,000	1,100	2,100
South Cambridgeshire	900	1,100	2,000
Cambridgeshire	3,500	4,000	7,500
Peterborough	1,300	1,300	2,600
Cambridgeshire and Peterborough	4,800	5,300	10,100

Source: 2016 population based on mid 2013 population forecasts, Research and Performance Team, Cambridgeshire County Council and Mental Health of Children and Young People in Great Britain, 2004, Office for National Statistics

In general the prevalence of mental disorders tend to increase with age, with the exception of hyperkinetic disorders, which is higher in primary school aged children than secondary aged children. Prevalence is highest for conduct disorders in both age groups and the prevalence of emotional disorders doubles between the primary and secondary schools (from 2.4% to 4.9%).



### Chart 11: Prevalence of mental disorders by disorder

Locally a basic model was developed to estimate which geographical wards within Cambridgeshire and Peterborough could be expected to have higher levels of mental health needs, for all children aged under 18 years. This was based on indicators that are shown, from evidence, to potentially have a less favourable impact on a child's mental health. The model looked at child poverty, dependent children living in lone parent families, families with stepchildren, children in families where there were adults with no qualifications, estimated number of adults with mental health problems and at least one person in a household with long term health problem or disability. The estimated number of children with a mental health disorder were then weighted if the ward they lived in was in the fifth most 'disadvantaged'. The number of children were tripled as 'there are strong links between mental health problems in children and young people and social disadvantage, with children and young people in the poorest households three times more likely to have a mental health problem than those growing up in better-off homes'.

(www.gov.uk/government/uploads/system/uploads/attachment\_data/file/252660/33571\_2901304\_CMO\_Chapter \_10.pdf)

The outcome is that all districts are expected to have more children with a mental health disorder than straight prevalence estimates would suggest, most notably in Cambridge City.

Local Authority	Estimated number of children with a mental disorder without adjustment for need	Estimated number of children with a mental disorder with adjustment for need	% increase	% of total before weighting	% of total after weighting
Cambridge City	2,276	4,845	113%	13%	17%
East Cambridgeshire	1,785	2,150	20%	11%	7%
Fenland	1,824	3,303	81%	11%	11%
Huntingdonshire	3,551	6,547	84%	21%	23%
South Cambridgeshire	3,149	4,844	54%	19%	17%
Cambridgeshire	12,586	21,689	72%	74%	75%
Peterborough	4,366	7,405	70%	26%	25%
Cambridgeshire and Peterborough	16,951	29,095	72%	100%	100%

Table 17: Weighted mental health prevalence, 2013

Source: Mid 2013 population estimates, Research and Performance Team, Cambridgeshire County Council, Census 2001, ONS and Mental Health of Children and Young People in Great Britain, 2004, Office for National Statistics

### Self-harm

Hospital admissions as a result of self-harm in people aged 10-24 years are significantly high in both Cambridgeshire and Peterborough compared to England. In 2014/15 there were 567 admissions in Cambridgeshire and 208 in Peterborough.

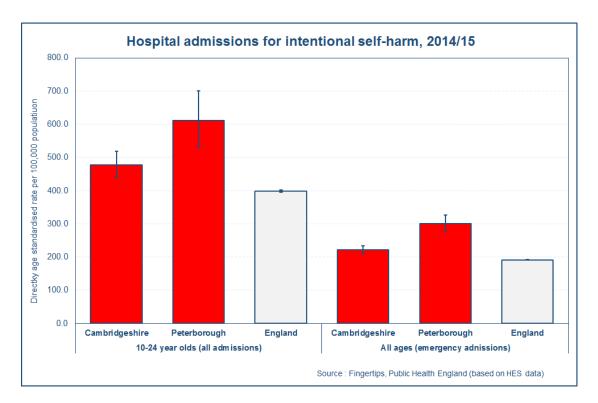


Chart 12: Hospital admissions for intentional self-harm, 2014/15

Only three points of data are available but there was a notable increase in self-harm hospital admissions in 10-24 year olds between 2012/13 and 2013/14, followed by a decrease to 2014/15, with rates remaining significantly high in both areas.

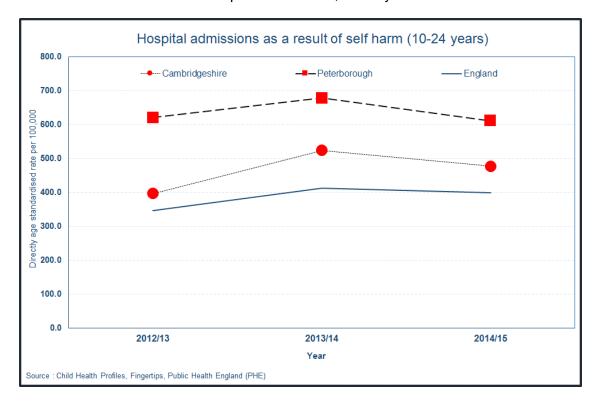


Chart 13: Trend in self-harm hospital admissions, 10-24 years

Local analysis on self-harm in children aged under 18 years has previously been undertaken. The following points provide a summary of the findings.

In Cambridgeshire there appears to have been a noticeable increase in admissions in 15 year old boys and in 17 year old boys and girls between 2013/14 and 2014/15. It is important to note that numbers are relatively small and therefore prone to variation. Self-poisoning by, and exposure to, nonopoid analgesics, antipyretics and antirheumatics are the main reason for hospital admissions for self-harm in children and young people. The majority of self-harm incidents occur at home. Around 56% of hospital admissions for self-harm also had a mental health diagnosis recorded, with two-thirds of these being for mood [affective] disorders (mania, depression or bipolar). Admissions are highest in the second most deprived quintile in Cambridgeshire compared to the rest of Cambridgeshire. Just under a quarter of patients were admitted more than once over the two year time period reported.

In Peterborough there appears to have been a noticeable increase in admissions in 16 year old girls between 2013/14 and 2014/15. It is important to note that numbers are relatively small and therefore prone to variation. Self-poisoning by, and exposure to, nonopoid analgesics, antipyretics and antirheumatics are the main reason for hospital admissions for self-harm in children and young people. The majority of self-harm incidents occur at home. Around half of hospital admissions for self-harm also had a mental health diagnosis recorded, with two-thirds of these being for mood [affective] disorders (mania, depression or bipolar). Admissions are highest in the second most deprived quintile in Peterborough compared to the rest of Peterborough. Just over 15% of patients were admitted more than once over the two year time period reported.

### Perinatal mental health

It is estimated that 12% of women may require additional support and/or appropriate onward referral for mental health problems during pregnancy and and/or the postnatal period. This includes 4% of deliveries to women with severe and/or complex needs and 8% of women who require and take up psychological therapies.

When this prevalence rate is applied to local population it can be estimated that 917 women in Cambridgeshire and 388 in Peterborough require such support.

Source: Mental Health profile, Fingertips, Public Health England

### **Health Protection**

### Newborn screening

In 2014/15 almost 100% of newborns in both Cambridgeshire and Peterborough had their bloodspot screening. In the previous year 96.9% of newborns had their hearing screened in Cambridgeshire, significantly lower than both the national average (98.5%) and the Peterborough average of 99.8%.

Source: Public Health Outcomes Framework, Fingertips, Public Health England

### Immunisations

In 2014/15 Cambridgeshire and Peterborough met the nationally set targets for all childhood immunisations i.e. above 90% with the exception of two doses of MMR by at age 5 years, which was 85.4% for Cambridgeshire and 87.5% for Peterborough. Peterborough was also significantly low for Human papilloma virus (HPV) in girls aged 12-13 years old. The national target is based on whether coverage is better than England's coverage in the previous year.

However, the annual Health Protection report states that the target for herd immunity i.e. when a high percentage of the population is vaccinated so that it is difficult for infectious diseases to spread, is actually 95% for childhood immunisations. The table below represents this for Cambridgeshire and Peterborough i.e. a red colour is where coverage is below 95%. As can be seen both areas do not meet this target for the majority of immunisations reported.

Vaccination	Age	Cambridgeshire	Peterborough	England
Hepatitis B	1 year old	-	93.3	-
	2 years old	-	88.2	-
Diphtheria, pertussis (whooping cough), tetanus,	1 year old	94.2	95.2	94.2
Haemophilus influenzae type B (DtaP/IPV/Hib)	2 years old	94.9	96.7	95.7
Meningococcal group C (Men C)		92.9	93.6	93.9
Pneumococcal infections (PCV)		93.8	94.2	93.9
Haemophilus influenzae type B/Meningococcal	2 years old	91.4	92.6	92.1
group C (Hib/MenC ) booster	5 years old	90.6	90.8	92.4
Pneumococcal infections (PCV) booster		91.4	92.8	92.2
Measles, mumps and rubella (MMR) one dose	2 years old	91.0	92.6	92.3
	5 years old	91.3	94.6	94.4
Measles, mumps and rubella (MMR) two doses	5 years old	85.4	87.5	88.6
Human papilloma virus (HPV)	12-13 years old	91.8	84.7	86.7

### Table 18: Childhood immunisation coverage, 2014/15

Source: Public Health Outcomes Framework, Fingertips, Public Health England

In recent years there appears to be a downward trend in two dose MMR at age 5 in Cambridgeshire. Peterborough had a sharp decrease in uptake between 2012/13 and 2013/14 followed by a noticeable increase to coverage above Cambridgeshire in 2014/15, but the percentage remained significantly worse than the 95% target.

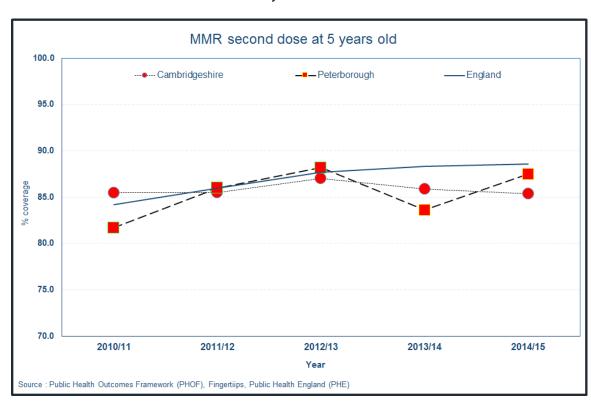


Chart 14: Trend in MMR two doses at 5 years old

In 2015 the immunisation coverage for children in care is significantly high in Cambridgeshire (94.0%) and Peterborough (92.0%) compared to England (87.8%).

Source: Children's benchmarking tool, Fingertips, Public Health England

### Social Care

### Children in need

Throughout 2014/15 there were 10,335 children in need in Cambridgeshire and Peterborough, with rates significantly higher in Peterborough and significantly lower in Cambridgeshire than the national average. Over the year 5,505 children started an episode of need and 5,447 ended an episode of need. At the end of the year there were 4,888 children in need across the area.

Table 19: Children in need, 2014/15

District		in need at rch 2015	•		
	Number	Rate per 10,000	Number Rate pe 10,000		
Cambridgeshire	2,993	227.6	6,984	531.1	
Peterborough	1,895	406.6	3,351	719.0	
England	391,000	337.3	781,700	674.4	

Source: Children in need, 2014/15, Department for Education

As at the 31 March 2015 17% of children in need in Cambridgeshire and 11.5% in Peterborough had a disability recorded, compared to 13% nationally. Learning disabilities and Autism/Asperger syndrome were the main disabilities recorded in both areas. Peterborough had a higher proportion of behaviour and mobility disabilities compared to Cambridgeshire, but they were noticeably lower than England. It is important to note that Cambridgeshire appears to have a high proportion of 'other disability' coding compared to the other two areas.

Disability	Cambrid	lgeshire	Peterb	England	
Number with disability recorded	509		21	18	50,800
% of total children in need	17.	0%	11.	5%	13.0%
	Number	%	Number	%	%
Autism/Asperger Syndrome	116	22.8%	61	28.0%	30.5%
Behaviour	31	6.1%	33	15.1%	23.0%
Communication	-	-	16	7.3%	23.7%
Consciousness	0	0.0%	-	-	5.3%
Hand Function	0	0.0%	-	-	5.1%
Hearing	-	-	15	6.9%	5.6%
Incontinence	0	0.0%	-	-	8.9%
Learning	141	27.7%	87	39.9%	45.7%
Mobility	16	3.1%	29	13.3%	21.5%
Personal Care	0	0.0%	7	3.2%	13.7%
Vision	6	1.2%	10	4.6%	8.8%
Other Disability	215	42.2%	41	18.8%	20.1%

Table 20: Number of children in need by disability, 31 March 2015

Source: Children in need, 2014/15, Department for Education

Note: a child may have more than one disability recorded

'-' denotes a number between 1 and 5 inclusive, or a percentage where the difference between the numerator and denominator is between 1 and 5. Further suppression may have occurred to maintain confidentiality.

Almost three-quarters of children in need in Cambridgeshire at the end of 2014/15 were due to abuse or neglect, with around two thirds in Peterborough. Both areas had higher proportions than England (49%). Cambridgeshire appears to have a higher proportion of primary needs as child's disability or illness and low proportions of family in acute stress and family dysfunction compared to England. Peterborough has noticeably higher proportions of family dysfunction than Cambridgeshire.

Primary need	Cambric	lgeshire	Peterb	England	
	Number	%	Number	%	%
N1 - Abuse or neglect	2,186	73.0%	1,262	66.6%	49.4%
N2 - Child's disability or illness	404	13.5%	112	5.9%	10.2%
N3 - Parent's disability or illness	56	1.9%	34	1.8%	2.8%
N4 - Family in acute stress	113	3.8%	81	4.3%	9.2%
N5 - Family dysfunction	128	4.3%	313	16.5%	17.9%
N6 - Socially unacceptable behaviour	29	1.0%	43	2.3%	2.0%
N7 - Low income	13	0.4%	-	-	0.5%
N8 - Absent parenting	46	1.5%	48	2.5%	2.6%
N9 - Cases other than children In need	18	0.6%	0	0.0%	0.9%
N0 - Not stated	0	0.0%	-	-	4.5%
Total	2,993	100.0%	1,895	100.0%	100.0%

Table 21: Children in need, primary need, 31 March 2015

Source: Children in need statistics, 2014/15, Department for Education

'-' denotes a number between 1 and 5 inclusive, or a percentage where the difference between the numerator and denominator is between 1 and 5. Further suppression may have occurred to maintain confidentiality.

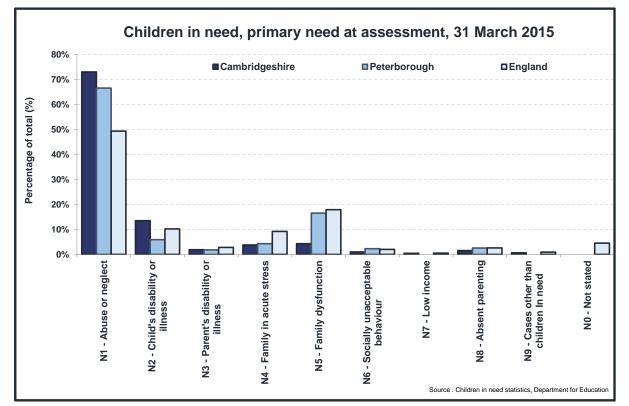


Chart 15: Children in need, proportion by primary need at assessment, 31 March 2015

At the end of assessment main factors are identified and recorded. These factors differ between Cambridgeshire and Peterborough. Both areas have domestic violence and mental health in their top 4 factors, with Cambridgeshire also having physical disability or illness and neglect and Peterborough alcohol and drug misuse. It is important to note that Peterborough has a high proportion of 'other factors' compared to Cambridgeshire and England. For this reason it is difficult to compare areas, for example, 46% of children in need had mental health identified as a factor during assessment , compared to only 22% in Peterborough and 33% in England. This may be a true refection or relate to data recording/quality issues.

Factors identified at the end of assessment	Cambrid	lgeshire	Peterb	England	
	Number	%	Number	%	%
Alcohol misuse	645	14.4%	318	11.6%	17.8%
Drug misuse	695	15.6%	385	14.0%	17.7%
Domestic violence	1,707	38.2%	901	32.8%	48.2%
Mental health	2,059	46.1%	595	21.7%	32.5%
Learning disability	545	12.2%	290	10.6%	11.1%
Physical disability or illness	927	20.8%	189	6.9%	9.9%
Young carer	230	5.2%	62	2.3%	2.8%
Privately fostered	8	0.2%	7	0.3%	0.3%
Unaccompanied asylum seeker	-	-	-	-	0.5%
Going/being missing	81	1.8%	49	1.8%	2.2%
Child sexual exploitation	139	3.1%	57	2.1%	3.0%
Trafficking	19	0.4%	10	0.4%	0.3%
Gangs	32	0.7%	28	1.0%	0.9%
Socially unacceptable behaviour	281	6.3%	141	5.1%	7.1%
Self-harm	204	4.6%	98	3.6%	3.9%
Neglect	895	20.0%	250	9.1%	16.5%
Emotional abuse	616	13.8%	285	10.4%	18.0%
Physical abuse	418	9.4%	127	4.6%	13.4%
Sexual abuse	177	4.0%	63	2.3%	5.8%
Other factors	1,135	25.4%	1,435	52.3%	23.5%
Total	4,464	100.0%	2,743	100.0%	0.0%

Table 22: Children in need, factors identified at the end of assessment, 2014/15

Source: Children in need statistics, 2014/15, Department for Education

More than one factor may be recorded per child.

'-' denotes a number between 1 and 5 inclusive, or a percentage where the difference between the numerator and denominator is between 1 and 5. Further suppression may have occurred to maintain confidentiality.

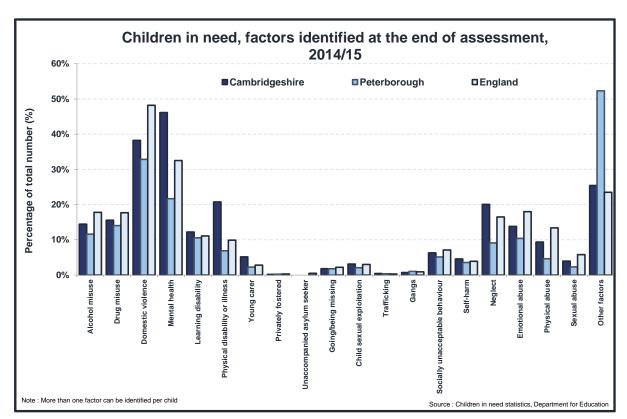


Chart 16: Children in need, factors identified at the end of assessment, 2014/15

In 2014/15 there were 4,478 referrals to children's social services in Cambridgeshire and 2,734 in Peterborough, with the pattern of referral sources similar to experienced nationally. The majority of referrals across the area come from Police (28%), followed by schools (18%), health services (16%) and Local Authority services (16%).

### **Children Protection Plan**

During 2014/15 486 children in Cambridgeshire and 307 in Peterborough became the subject of a child protection plan, with rates significantly higher in Peterborough than England and significantly lower in Cambridgeshire. At the end of the year there were 387 children in Cambridgeshire and 231 in Peterborough still subject to a Child Protection Plan.

Local Authority	Children who became the subject of a child protection plan during 2014-15		subject of a cl	eased to be the nild protection ng 2014-15	Children who were the subject of a child protection plan at 31 March 2015		
	Number	Rate per 10,000 children	Number	Rate per 10,000 children	Number	Rate per 10,000 children	
Cambridgeshire	486	37.0	493	37.5	387	29.4	
Peterborough	307	65.9	314	67.4	231	49.6	
England	62,200	53.7	60,400	52.1	49,700	42.9	

### Table 23: Child Protection Plan, 2014/15

Source: Children in need, 2014/15, Department for Education

The main reasons for being subject to a Child Protection Plan are neglect and emotional abuse across Cambridgeshire and Peterborough. The proportions of neglected children are noticeably high compared to England and the proportions of emotional abuse noticeably low.

Table 24: Child Protection Plan, category of abuse (latest), 2014/15

Latest category	Cambric	lgeshire	Peterb	England	
of abuse	Number	%	Number	%	%
Neglect	292	60.1%	217	70.7%	42.6%
Physical Abuse	32	6.6%	18	5.9%	9.0%
Sexual Abuse	18	3.7%	-	-	4.4%
Emotional Abuse	144	29.6%	62	20.2%	35.9%
Multiple	0	0.0%	-	-	8.1%
Total	486	100.0%	307	100.0%	100.0%

Source: Children in need statistics, Department for Education

'-' denotes a number between 1 and 5 inclusive, or a percentage where the difference between the numerator and denominator is between 1 and 5. Further suppression may have occurred to maintain confidentiality

Of those children who became subject of a child protection plan in 2014/15 17.1% had previously been subject to a plan in Cambridgeshire, 15.6% in Peterborough and 16.6% in England.

### Children looked after

As at March 2015 there were 530 children looked after in Cambridgeshire and 345 in Peterborough, with rates significantly higher in Peterborough and significantly lower in Cambridgeshire compared to England. The majority of looked after children were aged 10-15 years (43%), followed by 16+ years (20%) and 5-9 years (20%) across the area, with 55% being boys. Two-thirds of children who started being looked after in 2014/15 were due to abuse or neglect in Cambridgeshire, compared to over three-quarters (77%) in Peterborough. The national average is 56%.

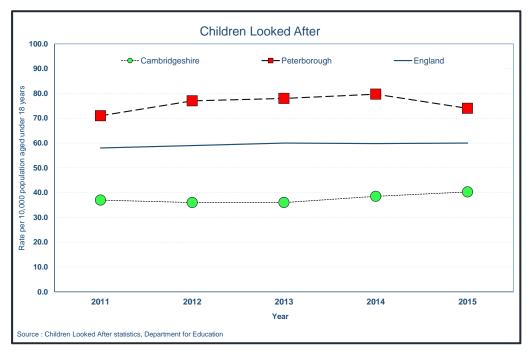
Table 25: Children Looked After, March 2015

Local Authority	Number	Rate per 100,000
Cambridgeshire	530	40.0
Peterborough	345	74.0
England	69,540	60.0

Source: Children Looked After statistics, Department for Education

In general the rate of looked after children is fairly static in Cambridgeshire and, following a steady increase in rates in Peterborough there was a noticeable decrease between 2014 and 2015.





At March 2015 there were 15 unaccompanied asylum seeker children looked after in Cambridgeshire and 10 in Peterborough.

Of the 335 children who had been looked after for at least a year at 31<sup>st</sup> March in Cambridgeshire, 94% were up to date with their immunisations, 96% had their teeth checked by a dentist and 97% had their annual health assessment. The respective proportions for the 250 Peterborough children were 92% for immunisations, 90% for dental check and 88% for annual health assessment.

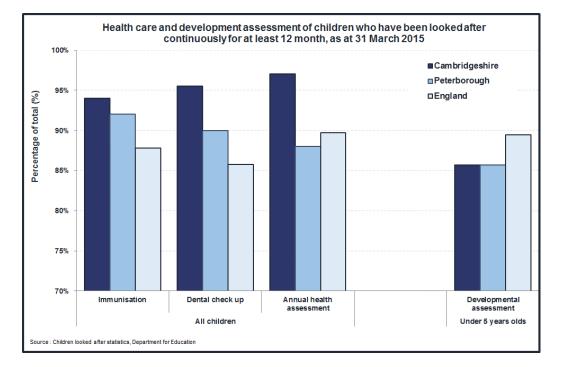


Chart 18: Health care and development assessment of children looked after, 31 March 2015

The Department of Education has started reporting on the emotional well-being of looked after children. The data are collected through a strengths and difficulties questionnaire (SDQ), which higher scores indicating greater difficulties. In Cambridgeshire the average difficulties score for all looked after children aged 5-16 years who had been in care for 12 months continuously on 31<sup>st</sup> March 2015 was 14.5, compared to the average of 13.9 for England. Data are unavailable for Peterborough due to small numbers and disclosure rules. Note: at an individual level a score of under 14 is considered normal; 14-16 borderline cause for concern and 17+ is cause for concern.

The Children's and Young People's Mental Health and Wellbeing profile published by Public Health England (<u>http://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh</u>) include spend per 10,000 population for Local Authority services. The data suggests that Peterborough spends more on Local Authority children and young people's services (excluding education) and looked after children than the national average. Cambridgeshire's data suggest that they spend less on children looked after, safeguarding children and young people's services and youth justice than the national average.

Table 26: Social care spend on children and young people's services, 2014/15

Spend	Rate per 10,000 0-17 years				
	Cambridgeshire	Peterborough	England		
Local Authority children and young people's services (excl education)	£7,133	£8,617	£7,812		
Sure Start Children's Centres and early years	£811	£0	£816		
Children looked after	£2,545	£5,252	£3,251		
Safeguarding children and young people's services	£1,657	£1,823	£1,831		
Youth Justice	£176	£244	£262		

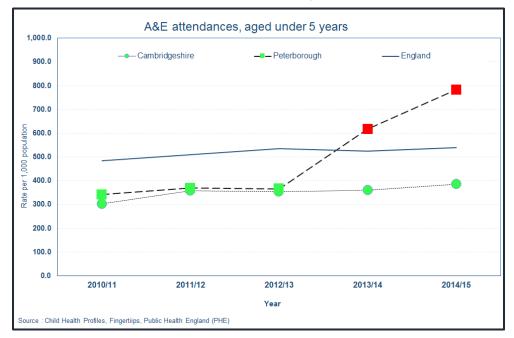
Source: Children and Young People's Mental Health Wellbeing, Fingertips, Public Health England

### Health services

### Children aged 0-4 years

### A&E attendances

In 2014/15 there were around 14,900 A&E attendances in under 5 year olds in Cambridgeshire and 12,200 in Peterborough, with rates being significantly low in Cambridgeshire and significantly high in Peterborough compared to England. There appears to be a notable increasing trend in A&E attendances in under 5 year olds in Peterborough, whilst Cambridgeshire's trend remains fairly stable. This is an area that may need further exploration as to causes i.e. data issues.



#### Chart 19: Trend in A&E attendances, under 5 years

### Hospital admissions for accidental and deliberate injuries

In 2014/15 there were 447 hospital admissions for accidental and deliberate injuries in children aged under 5 years in Cambridgeshire and 233 in Peterborough, with rates significantly low in Cambridgeshire and around the national average in Peterborough. Huntingdonshire had a significantly high rate compared to England, with an increasing trend.

Table 27: Hospital admissions for accidental and deliberate injuries, 0-4 years, 2014/15

District	Number	Rate per 10,000
Cambridge City	62	88.6
East Cambridgeshire	39	69.0
Fenland	90	155.9
Huntingdonshire	175	166.3
South Cambridgeshire	81	85.8
Cambridgeshire	447	116.4
Peterborough	233	149.8
England	47,164	137.5

Source: Child Health Profiles, Fingertips, Public Health England

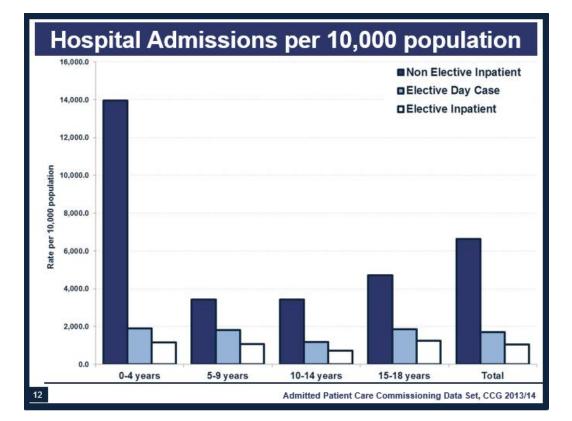
### Hospital admissions

The following section examines local hospital usage data for Cambridgeshire and Peterborough by age band, admission type and primary reason for admission.

#### Hospital admission rates

Emergency hospital admission rates are very high in children aged under 5 years old. Planned admissions (elective admissions) in this age group are around the same rate as the other children and young people age bands reported below.

Chart 20: Hospital admission rate, children and young people, Cambridgeshire and Peterborough CCG, 2013/14



#### **Reasons for emergency admission**

The following table present the top 10 reasons for admission by age group. In general the reason for emergency admission changes as children get older. Preschool children are mainly admitted for more viral and respiratory admissions, young teenagers for fractures and abdominal and pelvic pain and older teenagers as a result of poisoning by drugs (prescription). Asthma also appears relatively high in children aged under 15 years.

Table 28: Top 10 reasons for emergency hospital admissions, Cambridgeshire and Peterborough CCG, 2013/14

0-4 years		5-9 years			
Top 10 accounts for 49% of all admiss (7,455 total admissions)	Top 10 accounts for 42% of all admissions (1,709 total admissions)				
Primary diagnosis	No	Primary diagnosis	No		
<ul> <li>Viral infection of unspecified site</li> <li>Acute upper respiratory infections multiple and unspecified sites</li> <li>Acute broncholitis</li> <li>Neonatal jaundice from other and unspecified causes</li> <li>Acute tonsillitis</li> <li>Viral and other specified intestinal infections</li> <li>Unspecified acute lower respiratory infection</li> <li>Acute obstructive laryngitis [croup] and epiglottitis</li> <li>Convulsions, not elsewhere classified</li> <li>Asthma</li> </ul>	704 563 551 401 307 301 254 215 171 155	<ul> <li>Fracture of forearm</li> <li>Abdominal and pelvic pain</li> <li>Asthma</li> <li>Viral infection of unspecified site</li> <li>Viral and other specified intestinal infections</li> <li>Acute upper respiratory infections multiple and unspecified sites</li> <li>Fracture of shoulder and upper arm</li> <li>Acute tonsillitis</li> <li>Unspecified acute lower respiratory infection</li> <li>Purpura and other haemorrhagic conditions</li> </ul>	123 115 101 75 54 54 54 53 52 37		
10-14 years		15-18 years			
Top 10 accounts for 42% of all admiss (1,532 total admissions)	ions	Top 10 accounts for 35% of all admissions (1,950 total admissions)			
Primary diagnosis	No	Primary diagnosis	No		
<ul> <li>Abdominal and pelvic pain</li> <li>Fracture of forearm</li> <li>Poison by nonopioid analgesic antipyretic and antirheumatics</li> <li>Asthma</li> <li>Other functional intestinal disorders</li> <li>"Insulin-dependent diabetes mellitus"</li> <li>Fracture of lower leg, including ankle</li> <li>Epilepsy</li> <li>Syncope and collapse</li> <li>Symptoms and signs involving emotional state</li> </ul>	221 97 64 60 39 39 39 34 33 28 27	<ul> <li>Poison by nonopioid analgesic antipyretic and antirheumatics</li> <li>Abdominal and pelvic pain</li> <li>Symptoms and signs involving emotional state</li> <li>Perineal laceration during delivery</li> <li>Poisoning by psychotropic drugs, not elsewhere classified</li> <li>"Insulin-dependent diabetes mellitus"</li> <li>Headache</li> <li>Fracture of lower leg, including ankle</li> <li>Pain in throat and chest</li> <li>"Labour and delivery complicated by fetal stress [distress]"</li> </ul>	191 181 63 54 45 36 33 28 28 28 28 26		

Source: Admitted Patient Care Commissioning Dataset, 2013/14 Cambridgeshire and Peterborough CCG

### Reasons for elective (planned) admission

The top reasons for planned hospital admissions for children and young people is fairly similar in all age bands except older teenagers. Younger children and teenagers are mainly admitted for nonsuppurative otitis media, chronic diseases of tonsils and adenoids and acute tonsillitis, whilst medical abortions becomes the top reason for admissions by older teenagers.

Table 29: Top 10 reasons for elective (planned) hospital admissions, Cambridgeshire and Peterborough CCG, 2013/14

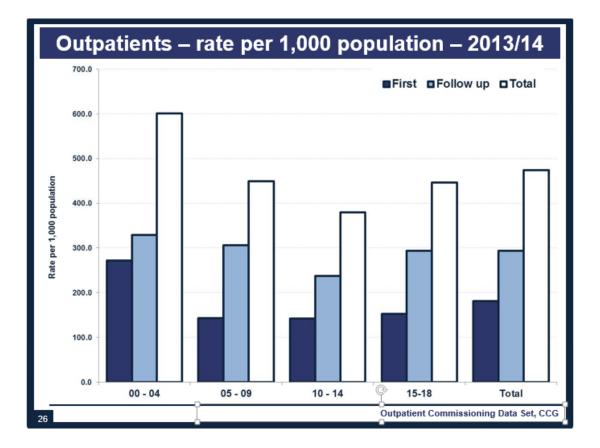
	0-4 years	5-9 years				
	Top 10 accounts for 42% of all admissi (1,664 total admissions)	Top 10 accounts for 51% of all admissions (1,495 total admissions)				
Pr	imary diagnosis	No	Primary diagnosis	No		
	Nonsuppurative otitis media Chronic diseases of tonsils and adenoids Undescended testicle Other strabismus Acute tonsillitis Other congenital malformations of male genital organs Hypospadias Hydrocele and spermatocele Inguinal hernia Sleep disorders	191 150 63 55 54 45 42 41 34 29	<ul> <li>Nonsuppurative otitis media</li> <li>Chronic diseases of tonsils and adenoids</li> <li>Acute tonsillitis</li> <li>Other immunodeficiencies</li> <li>Other strabismus</li> <li>Redundant prepuce, phimosis and paraphimosis</li> <li>Other orthopaedic follow-up care</li> <li>Immunodeficiency with predominantly antibody defects</li> <li>Combined immunodeficiencies</li> </ul>	180 123 109 58 57 54 50 50 42		
-	10-14 years		<ul> <li>Dental caries</li> <li>15-18 years</li> </ul>	35		
	Top 10 accounts for 32% of all admissi (897 total admissions)	ons	Top 10 accounts for 34% of all admissions (1,179 total admissions)			
Pr	imary diagnosis	No	Primary diagnosis	No		
	Acute tonsillitis Other orthopaedic follow-up care Chronic diseases of tonsils and adenoids Nonsuppurative otitis media Redundant prepuce, phimosis and paraphimosis Juvenile arthritis Nail disorders Fracture of forearm Med observ and evaluation for suspected diseases and conds Perforation of tympanic membrane	60 42 37 32 24 23 21 19 17 15	<ul> <li>Medical abortion</li> <li>Acute tonsillitis</li> <li>Internal derangement of knee</li> <li>Other disorders of nose and nasal sinuses</li> <li>Other orthopaedic follow-up care</li> <li>Thalassaemia</li> <li>Other joint disorders, not elsewhere classified</li> <li>Fracture of skull and facial bones</li> <li>Crohn's disease [regional enteritis]</li> <li>Redundant prepuce, phimosis and paraphimosis</li> </ul>	87 62 54 35 35 33 26 23 22 21		

Source: Admitted Patient Care Commissioning Dataset, 2013/14 Cambridgeshire and Peterborough CCG

### Outpatient attendances

First outpatient attendance rates are noticeably high in children aged under 5 across Cambridgeshire and Peterborough CCG. The rate of follow up outpatient attendance is similar to other age bands.

Chart 21: Hospital admission rate, children and young people, Cambridgeshire and Peterborough CCG, 2013/14



### Dental Health

In general, dental health appears to be relatively good in Cambridgeshire, with tooth decay, one or more decayed, missing or filled teeth and hospital admissions significantly better than the England averages. In 201/12 over a third of children (36%) in Peterborough had one or more decayed, missing or filled teeth, significantly lower worse than England. In 2014/15 there were 111 admissions to hospital by children aged between 1 and 4 years due to dental carries. The associated rates in both areas was significantly better than England.

#### Table 30: Dental health in children

Indicator	Time period	Cambridgeshire	Peterborough	England
Tooth decay in children aged 5	2011/12	0.51	1.08	0.94
Children with one or more decayed, missing or filled teeth	2011/12	14.6%	36.1%	27.9%
Hospital admissions for dental caries (1-4 years)	2014/15	103.4	44.7	322.0

Source: Child Health Profiles, Fingertips, Public Health England

### Mortality

### Infant mortality

There are on average 26 infant deaths a year in Cambridgeshire and 13 in Peterborough. In general, still birth rates and perinatal morality rates are lower in Peterborough than England and rates are slightly higher, but not significantly different, in deaths from 28 days to a year. Mortality rates are lower in Cambridgeshire than England but only significantly low for stillbirths. Infant deaths are higher, but not significantly higher, in Fenland compared to England.

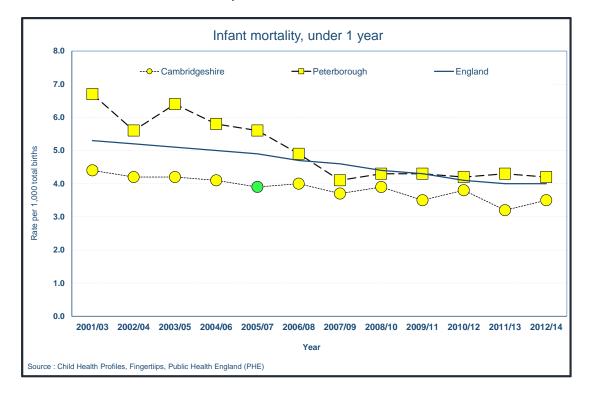
District	Still births		Still births Perinatal mortality Neonatal mortal (Stillbirths plus early (under 28 days neonatal deaths (under 7 days)		,	mo (more ti	neonatal ortality nan 28 days than 1 year)	Infant mortality (under 1 year)		
	Number	Rate per 1,000 total births	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births
Cambridge City	15	3.5	21	4.9	8	1.9	8	1.9	16	3.7
East Cambridgeshire	14	4.4	17	5.3	4	1.3	3	0.9	7	2.2
Fenland	10	2.9	21	6.0	12	3.4	5	1.4	17	4.9
Huntingdonshire	22	3.6	41	6.7	20	3.3	3	0.5	23	3.8
South Cambridgeshire	21	3.9	29	5.4	11	2.1	4	0.8	15	2.8
Cambridgeshire	82	3.7	129	5.7	55	2.5	23	1.0	78	3.5
Peterborough	40	4.2	59	6.1	28	2.9	12	1.3	40	4.2
England	9,507	4.7	13,777	6.8	5,564	2.8	2,465	1.2	8,029	4.0

### Table 31: Infant mortality, 2012/14

Source: Indicator portal, Health and Social Care Information Centre

Infant mortality rates are showing a decrease in both Cambridgeshire and most notably in Peterborough.

### Chart 22: Trend in infant mortality rates



### Child mortality

There are on average 20 deaths a year in children aged 1-17 years across Cambridgeshire and Peterborough, with rates higher but not significantly higher in Peterborough compared to Cambridgeshire and England. The latest data suggests that there has been a decrease in such deaths in Peterborough.

Table 32: Child mortalit	y aged 1-17 years	, 2012/14
--------------------------	-------------------	-----------

Local Authority	Number of deaths	Rate per 100,000	95% confidence intervals
Cambridgeshire	40	10.7	(7.7 - 14.6)
Peterborough	20	14.8	(8.9 - 22.9)
England	3,961	12.0	(11.6 - 12.3)

Source: Child Health Profiles, Fingertips, Public Health England

### Annex – Child Health Profiles

### Cambridgeshire

### Cambridgeshire Child Health Profile

### March 2016

75th

25th

England average

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

🔵 Sig	nificantly better than England average 🔹 🔶 Regional average					percentile percentile	
	Indicator	Local	Local	Eng.	Eng.		Eng.
2 -		no.	value	ave.	Worst		Best
Premature mortality	1 Infant mortality	26	3.5	4.0	7.2		1.6
	2 Child mortality rate (1-17 years)	13	10.7	12.0	19.3		5.0
L Lo	3 MMR vaccination for one dose (2 years) ● >=90% ● <90%	7,114	91.0	92.3	73.8		98.1
Health protection	4 Dtap / IPV / Hib vaccination (2 years) 🛛 >=90% 🗢 <90%	7,424	94.9	95.7	79.2		99.2
- R	5 Children in care immunisations	315	94.0	87.8	64.9		100.0
	6 Children achieving a good level of development at the end of reception	4,805	65.8	66.3	50.7	• • • • • • • • • • • • • • • • • • •	77.5
	7 GCSEs achieved (5 A*-C inc. English and maths)	3,502	58.9	57.3	42.0		71.4
Wider determinants of ill health	8 GCSEs achieved (5 A*-C inc. English and maths) for children in care	-	-	12.0	8.0		42.9
termina health	9 16-18 year olds not in education, employment or training	700	3.6	4.7	9.0		1.5
ill he	10 First time entrants to the youth justice system	193	344.5	409.1	808.6		132.9
ofil	11 Children in poverty (under 16 years)	13,220	12.1	18.6	34.4	•••	6.1
Vide	12 Family homelessness	425	1.6	1.8	8.9		0.2
>	13 Children in care	530	40	60	158		20
	14 Children killed or seriously injured in road traffic accidents	17	14.7	17.9	51.5	Ó	5.5
	15 Low birthweight of term babies	178	2.7	2.9	5.8		1.6
	16 Obese children (4-5 years)	502	7.4	9.1	13.6		4.2
	17 Obese children (10-11 years)	840	15.0	19.1	27.8		10.5
Health mprovement	18 Children with one or more decayed, missing or filled teeth	-	14.6	27.9	53.2		12.5
Health	19 Hospital admissions for dental caries (1-4 years)	32	103.4	322.0	1,406.8	<b>•</b>	11.7
T at	20 Under 18 conceptions	173	16.1	24.3	43.9	<b>•••</b>	9.2
. <u>e</u>	21 Teenage mothers	46	0.7	0.9	2.2		0.2
	22 Hospital admissions due to alcohol specific conditions	42	32.3	40.1	100.0		13.7
	23 Hospital admissions due to substance misuse (15-24 years)	63	76.0	88.8	278.2		24.7
fion saith	24 Smoking status at time of delivery	-	-	11.4	27.2		2.1
	25 Breastfeeding initiation	-	-	74.3	47.2		92.9
	26 Breastfeeding prevalence at 6-8 weeks after birth	4,215	58.3	43.8	19.1		81.5
	27 A&E attendances (0-4 years)	14,853	386.9	540.5	1,761.8		263.6
her	28 Hospital admissions caused by injuries in children (0-14 years)	1,056	96.3	109.6	199.7		61.3
Prevention of ill health	29 Hospital admissions caused by injuries in young people (15-24 years)	1,049	127.2	131.7	287.1	<b>\</b>	67.1
	30 Hospital admissions for asthma (under 19 years)	187	134.4	216.1	553.2		73.4
	31 Hospital admissions for mental health conditions	101	76.8	87.4	226.5		28.5
	32 Hospital admissions as a result of self-harm (10-24 years)	567	477.6	398.8	1,388.4		105.2

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), 2012-2014

2 Directly standardised rate per 100,000 children age 1-17 years, 2012-2014

3 % children immunised against measies, m rubella (first dose by age 2 years), 2014/15 , mumps and 4 % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by

age 2 years, 2014/15 5 % children in care with up-to-date immunisations, 2015

6 % children achieving a good level of development within Early Years Foundation Stage Profile, 2014/15 7 % pupils achieving 5 or more GCSEs or equivalent including maths and English, 2014/15

8 % children looked after achieving 5 or more equivalent including maths and English, 2014 ore GCSEs or

(provisional) 9 % not in education, employment or training as a proportion of total age 16-18 year olds known to local

authority, 2014

10 Rate per 100,000 of 10-17 year olds receiving their first reprimand, warning or conviction, 2014

11 % 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, 2013 12 Statutory homeless households with dependent children or pregnant women per 1,000 households, 2014/15

13 Rate of children looked after at 31 March per 10.000 population aged under 18, 2015

14 Crude rate of children age 0-15 years who were killed or seriousy injured in road traffic accidents per 100,000 population, 2012-2014

15 Percentage of live-born bables, born at term, weighing less than 2,500 grams, 2014 16 % school children in Reception year classified as

obese, 2014/15 17 % school children in Year 6 classified as obese,

2014/15 18 % children aged 5 years with one or more decayed,

missing or filed teeth, 2011/12

19 Crude rate per 100,000 (age 1-4 years) for hospital admissions for dental carles, 2012/13-2014/15 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, 2014/15 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, 2012/13-2014/15

24 % of mothers smoking at time of delivery, 2014/15 25 % of mothers initiating breastfeeding, 2014/15 26 % of mothers breastfeeding at 6-8 weeks, 2014/15

27 Crude rate per 1,000 (age 0-4 years) of A&E attendances, 2014/15

28 Crude rate per 10,000 (age 0-14 years) for emergency hospital admissions following injury, 2014/15

29 Crude rate per 10,000 (age 15-24 years) for emergency hospital admissions following injury, 2014/15

30 Crude rate per 100,000 (age 0-18 years) for emergency hospital admissions for asthma, 2014/15

31 Crude rate per 100,000 (age 0-17 years) for hospital admissions for mental health, 2014/15

32 Directly standardised rate per 100,000 (age 10-24 years) for emergency hospital admissions for self-ham yeans) на 2014/15

### Peterborough

### Peterborough Child Health Profile

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.

-	ificantly worse than England average ONot significantly different ificantly better than England average Regional average	t				25th England average 75th percentile percentile	1
	Indicator	Local no.	Local value	Eng. ave.	Eng. Worst		Eng. Best
three all y	1 Infant mortality	13	4.2	4.0	7.2		1.6
Premature mortality	2 Child mortality rate (1-17 years)	7	14.8	12.0	19.3		5.0
	3 MMR vaccination for one dose (2 years) ● >=90% ● <90%	2,986	92.6	92.3	73.8		98.1
Health protection	4 Dtap / IPV / Hib vaccination (2 years) ● >=90% ● <90%	3,116	96.7	95.7	79.2		99.2
нő	5 Children in care immunisations	230	92.0	87.8	64.9		100.
	6 Children achieving a good level of development at the end of reception	1,878	61.1	66.3	50.7		77.5
	7 GCSEs achieved (5 A*-C inc. English and maths)	1,045	48.4	57.3	42.0	•	71.4
Wider determinants of ill health	8 GCSEs achieved (5 A*-C inc. English and maths) for children in care	-	-	12.0	8.0		42.9
alth	9 16-18 year olds not in education, employment or training	410	6.1	4.7	9.0		1.5
ar determination	10 First time entrants to the youth justice system	74	405.5	409.1	808.6	••••	132
of ill	11 Children in poverty (under 16 years)	9,620	21.9	18.6	34.4	• •	6.1
Vide	12 Family homelessness	249	3.2	1.8	8.9	••	0.2
>	13 Children in care	345	74	60	158		20
	14 Children killed or seriously injured in road traffic accidents	8	19.5	17.9	51.5		5.5
	15 Low birthweight of term babies	91	3.1	2.9	5.8		1.6
	16 Obese children (4-5 years)	266	9.8	9.1	13.6		4.2
*	17 Obese children (10-11 years)	345	17.9	19.1	27.8		10.
her	18 Children with one or more decayed, missing or filled teeth	-	36.1	27.9	53.2		12.
Health mprovement	19 Hospital admissions for dental caries (1-4 years)	5	44.7	322.0	1,406.8		11.
H udu	20 Under 18 conceptions	118	33.4	24.3	43.9	•	9.2
1	21 Teenage mothers	43	1.4	0.9	2.2		0.2
	22 Hospital admissions due to alcohol specific conditions	20	45.2	40.1	100.0		13.
	23 Hospital admissions due to substance misuse (15-24 years)	25	108.6	88.8	278.2		24.
	24 Smoking status at time of delivery	-	-	11.4	27.2		2.1
	25 Breastfeeding initiation	2,137	72.9	74.3	47.2		92.
	26 Breastfeeding prevalence at 6-8 weeks after birth	1,226	43.9	43.8	19.1	1 0	81.
ath on	27 A&E attendances (0-4 years)	12,170	782.5	540.5	1,761.8	• •	263
Pen l	28 Hospital admissions caused by injuries in children (0-14 years)	480	120.9	109.6	199.7		61.3
Prevention of ill health	29 Hospital admissions caused by injuries in young people (15-24 years)	380	166.9	131.7	287.1	•	67.
	30 Hospital admissions for asthma (under 19 years)	146	297.7	216.1	553.2	•••	73.
	31 Hospital admissions for mental health conditions	32	68.7	87.4	226.5	Ö	28.
	32 Hospital admissions as a result of self-harm (10-24 years)	208	611.2	398.8	1,388.4		105

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), 2012-2014

2 Directly standardised rate per 100,000 children age 1-17 years, 2012-2014

3 % children immunised against measies, m rubella (first dose by age 2 years), 2014/15 , mumps and

4 % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2 years, 2014/15

5 % children in care with up-to-date immunisations, 2015 6 % children achieving a good level of development

within Early Years Foundation Stage Profile, 2014/15 7 % pupils achieving 5 or more GCSEs or equivalent including maths and English, 2014/15

8 % children looked after achieving 5 or more GCSEs or equivalent including maths and English, 2014 (provisional)

9 % not in education, employment or training as a proportion of total age 16-18 year olds known to local authority, 2014

10 Rate per 100,000 of 10-17 year olds receiving their first reprimand, warning or conviction, 2014

 11 % of children aged under 16 ilving in families in receipt of out of work benefits or tax credits where their reported income is less than 60% median income, 2013
 21 % of delivery episodes where the mother is aged less than 18 years, 2014/15

 12 Statutory homeless households with dependent or pregnant women per 1,000 households,
 20 Trade rate per 100,000 (age 15-24)

 11 % of children aged under 16 living in families in

2014/15 13 Rate of children looked after at 31 March per 10,000 population aged under 18, 2015

14 Crude rate of children age 0-15 years who were killed or seriously injured in road traffic accidents per 100,000 population, 2012-2014

17 % school children in Year 6 classified as obese,

2014/15

18 % children aged 5 years with one or more decayed, missing or filed teeth, 2011/12

19 Crude rate per 100,000 (age 1-4 years) for hospital admissions for dental carles, 2012/13-2014/15 20 Under 18 conception rate per 1,000 females age 15-17 years, 2013

years) for hospital admissions for substance 2012/13-2014/15 misuse

24 % of mothers smoking at time of delivery, 2014/15 25% of mothers initiating breastfeeding, 2014/15 26% of mothers breastfeeding at 6-8 weeks, 2014/15

population, 2012-2014 28 % of mothers breastleeding at 6-8 weeks, 20 27 Crude rate per 1,000 (age 0-4 years) of A&E less than 2,500 grams, 2014/15 28 Crude rate per 10,000 (age 0-14 years) for 16 % school children in Reception year classified as obese, 2014/15

29 Crude rate per 10,000 (age 15-24 years) for emergency hospital admissions following injury, 2014/15

30 Crude rate per 100,000 (age 0-18 years) for emergency hospital admissions for asthma, 2014/15 31 Crude rate per 100,000 (age 0-17 years) for hospital admissions for mental health, 2014/15 32 Directly standardised rate per 100,000 (age 10-24 years) for emergency hospital admissions for self-harm, 2014/15

March 2016