



Bromley Clinical Commissioning Group



THE LONDON BOROUGH
www.bromley.gov.uk

BROMLEY JOINT STRATEGIC NEEDS ASSESSMENT

2018

Children and Young People Executive Summary

For more information visit www.bromley.gov.uk/JSNA or contact
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Introduction

This report describes the main issues affecting the health and wellbeing of the population of Bromley. Its purpose is to provide the basis for an understanding of the current and future health and wellbeing needs of the population over both the short term (three to five years), and the longer term future (five to ten years) to inform strategic planning, commissioning of services and interventions that will achieve better health and wellbeing outcomes and reduce inequalities.

The JSNA helps organisations in Bromley to fulfil the Equality Duty by considering the needs of all individuals in Bromley.

Much of the information in the JSNA is based on information from routine data sources and from health profiles which allow us to benchmark our position in Bromley against London and England.

This report is an update of the “Child Wellbeing Needs Assessment” completed in September 2016. It follows the same structure:

1. Demography
2. Risk Factors
3. Emerging Needs
4. Established Needs

Section 1 of this report will describe the population of children and young people aged 0-18 in Bromley.

This report will then describe how prevention could affect the wellbeing of children and young people in Bromley. Prevention can be primary, secondary or tertiary.

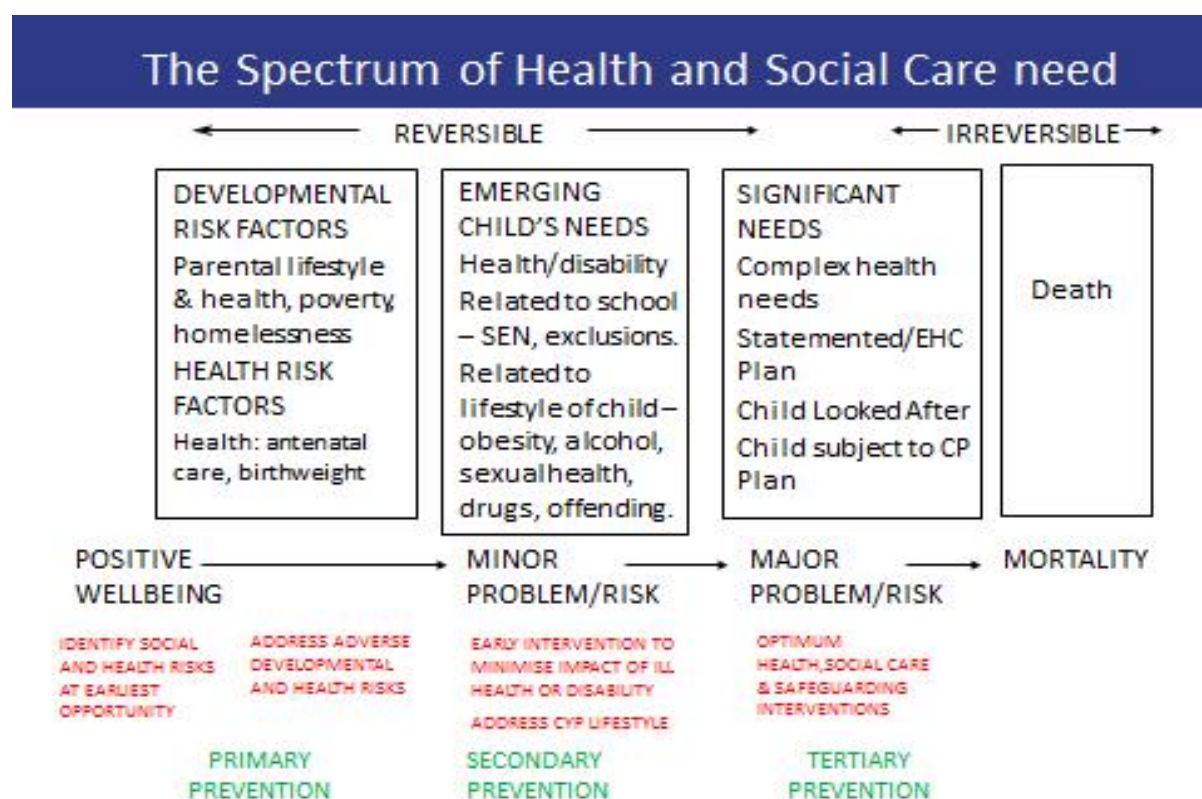
Primary prevention aims to prevent a problem before it occurs by identifying families within the population who are more likely to suffer poor outcomes for their children. Section 2 uses evidence to identify risk factors in families in Bromley.

Secondary prevention aims to identify a potential or emerging problem in a child or young person at an early stage in order to minimise the impact of that problem. Section 3 reviews what we know about emerging health, education and social care needs of children and young people in Bromley. Children with emerging needs include those receiving support from Children and Family Centres or those identified as having Special Educational Needs but who do not have an EHC Plan.

Tertiary prevention aims to minimise the impact of a known need. Section 4 reviews information about children and young people with established needs, including those with an Individual Health Care Plan in school, those children with EHC Plans, and Looked After Children and those on a Child Protection Plan.

The spectrum of need and prevention is summarised in the following figure.

Figure 1.



This Children and Young People's JSNA contains new sections on:

- Youth Violence
- Homeless young people
- Parental worklessness
- Long term health conditions of children and young people

Executive Summary

Section 1: Demography

- The main growth in the child population is now the 11-18 age group.
- Net migration into Bromley schools has reduced.
- The Black African population is the fastest growing BAME group.
- Under-recording of the Gypsy Traveller population makes pro-actively addressing the needs of this population difficult.

Section 2: Risk factors associated with poorer outcomes in children

Health and lifestyle issues of parents

- Life expectancy is lower in more deprived wards, especially for men.
- More adults are reporting poor health in the Cray Valley and Mottingham and Chislehurst North.
- Teenage pregnancy rates are still falling in Bromley. A high proportion of these conceptions result in a termination of pregnancy compared to national rates.
- Teenage pregnancy rates are highest in areas of greatest deprivation in Bromley
- Overall low levels of recorded drug use in Bromley mask high rates of opiate and/or crack use in young people aged 15-24.
- Bromley has a high proportion of drug users with a co-occurring mental health condition.
- It is estimated that nearly two thirds of drug users in Bromley are not known to drug treatment services.
- Alcohol consumption varies across the borough, with the highest rates of harmful alcohol consumption in Hayes and Coney Hall, West Wickham, and Farnborough and Crofton, and the lowest rates in Darwin and Crystal Palace.

Mental health of parents

- More than 20% of pregnant women in Bromley reported a history of mental ill health at booking for pregnancy care
- GP data shows that recorded depression in adults is the third highest in London and the rate is increasing.

Social issues of parents

- Referrals to Domestic Abuse advocacy services are increasing. 82% are women, many of whom are of child-bearing age.
- Poverty is low in Bromley, but the proportion of under 16s living in low income families in Bromley is rising.

- Children living in households with unemployment and financial issues are more likely to live in Mottingham & Chislehurst North and the Cray Valley.
- There were more than 1400 children living in temporary accommodation in Bromley in 2016/17 and this number is likely to rise.

Protective factors

- Breastfeeding and immunisation rates in Bromley are reducing, which in turn reduces the protective effect of these measures on child health.
- Opportunities for young children to benefit from funded early education appear to be reducing for 3 & 4 year olds in Bromley relative to statistical neighbours and national rates.

Section 3: Emerging needs in children and young people in Bromley

Emerging health and lifestyle issues

- Smoking rates in young people in Bromley are higher than London and national rates and areas of highest deprivation are disproportionately affected.
- There is overall a relatively low rate of new STIs in Bromley. Underlying this picture, rates of chlamydia infection detection are falling and rates of syphilis are rising.
- There is a high rate of attendance at sexual health clinics in Bromley, although some evidence that not all young people know how to access sexual health clinics.
- This data appears to show a significant drug problem in young people in Bromley and to some extent an alcohol problem as well. Overall the numbers accessing drug services are reducing, although referrals from Health and Children and Family Centres are increasing.
- Obesity in children is a significant concern in terms of their health and well-being. In reception year and year 6 in Bromley primary schools there are 145 children who are known to be severely obese as well as 860 obese children.
- There are marked differences in rates of obesity within Bromley. Children in the north east and north west of the borough and Mottingham have the highest rates of obesity.
- Speech and language disorders are typically higher in more deprived populations, so low levels of need would be expected in Bromley. Early findings from the new Ages and Stages Questionnaire at age 2½ appear to show good development in communication at this age. However by school age Speech Language and Communication Needs (SLCN) are the commonest form of SEND, and rates are much higher than statistical neighbours. This requires further clarification.

Emerging mental health issues

- Demand for early intervention services are increasing each year, the majority because of relationship, school or family issues. Anxiety and mood problems are mentioned in more than half of the cases. Of particular concern are the hundreds of children and young people presenting with self harm, suicidal thoughts, or even a history of suicide attempts (66 young people between April and December 2017).

Emerging education issues

- The increasing number of children with SEMH correlates with the increasing number of attendances at the Wellbeing Service. Both support wider evidence on increasing levels of emotional difficulties in children and young people in Bromley. It is also notable that Severe Learning Difficulties and Speech Language and Communication needs are relatively high in Bromley.
- This number of NEET is reducing in size, but the over-representation of young people with SEND in this group may indicate inadequate support for some young people with SEND.
- Exclusions, both permanent and fixed period exclusions, are lower for drug and alcohol related reasons than might be expected from other data on drug and alcohol use in Bromley's young people.
- The number of Electively Home Educated (EHE) children is increasing. Vulnerability and safeguarding concerns in EHE children and young people may not be identified. This is of particular concern for young people who may be EHE for longer periods of time.
- Gypsy Traveller young people are over-represented in the EHE group.

Emerging social issues

- Additional support needs in children have been identified in Biggin Hill, Cray Valley West, Plaistow and Sundridge, and Mottingham and Chislehurst North.
- The proportion of Children in Need with an EHC Plan is relatively high in Bromley.
- Referrals to the YOS increased by 10% this year. The majority of referrals are young men involved in violence, motor offences or drugs. The small proportion of young women are referred for offences of violence. There is an over-representation of black young people.
- There are a growing number of young people in Bromley with suspected gang affiliation. Most are young black men living in the Penge and Anerley area.
- CSE in Bromley appears to be mainly peer-on-peer with some gang-related association. Hotspot locations of CSE in the borough have been identified. Risk factors for being CSE include being female, being Looked After, going missing, and attending a PRU.
- There appears to be a mismatch between the perception of crime and violence and the reality for many young people in Bromley. This requires further work to gather local data and understand the concerns of young people in Bromley.

- There were 125 young people aged 16 to 21 accepted as homeless by Bromley in 2016/17, a 42% rise on the previous year.

Section 4: Children and young people with established needs

Children with complex or long term health needs

- Children with diabetes in Bromley are being admitted more than those in London or England and this rate is increasing. Blood sugar control in children in Bromley is poorer than in London or England.
- Although nationally standardised outcomes of care for children with asthma (hospital admissions) indicate good care, some processes to prevent future admissions still appear quite poor.
- Based on limited outcome data the outcomes for children with epilepsy in Bromley are good. New national standards on care of childhood epilepsy have been published and more detail on the management of children with epilepsy should be available soon.
- The Learning Disability Profiles show a year on year increase in the number of children with Autism known to schools, although not all of those children have been formally assessed as being on the Autistic Spectrum.

Children with an Education Health and Care Plan

- Rates of severe learning difficulties and speech, language and communication needs are higher in Bromley than in statistical neighbours.
- Rates of Social, emotional and mental health difficulties and ASD are rising in Bromley.

Children at risk of significant harm

- Bromley has a lower rate of children subject to a Child Protection Plan than national rates or statistical neighbours.
- Bromley has a relatively low rate of Children Looked After (CLA) compared to London and national rates
- Coverage of routine health protection of CLA has reduced in 2017/18, especially immunisations
- The proportion of CLA with SEND is higher in Bromley than comparators

Deaths in childhood

- Death rates in Bromley are low, although infant mortality has risen recently from a very low level.