

People's Board 21 March 2024

Report Title	Family Hubs Maternity & Early Years JSNA
Cabinet Portfolio	Cabinet Member for Wellbeing, Communities and Culture
Cabinet Member	Councillor Anthony Burns
Exempt Report	No
Reason for Exemption	N/A
Key Decision	No
Public Notice issued	N/A
Wards Affected	All
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	Ensure children and young people have a positive start in life.	X
	Promote good health, independence, and care across our communities.	
	Create safe and strong communities and neighbourhoods for all.	х
Borough Priorities	Support a strong, thriving, inclusive and well-connected local economy.	
THORICS	Create green and vibrant places that reflect our heritage and culture.	
	Be a responsible Council.	Х

1. Summary

- 1.1 This cover report is for the St Helens Joint Strategic Needs Assessment (JSNA) for Family Hubs Maternity and Early Years (0-5 years), produced by the Public Health Intelligence Team using both published and local data.
- 1.2 St Helens was one of the 75 Local Authorities to received funding to establish Family Hubs. It was agreed with the Department of Education (DfE) that to help shape our offer, we would complete this JSNA in accordance with their quidelines.
- 1.3 The needs assessment brings together a range of data which is themed around the following key areas:
 - Demographic Profile
 - Maternity Need and Births
 - Staying Healthy
 - Early Education and Development
 - Special Educational Needs and Disabilities (SEND)
 - Parental Lifestyle

1.4 Demographic Profile

St Helens faces particular challenges in relation to deprivation and is ranked as the 26th most deprived local authority in England, with 43% of the population living in the 20% most deprived areas in the country. Within St Helens deprivation is widespread with particularly high levels across the south and east of the borough.

The 2021 Census reveals that there are 11,680 children aged 0-5 that live in St Helens, and this equates to 6.4% of the total population. Of those children, over half living in the 20% most deprived areas in England. The early years population varies considerably across St Helens with Parr having the highest proportion of the population aged 0-5 years at 9.6%.

St Helens has a much smaller black and ethnic minority (BME) early years demography compared to England and the North West at 2.4%, this compares to 27.9% in England and 23.9% in the North West.

1.5 Maternity Need and Births

There were 1,838 live births in St Helens in 2022, and this is a 1.2% increase from the previous year. The number of births in St Helens over the last 3 years has remained similar. The birth rate in St. Helens is 9.9 live births per 1,000 population, however there is considerable variation within the borough where the highest rate is seen in Peasley Cross and Fingerpost at 15.8, followed by Sutton South East and Parr.

Over the last five years the age profile of mothers giving birth in St Helens has changed, whereby the rate of mothers aged 30-34 and 35-39 years has increased, whilst the rate of 15-19 and 20-24 year old mothers has decreased.

Fertility rates in St Helens over the last four years have remained stable since 2019 and are similar to the England and North West rates, however the general fertility rate in St Helens is higher in areas of deprivation.

Smoking in pregnancy has been declining year on year and is now at an all time low but remains higher than the national average and is the third highest rate in the North West.

The rate of premature birth, and proportion of low and very low birth weight babies are higher in areas of deprivation and there are significant disparities across the borough. The proportion of babies whose first feed is breastmilk is considerably lower in St Helens than England (48.3% compared to 72.3%) and at 6-8 weeks the prevalence of breastfed babies varies from 19.4% in Sutton South East to 44.4% in Windle.

1.6 Staying Healthy

Immunisations are one of the best ways to protect a child against a range of diseases. St Helens has higher immunisation coverage rates compared to the North West and England across all age groups (1 year, 2 year and 5 year).

Oral health among 5 year olds in St Helens is poor compared to nationally, with 31.2% having visual tooth decay compared to 23.7% in England.

Obesity among reception aged children in St Helens is high compared to nationally and regionally with higher prevalence's observed in areas of higher deprivation such as Town Centre and Parr.

A&E attendances reduced during the Covid-19 pandemic and since then the number of attendances has risen to above pre-pandemic levels. In the year 2022-23 there was a total of 11,410 A&E attendances among 0-5 year olds, with highest rates coming from Peasley Cross and Fingerpost, Town Centre and Rainhill and areas of higher deprivation. Fever was the most common reason for A&E attendance.

For emergency hospital admissions, the most common reason was due to respiratory system diseases accounting for almost a third of emergency admissions.

1.7 Early Education

A child's development is crucial in the early years and the home learning environment is pivotal to school attainment and a positive education. Data suggests that children who are living in the deprived areas of St Helens need extra support with learning and attainment in early education.

Overall, for St Helens the percentage of 2-2 ½ year olds that meet or are above the expected level of development is 85% and higher than nationally and regionally. However, the wards of Parr and Blackbrook have a lower proportion of children at or above the expected level than the national average. Girls are more likely to be at the expected level of development compared to boys.

Within St Helens 82.6% of eligible 2-year-olds are taking 15 hours for early years provision and a 94.9% take up for 3–4-year-olds.

1.8 Special Education Needs and Disabilities (SEND)

Children with SEND, and their parents and carers, face unique challenges and barriers in having their needs met. In 2021-22 there were 535 0-5 year olds receiving SEND support in St Helens (a percentage of 9.9%). A higher proportion of children living in the most deprived areas require SEND support, and speech and language is the most common type of SEND support in St Helens.

There are 56 children aged 0-5 with SEND that receive support for autism spectrum disorder (ASD), or 1.1% of all 0-5 children in St Helens.

The percentage of children registered for the 15-hour and 30-hour entitlements who have SEND has increased across all age groups between 2020 and 2023.

1.9 Parental Lifestyle

Parental lifestyle factors such as domestic violence, smoking, alcohol and substance misuse, and mental health can compromise their ability to care for children and therefore rendering them susceptible to neglect and abuse.

Health Visitor data show that almost a quarter of mothers from Parr smoke, and this is also high in the Town Centre. Mothers living in the most deprived areas also have a significantly higher rate of admission for perinatal mental health.

There is a higher percentage of adults entering treatment for alcohol and nonopiate drugs that live with children in St Helens compared to England.

Domestic abuse incidents where children were exposed to the abuse has increased year on year and almost half of Child Protection plans in St Helens have a primary category of neglect.

Parental conflict can adversely affect a child's mental health and wider development and data show that the wards of Blackbrook, Haydock and Parr have the highest rate of contacts in Childrens Services for parental conflict.

2. Recommendation for Decision

The People's Board is recommended to:

- 1) Note the report and the current situation in St Helens with regards to key indicators of health related to maternity and early years
- 2) Use the needs assessment to inform future policy and action on improving children's health in St. Helens

3. Purpose of this report

3.1 The purpose of this report is to present the JSNA on Maternity and Early Years in St Helens. Health and Wellbeing boards assess the health and wellbeing needs of the population and regularly publish needs assessments. A Family Hubs Childrens JSNA is one of the needs assessments selected for 2023-24 utilising the structure recommended by the Department of Education.

4. Background / Reason for the recommendations

- 4.1 The aim of the JSNA is to present an in-depth analysis of the local picture on maternal and early years health status and provide an overview of need in St Helens, to illustrate trends and inequalities within the borough for young children and their families, and to set out the key recommendations for the Family Hubs offer.
- 4.2 The early years (conception to age 5 years) are a period of rapid growth and development. Life experience during this time lays the foundations for a child's cognitive, social, emotional, physical and behavioural health and development for the rest of their life. Positive early experiences are vital to make sure children are ready to learn, ready for school and have good life chances. Support must be made available early, including support for parents in the "1001 Critical Days" (from conception to age two years) when the foundations for development are laid.
- 4.3 This is influenced by background demographic and socioeconomic factors including educational status and economic prosperity. Children during the early years of life should be provided with the physical, intellectual and social skills necessary to develop into healthy and resilient children and adults. A mother's health is also vital, as well as lifestyle choices leading up to and during pregnancy.
- 4.4 Families with a new baby can face many different challenges and these are often closely connected and holistic care is required to fully meet a family's needs. For example, difficulties with breastfeeding can sometimes be caused by, or result in, perinatal mental health challenges and struggles with attachment and bonding. For parents to provide an environment in which babies can thrive, their own mental health and wellbeing is paramount.

- 4.5 A Family Hub brings together several different services together in a 'one stop shop' to make it easier to access the help an individual or family needs. They are a place-based way of joining up locally in the planning and delivery of family services. The aim is to bring services together to improve access, improve the connections between families, professionals, services and providers and put relationships at the heart of family support.
- 4.6 This needs assessment helps understand needs within the St Helens Borough. Data from a range of sources have been utilised and are referenced throughout this document, using both nationally published available data and local St. Helens specific data. Where possible, ward level and deprivation analysis has been carried out using ONS population data. The borough's priorities and strategies have also been considered within this needs assessment and are referenced throughout.

5. Consideration of Alternatives

5.1 N/A

6. Conclusions

- 6.1 The Maternity and Early Years JSNA sought to bring together the available data on children aged 0-5 years in St Helens and their parents and carers, to create a picture of the challenges and issues that are facing our young families.
- 6.2 Immunisation coverage rates in St Helens are good and continue to improve following the COVID-19 pandemic. However, in relation to oral health there are higher levels of visible tooth decay for children in St Helens compared to nationally and therefore consideration for easy access to dental care is important. There are also potential opportunities for parental education around preventing accidents and injuries in the home, given that hospital admissions for injury, poisoning and external causes feature as a top 10 reason for admission. Work is already underway in relation to preventative measures for those children with asthma and respiratory conditions through innovative community targeted interventions.
- 6.3 Hospital admissions relating to perinatal mental health vary considerably across the borough with the wards of Parr, Town Centre and Peasley Cross and Fingerpost having statistically significantly higher rates than the St Helens average. Therefore, services need to be targeted around these areas as well as providing a universal offer that is easily accessible.
- 6.4 Whilst St Helens has a good level of engagement for early years provision, this is an area which we still need to continue to focus us, to support families to understand the positive impact that early education can have for them and their children.

- 6.5 With regards to SEND, the data highlights increased identification of SEND needs within the early years' population. Further analysis needs to take place in respect of ward level differences and how this could be responded to, to best meet the needs of the identified children. Speech, Language and Communication is the most common type of SEND support and this is a priority area for Family Hubs.
- 6.6 It is significant to see that almost half of Child in Need or Child Protection plans in St Helens have a primary category of neglect and that the number of children exposed to domestic abuse is increasing. This highlights the importance of early intervention to prevent likely impact for children exposed to either neglect and/or domestic abuse.
- 6.7 The data highlight that there are significant differences in outcomes for children aged 0-5 across St. Helens and that poorer outcomes are associated with areas of deprivation. Babies born in the most deprived decile of St Helens are more likely to be born prematurely, be born with a low birth weight, less likely to be breastfed at 6-8 weeks, more likely to be obese at reception age, more likely to experience parental conflict, and more likely to need an early help assessment, child in need or child protection plan. The wards of Town Centre, Parr and Peasley Cross and Fingerpost consistently have some of the worst child health outcomes in our borough.
- 6.3 The locations of the Central Link and Sutton Family Hub centres are within accessible reach of families living in the wards which generally have the higher prevalence of poorer child health outcomes. However, there will inevitably be families within all wards that are facing the same challenges and health outcomes and will benefit from the services being offered.

7. Legal Implications

7.1 There are no legal implications identified.

8. Financial Implications

8.1 There are no financial implications of this report.

9. Equality Impact Assessment

9.1 This report aimed to outline the picture of maternity and early years health in the borough and identify where potential disadvantaged groups are at higher risk of adverse health outcomes, awareness of local issues is important to identifying and supporting these target groups.

10. Social Value

10.1 This report enables the council to align services with areas of greatest need, thus allowing it to support local families in terms of their health and wellbeing. This will support both employers, employees and the social care network.

11. Net Zero and Environment

11.1 There are no direct implications.

12. Health and Wellbeing

12.1 This report identifies areas with challenges in relation to maternity and early years health outcomes, thus potentially supporting future improvements in these areas.

13. Customer and Resident

13.1 The identification of areas with poorer maternity and early years health outcomes affects everyone who resides in St Helens, temporary or permanently.

14. Asset and Property

14.1 There are no direct effects on asset management.

15. Staffing and People Management

15.1 This report is unlikely to have any direct impacts on staffing or HR concerns.

16. Risks

16.1 There are no anticipated direct risks as a result of releasing this report.

17. Policy Framework Implications

17.1 The Family Hubs JSNA links to the borough strategy and particular the first priority of giving children and young people the best start in life. It also links to our Early Help and Neglect Strategies and the work of the Inequalities Commission.

18. Impact and Opportunities on Localities

18.1 Identifying areas with poorer maternity and early years health outcomes by wards and localities in the borough brings the opportunity to adjust future policy towards areas of greatest need. Localities-based data was used to help shape the offer for each of the Family Hubs.

19. Background Documents

19.1 None

20. Appendices

20.1 St Helens Family Hubs Maternity and Early Years JSNA.