![Lambeth]

Lambeth's Joint Strategic Needs Assessment (JSNA)

For

Children and Young People

2016-17

Public Health, Lambeth Council

Introduction

This JSNA aims to provide the Local Authority, CCG and partner organisations, as well as the public, with information on the health and wellbeing of children and young people in Lambeth. It takes a life-course approach, and the chosen indicators provide an overview of the main milestones of children and young people, from maternity through to 25 years old. Health issues of particular priority are also highlighted.

Where possible, the indicators identify specific groups of children whose needs may be greater than that of the general children's population, or whose lives could be disproportionately affected by having worse health outcomes than others.

The hope is that this detailed analysis allows stakeholders to better develop services that help to improve the health and wellbeing of all children and young people, as well as closing gaps between more vulnerable groups and the general children's population.

How the JSNA was developed

The Children's and Young People JSNA was created with the support and guidance of a steering group consisting of representatives from Lambeth Council and the Lambeth CCG. The group reported to the Children and Families Partnership (of the Health and Wellbeing Board) and the Children's Maternity Board.

Data compilation and analysis was carried out by the Public Health Team in Lambeth, with the steering group reviewing results, feeding back on quality and usability of data.

The data work resulted in two main products:

- A table containing 100 indicators and, where available, a trend analysis and comparison of Lambeth with London and England
- A 2 by 2 matrix of need (the Red Box) that groups these indicators into broad categories of high and low need, helping to steer stakeholders to priority areas for intervention.

How the needs were prioritised in the Red Box

A practical approach to this was taken given the many and varying ways of assessing and prioritising needs:

1) Benchmarking Lambeth's position against London's measures as it has an approximately similar population profile
2) Development over time: is the trend of an indicator improving or deteriorating?
3) Existing local priority identified through other specific needs analyses and/or partnership concerns. An example of this is CSE, a Safeguarding Board priority.

Any one of the three criteria can be used to decide the location of an indicator in the matrix.

Lambeth Children's Red Box – Summary of Health & Wellbeing

High Need / Improving (yellow):
- Children in poverty under 16 year olds
- A&E attendances 0-4 year olds*
- School Readiness
- Teenage conceptions
- First time entrants youth justice system
- Number of Children in care
- Disabilities & learning disabilities
- Childhood immunisations

High Need / Worsening or Unchanged (red):
- Oral Health*
- Childhood obesity
- Long term conditions, asthma, epilepsy, diabetes, sickle cell anemia/thalassemia*
- Children in care (educational attainment, placement stability, risky behaviour)
- Care Leavers NEETs, suitable accommodation
- Educational attainment (GCSE and Free School Meals GCSE)
- Safeguarding*: Child Sexual Exploitation, Neglect, Youth Violence
- Sexual Health
- Mental Health*

Low Need / Improving (green):
- School attendance
- NEETs 16-18 year olds
- Infant Mortality
- Road traffic injuries
- Children in care assessments and checks
- Pupil absence

Low Need / Worsening or Unchanged (yellow):
- Low birth weight babies
- Breast feeding
- Self Harm
- Substance misuse
- Unintentional & deliberate injuries
- Alcohol
- Child mortality under 18 year olds

Improving   *based on local priority/professional expertise   Worsening or Unchanged

For a more detailed rationale for the allocation of the indicators in the red box, please refer to the Appendix.

Conclusion

Looking at the indicators from the Red Box figure, some themes emerge:

- Children with long-term conditions (hospital admissions for Asthma, Epilepsy and Diabetes, childhood obesity, sickle cell anaemia and thalassemia
- Vulnerable/at-risk CYP - looked after children (educational attainment, care placement stability, care leaver NEETs, Suitable Accommodation, number of children in care), CSE, neglect, youth violence
- Deprivation associated (educational attainment FSM, children in poverty under 16 year olds, first time entrants to youth justice system)
- Disabilities and learning disabilities
- Early years (A&E attendances, school readiness, childhood immunisations, oral health)
- Mental health and wellbeing
- Sexual health (including teenage conceptions)

Further steps:

Four more in-depth needs assessments are either underway or will be done over the next year on selected priority areas:

- Child sexual exploitation: this form of child sexual abuse has recently been recognised as a key issue across the UK. The in-depth work will attempt to provide information on local prevalence data (both detected and estimated), evidence on interventions that work.
- Youth violence: this is a re-emerging issue as seen in local police knife crime data. An in-depth analysis of the issue to determine extent of the problem locally and to identify ways to prevent or reduce it will therefore help to tackle the problem.
- Neglect: This is a priority area of concern for the Safeguarding Board in Lambeth. The needs work will provide information on the risk factors of neglect, estimate the prevalence of risk factors in Lambeth and ways to reduce and mitigate the effects of neglect.
- Sickle Cell anaemia and thalassemia: further work will be done to identify ways to improve care, reduce admissions and lead to better care in the community.

The next pages embed the Spine Charts by thematic approach: early years, education, children and young people, looked after children, disability and complex needs

Children and young person outcomes - Methodology
The children's and young persons' outcomes present data across 100 key health indicators of child health and wellbeing, providing a snapshot of children and young people's health. The outcomes have been split into five domains (early years, education, children & young people, looked after children, and disabilities & long term conditions) and summarised as spine charts.

Spine charts consist of colour coded points indicating whether Lambeth is significantly different from the London average. In the spine chart, the black dotted vertical line represents the London benchmark. The blue diamond represents the England value. The light grey bar shows the range between the worst / highest and best / lowest areas in London, with the interquartile range shown in dark grey. This dark grey bar shows 50% of all values found in this indicator, and shows the difference between the 25th and 75th percentile. When all local authorities' values for an indicator are ranked from lowest to highest, the 25th percentile is 25% of the way through the ranking, and the 75th is 75% of the way through.

The light grey bar represents the range and skew of the data. If the lowest and highest values are the same distance from the mean, the light grey bar will extend evenly across the chart. If the data are skewed towards the worst / high values the light grey bar will extend to the left hand side, and if the data are skewed towards the best / low values, the light grey bar will extend to the right hand side.
Each dot represents the Lambeth indicator value. Dots to the left of the red line show that the value for Lambeth is higher than the London average, dots to the right of the line show that the value is lower than the London average.
The table includes a trend over time. The arrow will be orientated in the direction of travel, down - decreasing and up – increasing, with the colour depicting if this is a worsening or improving position. Change over time evaluates historical data to determine the direction of travel.
The sparkline shows the latest data points available, sparklines **cannot be compared against each other** and only show the trend of the respective indicator.

How do you determine the colour of Lambeth for indicators?
The way that the colour is assigned is based on statistically significant differences from the London value. This is determined by using the London value and evaluating whether this lies within the confidence interval of Lambeth. For some indicators such as vaccination coverage, there is a set goal (for example, 90% vaccination rates is the goal for many of the immunisation indicators). The colour of the dot depends on whether Lambeth meets this goal or not.

Why are some indicators presented as higher/lower than the benchmark and shaded blue, instead of better/worse and shaded red, gold or green?
Indicators that are shaded blue rather than red, gold or green are presented in this way because it is not straightforward to determine for these indicators whether a high value is good or bad. Instead, these indicators highlight if they are statistically higher or lower compared to London.
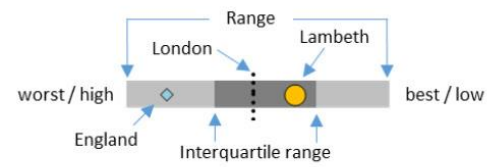
Early years

The indicator data are shown in the form of a spine chart with colour coded points indicating whether the area is significantly different from the London average. In the spine chart the black dotted vertical line represents the London benchmark.

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Range / London / Lambeth / worst / high / England / Interquartile range / best / low

Recent trends

⬆ Increasing / Getting better

⬇ Decreasing / Getting better

⬆ Increasing / Getting worse

⬇ Decreasing / Getting worse

⬆ Increasing   ⬇ Decreasing

■ No significant change

Benchmarking against London: ● Better ● Similar ● Worse ● Not compared ● Higher ● Lower ◇ England value

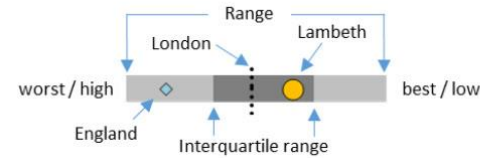|	Indicator	Measure	Time period	Lambeth numerator	Lambeth	England	London	London worst / high	London Range	London best / low	Change over time	Trend
1	Children low income families (under 20 yrs)	Proportion %	2013	17,210	27.3	18.0	21.8	35.5		8.3	⬇	
2	Family homelessness, households with dependent children or pregnant woman accepted as unintentionally homeless and eligible for assistance	Crude rate per 1,000	2015-16	430	3.1	1.9	4.5	10.0		0.5	⬇	
3	Low birth weight babies (under 2500g)	Proportion %	2014	116	2.8	2.9	3.2	5.0		2.1	■	
4	Smoking status at time of delivery	Proportion %	2014/15	152	3.4	11.4	4.8	10.4		2.1	⬇	
5	Breastfeeding - breastfeeding initiation	Proportion %	2014/15	4,083	91.4	74.3	86.1	73.3		92.9	⬇	
6	Stillbirths (rate per 1,000 births)	Crude rate per 1,000	2013-15	54	3.9	4.6	5.0	7.0		3.9	⬇	
7	Under 18 conceptions	Crude rate per 1,000	2015	123	28.7	20.8	19.2	31.0		10.6	⬇	
8	Under 18s conceptions leading to abortion	% of conceptions	2015	85	69.1	51.2	63.4	82.4		45.5	⬆	
9	Infant mortality	Crude rate per 1,000	2012-14	51	3.7	4.0	3.6	5.6		1.6	⬇	
10	Completed MenC immunisation course (by age 1 yr) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2012/13	4,298	91.4	93.9	89.9	75.9		95.5	■	
11	Eligible children who have received one booster dose of PCV vaccine by their 2nd birthday — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	4,234	92.4	93.9	90.3	78.7		96.3	■	
12	Population vaccination coverage Dtap / IPV / Hib (1 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	4,244	92.6	94.2	90.6	75.1		96.4	⬆	
13	Population vaccination coverage Dtap / IPV / Hib (2 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	4,259	95.4	95.7	92.5	79.2		97.5	⬆	
14	Population vaccination coverage MMR for one dose (2 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	4,034	90.4	92.3	87.3	73.8		93.6	⬆	
15	Population vaccination coverage MMR for one dose (5 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	3,915	94.4	94.4	90.7	75.6		95.8	⬆	
16	Population vaccination coverage MMR for two doses (5 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	3,700	89.2	88.6	81.1	64.0		89.7	⬆	
17	Population vaccination coverage Hib / MenC booster (2 yrs old) — Benchmarking against goal <90 / 90 to <95 / ≥95	Proportion %	2014/15	3,975	89.0	92.1	86.8	72.1		94.3	⬆	
18	A&E attendances (0-4 yrs)	Crude rate per 1,000	2014/15	11,831	570.0	540.5	681.9	967.0		408.1	⬇	
19	dmft (decayed, missing or filled teeth) in five year olds	Mean dmft per child	2014/15	n/a	0.8	0.8	1.0	1.8		0.4	n/a	
20	School Readiness - percentage of year 1 pupils achieving the expected level in the phonics screening check	Proportion %	2014/16	2,633	82.1	76.8	79.6	73.4		86.5	⬆	
21	School Readiness - percentage of children achieving a good level of development at the end of reception	Proportion %	2014/16	2,062	62.7	66.3	68.1	61.6		77.5	⬆	
22	School Readiness - percentage of children with free school meal status achieving a good level of development at the end of reception	Proportion %	2014/15	427	50.3	51.2	58.6	45.2		70.8	⬆	

Education

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Benchmarking against London ● Better ● Similar ● Worse ● Not compared ● Higher ● Lower ◆ England value

Range / London / Lambeth / worst / high / best / low / England / Interquartile range

Recent trends

⬆ Increasing / Getting better
⬇ Decreasing / Getting better
⬆ Increasing / Getting worse
⬇ Decreasing / Getting worse
⬆ Increasing ⬇ Decreasing
▪ No significant change

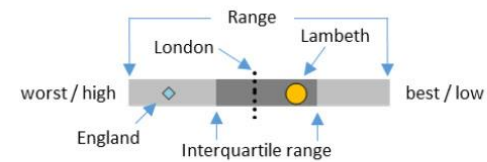| #	Indicator	Measure	Time period	Lambeth numerator	Lambeth	England	London	London worst / high	London Range	London best / low	Change over time	Trend
1	Early years foundation stage profile - children achieving a good level of development (within learning, literacy and mathematics)	Proportion %	2014/15	2063	62.7	66.3	68.1	61.6		77.5	⬆	
2	Key stage 1 - percentage of boys - mathematics level 2 or above	Proportion %	2014/15	1509	92.0	91.0	92.0	89.0		95.0	⬆	
3	Key stage 1 - percentage of girls - mathematics level 2 or above	Proportion %	2014/15	1467	93.0	94.0	95.0	93.0		98.0	⬆	
4	Key stage 1 - attainment by free school meal eligibility, percentage pupils achieving writing test level 2 or above	Proportion %	2014/15	764	84.0	77.0	82.0	75.0		87.0	⬆	
5	Key stage 1 - attainment by SEN (with a statement or EHC plan), percentage pupils achieving writing test level 2 or above	Proportion %	2014/15	24	29.0	21.0	23.0	7.0		40.0	⬆	
6	Key stage 2 - percentage pupils achieving level 4 or above grammar, punctuation & spelling	Proportion %	2014/15	2372	87.0	81.0	85.0	80.0		92.0	▪	
7	Key stage 2 - percentage of boys, achieving reading test level 4 or above	Proportion %	2014/15	1217	90.0	88.0	90.0	85.0		95.0	▪	
8	Key stage 2 - percentage of girls, achieving reading test level 4 or above	Proportion %	2014/15	1306	95.0	93.0	90.0	90.0		97.0	▪	
9	Key stage 2 - attainment by free school meal eligibility, percentage pupils achieving writing test level 4	Proportion %	2014/15	669	86.0	76.0	83.0	76.0		91.0	⬆	
10	Key stage 2 - attainment by SEN (with a statement or EHC plan), percentage pupils achieving reading test level 4 or above	Proportion %	2014/15	43	36.8	30.0	33.0	16.0		50.0	⬆	
11	GCSEs - pupils achieving 5 A*-C grades	Proportion %	2014/15	1061	56.8	53.8	60.9	51.9		73.2	▪	
12	GCSEs - percentage of boys achieving 5+ A*-C grades inc English and Math	Proportion %	2014/15	498	53.0	52.7	57.3	46.3		71.1	▪	
13	GCSEs - percentage of girls achieving 5+ A*-C grades inc English and Math	Proportion %	2014/15	563	60.0	62.1	64.5	54.8		77.3	▪	
14	GCSEs - attainment by free school meal eligibility, percentage pupils achieving 5+ A*-C grades inc English and Math	Proportion %	2014/15	221	41.9	33.3	45.8	34.7		60.0	⬇	
15	GCSEs - attainment by SEN (with a statement or EHC plan), percentage pupils achieving 5+ A*-C grades inc English and Math	Proportion %	2014/15	11	9.9	8.8	9.9	5.6		16.8	▪	
16	GCSEs - percentage of looked after children achieving 5 A*-C grades	Proportion %	2014/15	9	26.5	18.3	21.8	8.5		38.5	▪	
17	Exclusion - total fixed period exclusions as a percentage of the school population (primary and secondary and special schools)	Proportion %	2014/15	1000	2.8	3.9	3.3	5.2		1.6	⬇	
18	Absences - unauthorised sessions missed as a percentage of the total number of possible sessions (primary, secondary and special schools)	Proportion %	2014/15	357	1.2	1.1	1.1	1.6		0.7	▪	
19	Eligible and claiming free school meals, percentage uptake among all pupils	Proportion %	2016	9501	25.6	14.3	17.6	36.5		8.1	⬇	
20	A level - percentage of pupils achieving at least 2 level 3 qualification (A level or equivalent) 16-18 yr olds	Proportion %	2014/15	414	91.1	91.4	92.1	83.3		99.5	▪	

Children & young people

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Range
London   Lambeth
worst / high   best / low
England
Interquartile range

Recent trends

⬆ Increasing / Getting better

⬇ Decreasing / Getting better

⬆ Increasing / Getting worse

⬇ Decreasing / Getting worse

⬆ Increasing   ⬇ Decreasing

◻ No significant change

Benchmarking against London ● Better ● Similar ● Worse ● Not compared ● Higher ● Lower ◆ England value

Indicator	Measure	Time period	Lambeth numerator	Lambeth	England	London	London worst / high	London Range	London best / low	Change over time	Trend
1 Reception - prevalence of underweight	Proportion %	2015/16	34	1.2	1.0	1.5	3.5		0.6	◻	
2 Reception - prevalence of overweight	Proportion %	2015/16	354	12.3	12.8	11.7	15.1		8.8	◻	
3 Reception - prevalence of obese	Proportion %	2015/16	319	11.1	9.3	10.3	13.7		5.1	⬇	
4 Year 6 - prevalence of underweight	Proportion %	2015/16	29	1.2	1.3	1.6	3.1		0.9	◻	
5 Year 6: prevalence of overweight	Proportion %	2015/16	409	16.3	14.3	14.9	16.3		11.9	◻	
6 Year 6: prevalence of obesity	Proportion %	2015/16	582	23.2	19.8	23.2	28.5		11.0	◻	
7 HPV vaccination coverage for one dose (females 12-13 yrs old)	Proportion %	2015/16	942	86.2	87.0	83.9	68.4		97.3	⬆	
8 Hospital admissions caused by injuries in children (0-14 yrs)	Crude rate per 100,000	2014/15	549	102.4	109.6	83.3	113.7		61.8	⬇	
9 Percentage (15 yr olds) who had bullied others in the past couple of months	Proportion %	2014/15	n/a	13.2	10.1	11.0	14.0		7.2	n/a	
10 Percentage (15 yr olds) who have taken cannabis in the last month	Proportion %	2014/15	n/a	7.1	4.6	5.0	8.5		1.8	n/a	
11 Children killed and seriously injured on England's roads (under 16 yrs)	Crude rate per 100,000	2012-14	22	13.1	17.9	12.2	21.2		6.2	⬇	
12 First time entrants to the youth justice system (10-17 yrs)	Crude rate per 100,000	2015	148	631.2	368.6	416.5	712.7		197.0	⬇	
13 Re-offending levels - percentage of offenders who re-offend	Proportion %	2013	1030	28.7	26.4	26.3	31.4		15.0	◻	
14 16-18 year olds not in education employment or training	Proportion %	2015	160	2.0	4.2	3.1	6.2		1.5	⬇	
15 Rate of all child referrals to social services	Crude rate per 10,000	2014/15	2930	471.4	548.3	477.9	830.1		286.7	⬇	
16 Percentage of child referrals to social services which are within 12 months of a previous referral	Proportion %	2014/15	394	13.4	24.0	15.9	25.8		5.7	⬇	
17 Child protection cases: rate of children who were the subject of a child protection plan (under 18 yrs)	Crude rate per 10,000	2014/15	384	61.8	42.9	40.6	61.8		22.0	⬆	
18 Children in need: rate of children in need during the year (under 18 yrs)	Crude rate per 10,000	2014/15	5030	809.0	674.0	702.0	1137.0		371.0	⬇	
19 Percentage of children in need who have a recorded disability (under 18 yrs)	Proportion %	2014/15	94	2.8	13.0	11.4	21.6		2.8	⬇	
20 Child Mortality (1-17 yrs)	DSR per 100,000	2013-15	26	15.6	11.9	11.5	16.1		6.2	⬆	
21 Chlamydia detection rate (15-24 yrs)	Crude rate per 100,000	2013-15	1475	4045.0	1887.0	2200.0	1065.0		5434.0	⬇	

Benchmarking against goal (row 7): <80 | 80 to <90 | ≥90

Benchmarking against goal (row 21): <1,900 | 1,900 to <2,300 | ≥2,300

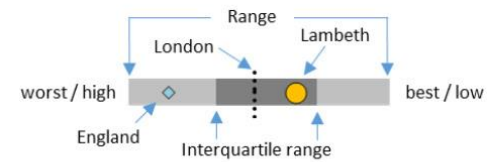# Disability, LTC & complex needs

Benchmarking against London ● Better ● Similar ● Worse ● Not compared ● Higher ● Lower ◆ England value

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⬆ Increasing / Getting better

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⬆ Increasing / Getting worse

⬇ Decreasing / Getting worse

⬆ Increasing   ⬇ Decreasing

▬ No significant change

	Indicator	Measure	Time period	Lambeth numerator	Lambeth	England	London	London worst / high	London Range	London best / low	Change over time	Trend
1	Percentage of pupils with a primary special education need of hearing (primary schools)	Proportion %	2015	34	1.0	1.6	1.6	3.3		0.6	▬	
2	Percentage of pupils with a primary special education need of vision (primary schools)	Proportion %	2015	18	0.5	0.9	0.7	1.3		0.4	▬	
3	Percentage of all school age pupils with special educational needs	Crude rate %	2016	6569	17.9	14.3	14.8	18.6		8.9	⬇	
4	Children with learning disabilities known to schools	Crude rate per 1,000	2014	1324	34.5	33.7	26.4	46.2		5.7	n/a	
5	Children with autism known to schools	Crude rate per 1,000	2014	542	14.1	10.8	11.5	25.1		5.0	n/a	
6	Children with moderate learning difficulties known to schools	Crude rate per 1,000	2014	1097	28.6	28.6	21.9	42.4		6.6	n/a	
7	Children with severe learning difficulties known to schools	Crude rate per 1,000	2014	154	4.0	3.8	3.1	8.3		1.1	n/a	
8	Children with profound and multiple learning difficulty known to schools	Crude rate per 1,000	2014	73	1.9	1.3	1.4	3.0		0.4	n/a	
9	Percentage of school pupils with social, emotional and mental health needs	% of school pupils	2016	1113	3.0	2.3	2.5	4.1		1.0	⬆	
10	Hospital amissions for asthma for young people (10-18 yrs)	Crude rate per 100,000	2014-15	71	268.6	138.7	153.9	297.5		53.8	▬	
11	Hospital admissions as a result of self-harm (15-19 yrs)	Crude rate per 100,000	2015/16	53	363.2	648.8	322.7	627.2		157.3	⬆	
12	Hospital admissions as a result of self-harm (10-24 yrs)	DSR per 100,000	2015/16	113	221.8	430.5	209.5	407.9		116.7	⬆	
13	Hospital admissions due to substance misuse (15-24 yrs)	DSR per 100,000	2012/13 - 2014/15	96	81.6	88.8	70.3	168.1		40.2	⬆	
14	Admission episodes for alcohol-specific conditions (under 18 yrs)	Crude rate per 100,000	2013/14 - 2015/16	43	23.0	37.4	22.4	47.0		11.7	▬	
15	Hospital admissions for mental health conditions (under 18 yrs)	Crude rate per 100,000	2015/16	66	104.9	85.9	82.1	150.9		33.8	▬	
16	Hospital admissions for asthma (under 19 yrs)	Crude rate per 100,000	2016	171	259.8	202.4	194.9	305.3		84.3	▬	
17	Unplanned hospitalisation for asthma, diabetes and epilepsy (under 19 yrs)	DSR per 100,000	2014/15	286	405.0	327.0	272.1	418.0		77.0	▬	
18	Emergency admissions (0-19 yrs)	Crude rate per 1000	2014/15	3943	58.1	71.8	56.7	85.4		38.3	⬆	

Looked after children

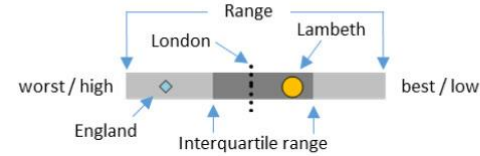Benchmarking against London ● Better ● Similar ● Worse ● Not compared ● Higher ● Lower ◆ England value

The indicator data are shown in the form of a spine chart with colour coded points indicating whether the area is significantly different from the London average. In the spine chart the black dotted vertical line represents the London benchmark.

The light grey bar shows the range between the highest and lowest areas in London with the interquartile range shown in dark grey.

The interquartile range (dark grey bar) is the difference between the 25th and 75th percentile i.e. if all areas' values for an indicator are ranked from lowest to highest the 25th percentile is 25% of the way through the ranking and the 75th is 75% of the way through.

The light grey bar represents the range and skew of the data. If the lowest and highest values are equidistant from the mean the light grey bar will extend evenly across the chart. If the data are skewed towards the lowest values the light grey bar will extend to the left hand side and if the data are skewed towards the highest values the light grey bar will extend to the right hand side.

Recent trends

⬆ (green) Increasing / Getting better
⬇ (green) Decreasing / Getting better
⬆ (red) Increasing / Getting worse
⬇ (red) Decreasing / Getting worse
⬆ (blue) Increasing   ⬇ (light blue) Decreasing
■ (orange) No significant change

	Indicator	Measure	Time period	Lambeth numerator	Lambeth	England	London	London worst / high	London Range	London best / low	Change over time	Trend
1	Children in care	Crude rate per 10,000	2016/17	460	73.0	60.0	50.0	92.0		26.0	⬇	
2	Children in care aged under 5 yrs	Crude rate per 10,000	2016/17	60	28.9	36.9	18.8	33.6		5.6	⬇	
3	Children in care aged 10-15 yrs	Crude rate per 10,000	2016/17	195	108.0	75.3	67.7	112.4		32.7	■	
4	Children in care aged 16+ yrs	Crude rate per 10,000	2016/17	135	232.1	129.3	181.6	415.5		83.2	⬇	
5	All children who started to be looked after category of need abuse or neglect	Proportion %	2014/15	100	37.0	56.0	47.0	70.0		24.0	⬇	
6	Percentage of looked after children with three or more placements during the year	Proportion %	2013/14	60	12.0	11.0	12.1	20.0		7.0	■	
7	Looked after children aged under 16 yrs, looked after continuously for at least 2.5 years, living in the same placement for at least 2 years	Proportion %	2013/14	100	69.0	67.0	68.1	41.0		79.0	⬆	
8	Percentage of looked after children placed outside LA boundary and more than 20 miles from where they used to live	Proportion %	2013/14	85	15.9	12.2	17.1	26.0		8.0	⬆	
9	Average time between a child entering care and moving in with its adoptive family	Average days	2012-14	n/a	1081.0	628.0	662.0	1081.0		440.0	⬆	
10	Percentage of children who ceased to be looked after and adopted	Proportion %	2014/15	20	7.0	17.0	9.0	4.0		21.0	■	
11	Offending by children who had been looked after continuously for at least 12 months	Proportion %	2014/15	15	6.8	5.0	5.0	15.0		4.0	⬆	
12	Substance misuse by children who had been looked after continuously for at least 12 months	Proportion %	2014/15	50	15.6	3.8	6.0	23.0		2.0	⬆	
13	Development assessments for young looked after children - percentage aged <5 yrs whose development assessments were up-to-date	Proportion %	2014/15	40	80.0	89.4	92.3	50.0		100.0	⬆	
14	Percentage of looked after children whose immunisations were up to date	Proportion %	2014/15	260	81.3	87.8	85.3	68.4		100.0	⬆	
15	Percentage of looked after children who had their teeth checked by a dentist	Proportion %	2014/15	300	93.8	85.8	89.2	53.8		100.0	⬆	
16	Percentage of looked after children who had their annual health assessment	Proportion %	2014/15	265	82.8	89.7	90.5	76.8		100.0	■	
17	Emotional and behavioural health outcome for looked after children: percentage eligible children considered 'of concern'	Proportion %	2012/13	116	54.0	38.0	34.0	77.0		16.0	⬆	
18	Percentage of care leavers who were not in education, training or employment (19-21 yrs)	Proportion %	2014/15	110	40.0	39.3	34.6	55.9		0.0	⬆	
19	Percentage of care leavers now aged 19, 20 and 21 in suitability of accommodation	Proportion %	2014/15	235	85.5	80.7	83.5	33.3		100.0	⬇	

Appendix 1 Red Box Matrix: the rationale for allocating indicators to the red box

Criteria used are:

- Gap to London/England averages
- Number of people affected (high prevalence)
- Level of impact on life of a child or young person
- Trend development: improving/stagnant/worsening
- Partnership priority/local knowledge and/or specific analyses

Indicator group/Theme	Location on matrix	Rationale
Oral Health	Red Box	Although value is better than London average, hospital admissions for tooth extractions in <10s are higher than London
Long term conditions, Asthma, Epilepsy & Diabetes, sickle cell anemia/thalassemia	Red Box	Significantly worse than London, high prevalence, trends not improving; local priority around sickle cell anaemia/thalassemia where no national indicators are available
Educational attainment GCSE	Red Box	Significantly worse than London, trends not improving or worsening, affects high number of children
Educational attainment FSM GCSE	Red Box	Trend worsening, high prevalence
Sexual health	Red Box	Local priority: indicators are currently limited, but STIs and teenage conception are high, as are under 18 abortion rates. The under 16 conception rate could be increasing as well and is significantly higher than in England
Mental Health	Red Box	Local priority based on needs assessments. Limited data, but admissions for self-harm are on the rise. Cross-cutting issue: MH is linked to other issues such as sexual health, educational achievement, substance misuse etc
Childhood obesity	Red Box	High prevalence; trends not improving bar obese children in reception
Children in care/Care Leavers	Red Box	Higher than London mostly,a mixed picture re trends (depends on specific indicator)
Safeguarding: CSE, neglect, violence	Red box	Priorities identified by the Lambeth Safeguarding Board. Specific data analyses from local needs assessments are underway.