

# Special Educational Needs and Disabilities: Joint Strategic Needs Assessment;

## Health

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## 1. Introduction and background

This chapter provides health data for children and young people aged 0-25 years, commissioned by North Cumbria Clinical Commissioning Group, Morecambe Bay Clinical Commissioning Group and North Cumbria Integrated Care NHS Foundation Trust. Currently primary and secondary health care (CCGs/NHS) do not record patients with SEND therefore it is not possible to provide health data for this particular cohort, data for the total 0-25 years population is provided. The following information is included from the Clinical Commissioning Groups:

- Patients on the GP Learning Disabilities (LD) Register
- Patients on the GP Severe Mental Illness (SMI) Register
- Hospital activity of patients on the LD and Severe Mental Illness Registers
- Neonatal patients and primary diagnosis
- Outpatient appointments of patients on Severe Mental Illness Registers and Learning Disability Registers
- NHS Health Checks

North Cumbria Integrated Care NHS Foundation Trust (NCIC) provide acute and community services in North Cumbria for adults and children; children's community services provided by NCIC also currently cover South Cumbria; services are provided based on the location of the team and not the patient. Cumbria, Northumberland, Tyne and Wear provide mental health and learning disability NHS services in North Cumbria; Lancashire & South Cumbria NHS Foundation Trust (LSCFT) provide mental health care for adults and children in South Cumbria, as well as in Lancashire. NCIC and LSCFT do not record patients with SEND therefore it is not possible to provide data for this cohort; however, some records do include children and young people with an EHCP and this data will be provided where possible. The community health data covers children aged 0-18 years. The following is included in this chapter:

- Audiology
- Child and Adolescent Mental Health Services (CAMHS)
- Children Looked After
- Community Nursing
- Children's continence
- Children's Learning Disability
- Children's Occupational Therapy
- Children's Physiotherapy

- Children's Speech & Language Therapy
- Community Paediatrics
- Health Visiting
- Specialist Development Nursing (North Cumbria only)
- Strengthening Families

## 2. Key Findings

- The GP patient population in North Cumbria for those aged 0-25 years is 85,433, accounting for 26.2%; the GP patient population in South Cumbria (part of Morecambe Bay CCG) for those aged 0-25years is 50,210, accounting for 25.3%
- In North Cumbria CCG there are 345 patients aged 0-25 years on Learning Disability GP Registers, 43.5% are aged 21-25 years; in South Cumbria, there are 282 patients aged 0-25 years on Learning Disability GP Practice Registers, 50% are aged 21-25 years
- In North Cumbria, 53.0% of patients (all ages) on Learning Disability GP Registers receive an annual health check; in South Cumbria, 50.4% of patients on Learning Disability GP Registers receive an annual health check
- In North Cumbria CCG there are 106 patients aged 0-25 years on Severe Mental Illness GP Registers, 79.2% are aged 21-25 years; in South Cumbria there are 77 patients aged 0-25years on Severe Mental Illness GP Practice Registers, 68.8% are aged 21-25 years
- In North Cumbria CCG, patients on Learning Disability or Severe Mental Illness GP Registers are more likely to reside in more affluent areas than in South Cumbria. Conversely, in South Cumbria larger proportions of young people on Learning Disability or Severe Mental Illness GP Registers reside in the least affluent areas. These numbers are low and should be used with caution, however, it is notable that the distribution differs from the distribution of children and young people with Special Educational Needs or Disabilities
- In both North and South Cumbria, more than 1 in 3 neonatal (newborn) patients have a primary diagnosis of low birth weight. This is significant because low birth weight

increases the risk of childhood mortality and developmental problems and is associated with poorer health later in life

- In 2018/19, in Cumbria, there were 1,320 referrals for children with an EHCP for children's health services (including community health, Child & Adolescent Mental Health, and Learning Disabilities), accounting for 5.1% of all children's referrals to these services; in North Cumbria, there were 1,091 referrals for children with an EHCP (6.4%); in South Cumbria, there were 229 referrals for children with EHCPs (2.5%)
- The community service with the greatest proportion of referrals for children with an EHCP are Children's Learning Disability, accounting for 35.7%, and Children's Occupational Therapy, accounting for 21.7%; there is a notable geographic difference across most services; children referred to North Cumbria community services are more than twice as likely to have an EHCP than those in South Cumbria. This needs further exploration to understand the data.
- Referrals for children's health services (community health, Child & Adolescent Mental Health, and Learning Disabilities) for children with an EHCP have increased compared to previous years *[N.B increases are likely to be due to better recording of EHCPs]*
- In Cumbria, there were 4,254 referrals to Child & Adolescent Mental Health services, of which, 202 were for children with an EHCP, accounting for 4.7%; again there is significant geographical variation, in North Cumbria, there were 174 referrals for children with an EHCP (6.4%) whereas in South Cumbria there were 28 referrals (1.8%)
- Waiting times for CAMHS vary across the county; in North Cumbria 82.3% of all children wait less than 18 weeks compared to 65.9% in South Cumbria. However, it is notable that children with an EHCP wait longer; in North Cumbria 80% of children with an EHCP wait less than 18 weeks, and most significantly, in South Cumbria only 41.7% of children with an EHCP wait less than 18 weeks
- The health and wellbeing of children (all children) in Cumbria is mixed when comparing to England with significant variations across the districts

- Levels of childhood obesity in Reception age (4-5years) children are worse than national averages
- Rates of child inpatient admissions for mental health conditions are worse than England, as well as admission episodes for alcohol-specific conditions in under 18s; admissions due to substance misuse; and hospital admissions caused by injuries in children

### 3. Background

Clinical Commissioning Groups (CCGs) form the lowest level of health geography in England, introduced by the Health and Social Care Act 2012. They are clinically led groups which represent all GP practices in their geographic area and have responsibility for commissioning or buying in health care services.

North Cumbria Clinical Commissioning Group covers the local authority districts of Allerdale, Carlisle, Eden and part of Copeland excluding areas covering the wards of Haverigg, Holborn Hill, Millom and Newtown; these areas have patients registered with GPs in Morecambe Bay Clinical Commissioning Group (South Cumbria).

The area of South Cumbria, which forms part of Morecambe Bay Clinical Commissioning Group, covers the local authority districts of Barrow-in-Furness and South Lakeland; and includes part of Copeland district (as detailed above).

Integrated Care Communities (ICCs) work together to improve the overall health and wellbeing of the community by joining up health and care services. They are made up of health and social care professionals, GPs, the voluntary sector and local community, working as one team to support the health and wellbeing of the local population. There are a total of 13 ICCs in Cumbria (8 in North Cumbria and 5 in South Cumbria). (See Figure 1). *[N.B. Please note that Carlisle Urban ICC area in North Cumbria is split by two groups of GP Practices, these are Carlisle Healthcare and Carlisle Network].*





North Cumbria Integrated Care NHS Foundation Trust (NCIC) provide acute and community services to North Cumbria for adults and children; Children's community services provided by NCIC also currently cover South Cumbria. Lancashire & South Cumbria NHS Foundation Trust (LSCFT) provide mental health and learning disability care for adults and children in South Cumbria. Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW) provide adult and children's mental health and learning disability care for North Cumbria.

#### 4. North Cumbria CCG

The total GP patient population in North Cumbria is 326,156; the 0-25 years population is 85,433, accounting for 26.2% (NHS Digital, GP Patient Population, October 2019).

##### 4.2 Registered patients on Learning Disability and Severe Mental Illness Registers – North Cumbria CCG

GP Practices across Cumbria (and England) keep registers of their patients by a range of conditions and needs, included are a Learning Disabilities Register; and a Severe Mental Illness Register (including patients with schizophrenia, bipolar affective disorder and other psychoses and other patients on lithium therapy). Not all patients on LD or SMI Registers will have an identified Special Educational Need or Disability; furthermore, not all children and young people with Special Educational Needs & Disabilities will be on GP patient registers.

In North Cumbria CCG, there are 345 patients aged 0-25years on Learning Disabilities GP Practice Registers; there are 106 patients aged 0-25years on Severe Mental Illness GP Practice Registers. *[Please note that LD and SMI Patient Register data for North Cumbria CCG excludes 6 GP Practices therefore numbers do not represent the total GP patient population and should be viewed with caution]. (See Table 1).*



Table 1: North Cumbria CCG: Patients aged 0-25 years on Learning Disability Registers &amp; Severe Mental Illness Registers by ICC. Data up to and including 31/08/2019.

	Learning Disabilities Register		Severe Mental Illness Register	
	Number	%	Number	%
Carlisle Healthcare	40	11.6%	17	16.0%
Carlisle Network	45	13.0%	24	22.6%
Carlisle Rural	11	3.2%	*	*
Cockermouth & Maryport	19	5.5%	7	6.6%
Copeland	79	22.9%	20	18.9%
Eden	79	22.9%	23	21.7%
Solway & Keswick	47	13.6%	*	*
Workington	25	7.2%	6	5.7%
Total	345		106	

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

The greatest proportion of children and young people on the LD Register are aged 21-25 years, accounting for 43.5%; the greatest proportion of children and young people on the SMI Register are aged 21-25 years, accounting for 79.2%. (See Table 2).

Table 2: North Cumbria CCG: Patients aged 0-25 years on the Learning Disability Register &amp; Severe Mental Illness Register by age. Data up to and including 31/08/2019.

Age Band	Learning Disabilities Register		Severe Mental Illness Register	
	Number	%	Number	%
1-10 years	38	11.0%	0	
11-15 years	53	15.4%	0	
16-20 years	104	30.1%	22	20.8%
21-25 years	150	43.5%	84	79.2%
Total	345		106	

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

At the end of March 2019, 65.6% of people aged 14 years and over identified as having a learning disability on GP Practice Registers received an annual health check. (See Table 3).

Table 3: North Cumbria CCG: Proportion of Learning Disability Register patients aged 14 years and over with an Annual Health Check

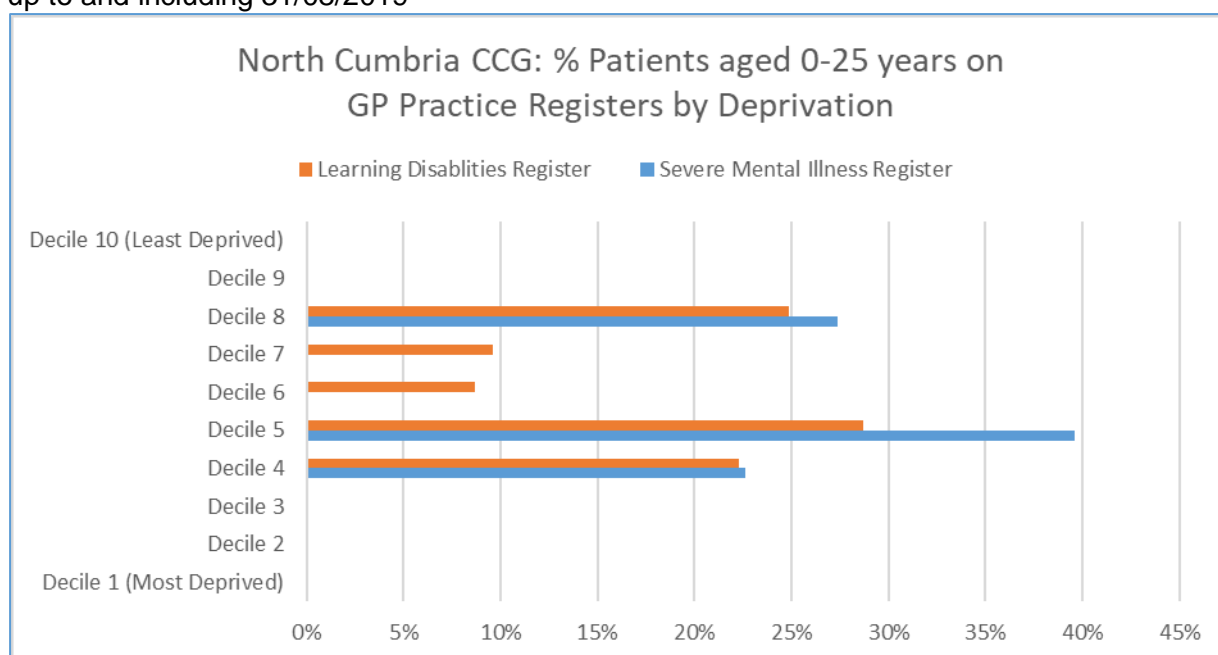
	End of March 2018	End of March 2019
% of patients aged 14 years and over with an Annual Health Check	54.9%	65.6%

Source: North Cumbria Clinical Commissioning Group

There are no LD Register patients located/resident in the most deprived areas of North Cumbria CCG; there doesn't appear to be a correlation. The greatest proportion (28.7%) of patients are located in areas that fall within decile 5 (1 = most deprived nationally; 10 = least deprived nationally); furthermore, 24.9% of patients are located in areas that fall within decile 8 (relatively affluent). *[N.B Numbers are relatively low and should therefore be used with caution when trying to draw conclusions]*. (See Figure 2). This differs to the picture of the SEND population with 14% located in areas that fall within the 10% most deprived nationally; furthermore, 25.4% are located in areas that fall within the bottom 20% nationally.

The picture is similar for SMI register patients; the greatest proportion (39.6%) are located/resident in areas that fall within decile 5; furthermore, 27.4% of patients are located in areas that fall within decile 8 (relatively affluent). *[As above, numbers are relatively low and should therefore be used with caution when trying to draw conclusions]*. (See Figure 2).

Figure 2: North Cumbria CCG: Patients aged 0-25 years on the Learning Disability Register & Severe Mental Illness Register by Deprivation Decile (Decile of Practice; IMD 2015); Data up to and including 31/08/2019



Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

#### 4.3 Patients with a recorded diagnosis of Learning Disabilities or Severe Mental Illness in primary care and associated acute activity – North Cumbria CCG

Table 4: North Cumbria CCG: Number: Hospital activity of patients on LD and SMI Registers, aged 0-25; Hospital Activity; Aug 2017 – July 2019

	Learning Disability Register patients	Severe Mental Illness Register patients
Outpatient Attendances	1,025	562
A&E Attendances (Type 1 Dept)	216	166
Urgent Care Attendances (Type 3 Dept)	106	27
Planned Inpatient Spells	36	28
Unplanned Inpatient Spells	89	56
Other Inpatient Spells	*	7

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

Outpatient attendance refers to a patient who attends a hospital appointment for treatment without staying overnight; attendance is a count of the number of appointments which were attended by the patient.

Between August 2017-July 2019, there were a total of 1,025 outpatient attendances by patients on Learning Disability Registers; the greatest proportion of those were for the paediatrics function (medical conditions affecting infants, children and young people) accounting for 29.2%. During the same period, there were a total of 562 outpatient attendances by patients on Severe Mental Illness Registers; the greatest proportion of those were for the child and adolescent psychiatry function, accounting for 45.0%. (See Table 5).

Table 5: North Cumbria CCG: Outpatient Attendances of Patients on the Learning Disabilities & Severe Mental Illness Registers aged Under 25; Hospital Activity; Aug 2017 – July 2019

Treatment Function	Learning Disability Register patients		Severe Mental Illness Register patients	
	Number	%	Number	%
ACCIDENT & EMERGENCY	*		*	
ADULT MENTAL ILLNESS	0		30	5.3%
ANAESTHETICS	15	1.5%	*	
BREAST SURGERY	*		*	
CARDIOLOGY	10	1.0%	*	
CHILD and ADOLESCENT PSYCHIATRY	0		253	45.0%
CLINICAL HAEMATOLOGY	0		7	1.2%
CLINICAL PSYCHOLOGY	0		8	1.4%
COLORECTAL SURGERY	8	0.8%	0	
CRITICAL CARE MEDICINE	*		0	
DERMATOLOGY	*		12	2.1%
DIABETIC MEDICINE	30	2.9%	10	1.8%
DIAGNOSTIC IMAGING	*		0	

DIETETICS	*		0	
ENDOCRINOLOGY	9	0.9%	*	
ENT	65	6.3%	*	
FORENSIC PSYCHIATRY	*		*	
GASTROENTEROLOGY	*		*	
GENERAL MEDICINE	13	1.3%	0	
GENERAL SURGERY	*		0	
GYNAECOLOGY	*		14	2.5%
INTERVENTIONAL RADIOLOGY	*		0	
LEARNING DISABILITY	43	4.2%	131	23.3%
MIDWIFE EPISODE	9	0.9%	6	1.1%
NEPHROLOGY	47	4.6%	*	
NEUROLOGY	85	8.3%	*	
NEUROSURGERY	6	0.6%	0	
OBSTETRICS	16	1.6%	16	2.8%
OPHTHALMOLOGY	51	5.0%	*	
PAEDIATRIC CARDIOLOGY	*		0	
PAEDIATRIC CLINICAL IMMUNOLOGY AND ALLERGY	*		0	
PAEDIATRIC DERMATOLOGY	10	1.0%	*	
PAEDIATRIC EAR NOSE AND THROAT	65	6.3%	*	
PAEDIATRIC GASTROENTEROLOGY	*		0	
PAEDIATRIC OPHTHALMOLOGY	60	5.9%	*	
PAEDIATRIC RESPIRATORY MEDICINE	7	0.7%	0	
PAEDIATRIC SURGERY	0		*	
PAEDIATRIC TRAUMA AND ORTHOPAEDICS	29	2.8%	11	2.0
PAEDIATRIC UROLOGY	*		0	
PAEDIATRICS	299	29.2%	0	
PLASTIC SURGERY	0		*	
REHABILITATION	27	2.6%	0	
RESPIRATORY MEDICINE	*		*	
RESPIRATORY PHYSIOLOGY	*		0	
RHEUMATOLOGY	0		*	
SPEECH AND LANGUAGE THERAPY	8	0.8%	0	
TRAUMA & ORTHOPAEDICS	33	3.2%	26	4.6
UPPER GASTROINTESTINAL SURGERY	*		0	
UROLOGY	*		*	
VASCULAR SURGERY	*		0	
Unrecorded	24	2.3%	0	
Total	1,025		562	

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

#### 4.4 Neonatal patients

The term neonatal (newborn) refers to an infant in the first 28 days of life (the neonatal period). During 2018/19, there were 339 neonatal patients in North Cumbria. 38.9% of patients had a primary diagnosis of low birth weight. (See Tables 6 and 7).

Low birth weight is defined as a birth weight of less than 2500g. Low birth weight increases the risk of childhood mortality and developmental problems. It is associated with poorer health in later life. At a population level there are inequalities in low birth weight and a high proportion

of low birth weight births could indicate lifestyle issues of the mothers and/or issues with the maternity services (Source: Public Health England).

Table 6: North Cumbria CCG: Neonatal care level of patients; Hospital activity; 2018/19

Neonatal Level of Care	Number of spells
Level 1 intensive care	7
Level 2 intensive care	*
Special care	*
Not applicable**	323
Not known	*
Total	339

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5. \*\* A still birth or the episode of care does not involve a neonate during all, or part, of the duration of the episode.

Table 7: North Cumbria CCG: Primary diagnosis of patients with a neonatal spell; 2018/19

Primary diagnosis	Number of spells	% of spells
P070: Extremely low birth weight	6	1.8%
P071: Other low birth weight	132	38.9%
P073: Other preterm infants	35	10.3%
P220: Respiratory distress syndrome of newborn	10	2.9%
P221: Transient tachypnoea of newborn	16	4.7%
P229: Respiratory distress of newborn, unspecified	13	3.8%
P288: Other specified respiratory conditions of newborn	20	5.9%
P599: Neonatal jaundice, unspecified	6	1.8%
P704: Other neonatal hypoglycaemia	6	1.8%
Other (Suppressed as <6 spells)	95	28.0%
Total	339	

Source: NHS North of England Commissioning Support Unit [excluding uncoded and non-submitting practices). \*Data suppressed where numbers are below 5.

## 5. South Cumbria (part of Morecambe Bay Clinical Commissioning Group)

The total GP patient population in Morecambe Bay Clinical Commissioning Group is 349,658; the 0-25 years population is 100,839, accounting for 28.8% (NHS Digital, GP Patient Population, October 2019).

The South Cumbria (part of Morecambe Bay Clinical Commissioning Group) total GP patient population is 198,697; the 0-25 years population is 50,210, accounting for 25.3% (*based on location of the GP Practice*).

## 5.1 Registered patients on the Learning Disability and Severe Mental Illness Registers – South Cumbria

GP Practices across Cumbria (and England) keep registers of their patients by a range of conditions and needs, included are a Learning Disabilities Register; and a SMI Register (including patients with schizophrenia, bipolar affective disorder and other psychoses and other patients on lithium therapy). Not all patients on LD or SMI Registers will have an identified SEND need; furthermore, not all children and young people with SEND will be on patient Registers.

In South Cumbria, there are 282 patients aged 0-25 years on Learning Disabilities GP Practice Registers (as at October 2019); there are 77 patients aged 0-25 years on Severe Mental Illness GP Practice Registers. The greatest proportion of children and young people on the LD Register are aged 21-25 years, accounting for 50.0%; the greatest proportion of children and young people on the SMI Register are aged 21-25 years, accounting for 68.8%. (See Table 8).

In 2018/19, in South Cumbria, 50.4% of people aged over 14 years who are identified as having a learning disability on GP Practice Registers, received an annual health check.

Table 8: South Cumbria: Patients aged 0-25 years on the Learning Disability Register & Severe Mental Illness Register by age; October 2019

Age Band	Learning Disabilities Register		Severe Mental Illness Register	
	Number	%	Number	%
1-10 years	14	5.0%	*	0
11-15 years	49	17.4%	*	0
16-20 years	78	27.7%	22	28.6%
21-25 years	141	50.0%	53	68.8%
Total	282		77	

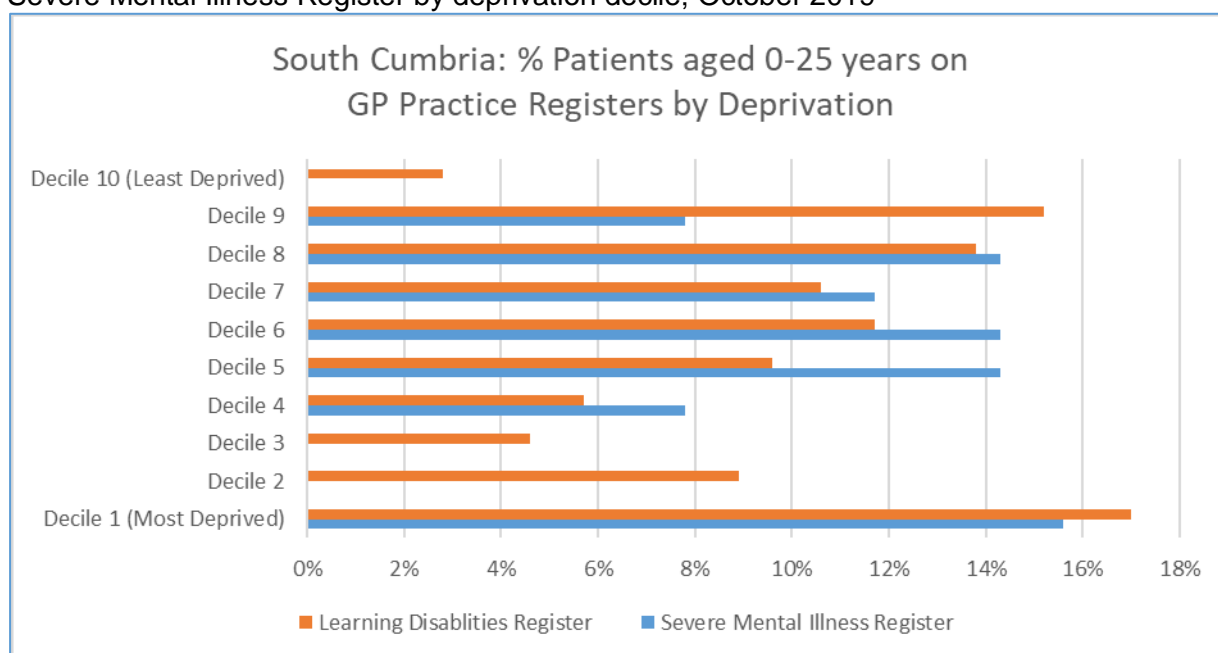
Source: Midlands and Lancashire Commissioning Support Unit. \*Data suppressed where numbers are below 5

The greatest proportion (17%) of patients on LD GP Registers live in the most deprived areas in South Cumbria (decile 1); conversely, a similar proportion (15.2%) of patients live in the least deprived areas in South Cumbria. [Numbers are relatively low and should therefore be used with caution when trying to draw conclusions]. (See Figure 3).

The greatest proportion (15.6%) of patients on SMI GP Registers live in the most deprived areas in South Cumbria (decile 1); conversely, similar proportions of patients live in the least deprived areas in South Cumbria. [As above, numbers are relatively low and should therefore

be used with caution when trying to draw conclusions]. (See Figure 3). This differs to the picture of children and young people within Special Educational Needs and Disabilities in Cumbria with 14% living in areas that are the 10% most deprived nationally; furthermore, 25.4% live in areas within the 20% most deprived nationally.

Figure 3: South Cumbria: Patients aged 0-25 years on the Learning Disability Register and Severe Mental Illness Register by deprivation decile; October 2019



Source: Midlands and Lancashire Commissioning Support Unit

## 5.2 Patients with a recorded diagnosis of Learning Disabilities or Severe Mental Illness in primary care and associated acute activity – South Cumbria

Table 9: South Cumbria: Number: Hospital activity of patients on LD and SMI Registers, aged 0-25; Aug 2017 – July 2019

	Learning Disability Register patients	Sever Mental Illness Register patients
Outpatient appointments	977	382
A&E	202	145
Urgent Care	*	*
Inpatient planned	99	59
Inpatient unplanned	66	55
Inpatient other	*	*

Source: Midlands and Lancashire Commissioning Support Unit. \*Data suppressed where numbers are below 5.

Outpatient attendance refers to a patient who attends a hospital appointment for treatment without staying overnight; attendance is a count of the number of appointments which were attended by the patient.



Between August 2017-July 2019, there were a total of 977 outpatient attendances by patients on Learning Disability Registers; the greatest proportion of those were for the paediatrics function (medical conditions affecting infants, children and young people) accounting for 18.4%. During the same period, there were a total of 382 outpatient attendances by patients on Severe Mental Illness Registers; the greatest proportion of those were for the general surgery function, accounting for 48.2%. (See Table 10).

Table 10: South Cumbria: Learning Disability & Severe Mental Illness Registered patients - Outpatient Activity; Aug 2017 – July 2019)

Treatment Function	Learning Disability Register patients		Severe Mental Illness Register patients	
	Number	%	Number	%
ADULT MENTAL ILLNESS			9	2.4%
AUDIOLOGY	24	2.5%		
CARDIOLOGY	7	0.7%		
CHILD AND ADOLESCENT PSYCHIATRY	19	1.9%	8	2.1%
CLINICAL GENETICS	14	1.4%		
CLINICAL NEUROPHYSIOLOGY	8	0.8%		
CLINICAL PHYSIOLOGY	19	1.9%		
COLORECTAL SURGERY			8	2.1%
DERMATOLOGY	12	1.2%	11	2.9%
DIABETIC MEDICINE	22	2.3%		
DIETETICS	38	3.9%		
Ear, Nose & Throat	56	5.7%		
ENDOCRINOLOGY	13	1.3%	6	1.6%
GASTROENTEROLOGY	6	0.6%		
GENERAL SURGERY			184	48.2%
GYNAECOLOGY	13	1.3%	16	4.2%
LEARNING DISABILITY	10	1.0%		
MAXILLO-FACIAL SURGERY	6	0.6%		
MIDWIFERY SERVICE			22	5.8%
NEUROLOGY	88	9.0%	14	3.7%
OBSTETRICS	13	1.3%	7	1.8%
OPHTHALMOLOGY	70	7.2%	7	1.8%
ORTHODONTICS	33	3.4%		
PAEDIATRIC CARDIOLOGY	20	2.0%		
PAEDIATRIC DIABETIC MEDICINE	7	0.7%		
PAEDIATRIC GASTROENTEROLOGY	10	1.0%		
PAEDIATRIC NEUROLOGY	17	1.7%		
PAEDIATRIC OPHTHALMOLOGY	26	2.7%		
PAEDIATRIC RESPIRATORY MEDICINE	7	0.7%		
PAEDIATRIC SURGERY	13	1.3%		
PAEDIATRIC TRAUMA AND ORTHOPAEDICS	25	2.6%		
PAEDIATRICS	180	18.4%	9	2.4%
PHYSIOTHERAPY	26	2.7%	11	2.9%
PLASTIC SURGERY			16	4.2%
REHABILITATION SERVICE	39	4.0%		
RESPIRATORY MEDICINE	26	2.7%		
RHEUMATOLOGY	9	0.9%		
TRAUMA & ORTHOPAEDICS	30	3.1%	7	1.8%
OTHER (Suppressed - Less than 6)	71	7.3%	47	12.3%
Total	977		382	

Source: Midlands and Lancashire Commissioning Support Unit.

### 5.3 Neonatal patients – South Cumbria

The term neonatal (newborn) refers to an infant in the first 28 days of life (the neonatal period). During 2018/19, there were 59 neonatal patients in South Cumbria, of which, 61% received special care. 37.3% of patients had a primary diagnosis of low birth weight. (See Tables 11 and 12).

Low birth weight is defined as a birth weight of less than 2500g. Low birth weight increases the risk of childhood mortality and developmental problems. It is associated with poorer health in later life. At a population level there are inequalities in low birth weight and a high proportion of low birth weight births could indicate lifestyle issues of the mothers and/or issues with the maternity services (Source: Public Health England).

Table 11: South Cumbria: Neonatal care level of patients; 2018/19

Neonatal Level of Care	Number of spells	% of spells
Level 1 intensive care	15	25.4%
Level 2 intensive care	8	13.6%
Special care	36	61.0%
Total	59	

Source: Midlands and Lancashire Commissioning Support Unit.

Table 12: South Cumbria: Primary diagnosis of patients with a neonatal spell; 2018/19

Primary diagnosis	Number of spells	% of spells
P071: Other low birth weight	22	37.3%
P220: Respiratory distress syndrome of newborn	8	13.6%
Other (suppressed - less than 6)	29	49.2%
Total	59	

Source: Midlands and Lancashire Commissioning Support Unit.

## 6. Community health, mental health and learning disability services – North and South Cumbria

Community health services, Child & Adolescent Mental Health services; and Children's Learning Disability services do not currently record patients with SEND, however, from records kept locally, data is available for children who have an EHCP (from 2017/18). Data provided below is for children aged 0-18 years.

In 2018/19, in Cumbria there were a total of 26,109 referrals (including children's community services, Child & Adolescent Mental Health services; and Children's Learning Disability services). Of those referrals, 1,320 were for children with an EHCP accounting for 5.1% of all

referrals. *[N.B. an individual may have more than one referral therefore this is not a count of individuals but of the total number of referrals]*. Compared to the previous year when EHCP records began, the number of referrals with an EHCP had increased from 766 in 2017/18 to 1,320 in 2018/19; furthermore, the proportion of referrals with an EHCP had increased from 2.9% in 2017/18, to 5.1% in 2018/19. *[N.B increases are likely to be due to better recording]*.

In 2018/19, there were 21,041 referrals for community services; of those, 827 had an EHCP, accounting for 3.9%. There were 4,254 referrals into Child & Adolescent Mental Health Services (CAMHS); of those, 202 were for children with an EHCP, accounting for 4.7% of all referrals. Compared to the previous year, the number of referrals into CAMHS for children with an EHCP had increased from 110 in 2017/18 to 202 in 2018/19. (See Table 13).

In 2018/19, the services with the greatest proportion of children with an EHCP were the Children's Learning Disability service, accounting for 35.7%; and Children's Occupational Therapy, accounting for 21.7%. (See Table 13).

Table 13: Total referrals into children's services; and referrals with an EHCP; **Cumbria** (North and South Cumbria combined); 2018/19

Speciality	Total Referrals		Referrals with an EHCP		% Referrals with an EHCP	
	2017/18	2018/19	2017/18	2018/19	2017/18	2018/19
Total referrals	26,587	26,109	766	1,320	2.9%	5.1%
<b>Community services</b>						
All referrals	21,984	21,041	485	827	2.2%	3.9%
Audiology	2,097	2,125	26	62	1.2%	2.9%
Children Looked After	442	164	10	5	2.3%	3.0%
Children's Community Nursing	880	973	43	162	4.9%	16.6%
Children's Continence	452	452	26	53	5.8%	11.7%
Children's Occupational Therapy	541	678	74	147	13.7%	21.7%
Children's Physiotherapy	1,050	1,073	43	82	4.1%	7.6%
Children's Speech and Language Therapy	1,375	1,624	61	105	4.4%	6.5%
Community Paediatrics	1,266	1,559	45	77	3.6%	4.9%
Health Visiting	9,559	9,914	8	12	0.1%	0.1%
Specialist Development Nursing	77	112	*	*	2.6%	1.8%
Strengthening Families	4,245	2,367	147	120	3.5%	5.1%
<b>Mental Health</b>						
CAMHS	3,846	4,254	110	202	2.9%	4.7%
<b>Learning Disability</b>						
Children's Learning Disability	757	814	171	291	22.6%	35.7%

Source: North Cumbria Integrated Care NHS Foundation Trust. \*Numbers below 5 are suppressed.

There is currently variation in waiting times for CAMHS in different areas across the county for *all* children. 76.1% of *all* children wait within timescale (under 18 weeks) for CAMHS services; in North Cumbria it is 82.3% and in South Cumbria it is 65.9%.

For children in Cumbria with an EHCP, 69.0% are waiting within timescale (under 18 weeks); in North Cumbria this increases to 80.0%; in South Cumbria it is just 41.7%. (See Table 14).

Table 14: Proportion of children waiting within timescale (under 18 weeks) for CAMHS services; North and South Cumbria; Apr-Sep 19

	Cumbria	North Cumbria	South Cumbria
Proportion of <u>all</u> children and young people waiting less than 18 weeks	76.1%	82.3%	65.9%
Proportion of children and young people with an EHCP waiting less than 18 weeks	69.0%	80.0%	41.7%

Source: North Cumbria Integrated Care NHS Foundation Trust

Data relating to waiting times for children and young people with ASD is not currently available.

In 2018/19, in North Cumbria, there were a total of 17,059 referrals (including children's community services, Child & Adolescent Mental Health services; and Children's Learning Disability services). Of those referrals, 1,091 were for children with an EHCP accounting for 6.4% of all referrals. The services with the greatest proportion of children with an EHCP are Children's Learning Disability (41.8%); and Children's Occupational Therapy (27.9%). (See Table 14).

In 2018/19, in South Cumbria, there were a total of 9,050 referrals (including children's community services, Child & Adolescent Mental Health services; and Children's Learning Disability services). Of those referrals, 229 were for children with an EHCP accounting for 2.5% of all referrals. *[NB. Low proportions in South Cumbria compared to North Cumbria may be due to recording issues and may not fully reflect need]*. The services with the greatest proportion of children with an EHCP are Children's Learning Disability (20.2%); and Children's Occupational Therapy (10.4%). (See Table 15).

Table 15: Total referrals into services; and referrals with an EHCP; **North and South Cumbria**; 2018/19

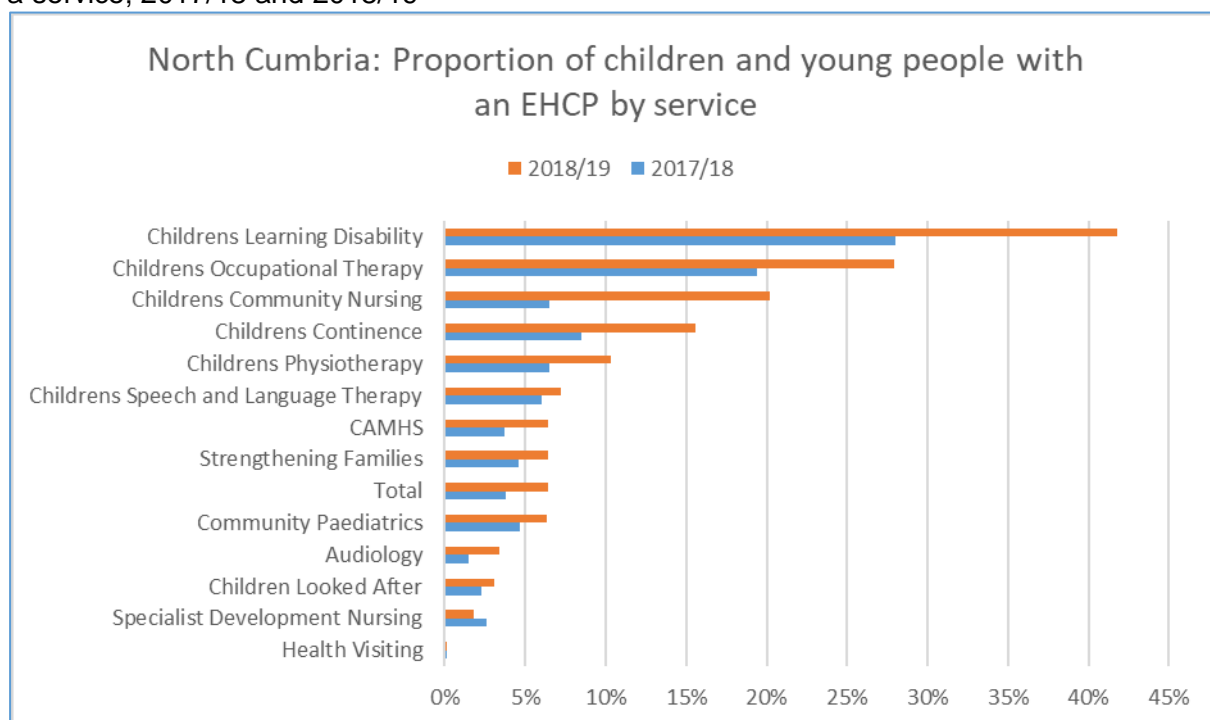
Speciality	North Cumbria			South Cumbria		
	Total Referrals	Referrals with an EHCP	% Referrals with an EHCP	Total Referrals	Referrals with an EHCP	% Referrals with an EHCP
Total referrals	17,059	1,091	6.4%	9,050	229	2.5%
<b>Community Services</b>						
All referrals	13,760	672	4.9%	7281	155	2.1%
Audiology	1,332	45	3.4%	793	17	2.1%
Children Looked After**	164	5	3.0%			
Children's Community Nursing	645	130	20.2%	328	32	9.8%
Children's Continence	283	44	15.5%	169	9	5.3%
Children's Occupational Therapy	437	122	27.9%	241	25	10.4%
Children's Physiotherapy	689	71	10.3%	384	11	2.9%
Children's Speech and Language Therapy	1,152	83	7.2%	472	22	4.7%
Community Paediatrics	1,011	64	6.3%	548	13	2.4%
Health Visiting	6,404	8	0.1%	3,510	*	0.1%
Specialist Development Nursing***	112	*	1.8%			
Strengthening Families	1,531	98	6.4%	836	22	2.6%
<b>Mental Health</b>						
CAMHS	2,713	174	6.4%	1,541	28	1.8%
<b>Learning Disability</b>						
Children's Learning Disability	586	245	41.8%	228	46	20.2%

Source: North Cumbria Integrated Care NHS Foundation Trust. \*\*Children Looked After is a countywide service and therefore data for South Cumbria is not available. \*\*\*Specialist Development Nursing service is provided in North Cumbria only.

In North Cumbria, compared to the previous year when EHCP records began, the proportion of referrals with an EHCP had increased from 3.8% in 2017/18 to 6.4% in 2018/19. *[N.B increases are likely to be due to better recording]*. The greatest proportional increases were for Children's Learning Disability and Community Nursing services.

In North Cumbria, the services with the greatest proportions of children with EHCPs are Children's Learning Disability, accounting for 41.8%; and Children's Occupational Health, accounting for 27.9%. (See Figure 4).

Figure 4: North Cumbria: Proportion of children and young people with an EHCP in receipt of a service; 2017/18 and 2018/19

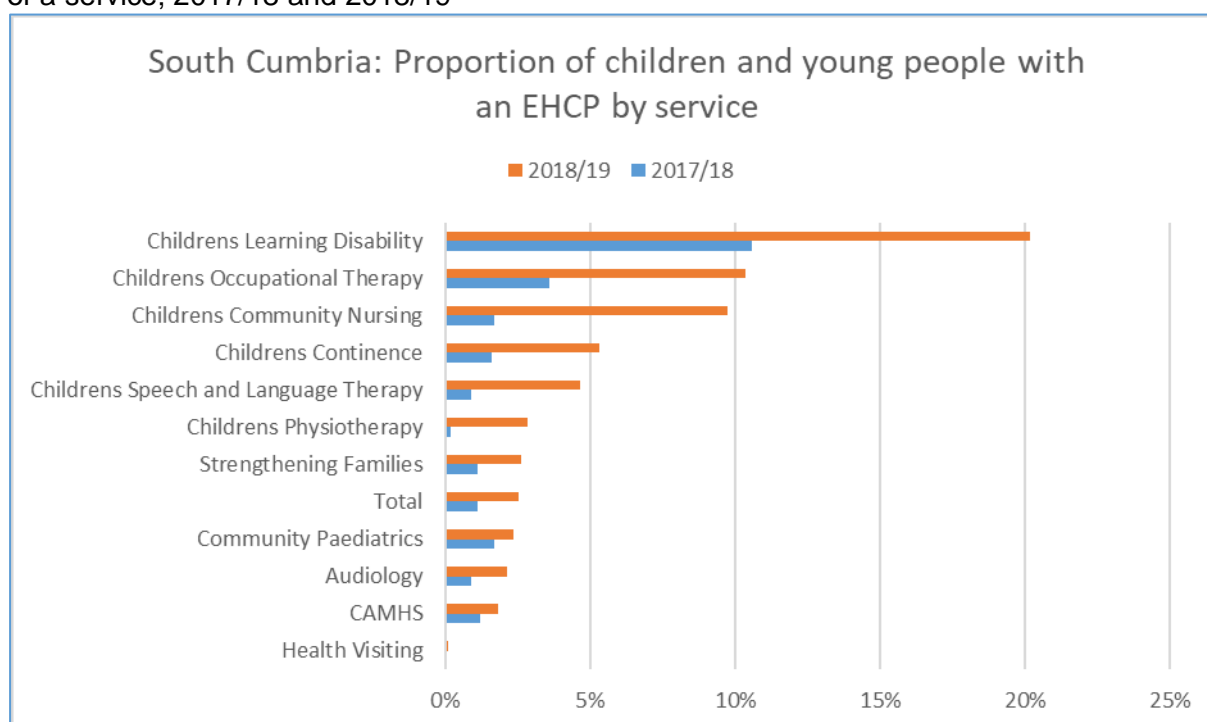


Source: North Cumbria Integrated Care NHS Foundation Trust

In South Cumbria, compared to the previous year when EHCP records began, the proportion of referrals for children with an EHCP had increased from 1.1% in 2017/18 to 2.5% in 2018/19. *[N.B increases are likely to be due to better recording]*. The greatest proportional increases were for Children's Learning Disability service and Community Nursing services.

In South Cumbria, the services with the greatest proportions of children with EHCPs are Children's Learning Disability, accounting for 20.2%; and Children's Occupational Health, accounting for 10.4%. (See Figure 5).

Figure 5: South Cumbria: Proportion of children and young people with an EHCP in receipt of a service; 2017/18 and 2018/19



Source: North Cumbria Integrated Care NHS Foundation Trust

In 2018/19, there were 555 unique patients/children with an EHCP for community services, accounting for 22.9% of all referrals. There were 149 unique patients/children with an EHCP for Child & Adolescent Mental Health services, accounting for 15.2%; and there were 246 unique patients/children with an EHCP for Children's Learning Disability services. (See Table 16).

Table 16: Unique patients – children with an EHCP; North and South Cumbria combined; 2018/19

Speciality	Patients with an EHCP		% patients with an EHCP	
	2017/18	2018/19	2017/18	2018/19
<b>Community Services</b>				
All referrals	<b>312</b>	<b>555</b>	<b>16.8%</b>	<b>22.9%</b>
Audiology	24	57	1.3%	2.3%
Children Looked After	9	5	0.5%	0.2%
Children's Community Nursing	40	129	2.2%	5.3%
Children's Continence	26	46	1.4%	1.9%
Children's Occupational Therapy	67	133	3.6%	5.5%
Children's Physiotherapy	42	74	2.3%	3.1%
Children's Speech and Language Therapy	56	98	3.0%	4.0%
Community Paediatrics	42	75	2.3%	3.1%
Health Visiting	7	12	0.4%	0.5%
Specialist Development Nursing	*	*	0.1%	0.1%
Strengthening Families	129	108	7.0%	4.5%
<b>Mental Health services</b>				



CAMHS	89	149	4.8%	6.1%
Learning Disability				
Children's Learning Disability	139	246	7.5%	10.1%

Source: North Cumbria Integrated Care NHS Foundation Trust. *\*Numbers below 5 are suppressed.*

## 7. Healthy Child Programme

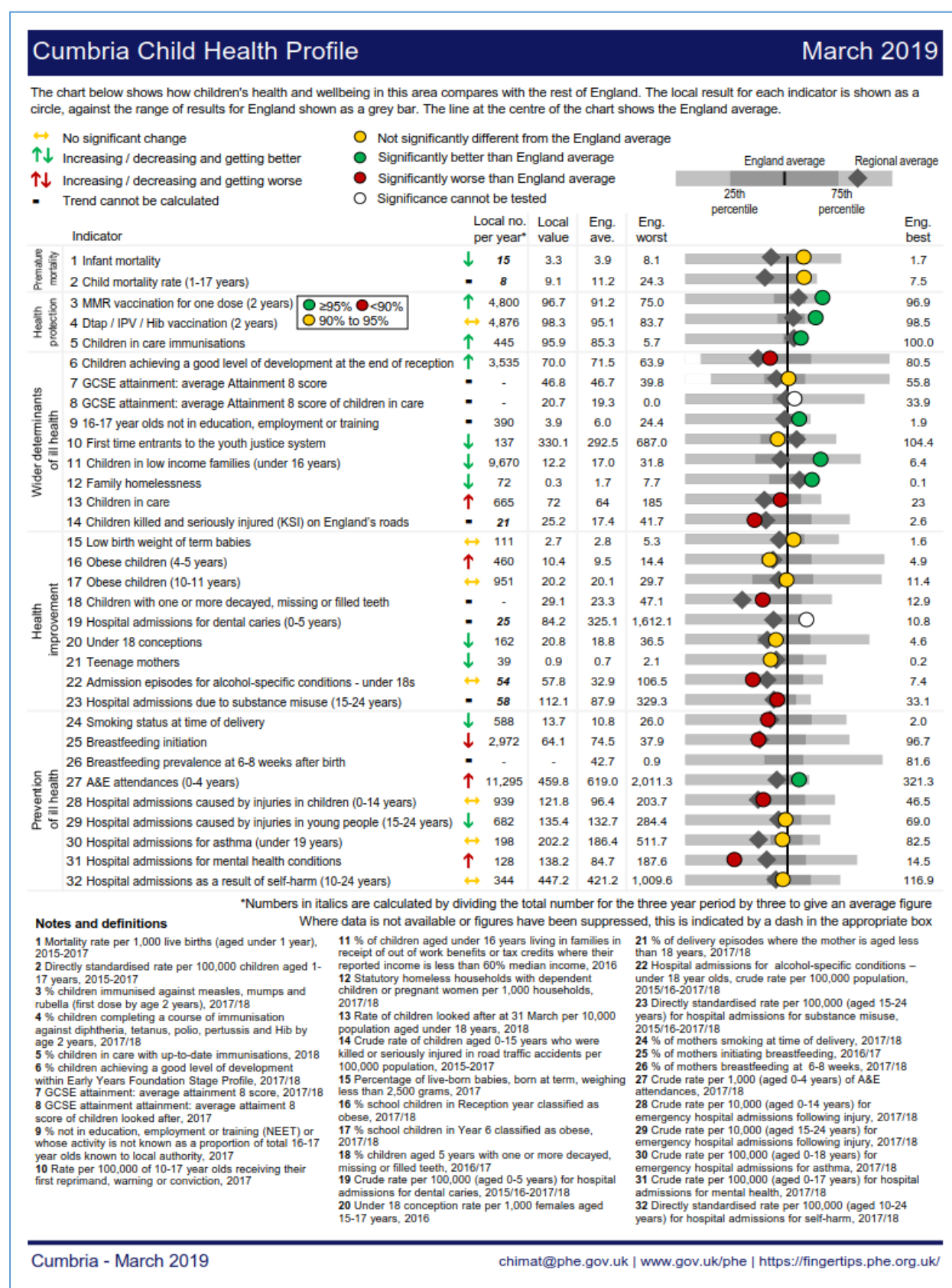
Local authorities, through Public Health, have a statutory duty to deliver the Healthy Child Programme for children and young people aged 0-19 years. The Programme delivers services through health visitors for those aged 0-5 years; and through school nursing services for those aged 5-19 years. The Programme brings together health, education and other partners to deliver services for prevention and support, with an aim of identifying families that are in need of additional support and children who are at risk of poor outcomes. The Healthy Child Programme is delivered by North Cumbria Integrated Care NHS Foundation Trust. New service delivery is commencing in January 2020; data will be available from then onwards.

## 8. Child Health

Figure 6 below presents how children's health and wellbeing in Cumbria (*all* children) compares with the rest of England. Overall, when comparing to England, the health and wellbeing of children in Cumbria is mixed. Levels of childhood obesity in Reception age (4-5years) children are worse than England (26.0% compared to 22.4%); levels are similar to England for children in Year 6 (10-11years), 35.3% compared to 34.3%. Despite this, there are significant variations across the districts.

In Cumbria, rates of child inpatient admissions for mental health conditions are worse than the national average at 138.2 per 100,000 compared to 84.7 per 100,000. Rates of admission episodes for alcohol-specific conditions in under 18s are worse than the national average, as well as hospital admissions due to substance misuse; and hospital admissions caused by injuries in children.

Figure 6: Cumbria Health Profile, Public Health England, March 2019



Source: Public Health England

## 9. Further information

North Cumbria Clinical Commissioning Group: <http://northcumbriaccg.nhs.uk/index.aspx>

Morecambe Bay Clinical Commissioning Group: <https://www.morecambebayccg.nhs.uk/>

Cumbria County Council – Integrated Care Community Profiles:

<https://www.cumbriaobservatory.org.uk/health-social-care/health-social-care-further-information/>

North Cumbria Integrated Care NHS Foundation Trust: <https://www.ncic.nhs.uk/>

South

Lancashire and South Cumbria NHS Foundation Trust: <https://www.lscft.nhs.uk/>

Cumbria, Northumberland Tyne and Wear: <https://www.cntw.nhs.uk/>

Office for National Statistics – Geography: <http://geoportal.statistics.gov.uk/>

NHS Technical Guidance (definitions): <https://www.england.nhs.uk/publication/technical-guidance-for-nhs-planning-201718-and-201819/>

NHS Statistics: <https://www.england.nhs.uk/statistics/>

GP Practice Patient Registers/Quality and Outcomes Framework: <https://digital.nhs.uk/data-and-information/publications/statistical/quality-and-outcomes-framework-achievement-prevalence-and-exceptions-data>

Healthy Child Programme 0-19years: <https://www.gov.uk/government/publications/healthy-child-programme-0-to-19-health-visitor-and-school-nurse-commissioning>

Child Health Profiles, Public Health England: <https://fingertips.phe.org.uk/profile/child-health-profiles>