



Early Childhood and Family Service Consultation Data Pack



Introduction

This data pack sets out the evidence to support why we need to have an Early Childhood and Family Service in Norfolk

We have provided information about:

- What we are doing now
 - What else is available for families
 - Why do we need a Early Childhood and Family Service (deprivation, population, education, lifestyle, physical and mental health)
 - Outcomes for Children and Families
 - Service Locations
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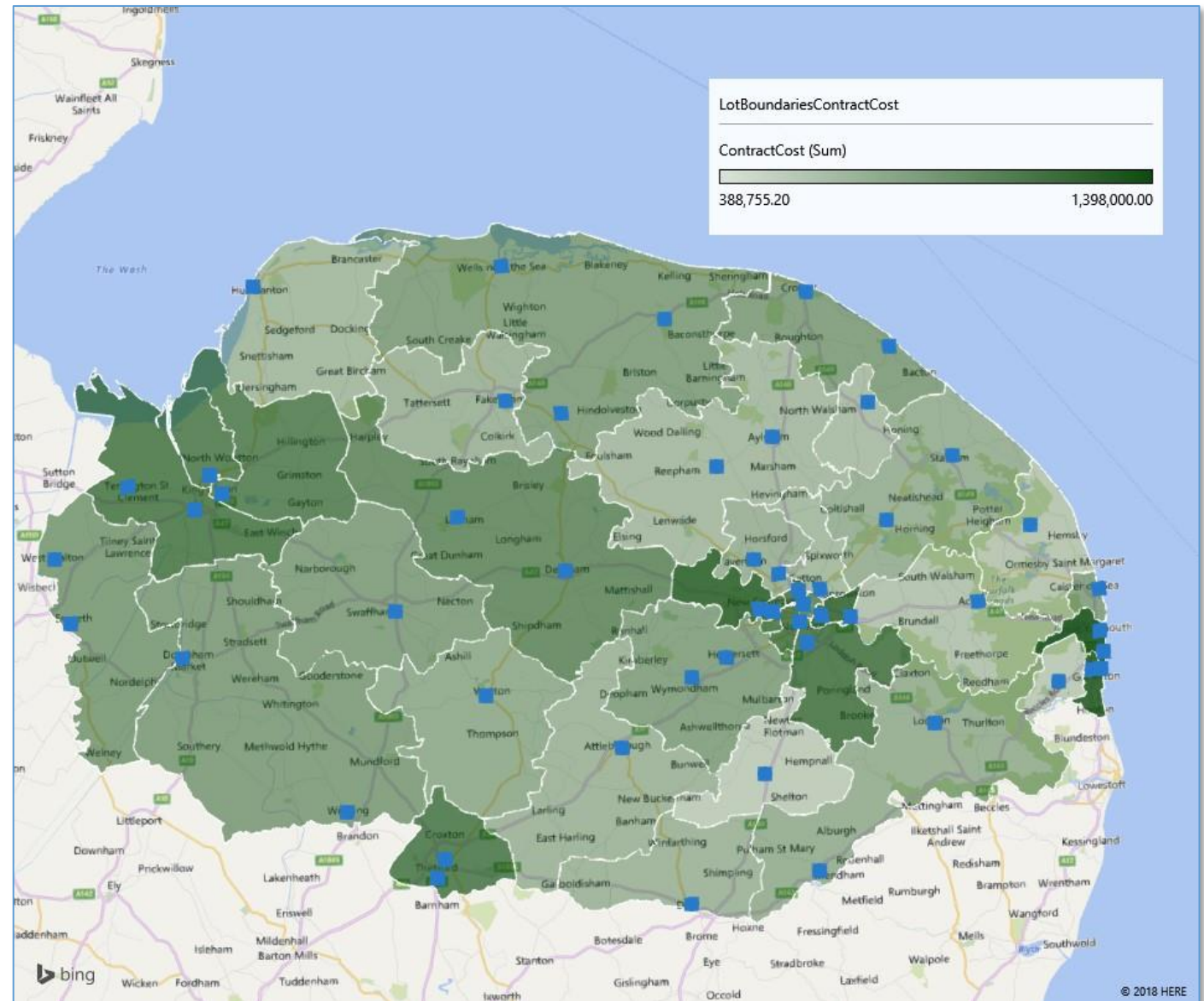


Current Model of Norfolk children's centres



Children's centres: Reach areas and budgets

- Service is focussed on 0-5s and their parents.
- A mix of universal and targeted delivery across the continuum of need
- 36 commissioning 'Lots' (groups)
- 53 designated children's centres
- 12 Providers (mix of schools, national and local charities and an NHS Provider)
- Initially commissioned on a £12m budget (2012-2016)
- Extended contracts on a £10m budget (2016 – 2019)
- In contract savings of £2m (2018 -2019)
- Final commissioning budget of £5m pa (2019+)





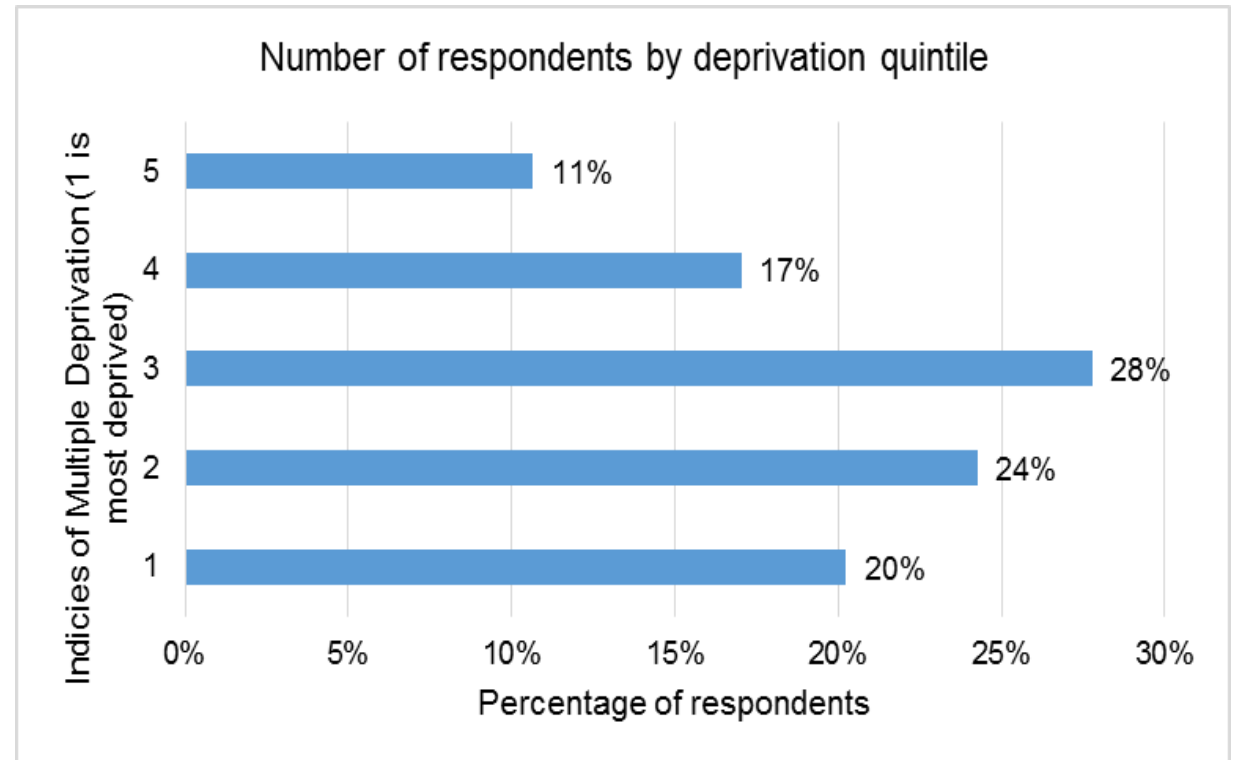
Use of Children's centres

- There are over 47,000 children aged between 0-5 years old in Norfolk.
 - 41,450 are currently registered with their local children's centre service
 - 33,420 families currently have a child registered with their local children's centre service.
 - 23,000 children and their families have used their children's centre service in the past 12 months - either for advice and information, to attend groups or for more targeted support.
 - On average there are over 800 families receiving more targeted support at any one time.
 - 24% of Norfolk's most deprived children aged under five have had no contact with children's centres.
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Children's centre Parental Satisfaction Survey 2017 (CC Survey 2017)

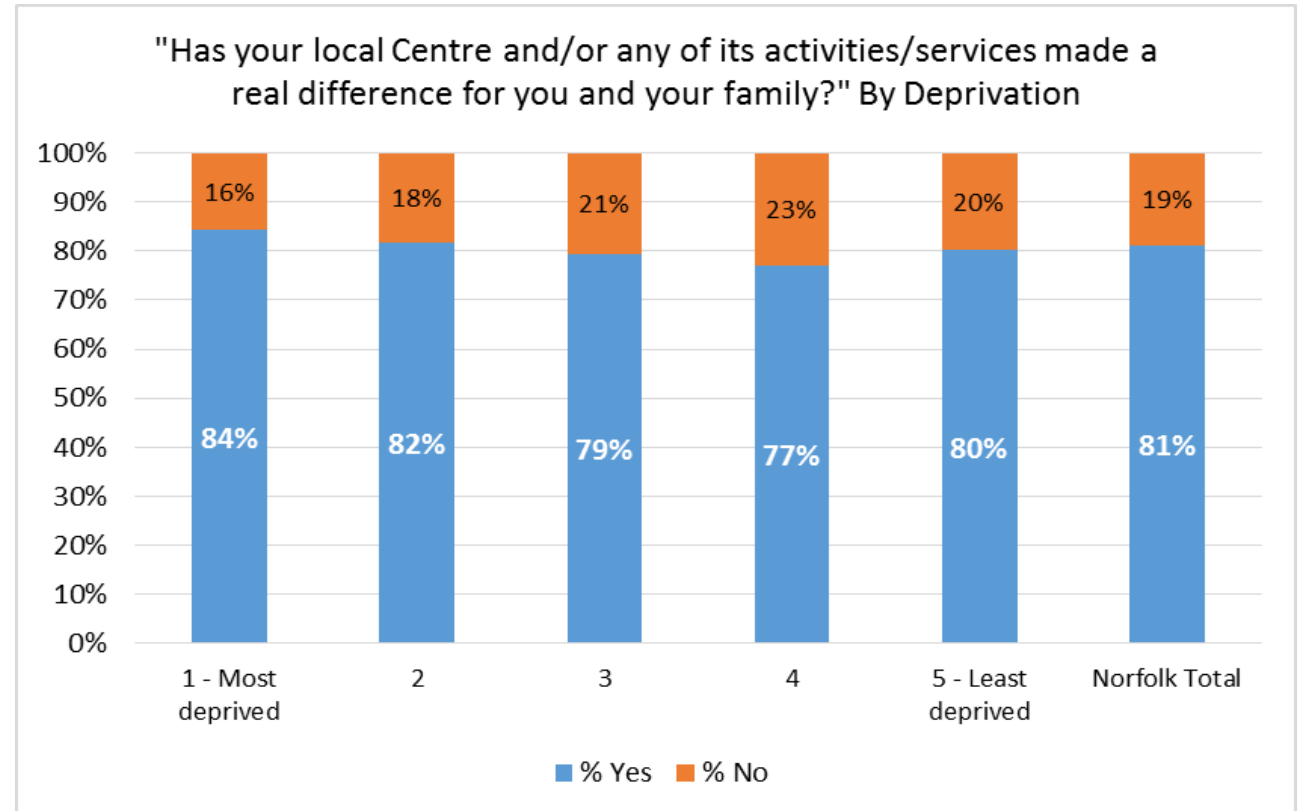
- Around 6,500 responses to the survey
- 80% of those responding to the survey had a child aged 0-2.
- There were 5,700 respondents who gave a postcode that could be linked to the deprivation rating in their area.
- Overall there were nearly twice as many respondents to the survey from the most deprived group compared to the least deprived (20% were from the most deprived group, just 11% from the least deprived).





Do children's centres make a difference?

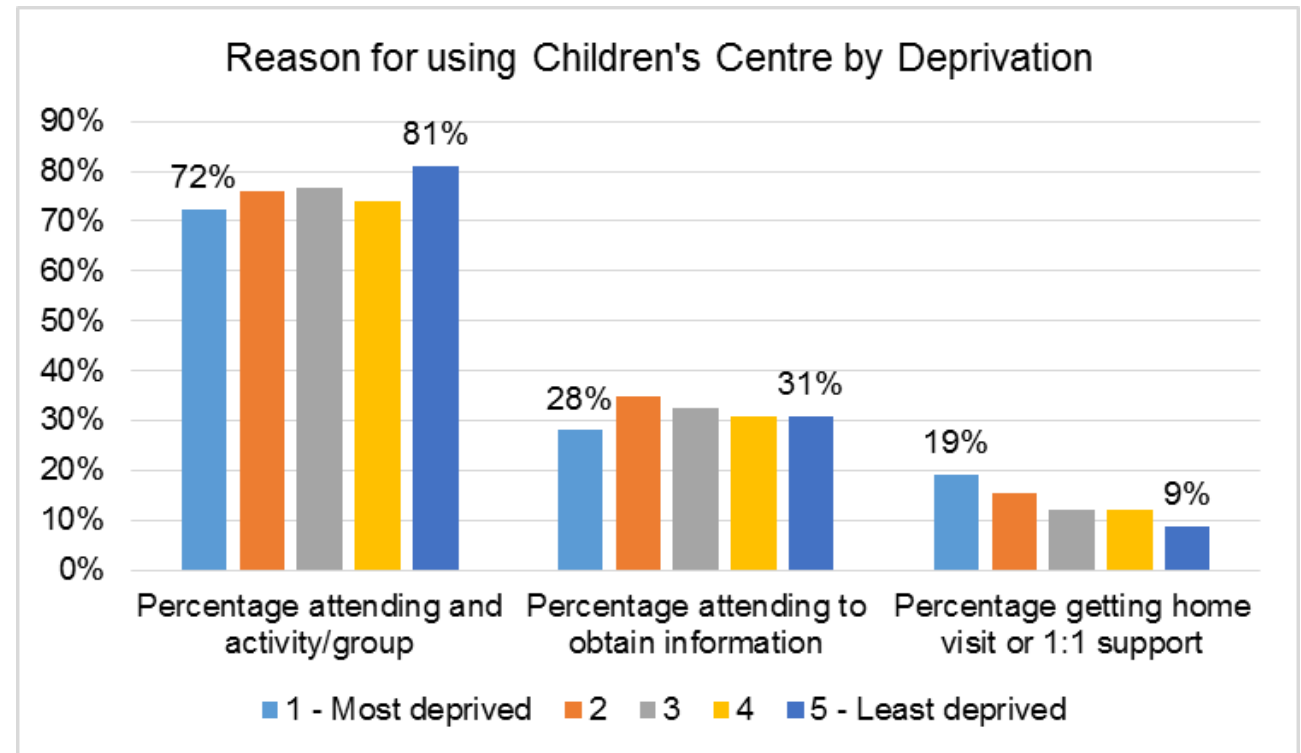
- Overall four in five people agree to the question "Has your local centre and/or any of its activities/services made a real difference for you and your family?"
- 81% say 'yes' and 19% 'no'. The proportion saying yes is slightly higher among the most deprived from all parts of group (84%) than the least deprived group (80%). Showing the services are generally equally valued by people Norfolk.





Why do people attend children's centres?

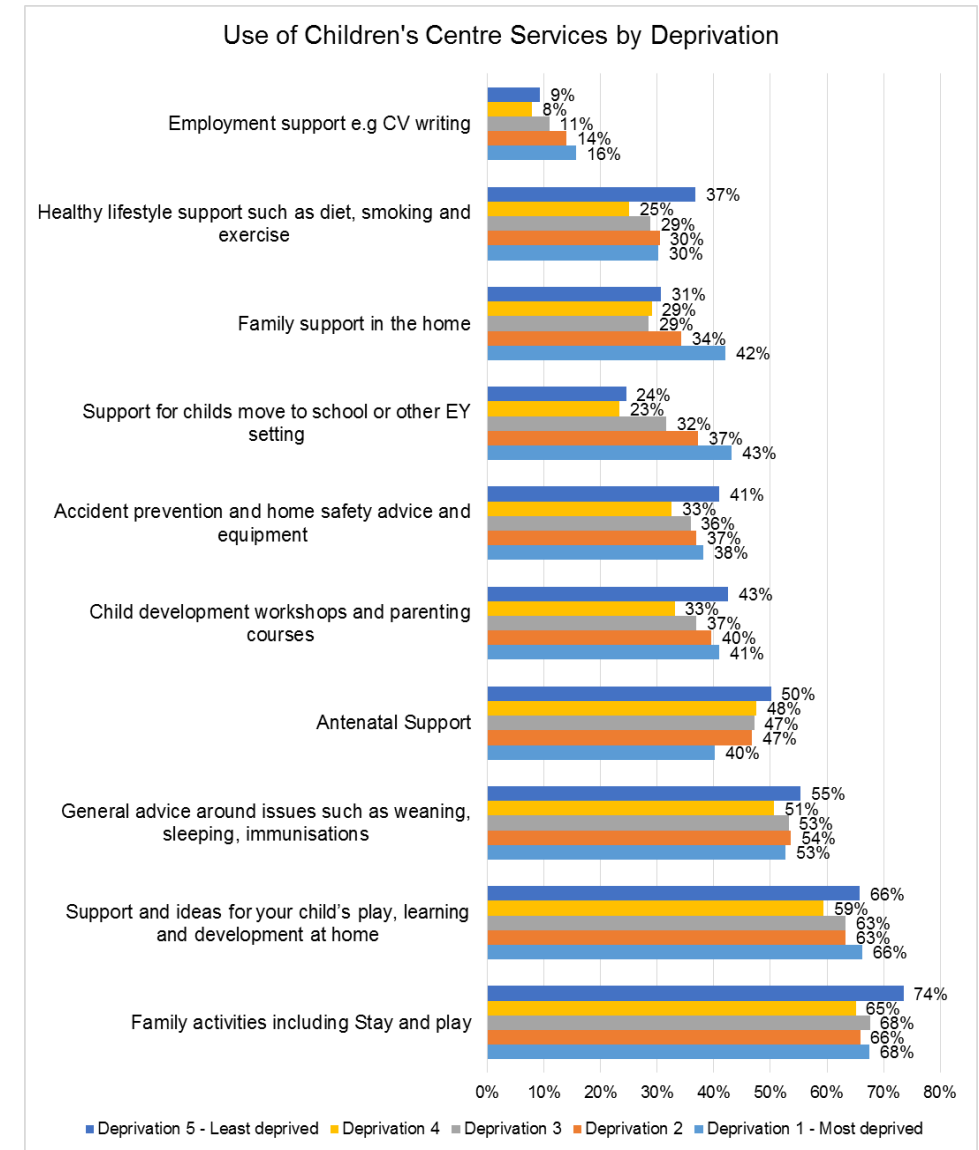
- The majority of people attending children's centres do so to attend a group or activity, overall this was 75% of respondents - but 81% of people from the least deprived areas and 72% from the most deprived.
- The least deprived group are also slightly more likely to say they have attended the centre to 'obtain information' (31% compared to 28%).
- Whereas the most deprived group are more likely to say they have had 1:1 support (19% of the most deprived and only 9% of the least deprived).
- So it seems that overall **the most intensive support is going to people in the most deprived areas.**





What services are used?

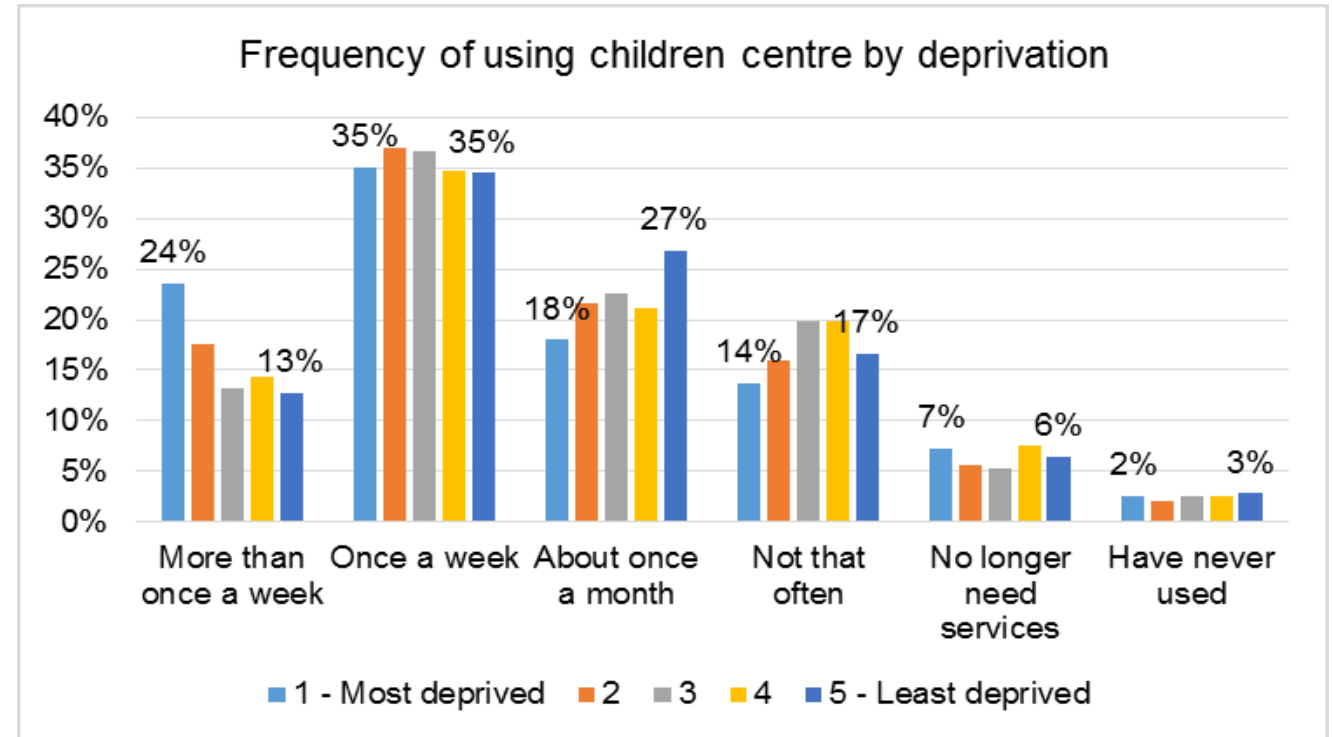
- The most used services are “family activity including stay and play” (68% used) and “Support and ideas for your child’s play, learning and development at home” (65% used).
- People from the most deprived areas are far more likely to say that they have used services such as “support to move to school or other EY setting” (43% of most deprived, just 24% of least deprived) and ‘family support in the home’ (42% of most deprived compared to 31% of least deprived).
- People in the least deprived areas report greater use of activities such as “Family activities including stay and play” (74% of least deprived compared to 68% of most deprived) and “Healthy Lifestyle support such as diet, smoking and exercise” (37% of least deprived compared to 30% of most deprived).
- Satisfaction with these services ranges from 94% satisfied with “Employment support e.g. C.V. writing” to 99% satisfied with “Support and ideas for your child’s play, learning and development at home”. (This is people who answered they found the service satisfactory, good or excellent of all those who had used the service).





How often do people use children's centres?

- A quarter of the most deprived respondents use the children's centre more than once a week (24%) compared to one fifth of the least deprived (13%).
- The proportions saying they attend once a week is the same (35% attend once a week), and then the least deprived are more likely to say they attend about once a month 27% compared to 18% of the most deprived.
- So people in the most deprived areas do seem to use the centres more frequently.



Source – Norfolk CC Survey 2017



Any family can need support

However it is important to recognise that being in the least deprived group does not mean that a family does not need support from children's centres, this is a response from a mum living in one of the least deprived areas of Norfolk:

"I have attended several sessions whilst on maternity I would go twice a week. Attending weighing sessions where I was given lots of support with my son not gaining weight. I also went to the signing and play session. The ladies were so lovely and with my son being deaf it was so nice to go to. The Centre kept me going! It got me out of the house and with all the issues with my son it offered me so much support. It was my life-line."

And another parent living in one of the least deprived areas:

"Before attending this group I found it hard to go out. I now feel better about myself and my parenting thanks to Solihull."



Who is registered with children's centres?

Who is registered with children's centres?

Overall 87% of 0-5 are registered with children's centres (69% of those aged under one, 86% aged 1-2 and 92% aged 2-5).

Registration is fairly equal across the different deprivation quintiles – 88% of the most deprived and 86% of the least deprived.

Registration ranges from 86% in Breckland and South Norfolk to 90% in North Norfolk (87% in Great Yarmouth and King's Lynn & West Norfolk, 89% in Norwich and Broadland).

Of those registered how many are in 'priority groups'?

The following characteristics are identified in the children's centre database:

- For 23% of children one or both of their parents smoke (9,704 children)
- 18% of children live in a Workless Family (7,411 children).
- 9% of children are registered by a lone parent (3,612 children)
- 2.7% of parents disclose a disability at registration (1,134 children)
- For 1.6% English is an Additional Language (EAL) (668 children)
- 0.8% of parents are aged under 20 (parents of 341 children)



Families in priority groups by district

| District | Smoking Parents | Workless Household | Lone parent | Disabled Parent | English as Additional Language | Teenage Parent | Only male carer |
|--------------------|-----------------|--------------------|-------------|-----------------|--------------------------------|----------------|-----------------|
| Breckland | 26% | 16% | 8% | 2.7% | 0.8% | 0.7% | 0.2% |
| Broadland | 13% | 10% | 4% | 1.5% | 0.2% | 0.6% | 0.5% |
| Great Yarmouth | 24% | 21% | 10% | 2.4% | 0.1% | 1.7% | 0.9% |
| King's Lynn & West | 28% | 20% | 10% | 3.0% | 4.4% | 1.0% | 0.5% |
| North Norfolk | 27% | 16% | 10% | 4.1% | 0.2% | 0.6% | 0.2% |
| Norwich | 28% | 28% | 12% | 3.7% | 3.3% | 0.8% | 0.4% |
| South Norfolk | 17% | 10% | 6% | 1.9% | 0.4% | 0.5% | 0.2% |
| Out of County | 16% | 13% | 6% | 1.4% | 1.2% | 0.6% | 1.0% |
| Total | 23% | 18% | 9% | 2.7% | 1.6% | 0.8% | 0.4% |



Working with the priority groups

- 94% of registered children aged 0-5 have had some contact with a Children's Centre, 80% have had an 'engaging contact' and 66% have had 3 or more engaging contacts.
- On average those in the most deprived group have had 20 engaging contacts and those in the least deprived have had 14.
- The group with the greatest proportion of 'no engaging contacts' is the most deprived – 24% of the most deprived 0-5s have had no contact with children's centres compared to 19% of the least deprived. However, the most deprived are also the group who are most likely to have had more than 50 engaging contacts (7% compared to 5%).
- **So while fewer of the most deprived use children's centres, but those who do use children's centres use them more than the less deprived** Information from Children's Centre database as of May 2018. Engaging contacts are defined as a "two-way conversation" so this may be a group, a course or a conversation with staff. This does not include being sent a Children's Centre programme.

| Number of Engaging Contacts | 1 - Most deprived | 2 | 3 | 4 | 5 - Least deprived | Total |
|-----------------------------|-------------------|------|------|------|--------------------|-------|
| None | 24% | 18% | 18% | 17% | 19% | 20% |
| 0-2 | 18% | 14% | 11% | 14% | 12% | 14% |
| 3-5 | 16% | 19% | 22% | 22% | 22% | 20% |
| 6-8 | 9% | 10% | 10% | 12% | 11% | 10% |
| 9-11 | 6% | 7% | 8% | 7% | 7% | 7% |
| 12-14 | 4% | 5% | 5% | 5% | 5% | 5% |
| 15-17 | 3% | 4% | 4% | 4% | 4% | 4% |
| 18-20 | 3% | 3% | 3% | 3% | 3% | 3% |
| 21-23 | 2% | 2% | 2% | 3% | 2% | 2% |
| 24-26 | 2% | 2% | 2% | 2% | 2% | 2% |
| 27-29 | 1% | 2% | 1% | 1% | 1% | 1% |
| 30-32 | 1% | 1% | 1% | 1% | 1% | 1% |
| 33-35 | 1% | 1% | 1% | 1% | 1% | 1% |
| 36-38 | 1% | 1% | 1% | 1% | 1% | 1% |
| 39-41 | 1% | 1% | 1% | 1% | 1% | 1% |
| 42-44 | 1% | 1% | 1% | 1% | 0% | 1% |
| 45-47 | 1% | 1% | 1% | 1% | 1% | 1% |
| 48-50 | 1% | 1% | 1% | 1% | 1% | 1% |
| More than 51 | 7% | 7% | 6% | 4% | 5% | 6% |
| Total | 100% | 100% | 100% | 100% | 100% | 100% |



Working with the priority groups

- Teenage parents are not using the Children's Centre services as much as parents in general, 39% have 0-3 engaging contacts, compared to 24% of parents overall.
- Disabled parents use Children's Centre's more frequently than parents overall, 47% have had more than 12 engaging contacts compared to 33% of parents overall.
- Other groups, such as Lone Parents, EAL and Workless Families are very similar to average.
- So children's Centres seem to be more successful at engaging some priority groups (disabled parents) than others (teenage parents).

| Number of Engaging Contacts | Teenage Parent | Disabled Parents | Lone Parents | Workless Family | EAL Family | All parents |
|-----------------------------|----------------|------------------|--------------|-----------------|------------|-------------|
| <0 or (blank) | 18% | 7% | 8% | 10% | 9% | 9% |
| 0-2 | 21% | 11% | 14% | 14% | 15% | 15% |
| 3-5 | 26% | 18% | 20% | 21% | 27% | 23% |
| 6-8 | 10% | 10% | 11% | 12% | 14% | 12% |
| 9-11 | 6% | 8% | 8% | 7% | 7% | 8% |
| 12 to 29 | 13% | 24% | 22% | 20% | 15% | 20% |
| 30-50 | 2% | 10% | 7% | 7% | 5% | 7% |
| >51 | 3% | 12% | 10% | 8% | 7% | 7% |



Why don't families use children's centres?

| | Problem | Response |
|---------------------------------|--|--|
| Physical and Practical Barriers | Lack of knowledge about what was available – A parents said: “I didn’t come in the beginning because I didn’t know what was here.” | Improve the information available to parents |
| | Transport - particularly for families reliant on public transport and with pushchairs | Increase outreach Ensure hubs have good existing transport links and parking |
| | Having Children’s Centre within their local community encouraged them to participate and to access the services. | Help to build community capacity to support parents Provide a more agile service that is not tied to a building |



Why don't families use children's centres?

| | Problem | Response |
|-----------------|--|---|
| Social Barriers | Some parents feeling that children's centres are "not for me" and feeling nervous about entering the building | Improve Outreach Provide groups in spaces where parents feel comfortable |
| | Social stigma – parents worried that staff would be patronising and stigmatising. Parents valued that staff were seen not to judge and to "meet you on your level". | Ensure service maintains good relationship with parents Peer-led support |
| | Cultural barriers may be particularly strong for minority ethnic families and in particular for groups who are isolated or culturally meant to 'stay at home' with their children (Katz et al) | Improve outreach Have specialised groups and peer-led support |



Why is increasing outreach important?

Outreach is a way to engage families in other services that they may need.

Outreach sees staff make contact with families in the community (in their own homes in the first instance), and is essential for those families who are the hardest to reach.

Other approaches include having existing service users act as advocates and mentors for other families (peer-led support).

This was echoed by the parents we spoke to in our visits who credited both individual workers and their own friends and social networks as key to their involvement.

Other research suggests that individual contact is critical to encouraging access by harder-to-reach families.



What else is available for Families with Young Children?



Community and private groups

- 189 pre-schools and playgroups
 - 86 parent and toddler groups
 - Norwich Mumbler – chat group
 - Gingerbread Norwich – charity which provides advice, practical support and campaigns for single parents. Meet ups and Facebook chat group
 - The Dad Network – support for fathers, on Facebook
 - Mothers groups on Facebook
 - Classes such as Beebops (sensory music and dance classes), Hartbeeps (musical multi-sensory classes), YogaBubs and YogaBumps (baby group involving post natal yoga), Rugby tots (rugby groups for ages 2 and above), Tiny Soccerstars (football sessions for ages 1 and above), TinyTalk Baby Signing and Toddler class, Water Babies swim classes
-



The Healthy Child Programme (HCP)

An Early Years and Family Service must be viewed in the context of the other services available to families.

The Healthy Child Programme is a universal service for all children aged 0-19 and their families:

| Caseload | Service offer | % of total population |
|-----------------------------|--|-----------------------|
| Universal pathway: | The Norfolk 0-19yrs HCP service provides Public Health services to ensure a healthy start, childhood and adolescence for every child and young person. This includes five age and stage checks. | 93% |
| Universal plus: | Gives children, young people and their families a swift response from the Norfolk 0-19yrs HCP service when they need additional or specific expert help (e.g. with sexual health, mental health concerns, long-term conditions and additional health needs including asthma, diabetes, learning disabilities). | 4% |
| Universal partnership plus: | Provides on-going support for children, young people and families in the Norfolk 0-19yrs HCP service working together with a range of local services, to deal with more complex issues over a period of time, for example, support for children who may need specialist services including CAMHS, LAC, and Young Carers. | 3% |



Early Help Family Focus

- The family support process is when professionals work with a family. They will start an early help assessment and create a family support delivery plan. A number of different professionals and organisations – for example, school, GP or maybe a housing officer could be involved in the family support process.
 - Norfolk Early Help Family Focus (EHFF) team holds 670 cases (May 2018).
 - Early Help Practitioners support 1,540 children and young people through these cases.
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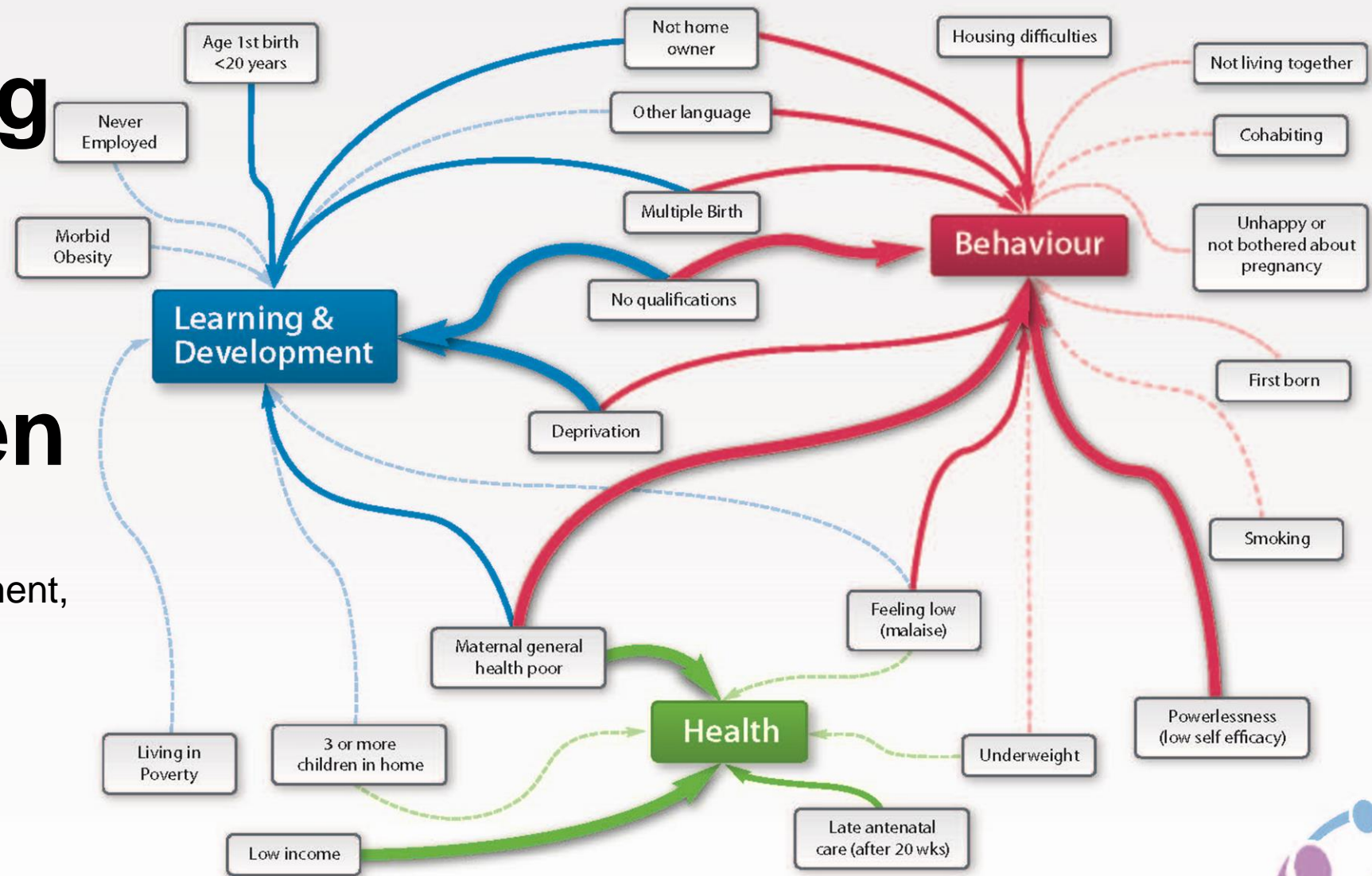
Why do we need a Early Childhood and Family Service in Norfolk?

Factors influencing key outcomes for children

Three key child outcomes:

- Learning and Development,
- Behaviour
- Health

(The thicker the line the stronger the influence)



PREview strength of associations:

Maternal factors, age 9 months, and child outcomes, age 5 years.



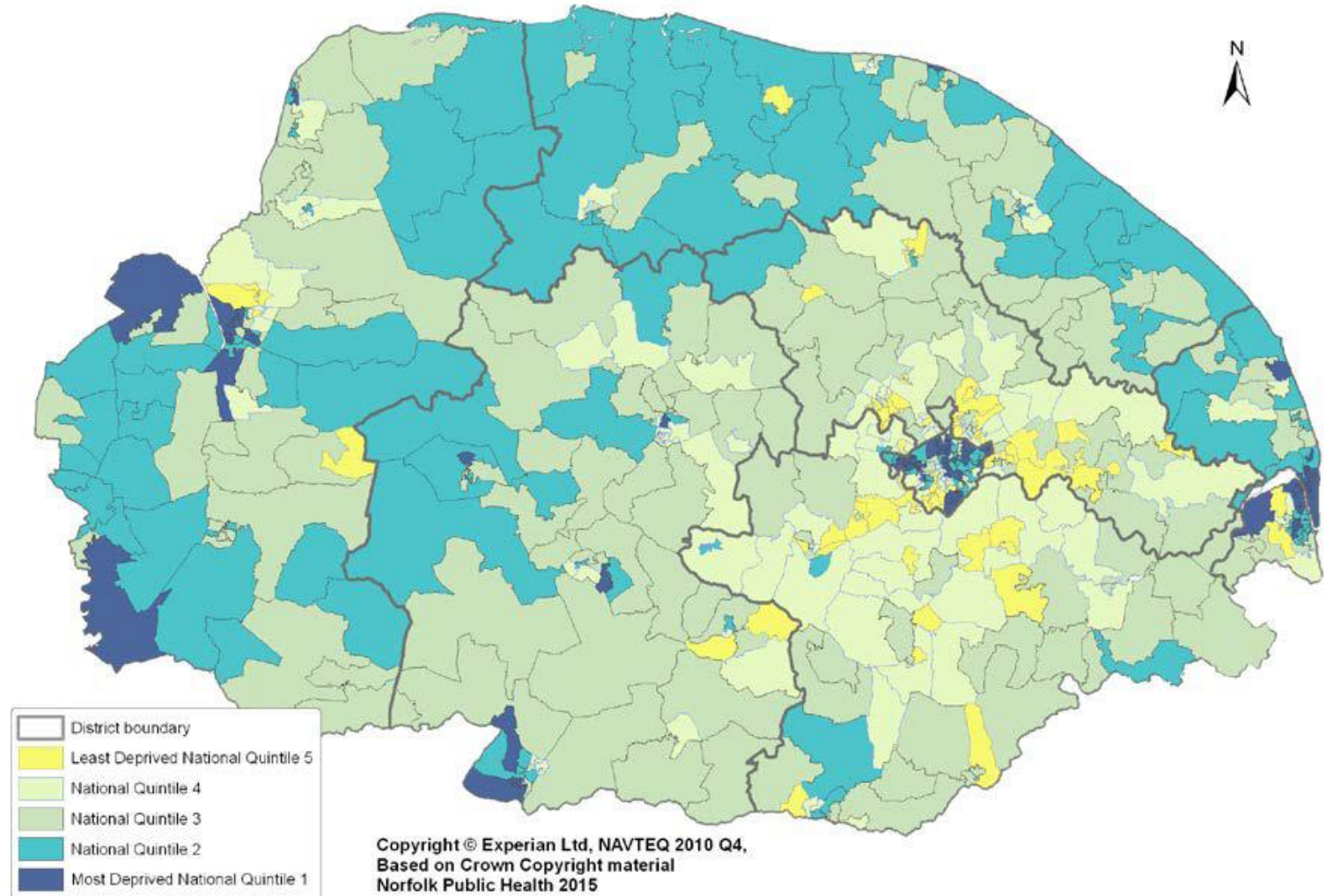
Key factors that influence poor outcomes for children:

- Socio-economic status
- Parental education, skills and knowledge
- Maternal health
- Maternal Mental health



Socio-economic status

Issues related to deprivation and poverty are often intergenerational and can become entrenched through an ongoing cycle of inequality and disadvantage. This can often lead to low educational achievement, poor health, economic inactivity and failure to reach full potential in life.

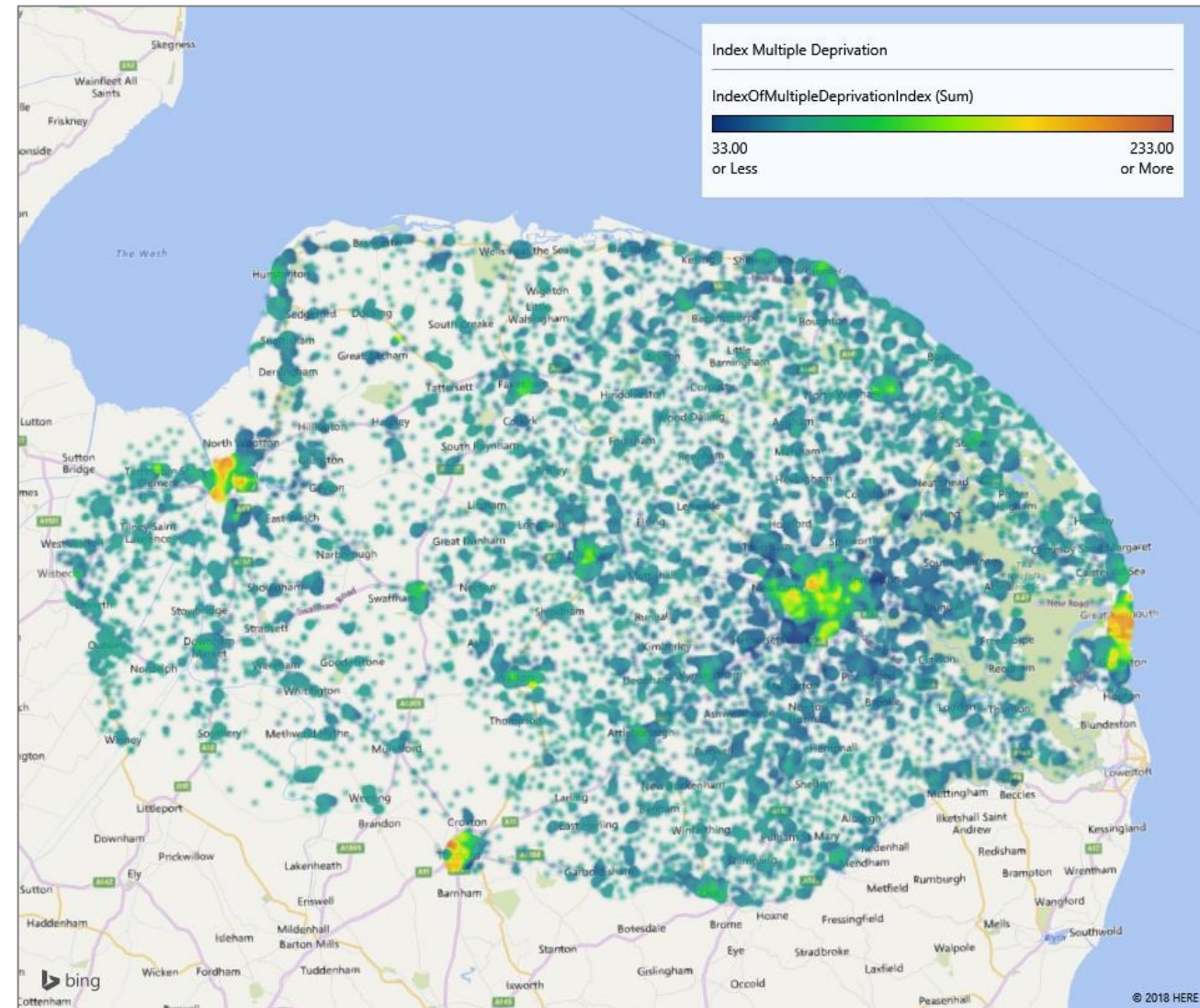




Index of multiple deprivation (IMD)

The Index of Multiple Deprivation (IMD) is a national project which combines a number of different factors to define the level of deprivation.

This map highlights the parts of Norfolk that are most deprived and least deprived according to the IMD (red is most deprived).

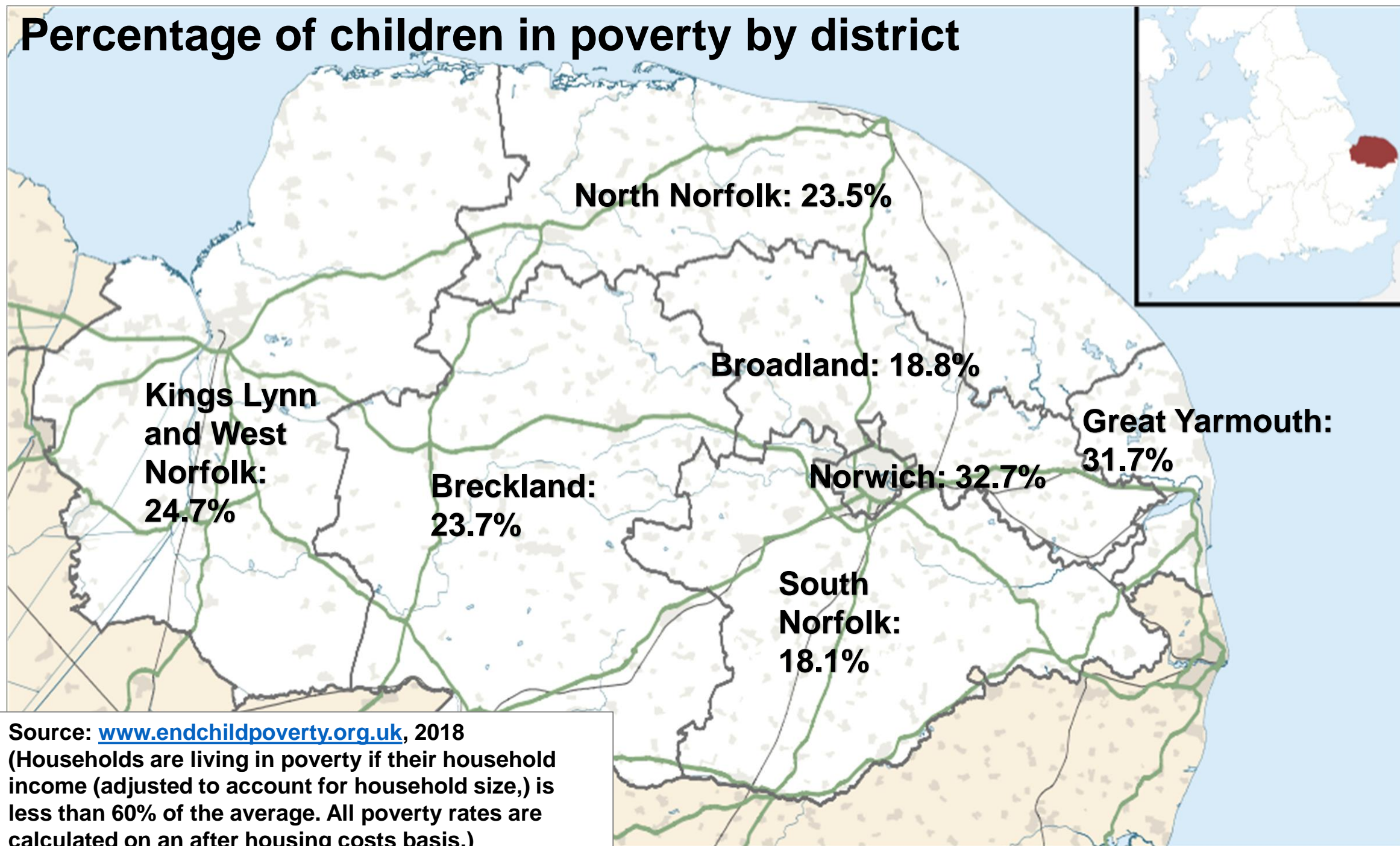




IMD Norfolk overview

- Overall Norfolk ranks 88th in a list of relative deprivation of the 152 upper tier local authorities in England (1 represents the most deprived).
 - There was an increase in relative deprivation compared to 2010 when Norfolk was the 97th most deprived upper tier local authority.
 - 7.6% of the LSOAs (neighbourhoods) in Norfolk are in the 10% most deprived areas nationally.
 - This mean that approximately 68,200 people in Norfolk live in one of the most deprived areas in the county (7.9% of the Norfolk population).
 - Norfolk ranks most highly (and is therefore most deprived) in the 'Education' domain (31st) and 'Barriers to housing and services' services (44th). Norfolk ranks lowest (better) in the Crime domain (142nd).
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Percentage of children in poverty by district



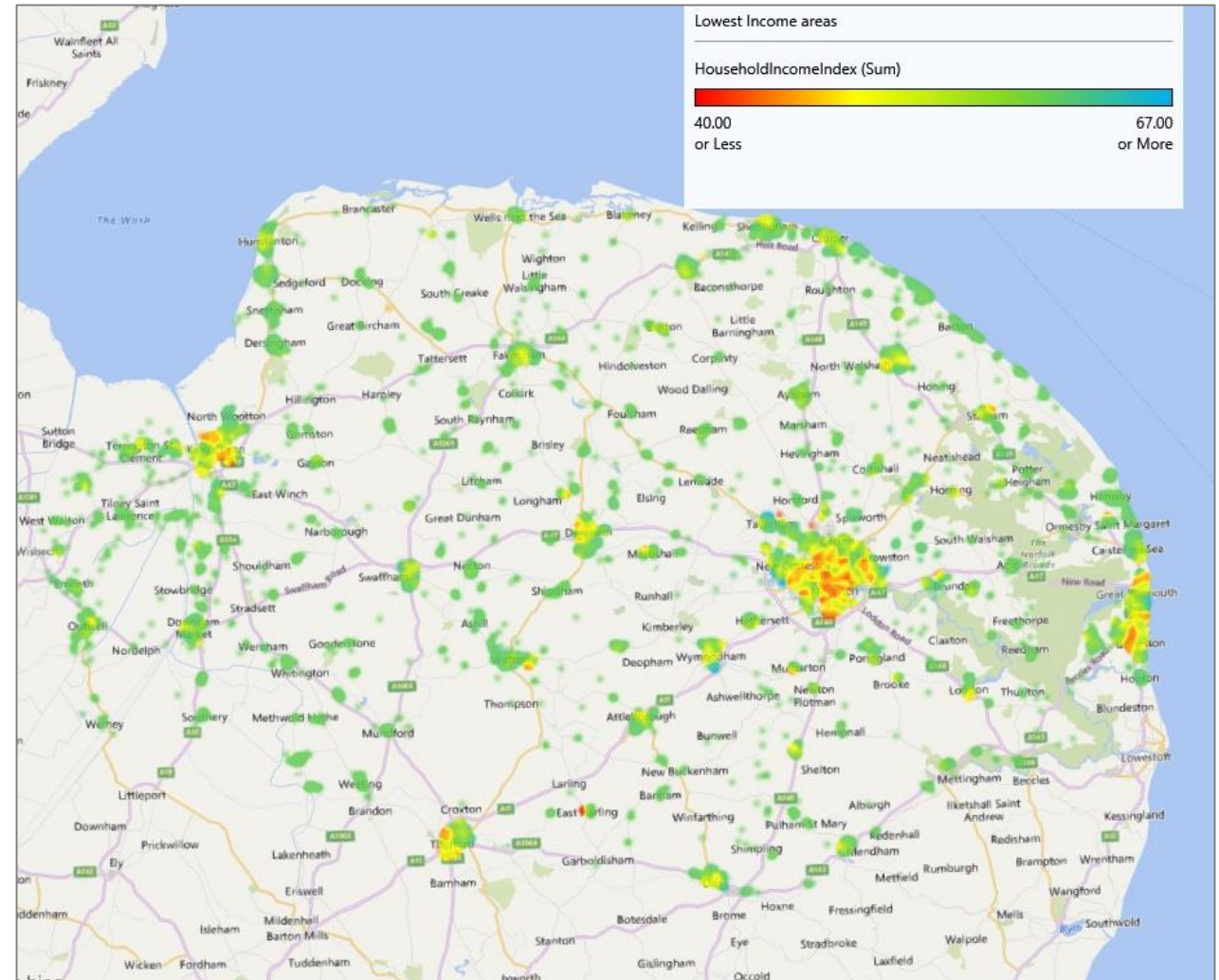
Source: www.endchildpoverty.org.uk, 2018
(Households are living in poverty if their household income (adjusted to account for household size,) is less than 60% of the average. All poverty rates are calculated on an after housing costs basis.)



Lowest income area

Deprivation is not just about income, but we know that one of the factors that has a particular influence on children's outcomes is living in a lower income area.

This map highlights low income areas in red.

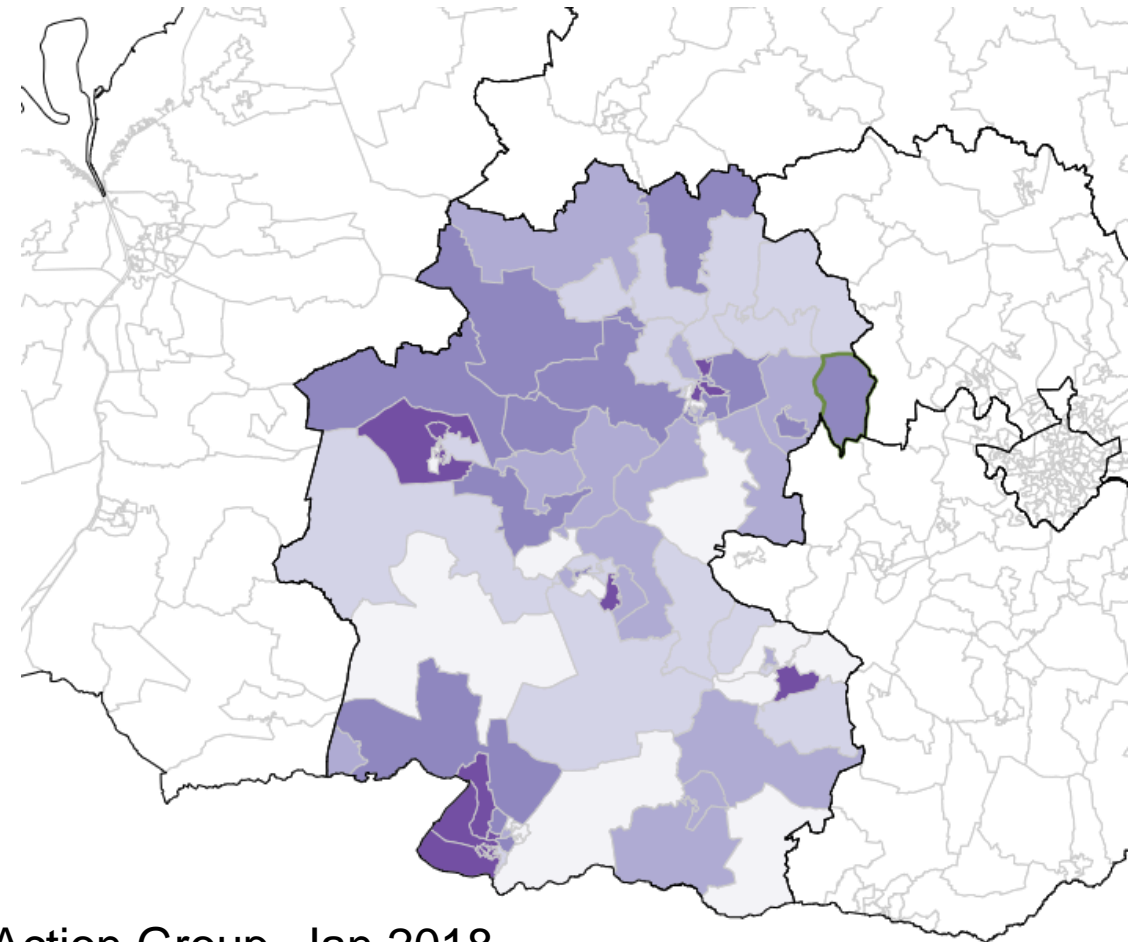




Child poverty in Breckland

The needs in Breckland vary widely from 36% of children in the 'Thetford Abbey' ward living in poverty, compared to just 9% in the 'Swanton Morley' ward.

(Darker LSOA areas on the map are more deprived)

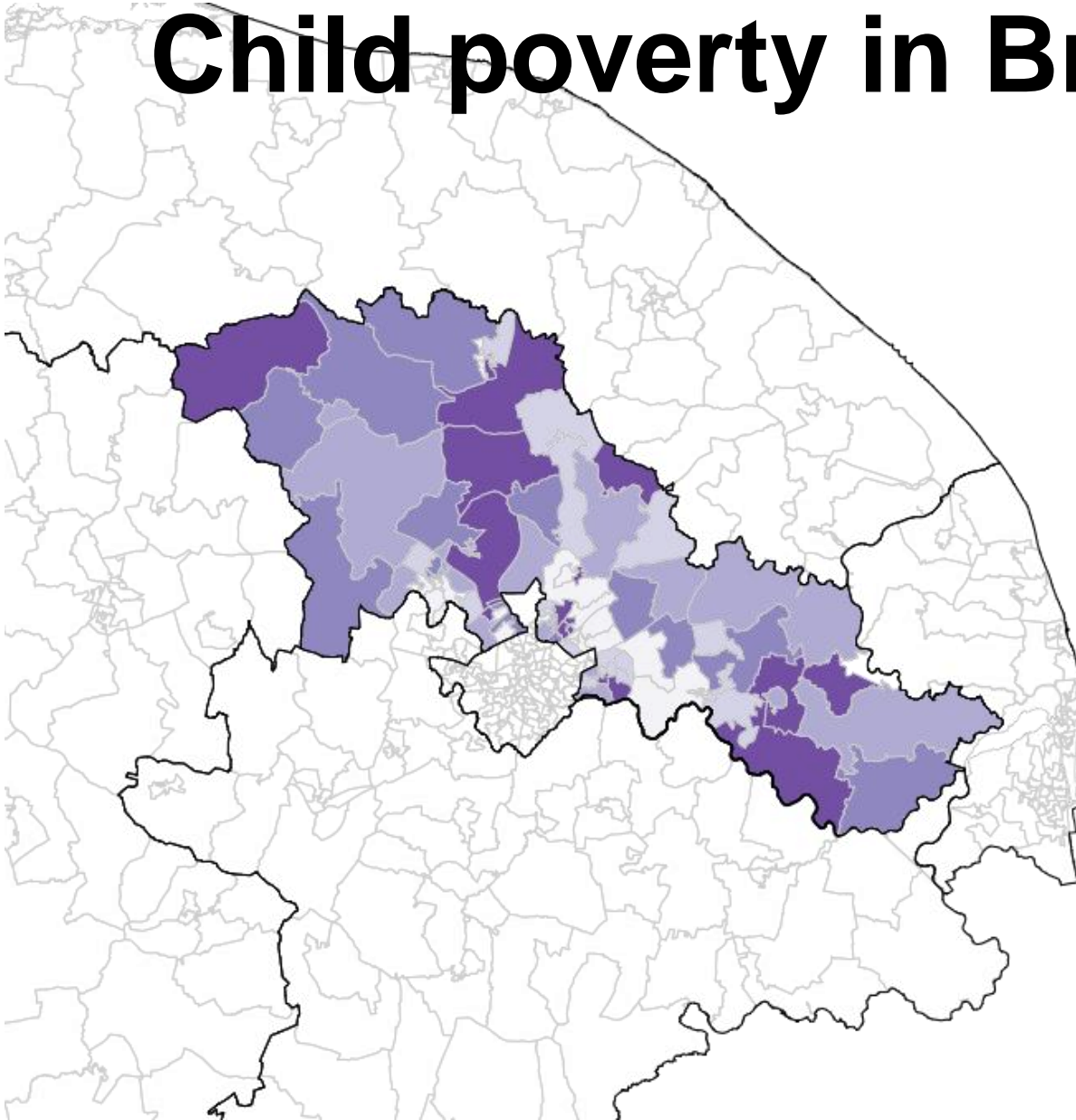


Source: Child Poverty Action Group, Jan 2018

| Local Authority and wards* | Number of children | % |
|----------------------------|--------------------|--------|
| Breckland | 5,893 | 22.48% |
| Thetford-Abbey | 629 | 36% |
| Thetford-Saxon | 664 | 33% |
| Swaffham | 387 | 31% |
| Haggard de Toni | 104 | 30% |
| Upper Wensum | 117 | 28% |
| Templar | 281 | 28% |
| Dereham-Neatherd | 234 | 28% |
| Launditch | 122 | 27% |
| Thetford-Castle | 96 | 26% |
| Dereham-Central | 356 | 25% |
| Two Rivers | 167 | 24% |
| Dereham-Humbletoft | 150 | 23% |
| Hermitage | 75 | 22% |
| Necton | 67 | 22% |
| Burgh and Haverscroft | 142 | 22% |
| Shipdham | 85 | 21% |
| Dereham-Toftwood | 219 | 21% |
| West Giltcross | 88 | 21% |
| Weeting | 82 | 21% |
| Watton | 250 | 20% |
| East Giltcross | 88 | 20% |
| Nar Valley | 71 | 19% |
| Mid Forest | 62 | 17% |
| Buckenham | 53 | 17% |
| Springvale and Scarning | 153 | 16% |
| Eynsford | 65 | 16% |
| Upper Yare | 75 | 16% |
| Harling and Heathlands | 119 | 16% |
| Queen's | 263 | 16% |
| Wissey | 62 | 15% |
| All Saints | 60 | 15% |
| Conifer | 47 | 14% |
| Wayland | 41 | 12% |
| Thetford-Guildhall | 215 | 11% |
| Taverner | 48 | 11% |
| Swanton Morley | 45 | 9% |



Child poverty in Broadland



The needs in Broadland vary widely from 28% of children in the 'Eynesford' ward living in poverty, compared to just 10% in the 'Taverham South' ward.

Percentage of children in poverty, July-Sept 2017
AFTER HOUSING COSTS

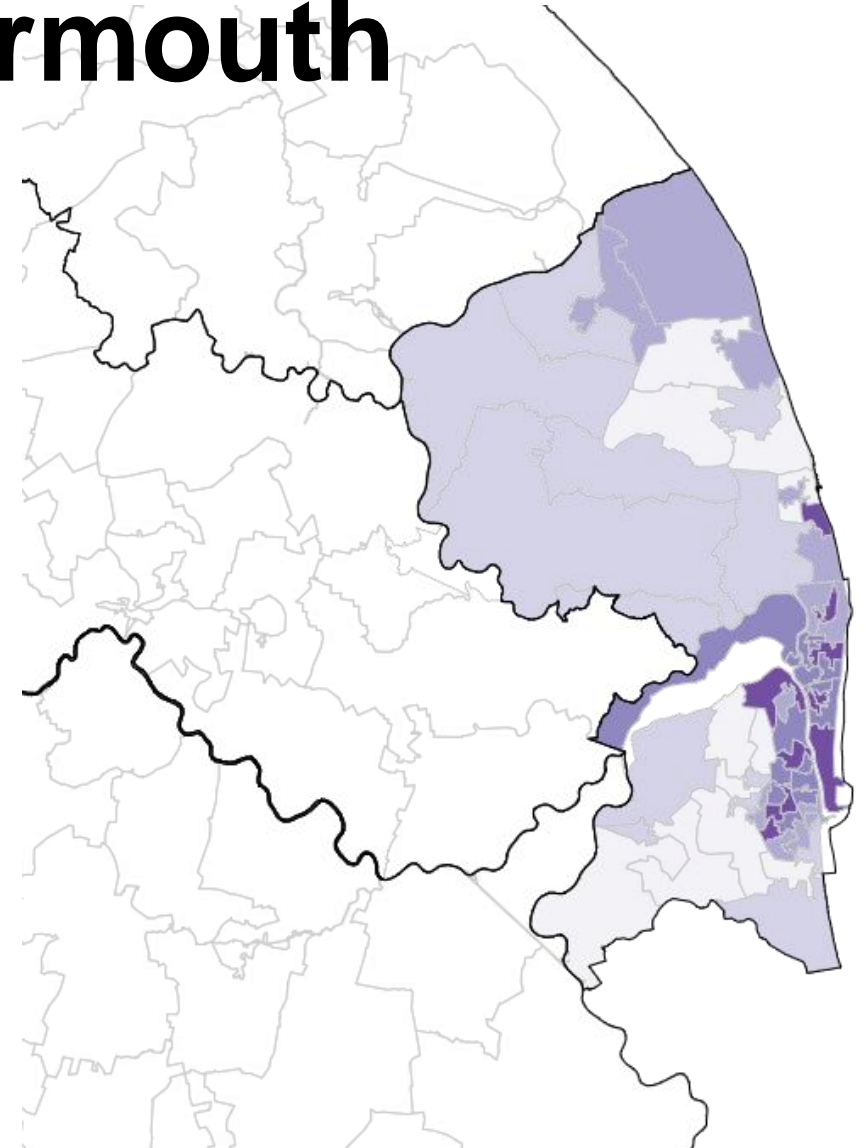
| Local Authority and wards* | Number of children | % |
|-------------------------------|--------------------|--------|
| Broadland | 4,115 | 17.32% |
| Eynesford | 199 | 28% |
| Marshes | 143 | 23% |
| Aylsham | 300 | 23% |
| Reepham | 124 | 21% |
| Horsford and Felthorpe | 240 | 21% |
| Acle | 101 | 20% |
| Drayton South | 70 | 20% |
| Old Catton and Sprowston West | 313 | 19% |
| Sprowston Central | 206 | 19% |
| Blofield with South Walsham | 193 | 19% |
| Great Witchingham | 74 | 19% |
| Hellesdon South East | 154 | 18% |
| Hevingham | 105 | 18% |
| Brundall | 170 | 18% |
| Hellesdon North West | 140 | 17% |
| Burlingham | 90 | 17% |
| Drayton North | 140 | 16% |
| Coltishall | 75 | 16% |
| Buxton | 78 | 15% |
| Wroxham | 138 | 15% |
| Thorpe St Andrew North West | 201 | 15% |
| Spixworth with St Faiths | 136 | 14% |
| Thorpe St Andrew South East | 215 | 13% |
| Taverham North | 158 | 12% |
| Sprowston East | 113 | 11% |
| Plumstead | 70 | 10% |
| Taverham South | 81 | 10% |



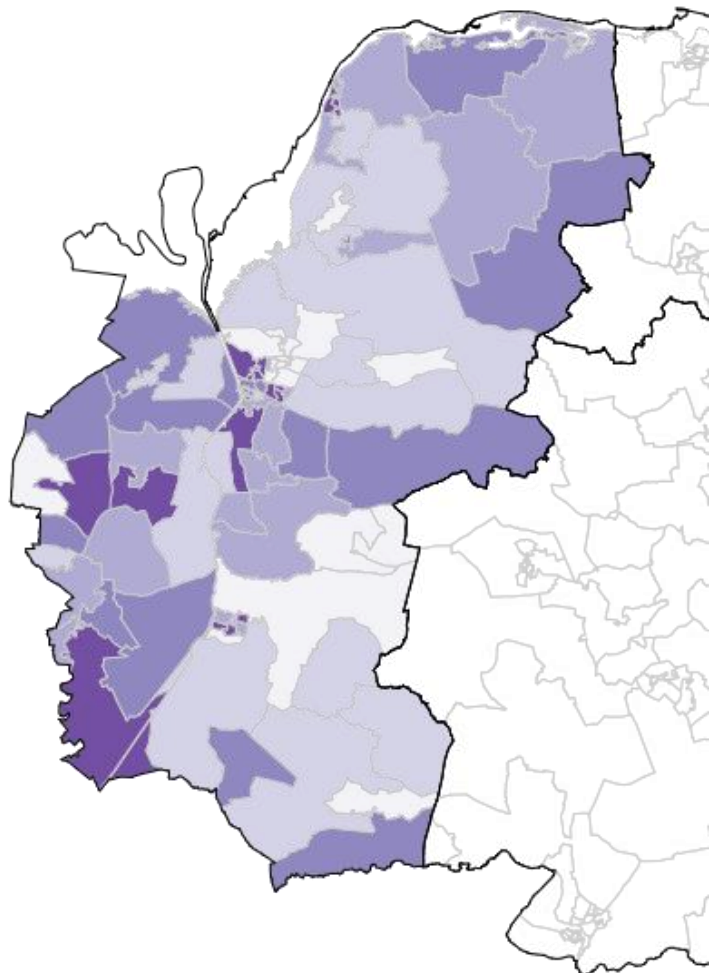
Child poverty in Great Yarmouth

| Percentage of children in poverty, July-Sept 2017 AFTER HOUSING COSTS | | |
|--|--------------------|--------|
| Local Authority and wards* | Number of children | % |
| Great Yarmouth | 6,567 | 31.72% |
| Nelson | 1,230 | 48% |
| Central and Northgate | 822 | 42% |
| Southtown and Cobholm | 645 | 39% |
| Claydon | 663 | 36% |
| Magdalen | 575 | 36% |
| St Andrews | 364 | 32% |
| Yarmouth North | 314 | 31% |
| Caister South | 228 | 30% |
| Caister North | 191 | 25% |
| West Flegg | 222 | 23% |
| East Flegg | 171 | 23% |
| Lothingland | 196 | 20% |
| Fleggburgh | 80 | 19% |
| Ormesby | 136 | 18% |
| Bradwell South and Hopton | 216 | 17% |
| Gorleston | 160 | 15% |
| Bradwell North | 174 | 14% |

The needs in Great Yarmouth vary widely from 48% of children in the 'Nelson' ward living in poverty, compared to just 14% in the 'Bradwell North' ward.



Child poverty in King's Lynn and West Norfolk



The needs in King's Lynn and West Norfolk vary widely from 39% of children in the 'North Lynn' ward living in poverty, compared to just 2% in the 'South Downham' ward.

Source: Child Poverty Action Group, Jan 2018

| Percentage of children in poverty, July-Sept 2017 AFTER HOUSING COSTS | | |
|--|--------------------|--------|
| Local Authority and wards* | Number of children | % |
| King's Lynn and West Norfolk | 7,220 | 24.56% |
| North Lynn | 717 | 39% |
| Walton | 207 | 36% |
| Burnham | 89 | 35% |
| St Margarets with St Nicholas | 277 | 33% |
| St Lawrence | 158 | 32% |
| Hunstanton | 209 | 32% |
| Mershe Lande | 146 | 31% |
| Walpole | 166 | 31% |
| Upwell and Delph | 286 | 31% |
| Downham Old Town | 144 | 30% |
| Dersingham | 204 | 29% |
| South and West Lynn | 413 | 29% |
| Fairstead | 562 | 27% |
| Docking | 91 | 27% |
| Priory | 109 | 26% |
| Spellowfields | 251 | 26% |
| Gaywood Chase | 313 | 26% |
| Denton | 360 | 25% |
| East Downham | 206 | 25% |
| Emneth with Outwell | 241 | 25% |
| Clenchwarton | 92 | 24% |
| Old Gaywood | 117 | 24% |
| West Winch | 204 | 23% |
| Wissey | 96 | 23% |
| Snettisham | 136 | 22% |
| Watlington | 127 | 22% |
| Valley Hill | 73 | 21% |
| Rudham | 70 | 20% |
| Wimbotsham with Fincham | 83 | 19% |
| Brancaster | 25 | 19% |
| North Downham | 71 | 19% |
| Heacham | 117 | 19% |
| Gayton | 80 | 18% |
| Hilgay with Denver | 75 | 17% |
| Wiggenhall | 62 | 16% |
| Gaywood North Bank | 226 | 15% |
| North Wootton | 64 | 12% |
| Springwood | 47 | 12% |
| Grimston | 39 | 10% |
| Airfield | 95 | 8% |
| South Wootton | 51 | 6% |
| South Downham | 3 | 2% |

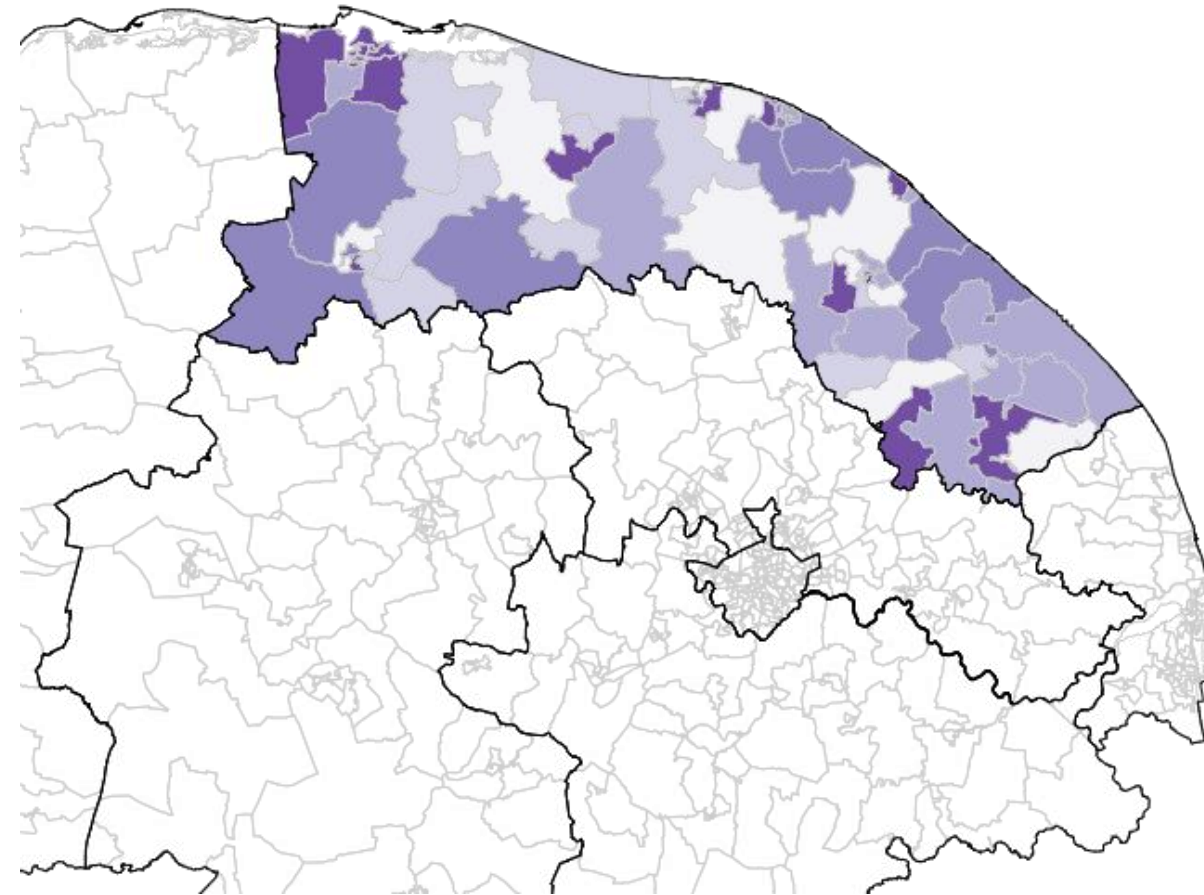
Percentage of children in poverty, July-Sept 2017
AFTER HOUSING COSTS

| Local Authority and wards* | Number of children | % |
|----------------------------|--------------------|--------|
| North Norfolk | 4,357 | 26.47% |
| Happisburgh | 127 | 40% |
| Poppyland | 133 | 38% |
| Corpusty | 155 | 36% |
| Hoveton | 103 | 33% |
| Mundesley | 222 | 32% |
| High Heath | 65 | 32% |
| Holt | 152 | 31% |
| Priory | 177 | 31% |
| The Runtons | 82 | 30% |
| North Walsham West | 237 | 30% |
| Suffield Park | 199 | 30% |
| Waxham | 94 | 29% |
| Cromer Town | 126 | 28% |
| Sheringham South | 174 | 28% |
| The Raynhams | 152 | 28% |
| Stalham and Sutton | 211 | 27% |
| Sheringham North | 127 | 27% |
| Worstead | 119 | 27% |
| Astley | 113 | 27% |
| Waterside | 155 | 26% |
| Glaven Valley | 71 | 25% |
| Chaucer | 75 | 24% |
| North Walsham North | 198 | 24% |
| North Walsham East | 177 | 23% |
| Walsingham | 84 | 23% |
| Roughton | 78 | 23% |
| Lancaster South | 169 | 22% |
| St Benet | 58 | 21% |
| Briston | 92 | 19% |
| Gaunt | 71 | 18% |
| Scottow | 95 | 18% |
| Wensum | 71 | 17% |
| Lancaster North | 102 | 16% |
| Erpingham | 57 | 15% |



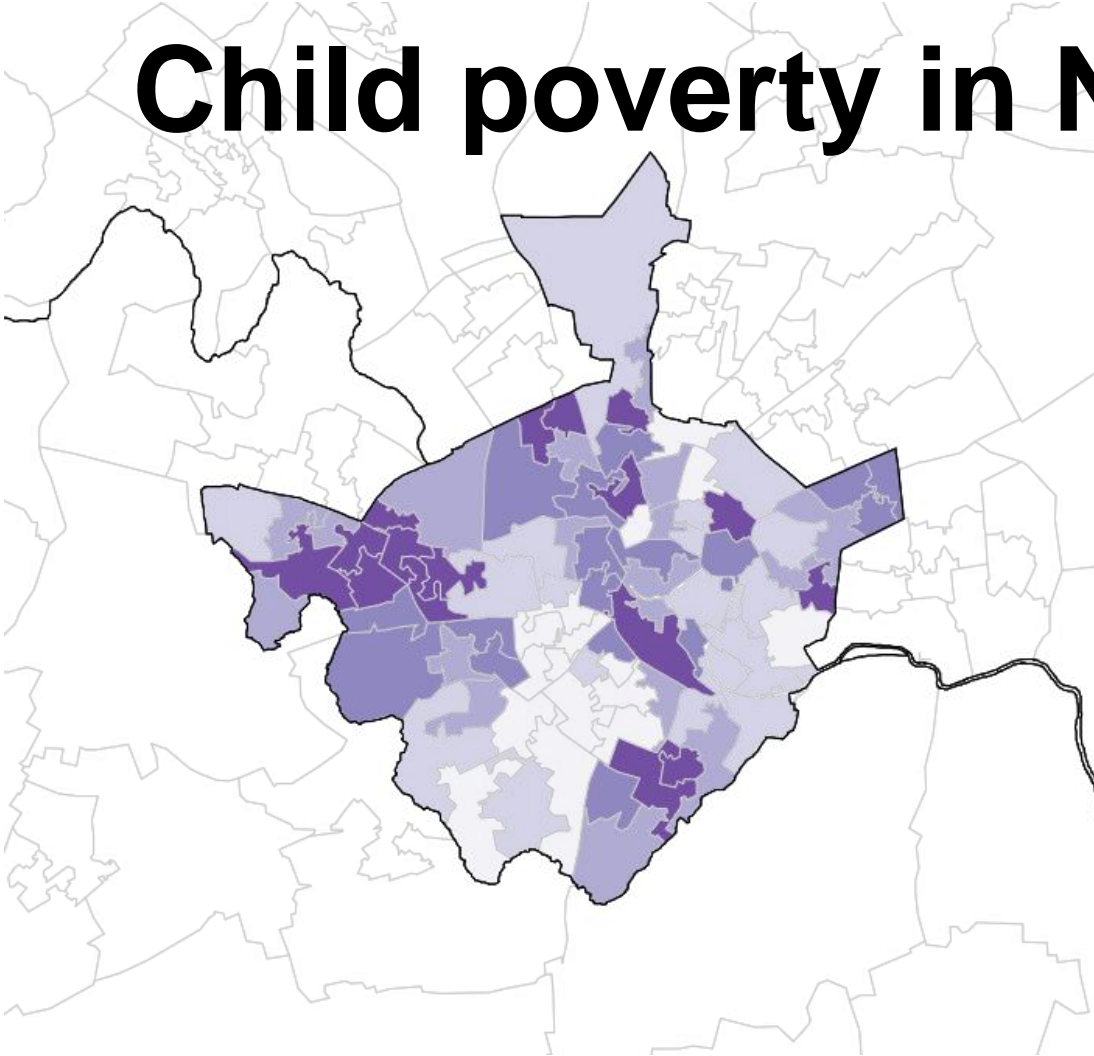
Child poverty in North Norfolk

The needs in North Norfolk vary widely from 40% of children in the 'Happisburgh' ward living in poverty, compared to just 15% in the 'Erpingham' ward.





Child poverty in Norwich



The needs in Norwich vary widely from 39% of children in the 'University' ward living in poverty, compared to just 13% in the 'Nelson' ward.

| Percentage of children in poverty, July-Sept 2017 (After housing costs) | | |
|--|--------------------|--------|
| Local Authority and wards* | Number of children | % |
| Norwich | 8,539 | 32.40% |
| University | 579 | 39% |
| Wensum | 1,172 | 39% |
| Mancroft | 472 | 38% |
| Mile Cross | 1,116 | 38% |
| Lakenham | 844 | 37% |
| Crome | 847 | 36% |
| Bowthorpe | 911 | 33% |
| Catton Grove | 821 | 31% |
| Sewell | 615 | 31% |
| Thorpe Hamlet | 342 | 27% |
| Town Close | 297 | 21% |
| Eaton | 261 | 17% |
| Nelson | 188 | 13% |

Source: Child Poverty Action Group, Jan 2018

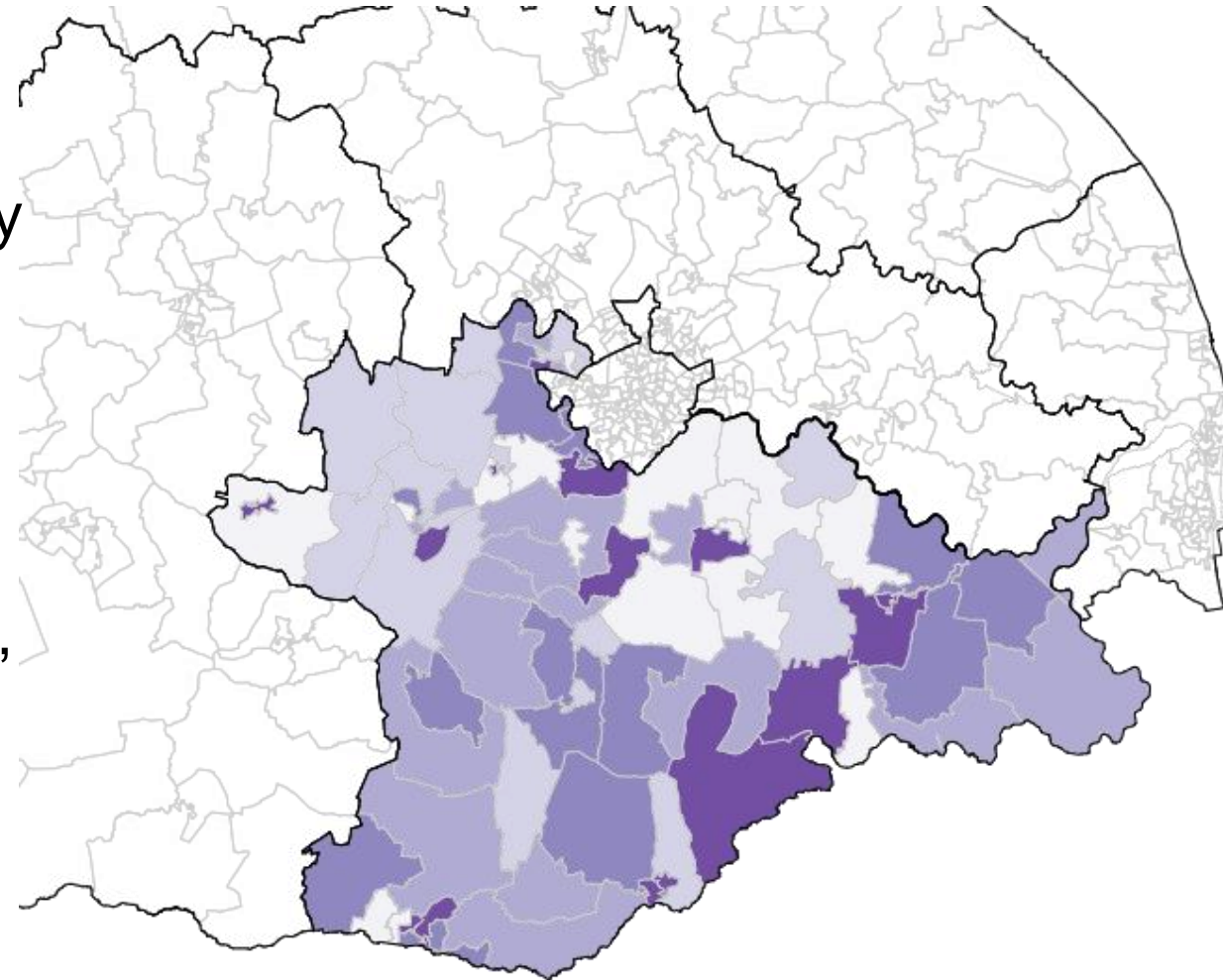
Percentage of children in poverty, July-Sept 2017
AFTER HOUSING COSTS

| Local Authority and wards* | Number of children | % |
|---------------------------------|--------------------|--------|
| South Norfolk | 4,652 | 18.59% |
| Earsham | 132 | 31% |
| Bressingham and Burston | 127 | 26% |
| Ditchingham and Broome | 112 | 26% |
| Gillingham | 132 | 25% |
| Diss | 373 | 25% |
| Chedgrave and Thurton | 127 | 25% |
| Loddon | 125 | 25% |
| Old Costessey | 467 | 24% |
| Harleston | 211 | 23% |
| Bunwell | 129 | 23% |
| Cromwells | 153 | 23% |
| Dickleburgh | 112 | 22% |
| Cringleford | 248 | 22% |
| Stratton | 272 | 21% |
| Beck Vale | 79 | 20% |
| Thurlton | 98 | 19% |
| Newton Flotman | 105 | 19% |
| Wicklewood | 108 | 18% |
| Hingham and Deopham | 96 | 18% |
| Northfields | 87 | 17% |
| Hethersett | 195 | 17% |
| Rockland | 96 | 17% |
| Easton | 94 | 16% |
| New Costessey | 122 | 16% |
| Scole | 66 | 15% |
| Rustens | 138 | 15% |
| Abbey | 63 | 14% |
| Stoke Holy Cross | 76 | 14% |
| Poringland with the Framinghams | 123 | 14% |
| Hempnall | 56 | 12% |
| Fornsett | 51 | 10% |
| Tasburgh | 42 | 10% |
| Roydon | 48 | 9% |
| Mulbarton | 103 | 9% |
| Town | 65 | 9% |
| Brooke | 29 | 6% |



Child poverty in South Norfolk

The needs in South Norfolk vary widely from 31% of children in the 'Earsham' ward living in poverty, compared to just 6% in the 'Brooke' ward.



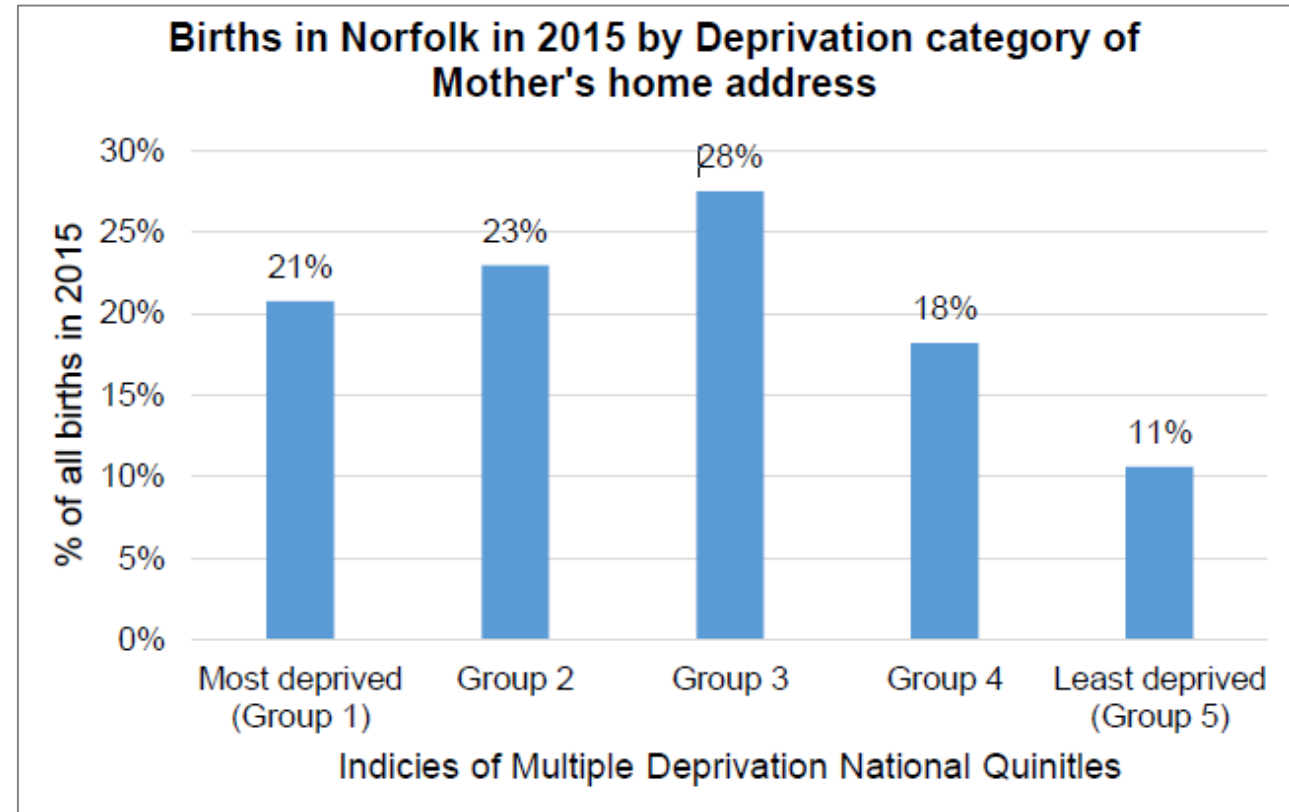


The number of births in deprived areas

More babies are born in deprived areas of Norfolk than in more affluent areas.

More children in deprived areas are born with a low birth weight, they are more likely to experience poor housing, higher rates of chronic illness (such as asthma) and poor diet and nutrition.

All of which contribute to people in the most deprived areas having a life expectancy that is six years lower for men and three years lower for women than the most affluent groups in Norfolk.



Not only are people in deprived areas more in need of services – a greater proportion of babies are born into areas of deprivation than other areas of Norfolk.



Early Years Education Outcomes

Achieving well in Early Years gives pupils the best chance to thrive in future education.

In “Unlocking Talent, Fulfilling Potential”, DfE state that “On average, 40% of the overall gap between disadvantaged 16-year-olds and their peers has already emerged by the age of five”.

| | Early Years: a Good Level of Development | Age 16: Standard pass in GCSE English and Mathematics |
|----------------------------|--|---|
| Non-Disadvantaged Students | Achieved | 81% |
| | Not Achieved | 43% |
| Disadvantaged | Achieved | 63% |
| | Not Achieved | 27% |

In Norfolk, we know that children who achieve well in Early Years are far more likely to go on to achieve well in school. Those who fall behind in Early Years are unlikely to go on to meet expected standards - this is especially true for disadvantaged students (see table).



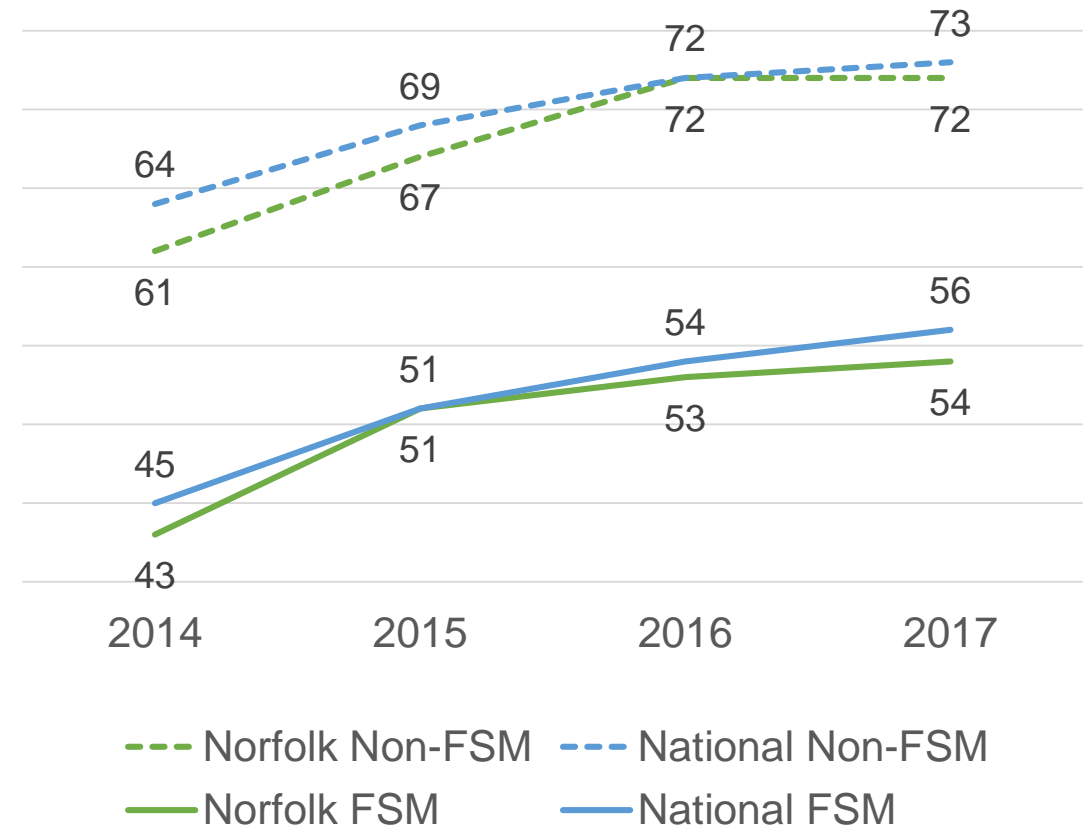
School Readiness in Norfolk

Early years education is assessed at the end of Reception Year and monitors if children are reaching the expected level in several domains the constitutes a 'good level of development' or 'school readiness'

In Norfolk there have been significant improvements in recent years in the percentage of pupils achieving a Good Level of Development.

However the gap between those children eligible for Free School Meals (FSM) and their peers has not closed.

% Achieving a Good Level of Development





Development in early years

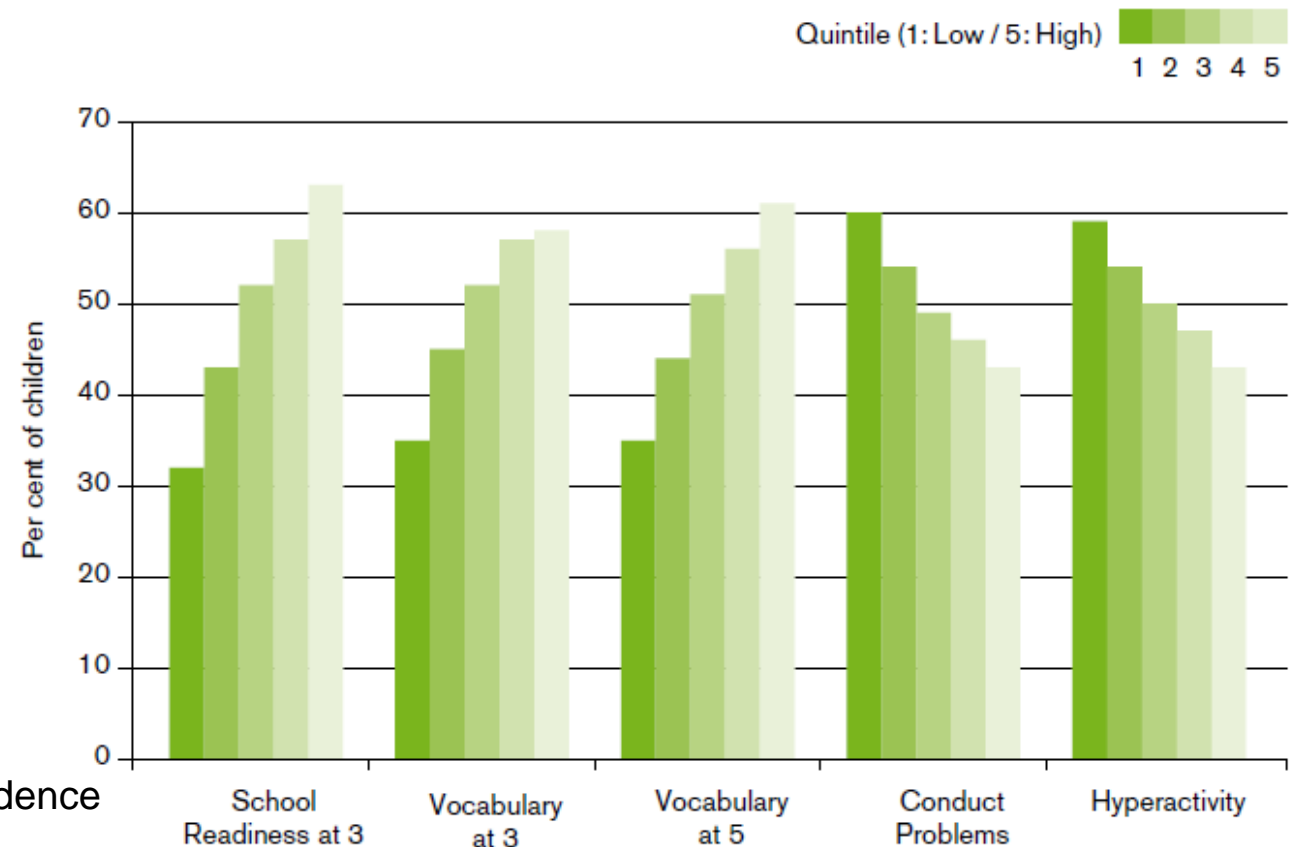
Parents are the biggest influences on children's development.

Communication and language skills are closely correlated with experiences in early childhood.

For example as the bar chart shows, children from less well-off backgrounds perform less well in achieving “school readiness”, specifically regarding verbal, spatial and non-verbal abilities and socio-emotional difficulties.

Source: UCL Institute of Health Equity: An Equal Start evidence review (2012)

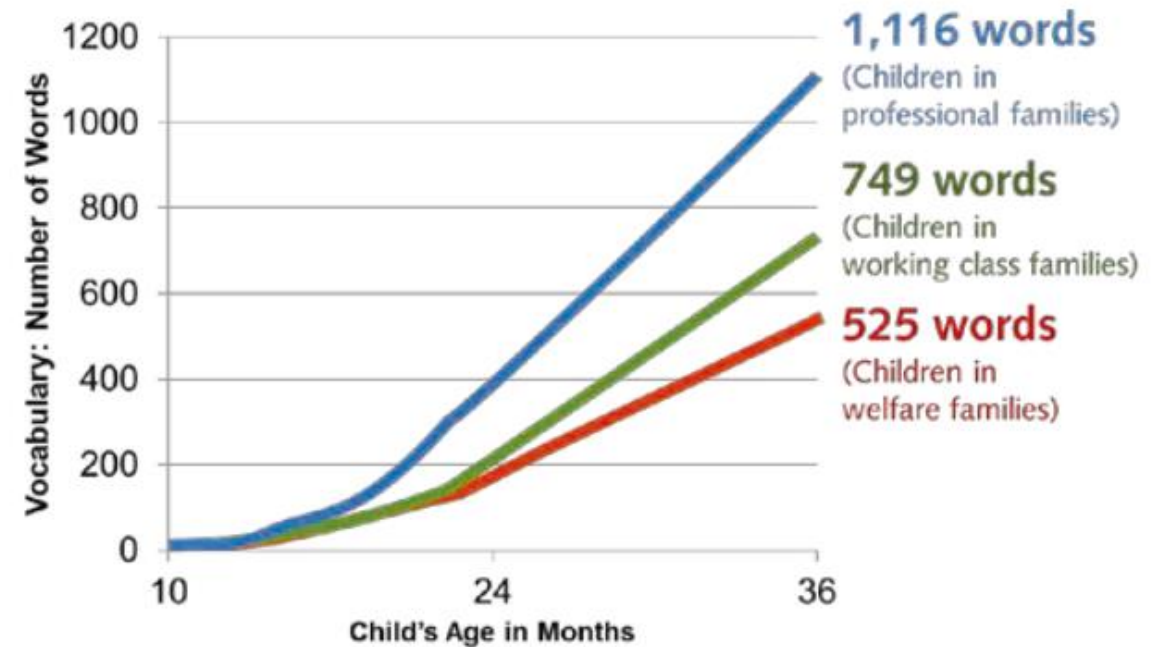
Figure 3 Indicators of school readiness by parental income group





Language and communication

- To have maximum impact on improving outcomes we should focus on language acquisition in the first two years. Research shows that gaps in children's vocabulary by the age of two are likely to limit future attainment.
- Poor language predicts poor literacy skills, which are then barriers to education and employment and often result in behaviour problems.
- Children's language skills develop particularly quickly in the first three years of their lives.
- Children from high socioeconomic groups have been shown to use more types of words than children from middle socioeconomic groups. A study by Hoff showed children from higher socioeconomic backgrounds have a greater variety of words than other children.

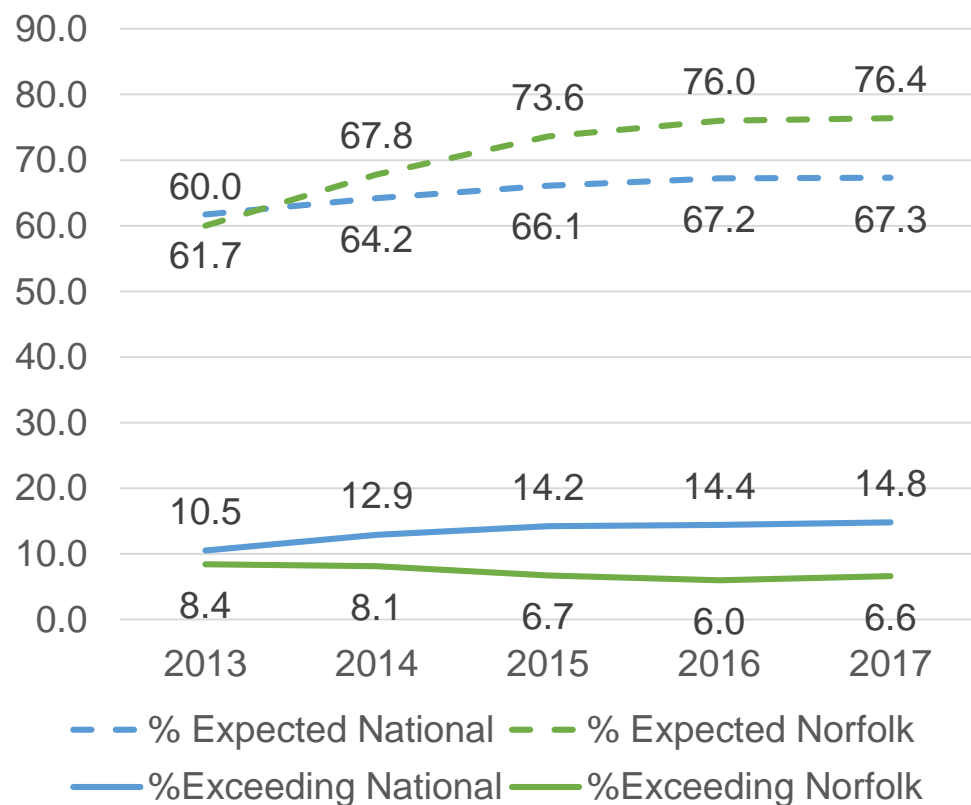


This demonstrates the need to focus on children in their first 2 years and in particular the needs in deprived children.



Early Years Education Outcomes

Communication and Language
% Achieving and % Exceeding



The percentage of learners exceeding Early Learning Goals in 2017 is around half the national average.

The percentage of children assessed as achieving all the Early Learning Goals for Communication and Language has increased significantly. However, the percentage who exceed these goals has not improved. Disadvantaged children in Norfolk are far less likely to achieve an Exceeding judgement.

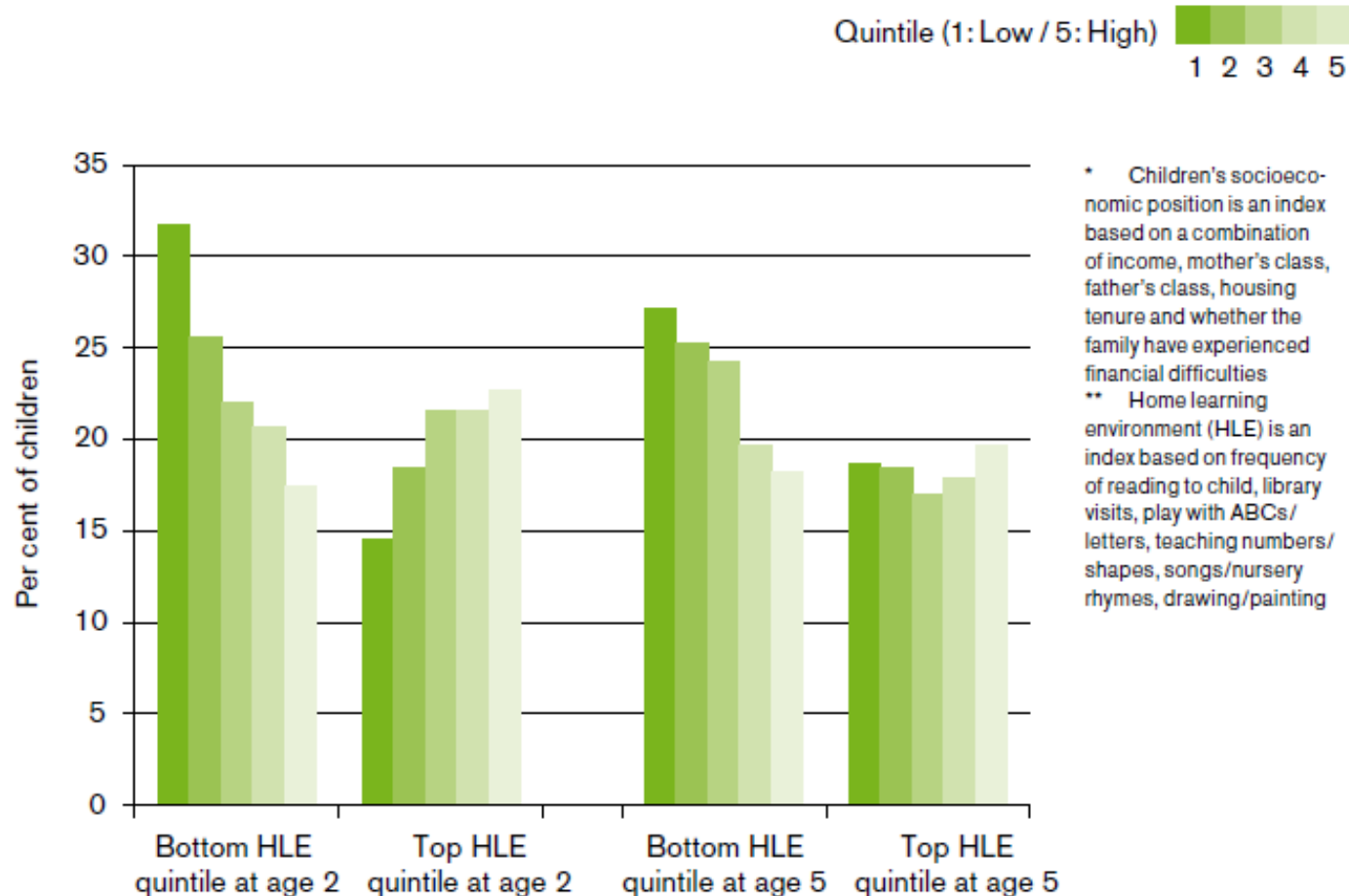
| 2017 % Exceeding Communication ELGs | All | FSM | National All |
|-------------------------------------|------|-----|--------------|
| Listening and attention | 12.3 | 4.9 | 22.8 |
| Understanding | 11.7 | 5.7 | 22.8 |
| Speaking | 9.9 | 4.0 | 19.3 |

Conclusion: To achieve better outcomes for children in Norfolk, we should focus on language development, especially from birth to two.

Cognitive development



Figure 14 Quality of home learning environment against the social gradient



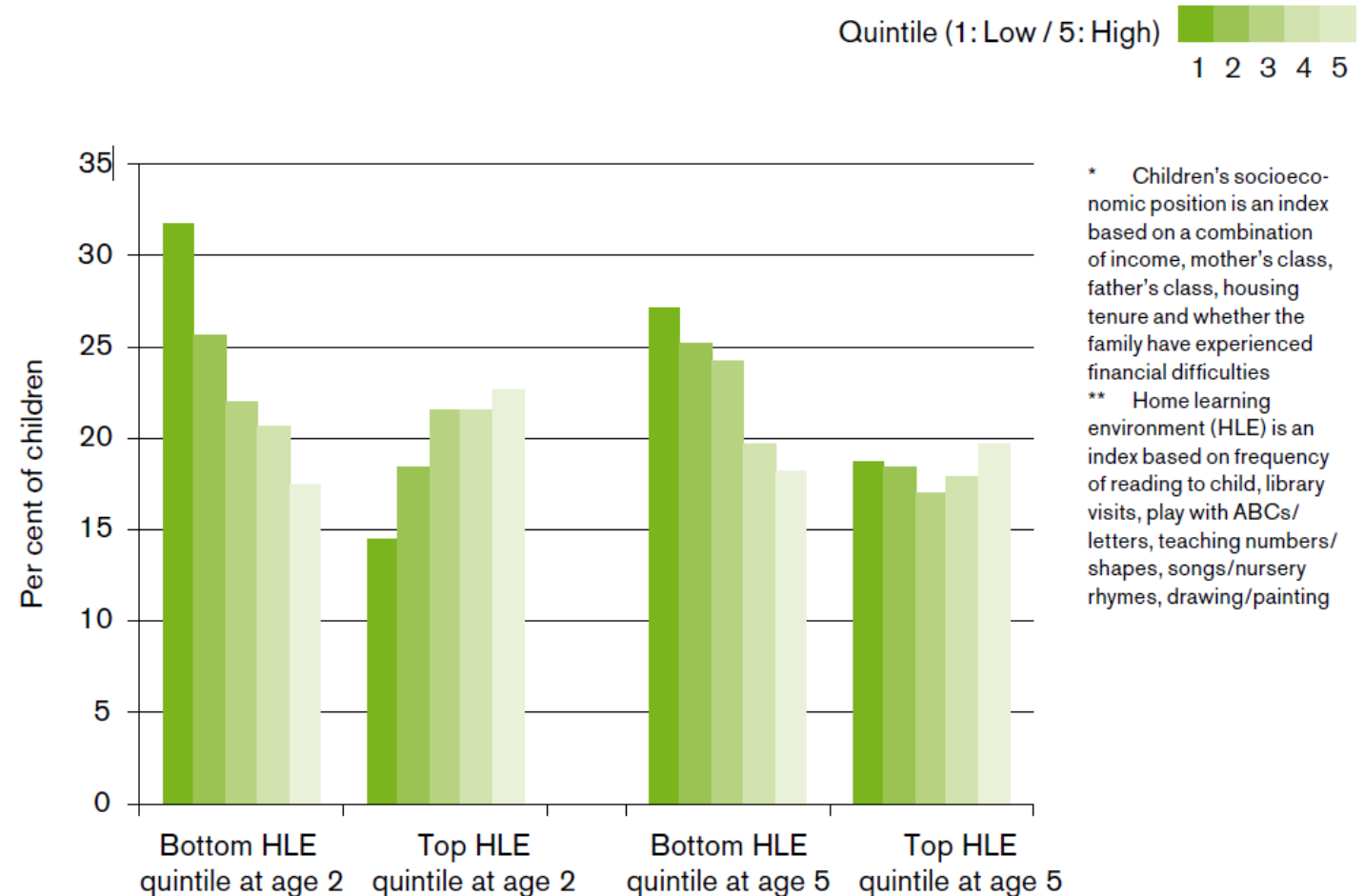
- Children develop their cognitive skills more in the early years than at any other time in their lives.
- Attention to cognitive development in the early years is particularly important, and children's academic achievement from primary through to adulthood is closely linked to their cognitive skills.
- Studies have shown that parenting skills and the quality of the home learning environment contribute largely to the difference in language development between poorer children and children who are better-off.
- **Therefore children's centres should function as a support to parents to create a high-quality home learning environment and an encouragement for parents to use wider vocabulary and take advantage of high-quality preschool provision, or paid if affordable.**



Home learning environment

- A strong home learning environment with parents reading to their children and taking an interest in their education is a protective factor against poor outcomes. Blanden found that being read to at age five was an important protective factor against poverty at age 30. Dearden *et al* show that parents from the lower socioeconomic groups are significantly less likely to be read to children on a daily basis.
- The graph shows that the quality of the home learning environment followed the curve of the social gradient. Measures were taken when children were about 36 months old and again when they were five years old. By age five there were similar proportions from each socioeconomic position among those with the best home learning environment. However, a steep gradient remained among those with the poorest home learning environment. This may reflect the effect of starting school or even the success for some of Sure Start and other early intervention policies.

Figure 14 Quality of home learning environment against the social gradient





Maternal education level

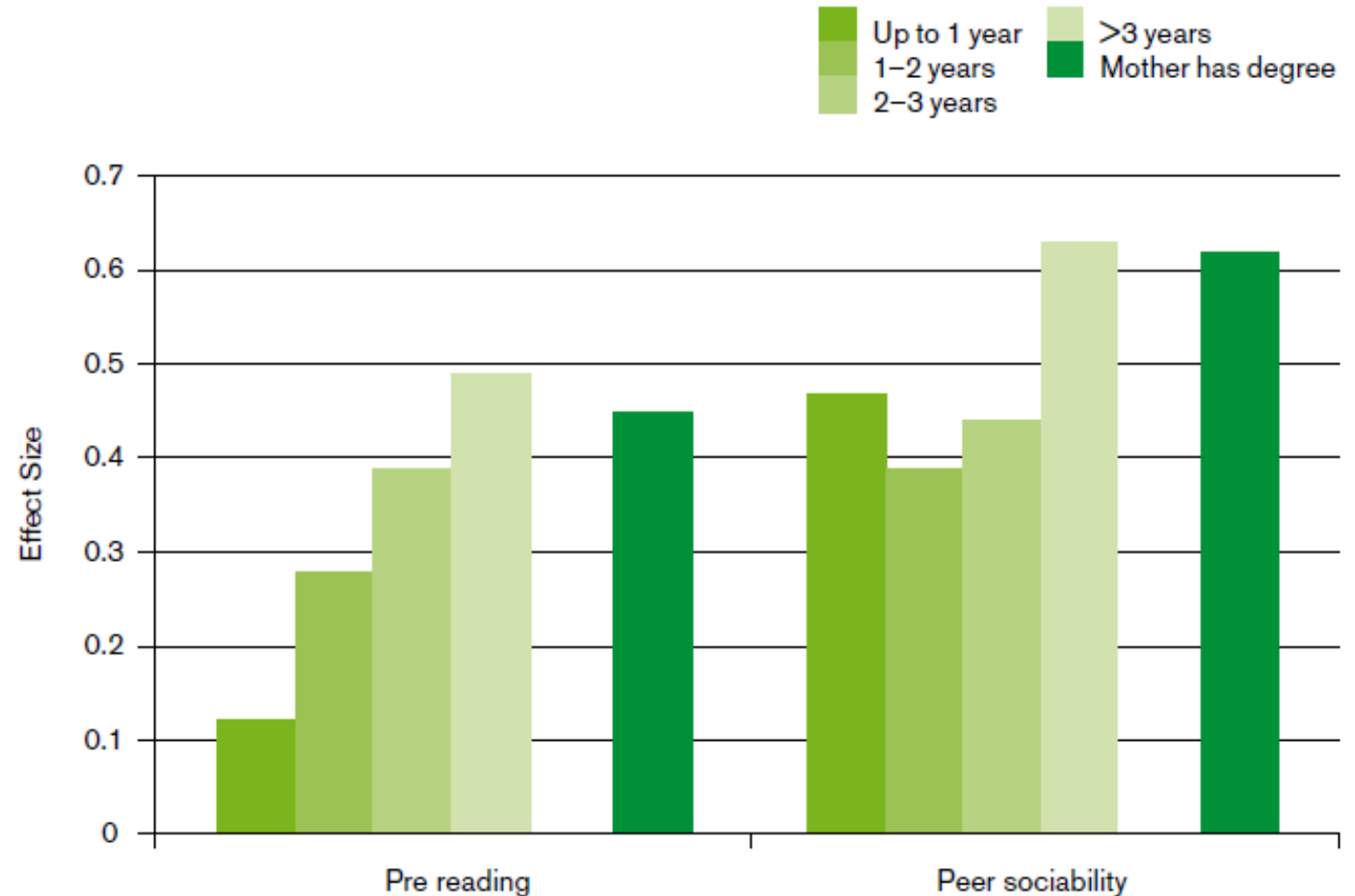
Mothers' education is strongly associated with the home learning environment.

Mothers who have more education are more likely to provide more interactive parenting both inside and outside of the home.

The EPPE study looked at the impact of a mother having a degree versus no qualification. Only attendance for three years at preschool had greater effect than a mother having a degree.

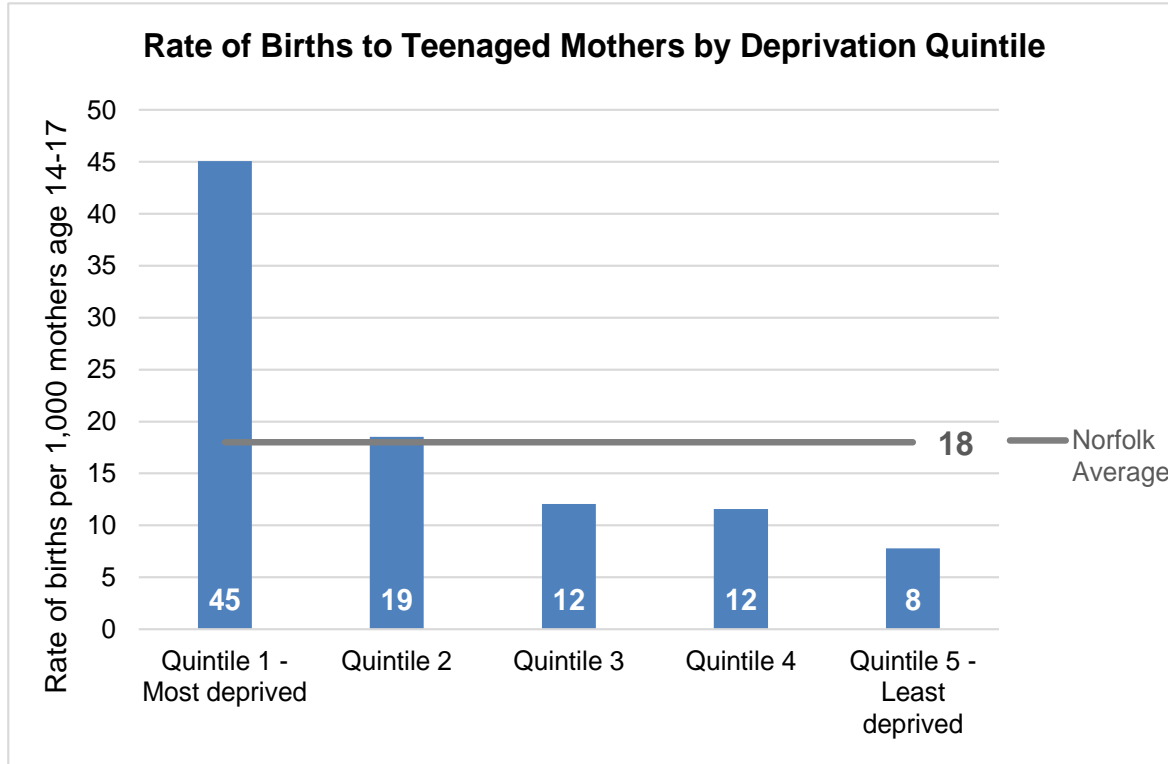
Conversely, where a good level of maternal education is lacking, the effects of parenting style appear more marked, with a strengthening of the relationships between some aspects of parental behaviour and several child developmental outcomes.

Figure 8 Impact of years spent in preschool and mother having a degree on early childhood pre-reading and peer sociability





Teenage Parents



Teenage parents are therefore a priority group for Early Childhood and Family Service.

Teenage conception is linked to inequality. The teenage birth rate in the most deprived areas of Norfolk is 45 per 1,000 compared to only 8 per 1,000 in the least deprived areas

Research evidence shows that teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers.

The children of teenage mothers also have an increased risk of living in poverty, poor quality housing and are more likely to have accidents and behavioural problems



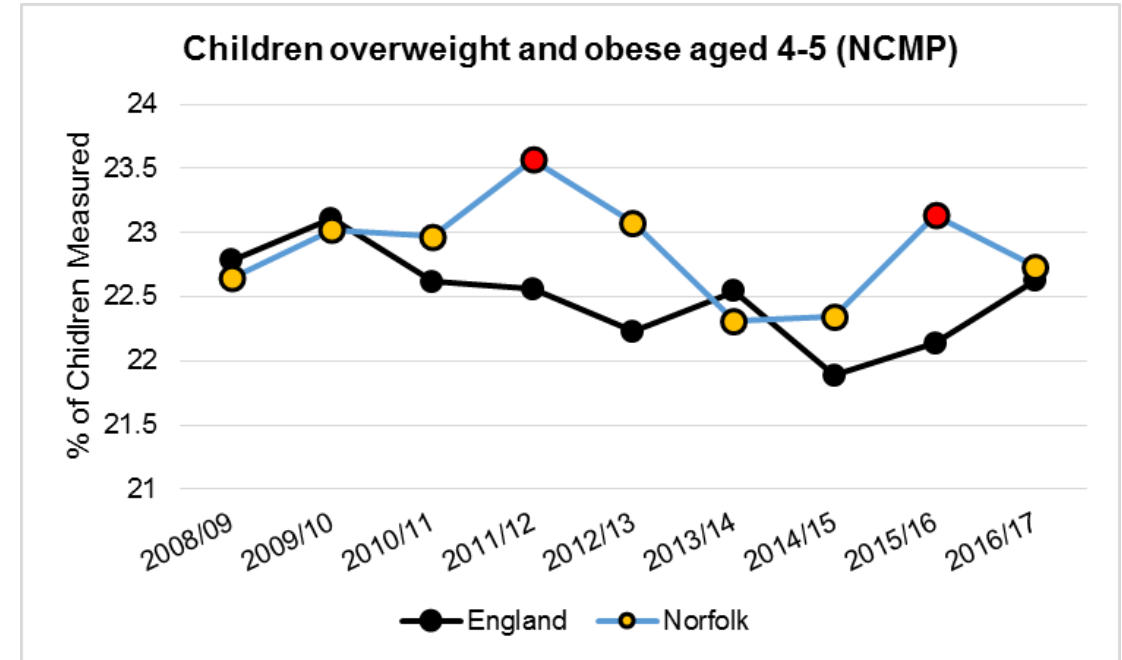
Maternal Health - Smoking

- During pregnancy - Long term complications for the baby include greater risk of asthma, attention deficit hyperactivity disorder (ADHD), and congenital heart disease
 - In Norfolk 1 in 10 women (13%) smoke throughout their pregnancy.
 - After pregnancy - Secondhand smoke causes numerous health problems in children including more frequent and severe asthma attacks, respiratory infections, ear infections, and sudden infant death syndrome (SIDS).
 - 23% of children age 0-5 in Norfolk one or both of their parents smoke (9,700 children)
 - More deprived communities are also more likely to smoke.
-



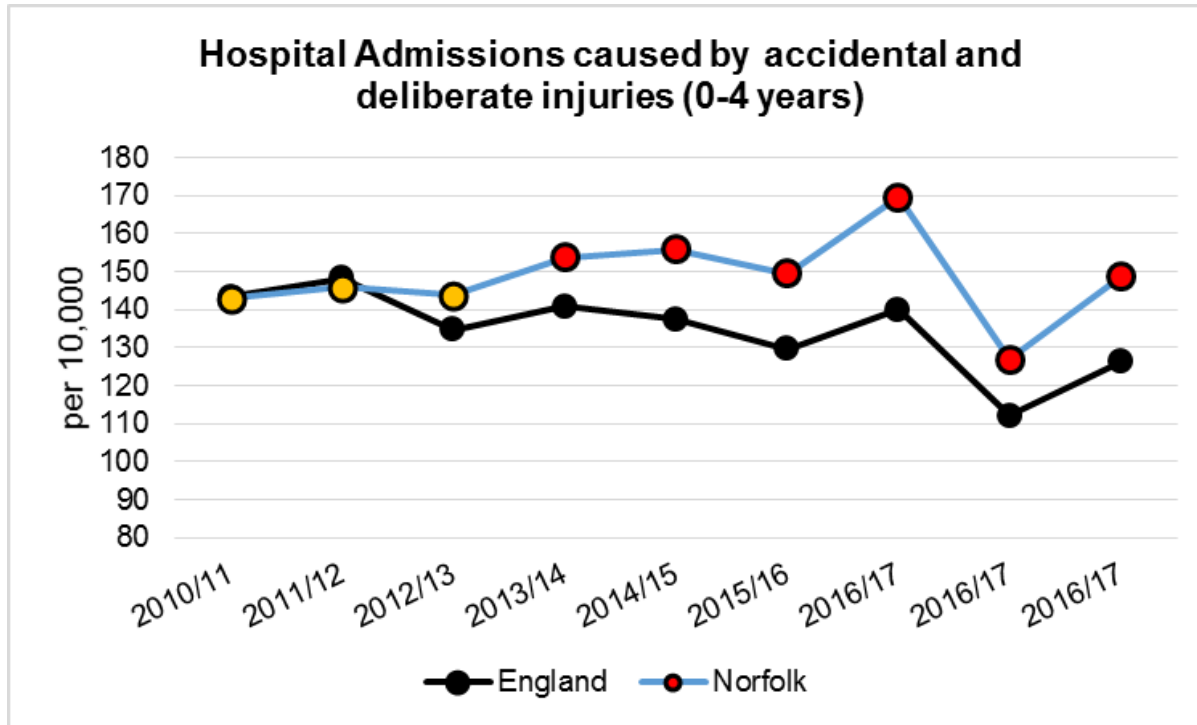
Obesity and Breastfeeding

- Obese adults at significant risk of cardiovascular disease and diabetes. Research suggests that obese children are likely to go on to be obese adults
- Our food preferences, activity levels and leisure activities as adults are all influenced by parenting and the home environment in the first years of life
- Norfolk does not have unusually high levels of **childhood obesity** compared to the rest of the county, but that still means that **1 in 4 children are overweight when the start primary school**
- Research has shown that **breastfeeding** is associated with positive health outcomes for both mother and baby in early years and later life.
- 77% of children are breastfed initially
- The NHS recommends that mothers breastfeed for the first 26 weeks of life – by age **8 weeks in Norfolk just 45%** of children are breastfed.





Accidents and Injuries in Children



- Norfolk has a high rate of injury hospital admissions for children. The main causes are falls, poisoning and road traffic collisions.
- A multi-agency response is required to improve accident prevention and identify families in need of support.
- The majority of injuries for this age group occur in the home. **Visiting families at home provides an opportunity to identify hazardous environments and discuss accident prevention.**



Maternal Wellbeing – Mental Health

Experiencing mental health problems can make adjustment to motherhood and caring for new and existing children more difficult. Perinatal mental illness encompasses a range of mental health conditions that mothers may experience during pregnancy or in the first year after the birth of their child. Illnesses include antenatal and postnatal depression, maternal obsessive compulsive disorder, anxiety and psychotic disorders. These conditions may be experienced for the first time in pregnancy, or can be to a recurrence of existing conditions.

NICE estimate 3% of mothers will experience severe mental health needs (around 300 women each year in Norfolk) and 10-30% with have mild to moderate mental health needs (2,600 – 4,500 women).

| Condition | Lower est. | Upper est. | Estimated number in Norfolk | |
|--|------------|------------|-----------------------------|-------|
| Postpartum Psychosis | 0.2% | | 20 | |
| Chronic serious mental illness | 0.2% | | 20 | |
| Severe depressive illness | 3% | | 265 | |
| Mild to moderate depressive illness and anxiety states | 10% | 15% | 875 | 1,310 |
| Post-traumatic stress disorder | 3% | | 265 | |
| Adjustment disorders and distress | 15% | 30% | 1,310 | 2,620 |



Impact of Poor Maternal Mental Health

- Childbirth and new motherhood carries an expectation of happiness and is a time of emotional upheaval and adjustment to changes in lifestyle and relationships.
- Significant mental health problems at this time cause enormous distress and can seriously interfere with the adjustment to motherhood and the care of the new-born baby as well as existing children.
- Poorly managed, perinatal mental health problems can have lasting effects on maternal self esteem, partner and family relationships as well as the mental health and social adjustment of the child.
- Poor maternal mental health can effect any family, regardless of deprivation or other characteristics.
- A Early Childhood and Family Service can help to identify families affected and provide support to mothers experiencing poor mental health



Fathers and early years

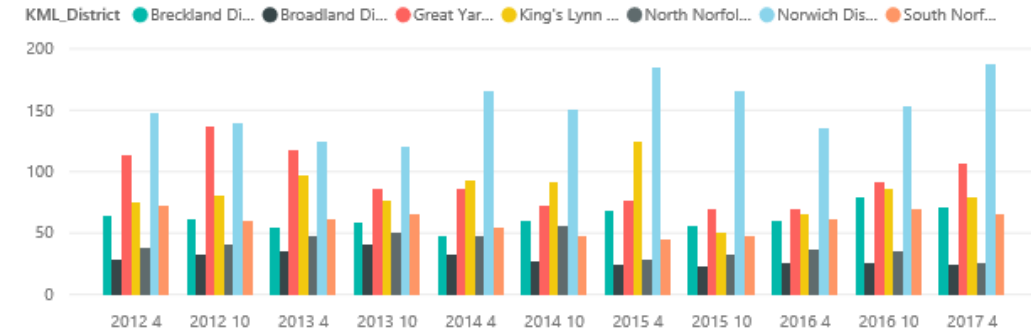
- Fathers' early engagement in childcare is associated with positive developmental outcomes in children.
- Evidence submitted to the Parliamentary Inquiry on Parenting and Social Mobility, outlined in a new [report](#), suggests that fathers are often side-lined when family support services are being developed.
- To better engage with fathers, the report, written by the Family and Childcare Trust - the inquiry's secretariat, recommends a flexible and genuinely inclusive approach to parenting support programmes or campaigns be adopted.
- Fathers' poor mental health **during the pregnancy** can impact on their children (particularly boys) right through to age seven; more emotional, conduct & total problems, attention difficulties and behavioural/emotional/psychiatric problems.
- Three year olds whose fathers were very involved with them at age nine months are more cheerful and positive than three-year-olds whose fathers had been less involved.
- Low interest by fathers in his child's education has a strong negative impact and reduces a boy's chance of escaping poverty by 25%.



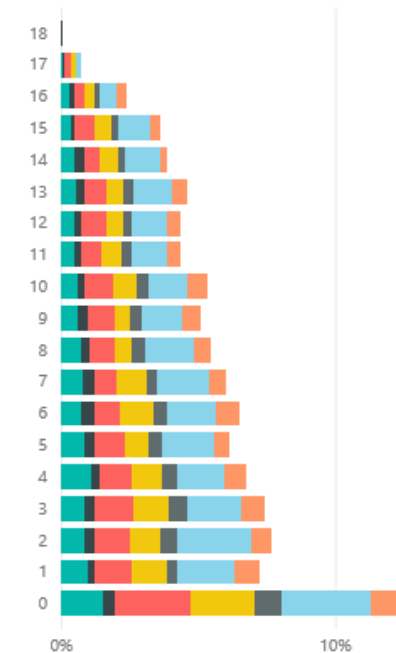
Child Protection

- Over a six year period (2012-17) there have been 5,705 cases of children in Child Protection in Norfolk
- The age profile is primarily very young children – and therefore a Early Childhood and Family Service is well placed to impact on this group
- The majority of cases are due to neglect, followed by emotional abuse

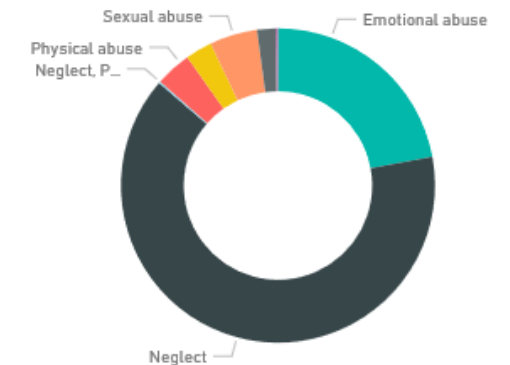
Cases by YEAR, Month and KML_District



%GT Cases and Count of Cases by AGE and KML_Distri...



Cases by REG_CATEGORY

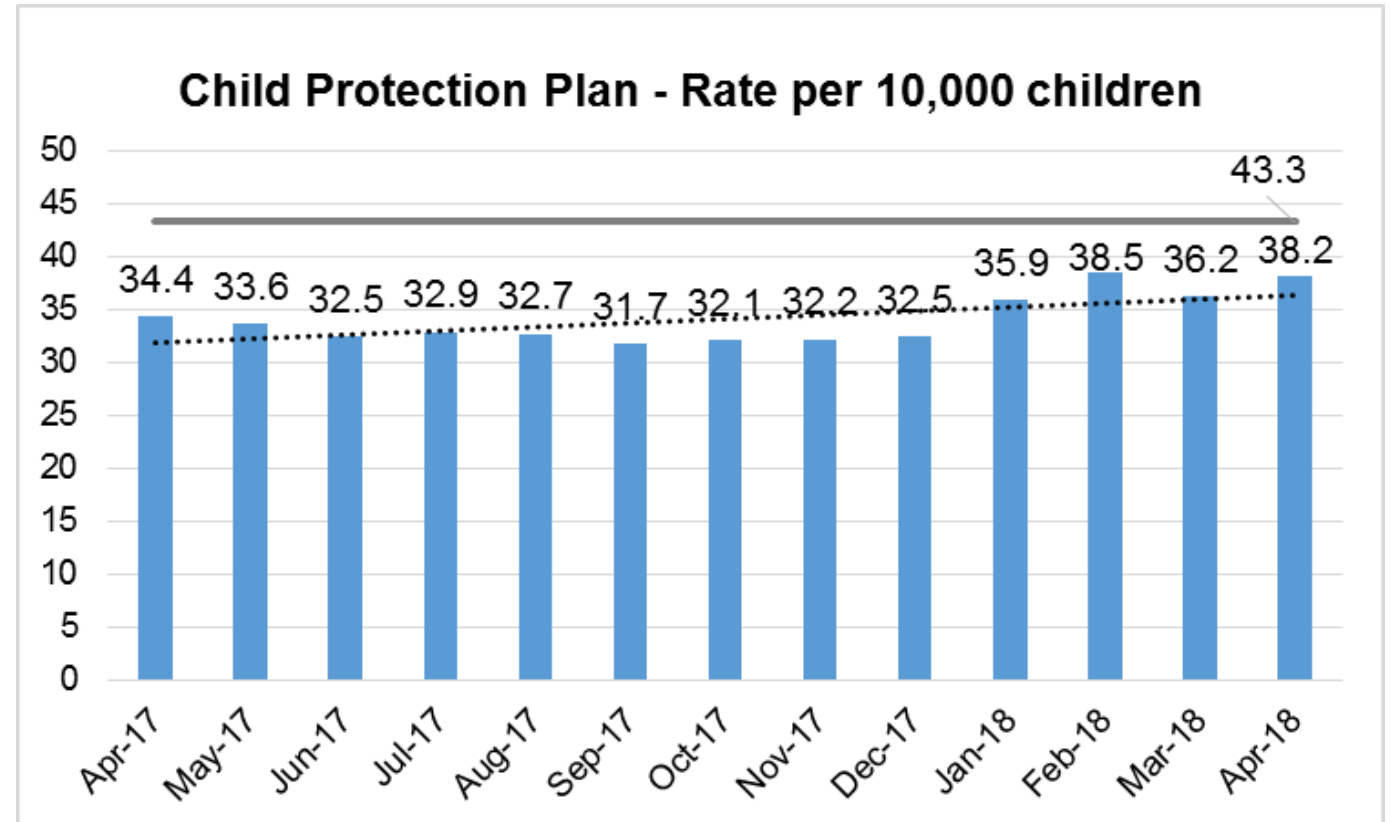




Child Protection

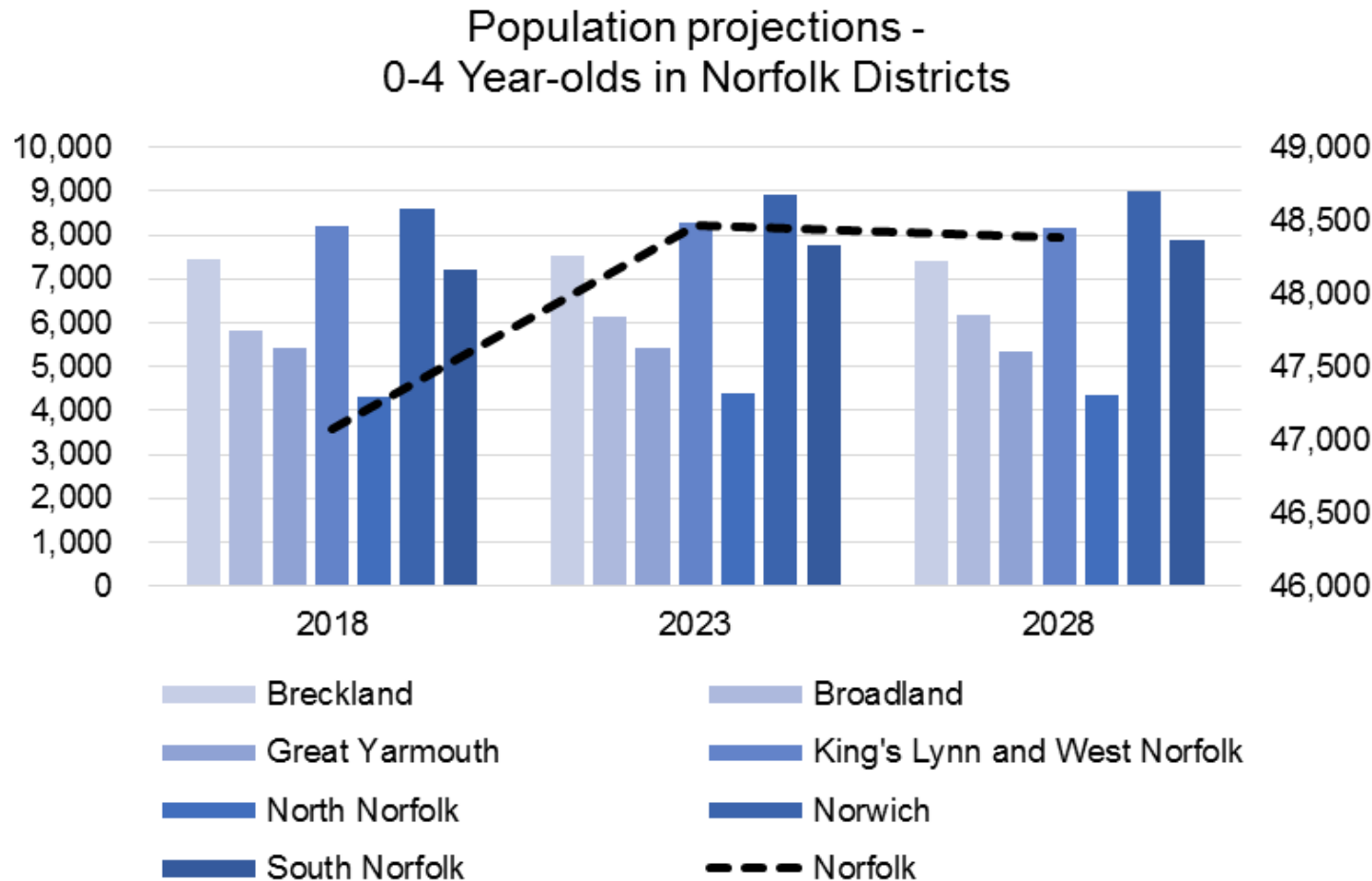
In April 2018 there were 646 children in Norfolk subject to a child protection (CP) plan. Over the last year the number of children subject to CP plans in Norfolk has risen to 38 per 10,000 children under 18 years (10k) from 34 per 10k in April 2017.

Although Norfolk remains below the national rate of 43 per 10k, we would consider one of the outcomes of a successful early family and childhood service to reduce this rate.





Population trends (aged under 5)



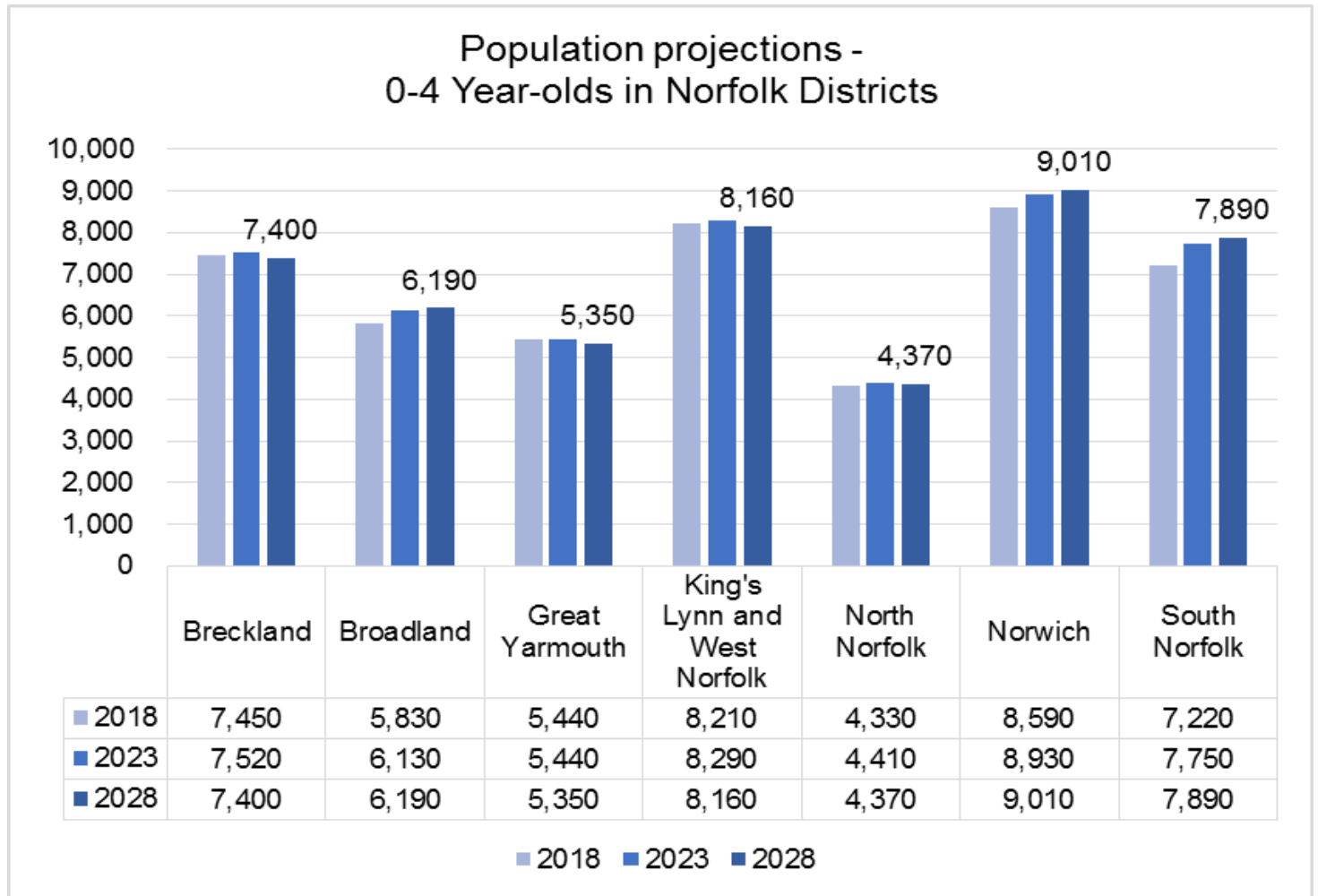
- There are 47,000 children aged 0-4 in Norfolk.
- By 2023 this is predicted to increase by 1,500 children to 48,500.
- This is then expected to plateau and even reduce slightly to 48,350 in 2028.



District Population trend

The 0-4 population trends vary in different LA Districts.

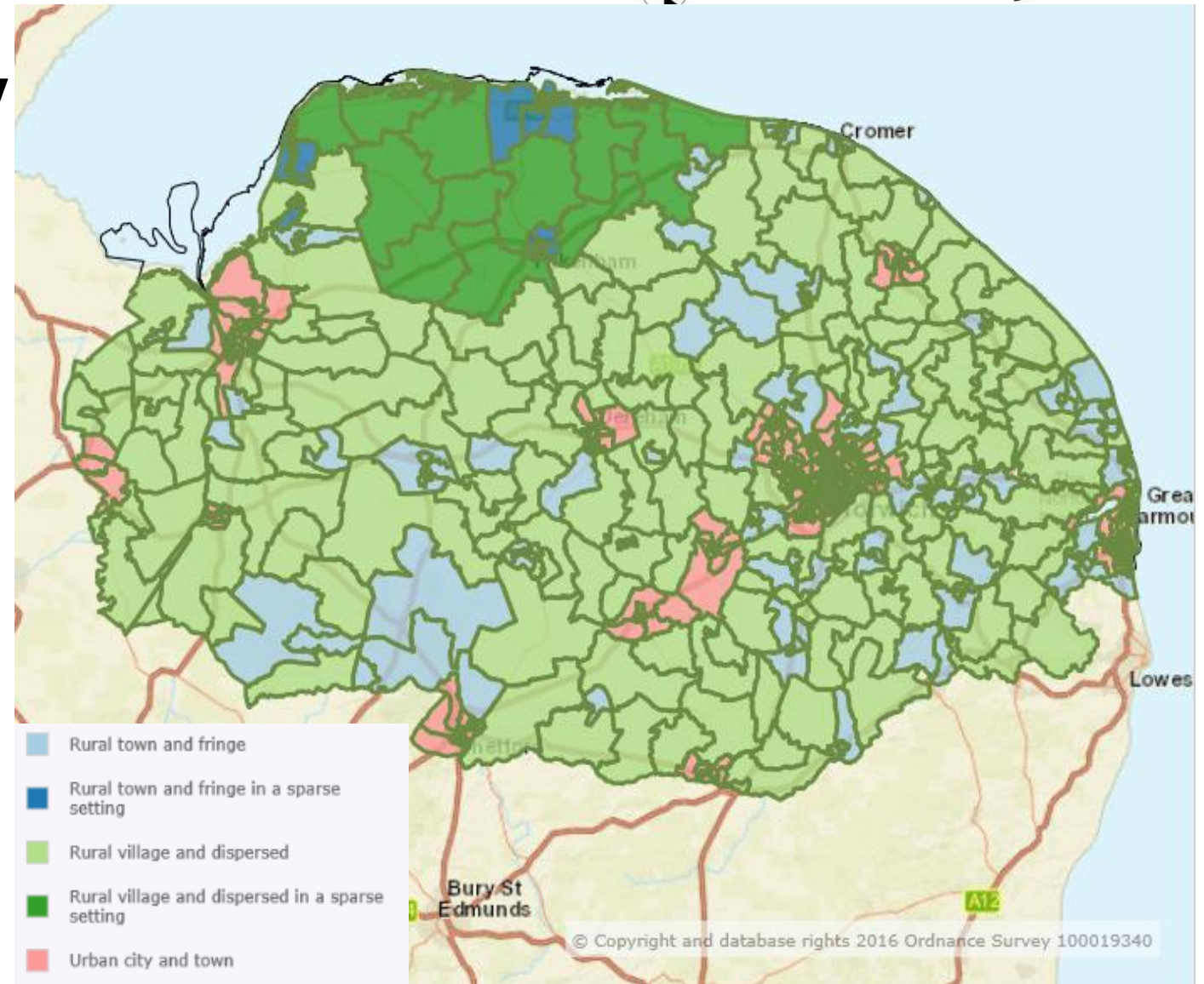
The population of 0-4s is expected to continue to increase in Broadland, Norwich and South Norfolk by 2028.



Population density

Some areas of Norfolk are quite urban in nature with lots of people and services in a relatively small area (such as King's Lynn, Norwich and Great Yarmouth)

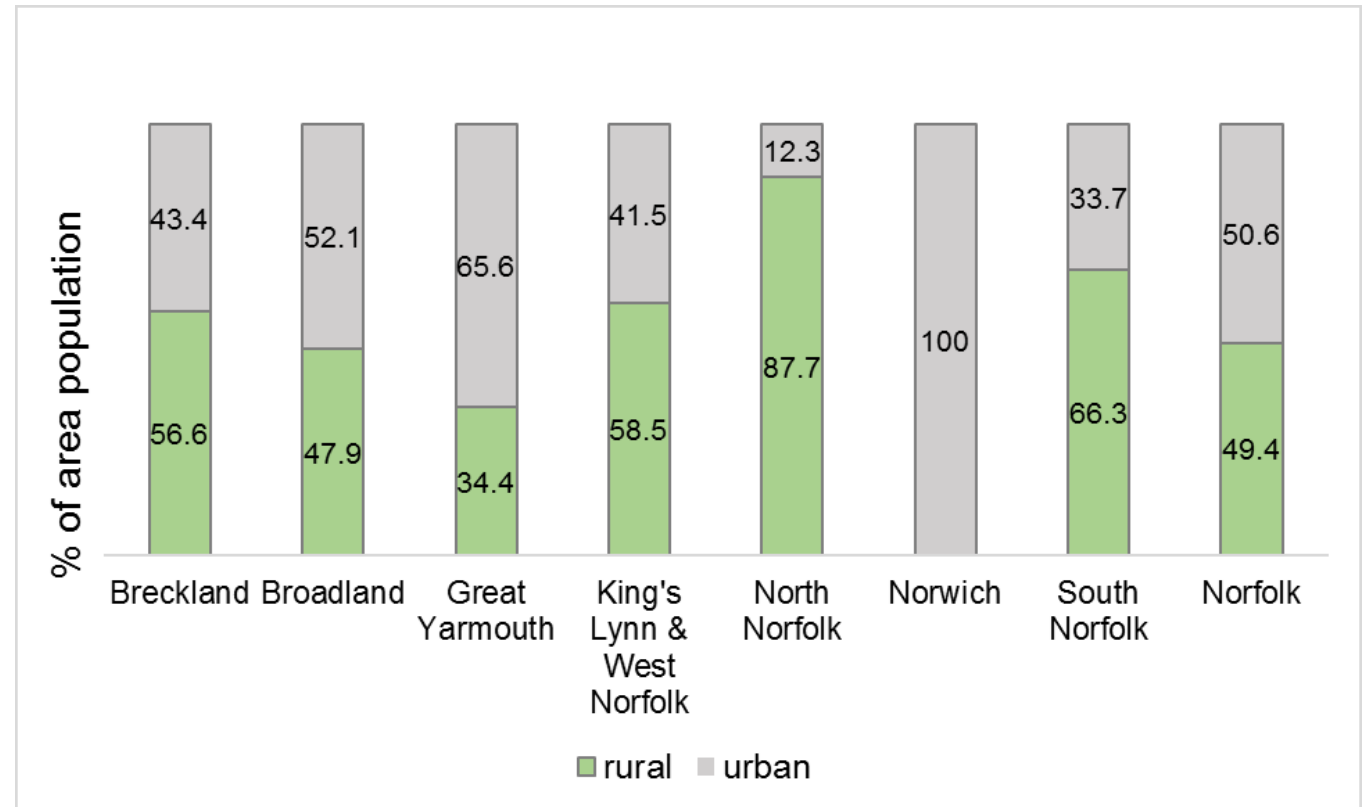
Other areas are sparsely populated with very few services and poor transport links (such as North Norfolk)





Rural and urban split

- While Norfolk is thought of as a 'rural county', half of all of our residents live in an environment that can be classed as urban.
- Most districts have at least a third of their population living in urban areas (except North Norfolk)



Source: ONS mid-2014 population estimates



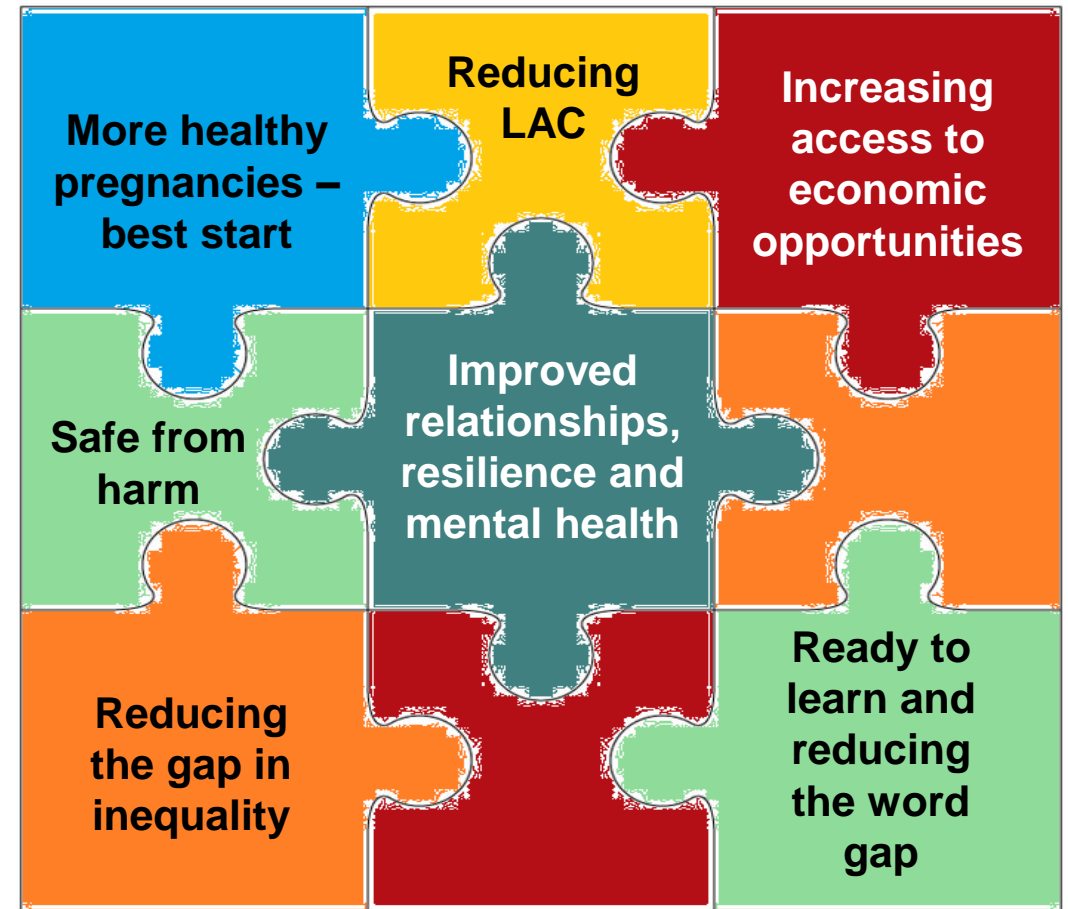
Intended Outcomes of an Early Childhood and Family Service



Outcomes for Norfolk's Children & Young People

Drivers for improving outcomes and life chances for Norfolk's children:

- More children in early years achieve positive physical, social and emotional developmental milestones (ready to learn/school readiness).
- More parents are supporting their children's learning from birth to aged 5 in the community and at home.
- More children have improved early speech language listening and communication at two years
- More mothers experience positive mental wellbeing during pregnancy and the first two years of their child's life.
- Fewer children experience parental conflict.
- More children remain safely in the care of their families from birth to age 5.



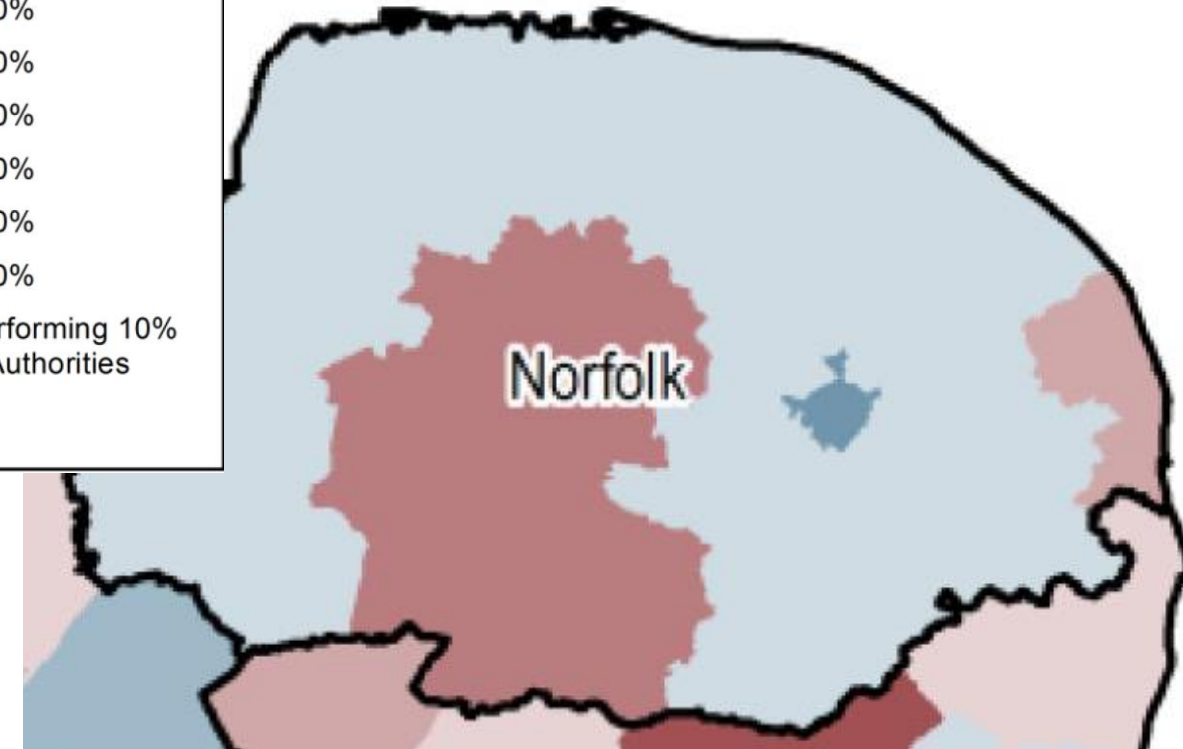
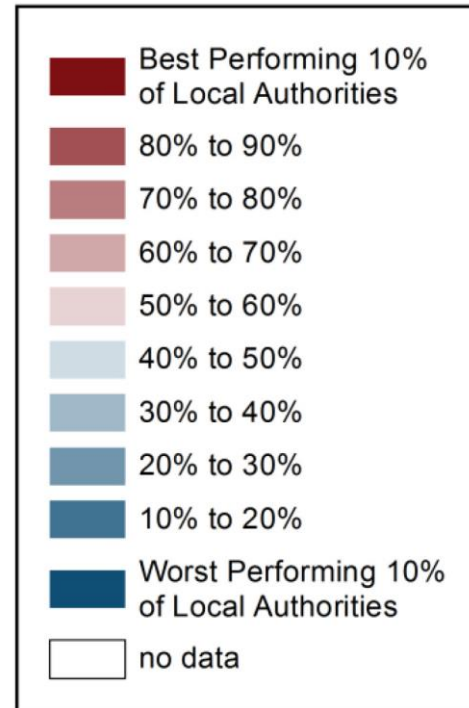


Social Mobility

Social mobility is about ensuring that everyone has the opportunity to build a good life for themselves regardless of their family background.

Norwich has one of the lowest rates of social mobility in the county.

In 2016 the Social Mobility Index found Norwich to be 323rd out of 324 districts with regard to social mobility. Waveney was 318th, Great Yarmouth was 297th, Kings Lynn and West Norfolk was 293rd and North Norfolk was 280th – all defined by the study as social mobility “cold spots”.



Source: Social Mobility Commission 2016



Social Mobility

Priorities from the Norwich Opportunity Area



- **Priority 1: Improve early speech, language, listening and communication.** To give children a better start at school and improve their chances of success as they move through the key stages of education.



- **Priority 2: Raise attainment through targeted, evidence-based continuous professional development (CPD) for teachers and stronger system leadership support.** Targeting expert school improvement support so that children attain to a higher level, which will give them a greater choice of pathways to success. Working with existing school leaders to strengthen the system so that more great local schools and colleges are proactively offering support to other schools.



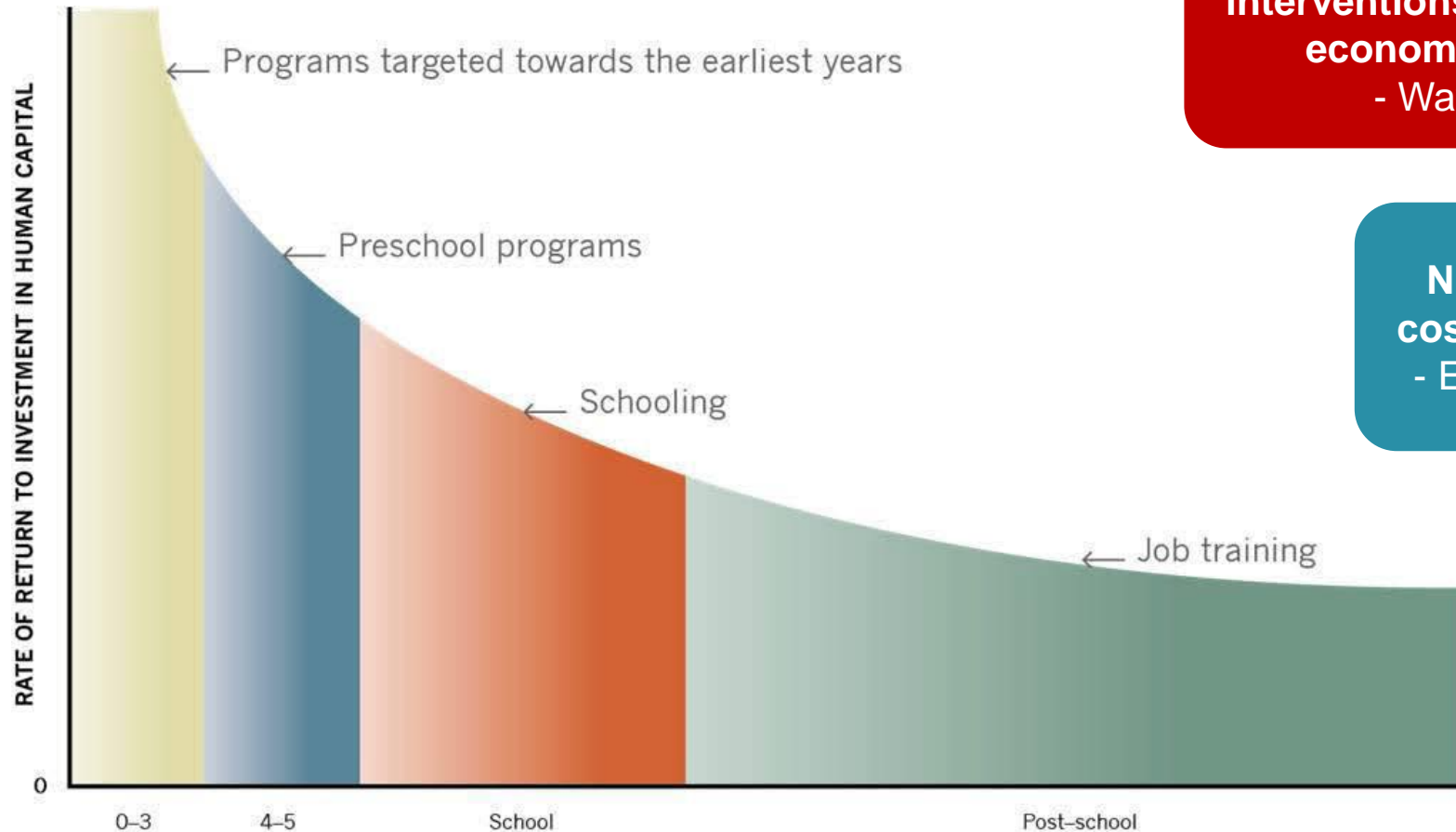
- **Priority 3: Support children at risk of exclusion from school.** Supporting schools to keep children in lessons so that they can access the educational opportunities available to them.



- **Priority 4: Give young people the information and support they need to move successfully between school, college, university and into work.** A coordinated approach, bringing schools, colleges, employers and universities together to ensure that all children understand the full range of options that are available to them for further study and future careers.



Return on Investment - Why focus on Early Years



For every £1 spent on 0-5 years interventions, there is an average economic return of £2.83
- Wave Trust, 2014

Norfolk's late intervention annual costs are £194m or £220 per person.
- Early Intervention Foundation, 2016

The younger the person, the sooner the action, the better the prognosis.
- Miller-Fik, 2017



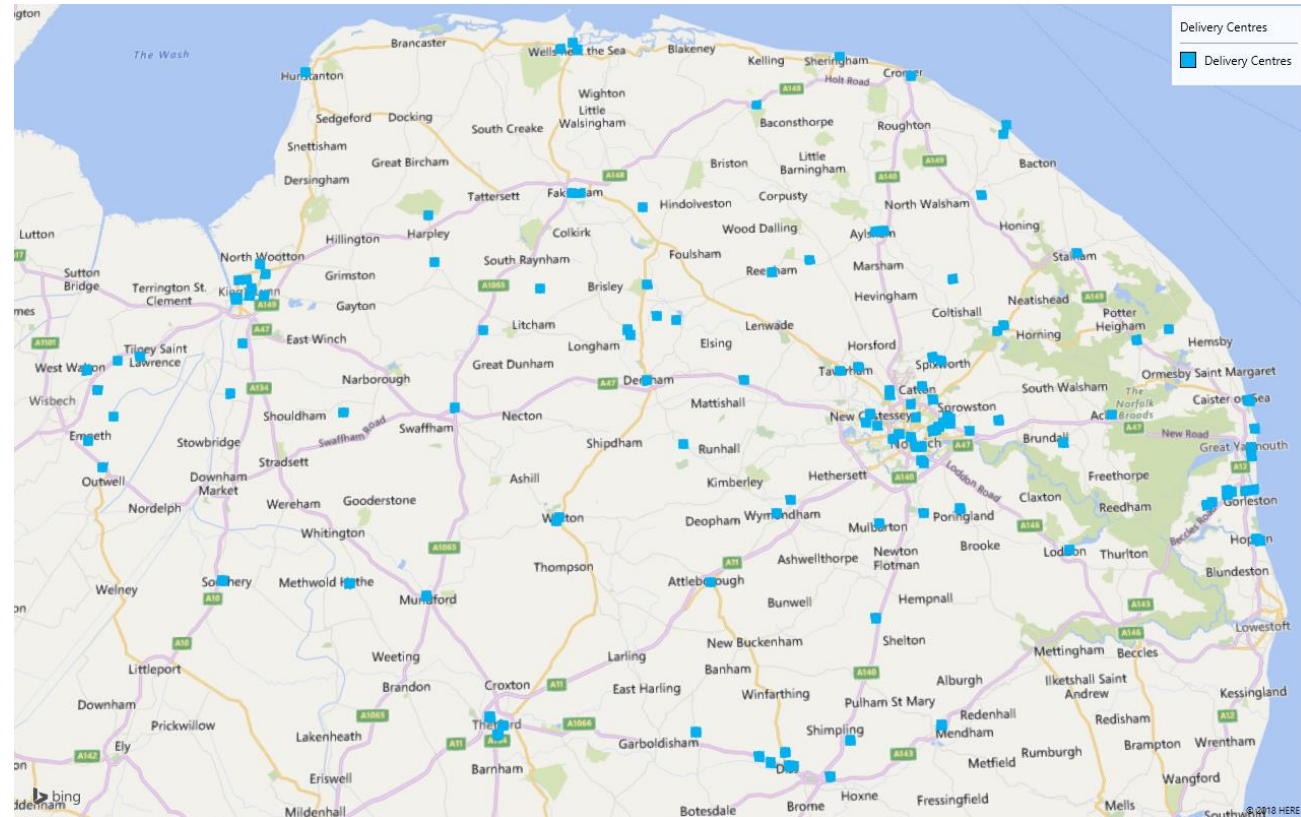
Where are services delivered?

Through **Norfolk Local Service Strategy** we are working to join-up services in our communities, offering help early and in the right places. This will be better for people and better for the council, by making best use of our resources.



Current delivery locations:

Children's Centre Delivery Locations

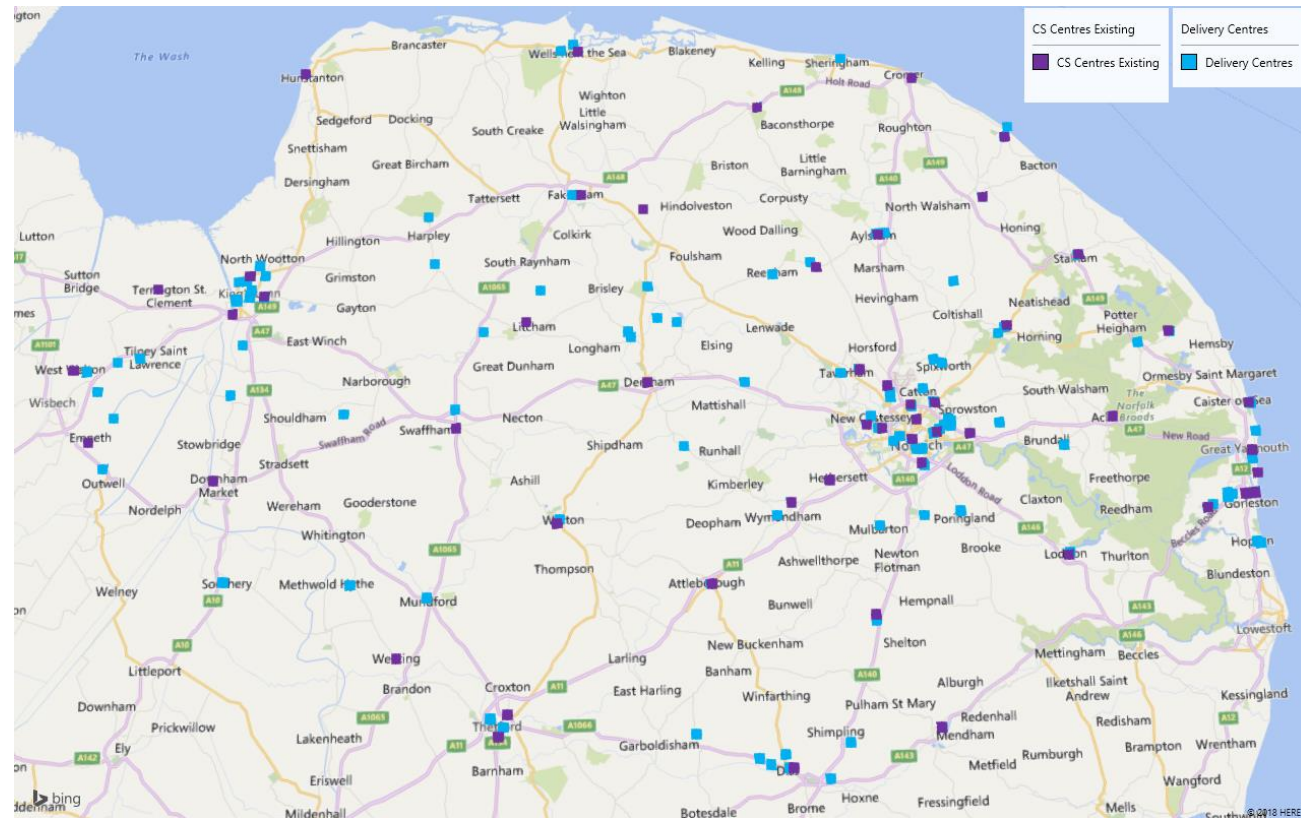




Current delivery locations:

Children's centre
Delivery Locations

Designated children's
centres



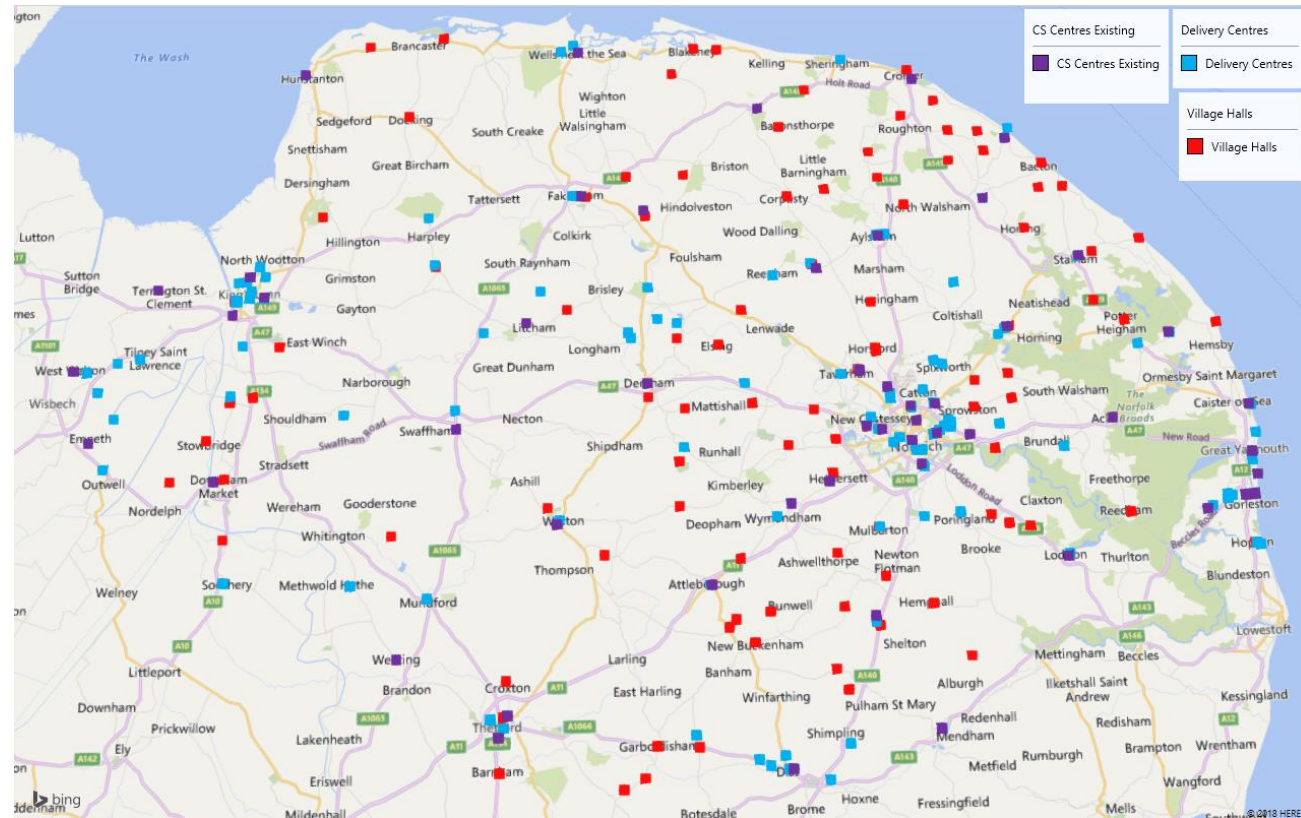


Current and proposed additional delivery locations:

Children's centre
Delivery Locations

Designated children's
centres

Village Halls





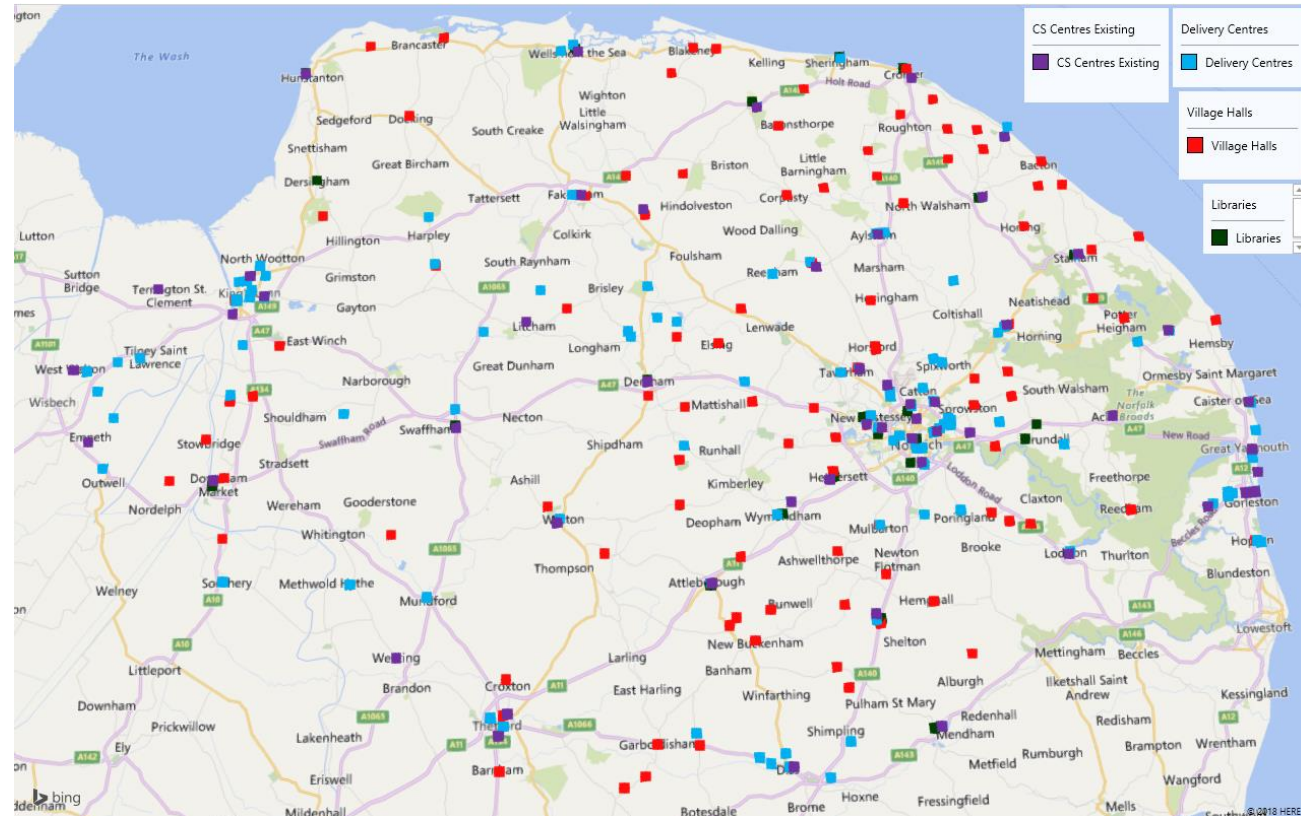
Current and proposed additional delivery locations:

Children's centre
Delivery Locations

Designated children's
centres

Village Halls

Libraries





Current and proposed additional delivery locations:

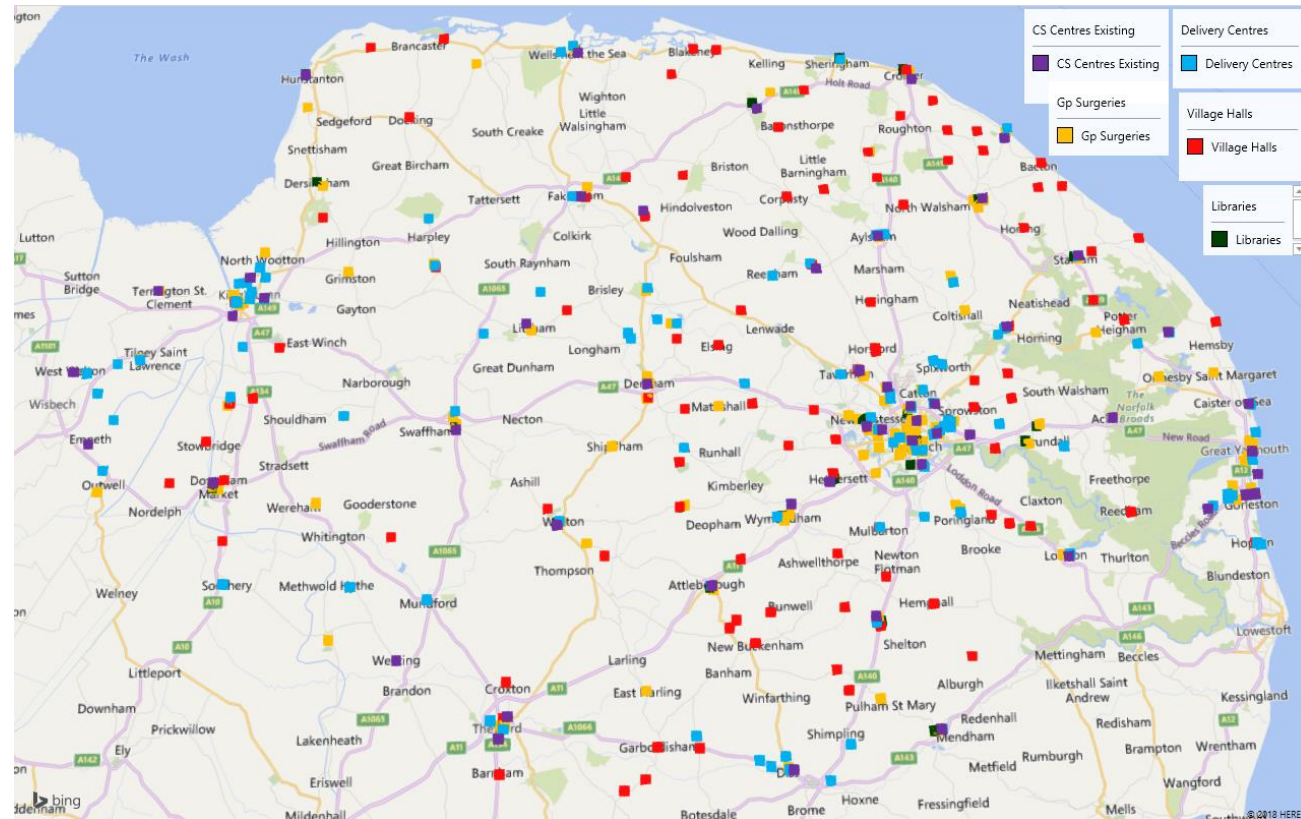
Children's centre
Delivery Locations

Designated children's
centres

Village Halls

Libraries

GP Surgeries





Current and proposed additional delivery locations:

Children's centre
Delivery Locations

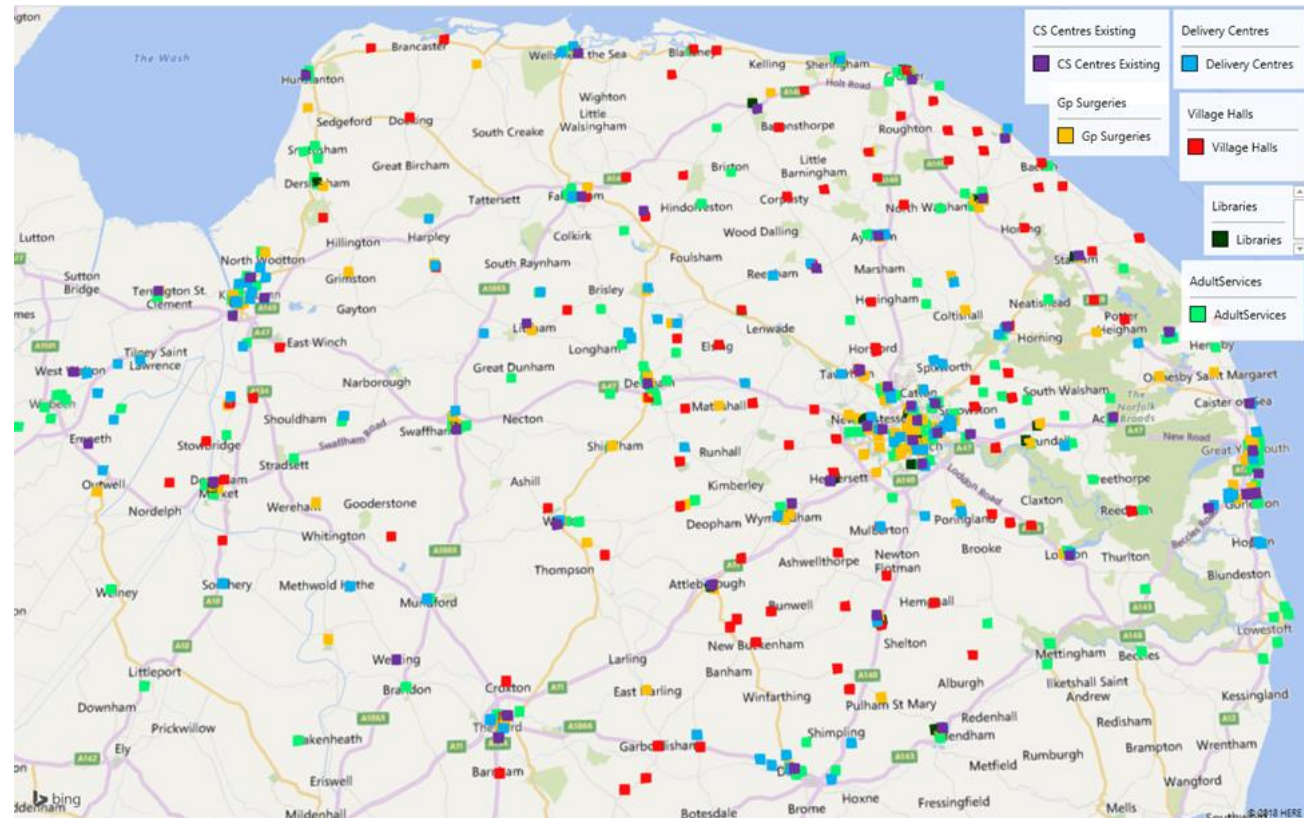
Designated children's
centres

Village Halls

Libraries

GP Surgeries

Adult Services





Current and proposed additional delivery locations:

Children's centre

Delivery Locations

Designated children's centres

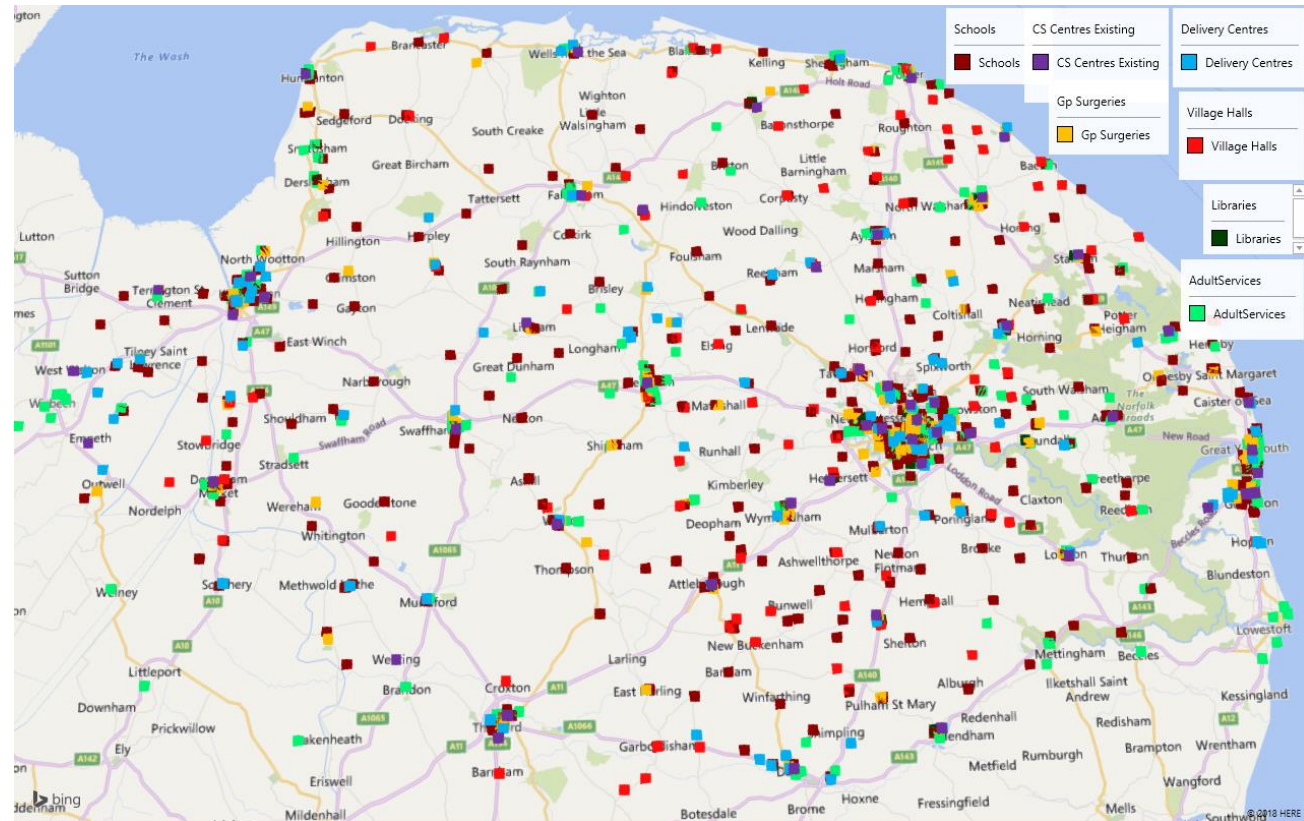
Village Halls

Libraries

GP Surgeries

Adult Services

Schools



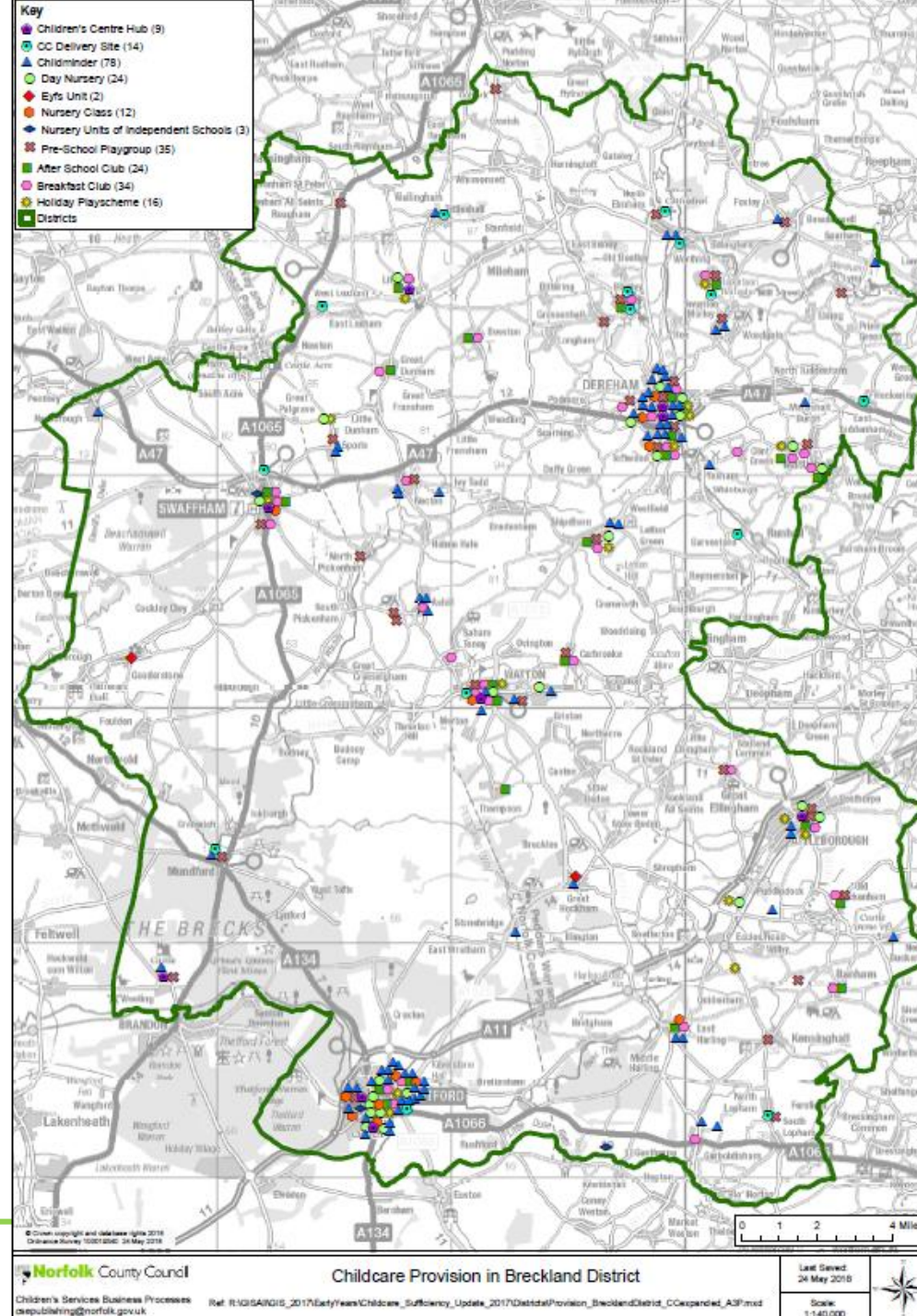
Childcare

Currently some children's centres are also used to provide childcare.

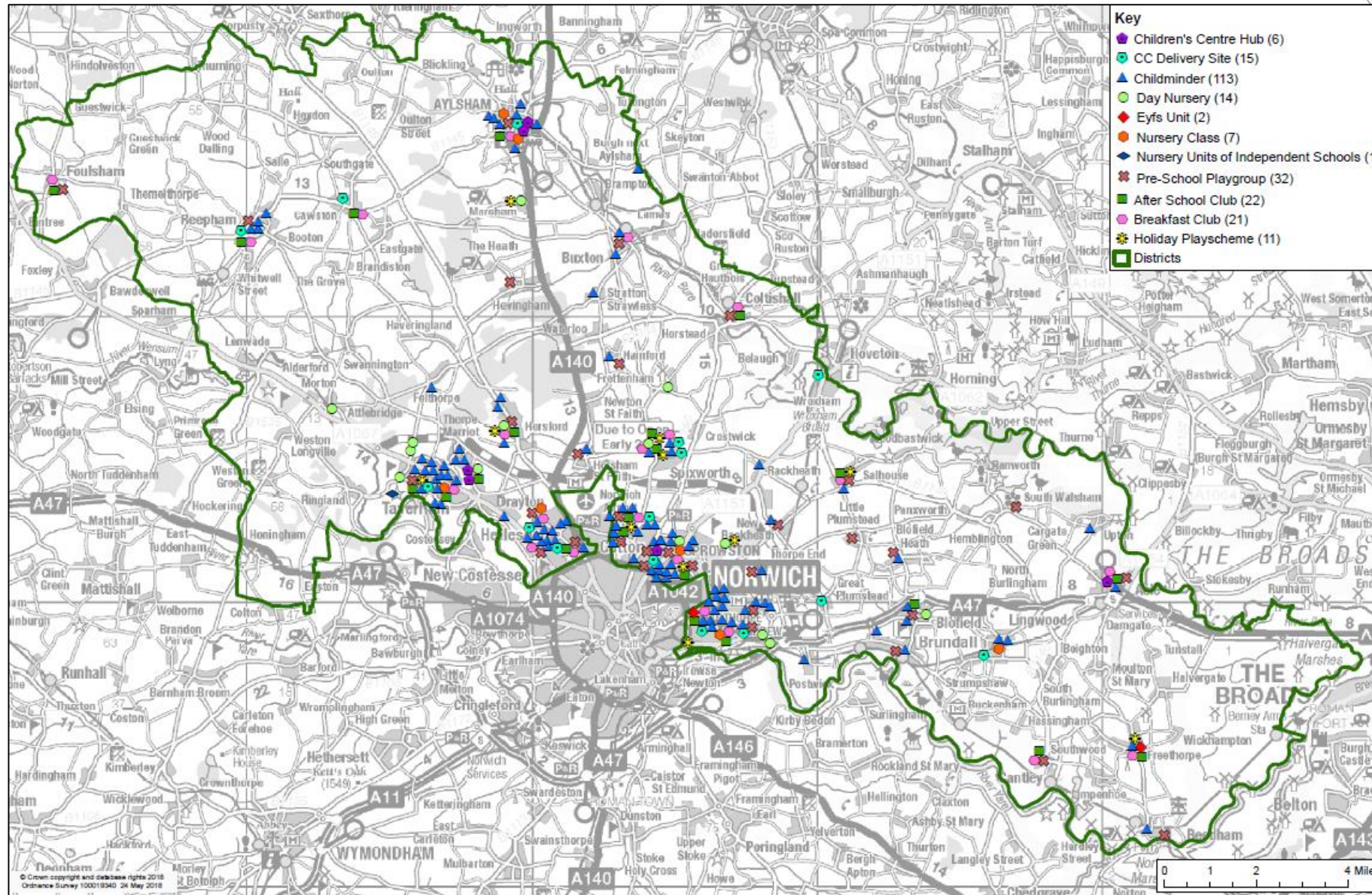
The following maps show the other childcare provision available in the county.



Norfolk County Council



**Breckland
childcare
provision**

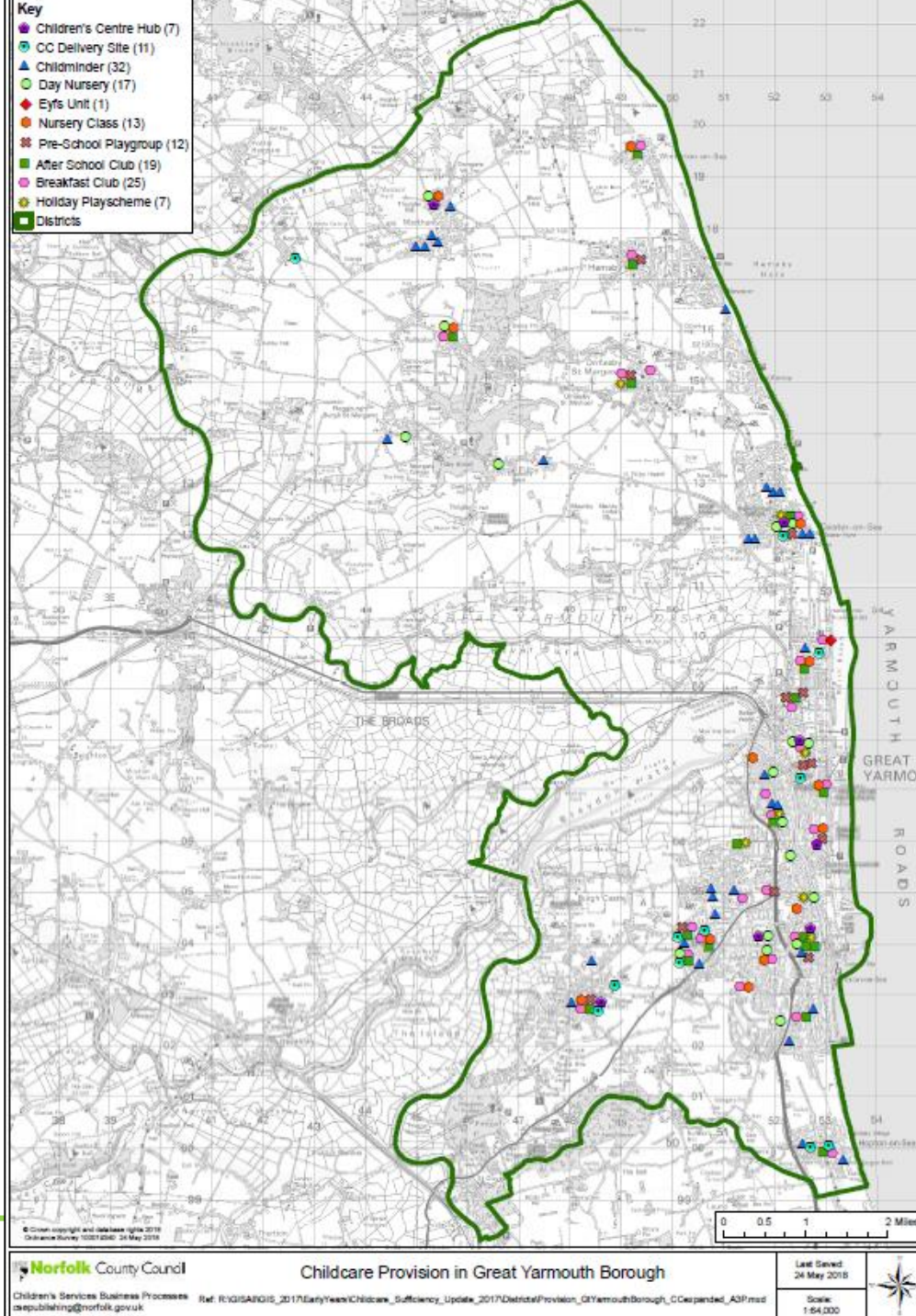


Broadland childcare provision



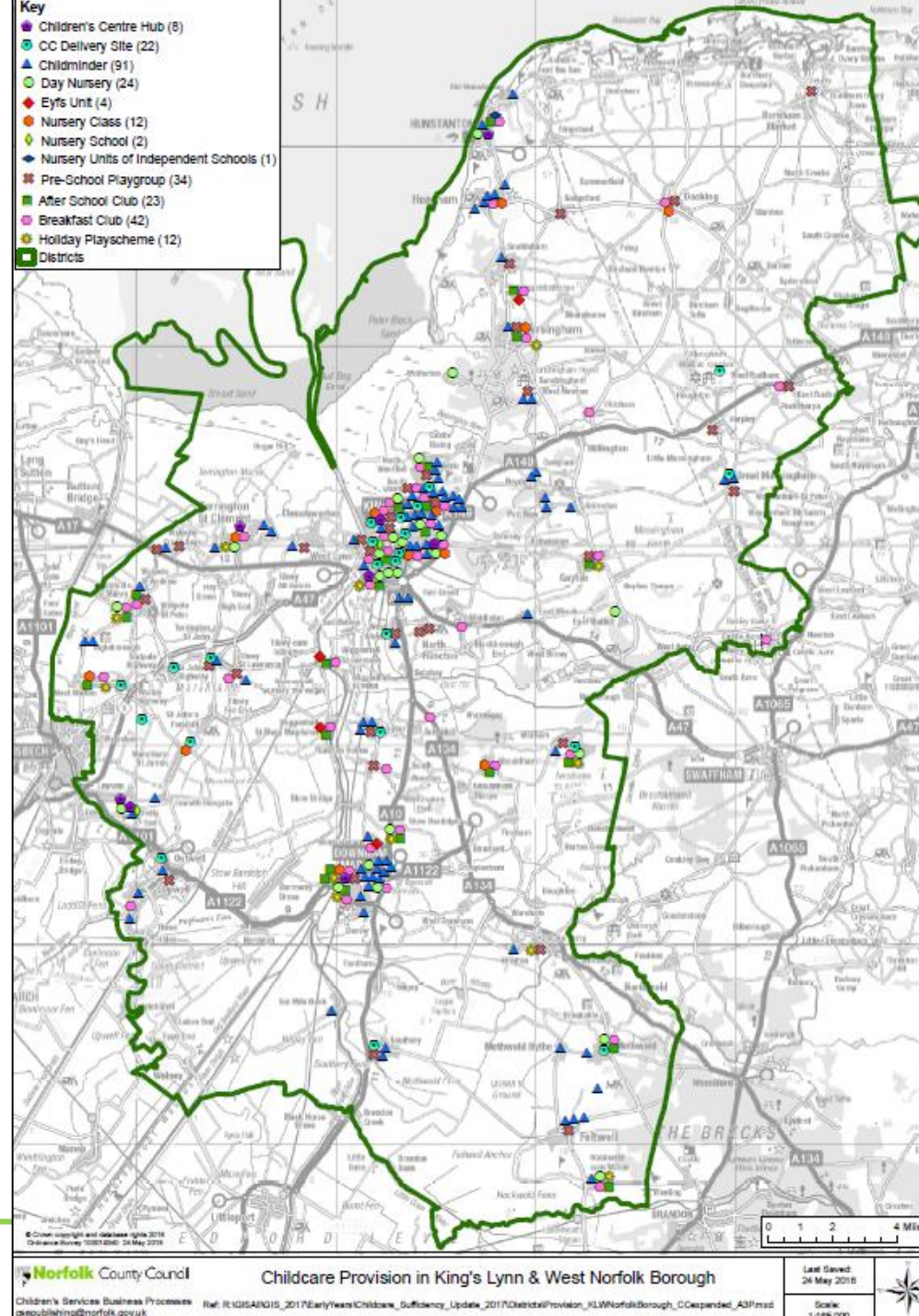


Great Yarmouth childcare provision



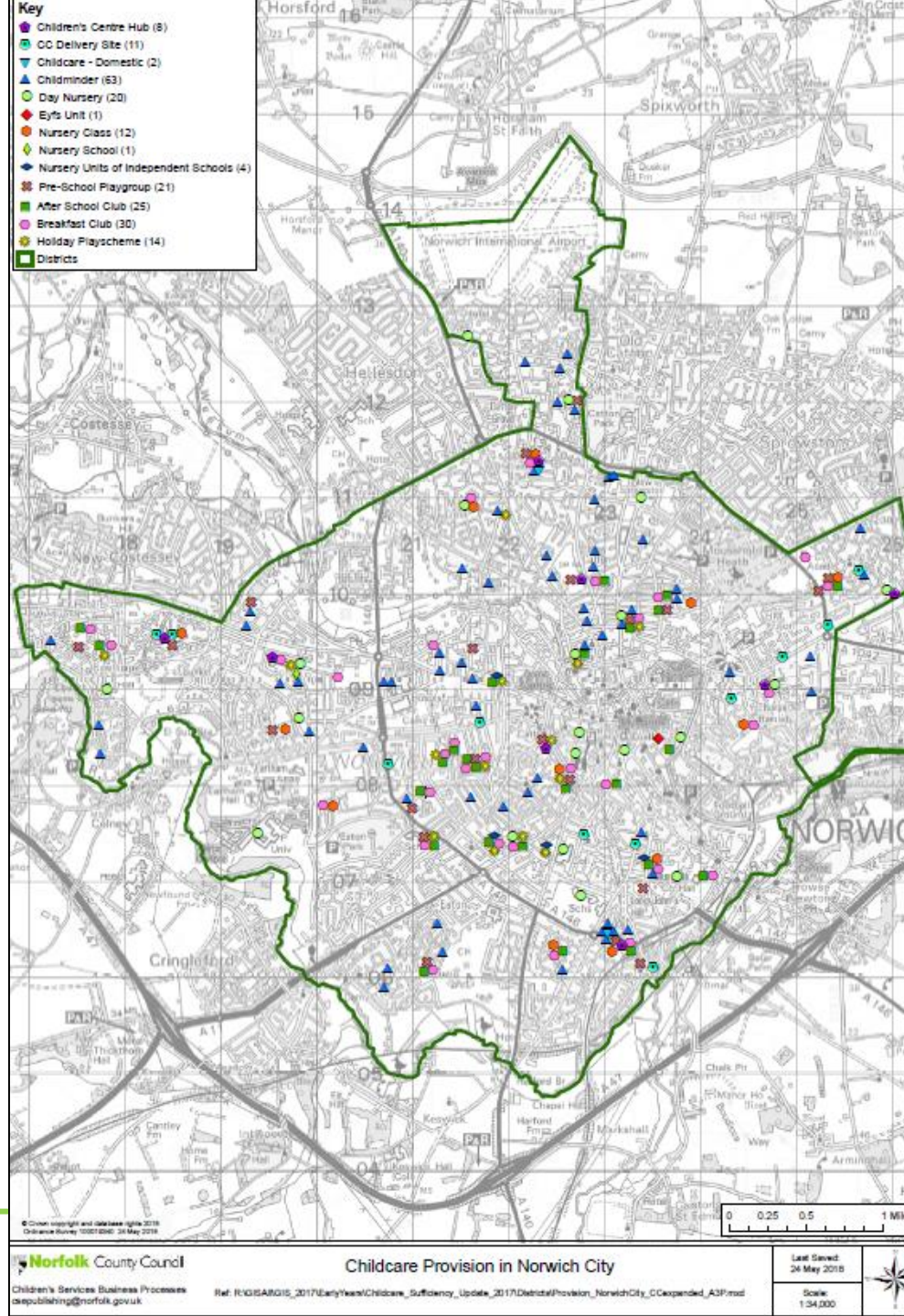


Kings Lynn and West Norfolk childcare provision

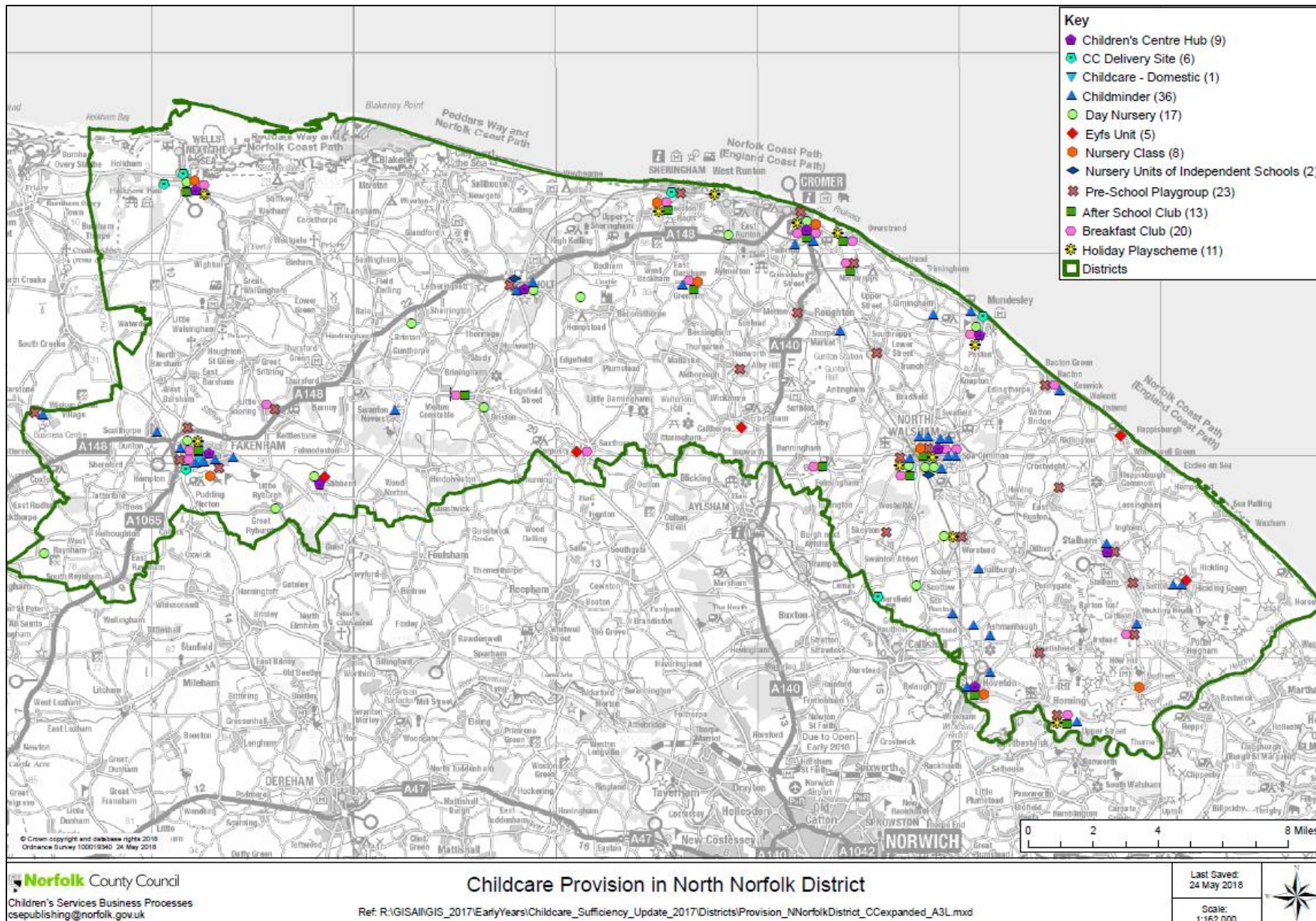




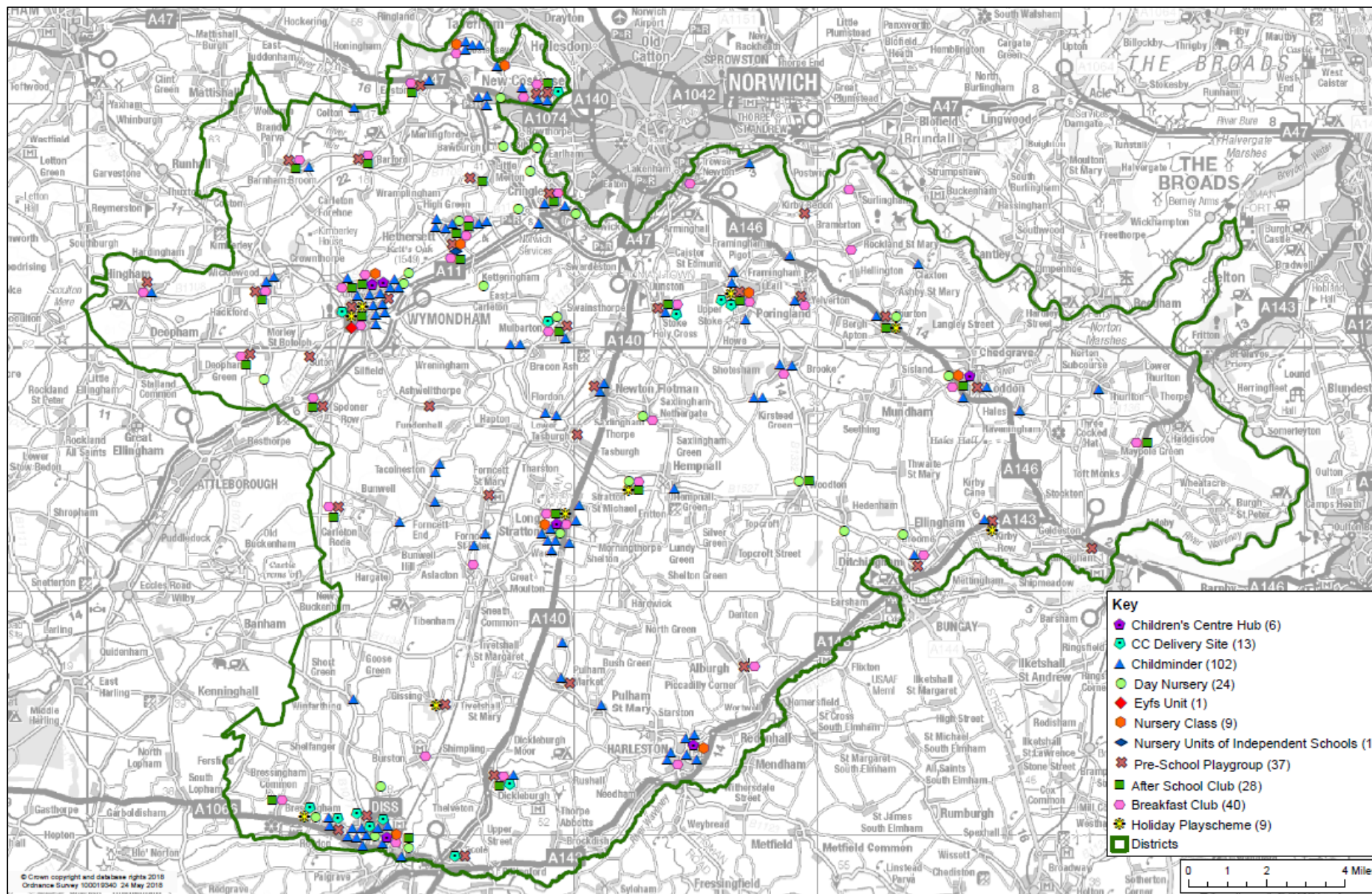
Norwich childcare provision



North Norfolk childcare provision



South Norfolk childcare provision





Early Childhood and Family Service Data Pack

This evidence in this data pack was produced by Norfolk County Council's:

- Children's Services - Integrated Commissioning Team
 - Community and Environmental Services - Public Health
 - Community and Environmental Services - Information and Analytics
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