

Statistical First Release



17 July 2019 SFR 53/2019

Flying Start, summary statistics 2018-19

Flying Start is the Welsh Government targeted Early Years programme for families with children under 4 years of age in some of the most disadvantaged areas of Wales. The Welsh Government began collecting routine management data from the Flying Start programme during 2012-13. During 2013-14 and 2014-15 there was an expansion of the programme into additional areas.



36,367

children

benefited from Flying Start services in Wales at any time in 2018-19

Since the last annual statistical release was issued, a <u>termly update</u>, <u>providing unvalidated key management information for Wales only</u>, has been published. The purpose of these termly updates is to enable in-year high-level monitoring of the programme. The data published is felt to be of sufficient value at a Wales level to be presented, but local authority data continue to be validated throughout the year and are only included in this annual statistical release.

Data about childhood developmental assessments is no longer collected on the Welsh Government Flying Start data monitoring form. Instead, from April 2017 Flying Start will align its child development assessments with the new Healthy Child Wales Programme (HCWP). Developmental assessments will be used in a targeted rather than universal manner. Statistics on developmental assessments may become available from HCWP data collections as the data completeness improves.

About this release

This statistical release provides key statistics from the Flying Start programme for each of the 22 local authorities in Wales.

The release draws upon management data and covers both the number of children using Flying Start services and the children's outcomes.

It aims to provide the evidence needed to inform policy development, as well as providing data to local authorities for monitoring, benchmarking and improvement and information for the wider public.

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Key points

- 36,367 children benefited from (were in receipt of) Flying Start services in Wales during 2018-19, exceeding the expected numbers by 0.4%.
- The number of children in receipt of Flying Start services fell by 1% since 2017-18, when 36,869 children received Flying start services.
- Flying Start children (on the health visitor caseload) of all ages up to age 4 were seen an average of 6.2 times during 2018-19 by health visitors and members of the wider health team, slightly less than in 2017-18 (6.9 contacts per child).
- 88 per cent of offers of childcare in a Flying Start childcare setting were taken up during 2017-18, a slight increase since 2017-18 (87 per cent).
- 93 per cent of children aged 3 and living in Flying Start areas were enrolled at a maintained school (2018), no change since 2017.
- 35 per cent of babies born to mothers living in Flying Start areas (for whom there was recorded breastfeeding data) were fed any breast milk at 10 days old, compared to 51 per cent of those in non-Flying Start areas (2017), a slight rise in both groups since 2016.
- 83 per cent of children living in Flying Start areas were fully immunised by their fourth birthday (2018-19), a slight increase since 2017-18.
- Flying Start areas have a lower prevalence (71 per cent) of healthy weight¹ children than non-Flying Start areas (74 per cent) (2016/17 and 2017/18).

¹ Includes a very small number of underweight children: see notes.

The Flying Start programme

Flying Start is one of the Welsh Government's top priorities. The Welsh Government was committed to doubling the number of children and their families benefiting from the Flying Start programme from 18,000 to 36,000 by 2016.

Key aspects of Flying Start are:

- free part-time childcare for 2-3 year olds
- an enhanced health visiting service (where the health visitor caseload is capped at 110 children)
- access to parenting support
- access to speech, language and communication support (previously described as Early Language Development)

These services are universally available to all children aged under 4 years and their families in the areas in which the programme runs. More details of the <u>services provided</u> can be found on our <u>website</u>.

Flying Start targets the most disadvantaged areas in Wales. The programme has been targeted to areas according to measures of relative disadvantage including the Welsh Index of Multiple Deprivation (WIMD), free school meals and the proportions of children aged under 4 years living in households in receipt of income related benefits. The programme is managed by a team in each local authority with monitoring and support provided by Welsh Government account managers allocated to a number of local authorities. Further information about the role of account managers is given in the Data quality section of the Key quality information.

Since 2014, a series of reports from the <u>National Evaluation of Flying Start</u> have been published. A research report 'Qualitative Research with Flying Start Families: Wave 3 Report' was published on 18 July 2018. It reports on a longitudinal research project which involved three waves of in depth interviews with 72 families between 2015 and 2017, and aims to provide an insight into families' engagement with and experience of family support services for those without access to the programme.

More information about how Flying Start areas are chosen is provided under <u>Key quality</u> <u>information</u>.

Expansion of the programme

The area covered by the programme expanded into additional areas between 2012-13 and 2015-16 with small expansions of the programme occurring in 2012-13 and 2015-16 and major expansions during 2013-14 and 2014-15. No further expansion took place in 2016-17 or 2017-18. The expectation was that the number of children benefitting from the programme by the end of 2015-16 would be 36,000, but this figure was in fact met by the end of 2014-15. Map 1 shows the areas, based on postcodes, targeted as recipients of Flying Start funding, as at 31 March 2016, that is, at the end of the period of expansion. The baseline map of pre-expansion postcodes shows the location of Flying Start areas as at 31 March 2012.

Sources of data for Flying Start

Management information:

A number of key statistics for the programme have been derived from the Welsh Government Flying Start Data Monitoring Return. This data collection was established during 2012 and early 2013 in collaboration with Flying Start coordinators for the purpose of providing information to manage the programme. The first data was provided to Welsh Government for 2012-13.

Selected basic counts from the data monitoring dataset are presented in <u>Table 1</u>, <u>Table 2</u> and <u>Table 3</u> and key analyses shown in <u>Sections 1</u>, <u>Section 2</u> and <u>Section 3</u>. The data monitoring dataset is also the source of statistics presented in <u>Section 4</u> on parenting and speech, language and communication and in <u>Section 5</u>, <u>Section 6</u>, <u>Section 7</u> and <u>Section 8</u> on child development.

It should be noted that figures for local authorities can fluctuate substantially from year to year. There may be a number of reasons for this, including families moving between local authority areas, which may be more of an issue in some areas than others.

Pre-expansion and expansion

Since 2013-14 management data has been collected for some aspects of the programme separately for pre-expansion areas and for expansion areas. Where a split is not available the addition of the expansion areas into the statistics should be considered when interpreting the data. In this release it has not been possible to split the number of children benefiting, the caseload counts, contacts or take-up of childcare places between pre-expansion and expansion areas. This should be noted when making comparisons between statistics for the current and previous years. However information on the numbers of children who have been offered childcare places in the pre-expansion and expansion areas was collected.

In some local authorities, statistics are likely to have been affected by delays in recruitment and retention of health visitors, and in creating in childcare settings. Recruitment continues to be challenging in some areas.

Local authority programme sizes

Note that, although every local authority in Wales has a Flying Start programme, they vary substantially in terms of the absolute numbers of children in receipt of services. Users should note the effect of this distribution on the statistics. Where a large absolute number and proportion of Flying Start children are concentrated in specific local authorities (such as Cardiff which has 13 per cent of the Wales caseload) trends in these areas can have a disproportionate impact on the all-Wales figures.

Local authorities where the programme size is small, in terms of caseload, can see greater fluctuations from year to year. Many of the areas with small caseloads are rural where there may be additional challenges relating to access and distribution of services which may impact on patterns and trends.

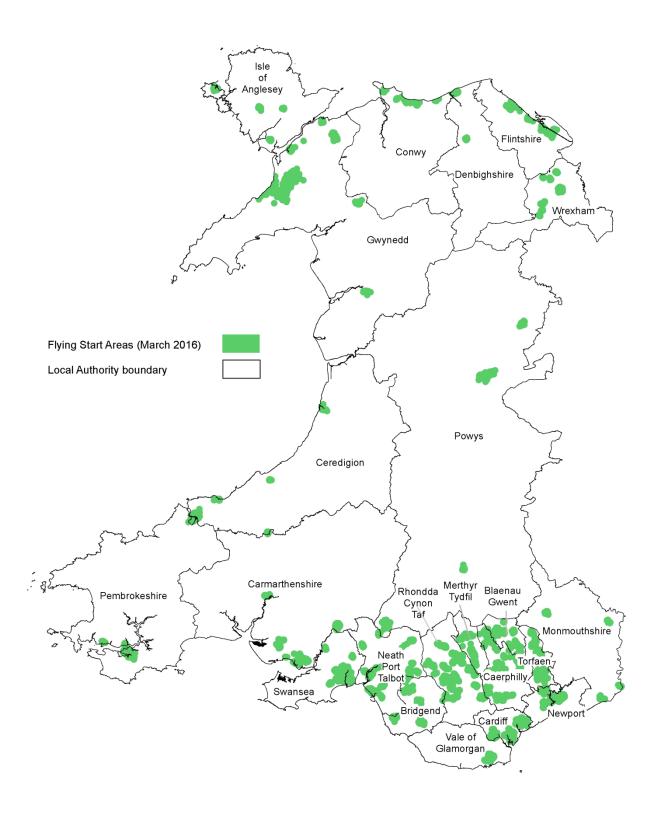
National databases

Statistics showing additional health and education outcomes for children living in Flying Start areas have been derived from national databases and are shown in <u>Section 5</u>, <u>Section 6</u>, <u>Section 7</u> and <u>Section 8</u>. These analyses are area-based. Not every child in Flying Start areas may take up all or even any of the services offered. For further information on these national databases please see the <u>notes</u>.

Statistics are presented in a series of charts throughout the release and detailed data tables are provided in <u>Table 1</u> to <u>Table 9</u>. Note that percentages in the tables are rounded to the nearest whole number, but unrounded data is used in the charts.

A baseline table of data from both these sources has been included for 2012-13.

Map 1: Location of Flying Start areas as at 31 March 2016

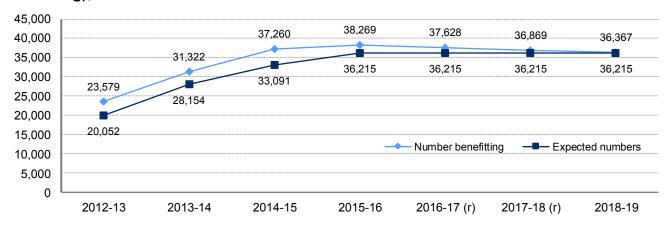


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1. Children receiving Flying Start services

Chart 1: Number of children in Wales in receipt of Flying start services (children benefitting), 2012-13 to 2018-19



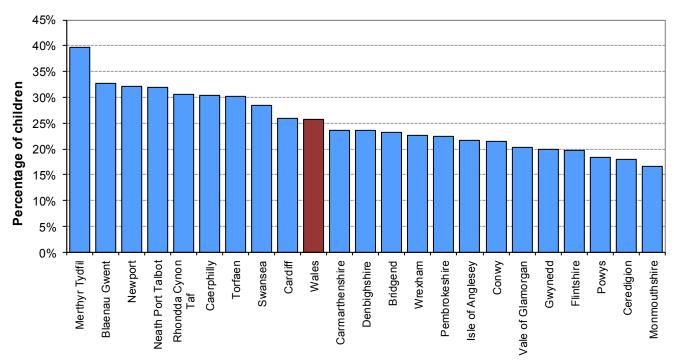
Source: Welsh Government Flying Start Data Monitoring Returns

(r) One local authority submitted incorrect data for their expected numbers in 2016-17 and 2017-18.

 Chart 1 shows that during 2018-19, 36,367 children benefited from (were in receipt of)
 Flying Start services across Wales (<u>Table 1</u>). This number was a 1% fall on the number of
 children in receipt of services in 2017-18 (36,869). It should be noted that the numbers of
 children aged under 4 years in the general population have fallen in nearly all local
 authorities in recent years.

The number of children benefiting from the programme is counted as the total number of children who have had a contact with a Flying Start health visitor during the year. It should be noted that children may move in or out of Flying Start areas during the year and therefore this total does not equate to the number of children who receive Flying Start services continuously from the start to the end of the year. Table 1 also shows the health visitor caseload which is an average of the caseload at three points during the year. This number, 34,424 for 2018-19, is lower than the total in receipt of services at any time during the year because of movements in and out of Flying Start areas; however, it represents a better indication of the capacity of the service at any snapshot in time in 2018-19. The caseload is also used in Chart 2.

Chart 2: Children aged under 4 on Flying Start health visitor caseloads as a percentage of all resident children aged under 4 (a) by local authority, 2018-19



Source: Welsh Government Flying Start Data Monitoring Return 2018-19 (health visitor caseload)

(a) 2018 Mid-Year Population Estimates, published by Office for National Statistics.

- Overall 26 per cent of children aged under 4 in Wales were on health visitor caseloads and received Flying Start services during 2018-19 (Chart 2), just over 1 in 4 Welsh children, no change since 2017-18.
- This statistic is influenced by the targeting of areas in relative need, and varied from 40 per cent of children under 4 in Merthyr Tydfil to 17 per cent in Monmouthshire.

In three local authorities the caseload was greater than the number of children benefitting from Flying Start services. This may be due to the fact that some children may have been transferred in to Flying Start areas and allocated to a caseload at the end of the term when numbers were counted, but before any first health visitor contact or because of a number of Health Visitor vacancies. In some areas temporary staffing problems may also have contributed.

20% 15% Percentage of children 10% 5% 0% Powys Carmarthenshire **Monmouthshire** Swansea Flintshire Rhondda Cynon Taf Blaenau Gwent Conwy Vale of Glamorgan Neath Port Talbot Denbighshire Ceredigio Bridg Wrexh of Angle Merthyr T -5% -10% -15%

Chart 3: Percentage change in the number of children on Flying Start health visitor caseloads between 2017-18 and 2018-19, by local authority

Source: Welsh Government Flying Start Data Monitoring Return 2017-18 and 2018-19 (health visitor caseload)

-20%

Chart 3 shows the variation between local authorities in the change of the number of children on Flying Start health visitor caseloads between 2017-18 and 2018-19. The difference ranged between a decrease in caseload of 9% in Pembrokeshire to an increase of 8% in Monmouthshire. Overall in Wales, there was a 1% decrease in the number of children on Flying Start health visitor caseloads.

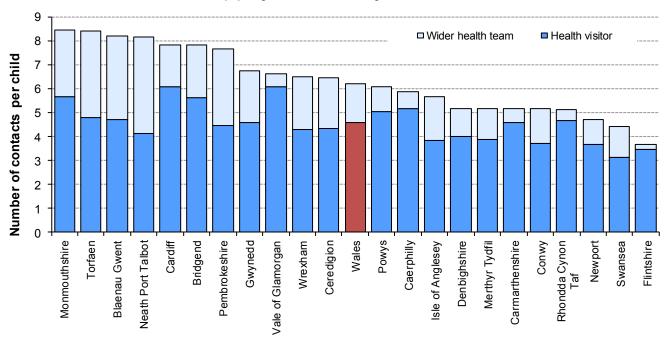
Note: During 2016-17 and 2017-18 there were a few issues with recruiting and retaining health visitors within the Flying Start programme across some local authority areas. These issues were mainly due to the programme significantly increasing the number of health visitors needed in recent years. Welsh Government continues to work closely with local authorities and local health boards to manage health visitor vacancies, and to ensure that an enhanced health programme of support can continue to be offered to all families living in Flying Start areas. Welsh Government are also working closely with local authorities and local health boards to ensure there is appropriate recruitment and training for the health visiting workforce, to meet the needs of both the generic and Flying Start health visiting services. Also some areas have a high level of transiency, making it likely that some children would have transferred out of Flying Start areas at some point during the year, and potentially before the first contact by a health visitor. Falling numbers of young children in some authorities may have also affected caseloads.

Key elements of the Flying Start programme

2. Flying Start health visiting service

An enhanced health visiting service is one of the four key elements of the programme, with Flying Start health visitors having a significantly reduced caseload compared to the generic service. The programme requires a ratio of one full-time equivalent health visitor per 110 children aged under 4 in Flying Start areas and this is designed to enable them to ensure more regular contact with, and delivery of intensive support to Flying Start children and their families. The primary function of the Flying Start health visitor is to support the family in the home, assessing both the child (using an appropriate Welsh Government approved developmental assessment tool) and the family (in terms of high, medium and low risk). Particular emphasis is placed on working with the most vulnerable groups including teenage parents, those who are victims of, or may be at risk of domestic abuse and pre/post-natal depression. The health team works in partnership with parents and other professionals to ensure that there is a planned and co-ordinated approach to service delivery prior to a child's birth through to their fourth birthday.

Chart 4: Number of contacts (a) per child during the year by Flying Start health visitor and wider health team (b), by local authority, 2018-19



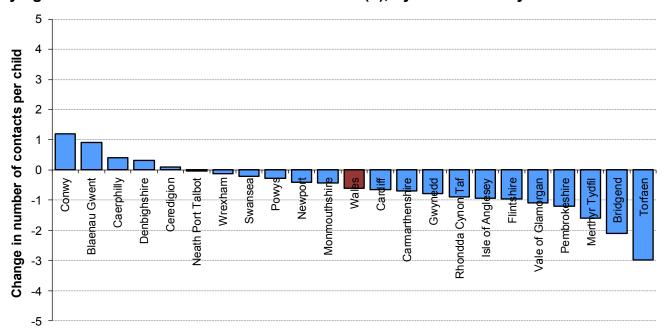
Source: Welsh Government Flying Start Data Monitoring Return 2018-19

- (a) Face-to-face contact by a health visitor or wider health team member in the financial year.
- (b) "Wider health team" may include a mix of any the following professionals dieticians, midwives, clinical psychologists, educational psychologists, speech and language therapists, community nursery nurses, social workers and others.
 - Flying Start children of all ages up to age 4 on the health visitor caseload were seen an average of 4.6 times during 2018-19 by health visitors and a further 1.6 times by members of the wider health team, a slight decrease on 2017-18 (Chart 4 and <u>Table 2</u>). Flying Start health visitor caseloads are capped at 110 children whereas health visitors working outside Flying Start may have up to 350 children on their caseloads.

- <u>Chart 4</u> shows substantial variation between local authorities. Some of this may reflect relative need, variation in length or type of contacts or the age profile of the children in specific areas.
- The balance of health visitor and wider team contacts also varies. This is likely to be related to variations in need; the availability of health and care professionals and differences in the delivery models applied in each area.

The people involved in the 'wider health team' will vary between local authorities according to local management decisions.

Chart 5: Change in number of contacts (a) per child between 2017-18 and 2018-19 by Flying Start health visitor and wider health team (b), by local authority

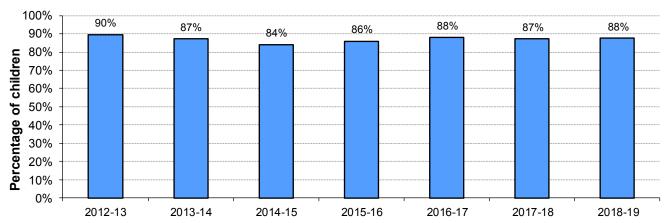


Source: Welsh Government Flying Start Data Monitoring Return 2017-18 and 2018-19

- (a) Face-to-face contact by a health visitor or wider health team member in the financial year.
- (b) "Wider health team" may include a mix of any the following professionals dieticians, midwives, clinical psychologists, educational psychologists, speech and language therapists, community nursery nurses, social workers and others.
 - Chart 5 shows the net change in the number of contacts per child (whether with the health visitor or the wider health team) between 2017-18 and 2018-19. 17 of the 22 local authorities showed a decline in the total number of contacts made with 5 local authorities increasing. Torfaen had the greatest decrease over the period (3 fewer contacts per child) compared to the previous year. Conwy saw the greatest change with an increase of 1.2 contacts per child. However it is worth noting that these local authority level statistics fluctuate from year-to-year. (Table 2)
 - The balance of health visitor and wider health contacts has also changed in some cases.

3. Childcare

Chart 6: Percentage of children taking up (a) Flying Start-provided childcare, Wales, 2012-13 to 2018-19

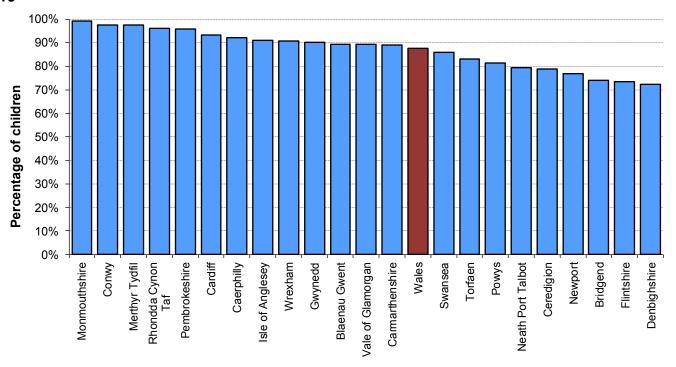


Source: Welsh Government Flying Start Data Monitoring Returns

- (a) 'Take up' refers to whether the offer of childcare is accepted regardless of whether or not the child subsequently attends childcare.
- The percentage of children taking up Flying Start-provided childcare has remained fairly steady in the last 3 years, slightly below the high of 90% in the first year of the programme (Chart 6).

The provision of high quality, part-time childcare for 2-3 year olds is integral to the Flying Start programme. Children are able to access the entitlement from the beginning of the term following their second birthday to the end of the term in which they have their third birthday. The core Flying Start childcare offer is that quality childcare is offered to parents of all eligible 2-3 year olds for 2 ½ hours a day, 5 days a week for 39 weeks. In addition, there should be at least 15 sessions of provision for the family during the school holidays. A family can choose to take up either the full offer or a reduced offer, if only some of the sessions are needed. Flying Start childcare focuses on improving the outcomes for young children in preparation for school and so the childcare offer should be linked to Foundation Phase entry into schools to ensure a seamless transition between the two offers with no gaps in provision. The programme guidance states that flexibility may be required for working parents when allocating childcare.

Chart 7: Number of full or reduced offers of Flying Start-provided childcare taken up (a) as a percentage of offers made to newly eligible children, by local authority, 2018-19



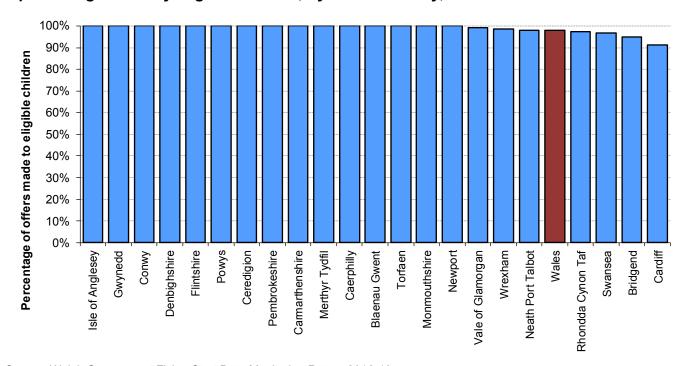
Source: Welsh Government Flying Start Data Monitoring Return 2018-19

(a) 'Take up' refers to whether the offer of childcare is accepted regardless of whether or not the child subsequently attends childcare.

Chart 7 illustrates childcare take-up for 2018-19. 2012-13 data is shown in the <u>Baseline table</u>.

- It shows that overall 88% of full or reduced offers of childcare in a Flying Start childcare setting were taken up, less than a 1 percentage point decrease since 2017-18 and a 2 percentage point decrease since 2012-13. (Chart 6, Table 3 and Baseline table).
- Less than half (10 out of 22) of all authorities had take-up rates of 90% or over in 2018-19, which is fewer than in 2017-18, and the majority (13 local authorities) of take-up rates had either stayed the same or fallen in this period. Take up was as low as 72% in Denbighshire a decrease of 6 percentage points since 2017-18, although the largest decrease was of 13 percentage points in Ceredigion.

Chart 8: Number of full or reduced offers of Flying Start-provided childcare made as a percentage of newly eligible children, by local authority, 2018-19



Source: Welsh Government Flying Start Data Monitoring Return 2018-19

Chart 8 shows the extent to which local authorities made offers of childcare to eligible children in 2018-19.

- Offers were made to more than 95 per cent of eligible children in 21 local authorities.
- Although <u>Chart 7</u> showed that take-up was low in some authorities, Chart 8 shows that
 offers were made to all or nearly all eligible children in some of these areas, for example in
 Newport, Ceredigion, Flintshire and Denbighshire take-up was less than 80 per cent, but
 offers were made to 100 per cent of eligible children.

These statistics are based on the numbers of children, living in both pre-expansion Flying Start areas and in expansion areas, who are newly eligible during the year (and were made offers of childcare) and who take up offers of childcare. It has not been possible to split the take-up data between pre-expansion Flying Start areas and expansion areas because of the way the data is collected. Also note that expanding childcare provision in new programme areas has continued to be problematic in several local authorities and rates have been affected by delays in registration of some settings. Continuing delays in the availability of new childcare settings have affected the offer rate in other local authorities. Note that not all childcare places taken up may be fully attended. For further detail of take-up and attendance please see the <u>notes</u>.

4. Parenting and speech, language & communication

The quality of parenting and care a child receives in their early years and parental involvement in a child's development is a significant factor in ensuring positive outcomes for children.

The parenting offer is based on the following three themes:

- perinatal and support in the early years
- early intervention approaches to supporting vulnerable parents
- programmes to support parents in positive parenting

Every family with a Flying Start child must be offered formal parenting support at least on an annual basis. In addition to the formal parenting offer, other parenting support may be delivered. This may include informal parenting support, bespoke enhanced one-to-one sessions and informal drop-in sessions, depending on need. Formal and informal structured courses are defined as those with a structured curriculum and a set start and end date. Bespoke enhanced distinct packages of support are defined as planned, time bound series of sessions, delivered on a one-to-one basis, that have been identified as a requirement via a specific referral from within the Flying Start programme in respect of parenting or speech, language and communication.

In 2018-19 across all local authorities:

• 70 per cent of places on formal structured parenting courses which were offered to families with Flying Start children were taken up¹.

As part of the Flying Start support for Speech, Language & Communication (SLC) (formerly called Early Language Development), every family in a Flying Start area should have ongoing access to an appropriate 'Language and Play' group. This aims to encourage parents to interact with their children to improve early language development. From this, a more targeted approach based on assessment and referral can be taken where there is evidence of additional need.

The SLC entitlement of Flying Start is embedded across the whole of the Flying Start programme. It is delivered specifically through language and play groups as well as through the various parenting programmes. Language and play groups also promote parental confidence and subsequent willingness to engage with parenting and specialist support programmes. Current management information captures data for SLC (alongside data for parenting) under the heading of informal structured courses, but no longer collects data on enhanced packages of support and drop-in sessions. Data for SLC courses are summarised for Wales below.

In 2018-19 across all local authorities:

 61 per cent of places on informal structured parenting/SLC courses which were offered to families with Flying Start children were taken up¹.

Local authority data for formal structured courses is presented in Table 9.

The number of courses and sessions offered varies substantially by local authority as does the balance between formal, informal, drop-in and one-to one sessions. It is likely that the differential provision reflects local need and availability. See the <u>notes</u> for more detail of parenting courses and a list of accredited formal structured courses.

¹ Note: attendance is deemed complete when 75 per cent or more of sessions have been attended.

Outcomes for children in the Flying Start programme

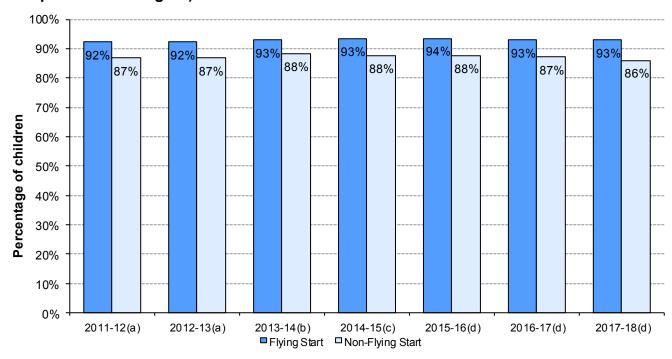
5. Education outcomes: children recorded on roll at a maintained school

The numbers of Flying Start children starting Foundation Phase measures the degree to which Flying Start children are taking up early years education opportunities. The Foundation Phase is the statutory curriculum for all 3-7 years old children in Wales in both maintained and non-maintained settings. This section presents data on the proportions of children living in Flying Start areas who were recorded on roll at a maintained school according to the annual school census and the postcodes provided by Flying Start coordinators.

Data relating to 2011-12 and 2012-13 are based on the pre-expansion areas, that is, the area of the programme as it existed at 31 March 2012. Data from 2013-14 relates to children living in the programme area as defined at the end of each financial year. Broad comparisons can still be made but note that rom 2013-14 onwards, the geographic areas are slightly different to previous years.

Data shown in this section are taken from the Pupil Level Annual School Census (PLASC), which is an electronic collection of pupil and school level data provided by all maintained primary, secondary, nursery and special schools in January each year.

Chart 9: Percentage of children in Flying Start and non-Flying Start areas aged 3 recorded on a roll at a maintained school, Wales, January 2012 to January 2018 (age as at previous 31 August)



Source: Pupil Level Annual School Census (PLASC); National Community Child Health Database (NCCHD) (denominator)

- (a) Pre-expansion areas as at 31 March 2012.
- (b) Programme areas as at 31 March 2014.
- (c) Programme areas as at 31 March 2015.
- (d) Programme areas as at 31 March 2016.

- Chart 9 shows that in 2017-18, 93% of children at age 3 living in Flying Start programme areas were recorded on school rolls, no change since 2016-17.
- For children living in non-Flying Start areas the percentage has decreased slightly between 2016-17 and 2017-18, to 86%. The percentage in most Flying Start areas continues to be higher than in non-Flying Start areas.
- <u>Table 4</u> compares children living in Flying Start and non-Flying Start areas for the last two years. Just over half of all local authorities (12 out of 22) saw the proportion of children at age 3 living in Flying Start programme areas and recorded on school rolls increase between 2016-17 and 2017-18.

The variation seen between local authorities may be partially explained by some of the following factors: differences in the size and local decisions relating to the independent school sector; cross border movements with England particularly affecting Wrexham, Flintshire, Powys and Monmouthshire; rurality; and possible travelling distances. Note also that the numbers of schools rolls are taken as a proportion of resident children and in some cases children may attend school in one local authority and live in another.

6: Health outcomes: births and infant feeding

This section looks at the number of babies born in Flying Start and non-Flying Start areas along with what proportion of those babies were receiving breast milk at 10 days old.

The data is taken from the National Community Child Health Database (NCCHD) and is allocated to areas on the basis of postcode of residence. A list of postcodes falling within the Flying Start programme has been used to extract data for mothers living in Flying Start areas. Data for 2016 and 2017 both relate to mothers living in the programme area as defined at 31 March 2016.

Following a mandate in August 2012, data on infant feeding at 10 days, 6 weeks and 6 months has been recorded on the Child Health System, in addition to infant feeding data at birth. Completeness has improved and a summary of information about infant feeding at 10 days is presented below. Note that the data relates to births occurring in 2017. Birth data for 2018 will be published in September 2019 as part of a new combined maternity and births release, and will be included in the next Flying Start Summary Statistics with a provisional publication date of July 2020.

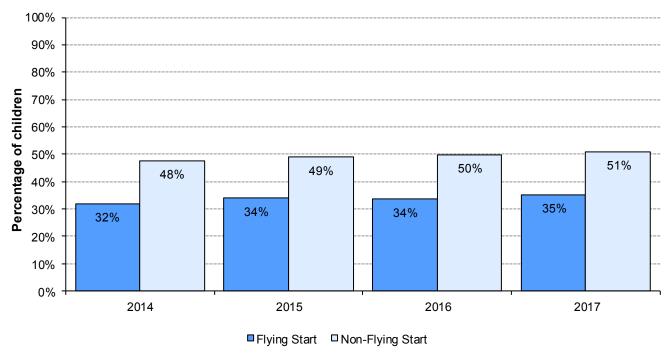
- In 2017, 25% of live births in Wales were born to mothers who are resident in Flying Start areas, no change since 2016 (<u>Table 5</u>).
- In 2018-19, the proportion of live births born to mothers resident in Flying Start areas ranged between 14% (Monmouthshire) and 40% (Merthyr Tydfil). In general, the pattern reflects the coverage of the programme in each local authority (<u>Table 1</u>).
- The proportion of live births to mothers resident in Flying Start areas increased in around a quarter (6 out of 22) local authorities between 2016 and 2017. The largest increase was in Ceredigion, which increased from 16% in 2016 to 20% in 2017 (<u>Table 5</u>).

The data recorded on the NCCHD includes the following categories of infant feeding:

- Artificial Milk Feeding
- Combined Milk Feeding Partially Breast
- Combined Milk Feeding Predominantly Breast
- Exclusive Milk.

<u>Chart 10</u> and <u>Chart 11</u> show the proportions of babies in Flying Start and non-Flying Start areas who, at 10 days, are recorded as receiving *any* breast milk. This includes those receiving breast milk exclusively or a combination of breast milk and artificial milk.

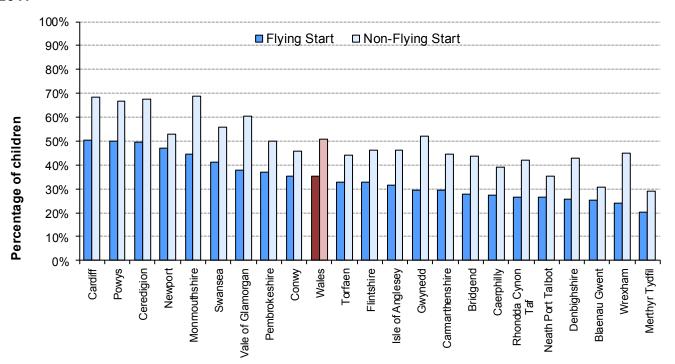
Chart 10: Percentage (a) of babies born to mothers living in Flying Start and non-Flying Start areas, receiving any breast milk (b) at 10 days old, Wales, 2014-2017



Source: National Community Child Health Database (NCCHD) 2017

- (a) The percentages are of the total live births minus births with no stated breastfeeding status: 14% had no stated breastfeeding status at 10 days in 2014, 4% in 2015 and 2016, and 9% in 2017.
- (b) 'Any breast milk' consists of combined milk feeding (breast milk plus artificial milk) plus those who receive exclusively breast milk (nothing else except water).
 - In 2017, a third (35%) of babies born to mothers living in Flying Start areas were fed any breast milk at 10 days old, compared to half (51%) of those in non-Flying Start areas.
 - The proportion of babies born to mothers living in Flying Start areas who received any
 breast milk has increased slightly over the last 3 years, as has the proportion of babies born
 to mothers living in non-Flying Start areas.

Chart 11: Percentage (a) of babies born to mothers living in Flying Start and non-Flying Start areas, receiving any breast milk (b) at 10 days old, by local authority, 2017



Source: National Community Child Health Database (NCCHD) 2017

- (a) The percentages are of the total live births minus births with no stated breastfeeding status: 9% had no stated breastfeeding status at 10 days in 2017.
- (b) 'Any breast milk' consists of combined milk feeding (breast milk plus artificial milk) plus those who receive exclusively breast milk (nothing else except water).
 - The proportion of babies born to mothers living in Flying Start areas in 2017 who received any breast milk ranged between 20% (Merthyr Tydfil) and 50% (Cardiff and Powys). The rates were higher for children living in non-Flying Start areas than in Flying Start areas in all local authorities (<u>Table 6</u>).

For Wales as a whole the figures are consistent with the common relationship between deprivation and breastfeeding; the explanation of the variation between local authorities may be more complex and requires an understanding of local pockets of deprivation as well as a consideration of age profiles of mothers.

The percentage of babies exclusively breastfed at 10 days of age is also one of a set of maternity indicators developed following the publication of the 'Strategic Vision for Maternity Services in Wales' in 2011. The indicators are available (for financial years) from Public Health Wales' 'Pregnancy and childhood surveillance tool'. Published data from the Maternity Indicators data set are available in the Maternity statistics statistical release.

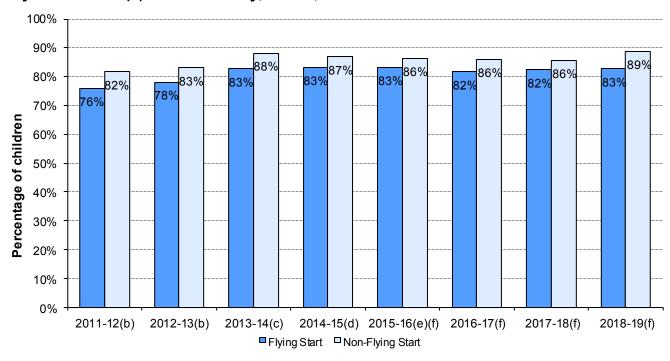
7: Health outcomes: Uptake of routine childhood immunisation

Vaccines are offered to all children, as part of the routine childhood immunisation schedule, to protect them against Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae (Hib), Measles, Mumps, Rubella, Meningitis C and Pneumococcal infection (PCV). Vaccinations are given according to a routine childhood immunisation schedule starting 8 weeks after birth, and the aim is for all children to be fully immunised by their fourth birthday.

Data are taken from COVER (Coverage of Vaccination Evaluation Rapidly) published annually by Public Health Wales. It is derived directly from the National Community Child Health Database (NCCHD) and is allocated to areas on the basis of postcode of residence. A list of postcodes falling within the Flying Start programme has been used to extract immunisation data for children living in Flying Start areas. As with the education outcomes, data relating to 2011-12 and 2012-13 are based on the pre-expansion areas and data for 2016-17 onwards relates to children living in the programme area as defined at 31 March 2016.

<u>Table 7</u> shows data on children fully immunised in both Flying Start and non-Flying Start areas for each local authority.

Chart 12: Percentage of children in Flying Start and non-Flying Start areas that are fully immunised (a) at 4th birthday, Wales, 2011-12 to 2018-19



Source: Public Health Wales COVER report; National Community Child Health Database (NCCHD) (denominator)

- (a) Includes the following immunisations: Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae (Hib), Measles, Mumps, Rubella, Meningitis C and Pneumococcal infection (PCV). Analysis provided by Public Health Wales Communicable Disease Surveillance Centre and Vaccine Preventable Disease Programme.
- (b) Pre-expansion areas as at 31 March 2012.
- (c) Programme areas as at 31 March 2014.
- (d) Programme areas as at 31 March 2015.
- (e) The statistics for 2015-16 have been constructed using an extract taken from NCCHD in June 2017 and therefore totals will differ slightly from published COVER statistics.
- (f) Programme areas as at 31 March 2016.

- In 2018-19, 83% of children living in Flying Start areas were fully immunised at age 4 year areas (a slight increase since the previous year), compared to 89% of children living in non-Flying Start areas (the highest rate of the past 8 years).
- Uptake of immunisations in 2018-19 of children living in Flying Start areas ranged between 91% (Anglesey and Monmouthshire) and 78% (Newport). In most local authorities (18 out of 22) the uptake rates were higher for children living in non-Flying Start areas than in Flying Start areas (Table 7).
- Less than half of all local authorities (10 out of 22) saw the uptake of immunisations of children living in Flying Start areas decrease between 2017-18 and 2018-19 (<u>Table 7</u>).

For Wales as a whole, the figures are consistent with the relationship usually seen between deprivation and vaccination uptake; the explanation of the variation between local authorities may be more complex and requires an understanding of local pockets of deprivation. Note that in some local authorities there may be children who are omitted from immunisation coverage statistics either because they are new to the country and were immunised elsewhere or because they were privately immunised.

8: Health outcomes: healthy weight

The Child Measurement Programme for Wales is a surveillance programme set up in 2011 when the Welsh Government asked Public Health Wales to undertake a national height and weight measuring programme for Wales, to give a better understanding about how children in Wales are growing. The programme standardises the way in which primary school children (aged 4 and 5) are measured across Wales. For further information on the measurement of healthy weight and other background information about the Child Measurement Programme for Wales, please see the notes for further details.

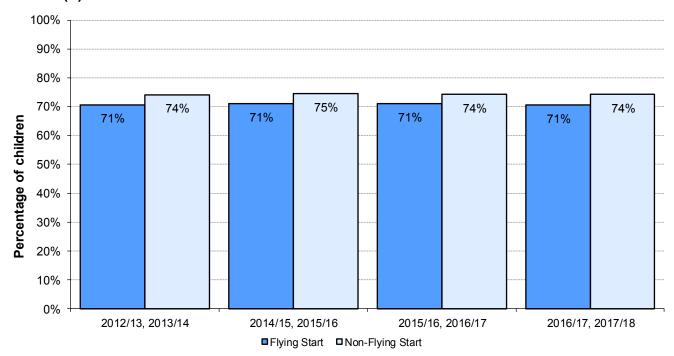
As with the education and immunisation outcomes, data from the Child Measurement Programme has been analysed according to Flying Start areas, based on the postcodes provided by Flying Start coordinators. In this case two years' data have been combined:

- school years 2011/12 with 2012/13 and 2012/13 with 2013/14 with the analysis carried out in relation to the areas as at 31 March 2012
- school years 2014/15 with 2015/16 with the analysis carried out in relation to the areas as at 31 March 2014
- school years 2015/16 with 2016/17 with the analysis carried out in relation to the areas as at 31 March 2016
- school years 2016/17 with 2017/18 with the analysis carried out in relation to the areas as at 31 March 2016

<u>Chart 13</u> and <u>Chart 14</u> shows the proportion of children resident in Flying Start and non-Flying Start areas (and included in the Child Measurement Programme) who had a body mass index (BMI) classified as being of a healthy weight.

For further information on the Child Measurement programme for Wales please see: NHS Wales website: Child Measurement Programme for Wales.

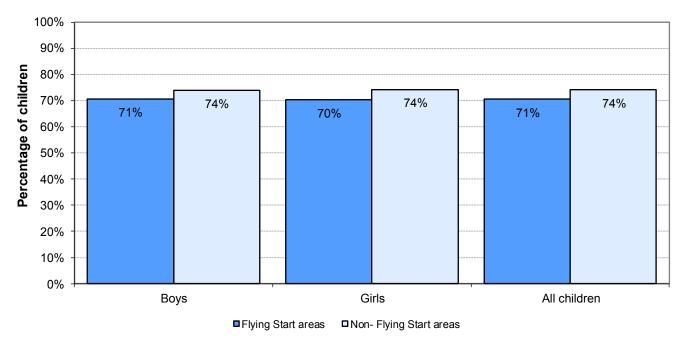
Chart 13: Prevalence of children in 'healthy weight' (a) categories for children aged 4-5 years resident within Flying Start and non-Flying Start areas, Wales, 2012/13 to 2017/18 (b)



Source: Child Measurement Programme (CMP) for Wales 2012/13 to 2017/18 produced by Public Health Wales Observatory, using CMP data (NWIS).

- (a) 'Healthy weight' includes healthy weight or underweight.
- (b) Flying Start areas as at 31 March 2012, 31 March 2015, 31 March 2016.

Chart 14: Prevalence of children in 'healthy weight' (a) categories for children aged 4-5 years resident within Flying Start and non-Flying Start areas, 2016/17-2017/18 (b)



Source: Child Measurement Programme (CMP) for Wales 2016/17 and 2017/18 produced by Public Health Wales Observatory, using CMP data (NWIS).

- (a) 'Healthy weight' includes healthy weight or underweight.
- (b) Flying Start areas as at 31 March 2016.

- The data in Charts 13 and 14 show that at the Wales level Flying Start areas have a lower prevalence of healthy weight or underweight children than non-Flying Start areas. 71 per cent of children living in Flying Start areas in the two school years 2016/17 and 2017/18 were of a healthy weight or underweight (71 per cent of boys and 70 per cent of girls) compared to children in non-Flying Start areas, where 74 per cent were of healthy weight or underweight (74 per cent of both boys and girls). The percentages have remained around these levels over the past 3 years.
- This pattern mirrors the Child Measurement Programme data where children in more deprived areas have a lower prevalence of healthy weight or underweight children than children in less deprived areas.

Local authority level data is available in <u>Table 8</u>..

Table 1: Selected Flying Start programme indicators by local authority – population and caseload, 2017-18 and 2018-19

-		2017	-18			2018-19					
Local Authority	Number of children benefiting (in receipt of services)(a)	Number of children under 4 allocated to Flying Start health visitors (caseload) (b)	Population of children under 4 (c)	Percentage of population aged under 4 on Flying Start health visitors caseload	Number of children benefiting (in receipt of services)(a)	Number of children under 4 allocated to Flying Start health visitors (caseload) (b)	Population of children under 4 (d)	Percentage of population aged under 4 on Flying Start health visitors caseload	Percentage change between 2017-18 and 2018-19 in children under 4 allocated to Flying Start health visitors (caseload)		
Isle of Anglesey	593	626	2,868	22%	669	607	2,814	22%	-3%		
Gwynedd	1,043	961	4,775	20%	1,002	935	4,696	20%	-3%		
Conwy	1,014	924	4,386	21%	1,094	929	4,339	21%	0%		
Denbighshire	714	954 (r)	4,138	23% (r)	895	941	3,994	24%	-1%		
Flintshire	1,373	1,296	6,610	20%	1,175	1,296	6,543	20%	0%		
Wrexham	1,504	1,444	6,268	23%	1,615	1,406	6,215	23%	-3%		
Powys	876	809	4,776	17%	941	875	4,750	18%	8%		
Ceredigion	520	449	2,507	18%	481	442	2,462	18%	-2%		
Pembrokeshire	1,399	1,168	4,816	24%	1,073	1,069	4,757	22%	-9%		
Carmarthenshire	2,081	1,759	7,616	23%	1,841	1,795	7,615	24%	2%		
Swansea	2,955	2,759	10,097	27%	2,925	2,842	10,001	28%	3%		
Neath Port Talbot	2,248	1,944	6,089	32%	2,326	1,938	6,052	32%	0%		
Bridgend	1,548	1,504	6,344	24%	1,564	1,457	6,262	23%	-3%		
Vale of Glamorgan	1,272	1,156	5,671	20%	1,270	1,159	5,729	20%	0%		
Cardiff	5,022	4,594	17,478	26%	4,703	4,419	17,087	26%	-4%		
Rhondda Cynon Ta	3,315	3,320	11,001	30%	3,353	3,296	10,798	31%	-1%		
Merthyr Tydfil	1,311	1,231	2,964	42%	1,393	1,190	2,996		-3%		
Caerphilly	1,795	2,559	8,272	31%	2,644	2,460	8,098	30%	-4%		
Blaenau Gwent	1,077	956	2,944	32%	1,042	965	2,954	33%	1%		
Torfaen	1,709	1,262	4,143	30%	1,167	1,240	4,108	30%	-2%		
Monmouthshire	692	506	3,307	15%	566	549	3,302	17%	8%		
Newport	2,808	2,564	8,113	32%	2,628	2,614	8,154	32%	2%		
Wales Source: Welsh Govern	36,869	34,746	135,183	26%	36,367	34,424	133,726	26%	-1%		

Source: Welsh Government Flying Start Data Monitoring Return 2017-18, 2018-19

⁽a) Cumulative count of individual children receiving health visitor Flying Start services.

⁽b) Children on health visitor caseload averaged over the 3 terms.

⁽c) 2017 Mid-Year Population Estimates, children aged 0,1,2,3 years, published by Office for National Statistics.

⁽d) 2018 Mid-Year Population Estimates, children aged 0,1,2,3 years, published by Office for National Statistics.

⁽r) 2017-18 data for Denbighshire was incorrectly submitted due to staffing error.

Table 2: Selected Flying Start programme indicators by local authority - face to face contacts, 2017-18 and 2018-19

		2017-18		2018-19				
Local Authority	Number of face-to-face contacts	Number of health visitor face-to- face contacts per child on caseload	Number of wider health team face- to-face contacts per child on caseload	Number of face-to-face contacts	Number of health visitor face-to- face contacts per child on caseload	Number of wider health team face- to-face contacts per child on caseload		
Isle of Anglesey	4,127	3.8	2.8	3,435	3.9	1.8		
Gwynedd	7,234	5.1	2.5	6,307	4.6			
Conwy	3,652	3.3	0.7	4,789	3.7	1.4		
Denbighshire	4,647	3.5 (r)	1.4 (r)	4,879	4.0			
Flintshire	6,017	4.4	0.3	4,769	3.5			
Wrexham	9,570	4.7	1.9	9,132	4.3	2.2		
Powys	5,131	5.1	1.2	5,318	5.1	1.0		
Ceredigion	2,846	5.3	1.0	2,844	4.3	2.1		
Pembrokeshire	10,354	5.4	3.4	8,177	4.5	3.2		
Carmarthenshire	10,306	4.6	1.2	9,261	4.6	0.6		
Swansea	12,782	3.5	1.2	12,568	3.1	1.3		
Neath Port Talbot	15,934	4.3	3.9	15,795	4.1	4.0		
Bridgend	14,922	5.4	4.5	11,391	5.6	2.2		
Vale of Glamorgan	8,918	7.3	0.4	7,680	6.1	0.5		
Cardiff	38,961	6.6	1.9	34,618	6.1	1.8		
Rhondda Cynon Taf	19,992	4.8	1.2	16,891	4.7	0.5		
Merthyr Tydfil	8,350	5.3	1.5	6,169	3.9	1.3		
Caerphilly	13,977	4.6	0.8	14,441	5.2	0.7		
Blaenau Gwent	6,968	4.4	2.9	7,914	4.7	3.5		
Torfaen	14,390	4.8	6.6	10,428	4.8	3.6		
Monmouthshire	4,512	5.6	3.3	4,656	5.6	2.8		
Newport	13,134	3.7	1.4	12,315	3.6	1.1		
Wales	236,724	4.9 (r)	1.9 (r)	213,777	4.6	1.6		

Source: Welsh Government Flying Start Data Monitoring Return 2017-18, 2018-19 (r) 2017-18 data for Denbighshire was incorrectly submitted due to staffing error.

Table 3: Selected Flying Start programme indicators by local authority – childcare, 2017-18 and 2018-19

		20)17-18		2018-19					
Local Authority	Number of children newly eligible for childcare	Number of children newly eligible and offered childcare	Number of children taking up (a) full or reduced offer of childcare	Percentage of children taking up (a) full or reduced offer of childcare	Number of children newly eligible for childcare	Number of children newly eligible and offered childcare	Number of children taking up (a) full or reduced offer of childcare	Percentage of children taking up (a) full or reduced offer of childcare		
Isle of Anglesey	162	160	149	93%	158	158	144	91%		
Gwynedd	265	265	246	93%	264	264	238	90%		
Conwy	233	233	215	92%	210	210	205	98%		
Denbighshire	227	227	178	78%	274	274	198	72%		
Flintshire	335	335	255	76%	317	317	233	74%		
Wrexham	337	333	311	93%	379	374	339	91%		
Powys	245	212	124	58%	203	203	165	81%		
Ceredigion	136	136	125	92%	109	109	86	79%		
Pembrokeshire	263	263	261	99%	314	314	301	96%		
Carmarthenshire	506	506	397	78%	476	476	424	89%		
Swansea	735	655	535	82%	742	719	619	86%		
Neath Port Talbot	636	640	551	86%	609	596	474	80%		
Bridgend	387	352	270	77%	409	388	287	74%		
Vale of Glamorgan	335	335	286	85%	314	312	279	89%		
Cardiff	1,287	1,212	1,096	90%	1,223	1,115	1,041	93%		
Rhondda Cynon Taf	914	861	810	94%	847	824	793	96%		
Merthyr Tydfil	337	333	322	97%	294	294	287	98%		
Caerphilly	657	661	620	94%	613	613	565	92%		
Blaenau Gwent	269	269	245	91%	276	276	247	89%		
Torfaen	347	347	296	85%	349	349	290	83%		
Monmouthshire	117	117	104	89%	131	131	130	99%		
Newport	749		544	84%	621	621	478			
Wales	9,479	9,098	7,940	87%	9,132	8,937	7,823	88%		

Source: Welsh Government Flying Start Data Monitoring Return 2017-18, 2018-19
(a) 'Take up' refers to whether the offer of childcare is accepted regardless of whether or not the child subsequently attends childcare.

Table 4: Number and percentage of children aged 3, living in Flying Start / non Flying Start areas and recorded on roll at a maintained school in PLASC in January 2017 and in January 2018 (age as at previous 31 August)

	2016/17						2017/18					
_	Number Percenta					rcentage	Number Percentage					centage
Local Authority	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All
Isle of Anglesey	144	525	669	95%	84%	86%	142	498	640	98%	84%	87%
Gwynedd (a)	249	906	1,155	94%	93%	94%	262	838	1,100	100%	92%	94%
Conwy	239	854	1,093	95%	97%	96%	238	817	1,055	97%	96%	96%
Denbighshire (a)	255	837	1,092	93%	100%	100%	234	836	1,070	100%	99%	100%
Flintshire	298	1,310	1,608	95%	96%	96%	272	1,283	1,555	96%	96%	96%
Wrexham	374	1,201	1,575	96%	96%	96%	322	1,188	1,510	93%	95%	95%
Powys	162	697	859	74%	72%	72%	102	358	460	46%	36%	38%
Ceredigion	108	333	441	86%	61%	65%	94	366	460	82%	69%	71%
Pembrokeshire	227	828	1,055	95%	85%	87%	240	900	1,140	93%	89%	90%
Carmarthenshire	369	1,217	1,586	90%	77%	80%	359	1,196	1,555	91%	79%	81%
Swansea	664	1,859	2,523	94%	99%	98%	662	1,813	2,475	96%	98%	98%
Neath Port Talbot	452	972	1,424	98%	93%	95%	448	972	1,420	96%	92%	93%
Bridgend	302	1,251	1,553	97%	96%	96%	317	1,173	1,490	100%	95%	96%
Vale of Glamorgan (a)	308	1,142	1,450	98%	98%	98%	267	1,168	1,435	100%	100%	100%
Cardiff	1,050	2,792	3,842	90%	86%	87%	975	2,875	3,850	88%	88%	88%
Rhondda Cynon Taf (a	843	1,884	2,727	98%	94%	95%	845	1,790	2,635	100%	91%	94%
Merthyr Tydfil (a)	322	394	716	100%	96%	98%	307	398	705	95%	100%	98%
Caerphilly (a)	651	1,421	2,072	100%	95%	97%	645	1,365	2,010	100%	95%	97%
Blaenau Gwent	252	514	766	92%	99%	97%	249	516	765	94%	98%	96%
Torfaen	341	545	886	88%	72%	78%	306	519	825	86%	71%	76%
Monmouthshire	115	291	406	81%	39%	45%	84	276	360	70%	38%	43%
Newport	575	1,044	1,619	82%	78%	79%	571	1,039	1,610	86%	75%	78%
Wales (b)	8,298	22,819	31,117	93%	87%	89%	7,939	22,191	30,130	93%	86%	88%

Source: Pupil Level Annual School Census (PLASC) 2017, 2018, National Community Child Health Database (NCCHD) 2016-17, 2017-18 (denominator)

(a) The number of children recorded on PLASC was greater than the total number of children recorded on NCCHD, resulting in percentage of greater than 100% which has been adjusted to 100%.

⁽b) Wales total includes 5 children in 2017/18 living in non-Flying Start areas where local authority was unknown.

Table 5: Live births to Welsh residents in Flying Start and non-Flying Start areas, 2016 and 2017

			2016 (a)					2017 (a)		
_			Number	-	Per cent			Number	-	Per cent
Local Authority	Flying Start	Non-Flying Start	All areas	Flying Start	Non-Flying Start	Flying Start	Non-Flying Start	All areas	Flying Start	Non-Flying Start
Isle of Anglesey	155		706	22%		150		659	23%	77%
Gwynedd	239		1,153	21%		211		1,127	19%	81%
Conwy	209		1,049	20%		237		1,016	23%	77%
Denbighshire	240	763	1,003	24%		242		979	25%	75%
Flintshire	293	1,281	1,574	19%	81%	281	1,343	1,624	17%	83%
Wrexham	314	1,174	1,488	21%	79%	321	1,255	1,576	20%	80%
Powys	196	961	1,157	17%	83%	190	919	1,109	17%	83%
Ceredigion	97	514	611	16%	84%	111	439	550	20%	80%
Pembrokeshire	243	873	1,116	22%	78%	219	894	1,113	20%	80%
Carmarthenshire	395	1,466	1,861	21%	79%	427	1,390	1,817	24%	76%
Swansea	683	1,796	2,479	28%	72%	631	1,738	2,369	27%	73%
Neath Port Talbot	435	1,081	1,516	29%	71%	419	1,035	1,454	29%	71%
Bridgend	300	1,195	1,495	20%	80%	289	1,196	1,485	19%	81%
Vale of Glamorgan	280	1,022	1,302	22%	78%	295	1,066	1,361	22%	78%
Cardiff	1,126	3,333	4,459	25%	75%	1,011	3,158	4,169	24%	76%
Rhondda Cynon Ta	831		2,761	30%	70%	783		2,608	30%	70%
Merthyr Tydfil	288	423	711	41%	59%	283		707	40%	60%
Caerphilly	652	1,348	2,000	33%	67%	603	1,306	1,909	32%	68%
Blaenau Gwent	226	498	724	31%		227		730	31%	69%
Torfaen	317		1,006	32%		334		1,018	33%	67%
Monmouthshire	137		736	19%		103		729	14%	86%
Newport	629		1,867	34%		654		1,990	33%	67%
Wales (b)	8,285	,	33,004	25%		8,021	24,215	32,236	25%	75%

Source: National Community Child Health Database (NCCHD) 2016, 2017
(a) Flying Start postcodes as at 31 March 2016
(b) Wales total includes 230 births in 2016 and 137 births in 2017 to Welsh residents living in non-Flying Start areas where local authority was unknown.

Table 6: Number and percentage (a) of babies living in Flying Start / non Flying Start areas who received any breast milk (b) at 10 days old by local authority, 2017

		- y , -	Number		centage	
Local Authority	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All
Isle of Anglesey	101	269	370	32%	46%	57%
Gwynedd	147	432	579	30%	52%	52%
Conwy	147	418	565	36%	46%	57%
Denbighshire	169	405	574	26%	43%	61%
Flintshire	184	685	869	33%	46%	56%
Wrexham	218	659	877	24%	45%	59%
Powys	87	277	364	50%	67%	36%
Ceredigion	54	135	189	50%	68%	36%
Pembrokeshire	130	422	552	37%	50%	53%
Carmarthenshire	282	706	988	30%	45%	59%
Swansea	210	469	679	41%	56%	48%
Neath Port Talbot	142	378	520	26%	35%	67%
Bridgend	167	603	770	28%	44%	59%
Vale of Glamorgan	183	417	600	38%	61%	44%
Cardiff	495	987	1,482	50%	68%	36%
Rhondda Cynon Ta	532	994	1,526	27%	42%	63%
Merthyr Tydfil	208	288	496	20%	29%	74%
Caerphilly	389	761	1,150	28%	39%	64%
Blaenau Gwent	163	338	501	25%	31%	71%
Torfaen	212	368	580	33%	44%	60%
Monmouthshire	56	182	238	45%	69%	35%
Newport	334	606	940	47%	53%	49%
Wales (c)	2,509	11,256	13,765	35%	51%	47%

Source: National Community Child Health Database (NCCHD) 2017

⁽a) The percentages are of the total live births less births with no stated breastfeeding status: 9% had no stated breastfeeding status at 10 days in 2017.

⁽b) 'Any breast milk' consists of combined milk feeding (breast milk plus artificial milk) plus those who receive exclusively breast milk (nothing else except water).

⁽c) Wales total includes 58 babies living in non-Flying Start areas where local authority was unknown.

Table 7: Number and percentage of children living in Flying Start / non Flying Start areas who are fully immunised (a) by their 4th birthday by local authority (b), 2017-18 and 2018-19

			2017	7-18			2018-19					
			Number	·	Per	centage			Number		Per	rcentage
Local Authority	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All	Flying Start	Non- Flying Start	All
Isle of Anglesey	126	555	681	91%	90%	90%	142	534	676	91%	91%	91%
Gwynedd	239	818	1,057	89%	87%	88%	207	829	1,036	86%	91%	90%
Conwy	204	719	923	81%	87%	85%	195	831	1,026	83%	92%	90%
Denbighshire	200	709	909	80%	86%	84%	198	750	948	84%	89%	88%
Flintshire	253	1,208	1,461	88%	89%	89%	257	1,200	1,457	90%	90%	90%
Wrexham	311	1,136	1,447	89%	90%	90%	301	1,110	1,411	86%	90%	89%
Powys	199	858	1,057	88%	86%	86%	192	830	1,022	88%	89%	89%
Ceredigion	122	451	573	94%	85%	86%	90	479	569	89%	89%	89%
Pembrokeshire	194	813	1,007	77%	84%	83%	216	892	1,108	82%	86%	85%
Carmarthenshire	336	1,308	1,644	83%	84%	84%	320	1,323	1,643	81%	88%	86%
Swansea	577	1,617	2,194	81%	87%	85%	542	1,702	2,244	81%	90%	87%
Neath Port Talbot	397	927	1,324	84%	88%	86%	393	983	1,376	83%	91%	88%
Bridgend	271	1,155	1,426	81%	90%	88%	271	1,129	1,400	81%	90%	88%
Vale of Glamorgan	249	1,004	1,253	85%	84%	84%	239	1,061	1,300	84%	91%	89%
Cardiff	837	2,797	3,634	76%	84%	82%	902	2,856	3,758	80%	88%	86%
Rhondda Cynon Ta	718	1,776	2,494	84%	89%	88%	722	1,693	2,415	84%	90%	88%
Merthyr Tydfil	271	344	615	92%	90%	91%	295	400	694	87%	89%	88%
Caerphilly	553	1,259	1,812	84%	87%	86%	540	1,266	1,806	81%	88%	86%
Blaenau Gwent	218	426	644	81%	79%	80%	178	449	627	81%	85%	84%
Torfaen	295	645	940	84%	85%	85%	277	555	832	83%	83%	83%
Monmouthshire	113	624	737	92%	83%	84%	120	642	762	91%	88%	88%
Newport	475	1,012	1,487	71%	74%	73%	551	1,193	1,744	78%	83%	81%
Wales (b)	7,160	22,214	29,374	82%	86%	85%	7,149	22,718	29,867	83%	89%	87%

Source: Public Health Wales COVER report 2017-18, 2018-19; National Community Child Health Database (NCCHD) 2017-18, 2018-19 (denominator)

⁽a) Includes the following immunisations: Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae (Hib), Measles, Mumps, Rubella, Meningitis C and Pneumococcal infection (PCV). Analysis provided by Public Health Wales Communicable Disease Surveillance Centre and Vaccine Preventable Disease Programme.

⁽b) Local authority was not known for 55 children in 2017-18 and 13 children in 2018-19 in non-Flying Start / All areas.

Table 8: Prevalence of children in 'healthy weight' (a) categories for children aged 4-5 years resident within Flying Start and non-Flying Start areas, 2016/17 and 2017/18 combined (b)

	All C	hildren	E	Boys	Girls		
Local Authority (c)	Flying Start	Non-Flying Start	Flying Start	Non-Flying Start	Flying Start	Non-Flying Start	
Isle of Anglesey	65.4%	69.7%	69.8%	69.9%	60.7%	69.4%	
Gwynedd	67.9%	69.8%	67.9%	71.5%	67.9%	67.9%	
Conwy	64.1%	70.5%	63.9%	70.6%	64.4%	70.5%	
Denbighshire	69.5%	68.9%	66.8%	66.9%	71.9%	71.2%	
Flintshire	71.6%	73.6%	74.0%	73.9%	69.3%	73.2%	
Wrexham	67.2%	70.1%	66.5%	70.1%	68.0%	70.1%	
Powys	71.7%	74.7%	68.4%	74.6%	75.0%	74.8%	
Ceredigion	78.4%	76.0%	79.8%	74.7%	76.8%	77.3%	
Pembrokeshire	71.0%	73.2%	72.0%	71.4%	70.0%	75.1%	
Carmarthenshire	67.3%	73.1%	68.1%	73.0%	66.5%	73.2%	
Swansea	71.3%	74.8%	72.7%	74.8%	69.8%	74.9%	
Neath Port Talbot	72.4%	75.0%	70.7%	73.8%	74.0%	76.2%	
Bridgend	68.2%	74.1%	68.6%	74.1%	67.8%	74.2%	
Vale of Glamorgan	82.0%	82.7%	82.2%	82.0%	81.8%	83.4%	
Cardiff	71.8%	78.5%	73.5%	78.3%	69.9%	78.7%	
Rhondda Cynon Taf	67.8%	72.8%	67.3%	72.9%	68.3%	72.7%	
Merthyr Tydfil	63.7%	68.4%	62.8%	67.3%	64.5%	69.5%	
Caerphilly	69.8%	73.6%	69.6%	73.3%	70.0%	73.9%	
Blaenau Gwent	75.3%	69.3%	75.9%	67.7%	74.7%	71.0%	
Torfaen	70.0%	72.7%	72.5%	74.2%	67.2%	71.1%	
Monmouthshire	78.4%	78.7%	76.1%	79.5%	80.5%	77.8%	
Newport	74.2%	76.9%	72.1%	77.0%	76.7%	76.7%	
Wales	70.6%	74.2%	70.7%	74.0%	70.4%	74.3%	

Source: Child Measurement Programme (CMP) for Wales 2016/17 and 2017/18 combined, produced by Public Health Wales Observatory, using CMP data (NWIS)

⁽a) Healthy weight' includes healthy weight or underweight.

⁽b) Flying Start areas as at 31 March 2016.

⁽c) Note that, in some local authorities, the numbers of children living in Flying Start areas may be relatively small and differences may not be statistically significant.

Table 9: Parenting courses offered by local authority, 2018-19

	<u>Formal</u>	structured parenti	ng courses	Informal structured parenting courses				
Local Authority	Number of places on courses taken up (a)	Number of places taken up with 75% or more of sessions attended (deemed complete)	Percentage of places on formal structured parenting courses ending in the year taken up	Number of places on courses taken up (a)	Number of places taken up with 75% or more of sessions attended (deemed complete)	Percentage of places on informal structured parenting courses ending in the year taken up		
Isle of Anglesey	30	17	57%	165	131	79%		
Gwynedd	104	61	59%	320	101	32%		
Conwy	94	90	96%	48	34	71%		
Denbighshire	22	14	64%	307	150	49%		
Flintshire	237	210	89%	78	73	94%		
Wrexham	51	21	41%	150	106	71%		
Powys	90	41	46%	166	77	46%		
Ceredigion	40	37	93%	143	86	60%		
Pembrokeshire	76	58	76%	90	78	87%		
Carmarthenshire	124	85	69%	719	376	52%		
Swansea	80	40	50%	63	38	60%		
Neath Port Talbot	228	165	72%	471	402	85%		
Bridgend	27	24	89%	349	226	65%		
Vale of Glamorgan	121	73	60%	205	142	69%		
Cardiff	233	171	73%	442	402	91%		
Rhondda Cynon Taf	107	71	66%	-00	-00			
Merthyr Tydfil	138	84	61%	254	137	54%		
Caerphilly	271	180	66%	81	62	77%		
Blaenau Gwent	501	454	91%	372	326	88%		
Torfaen	149	111	74%	253	62	25%		
Monmouthshire	368	217	59%	187	160	86%		
Newport	509	293	58%	1,411	661	47%		
Wales	3,600	2,517	70%	6,274	3,830	61%		

Source: Welsh Government Flying Start Data Monitoring Return 2018-19 a) This is measured by counting places where the first or second session was attended.

Baseline table: Key data for 2012-13

	Flying Start children				Children living in Flying Start areas	
	N	D	Percentage	Percentage	Percentage of	Percentage of
Local Authority	Number of children benefiting (in receipt of services)(a)	Percentage of children taking up full or reduced offer of childcare	reaching or exceeding milestones (b) at age 2	reaching or exceeding milestones (b) at age 3	children aged 3 recorded on roll at a maintained school	children fully immunised (c) at 4th birthday
Isle of Anglesey	459	78%	56%	56%	97%	81%
Gwynedd	640	100%	62%	56%	98%	85%
Conwy	752	100%	53%	25%	100%	70%
Denbighshire	887	86%	70%	33%	84%	78%
Flintshire	954	99%	75%	73%	91%	84%
Wrexham	887	98%	38%	38%	96%	82%
Powys	525	100%	62%	32%	74%	85%
Ceredigion	414	86%	53%	64%	63%	82%
Pembrokeshire	649	99%	66%	51%	95%	75%
Carmarthenshire	1,112	91%	53%	64%	94%	73%
Swansea	1,492	94%	52%	64%	96%	81%
Neath Port Talbot	1,042	83%	55%	38%	94%	78%
Bridgend	956	87%	42%	66%	100%	72%
Vale of Glamorgan	866	98%	61%	55%	94%	84%
Cardiff	3,368	81%	61%	52%	85%	67%
Rhondda Cynon Taf	2,542	87%	51%	62%	100%	85%
Merthyr Tydfil	792	94%	55%	59%	100%	79%
Caerphilly	1,219	91%	70%	72%	98%	78%
Blaenau Gwent	655	58%	52%	51%	91%	86%
Torfaen	1,187	78%	57%	63%	90%	81%
Monmouthshire	346	98%	56%	53%	76%	78%
Newport (d)	1,835	100%	37%	42%	88%	78%
Wales	23,579	90%	55%	55%	92%	78%

Source: Welsh Government Flying Start Data Monitoring Return 2012-13

Pupil Level Annual School Census (PLASC) 2013, National Community Child Health Database (NCCHD) 2012-13 (denominator)

Public Health Wales COVER report 2011-2012, 2012-13, National Community Child Health Database (NCCHD) 2012-13 (denominator)

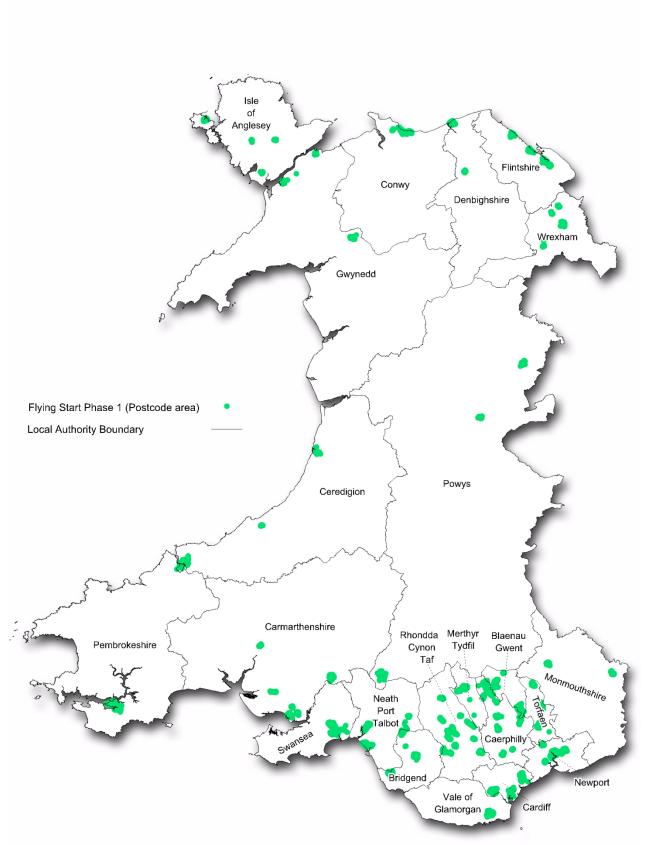
⁽a) Cumulative count of individual children receiving health visitor Flying Start services

⁽b) For information on developmental milestones, please see notes on page 43.

⁽c) Includes the following immunisations: Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae (Hib), Measles, Mumps, Rubella, Meningitis C and Pneumococcal infection (PCV). Analysis provided by Public Health Wales Communicable Disease Surveillance Centre and Vaccine Preventable Disease Programme.

⁽d) The number of children taking up a full or reduced offer of childcare was greater than the total number of places offered, resulting in a percentage of 102% in New port in 2012-13 w hich has been adjusted to 100%. In addition the numbers of offers exceeded the numbers of eligible children in several cases. See Notes for an explanation for these discrepancies.

Baseline map: location of Flying Start areas as at 31 March 2012



(r) Flying Start areas as at 31 March 2012 have been revised due to late changes in the postcodes received from Blaenau Gwent, Caerphilly, Ceredigion, Neath Port Talbot, Newport and Pembrokeshire.

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Key quality information

The Flying Start programme

Key aspects of Flying Start are:

- free part-time childcare for 2-3 year olds
- an enhanced health visiting service (where the health visitor caseload is capped at 110 children)
- access to parenting support
- access to Speech, Language and Communication support (previously described as Early Language Development).

These services are universally available to all children aged under 4 years and their families in the areas in which the programme runs.

Health visiting and midwifery: A Flying Start requirement is that there must be one full time equivalent health visitor per 110 children aged under 4 in the target areas. This is to ensure delivery of intensive support to Flying Start children and their families. The primary function of the Flying Start health visitor is to support the family in the home, assessing both the child (using an appropriate Welsh Government approved developmental assessment tool), and the family (in terms of high, medium and low risk). In some local authorities, midwives are employed as part of the core Flying Start team. Whether or not this is the case locally, Flying Start health visitors work closely with generic midwives working with Flying Start parents. Particular emphasis is placed on working with the most vulnerable groups including teenage parents, those who are victims of, or may be at risk of domestic abuse and pre/post-natal depression.

Childcare services: The core Flying Start childcare offer is that quality childcare is offered to parents of all eligible 2-3 year olds for 2 ½ hours a day, 5 days a week for 39 weeks. In addition, there should be at least 15 sessions of flexible provision for the family during the school holidays.

Sources

Routine management information

Welsh Government Knowledge and Analytical services (KAS) established routine data monitoring of the Flying Start programme in 2012 and early 2013 with the first data being collected for 2012-13. The information is collected three times a year from local authorities and includes data used to manage the programme.

This release provides data for each complete financial year based on the final data collection of each year. Since the last statistical release was issued, two termly updates, providing unvalidated key management information for Wales only, have been published shortly after each data collection period. The purpose of these termly updates is to enable in-year high level monitoring of the programme. The data published is felt to be of sufficient value at a Wales level to be presented, but local authority data continue to be validated throughout the year and are only included in this annual statistical release.

Information on outcomes for children resident in Flying Start areas

National databases such as the National Community Child Health Database (NCCHD) and the Pupil Level Annual School Census (PLASC) have been used in conjunction with lists of the Flying Start postcode areas to provide outcome measures for the children in relevant age groups. The outcomes presented here are the proportion of children living within and outside Flying Start areas who are fully immunised by their 4th birthdays, the proportion of children aged 4-5 who are of healthy weight based on their BMI and the proportion who are recorded on school rolls at age 3. Note that there will be a number of children resident in these areas whose families have not taken up offers of Flying Start services and therefore are incorrectly counted as Flying Start children; this number is thought to be small however.

Population

ONS mid-year estimates of population are used in <u>Chart 2</u> and <u>Table 1</u> of this release. For 2017-18 the 2017 mid-year estimates have been used. For 2018-19 the 2018 mid-year estimates have been used. The estimates are published on <u>StatsWales</u>.

Coverage

Flying Start areas

Flying Start targets the most disadvantaged areas in Wales. The programme has been targeted to areas according to measures of relative deprivation including the Welsh Index of Multiple Deprivation (WIMD), free school meals and the proportions of children aged under 4 years living in households in receipt of income related benefits.

The areas included in Map 1 are those areas defined by postcodes provided to Welsh Government by Flying Start coordinators. In a small number of postcodes not all of the dwellings within the area are included in the programme. Note that the map does not reflect any expansion of the programme after 31 March 2016.

Expansion areas

A small expansion of the programme into additional areas occurred in 2012-13 but the major expansion to date was during 2013-14 and 2014-15. The expectation was that the number of children benefitting from the programme by the end of 2015-16 would be 36,000, but this figure was in fact met by the end of 2014-15. Management data has been collected for some aspects of the programme separately for pre-expansion areas and for expansion areas. Where a split is not available the addition of the developing areas into the statistics should be considered when interpreting the data. The release presents statistics for expansion areas in the following way:

 It has not been possible to split the number of children benefiting, the caseload counts, contacts or take-up of childcare places between pre-expansion and expansion areas. This should be noted when making comparisons of statistics between years. However some background information on the numbers of children who have been offered childcare places in the two areas was collected. It should be noted that in some local authorities there was relatively slow development into the expansion areas in some cases because of delays recruiting health visitors and in establishing new childcare settings. It is likely that the statistics are impacted by this.

Management information

This data collection was established during 2012 and early 2013 in collaboration with Flying Start coordinators for the purpose of providing information with which to manage the programme. The first data was provided to Welsh Government for 2012-13 and is submitted for three "terms" during the year: 1 April - 31 August, 1 September – 31 December and 1 January – 31 March.

It should be noted that the information has been collected for management rather than statistical reasons and validation of the data is focussed as much on the operation of the programme as it is on developing robust statistics.

The management information shows that Flying Start children are likely to move in and out of the areas. In most local authorities children transferring into Flying Start areas accounted for around 15-25 per cent of all children in receipt of health visitor services at some time during 2015-16.

The following statistics are derived from this management information:

1. Children benefiting from, that is, in receipt of Flying Start services: the data shows the number of individual Flying Start children, aged under 4 years, who are recorded as having received health visitor Flying Start services at some point between 1 April and 31 March. In each year there is a small number of local authorities where the number of children allocated to Flying Start health visitors' caseloads is greater than the number of children in receipt of Flying Start services. This is likely to be due to transfers in to Flying Start areas at the end of the term but before any first health visitor contact.

Note that from 2013-14 caseload was counted at the end of each term rather than the start of the term.

Flying Start staff also provide ante-natal services as well as services to some children aged 4 if there are younger Flying Start children in the family but these contacts are not presented in these statistics.

2. Children newly eligible and in receipt of Flying Start nursery provision: the figure is the number of Flying Start children, aged 2 or 3 years, who are newly eligible for and have taken up full or reduced offers of childcare between 1 April and 31 March. The percentage shown is the number of children taking up childcare as a percentage of the number of offers made to newly eligible children. The majority of offers taken up are full (more than 90 per cent). Note that in each year in a small number of authorities the count of childcare offers taken up was higher than the number of offers made to newly eligible children, and in addition the numbers of offers exceeded the numbers of eligible children in several cases. These apparent discrepancies are because the numbers eligible reflect only those eligible at the start of each term, excluding any children that moved into the Flying Start areas during each term and who were subsequently offered a place. From 2013-14 the collection has been improved so that numbers of offers will only exceed eligible children in cases

where there is a catch up on offers not made in a previous year, which is likely to have a minimal impact on the data.

An offer is made in the term of the child's second birthday and is taken up or otherwise. The provision will only start in the following term and attendance will not necessarily reflect take-up as a place may not be attended even if taken up (accepted).

Note that in expansion areas children who were very close to their third birthdays may not have been made childcare offers.

Parenting and Speech, Language & Communication

The core purpose of the parenting strand is about working with parents of children under 4 years old to strengthen parenting capacity and reduce risks, covering issues such as basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries and stability.

Every family with a Flying Start child must be offered formal parenting support at least on an annual basis. This can be in groups or one to one in the home with a mix of formal and informal support depending on need. In addition to the formal parenting offer, other parenting programmes may be delivered, such as informal parenting support, bespoke enhanced one-to-one sessions and informal drop-in sessions.

Structured formal parenting and Speech, Language & Communication (SLC) courses are defined as those with a structured curriculum and a set start and end date, as listed below (but note that decisions as to which courses to offer are made locally):

- Incredible Years: Parent and Babies Programme
- Incredible Years: Parents and Toddlers Programme
- Triple P: Standard
- Triple P: Stepping Stones
- Parents Plus Early Years Programme (PPEY)
- Parenting Positively
- Incredible Years: School Readiness Programme
- Family Links Nurturing Programme (FLNP)
- Incredible Years: Pre-school BASIC Parent Programme
- Solihull Approach Parenting Group
- Handling Children's Behaviour.

Structured informal parenting and SLC courses also have a structured curriculum and a set start and end date, such as Language and Play or Number and Play (LAP/NAP), and other structured early language development.

In both cases, a 'place' on a course is defined as one allocated to an individual parental figure. If two (or more) parental figures are allocated a place on a course, this would be recorded as two (or more) places. Any children attending with a parent for any reason would **not** be counted as a place.

The measure of 'take up' of course places is defined as the number of people who attended at the first session.

Bespoke enhanced distinct packages of support are defined as planned, time bound series of sessions, delivered on a one-to-one basis, that have been identified as a requirement via a specific referral from within the Flying Start programme in respect of parenting or SLC. Usually such a package will last for a minimum of four dedicated sessions to a relevant family unit, delivered in the home or elsewhere.

National databases

The list of postcodes provided by the Flying Start programme has been used to identify children of the relevant age on both the Pupil Level Annual School Census (PLASC) and the National Community Child Health Database (NCCHD). It should be noted that biases may be created where children who have received Flying Start services had moved at some stage and were counted on national databases outside the Flying Start postcodes areas or where not all children took up Flying Start services.

Further information about the annual School Census, PLASC.

The PLASC covers all maintained schools in Wales. Pupils are included in PLASC if they are on roll at any maintained school in Wales. This will include pupils who live in England. Pupils who live in Wales but go to school in England are not included (they will be counted in the annual school census in England). Pupils in independent schools are not counted. The NCCHD counts children where they are resident, and these small definitional differences should be noted.

In 2017, just over 1,500 pupils attended a local authority maintained school in Wales but lived in England, who will be counted in PLASC; and just over 2,000 pupils attended primary or secondary schools in England but lived in Wales, (DoE: Schools, pupils and their characteristics: January 2017) who will not appear in PLASC.

The National Community Child Health Database (NCCHD) consists of anonymised records for all children born, resident or treated in Wales and born after 1987. It brings together data from local Child Health System databases which are held by local health boards.

For further information about the National Community Child Health Database see:

Statistics and Research website: Births: Data from the National Community Child Health Database

NHS Wales Informatics Service Information Services

The following statistics are derived from national databases:

1. Children living in areas in receipt of Flying Start services, aged 3, who were recorded on school rolls: this statistic relates to children living in Flying Start areas who were aged 3 as at 31 August and also recorded on school rolls as reported by the Pupil Level Annual School Census (PLASC) as at the following January. It is presented as a percentage of all children aged 3 as at 31 August, who were living in areas in receipt of Flying Start services identified by postcodes included in the programme and recorded on the National Community Child Health Database as at the following 31 January. Each year a small number of children resident in postcodes which were partially included in the programme have been apportioned according to the proportions of dwellings included in Flying Start. Note that not all children in a Flying Start area may take up the services offered.

- 2. Live births to mothers living in Flying Start areas and those who were fed any breast milk at 10 days old: These statistics relate to babies born to mothers resident in Flying Start areas in 2016, and of those, what proportion of them were fed any breast milk. The data is taken from the NCCHD and is allocated to areas on the basis of postcode of residence. A list of postcodes falling within the Flying Start programme has been used to extract data for mothers living in Flying Start areas. Data for 2016 and 2017 relate to mothers living in the programme area as defined at 31 March 2016. Following a new mandate in August 2012, data on infant feeding at 10 days, 6 weeks and 6 months has been recorded on the Child Health System, in addition to infant feeding data at birth. The data recorded on the NCCHD includes the following categories of infant feeding:
 - Artificial Milk Feeding
 - · Combined Milk Feeding Partially Breast
 - Combined Milk Feeding Predominantly Breast
 - Exclusive Milk

The statistic presented is the proportion of babies in Flying Start and non-Flying Start areas who, at 10 days, are recorded as receiving *any* breast milk, e.g. combined milk feeding (that is, breast milk plus artificial milk) plus those who receive exclusively breast milk (that is, nothing else except water).

Further information and data on infant feeding can be found in the statistical release 'Births:

<u>Data from the National Community Child Health Database</u>'.

3. Children living in areas in receipt of Flying Start services who are fully immunised by age 4: this statistic relates to children reaching their 4th birthday during each financial year (between 1 April and 31 March) and measures the percentage of children living in areas in receipt of Flying Start services who were fully up to date with their immunisations by their 4th birthday. Children living in areas in receipt of Flying Start services are identified according to postcodes included in the programme and recorded on the National Community Child Health Database. Each year a small number of children resident in postcodes which were partially included in the programme have been apportioned according to the proportions of dwellings included in Flying Start. Note that not all children in a Flying Start area may take up the services offered. Note that in some local authorities there may be children who are omitted from immunisation coverage statistics either because they are new to the country and were immunised elsewhere or because they were privately immunised.

The composite measure of fully immunised by 4 years of age uses the following immunisations as proxy: the 5 in 1 primary immunisation (dose 3), the Hib/MenC booster, the pneumococcal conjugate booster, MMR dose 2 and the 4 in 1 preschool booster.

The analysis of immunisation data was done by Public Health Wales Communicable Disease Surveillance Centre and Vaccine Preventable Disease Programme.

For further information on immunisation coverage see Public Health Wales COVER reports.

4. Reception aged children living in areas in receipt of Flying Start services who were assessed as having a healthy weight: The Child Measurement Programme for Wales is a surveillance programme set up in 2011 when the Welsh Government asked Public Health Wales to undertake a national height and weight measuring programme for Wales, to give a better understanding about how children in Wales are growing. The programme standardises the way in which primary school children are measured across Wales.

The information collected will help people working in health services and other public sector services understand patterns of child growth so they can plan services accordingly.

Prevalence rates (healthy (including a small number of under-weight children), overweight or obese) were calculated using the age and sex-specific body mass index (BMI) centiles calculated using the British 1990 growth reference (UK90) (from a method proposed by Cole et al (1995)). The body mass index (BMI) was calculated using a method proposed by Keys et al (1972). The following weight categories have been assigned:

- underweight: less than but not including 2nd centile
- healthy weight: 2nd centile up to but not including 85th centile
- overweight: 85th centile up to and not including 95th centile
- obese: 95th centile and above

Cole, T.J. et al (1995) Body mass index reference curves for the UK. Archives of Disease in Childhood, 73: 25-9. Cited in Dinsdale H, Ridler C, Ells L J. A simple guide to classifying body mass index in children. Oxford: National Obesity Observatory, 2011.

Keys, A. et al (1972) Indices of relative weight and obesity. Journal of Chronic Diseases, 25:329-343.

Public Health Wales combine weight categories for healthy and underweight so that there is access to counts and proportions of overweight and obesity together and separately. For the data presented under 0.6per cent of the total sample were underweight.

Records are included in the Child Measurement Programme for Wales if they meet all of the following criteria:

- location of residence can be determined
- residence in Wales
- school located in Wales
- born in the period September 2007 to August 2008 for 2012/13 data
- born in the period September 2008 to August 2009 for 2013/14 data
- sex is recorded

Eligible records are determined to be valid, and will be counted in the number measured, if they meet all of the following criteria:

- height measurement recorded and is not an implausible measurement
- · weight measurement recorded and is not an implausible measurement
- consent not withdrawn
- measurement collected during the academic years 2015/16 and 2016/17

The Child Measurement Programme was implemented in reception year across Wales for the first time during the 2011/12 academic year. As the programme was under development during this period, this first year is regarded as a transitional year.

For further information on the Child Measurement programme for Wales please see:

NHS Wales website: Child Measurement Programme for Wales

Data access, confidentiality and disclosure control

Our statistics take into account our disclosure control guidance and follow ONS confidentiality guidelines for Health statistics available from: ONS best-practice guidelines.

Revisions

Historical data is not revised unless errors are discovered.

What are the potential uses of these statistics?

The statistics are used in a variety of ways. Some examples of the uses include:

- advice to Ministers
- to inform debate in the National Assembly for Wales and beyond
- to make publicly available data on the Flying Start programme for monitoring, benchmarking and improvement
- to provide additional contextual information for Programme for Government indicators
- to help further develop policy in the area of tackling poverty in Wales.

Who are the key potential users of this data?

- Ministers and the Members Research Service in the National Assembly for Wales
- Flying Start Programme and local teams
- local authorities
- the research community
- students, academics and universities
- individual citizens
- NHS organisations.

Relevance

The statistics provide an overview of Flying Start in Wales.

In our statistical outputs we provide background to our statistics and information for users. We encourage users of the statistics to contact us to let us know how they use the data.

We consult with key users prior to making changes, and where possible publicise changes on the internet, at committees and other networks to consult with users more widely. We aim to respond quickly to policy changes to ensure our statistics remain relevant.

Accuracy

1. Data quality

Improvements in data collection methodology and validation continue to be made as the Welsh Government's Health Statistics team works closely with Flying Start teams in each local authority, with monitoring and support provided by Welsh Government account managers allocated to all the local authorities. The account managers meet with each of their Flying Start co-ordinators on a regular basis to discuss progress in the implementation of the programme.

2. Completeness

Data for births and infant feeding from NCCHD: Completeness and data quality of the items held on NCCHD vary depending on the extent to which Health Boards use the items for administrative purposes. Improving data quality with the help of Health Boards is an ongoing process. Note that the accompanying charts and tables may include categories for not stated data. Calculated percentages exclude not stated values from the denominator unless otherwise stated.

3. Introduction of new breastfeeding definitions

From September 2012 Health Boards started to record infant feeding data on to the Child Health System according to revised definitions, which, as time progresses, is providing more detailed breastfeeding data.

Following each quarterly refresh of the database, completeness tables for key variables are posted on the NHS Wales Intranet for LHBs to review.

Where there is missing data we provide full information for users to allow them to make informed judgements on the quality of the statistics, particularly if there are limitations of the data.

NCCHD is a live database and is refreshed quarterly. If reports are run from subsequent versions of the database counts will differ from published figures. Historical data are not revised unless errors are discovered. In the case of incorrect data being published, revisions would be made and users informed.

Timeliness and punctuality

All outputs adhere to the Code of Practice by pre-announcing the date of publication through the Upcoming calendar.

We publish releases as soon as practical after the relevant time period. Flying Start: Summary Statistics is published annually in July. Births in Wales: Data from the National Community Child Health Database is published annually in a combined release with maternity statistics in September.

Accessibility and clarity

The statistics are published in an accessible, orderly, pre-announced manner on the Welsh Government website at 9:30am on the day of publication. An RSS feed alerts registered users to this publication. Simultaneously the releases are also published on the National Statistics Publication Hub. We also publicise our outputs on Twitter. All releases are available to download for free.

We aim to use Plain English in our outputs and all outputs adhere to the Welsh Government's <u>accessibility policy</u>. Furthermore, all our headlines are published in Welsh and English.

Further information regarding the statistics can be obtained by contacting the relevant staff detailed on the release or via stats.healthinfo@gov.wales

Comparability and coherence

Where there are changes to the data provided, this is shown clearly in the outputs. Where advance warning is known of future changes these will be pre-announced in accordance with Welsh Government arrangements.

Every year the data are all collected from the same source and adhere to the national standard.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. The Act puts in place seven well-being goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators ("national indicators") that must be applied for the purpose of measuring progress towards the achievement of the Well-being goals, and (b) lay a copy of the national indicators before the National Assembly. The 46 national indicators were laid in March 2016. This release does not include any of the national indicators.

Information on the indicators, along with narratives for each of the well-being goals and associated technical information is available in the <u>Well-being of Wales report</u>.

Further information on the Well-being of Future Generations (Wales) Act 2015.

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

Further details

The document is available at: https://gov.wales/flying-start

Next update

July 2020 (provisional)

We want your feedback

We welcome any feedback on any aspect of these statistics which can be provided by email to stats.healthinfo@gov.wales

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