

Children and Young People

Overview

Strategic Needs Assessment

2020/21

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Executive Summary

The purpose of Sefton's Children and Young People (C&YP) Overview is to identify local needs and views to support local strategy development and service planning. The needs assessment is a systematic process for determining and addressing needs, or "gaps" between current conditions and desired conditions. Identifying need should inform local priorities, policies and strategies that in turn inform local commissioning priorities that will improve outcomes for children and young people and reduce inequalities throughout the borough. In order to understand whether we are achieving good outcomes locally it is useful to benchmark outcomes in Sefton against the national average and look at trends over time.

It should be remembered that the safety and education of children along with their health and wellbeing is paramount and any issues can often only be tackled by taking a multi-departmental and multi-agency approach to solutions since factors influencing outcomes include not only both primary emergency service activities but also wider determinants such as community development and social relationships; poverty; education; and diversionary activity and family support.

The primary purpose of this Executive Summary is to identify key points from the C&YP Overview core dataset, with emphasis on those areas and issues that are of greater overall attention within each part of the report. This report primarily covers health and wider demographics relating to children; mental health and education is covered in more detail in the associated thematic Needs Assessments. The overall local picture of matters affecting children and young people in the Borough is summarised below.

The core figures in this document reflect the latest information available primarily from Public Health England Fingertips at the moment this data does not cover the period affected by the COVID-19 pandemic and the associated impacts on the lives of children and families. Whilst these are expected to be significant there is at present no comprehensive or robust national data to assess these wider impacts.

Key Issues

Reviewing the data available for comparison nationally and regionally the following are areas where Sefton has figures above or below our neighbours and the national average, based on the latest available annual information. These may be areas for further investigation or as *surrogates* raise the possibility of wider issues. Note that several of these measures are highlighted as risk factors for children and young people as many direct measures are not available nationally.

- 18% of expectant mothers in 2018/19, were smoking in early pregnancy, this is higher than the 13% seen in England and the 15% average of the North West (note figures are only available for the 2018/19 period). Similarly, to the data below smoking prevalence varies significantly across the Borough particularly in response to factors such as deprivation.
- In 2019/20, 11% (255) of mothers were smoking at the time of delivery in Sefton, a fall from 14% in 2015/16. The Borough is now in line with the national average and slightly below the 12% in the North West.
- Breastfeeding prevalence at 6-8 weeks after birth rates across Sefton are lower than that seen nationally, with just 32% of mother breastfeeding at 6-8 weeks compared to 48% nationally (2019/20).
- Nine of the 10 recorded vaccinations for pre and school age children showed a fall in vaccination rates as recorded by Public Health England (PHE) Fingertips in the latest available data (predominantly 2019/20). Five of these are recorded as being "significantly" worse than rates seen nationally by PHE.
- For the past five years, levels of overweight and obese children in reception classes across Sefton have been higher than those levels seen nationally (particularly in the last two years). However, this increase is in line with the same increase nationally and across the North West. In 2018/19 the prevalence of overweight and obese pupils in Year 6 in Sefton was similar to the national average. Data for 2019/20 indicates that overweight rates in Sefton for the same year group rose

to 38% (England was 35%), however, this data should be treated with caution as the survey was done at the start of the COVID pandemic.

- The levels of physical activity in children and young people in 2018/19 were lower in Sefton than in England and had reduced further compared to the previous year, based on the Active Lives Children and Young People survey run through schools by Sports England.
- In 2019/20, 29% of 5-year olds in Sefton had experience of visually obvious dental decay, this is higher than the 23% seen across England, with the Borough having shown increases over the last two years.
- Hospital admissions for mental health issues in those aged under 18 is higher than the rate seen across England, with those hospitalised for intentional self-harm also being higher than national rates and continuing to increase. The latest apparent significant increase in the Self Harm metric is partly a result of changes in recording practice in one of the NHS trusts covering Sefton.
- Over the past five years Sefton has continually seen higher rates of A&E attendances for children and young people than England, with an overall increase of 63%.
- The rate of pedal cyclists killed or seriously injured in Road Traffic Collisions (RTCs) along with emergency admissions to hospital for pedal cyclists has increased in the Borough and is above the England average.
- The overall number of Children in Need (CiN) within Sefton Children's Social Care has increased across the last five years (9%) and is above those figures seen regionally and nationally.
- Similarly, the number of Children Looked After (CLA), has increased across the past five years, with an overall increase of 22% (2016 compared to 2020).
- Overall absences in both Primary and Secondary schools in Sefton are above the rates seen nationally and have seen an overall increase across the past five years.
- Early Years education performance against the foundations stage profile has been below the national average for the last three years,

with a further decline in 2018/19 academic year.

- Key Stage 2 - Reading, Writing & Maths (combined) performance has previously been above national average for 16/17 & 17/18 academic years, but it has dropped below in 2018/19, which may be a minor issue relative to the academic cohort, but something that should be monitored.
- Key Stage 4 Progress 8 performance has been below the national average for the last three years, with a more noticeable decline in 2018/19 academic year.
- The percentage of children achieving a grade 5+ in English & Maths GCSE at Key Stage 4 or a grade 4+ in English & Maths GCSE at Key Stage 4 has been lower than national average for the last three years, with a more noticeable decline in 2018/19 academic year.
- The rates of CYP claiming benefits in Sefton are on the rise, with levels being higher than the averages for the North West and England.
- Sefton's children living in relative low-income families has shown year on year increases across the past five years, with 2018/19 having the highest rate (18.2%). The level across the Borough levels have continually been above those of England.

Conclusions & Recommendations

Sefton's children and young people population is predicted to reduce slightly over the next 20 years; yet the rate of C&YP known to Social Care is continually rising causing increased pressure on Local Authority resources. Further investment is needed to safeguard these children and improve systems and processes in order to provide a sustainable and robust service.

The increase of pregnant women smoking and the decline in vaccination uptake, coupled with the overall rise in demand seen on hospital services in Sefton are having an adverse impact on the health and well-being of the C&YP resident in Sefton. Studies and investigation into key issues may be required to find the reasons behind these and provide possible solutions.

Overall absences in Sefton primary and secondary schools are higher than seen nationally; the

importance of good punctuality and attendance is paramount to C&YP attainment and future expectations.

Despite a lower educational performance at the EYFSP stage and a drop in KS2 performance in the last measured academic year, children's progress and attainment at KS4 remains the most significant area for redress. Research published by the Department for Education (DfE) in 2016 which found that the higher the overall absence rate across KS2 and KS4, the lower the likely level of attainment at the end of KS2 and KS4. Research conducted by the Joseph Rowntree Foundation also suggested that children growing up in poorer families emerge from school with substantially lower levels of educational attainment and that this is a major contributing factor to patterns of social mobility and poverty. Determining the success factors for narrowing the progress and achievement gap in Sefton, particularly between disadvantaged pupils and their peers is one of the most significant challenge facing Sefton schools and the local authority.

Benefit claims amongst the Borough's C&YP are rising with Sefton rates being higher than those in England. Engagement with young people specifically those claiming Universal Credits should be continued to help them find employment or improve on their employability.

In 2018/19, it is estimated that 18% of the Boroughs C&YP were living in relatively low-income families. These families may benefit from access to learning, advice and employment support.

There are key groups of C&YP where information is insubstantial including: young carers, LGBT & Q, and those with mental health issues. Research on C&YP to identify these groups could be carried out, in order to better understand their needs and provide help and support where necessary. The rate of admission to hospital for self-harm in the 10-24 age group is above the national and regional average. The inpatient admission rate for mental health for those aged 0-17 is above the national average (though these tend to be low numbers and fluctuate significantly year on year). Further details on child mental health and wellbeing and educational attainment can be found in the accompanying needs assessments for those themes.

Introduction

The Sefton Children and Young People Strategy highlights the key priorities for building better outcomes for our children and young people. This includes the improvement of existing services in terms of speed of delivery and quality and developing new innovative services to help resolve new challenges.

The key priorities in the 2020/25 Children and Young People Plan includes:

- To act in the best interests and promote the physical and mental health and well-being, of those children and young people.
- To encourage children and young people to express their views, wishes and feelings.
- To consider the views, wishes and feelings of children and young people.
- To help children and young people gain access to and make the best use, of services provided by the local authority.
- To promote high aspirations, and seek to secure the best outcomes, for children and young people.
- For children and young people to be safe, and for stability in their home lives, relationships and education or work, and
- To prepare children and young people for adulthood and independent living

Further details about the Sefton Children and Young People Plan can be found at:

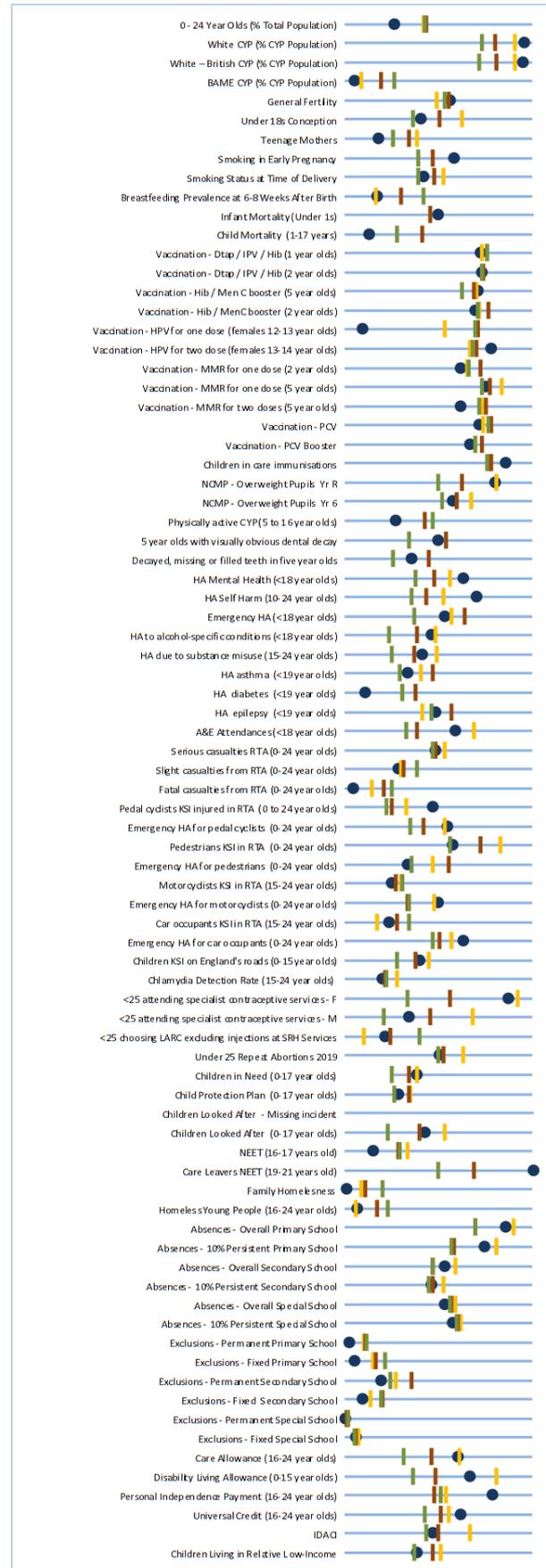
<https://seftonlscb.org.uk/lscb/news/children-young-people-plan-2020-25-sefton>

Comparative National Position

The following chart illustrates the relative position of Sefton when compared to the range of values for all local authorities nationally, and highlights the England, Northwest and Statistical Neighbour (SN) rates where available.

The graphs show the relative position of Sefton (●) compared to other Local Authorities in England, along with Sefton’s Statistical Neighbours (|), the North West (|) and England (|). Low values are to the left, high to the right.

For some data topics the SN figure was not available.



Demographics

According to mid-year population estimates for 2019, there are 72,875 children and young people (aged 0 to 24) residing in Sefton. This makes up 26% of the Borough’s population, lower than the rates seen across Liverpool City Region (LCR), the North West and England (all with 30%).

In 2019, approximately 93% of Sefton’s children and young people have an ethnicity deemed as White British higher than the comparator areas (LCR – 90%, the North West – 81% and England - 73%).

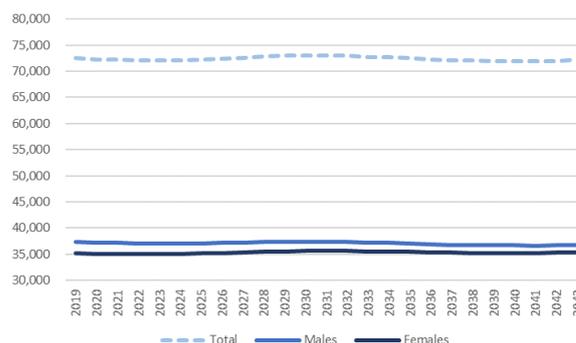
Population projections suggest that by 2043, there will be 72,157 children and young people residing in Sefton a slight reduction of 1% compared to an overall increase in the total Borough population (6%) and in contrast to the 1% increase in young people seen nationally. The number of males will continue to be slightly higher than females.

The Annual Population Survey carried out by the Office of National Statistics estimates that in 2018 5.3% of the UK population aged 16 to 24 years old identified themselves as Lesbian, Gay, Bisexual, Transgender and Questioning (LGBT&Q). Using this as a proxy measure, suggests that there are perhaps approximately 1,300 LGBT&Q young people residing in Sefton.

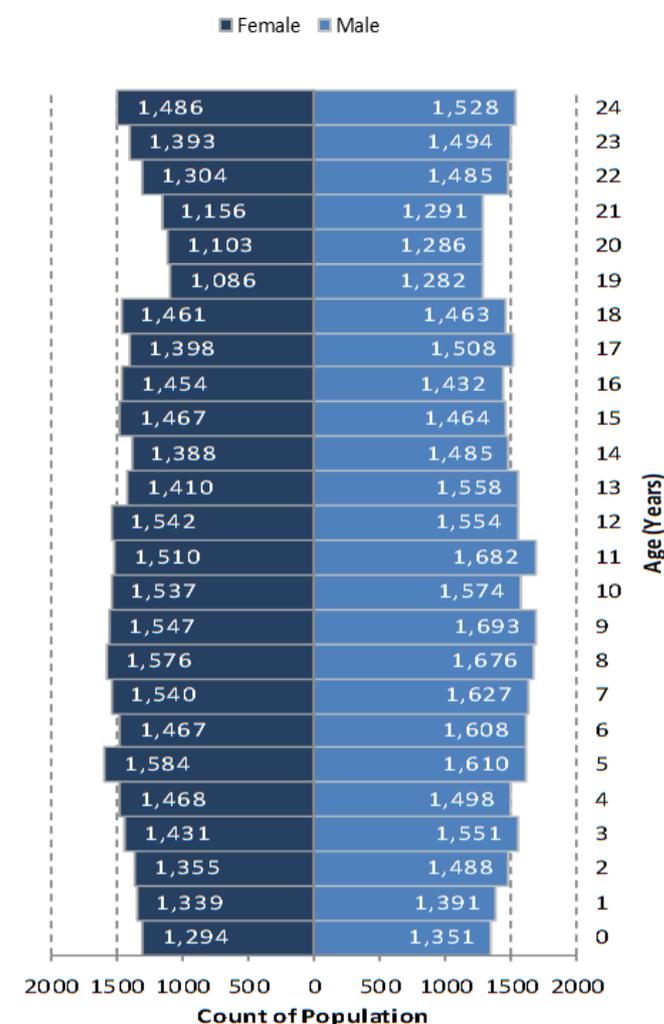
Population Distribution Comparisons

	Sefton Count	Percentage			
		Sefton	LCR	North West	England
0-24 Total	72,875	26.4%	29.6%	29.9%	29.8%
Males	37,579	51.6%	51.0%	51.3%	51.3%
Females	35,296	48.4%	49.0%	48.7%	48.7%
Pre School Age (0-4)	14,166	19.4%	19.3%	19.6%	19.7%
Early Years Age (2-4)	8,791	12.1%	11.8%	12.1%	12.1%
Nursery Age (3-4)	5,948	8.2%	7.9%	8.1%	8.2%
Primary School Age (4 to 11)	25,197	34.6%	33.6%	33.1%	33.4%
High School Age (11 to 16)	17,946	24.6%	21.9%	23.2%	23.2%
College Age (16 - 18)	8,716	12.0%	10.6%	10.9%	10.9%
Working Age (16 to 24)	24,610	33.8%	38.3%	36.0%	35.5%
White	69,160	94.9%	91.3%	83.0%	77.5%
of which White British	67,710	92.9%	89.7%	80.9%	73.3%
Mixed	2,280	3.1%	3.4%	4.0%	5.8%
Asian	868	1.2%	2.6%	9.7%	10.3%
Black	278	0.4%	1.6%	2.3%	5.0%
Other	289	0.4%	1.2%	1.0%	1.4%

Population Projections



Population Single Year Age Bands

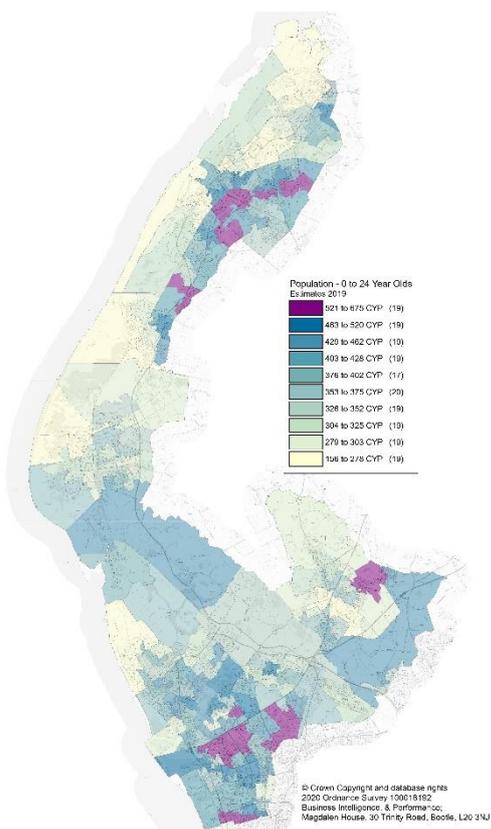


Of note is that in the latest school census (October 2020) some 5.6% of pupils (just over 2,200 children) have their ‘first language’ registered as something other than English.

Population Single Year Age Bands

Age	Male	Female	Total
0 Years Old	1,351	1,294	2,645
1 Years Old	1,391	1,339	2,730
2 Years Old	1,488	1,355	2,843
3 Years Old	1,551	1,431	2,982
4 Years Old	1,498	1,468	2,966
5 Years Old	1,610	1,584	3,194
6 Years Old	1,608	1,467	3,075
7 Years Old	1,627	1,540	3,167
8 Years Old	1,676	1,576	3,252
9 Years Old	1,693	1,547	3,240
10 Years Old	1,574	1,537	3,111
11 Years Old	1,682	1,510	3,192
12 Years Old	1,554	1,542	3,096
13 Years Old	1,558	1,410	2,968
14 Years Old	1,485	1,388	2,873
15 Years Old	1,464	1,467	2,931
16 Years Old	1,432	1,454	2,886
17 Years Old	1,508	1,398	2,906
18 Years Old	1,463	1,461	2,924
19 Years Old	1,282	1,086	2,368
20 Years Old	1,286	1,103	2,389
21 Years Old	1,291	1,156	2,447
22 Years Old	1,485	1,304	2,789
23 Years Old	1,494	1,393	2,887
24 Years Old	1,528	1,486	3,014

0-24 Year olds by Sefton Lower Super Output Area



Health

Births

Between April 2019 and March 2020, there were a total of 2,377 births (2,368 live births) to 2,340 Sefton mothers (it should be noted that records for Q1 2020 - January to March may have been impacted on by the COVID19 pandemic).

The rate of general fertility in 2019 across the Borough was like that seen in the North West yet slightly lower than the national average. General fertility rates have reduced across the past five years in Sefton along with the three comparator areas.

Conception rates in those under 18 have shown overall reductions across the past five years, with Sefton continually being lower than the regional and LCR areas.

According to the Local Government Association: *“Teenage mothers are at higher risk of missing out on further education - an estimated 1 in 5 young women aged 16 to 18 who are not in education, employment or training are teenage mothers.”*

In 2018/19, the rate of teen mothers in Sefton was lower than that of the comparator areas (LCR, North West and England) and has shown an overall decrease across the past five years.

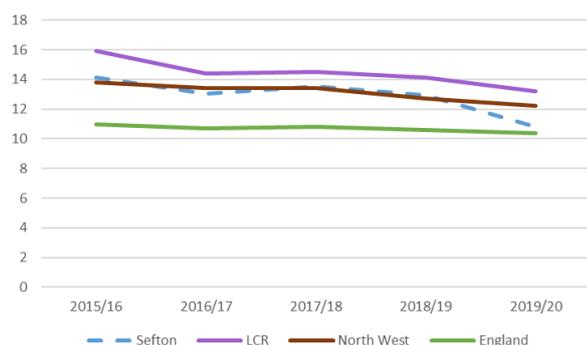
Smoking during pregnancy can cause risks and complications with the pregnancy and birth, including stillbirths, premature births and low birth weight. Smoking can also increase the risk of sudden infant death syndrome (SIDS) and can cause long term health issues such as asthma.

In 2018/19, 18% of expectant mothers were registered as smoking in early pregnancy significantly worse than the national rate of 13% and the 15% seen regionally. However, the rates of smoking at the time of delivery in Sefton were similar to those seen across England, with the rates reducing over the past five years. In 2019/20 11% of mothers were smoking at the time of delivery. Smoking prevalence during pregnancy varies significantly across the Borough particularly in response to factors such as deprivation.

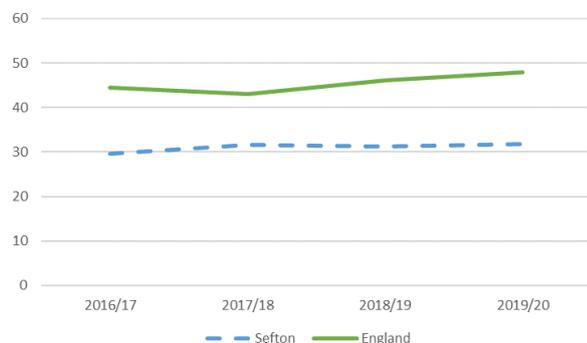
The benefits of breast feeding have been widely studied, with the NHS stating breast milk helps to reduce baby’s risks of infection, SIDS, obesity and more. Unfortunately, breastfeeding prevalence at

6-8 weeks after birth across Sefton is significantly worse than that seen nationally, with 32% of mothers breastfeeding at 6-8 weeks compared to 48% nationally (2019/20). However, Sefton have recently been awarded UNICEF Baby Friendly Initiative status (an accreditation programme to improve breastfeeding, with set standards that have to be met by services in order to achieve it), an indicator of the work being carried out to improve levels.

Smoking at Time of Delivery (%)



Breastfeeding Prevalence at 6-8 Weeks after Birth (%)



Mortality

Infant mortality (those under one) across Sefton is slightly above the England average, with rates showing slight changes during the time period. During 2017-19 there were 37 infant deaths in Sefton, a rate of 5 per 1,000 under ones residing in the Borough.

Overall child mortality has remained relatively static across the past five years, with rates continually being below England, the North West and Merseyside. Between 2016-18 there were 13 deaths in Sefton of children aged 1 to 17, a standardised rate of 8 per 100,000.

Vaccinations

According to the NHS, vaccinations prevent up to 3 million deaths worldwide per year and have led to the eradication of diseases like small pox, polio and tetanus, along with the reduction of others including measles and diphtheria. Childhood vaccinations helps in the prevention of these diseases.

Public Health England (PHE) Fingertips provides data on ten different types of pre and school age vaccinations predominantly for 2019/20.

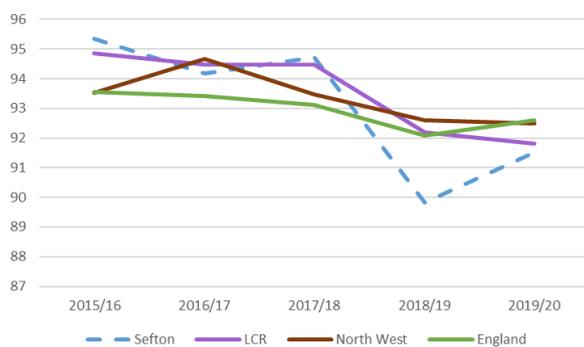
Rates across Sefton for most forms of childhood vaccinations have shown decline in the recent trend according to PHE:

- Dtap / IPV / Hib (1-year-old)
 - 91.5% take up similar to the national (92.6%) and regional (92.5%) rates
 - Recent trend shows rates are decreasing and getting worse
- Dtap / IPV / Hib (2-year-old)
 - 93.7% take up similar to the national (93.8%) and regional (94.0%) rates
 - Recent trend shows rates are decreasing and getting worse
- PCV
 - 91.7% take up similar to the national (93.2%) and regional (93.5%) rates
 - Recent trend shows rates are decreasing and getting worse
- PCV Booster
 - 89.7% take up significantly worse than nationally (90.4%) and regional (91.3%) rates
 - Recent trend shows rates are decreasing and getting worse
- Hib / MenC booster (2 years old)
 - 89.9% take up significantly worse than nationally (90.5%) and regional 92.0%) rates
 - Recent trend shows rates are decreasing and getting worse
- Hib / MenC booster (5 years old)
 - 93.9% take up similar to the national (92.4%) and regional (93.6%) rates
 - Recent trend shows no significant change
- MMR for one dose (2 years old)

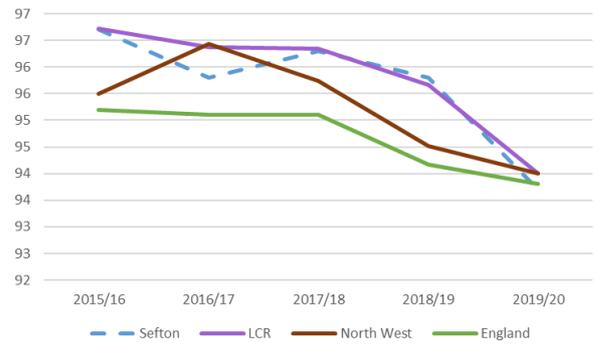
- 89.7% take up significantly worse than nationally (90.6%) and regional (91.9%) rates
- Recent trend shows rates are decreasing and getting worse
- MMR for one dose (5 years old)
 - 94.7% take up similar to the national (94.5%) and regional (95.1%) rates
 - Recent trend shows rates are decreasing and getting worse
- MMR for two doses (5 years old)
 - 83.4% take up significantly worse than nationally (86.8%) and regional (88.1%) rates
 - Recent trend shows rates are decreasing and getting worse
- HPV vaccination coverage for one dose (females 12-13 years old)
 - 72.5% take up significantly worse than nationally (88.0%) and regional (88.4%) rates
 - Recent trend shows rates are decreasing and getting worse

However, the level of immunisations for children in care has continually risen over the past five year and is now (2020) significantly better than the rates seen across England, the North West and LCR.

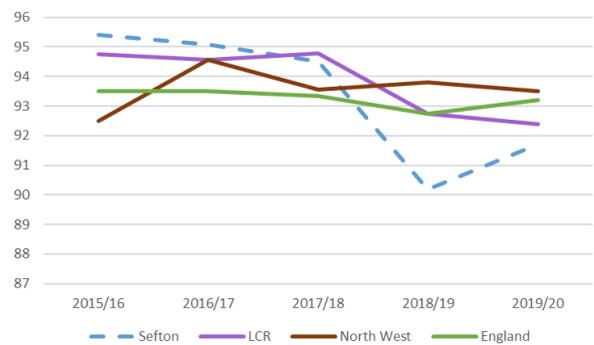
Population vaccination coverage - Dtap / IPV / Hib (1 year old)



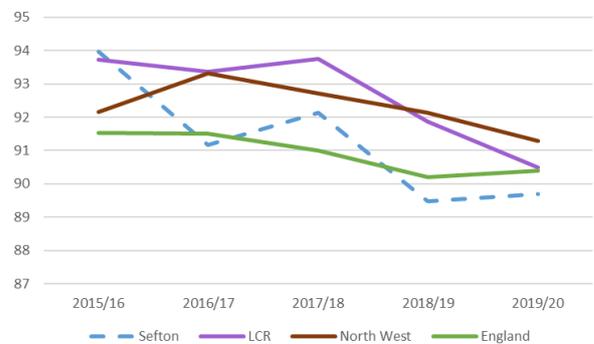
Population vaccination coverage - Dtap / IPV / Hib (2 year old)



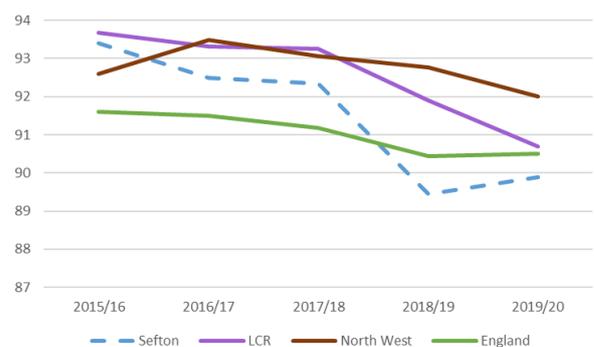
Population vaccination coverage (%) - PCV



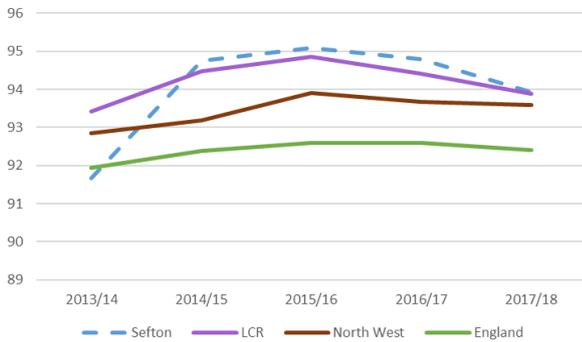
Population vaccination coverage (%) - PCV Booster



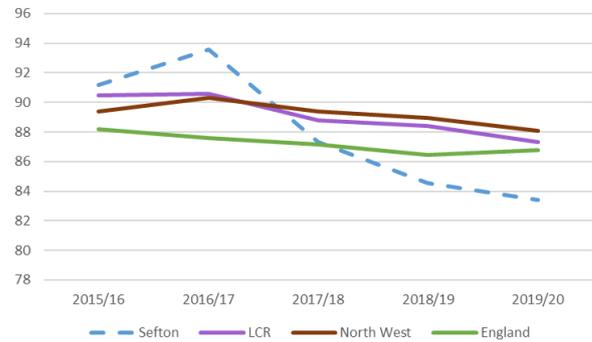
Population vaccination coverage (%) - Hib / MenC booster (2 years old)



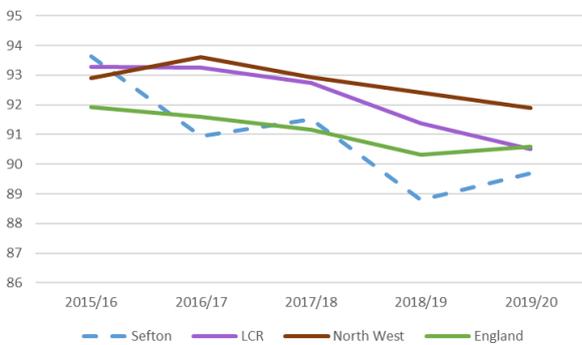
Population vaccination coverage (%) - Hib / MenC booster (5 years old)



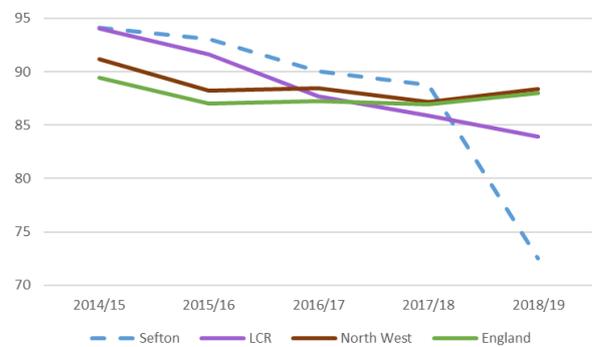
Population vaccination coverage (%) - MMR for two doses (5 years old)



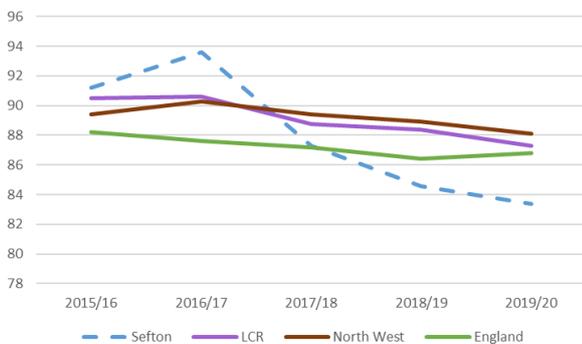
Population vaccination coverage (%) - MMR for one dose (2 years old)



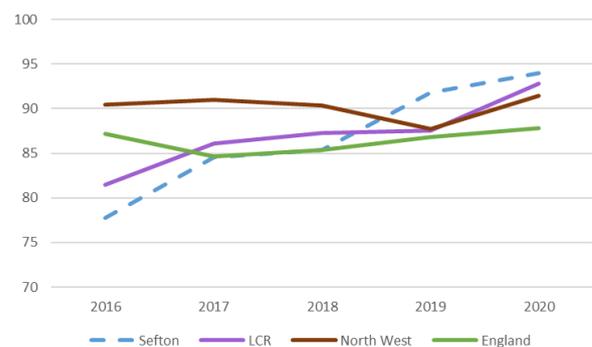
Population vaccination coverage (%) - HPV vaccination coverage for one dose (females 12-13 years old)



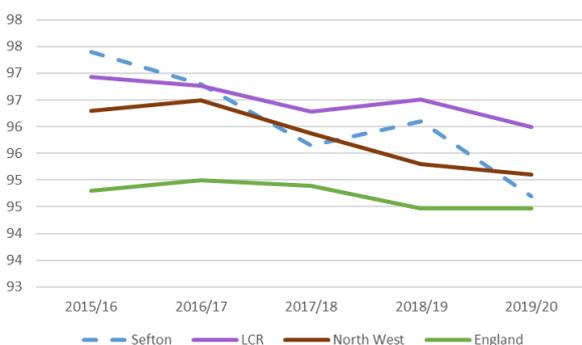
Population vaccination coverage (%) - MMR for one doses (2 years old)



Children in Care Immunisations



Population vaccination coverage (%) - MMR for one doses (5 years old)



Overweight & Obese Children

The National Child Measurement Programme (NCMP) measures the height and weight of children in Year 6 (those aged 10 to 11) and Reception (those aged 4 to 5) each year. Within Sefton Year 6 pupils are usually measured first followed by Reception, in 2019/20 the collection of Reception data was impacted on by the COVID-19 pandemic.

The World Health Organisation (WHO) states that "Childhood obesity is associated with a higher

chance of premature death and disability in adulthood. Overweight and obese children are more likely to stay obese into adulthood and to develop noncommunicable diseases (NCDs) like diabetes and cardiovascular diseases at a younger age.”

The most significant health consequences of childhood overweight and obesity, that often do not become apparent until adulthood, include:

- cardiovascular diseases (mainly heart disease and stroke)
- diabetes
- musculoskeletal disorders, especially osteoarthritis
- certain types of cancer (endometrial, breast and colon)

Over the last five years (particularly in the last two), Sefton rates of overweight and obese reception age children have been significantly worse than the rates seen nationally and have seen an overall 7% increase between 2014/15 and 2018/19, however, this increase is in line with the increases seen both nationally and regionally. 2019/20 rates are similar to that seen in 2018/19 however, caution should be taken with this data due to the survey being carried out around the start of the COVID 19 pandemic.

The prevalence of overweight and obese pupils in Year 6 in Sefton was similar to the national average in 2018/19. In 2019/20 these rates appear to have risen to 38% (with England being 35%). Overall obesity rates in Sefton have increased since the programme began. It should also be noted that the gap between the most deprived and least deprived has widened over the duration of the study for Year six pupils.

According to the 2018/19 Active Lives Children and Young People survey run through schools by Sports England, 39% of children and young people (5 to 16-year olds) were physically active. A reduction compared to the previous year (46%) and lower than the national and regional levels.

This can impact on the health and wellbeing of CYP, contributing to increased rates of overweight individuals in turn having a negative effect on the mental and physical health of the CYP. This is likely to follow them through their adult life

having health implications including diabetes, heart disease and premature deaths.

Oral Health

The percentage of 5-year olds with experience of visually obvious dental decay has seen an increase in Sefton over the past two years, unlike national and regional percentages which have decreased. The Borough percentages (29%) are now higher than England (23%).

Oral health is important to children’s overall health, school readiness, and is a marker for wider health and social care issues including poor nutrition and obesity as discussed by Public Health England Health Matters: Child Dental Health.

Mental Health

As stated in the Department of Health’s No health without Mental Health: *“Good mental health and resilience are fundamental to our physical health, our relationships, our education, our training, our work and to achieving our potential”*

Hospital admissions for mental health in those aged under 18 have fluctuated across the past five years, with Sefton currently being significantly worse than the rate seen across England (2019/20). Sefton has remained above the North West and LCR averages.

The latest NHS Digital survey on the mental health of children and young people in England was undertaken in 2017. The headlines from this survey and implications for Sefton were:

Overall 14.4% of 11-16-year olds and 16.9% of 17-19-year olds met the criteria for having a mental disorder at the time of the survey. For Sefton that equates to approximately 2,600 and 1,400 children respectively.

An in-depth Children and Young People - Mental Health and Emotional Wellbeing Assessment has been completed by Sefton where further information can be found on this topic.

Hospital Admissions for Self-Harm

Sefton has a continuing and significantly higher rate of hospital admissions due to self-harm (for those aged 10 to 24) than that of England and has shown overall increases across the last five years (2015/16 to 2019/20). Sefton is now also higher than the North West and LCR.

In 2019/20, 315 children and young people residing in Sefton aged between 10 and 24 were admitted to hospital due to self-harm. However, between 2017/18 and 2018/19 one of Sefton’s main acute providers (Southport & Ormskirk) enacted a change in their emergency pathway process to increase the number of same day emergency care (SDEC) beds. This resulted in an increase in A&E attendances converting into an admission, mostly less than a day’s length of stay. This was not a trend noted across the county as conversion rates nationally rose by 1% whereas Southport & Ormskirk Trust increased close to 10%.

This change resulted in increased numbers of Self Harm short stay admissions but not a corresponding increase in Self Harm A&E attendances / patients. A period of observation is recommended with the Self Harm NICE guidance. The increase for Self-Harm admissions is noted not only in Sefton but also in West Lancashire (the other main CCG user of S&O Trust).

Hospital admissions as a result of self-harm (10-24 years) - Directly standardised rate - per 100,000

Hospital admissions as a result of self-harm (10-24 years)					
	2015/16	2016/17	2017/18	2018/19	2019/20
Sefton	560.6	600.6	573.5	775.8	740.1
LCR	628.2	563.6	567.4	607.1	663.0
North West	520.4	473.5	488.8	517.4	509.9
England	430.5	407.1	421.2	444.0	439.2
Count Sefton	251	262	243	325	315

Hospital Admissions (HA)

Though a great deal of work has been carried out to reduce emergency hospital admissions for all ages in England, there has been a 42% increase over the last 12 years.

Rates of emergency admissions to hospital for those aged under 18 in Sefton have shown increases across the past five years, with the last three being significantly higher than those rates seen in England. However, the Borough remains below the rates of the North West and LCR.

Drug and alcohol misuse can have long term negative effects both physically and mentally. Triggering or worsening mental illnesses, increasing the risk of self-harm along with affecting relationships with others.

Hospital admission rates due to alcohol-specific conditions in the under 18s, have shown increases in the Borough, with rates being continually higher than those of England, in 2019/20 the Borough rates moved above that of LCR and the North West.

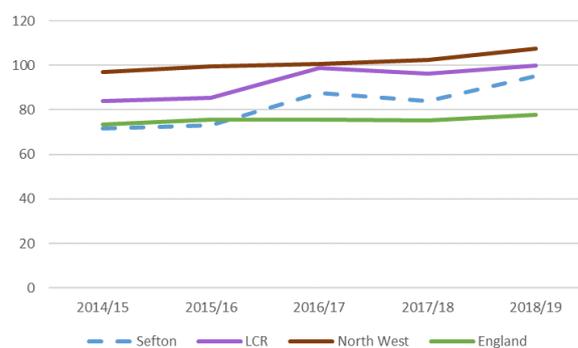
Unlike the overall declining rates seen in England, Sefton HA due to substance misuse are on the rise, with 115 young people from Sefton (aged between 15 and 24) admitted to hospital for substance misuse between 2017/18 to 2019/20.

The number of children and young people (under 19s) being admitted to hospital due to Asthma has shown reductions over the past five years with 2018/19 having the lowest counts in the past eight years. Similar reductions can be seen across the three comparator areas. However, Sefton is significantly worse than England (2019/20).

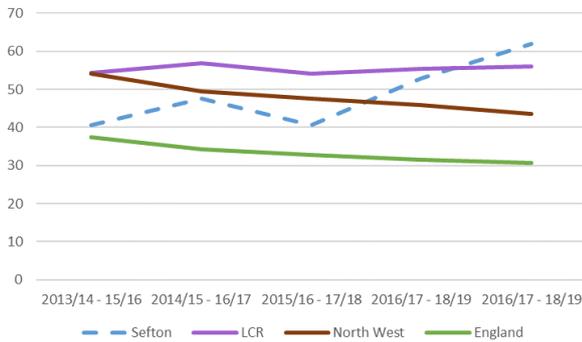
Like the rest of England, the North West and LCR, the number of young people (under 19s) being admitted to hospital due to diabetes, has shown reductions over the past five years, with Sefton now being below all national and regional levels (2019/20).

Unlike asthma and diabetes, the rate of HA due to epilepsy has increased with 2018/19 having the highest number of admissions since 2010/11. Sefton rates have moved above those of England and LCR (in 2018/19).

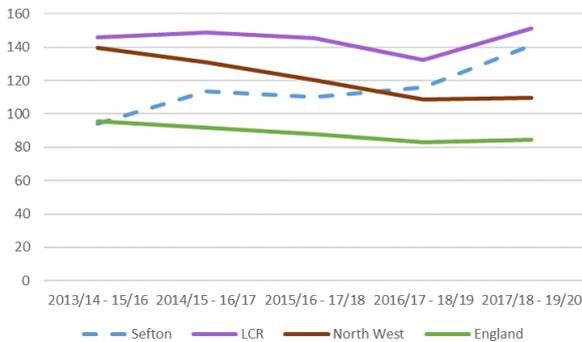
Emergency Admissions (Under 18) - Crude rate - per 1,000



HA for Alcohol-Specific Conditions (Under 18) - Crude rate - per 1,000



HA due to Substance Misuse (15-24 years) - Directly standardised rate - per 100,000

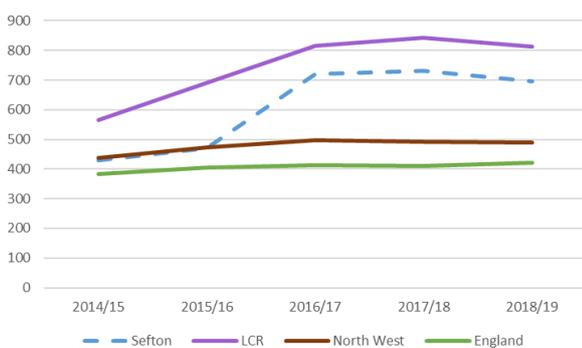


Accident and Emergency (A&E) Attendances

In 2018/19, there were 37,390, attendances to A&E by Sefton children and young people (CYP) under the age of 18.

Over the past five years Sefton has seen significantly worse rates of A&E attendances than those seen nationally. With an overall increase of 63% when comparing 2018/19 to 2014/15 figures.

A&E Attendances (Under 18) - Crude rate - per 1,000



Road Traffic Collisions (RTCs)

Whilst RTCs are the main cause of death for children and young people (5 to 29-year olds) worldwide the UK had the third lowest rate in Europe in 2017.

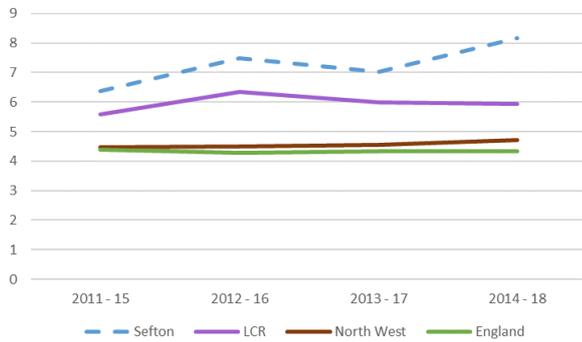
The overall rates of serious and slight casualties from RTCs in those aged 0 to 24, have shown reductions throughout the past five year not just in Sefton but across England, the North West and LCR; with fatal casualties in Sefton for CYP now being significantly lower than across England.

The rate of pedal cyclists killed or seriously injured (KSI) in RTCs has shown increases in Sefton (unlike the other three comparator areas). During 2014-18, there were 30 children and young people (aged 0-24) killed on pedal cycles who resided in Sefton. Similarly, emergency admissions to hospital for pedal cyclists has seen an increase, with 70 CYP admitted between 2014/15 and 2018/19. This is a significantly worse rate than seen nationally for both deaths and emergency admissions.

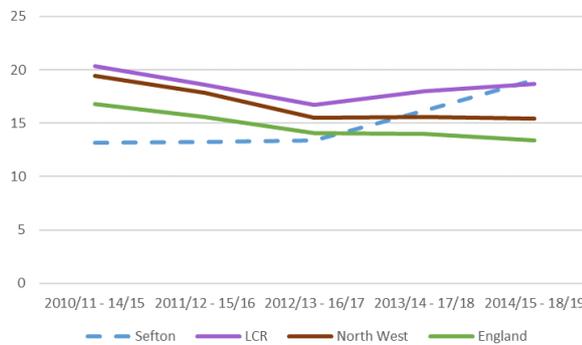
Pedestrians killed or seriously injured in RTCs has shown reductions for those aged 0 to 24 within Sefton, falling by over a quarter from 2011-15 to 2014-18. The Borough is continually below the North West and LCR, and on par with the national rates. Likewise, the number and rate of CYP pedestrians admitted to hospital in an emergency has reduced, with the Borough continually being lower the national average.

Emergency HA for motorcyclists aged 0 to 24 in Sefton has shown increases across the last three-time periods and has moved above those of the three comparator areas. In total there were 55 emergency admissions for motorcyclists during 2014/15 to 2018/19.

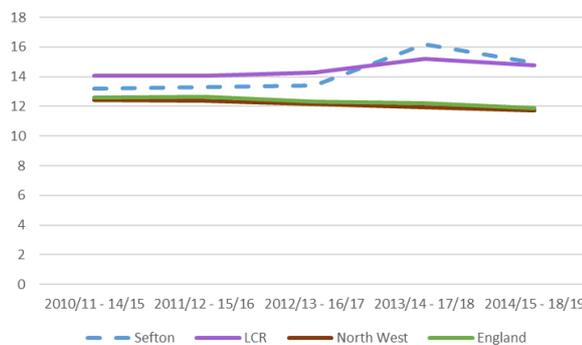
Pedal cyclists KSI in RTC (aged 0-24) - Crude rate - per 1,000



Emergency HA for Pedal Cyclists (aged 0-24) - Crude rate - per 1,000



Emergency HA for Motorcyclists (aged 0-24) - Crude rate - per 1,000



Under 25-year olds attending specialist contraceptive services in Sefton are higher than the rates seen national for both males and females in 2018, however both have shown reductions since 2014 with females reducing by 35% and males by 49%.

The number of Sefton females aged under 25 receiving long-acting reversible contraceptive (excluding injections) from Sexual and Reproductive Health Services is continually below the rate seen nationally, but higher than the other two comparator areas with counts showing an overall increase from 2014 to 2018.

The rate of under 25-year olds having repeat abortions has remained relatively static across the past five years in Sefton, with the rates in 2019 being the same as those seen nationally.

Sexual Health

Public Health England recommends Local Authorities should be trying to achieve a Chlamydia detection rate of 2,300 per 100,000 15-24 population. A high detection rate is seen as there being good access to chlamydia screening and treatment to stop the spread of infection. Sefton’s detection rate has been below the target level for the past three years. The Borough is now significantly worse than England (2019). Sefton is also lower than the North West and LCR.

Vulnerable Children

Early Help (EH)

Early Help is about acting as soon as possible to tackle problems for children and families before they can grow into something that is more difficult to overcome. It is about identifying children and families that may be at risk of running into difficulties and providing timely and effective support.

Between April 2019 and March 2020 Sefton’s Early Help team had 4,097 episodes started, relating to 1,022 households across Sefton. This is an increase of over 40% in the number of episodes compared to 2015/16, however, there was a 31% reduction in the number of families with an episode started.

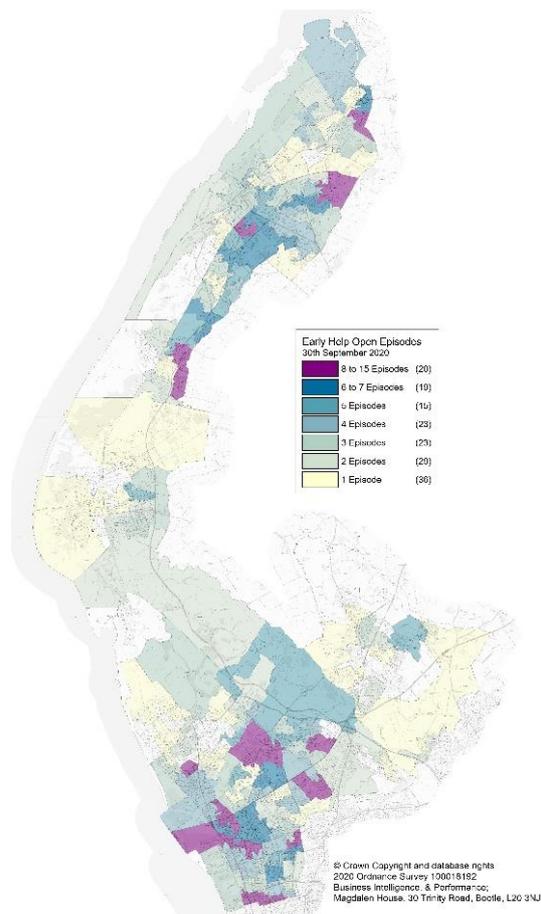
3,858 episodes were ended in 2019/20 (relating to 916 families), an increase of 21% in ended episodes yet a reduction of 38% of families.

Of the closed episodes in 2019/20 35% had an outcome of no further action, the number of episodes ended due to this has increased considerably over the last five years (from 77 in 2015/16 to 1,353 in 2019/20). A further 29% of episodes had their aim achieved, a rate that has shown year on year reductions across the last five years with an overall decline of 40%.

Early Help Episodes Ended Reason (2019/20)

Episode End Reason	Count	Percent
Aim Achieved	1,134	29%
Unable to Engage	881	23%
Further Action Required	490	13%
No Further Action	1,353	35%
Total	3,858	100%

Early Help by Sefton Lower Super Output Area



Children’s Social Care

Children’s Social Care support some of the most vulnerable children in society, for example children who are at risk from harm, disabled children and those who do not have a place to live. According to the Institute for Government, Local Authorities are persistently overspent, yet spend has not kept up with demand.

There were 2,028 children aged between 0 and 17, across Sefton who were children in need (CiN) on the 30th September 2020, this equates to 375 per 10,000 children residing in Sefton. 616 were children looked after (CLA) a rate of 114 per 10,000 child residents and 274 on a child protection plan (CPP) a rate of 51 per 10,000 child residents.

As of 31st March 2019, Sefton had a higher rate of overall CiN than that seen nationally and regionally with CLA making up 24% of these and being higher than the North West and England

levels. CPP rates were higher in the Borough than those seen across England, but lower than the North West.

CiN levels have shown an overall increase of 9% across the past five years. With CLA increasing by 22%.

In 2018/19, Sefton had a considerably higher level of children on CPP due to physical abuse than those seen across England, the North West and LCR. With rates of sexual abuse also being higher than the three comparator areas.

During 2019/20 there were 3,153 completed assessments and overall increase of 25% when compared to 2015/16.

Of the completed assessments:

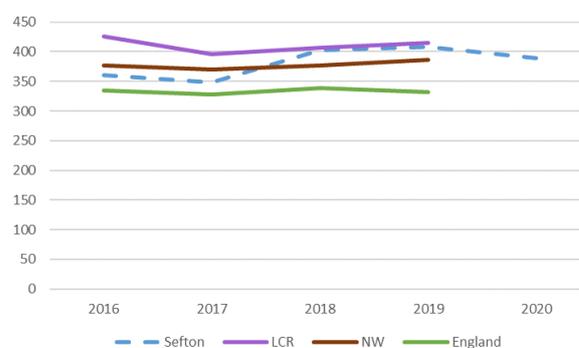
- 58% had abuse or neglect identified
 - 22% of those assessed had emotional abuse.
 - There has been a year on year increase in the number of assessments identifying neglect and abuse with an overall increase of 62% (when comparing 2015/16 to 2019/20).
- 56% had mental health identified
 - 33% of assessments related to the parent or carer having MH
 - The number of assessments where mental health was flagged has seen a significant rise across the past five years from 911 in 2014/15 to 1,753 in 2019/20.
- 55% had misuse of alcohol or drugs identified
 - 21% of all assessments showed misuse or drugs by a parent or carer.
 - 20% had misuse of alcohol by a parent or carer.
 - The misuse of alcohol / drugs has shown increases over the past five years (61%).
- 47% of assessments identified domestic abuse
 - 33% of assessments had a parent or carer being the subject of abuse.
 - Overall rates of assessments identifying domestic violence has shown slight change from 2014/15 to 2019/20.

Whilst data on factors at the end of assessment should be interpreted with caution given the variances in national reporting it does give some indication of the extent of these issues within the supported children population in Sefton.

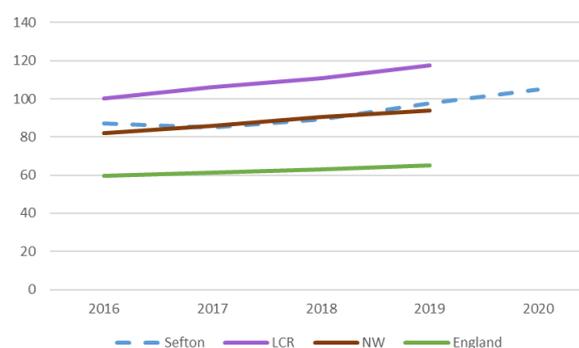
During April 2018 and March 2019 there were 69 CLA in Sefton who went missing, this equated to 11% of the looked after population. This is the same rate as seen nationally, regionally and across the LCR area.

Between April and September of 2020 there have been 57 CLA missing across Sefton, this equated to 8% of the total CLA population, in total there have been 295 incidents of missing CLA with 37 children going missing on more than one occasion.

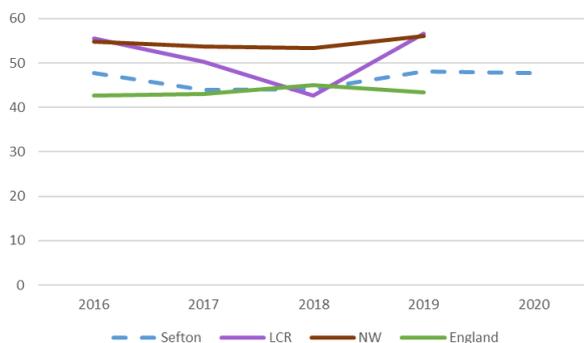
Children in Need as at 31st March Rate per 10,000



Children Looked After at 31st March Rate per 10,000



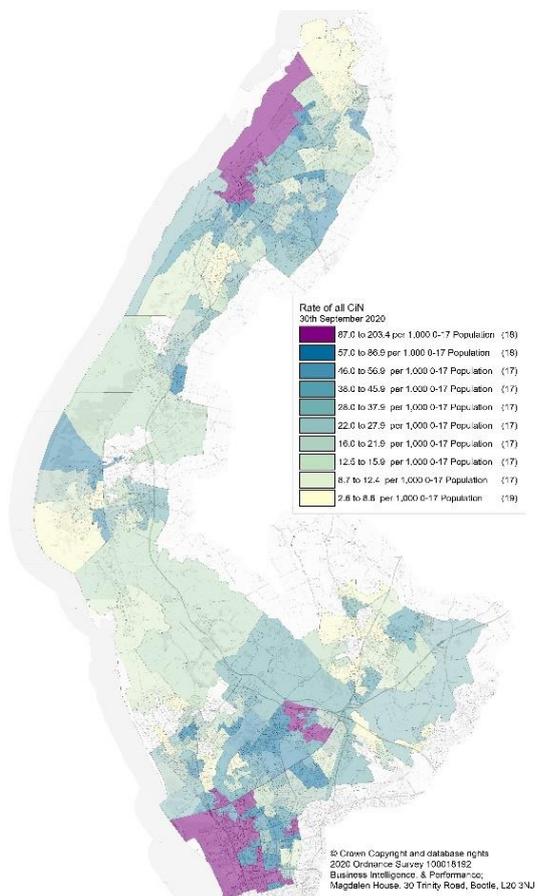
Child Protection Plan at 31st March Rate per 10,000



Factors Identified at the End of Assessment (2019/20)

Factors	Count	Percent
Alcohol / Drugs	1,724	55%
Abuse or Neglect	1,817	58%
Mental Health	1,753	56%
All Other	3,475	110%
Total Assessments	3,153	100%

Children in Need Sefton Lower Super Output Area



Child Exploitation

Child Exploitation (CE) is a form of child abuse. It is the manipulation and coercion of children and young people (CYP). Sefton discuss these children at the MACE (Multi Agency Child Exploitation) panel, which aims to reduce the harm posed to children from CE alongside safeguarding procedures.

During 2019/20 there were 178 CYP discussed at Sefton MACE. 59% child exploitation and 38% being child sexual exploitation. There were slightly more males than females (53% compared to 47%), with ages ranging from below 12 up to 17 (those aged 15 made up the greatest proportion at 24% at the last time of referral).

Education information was provided for 151 of the 157 individuals; 98 were in school, home school or Pupil Referral Units with the remaining 53 being deemed as NEET.

South Sefton wards (Church, Derby, Linacre and Litherland) made up over a quarter of all CYPs being discussed with a further 22% coming from three of the North Sefton wards (Cambridge, Dukes and Norwood). 9% were either from outside of Sefton or homeless.

45% of the referrals in 2019/20 were from Sefton Children’s Social Care with a further 27% being from Merseyside Police.

Sefton Turn Around / Troubled Families

The national Troubled Families programme (Sefton Turnaround) is a “targeted intervention for families with multiple problems, including crime, anti-social behaviour, truancy, unemployment, mental health problems and domestic abuse.”

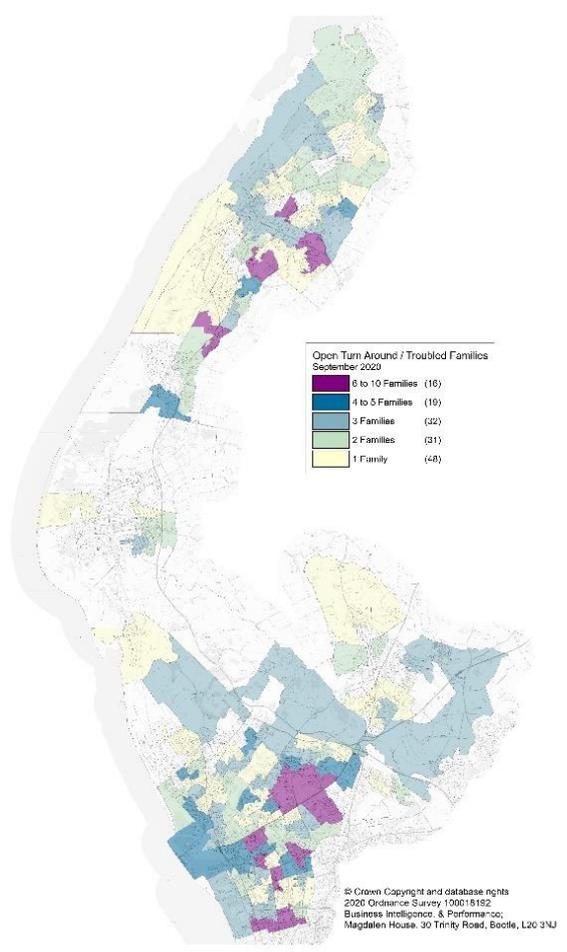
Phase 2 of the Sefton Turnaround Programme was completed on 31st March 2020. Between April 2015 and March 2020 there were 2,130 families with several complex needs turned around meaning Sefton reached the target set out by national government. For the 2,130 claims already made there were 4,720 criteria met. Except for child in need outcome (which is compulsory) health has been the most common outcome for the past four years.

Phase 3 (also known as ‘Extension Year’) commenced on 1st April 2020 and is due to end

on 31st March 2021. The target is to turn around 490 families. Sefton are currently working with 408 families, with 178 families turned around in April to September 2020.

32% of Sefton turnaround families resided in the four wards that make up the South Sefton locality, with Linacre and Derby being the highest of all Sefton wards. The nine wards of North Sefton made up 40% of the turnaround families with the remaining 28% being made up of the wards in Central Sefton.

Sefton Turn Around / Troubled Families by Sefton Lower Super Output Area



Sefton Youth Offending Team (YOT)

During 2019/20 there were a total of 179 incidents carried out by 157 young people that resulted in involvement from Sefton Youth Offending Team (YOT) for specific interventions to address their offending behaviour. Of that cohort 87% (137) were male and 13% (20) were female, most of the cohort were 17-year-old males 31% (48) and 16-year-old males 24% (37). Most

incidents were for anti-social behaviour with drugs involved 60% (107).

An in-depth Children and Young People – Youth Offending Needs Assessment, along with Community Safety Strategic Assessment 2019/20 has been completed by Sefton where further information can be found on this topic.

Not in Education, Employment or Training (NEET)

Studies suggest that being NEET for any period can affect a young person’s physical and mental health along with increasing the chances of unemployment, low wages or low quality of work throughout their adult life.

During 2019/20 there were 190 young people (aged 16 - 17) residing in Sefton deemed to be NEET, this equated to just under 4% of the population. The Borough rate is considerably lower than those seen nationally, regionally and across the LCR. Levels across Sefton have seen a year on year reduction across the past four years (an overall reduction of 35% can be seen between 2016/17 and 2019/20).

In August 2020, there were 87 young people aged 16, and 125 aged 17, with a further 175 aged 18 deemed as NEET in contact with Career Connect.

38% of the NEETs in contact with Career Connect in August 2020 resided in a central Sefton with 31% in south Sefton wards, and 30% across the north Sefton wards.

In August 2020, there were 512 young people with Special educational needs and disability (SEND) aged between 16 and 24 in contact with Career Connect. Of these 12% (61) were deemed to be NEET.

Those leaving care are three times more likely to be NEET than other young people.

As of the 31st October 2020, in Sefton 51% of young people aged 19 to 21 who have left care were NEET.

On 31st March 2019, Sefton had a higher rate than that seen regionally and nationally for those aged 19 to 21 who were NEET after leaving care. Rates in the Borough between 2019 and 2016 have seen fluctuations ranging from 44% to 55%.

Homelessness

Family Homelessness

Sefton has continually had a lower rate of family homelessness than that of Merseyside, the North West and England though levels have shown a slight increase over the past five years. In 2017/18 there were 26 homeless families within Sefton.

Homeless Young People

Like family homelessness, homelessness amongst young people aged between 16 and 24 is below the national, regional and county rates for the past five years. Levels have shown increases; a similar pattern can be seen across Merseyside and the North West. In 2017/18 there were 20 homeless young people.

Education

There are approximately 39,978 children and young people educated in 103 Sefton state-funded, maintained nursery, primary, secondary, sixth form, special schools and pupil referral units (PRUs). There are three Further Education establishments catering for 16-19yr old KS5 students; Hugh Baird College and Southport College and King George V College sixth form FE college in Southport.

Six of the seventy-two Primary schools have converted to an Academy.

Of the eighteen Secondary schools in Sefton, eleven have converted to Academy and one is a Free School. Ten of the Secondary schools also offer sixth form education.

All state-funded maintained Nursery schools in Sefton are rated by Ofsted as Good (67%) or Outstanding (33%).

Most of all state-funded maintained Primary schools in Sefton are rated by Ofsted as Good (81%) or Outstanding (12%).

Only three of the eighteen secondary schools are rated by Ofsted as outstanding (17%). A further six secondary schools are rated as Good (33%). Half of the state-funded maintained secondary schools in Sefton are rated by Ofsted as inadequate (11%) or requiring improvement (39%).

All state-funded maintained Special schools in Sefton are rated by Ofsted as Good (60%) or Outstanding (40%).

18% of children and young people under the age of 16 in Sefton are living in low income households.

18.5% of pupils attending maintained schools are eligible for Free School Meals.

5.4% of pupils educated in Sefton have English as an additional language.

14.3% of pupils educated in Sefton are recorded as SEN. Of these 8% of pupils have a formal SEND - EHC Plan in place and 11.5% of pupils are recorded as receiving SEN Support by schools.

Pupil Performance

Because of the 2020/21 Covid-19 pandemic there is no official 2020 education assessment and test data. However, looking at data for the previous academic years:

- EYFSP performance has lagged national average for the last three years, with a further decline in 2018/19 academic year.
- Phonics Year 1 performance is good, above national average for the last two academic years.
- Key Stage 1 – Reading performance has lagged national average for the last three years, but with an improvement in 2018/19 academic year.
- Key Stage 1 – Writing performance has lagged national average for the last three years, with a further decline in the 2018/19 academic year.
- Key Stage 1 – Mathematics performance is good; consistent with the national average for the last two years.
- Key Stage 2 - Reading, Writing & Maths (combined) performance has previously been above national average for 16/17 & 17/18 academic years but dropped below in 2018/19.
- Key Stage 4 Attainment 8 performance has previously been above national average for 16/17 & 17/18 academic years but dropped below in 2018/19.
- Key Stage 4 Progress 8 performance has lagged national average consistently for the

last three years, with a more noticeable decline in 2018/19 academic year.

- The percentage of children achieving a grade 5+ in English & Maths GCSE at Key Stage 4 has lagged national average consistently for the last three years, with a more noticeable decline in 2018/19 academic year.
- The percentage of children achieving a grade 4+ in English & Maths GCSE at Key Stage 4 has lagged national average consistently for the last three years, with a more noticeable decline in 2018/19 academic year.
- Despite downward trend in performance since 2015 which is in-line with England, Northwest and statistical neighbour statistics, achievement rates at level 2 by the age of 19 in Sefton have been above England and Northwest averages for the last 8 years. (Attainment at Level 2 equates to achievement of 5 or more GCSEs at grades A*-C or a Level 2 vocational qualification of equivalent size).
- Rates of achievement of a level 3 qualification by the age of 19 in Sefton have been positive over the last decade, but in 2016 they dropped below the England, Northwest and statistical neighbours and performance. (Attainment at Level 3 equates to achievement of 2 or more A-levels or equivalent size vocational qualifications).

An in-depth Children and Young People – Education Needs Assessment has been completed by Sefton where further information can be found on Sefton’s Education performance.

Absences

Primary Schools

Overall absences in Sefton primary schools has fluctuated across the past five years but has continually been above that seen nationally.

Similarly, 10% persistent absences in the Borough have been above the national and regional rates (yet continually lower than those of the LCR), with rates showing slight variations.

Secondary Schools

Like overall absences in primary schools, the rates in secondary schools have fluctuated over the past five years, with 2018/19 showing the highest

level. The Borough has been above the national rate for four of the past five years.

Overall, 10% persistent absence has reduced across the past five years, with Sefton being below England, the North West and LCR for the past two years.

Special Schools

Sefton has had a lower overall absence rate in special schools than England, the North West and LCR for the past four years (2015/16 to 2018/19). Levels have shown slight fluctuations throughout the past five-year period (similar to the three comparator areas).

Similarly, the 10% persistent absence in the Borough has continually been below the three comparator areas and has shown minimal changes over the time period.

Exclusions

Primary Schools

From 2014/15 to 2018/19 there have been minimal permanent exclusion in Sefton primary schools, with the Borough being continually lower than the three comparator areas.

Levels of fixed exclusions during this same period have shown reductions, with Sefton being lower than the national and regional rates throughout.

Secondary Schools

The rate of permanent exclusions in Sefton secondary schools has shown an overall increase across the five-year period, however in 2018/19 it is still below the comparison areas.

Unlike permanent exclusions, fixed exclusions in Sefton high schools have continually remained below the rates seen in England, the North West and across Liverpool City Region.

Special Schools

Sefton has had no permanent exclusions from special schools between 2014/15 and 2018/19.

The rate of fixed exclusions in Sefton special schools has shown an overall reduction across the past five years, however, in 2018/19 Sefton moved above the levels seen nationally (but is still lower than the North West and LCR).

School Improvement

In 2016, the White Paper Educational Excellence Everywhere (DfE, 2016) proposed that the role of authorities should be focussed on ensuring every child had a school place, ensuring the needs of vulnerable pupils were met, and acting as champions for all parents and families.

The White Paper promised that a role for LAs would be established within an education system in which all schools were academies. Since publication of the White Paper, the Government signalled that it would not bring forward legislation to compel all schools to become academies. For the time being, therefore, local education systems are likely to remain a mixture of different types of schools, with a range of different organisations, partnerships and leaders

However, pending clarity from the Government and definition of the future role of local authorities in the school system the local authority may need to consider forming or reviewing its local strategic partnership to facilitate and foster a shared, system-level vision for school improvement and in doing so develop an “effective local school improvement system”.

Benefit Claimants

Carer’s Allowance (CA)

There are approximately 800,000 young carers in the UK according to estimates produced by the Children’s Society. These children and young people (aged under 18) will often support and look after vulnerable adults or their siblings.

Young carers have a lot of responsibilities which may impact on their daily life affecting their mental and physical health, education and relationships with their peers. Currently there are no definitive figures on the number of children and young people who are providing care as the number is often under reported with many going undetected.

A proxy measure for the number of young carers is those claiming Carer’s Allowance (CA), however, not all CYP are eligible for this or willing to apply for it.

CA is a weekly payment of £67.25 paid to people who provide at least 35 hours care for another person. This benefit can be claimed by anybody aged 16 and over. In May 2020, there were 272 young people aged between 16 and 24 claiming carers allowance in the Borough, 30 of these were under the age of 18. Sefton has seen an overall increase in the rate of YP claiming CA across the past three years, with rates being considerably higher than those seen regionally and nationally.

Disability Living Allowance (DLA)

Disability Living Allowance (DLA), is a benefit for children who need extra care and support in their daily lives. DLA for those aged 16 and over is in the process of being replaced by Personal Independence Payment (PIP). Within this report the focus will be on those claiming DLA under 16.

The numbers claiming DLA can be used as an indicator of the number of children (aged under 16) living in Sefton who have their lives impacted on by a disability.

In May 2020, 2,644 children aged under 16 were claiming DLA across Sefton. A rate higher than that of the North West and England. There has been a year on year increase from 2018 to 2019 in levels of DLA claimant aged under 16 in the Borough as well as across the LCR, regionally and nationally.

Personal Independence Payment (PIP)

PIP is financial help for those aged 16 up to state pension age who have a long-term illness or disability.

Similar to DLA, the number of PIP claimants can be used as an indicator for residents of the Borough who are disabled or affected by long term illness.

1,329 Sefton residents aged between 16 and 24 were claiming PIP in July 2020. Over the past three years here has been a 28% increase in the number of claimants. The Borough has been above all three comparator areas throughout this period.

Universal Credit (UC)

Universal Credit (UC) was first started in April 2013, with the full roll out being completed in December 2018. UC is the replacement for six

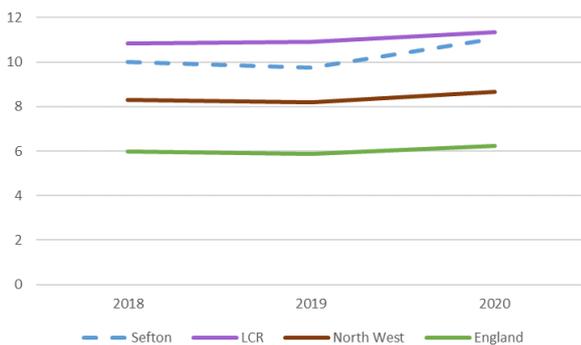
benefits. People receive UC who are either on a low income or out of work. UC can be claimed from the age of 16 up until pension age.

UC can be used as an indicator of deprivation, unemployment and economic disparity. The age range of those claiming UC discussed in this report are 16 to 24.

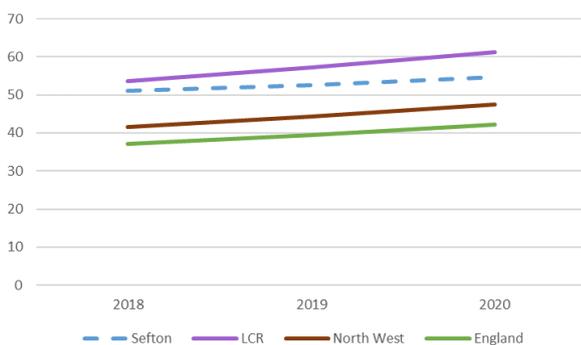
There has been a significant increase in the rate of UC claimants across the past three years in Sefton, LCR, the North West and in England. With the Borough continually being higher than the three comparator areas.

In September 2020, 4,381 young people (16 to 24-year olds) were claiming UC across Sefton. Of these 66% were unemployed, those aged 20 to 24 made up 79% of the UC claimants.

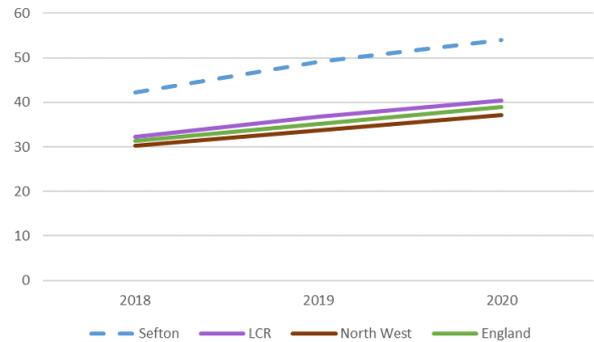
Carer’s Allowance Rates per 1,000 16 to 24-Year-Old Residents



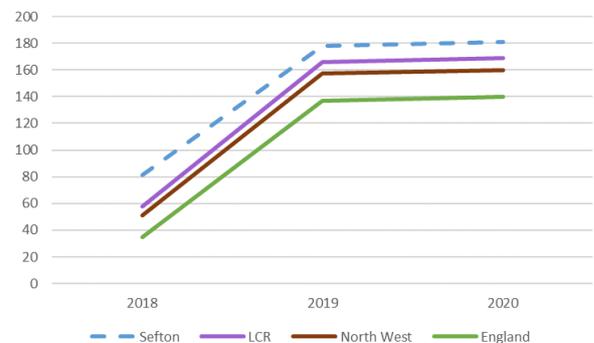
Disability Living Allowance Rates per 1,000 0 to 15-Year-Old Residents



Personal Independence Payment Rates per 1,000 16 to 24-Year-Old Residents



Universal Credit Rates per 1,000 16 to 24-Year-Old Residents



Deprivation

Deprivation may have considerable effects on children, including their physical and mental health (both as a child and later on in life), along with their school attendance, education attainment and future prospects.

Income Deprivation Affecting Children Index (IDACI)

The Income Deprivation Affecting Children Index (IDACI) measures the proportion of all children aged 0 to 15 living in income deprived families. It is a subset of the Income Deprivation domain (one of the seven domains making up the Index of Multiple Deprivation – IMD). The higher the IDACI score, the greater the deprivation in the area.

IMD and its seven domains are calculated by lower super output areas (LSOA), an average of this is used to create local authority (LA), regional and national figures.

In 2019, Sefton’s average IDACI score was 0.17, this was higher than the national level (but lower than scores seen regionally and in LCR). Sefton

average scores have reduced from 2004 to 2019, there has also been reduction in the three comparator areas.

31 of the 189 LSOAs in Sefton fall within the top 10% of deprived areas nationally this means that the children living in these areas are some of the most deprived in England. Of Sefton’s 31 most deprived LSOAs:

- five are in the top 1% of deprived areas nationally.
- a further 19 are in the top 5%.

In comparison, 13 LSOAs are in the 10% least deprived areas nationally:

- 5 are in the least affected 1%.

Children Living in Relative Low-Income Families (CLIRLIF)

Relative low-income is defined as a family whose equivalised income is below 60 per cent of contemporary median income. Gross income measure is Before Housing Costs (BHC) and includes contributions from earnings, state support and pensions.

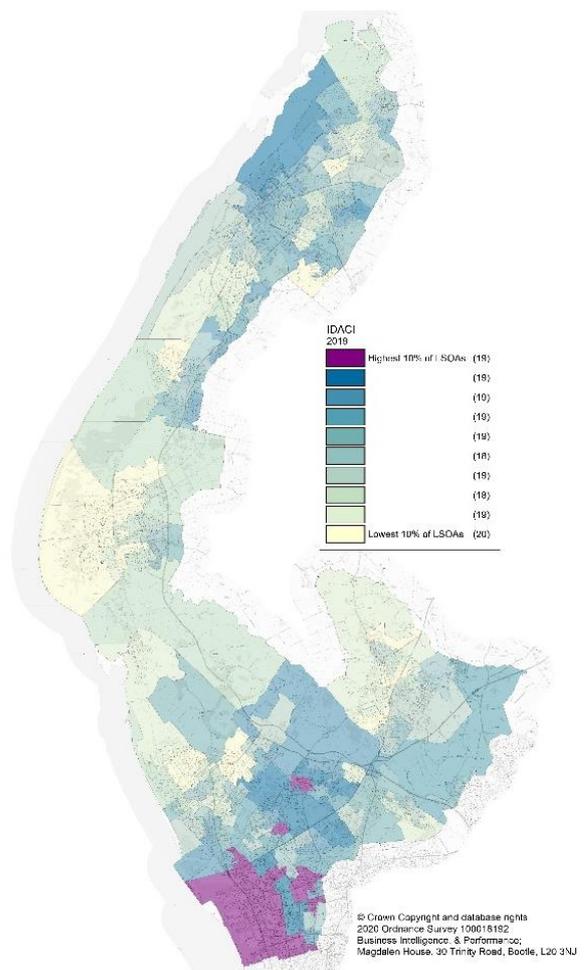
Across the past five years (2014/15 to 2018/19) there has been an increase in the levels of children living in relative low-income families (CLIRLIF) within Sefton, a pattern mirrored across the three comparator areas. The Borough has continually been higher than the national rate indicating Sefton has a greater level of child poverty than that seen nationally.

In 2018/19, there were 10,655 children living in relative low-income families equating to 18% of all 0-19-year olds residing in the Borough.

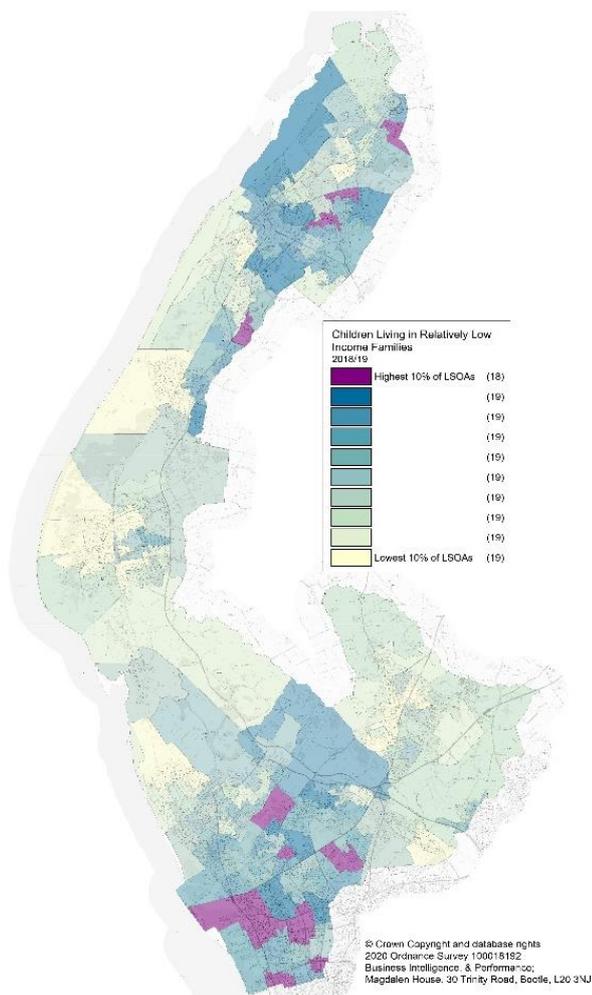
Foodbanks

During April 2019 and March 2020 there were 8,396 foodbank vouchers used in Sefton foodbanks by Sefton residents, there has been minimal change when compared to 2018/19. In total there were 7,384 Sefton children helped in 2019/20.

IDACI Sefton Lower Super Output Area



CLRLIF Sefton Lower Super Output Area



Data Gaps and Issues

When interpreting the data provided in this report a number of factors should be borne in mind:

- There is no local data available relating to the number of children and young people who are Lesbian, Gay, Bi-sexual, Transgender and Questioning with UK overall trends used to estimate figures.
- There is limited data available at a local level for oral health in children and young people as a whole.
- There is no local consultation or engagement viewpoints included within this report.
- Mental health in CYP is often under reported with sources being out of date or national trends being used locally.

- Local monitoring is affected by the timeliness of national data reporting, for example the public health self-harm rates mean that local activity cannot be monitored in ‘near real-time’ but must wait significant periods before results/outcomes are seen for national comparisons. Local intelligence suggests for example that recent increases in hospital admissions for some of these areas may be a result of recording changes in one Hospital Trust rather than reflecting wider societal issues.
- Health data is mostly on a LA basis, meaning in-depth analysis for small areas such as LSOA is not available, so targeted interventions cannot be easily planned.
- Hospital admission rates do not tell the whole story – issues with coding can mean that the picture is not clear or accurate and there may be many young people that do not present.
- The COVID pandemic will have an effect on the collection of data, with quality and scheduling being main issues.
- There is limited data available for the number of young carers as these young people often go undetected and are less likely to report their situation.

Conclusions

Although the current quantitative data requires supplementing with qualitative data from our communities (potentially through universal and targeted consultation activity) a few key areas for focus over the short to medium term are clear. This includes a need to understand and act on issues including:

- Health issues vary across Sefton with the rate of vaccinations showing declines for most types of immunisations offered. A number of hospital admission types have seen increases in levels and are above the national rates and attendances to A&E have also been increasing.
- The rate of overweight children in Reception year and Year 6 have shown overall increases in Sefton, with the Borough being higher than the rates seen nationally.
- Rates of CiN, CPP and CLA across Sefton have increased over the past five years with Sefton

having higher rate than those seen nationally. With those on CPP due to physical abuse and sexual abuse being considerably higher than the comparator areas.

- Overall absences in both primary and secondary schools in Sefton were above national levels in 2018/19, with persistent absences in primary schools being higher. However, exclusions from these settings are lower than that seen nationally.
- Despite a lower educational performance at the EYFSP stage and a drop in KS2 performance in the last measured academic year, children's progress and attainment at KS4 remains the most significant area for redress and determining the success factors for narrowing the progress and achievement gap in Sefton, particularly between disadvantaged pupils and their peers is a challenge facing Sefton Schools and the local authority.
- Young people claiming benefits in the Borough is on the rise and higher than rates seen nationally.
- Though the IDACI rate has decreased both in Sefton and England, it is estimated that the number of children living in relative low-income families has shown year on year increases, with Sefton now having 18% of those aged 0 to 19 living in relative low-income families.
- Review the reasons for Sefton's high level of A&E attendances and target the main outcomes.
- Review reasons why vaccination uptake has reduced, along with providing more information to parents on the benefits of vaccines.
- There should be more local research into causes of the increase in the numbers of vulnerable children including its association with wider environmental and social factors such as poverty, gangs, substance misuse, etc.
- Continue to promote to parents and CYP the importance of good punctuality and attendance at school for future prospects.
- Understanding the reasons behind poor attendance on an individual level and working with the individual to support them, their families and school to identify, the problems and allay the situations.
- Define the local authorities' role in supporting local school improvement systems and enabling school improvement, particularly progress and attainment at KS4.
- Maintain close working relationships with Careers Connect and Sefton at Work to help reduce the number of young people claiming Universal Credit by providing them with job or training opportunities.

Recommendations

The following have been identified within the main body of this report and highlighted as areas of opportunity for future partnership work.

- Consultation with a wide range of children young people to understand the topics and issues they feel have most impact on them.
- In-depth analysis is needed into Sefton's levels of smoking in pregnancy, with targeted outreach programs to help expectant parents.
- Continue working with new mums to encourage and promote breastfeeding and its benefits.
- Publicise the need for good oral health and the impacts this has on later life.

Supporting Information & Context

Children and Young People - Mental Health and Emotional Wellbeing Assessment

Children and Young People – Youth Offending Needs Assessment

Children and Young People – Education Needs Assessment

Children and Young People – Overview Strategic Assessment Appendix

JSNA Webpage

[https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/joint-strategic-needs-assessment-\(jsna\).aspx](https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/joint-strategic-needs-assessment-(jsna).aspx)

Population Projections

<https://www.sefton.gov.uk/media/1436091/sefton-population-projections-v3.pdf>

Review of Poverty in Sefton

https://www.sefton.gov.uk/media/1405220/Welfare_Reform_and_Anti-Poverty_v3.pdf

Sefton Local Plan

<https://www.sefton.gov.uk/localplan>

Ward profiles on Sefton's website

<https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/borough-ward-profiles.aspx>

Glossary of Terms / Acronyms

A&E Accident and Emergency

CA Carer's Allowance

CiN Child in Need

CLA Child Looked After

CLIRLIF Children Living in Relative Low-Income Families

CP Child Protection

CSE Child Sexual Exploitation

CYP Children and Young People

DLA Disability Living Allowance

EH Early help

HA Hospital Admissions

IDACI Income Deprivation Affecting Children Index

IMD Index of Multiple Deprivation

JSNA Joint Strategic Needs Assessment

KSI Killed or Seriously Injured

LA Local Authority

LAC Looked After Children

LARC Long-acting reversible contraceptive

LCR Liverpool City Region

LGBT&Q Lesbian, Gay, Bisexual, Transgender and Questioning

LSOA Lower Super Output Area

MACE Multi Agency Child Exploitation

MASH Multi agency safeguarding hub

NCD Noncommunicable disease

NCMP National Child Measurement Programme

NEET Not in Education Employment or Training

ONS Office for National Statistics

PHE Public Health England

PIP Personal Independence Payment

Q1 Quarter 1

RTA Road Traffic Accident

SEND Special Education Needs and Disabilities

SIDS Sudden infant death sudden infant death

SRH Sexual and Reproductive Health

UC Universal Credit

YOT Youth Offending Team

Sources

Demographics

ONS Mid-Year Population Estimates 2019

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland>

ONS Broad Ethnic Groups 2019

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/adhocs/008781populationdenominatorsbybroadethnicgroupandforwhitebritishlocalauthoritiesinenglandandwales2011to2017>

ONS Sexual Orientation, UK

<https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/datasets/sexualidentityuk>

Health

Births

Sefton MBC - Business Intelligence (Civil Registration Extract (Births) -NHS Digital)

General fertility

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/92266/age/179/sex/2/cid/4/tbm/1>

Under 18 Conceptions

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/20401/age/173/sex/2/cid/4/tbm/1>

Teen Pregnancy Information

https://www.local.gov.uk/sites/default/files/documents/15.7%20Teenage%20pregnancy_09.pdf

Teen Mothers

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/90811/age/244/sex/2/cid/4/tbm/1>

Smoking during pregnancy information

<https://www.nhs.uk/conditions/pregnancy-and-baby/smoking-pregnant/>

Smoking in early pregnancy

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/93579/age/-1/sex/2/cid/4/tbm/1>

Smoking at time of delivery

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/93085/age/1/sex/2/cid/4/tbm/1>

Breastfeeding information

<https://www.nhs.uk/conditions/pregnancy-and-baby/benefits-breastfeeding/>

Breastfeeding prevalence at 6-8 weeks after birth

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133222/pat/6/par/E12000002/ati/302/are/E08000014/iid/92517/age/170/sex/4/cid/4/tbm/1>

Infant Mortality

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133228/pat/6/par/E12000002/ati/302/are/E08000014/iid/92196/age/2/sex/4/cid/4/tbm/1>

Child Mortality

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133228/pat/6/par/E12000002/ati/302/are/E08000014/iid/90801/age/177/sex/4/cid/4/tbm/1>

Vaccination information

<https://www.nhs.uk/conditions/vaccinations/why-vaccination-is-safe-and-important/>

Vaccination take up

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/1/qid/1938133237>

Childhood Obesity information

https://www.who.int/dietphysicalactivity/childhood_consequences/en/

NCMP – Yr R

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133258/pat/6/par/E12000002/ati/302/are/E08000014/iid/20601/age/200/sex/4/cid/4/tbm/1>

NCMP – Yr 6

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133258/pat/6/par/E12000002/ati/302/are/E08000014/iid/20602/age/201/sex/4/cid/4/tbm/1>

Percentage of physically active children and young people

<https://fingertips.phe.org.uk/child-health-profiles#page/4/qid/1938133224/pat/6/ati/302/are/E08000014/iid/93570/age/246/sex/4/cid/4/tbm/1/page-options/car-do-0>

Child Dental Health

<https://publichealthmatters.blog.gov.uk/2017/06/14/health-matters-child-dental-health/>

5-year-old dental decay / decayed, missing or filled teeth

<https://fingertips.phe.org.uk/child-health-profiles#page/4/qid/1938133228/pat/6/par/E12000002/ati/302/are/E08000014/iid/93563/age/34/sex/4/cid/4/tbm/1/page-options/car-do-0>

Mental Health Importance Information

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/138253/dh_124058.pdf

HA due to mental health

<https://fingertips.phe.org.uk/child-health-profiles#page/4/qid/1938133228/pat/6/par/E12000002/ati/302/are/E08000014/iid/90812/age/173/sex/4/cid/4/tbm/1/page-options/car-do-0>

HA – Self Harm / Emergency / alcohol-specific conditions in the under 18s / substance misuse / asthma / diabetes / epilepsy

<https://fingertips.phe.org.uk/child-health-profiles#page/4/qid/1938133230/pat/126/par/E47000004/ati/302/are/E08000014/iid/90808/age/156/sex/4/cid/4/tbm/1/page-options/car-do-0>

Emergency Hospital Admissions Information

https://www.health.org.uk/sites/default/files/Briefing_Emergency%20admissions_web_final.pdf

Alcohol and Drug Misuse information

https://www.health.org.uk/sites/default/files/Briefing_Emergency%20admissions_web_final.pdf

A&E Attendances

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133230/pat/6/par/E12000002/ati/302/are/E08000014/iid/90550/age/173/sex/4/cid/4/tbm/1>

RTA Information

<https://stateofchildhealth.rcpch.ac.uk/evidence/injury-prevention/road-traffic-accidents/#ref-2>

RTA Casualties – Serious / Slight / Fatal / KSI / Emergency Admissions – Pedal Cyclists / Pedestrians / Motorcyclists / Car Occupants / Children KSI on England’s Roads

<https://fingertips.phe.org.uk/child-health-profiles#page/0/qid/1938133236/pat/126/par/E47000004/ati/302/are/E08000014/iid/92744/age/248/sex/4/cid/4/tbm/1/page-options/car-do-0>

Chlamydia Detection Rate (Aged 15 to 24)

<https://fingertips.phe.org.uk/profile/sexualhealth/data#page/4/qid/8000057/pat/6/par/E12000002/ati/202/are/E08000014/iid/90776/age/156/sex/4/cid/4/tbm/1/page-options/car-do-0>

Under 25s - attending specialist contraceptive services / choosing LARC excluding injections at SRH Services / Repeat Abortions

<https://fingertips.phe.org.uk/sexualhealth#page/1/qid/8000059/pat/6/ati/202/are/E08000014/iid/90754/age/1/sex/2/cid/4/tbm/1>

Vulnerable Children**Early Help information**

<https://www.sefton.gov.uk/social-care/children-and-young-people/early-help/what-is-early-help.aspx>

Early Help Episodes

Sefton MBC - Business Intelligence

Children Social Care information

<https://www.instituteforgovernment.org.uk/publication/performance-tracker-2019/children-social-care>

Children Social Care – CiN / CPP

Sefton MBC - Business Intelligence

<https://www.gov.uk/government/collections/statistics-children-in-need>

Children Social Care – CLA / Missing CLA

Sefton MBC - Business Intelligence

<https://www.gov.uk/government/collections/statistics-looked-after-children>

Child Exploitation information

<https://www.seftonlscb.org.uk/lscb/child-sexual-exploitation/child-exploitation-pan-merseyside-multi-agency-ce-protocol>

Child Exploitation

Sefton MBC - MASH Team

Turnaround information

<http://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7585>

Sefton Turnaround

Sefton MBC - Business Intelligence

YOT

Sefton MBC - Business Intelligence (Ministry of Justice – 102 Final YOT Data Summary England and Wales April 2019 to March 2020)

NEET information

<https://researchbriefings.files.parliament.uk/documents/SN06705/SN06705.pdf>

NEET

Career Connect

<https://www.gov.uk/government/publications/neet-and-participation-local-authority-figures>

Care Leavers NEET information

<https://www.nuffieldfoundation.org/project/care-leavers-transition-into-the-labour-market-in-england>

Family Homelessness

<https://fingertips.phe.org.uk/cypmh#page/4/qid/1938133095/pat/6/par/E12000002/ati/102/are/E08000014/iid/90819/age/1/sex/4/cid/4/tbm/1/page-options/car-do-0>

Homeless YP

<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/4/qid/1938133238/pat/6/par/E12000002/ati/302/are/E08000014/iid/92695/age/264/sex/4/cid/4/tbm/1/page-options/car-do-0>

Education**Overall / Persistent Absences – Primary / Secondary / Special schools**

<https://www.gov.uk/government/statistics/pupil-absence-in-schools-in-england-2018-to-2019>

Permanent / Fixed Exclusions – Primary / Secondary / Special schools

<https://www.gov.uk/government/collections/statistics-exclusions>

Benefits**Carer’s Allowance information**

https://www.childrenssociety.org.uk/what-we-do/our-work/supporting-young-carers?qclid=EAlalQobChMlxLyaodaL7QIVHawGAB21vQkrEAAYASAAEqL4xvD_BwE

<https://www.gov.uk/carers-allowance>

Disability Living Allowance information

<https://www.gov.uk/disability-living-allowance-children>

Personal Independence

<https://www.gov.uk/pip>

Universal Credits

<https://www.gov.uk/universal-credit/eligibility>

Benefit Claimants

Sefton MBC - Business Intelligence (DWP - Statxplorer)

Deprivation

Deprivation information

<https://www.childandfamilyblog.com/early-childhood-development/play-deprivation-early-child-development/>

<https://dera.ioe.ac.uk/9431/1/DCSF-RTP-09-01.pdf>

IDACI

<https://opendatacommunities.org/def/concept/general-concepts/imd/idaci>

CLRLI

Sefton MBC - Business Intelligence (DWP - Statxplorer)

Foodbanks

St Leonards and Compassion Acts Foodbanks