

Children & Young People District Profiles Dover

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Produced by

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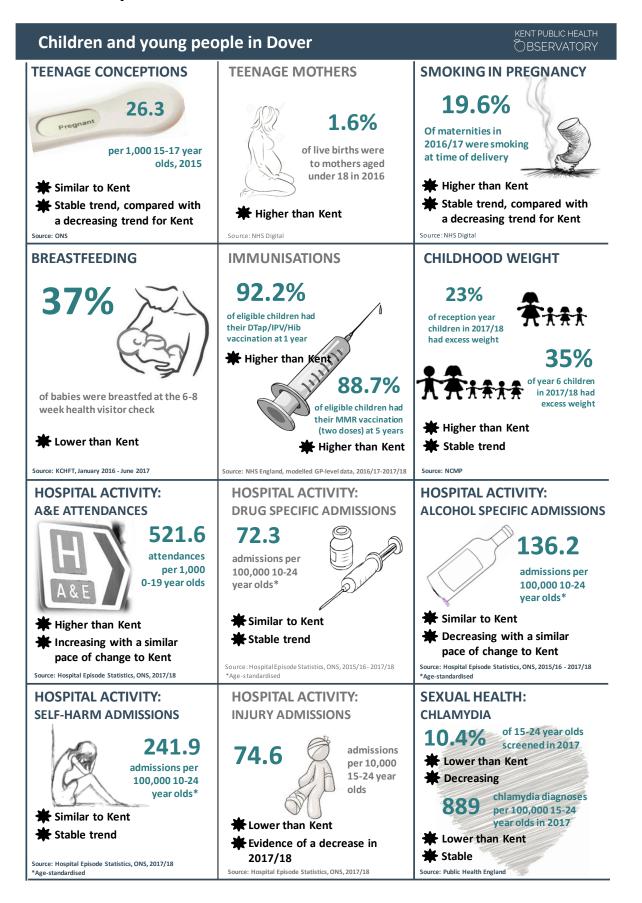
Version Control

| Version Number | Date | Reviewer | Change reference and summary |
|-------------------|------------|----------|--|
| 1 | 2016 | ZC/ES | Original early years and youth hubs profiles |
| 2 | 12/7/2018 | RK/TG | Initial draft |
| 3 | 14/11/2018 | RK/TG/SB | Data update |

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1 Summary



2 Priorities for Dover

- Continue to reduce teenage conceptions
 - Although teenage conception rates are decreasing, they remain similar to the Kent average. A higher proportion of births in Dover are to women aged under 18 than the Kent average.

• Reduce smoking in pregnancy

 Smoking at time of delivery is higher than the Kent and England average (10.7%). The rate of smoking at time of delivery is not decreasing as it is in other parts of Kent. Reducing the rate of smoking in pregnancy is key to reducing the rates of still births and pre term birth. It is a priority for the national and local maternity systems.

• Increase breastfeeding rates

- Both breastfeeding at the newborn visit and breastfeeding at 6-8 weeks are lower than the Kent average.
- Achieving stage 2 BFI status for 2019 is a key priority for children's centres.

Immunisations

- Dover has not reached the WHO target of 95% coverage for primary immunisations.
- Reduce A&E attendances
 - A&E attendance rates are higher than the Kent average for both 0-4 and
 0-19 age groups.
- Reduce levels of excess weight in children
 - Promoting healthy weight is a national and local priority. Significantly higher levels of excess weight in both 4-5 year olds (reception year) and 10-11 year olds (year six) than the Kent average. Promoting healthy weight is a national and local priority.

Emotional Health and Wellbeing

 Improving the emotional health and wellbeing of children and young people is a national and local priority. Early help interventions to promote resilience and good emotional health are key contributions to the system wide efforts to improve outcomes.

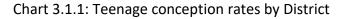
- Increase education around other areas of sexual health
 - Across Kent, screening and detection rates for chlamydia are low in comparison with the England average, with screening rates in Dover lower still, and decreasing.
- Focus interventions on the wards where performance is below the Kent average
 - In general, areas of greater deprivation will have worse public health outcomes and will require more focussed activity.

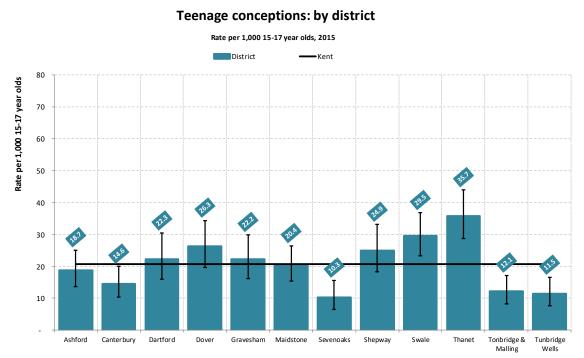
3 Detailed analysis

Below is some additional analysis by District, over time and (where possible) by Ward.

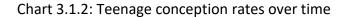
Additional analysis for many of these indicators, and a wider set of indicators relating to children and young people can be found in the starting well chapters of our <u>Health & Social</u> <u>Care Maps</u>, and in our children and young people <u>health intelligence pages</u>.

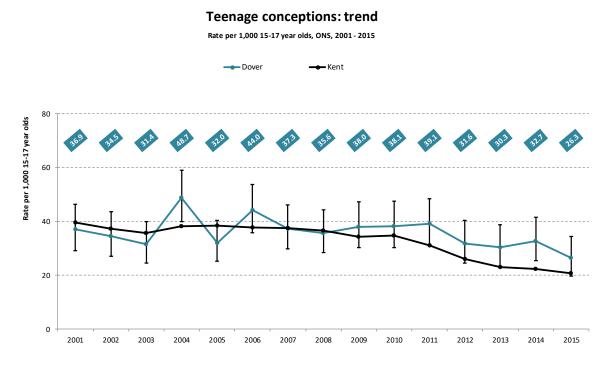
3.1 Teenage conceptions





Source : ONS, prepared by KPHO (TG), Nov-17



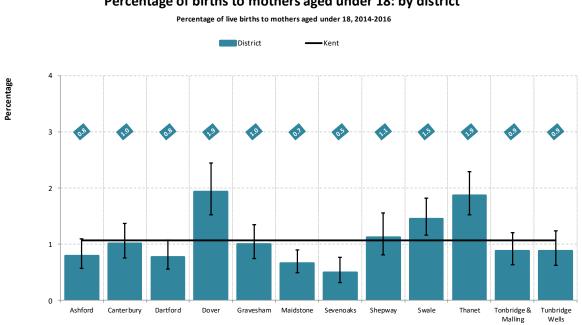


Source: ONS, prepared by KPHO (TG), Oct-17

No significant change compared with a decreasing trend for Kent

3.2 Teenage mothers



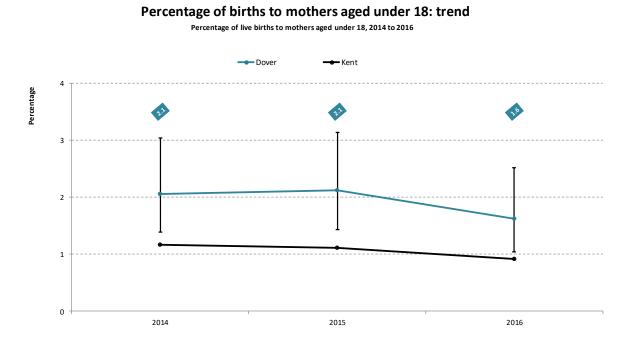


Percentage of births to mothers aged under 18: by district

Source : ONS, prepared by KPHO (RK), Nov-18



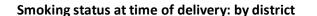
Chart 3.2.2: Births to mothers aged under 18 over time



Source : ONS, prepared by KPHO (RK), Nov-18

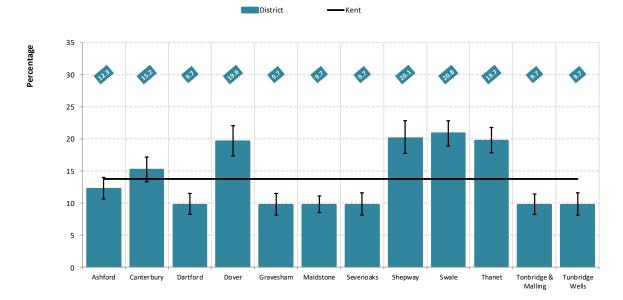
3.3 Smoking in pregnancy

Chart 3.3.1: Smoking status at the time of delivery by District



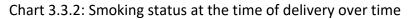
Percentage of mothers known to be smokers at the time of delivery as a percentage of all maternities, 2016/17

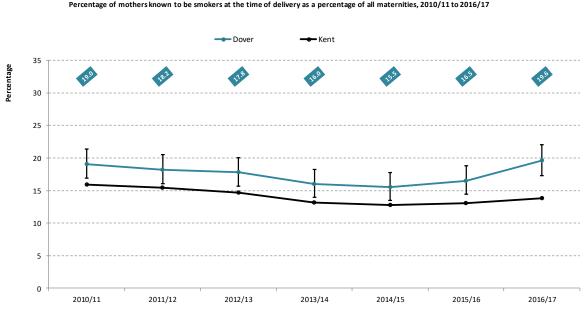
No significant change compared with a stable trend for Kent



Source : PHE, NHS Digital, prepared by KPHO (RK), Apr-18







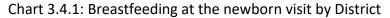
Smoking status at time of delivery: trend

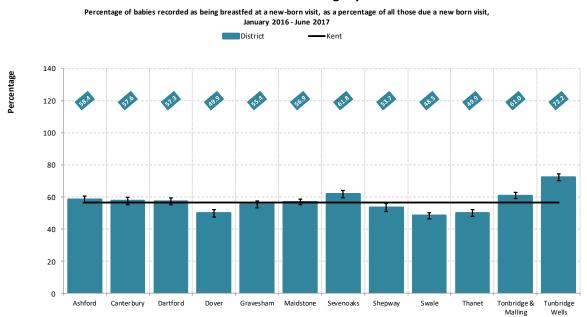
Percentage of mothers known to be smokers at the time of delivery as a percentage of all maternities, 2010/11 to 2016/17

Source : PHE, NHS Digital, prepared by KPHO (RK), Apr-18

No significant change compared with a decreasing trend for Kent

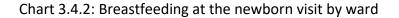
3.4 Breastfeeding: At newborn visit

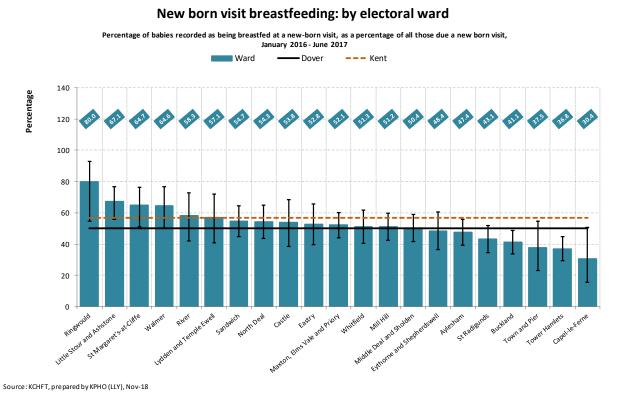




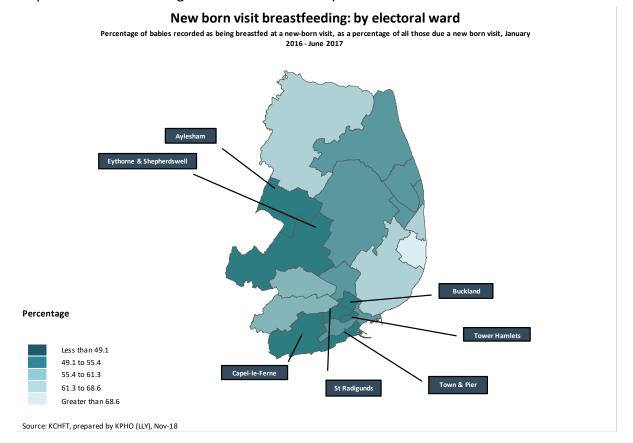
New born visit breastfeeding: by district

Source : KCHFT, prepared by KPHO (LLY), Nov-18



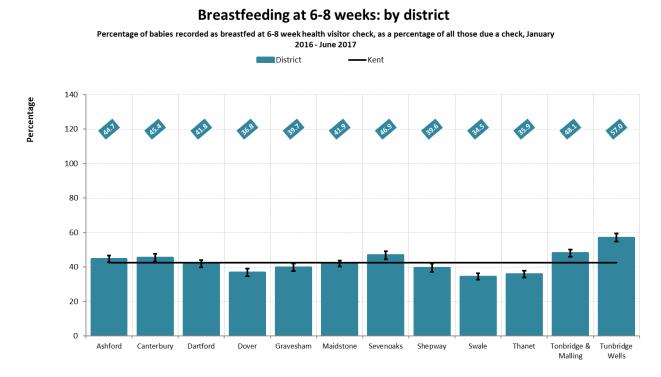


Mapt 3.4.3: Breastfeeding at the newborn visit by ward



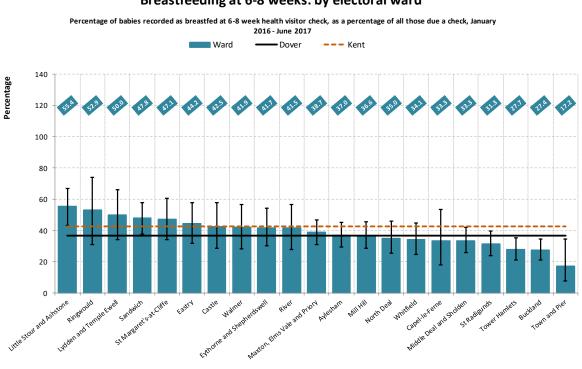
3.5 Breastfeeding: At 6-8 weeks

Chart 3.5.1: Breastfeeding at 6-8 weeks by District



Source: KCHFT, prepared by KPHO (LLY), Nov-18

Chart 3.5.2: Breastfeeding at 6-8 weeks by ward

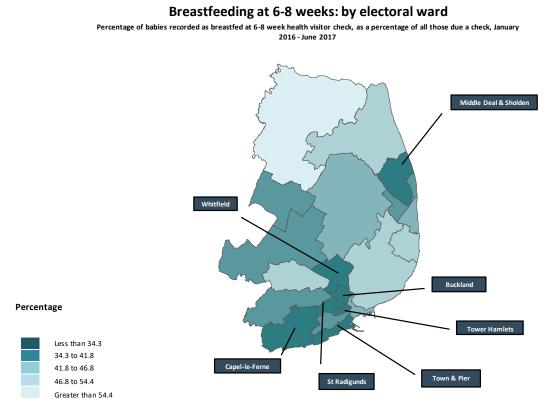


Breastfeeding at 6-8 weeks: by electoral ward

Source : KCHFT, prepared by KPHO (LLY), Nov-18



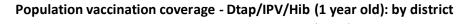
Map 3.5.3: Breastfeeding at 6-8 weeks by ward

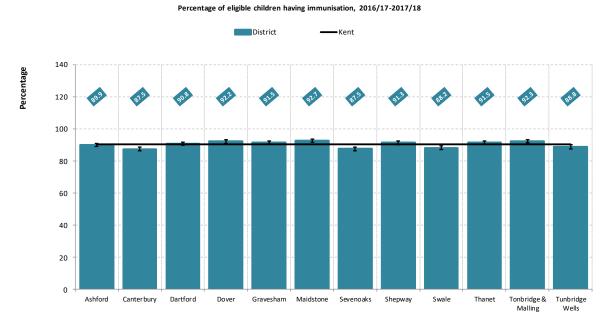


Source: KCHFT, prepared by KPHO (LLY), Nov-18

3.6 Immunisations: Dtap/IPV/Hib (1 year old)

Chart 3.6.1: Population vaccination coverage - Dtap/IPV/Hib (1 year old) by District

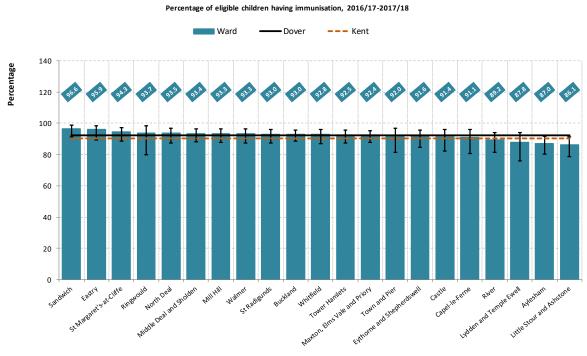




Source: NHS England, GP-level data modelled to Ward, prepared by KPHO (MP), Nov-18

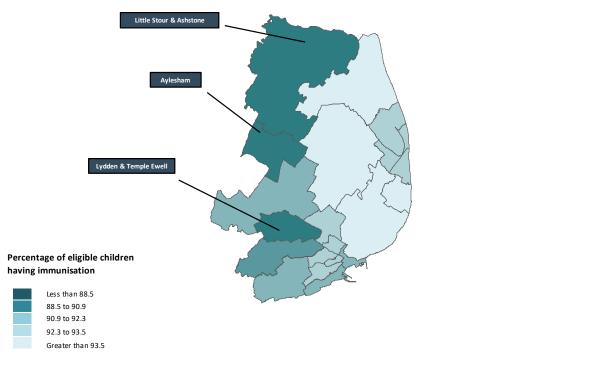
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Chart 3.6.2: Population vaccination coverage - Dtap/IPV/Hib (1 year old) by ward Population vaccination coverage - Dtap/IPV/Hib (1 year old): by electoral ward



Source : NHS England, GP-level data modelled to Ward, prepared by KPHO (MP), Nov-18





Source: NHS England, GP-level data modelled to Ward, prepared by KPHO (MP), Nov-18

3.7 Immunisations: MMR for two doses (5 years old)

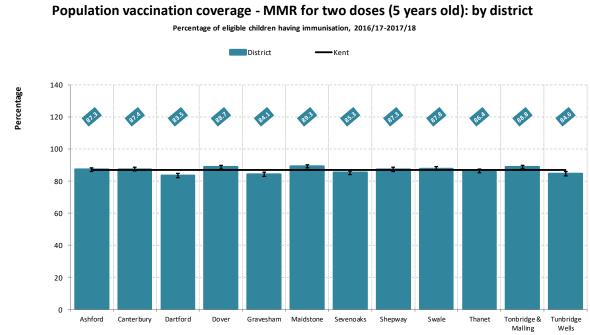
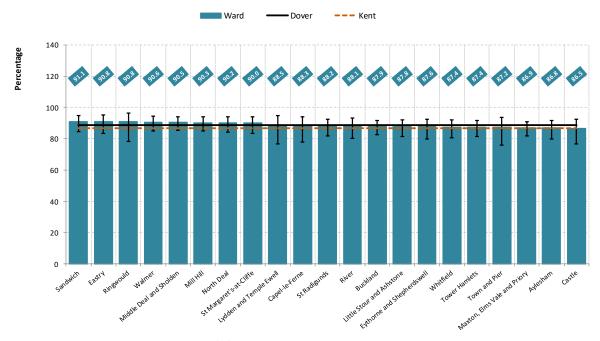


Chart 3.7.1: Population vaccination coverage - MMR for two doses (5 years old) by District

Source : NHS England, GP-level data modelled to Ward, prepared by KPHO (MP), Nov-18

Chart 3.7.2: Population vaccination coverage - MMR for two doses (5 years old) by ward Population vaccination coverage - MMR for two doses (5 years old): by electoral ward

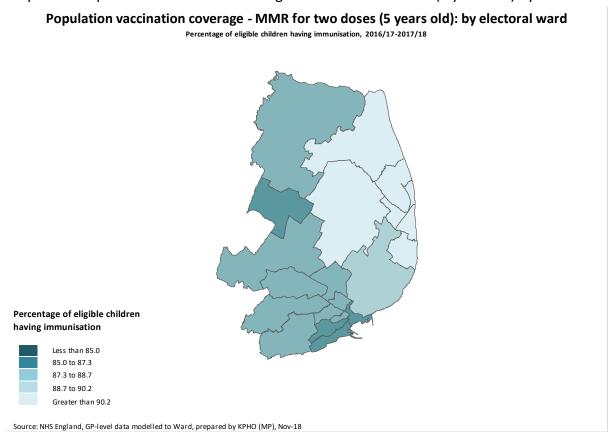


Percentage of eligible children having immunisation, 2016/17-2017/18

Source : NHS England, GP-level data modelled to Ward, prepared by KPHO (MP), Nov-18

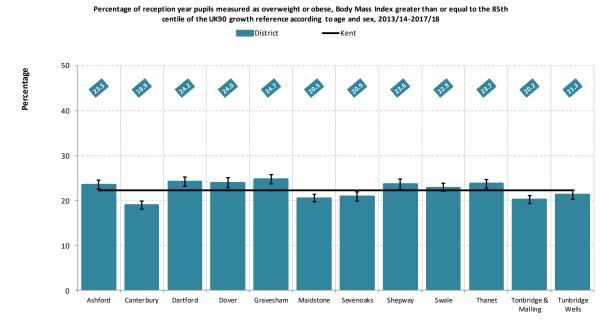
KENT PUBLIC HEALTH

Map 3.7.3: Population vaccination coverage - MMR for two doses (5 years old) by ward



3.8 Excess weight: Year R

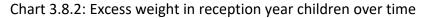
Chart 3.8.1: Excess weight in reception year children by District

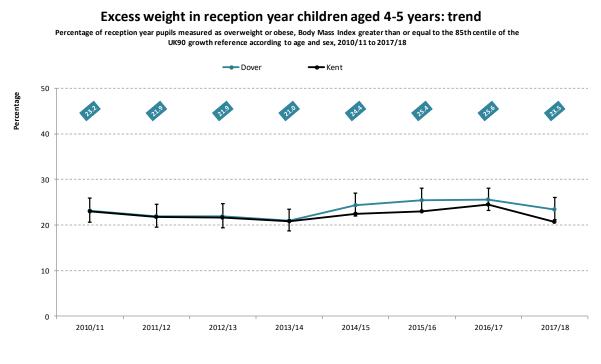


Excess weight in reception year children aged 4-5 years: by district

Source : NCMP, NHS Digital, prepared by KPHO (TG), Oct-18



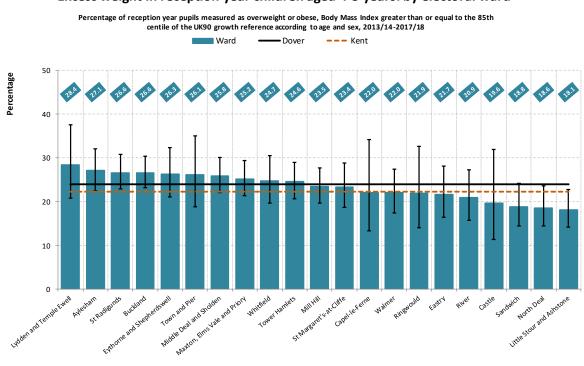




No significant change compared with a stable trend for Kent

Source : NCMP, NHS Digital, prepared by KPHO (TG), Oct-18

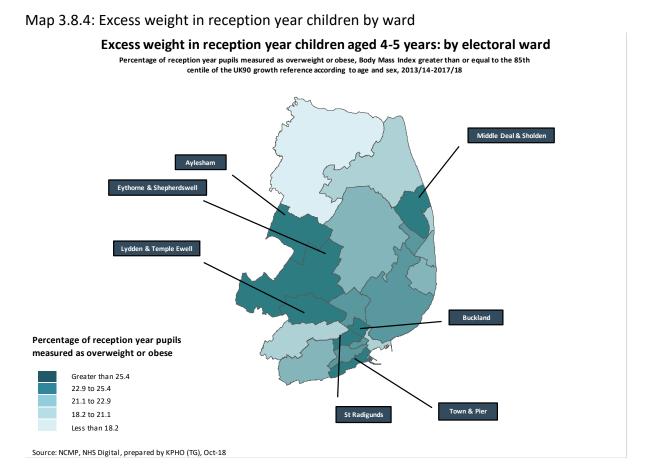
Chart 3.8.3: Excess weight in reception year children by ward



Excess weight in reception year children aged 4-5 years: by electoral ward

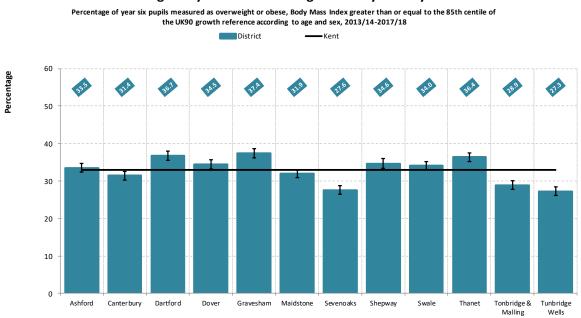
Source: NCMP, NHS Digital, prepared by KPHO (TG), Oct-18

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3.9 Excess weight: Year 6

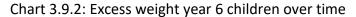
Chart 3.9.1: Excess weight year 6 children by District

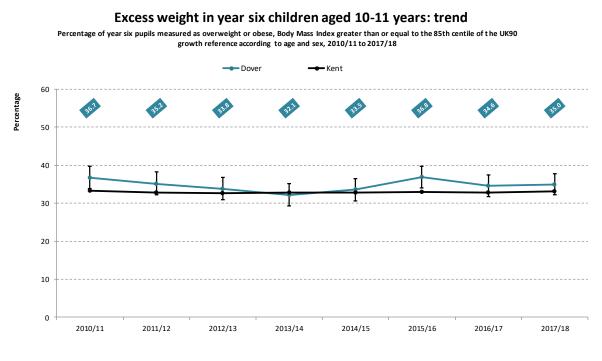


Excess weight in year six children aged 10-11 years: by district

Source : NCMP, NHS Digital, prepared by KPHO (TG), Oct-18



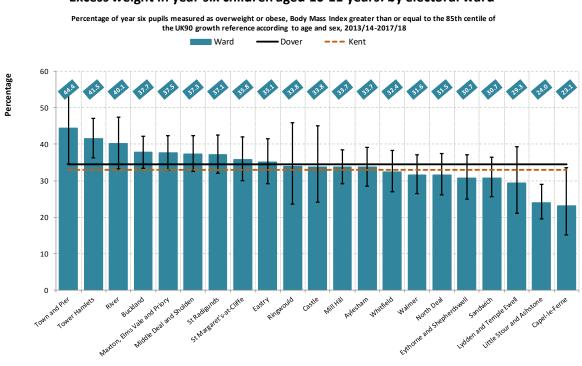




Source : NCMP, NHS Digital, prepared by KPHO (TG), Oct-18

No significant change compared with a stable trend for Kent

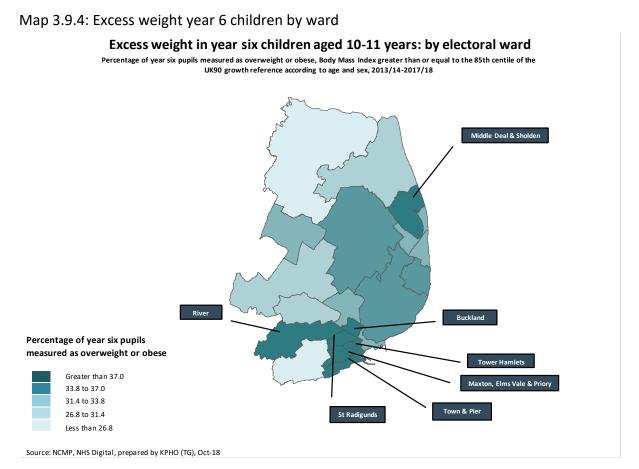
Chart 3.9.3: Excess weight year 6 children by ward



Excess weight in year six children aged 10-11 years: by electoral ward

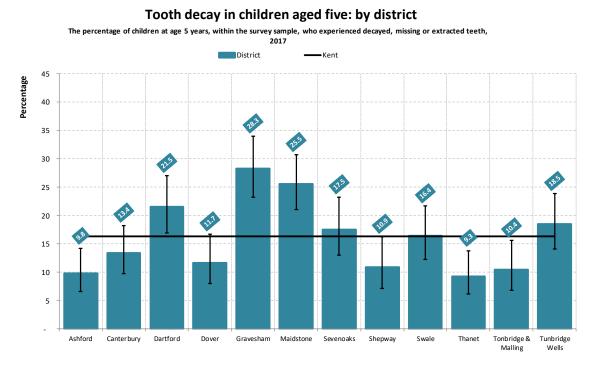
Source : NCMP, NHS Digital, prepared by KPHO (TG), Oct-18

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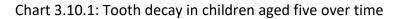


3.10 Tooth decay: Age 5

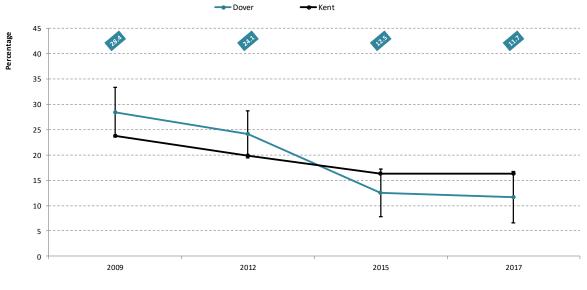
Chart 3.10.1: Tooth decay in children aged five by District



Source: Dental Public Health Epidemiology Programme for England: Oral health survey of five-year-old children, prepared by KPHO (TG), May-18







Decreasing compared with a stable trend for Kent

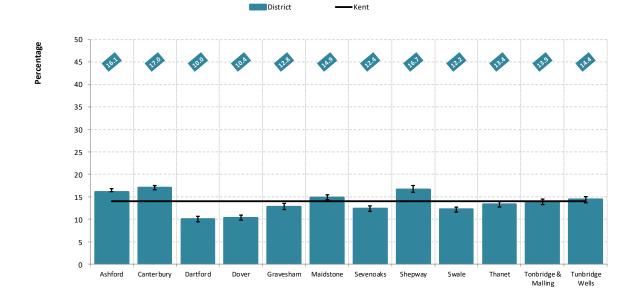
Source: Dental Public Health Epidemiology Programme for England: Oral health survey of five-year-old children, prepared by KPHO (RK), Jun-18

3.11 Chlamydia screening

Chart 3.11.1: Proportion of population aged 15 to 24 screened for chlamydia by District

Proportion of population aged 15 to 24 screened for chlamydia: by district

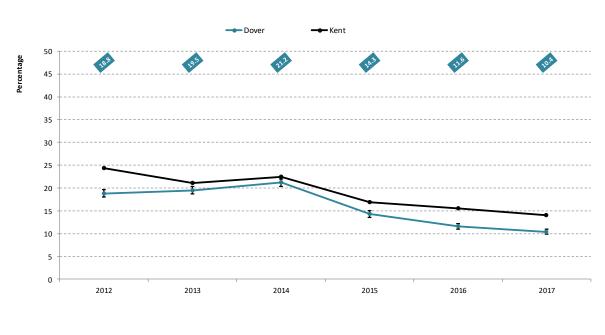
In specialist and non-specialist sexual health services (SHSs), 2017



Source: PHE, prepared by KPHO (TG), Jul-18



Chart 3.11.2: Proportion of population aged 15 to 24 screened for chlamydia over time



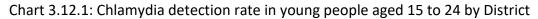
Proportion of population aged 15 to 24 screened for chlamydia: trend

In specialist and non-specialist sexual health services (SHSs), 2017

Source: PHE, prepared by KPHO (TG), Jul-18

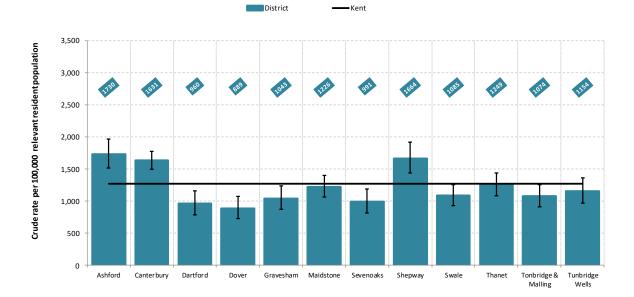
Decreasing with a similar pace of change to Kent

3.12 Chlamydia detection



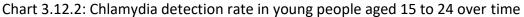
Chlamydia detection rate in young people aged 15 to 24: by district

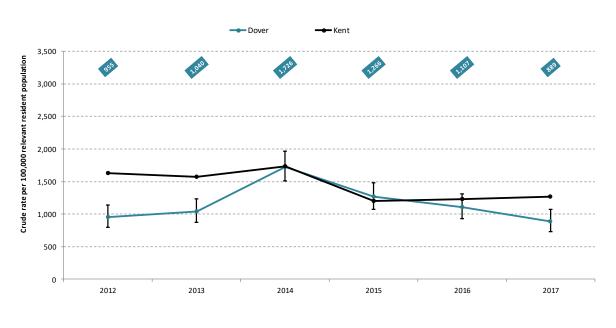
Crude rate per 100,000 population aged 15 to 24, 2017



Source: PHE, prepared by KPHO (TG), Jul-18







Chlamydia detection rate in young people aged 15 to 24: trend

Crude rate per 100,000 population aged 15 to 24, 2017

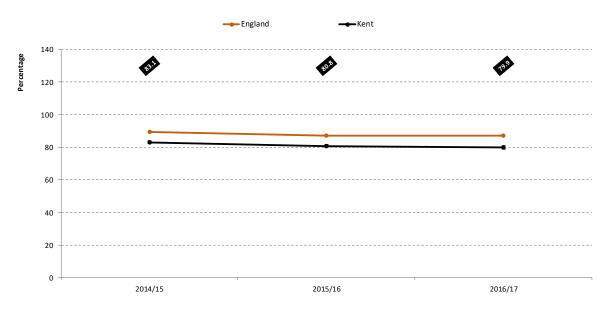
Source : PHE, prepared by KPHO (TG), Jul-18

3.13 Immunisations: HPV

Chart 3.13.1: Population vaccination coverage - HPV for one dose (12-13 years) over time

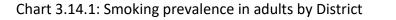
Population vaccination coverage - HPV for one dose (12-13 year olds): trend Percentage of eligible females (year 8) having immunisation, 2014/15 to 2016/17

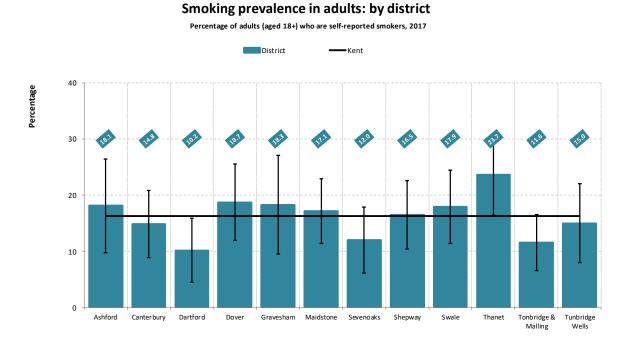
No significant change compared with a stable trend for Kent



Source: PHE, prepared by KPHO (TG), Jul-18

3.14 Smoking prevalence



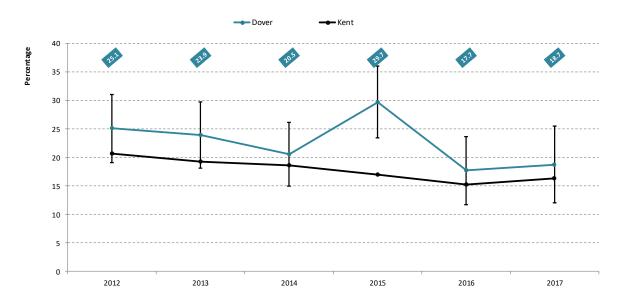


Source: Annual Population Survey (APS), prepared by KPHO (RK), Jul -18

Chart 3.14.2: Smoking prevalence in adults over time

Smoking prevalence in adults: trend

Percentage of adults (aged 18+) who are self-reported smokers, 2012 to 2017

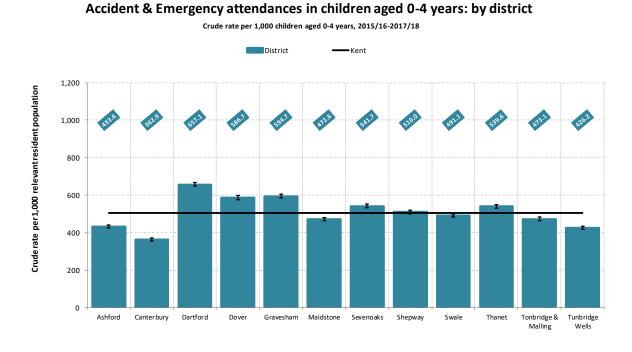


No significant change compared with a decreasing trend for Kent

Source : Annual Population Survey (APS), prepared by KPHO (RK), Jul -18

3.15 A&E attendances: Ages 0-4

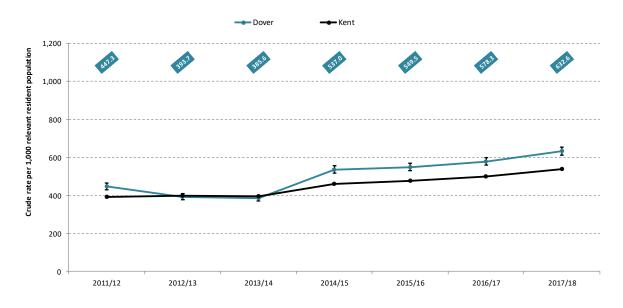




Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

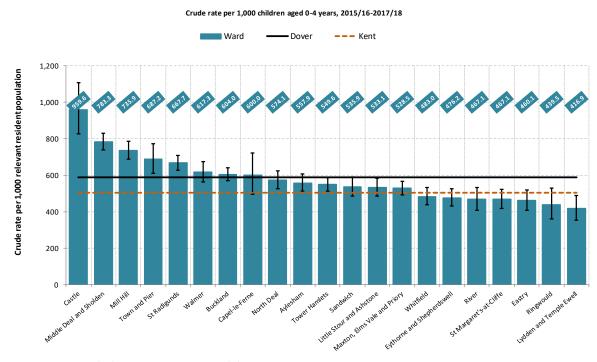
Chart 3.15.2: A&E attendances in children aged 0-4 years over time

Accident & Emergency attendances in children aged 0-4 years: trend Crude rate per 1,000 children aged 0-4 years, 2011/12 to 2017/18



Increasing with a similar pace of change to Kent

 ${\tt Source:} {\tt Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by {\tt KPHO (RK), Nov-18}$

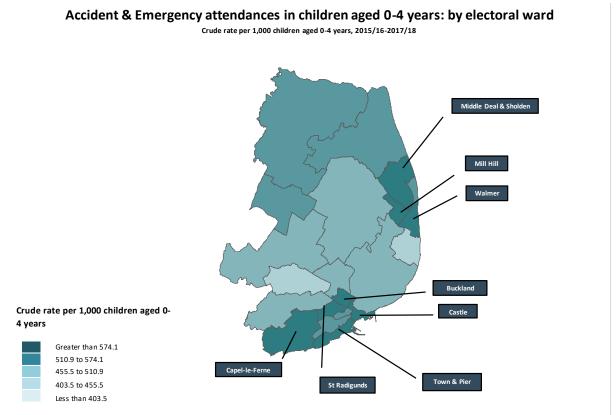


Accident & Emergency attendances in children aged 0-4 years: by electoral ward

Chart 3.15.3: A&E attendances in children aged 0-4 years by ward

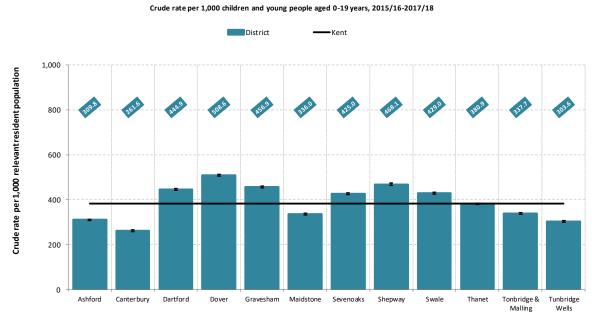
Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Map 3.15.4: A&E attendances in children aged 0-4 years by ward



3.16 A&E attendances: Ages 0-19

Chart 3.16.1: A&E attendances in children aged 0-19 years by District



Accident & Emergency attendances in children & young people aged 0-19 years: by district

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

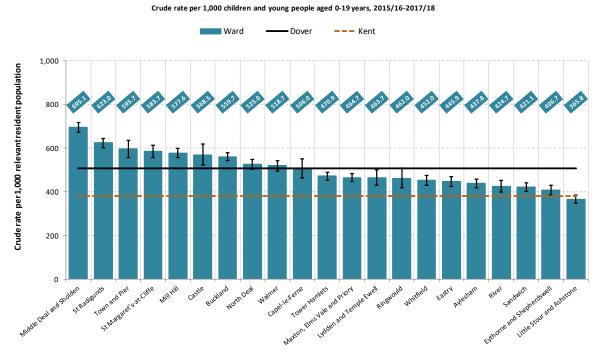
Chart 3.16.2: A&E attendances in children aged 0-19 years over time

Accident & Emergency attendances in children & young people aged 0-19 years: trend Crude rate per 1,000 children and young people aged 0-19 years, 2011/12 to 2017/18



Increasing with a similar pace of change to Kent

Chart 3.16.3: A&E attendances in children aged 0-19 years by ward

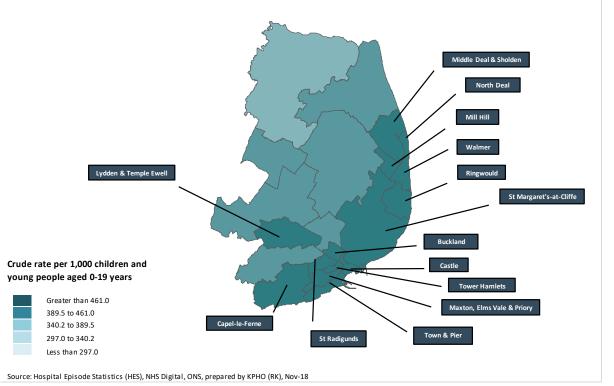


Accident & Emergency attendances in children & young people aged 0-19 years: by electoral ward

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

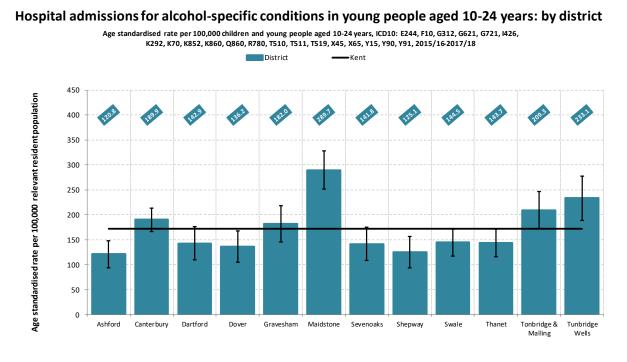
Map 3.16.4: A&E attendances in children aged 0-19 years by ward





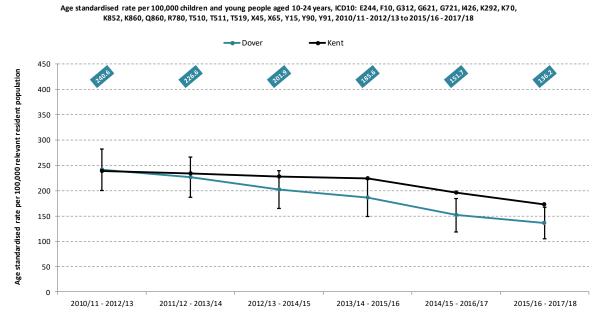
3.17 Alcohol specific hospital admissions: Ages 10-24

Chart 3.17.1: Hospital admissions for alcohol-specific conditions in young people aged 10-24 years by District



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Chart 3.17.2: Hospital admissions for alcohol-specific conditions in young people aged 10-24 years over time

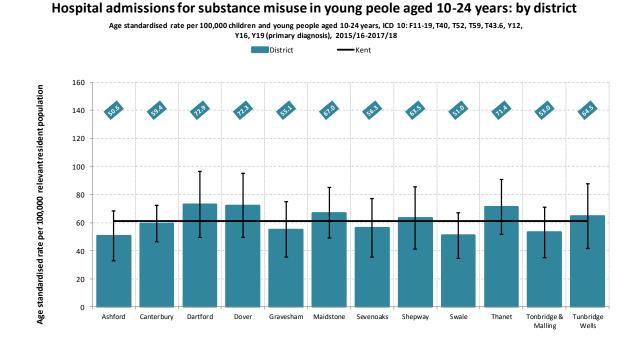


Hospital admissions for alcohol-specific conditions in young people aged 10-24 years: trend

Decreasing with a similar pace of change to Kent

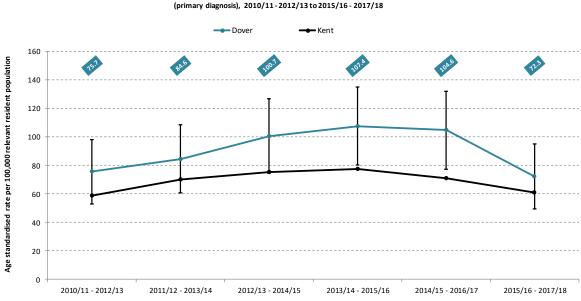
3.18 Hospital admissions for substance misuse: Ages 10-24

Chart 3.18.1: Hospital admissions for substance misuse in young people aged 10-24 years by District



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Chart 3.18.2: Hospital admissions for substance misuse in young people aged 10-24 years over time



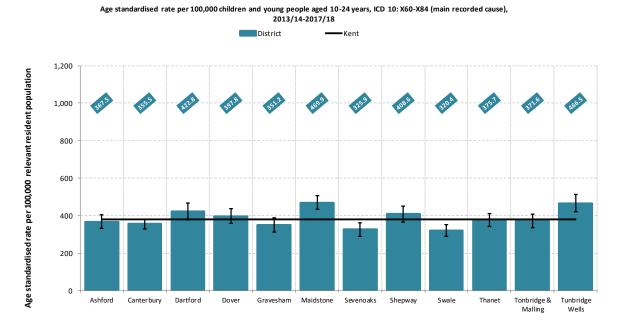
Hospital admissions for substance misuse in young peole aged 10-24 years: trend Age standardised rate per 100,000 children and young people aged 10-24 years, ICD 10: F11-19, T40, T52, T59, T43.6, Y12, Y16, Y19

No significant change compared with a stable trend for Kent

3.19 Hospital admissions for self harm: Ages 10-24

Chart 3.19.1: Hospital admissions for self harm in young people aged 10-24 years by District

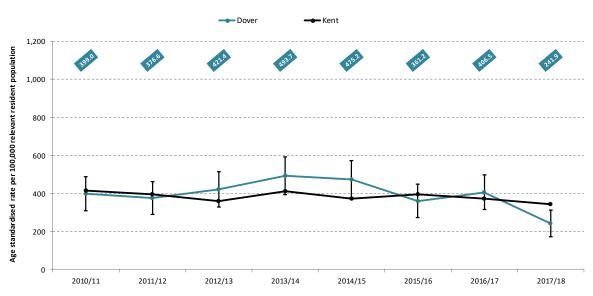
Emergency hospital admissions for self-harm in young people aged 10-24 years: by district



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Chart 3.19.2: Hospital admissions for self harm in young people aged 10-24 years over time Emergency hospital admissions for self-harm in young people aged 10-24 years: trend

Age standardised rate per 100,000 children and young people aged 10-24 years, ICD 10: X60-X84 (main recorded cause), 2010/11 to 2017/18



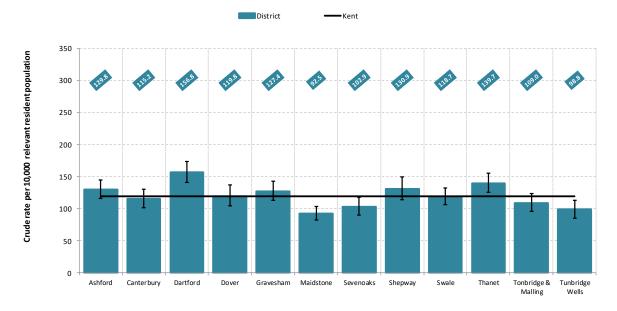
No significant change compared with a stable trend for Kent

3.20 Hospital admissions for unintentional injury: Ages 0-4

Chart 3.20.1: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-4 years by District

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 0-4 years: by district

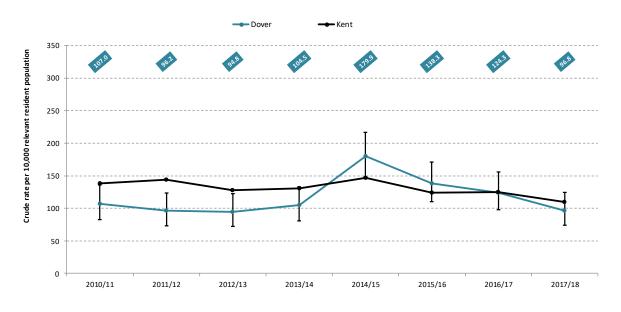
Crude rate per 10,000 children and young people aged 0-4, ICD 10: S00-T79, V01-Y36, 2015/16-2017/18



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Chart 3.20.2: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-4 years over time

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 0-4 years: trend Crude rate per 10,000 children and young people aged 0-4, ICD 10: S00-T79, V01-Y36, 2010/11 to 2017/18



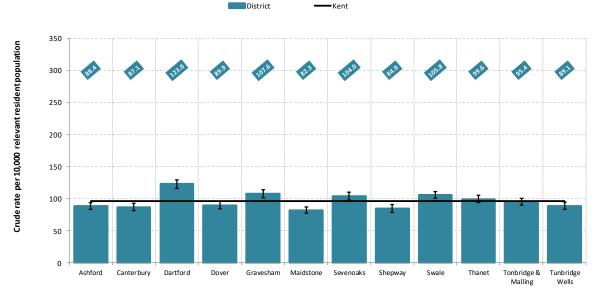
No significant change compared with a stable trend for Kent

3.21 Hospital admissions for unintentional injury: Ages 0-14

Chart 3.21.1: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-14 years by District

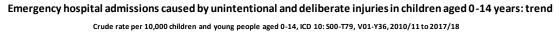
Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years: by district

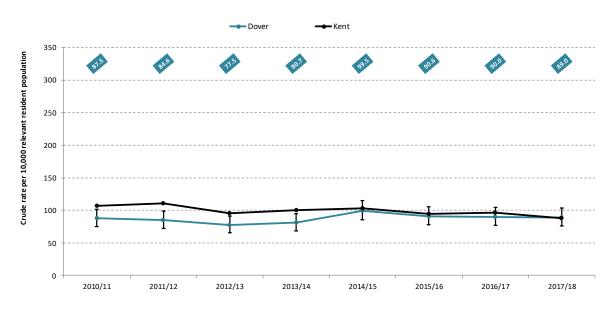
Crude rate per 10,000 children and young people aged 0-14, ICD 10: S00-T79, V01-Y36, 2013/14-2017/18



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Chart 3.21.2: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-14 years over time

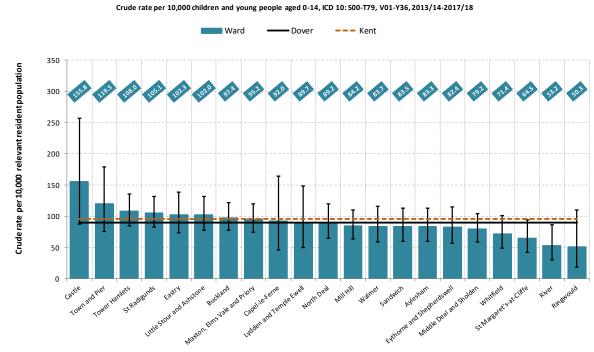




No significant change compared with a decreasing trend for Kent

KENT PUBLIC HEALTH **BSERVATORY**

Chart 3.21.3: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-14 years by ward

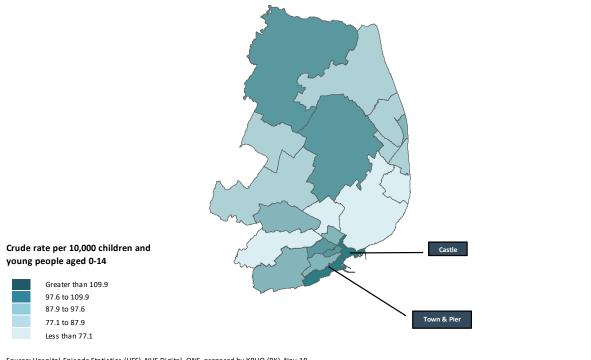


Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years: by electoral ward

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Map 3.21.4: Hospital admissions caused by unintentional and deliberate injuiries in children aged 0-14 years by ward

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years: by electoral ward Crude rate per 10,000 children and young people aged 0-14, ICD 10: S00-T79, V01-Y36, 2013/14-2017/18

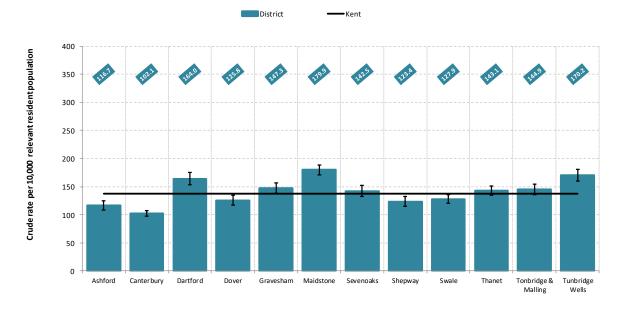


3.22 Hospital admissions for unintentional injury: Ages 15-24

Chart 3.22.1: Hospital admissions caused by unintentional and deliberate injuiries in young people aged 15-24 years by District

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 15-24 years: by district

Crude rate per 10,000 children and young people aged 15-24, ICD 10: S00-T79, V01-Y36, 2013/14-2017/18



Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

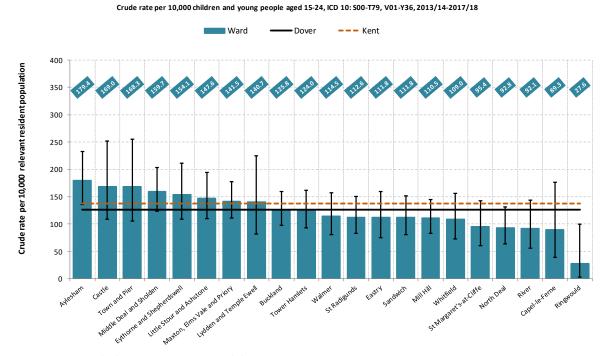
Chart 3.22.2: Hospital admissions caused by unintentional and deliberate injuiries in young people aged 15-24 years over time

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 15-24 years: trend Crude rate per 10,000 children and young people aged 15-24, ICD 10: S00-T79, V01-Y36, 2010/11 to 2017/18



No significant change compared with a decreasing trend for Kent

Chart 3.22.3: Hospital admissions caused by unintentional and deliberate injuiries in young people aged 15-24 years by ward



Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 15-24 years: by electoral ward

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Map 3.22.4: Hospital admissions caused by unintentional and deliberate injuiries in young people aged 15-24 years by ward

Emergency hospital admissions caused by unintentional and deliberate injuries in children aged 15-24 years: by electoral ward Crude rate per 10,000 children and young people aged 15-24, ICD 10: S00-T79, V01-Y36, 2013/14-2017/18

