

Healthy Child Wales Programme, 2018

26 Jun 2019
SFR 47/2019

Quarterly statistics are presented from Oct-Dec 2016 (the first quarter when the Healthy Child Wales Programme (HCWP) was introduced) to Oct-Dec 2018 (the latest available quarter).

Other statistics are presented for the full calendar year 2018.



Of all HCWP contacts which
should have been offered to
eligible children

74%

were received in 2018
(calendar year)

Key Points

Data for the latest quarter (Oct-Dec 2018) shows that:

- 93% of eligible children received their contact at 10-14 days (the highest rate of all contact points).
- 50% of eligible children received their contact at 3.5 years (the lowest rate of all contact points).
- 73% of contacts were received by eligible children in Flying Start areas, the same percentage as in non-Flying start areas.

Data for the whole of 2018 (1 Jan–31 Dec) show that:

- 77% of contacts were made within the specified age ranges.

Longitudinal data from the start of the programme shows that for children born around the last quarter of 2016:

- 18% of children have received all 7 contacts for which they have been eligible for to date.
- Less than 1% of children have not received any of the 7 contacts for which they have been eligible for to date.

About this release

This statistical release publishes the first full set of annual statistics about the Healthy Child Wales Programme (HCWP).

HCWP is a universal health programme for all families with children aged 0 – 7; introduced on 1 October 2016.

The HCWP is monitored through a module of the National Community Child Health Database; a national database containing anonymised records for all children born, resident or treated in Wales born after 1987.

In this release

Eligible children receiving contacts	5
Reasons for non contacts	10
Flying Start analysis	12
Longitudinal view	17
Health board profiles	20

Healthy Child Wales Programme

Background

The [Healthy Child Wales Programme](#) (HCWP) was launched on 1 October 2016, with the expectation that health boards would fully implement the programme within two years. The HCWP is a universal health programme for all families with children aged 0 – 7 years. It includes a consistent range of evidence based preventative and early intervention measures, with advice and guidance to support parenting and healthy lifestyle choices. The HCWP sets out what planned contacts children and their families can expect from their health boards from maternity service handover to the first years of schooling. These universal contacts cover three areas of intervention: screening; immunisation; and monitoring and supporting child development.

The programme underpins the concept of progressive universalism and aims to identify a minimum set of key interventions to all families with pre-school children, irrespective of need.

Monitoring the programme

The programme is supported by an updated Child Health System, delivered by the [NHS Wales Informatics Service](#) (NWIS), ensuring that health boards are able to schedule contacts effectively under HCWP and that there is accurate and comparable data collected to support improvements to child health across Wales.

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 the Child Health System databases which are held by local health boards. Welsh Government and NWIS have worked together with health professionals to establish a dataset for those HCWP contacts with children between the ages of 10 days and 3.5 years. The data is collected by health visitors and other health professionals and recorded on the Child Health System by health board community child health staff. The NCCHD is refreshed from local Child Health System databases every quarter (end January, April, July and October).

Note that only data extracted from the NCCHD is analysed here and that HCWP contacts before 10 days of age and after 3.5 years are not reported in this release. Other key components of the programme are reported elsewhere:

- [Immunisation statistics](#) (COVER statistics) are published by Public Health Wales.
- Infant feeding statistics are published in our annual [Births in Wales, data from the NCCHD](#) statistical release.

Measuring coverage of the programme

In order to measure how the programme is being implemented for children living in Wales using the National Community Child Health Database (NCCHD), the following methodology has been used:

- Identified appropriate eligible children during the period for each contact. For example, in relation to the 10-14 day contact, we have looked at all children in Wales becoming 10 days old during the quarter.

- For these eligible children we have counted the valid records for each HCWP contact.
- Delayed reporting by one quarter to allow time for data to be recorded on Child Health System databases.
- Note that annual data is extracted at the same time as the last quarter in the year and data for the three previous quarters in the year are not revised. If there are late submissions of data for contacts which happened in the first three quarters of the year, then these will be counted in the annual data but not in the quarterly data from when they happened. As a result annual data may not be the sum of the constituent quarters.

Implementing the programme

Statistics in this release only relate to the following HCWP contacts:

- health visitor home contact at 10-14 days;
- physical examination at 6-8 weeks;
- health visitor service contact (growth assessment) at 8, 12 and 16 weeks;
- health visitor service contact at 6 months;
- health visitor service contact at 15 months;
- health visitor service contact at 27 months; and
- health visitor service contact at 3.5 years pre-school.

After the first home contact at 10-14 days, health visitor service contacts occur either in the home or in clinics, although growth assessments contacts can also take place at GP practices. The physical examination takes place mostly in GP practices or in clinics.

What does the data show?

The data collection system is still relatively new so there are some issues with the recording of certain data items. The majority of the statistical report focusses on whether or not a child received their contact, for which there is good data coverage.

Over the duration of the programme the percentage of eligible children receiving their contact has been highest at the earlier contact points, in particular the contact point at 10-14 days where in the latest quarter more than 9 out of 10 eligible children received their contact.

The percentage of eligible children receiving their height and weight measurements at 8, 12, and 16 weeks is lower than the first two contacts. These contacts should generally align with immunisation schedules and typically involve the parent taking the child to a clinic or GP practice, rather than a health visitor making an appointment at the child's residence.

The lowest percentage of eligible children receiving a contact happens at 3.5 years, currently the last contact point for which there are data, where half of eligible children do not receive their contact.

When analysing the reason for a child not receiving a contact, 'no appointment on record' (meaning no appointment was generated by the system) is the most common reason, explaining the non-contact in almost 7 out of 10 cases. The reason why no appointment is made is varied and can include health boards not offering the contact for resource reasons, or it could be that a contact did occur and the appropriate data collection form was not filled in or processed at the time data was extracted from the local health board Child Health Systems.

The majority of contacts are made within the specified age ranges for all contact points. Apart from the 10-14 day and 6-8 week contact, contacts outside the age range are more likely to be made before the child reaches the lower age threshold rather than after the higher age threshold.

When the Healthy Child Wales Programme was first introduced there were some noticeable differences between the percentage of children receiving contacts in Flying Start and non-Flying Start areas. This is largely explained by the two programmes aligning, which has been resolved over time. In more recent quarters there have only been very small differences between the percentage of children receiving contacts in at Flying Start and non-Flying Start areas, at each contact point, at the Wales level.

As the data allows us to track an individual child as they move through the programme over time, we are able to produce longitudinal analyses. This analysis suggests that almost all children born around the last quarter of 2016 (and therefore eligible for the most contacts within the programme) received at least one contact for which they were eligible for. However, 5 out of 6 of these children have not received at least one of the contacts they have been eligible for.

It is important to note that all contacts within the programme are voluntary, so the apparent 'take-up rate' of contacts offered is affected by parental choices as well as health boards ensuring services are being offered.

Quarterly summary of Healthy Child Wales Programme

Table 1: Summary of Healthy Child Wales Programme, 2018

	<u>Eligible children</u>	<u>Received contact</u>	<u>% received contact</u>
10-14 days	31,220	28,287	91%
6-8 weeks	31,219	25,361	81%
8 weeks	31,263	22,607	72%
12 weeks	31,416	20,467	65%
16 weeks	31,564	20,283	64%
6 months	31,793	25,248	79%
15 months	32,495	26,422	81%
27 months	33,433	25,231	75%
3.5 years	34,171	18,623	54%
Total contacts	288,574	212,529	74%

Table 1 shows the number of eligible children receiving their contact at each contact point during 2018. Of all the contacts which should have been offered to eligible children in 2018, 74% were received. This varied by contact point, with the highest percentage of eligible children receiving contacts at 10-14 days (91%). The lowest percentage of eligible children receiving contacts was at 3.5 years (54%).

The following charts show a quarterly time series of the percentage of eligible children receiving their contact at each contact point. Note that the data in Table 1 is a combination of data from quarters 1, 2, 3, and 4 of 2018 extracted from the database on the same date at which quarter 4 data was first extracted.

Quarterly time series: Percentage of eligible children receiving contact at each contact point since the start of programme

Chart 1a: Contact at 10-14 days

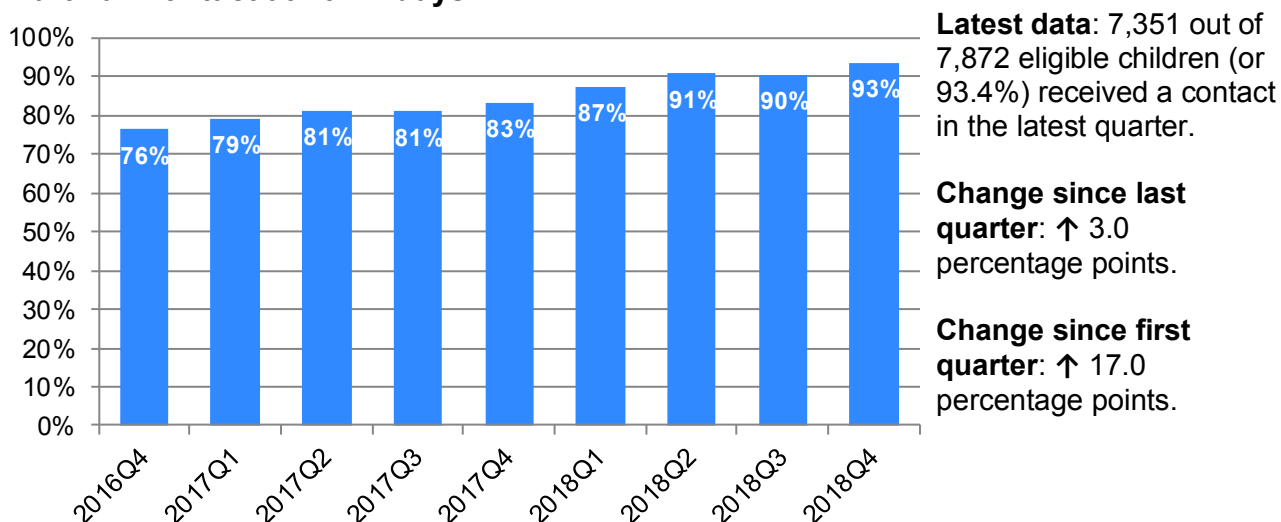
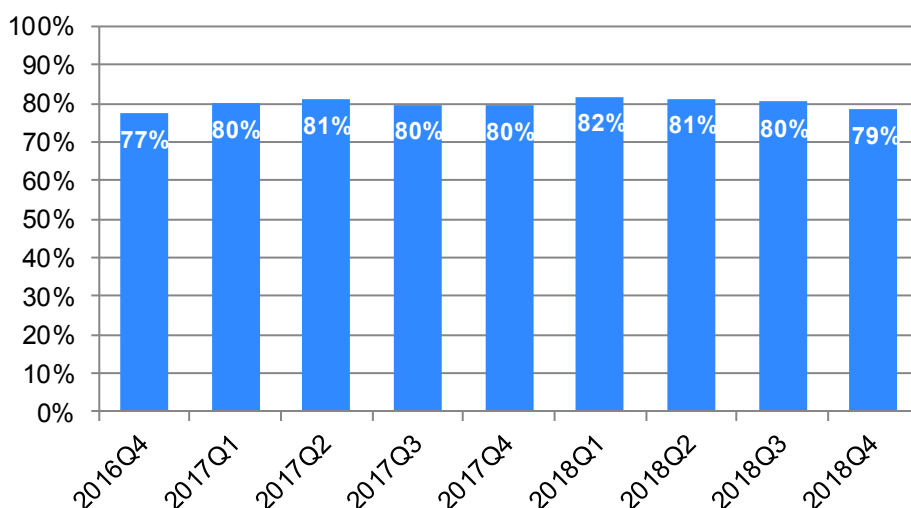


Chart 1b: Physical examination at 6-8 weeks

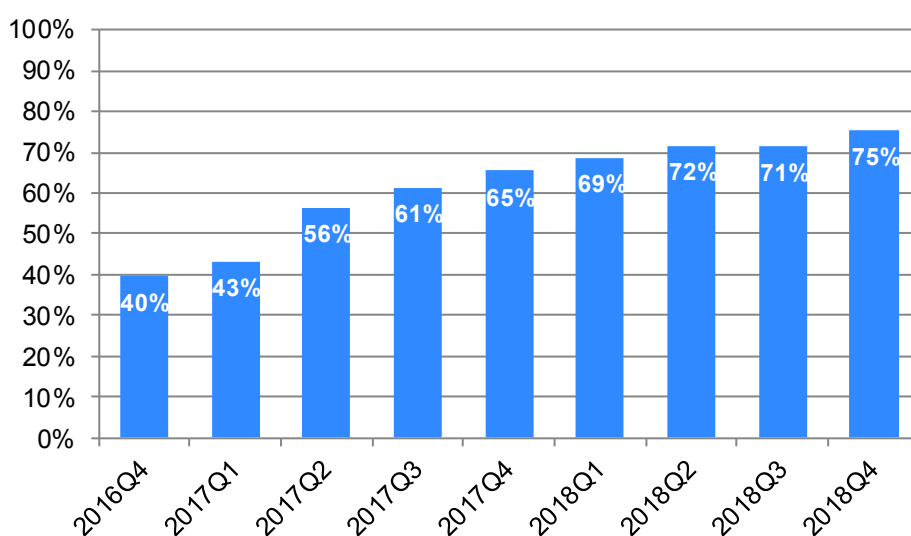


Latest data: 6,321 out of 8,044 eligible children (or 78.6%) received a contact in the latest quarter.

Change since last quarter: ↓ 1.8 percentage points.

Change since first quarter: ↑ 1.3 percentage points.

Chart 1c: Weight and height measurement at 8 weeks

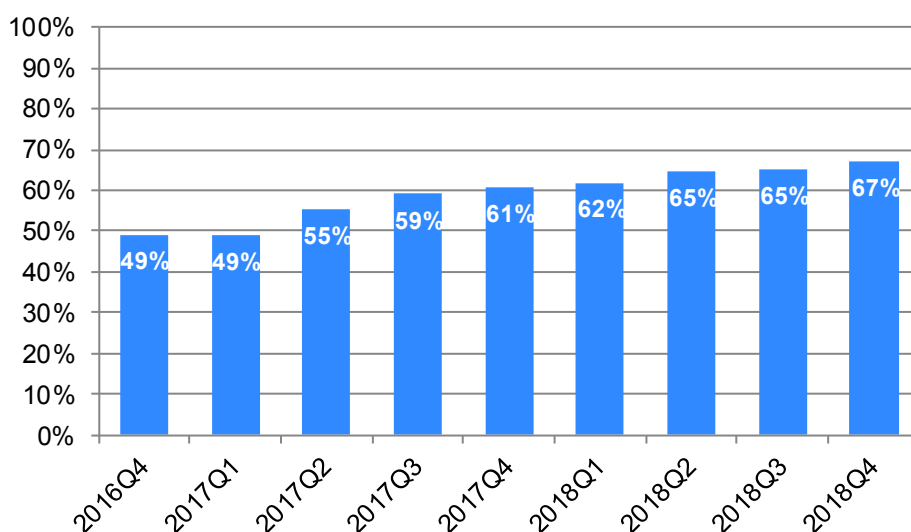


Latest data: 6,068 out of 8,045 eligible children (or 75.4%) received a contact in the latest quarter.

Change since last quarter: ↑ 4.0 percentage points.

Change since first quarter: ↑ 35.7 percentage points.

Chart 1d: Weight and height measurement at 12 weeks

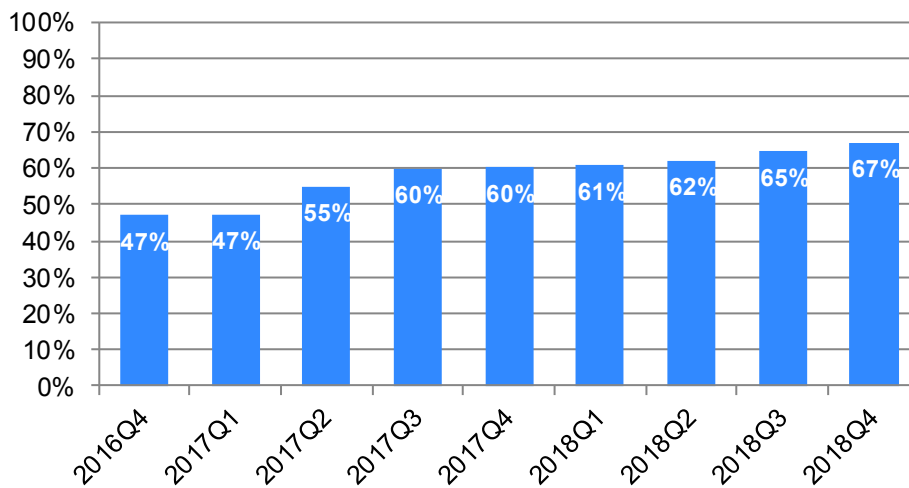


Latest data: 5,462 out of 8,131 eligible children (or 67.2%) received a contact in the latest quarter.

Change since last quarter: ↑ 2.2 percentage points.

Change since first quarter: ↑ 18.0 percentage points.

Chart 1e: Weight and height measurement at 16 weeks

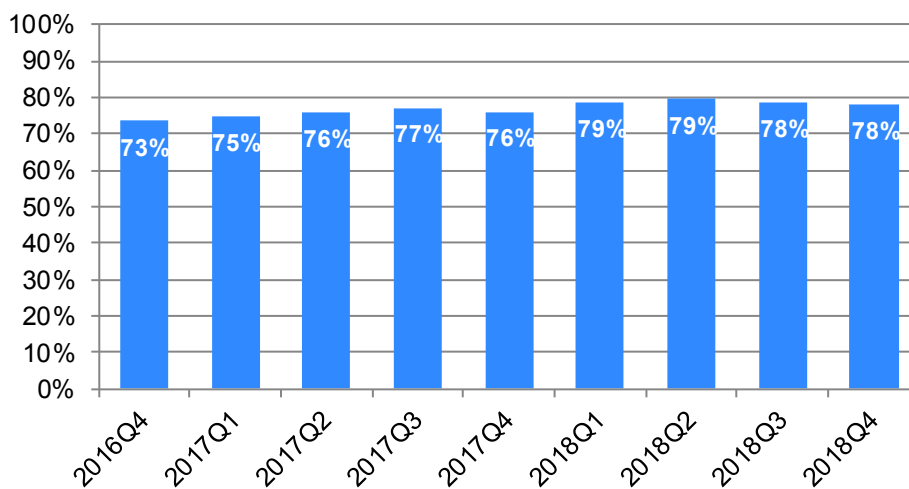


Latest data: 5,392 out of 8,034 eligible children (or 67.1%) received a contact in the latest quarter.

Change since last quarter: ↑ 2.4 percentage points.

Change since first quarter: ↑ 19.9 percentage points.

Chart 1f: Contact at 6 months

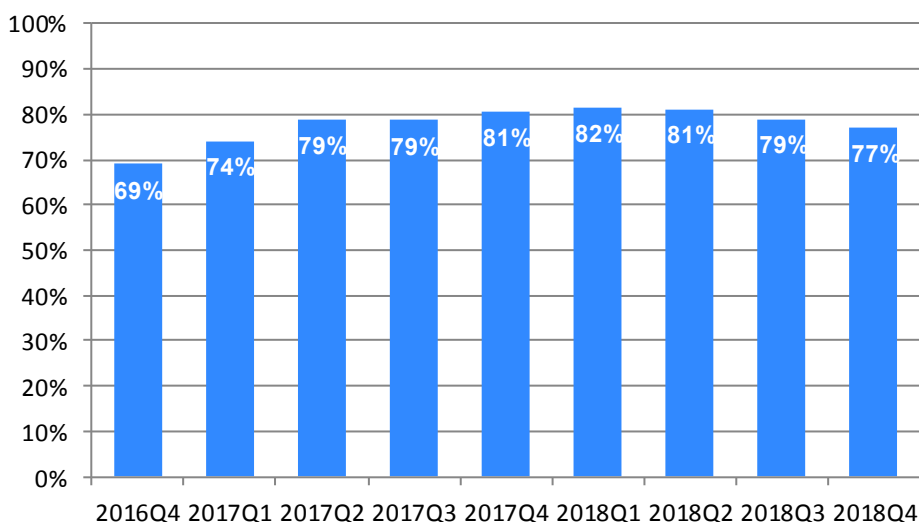


Latest data: 6,091 out of 7,821 eligible children (or 77.9%) received a contact in the latest quarter.

Change since last quarter: ↓ 0.5 percentage points.

Change since first quarter: ↑ 4.5 percentage points.

Chart 1g: Health Visitor contact at 15 months

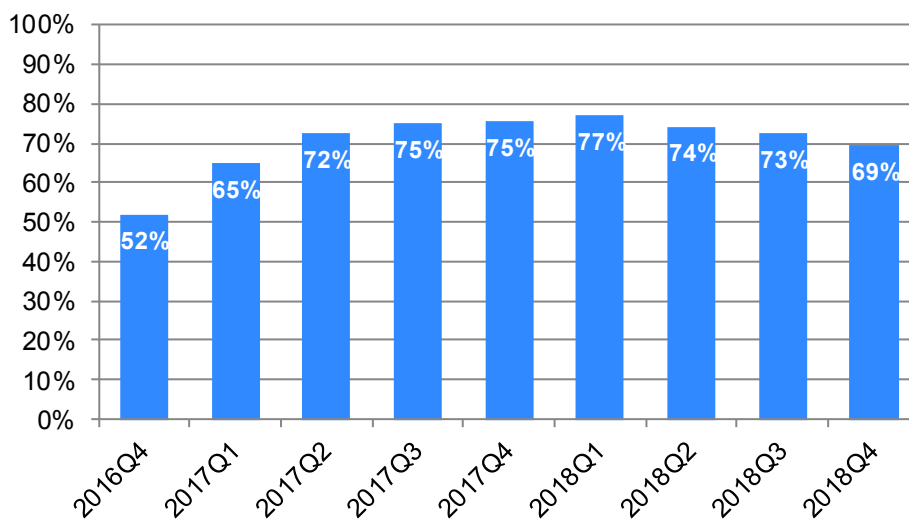


Latest data: 6,578 out of 8,536 eligible children (or 77.1%) received a contact in the latest quarter.

Change since last quarter: ↓ 2.0 percentage points.

Change since first quarter: ↑ 8.1 percentage points.

Chart 1h: Health visitor contact at 27 months

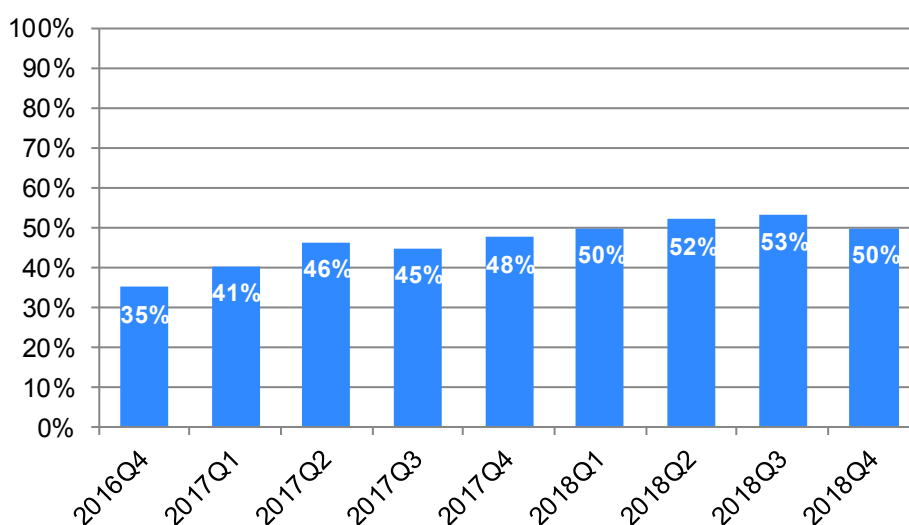


Latest data: 5,911 out of 8,530 eligible children (or 69.3%) received a contact in the latest quarter.

Change since last quarter: ↓ 3.2 percentage points.

Change since first quarter: ↑ 17.3 percentage points.

Chart 1i: Contact at 3.5 years (pre-school)

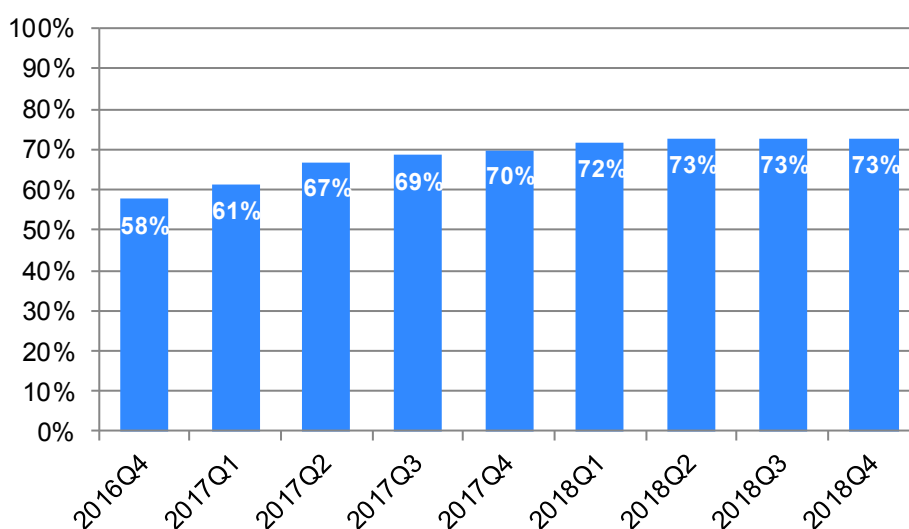


Latest data: 4,284 out of 8,586 eligible children (or 49.9%) received a contact in the latest quarter.

Change since last quarter: ↓ 3.3 percentage points.

Change since first quarter: ↑ 14.8 percentage points.

Chart 1j: Total contacts to eligible children (a)



Latest data: 53,458 out of 73,599 (or 72.6%) possible contacts were received by eligible children in the latest quarter.

Change since last quarter: ↓ 0.1 percentage points.

Change since first quarter: ↑ 15.0 percentage points.

(a) Note that some children will be counted multiple times each quarter in the 'total contacts' chart. This is because it is a sum of all individual contacts and a single child may have been eligible for multiple contacts during a single quarter.

Summary

When all the contacts are combined, 72% or more of the contacts which should have been offered to eligible children, were received, in each of the 4 quarters of 2018. The percentage of contacts being received by eligible children, for all contacts combined, has increased in every quarter since the start of the programme until 2018, quarter two. Since this point, the percentage has levelled off.

While there has been a general upward trend in the percentage of eligible children receiving their contacts, there has been some variation at each contact point.

Throughout the duration of the programme, the 10-14 day contact has tended to be the contact point with the highest percentage of eligible children receiving their contact. In the latest quarter more than 9 out of 10 (93%) of eligible children received their contact.

The 3.5 year contact had the lowest percentage of eligible children receiving their contact in the latest quarter and every other quarter since the programme was introduced. However, there has been an increase in the 'take-up' of this contact since the programme was introduced, with the percentage of eligible children being 50% or greater in each of the four quarters in 2018.

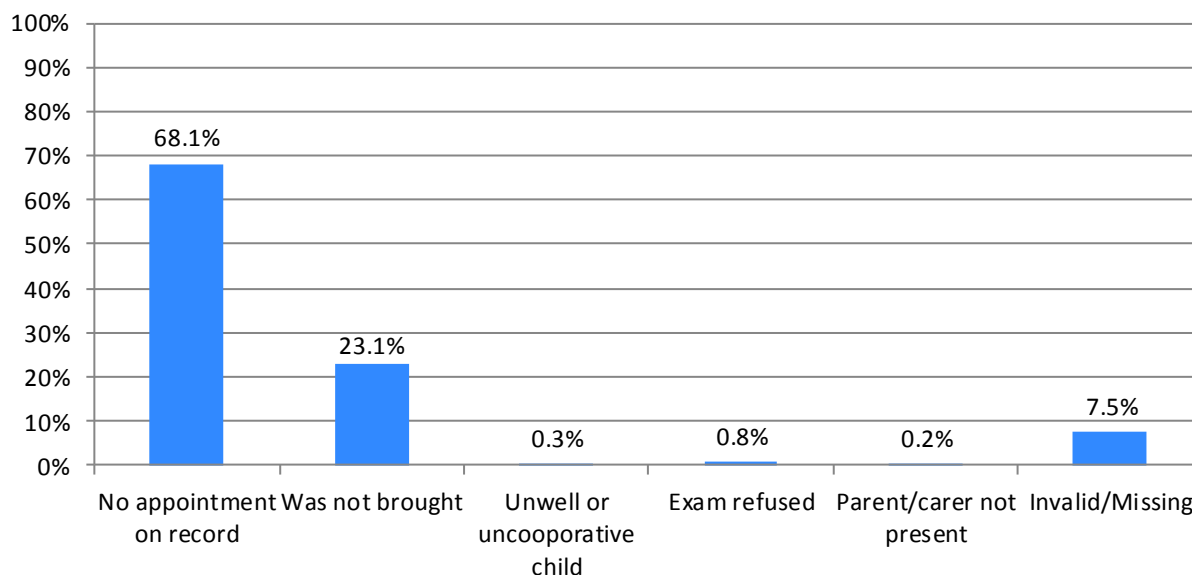
The contacts at 8, 12 and 16 week have a lower percentage of eligible children receiving their contact than the contacts immediately preceding or following them. A number of factors might influence this: for example, if a parent does not consent to the child receiving immunisations, a health visitor form will not be generated and a contact not arranged; not all health visitors coincide their clinics with GP immunisation sessions as there may not be space available in the surgery; drop-in clinics may be shared between different health visitors so the contact might occur but not get recorded on the data collection form; and if there are no concerns at the 6-8 week contact, some parents may decide that their child does not need another contact soon after.

Note that all contacts offered through the Healthy Child Wales Programme are voluntary, so personal choice also affects the percentage of eligible children receiving a contact.

Reasons for not receiving a contact

All eligible children across Wales should be sent an invite for all contacts either directly via a mailer (for contacts that align with immunisations, providing consent is provided) or via their health visitor for contacts led by the health visitor. Where a contact is not recorded, a reason is provided.

Chart 2: Reason for no contact, all contacts combined, 2018



Summary

During 2018 there were just over 76,000 contacts which were either not offered by health boards or offered and not taken up by eligible children. 92% of these children had information recorded on the system indicating why they did not take the contact. The majority (68%) of contacts were not made because there was no record of an appointment being made. Where an appointment was made, the main reason why the contact did not happen was because the child was not brought to the appointment (23%).

There are a number of reasons why there may be no appointment on record: for example, it may be that health boards do not have the capacity to provide a contact so it is not offered; the health visitor may not have arranged an appointment; or a contact may have occurred and the child health department has not processed the data collection form, or that department may not have received the data collection form yet.

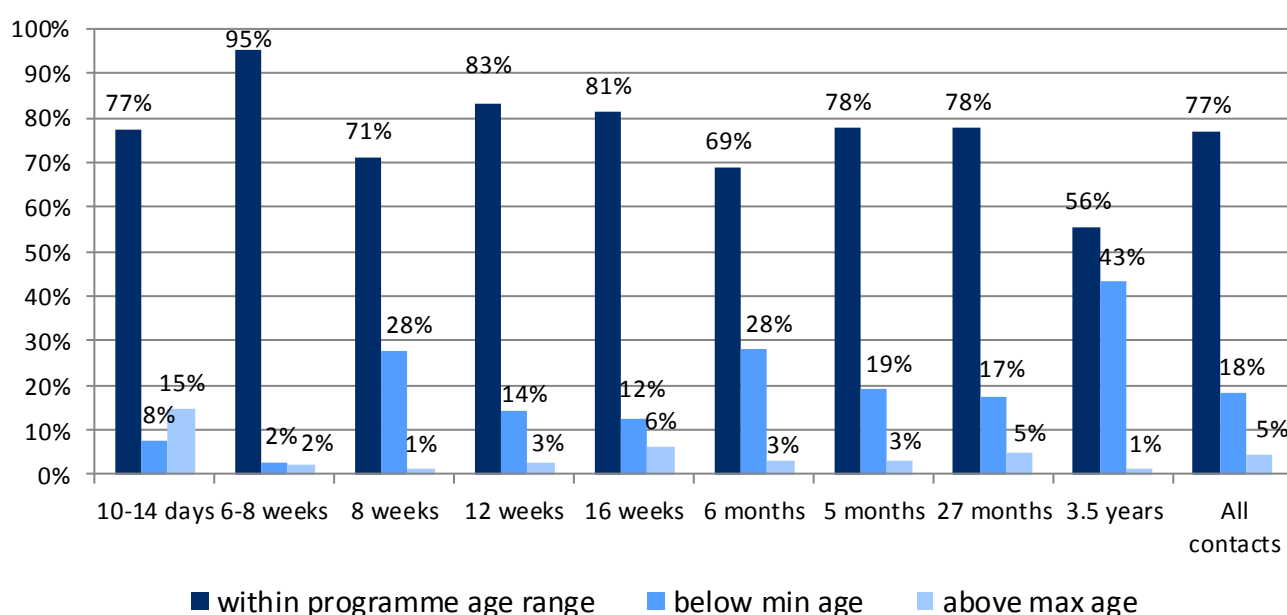
Contacts within programme age range, 2018

While the Healthy Child Wales Programme is designed for children to receive a contact at specific ages, in practice each contact point has a minimum and maximum age threshold within which the contact should take place. These thresholds were determined by Heads of Health Visitors at local health boards and are shown in Table 2.

Table 2: Healthy Child Wales Programme contact age thresholds

Contact	Age thresholds	
	Min age	Max age
Contact at 10-14 days	10 days	14 days
Physical examination at 6-8 weeks	6 weeks	12 weeks
Weight and measurement at 8 weeks	8 weeks	12 weeks
Weight and measurement at 12 weeks	12 weeks	16 weeks
Weight and measurement at 16 weeks	16 weeks	20 weeks
Contact at 6 months	26 weeks	35 weeks
Health Visitor contact at 15 months	65 weeks	78 weeks
Health visitor contact at 27 months	117 weeks	130 weeks
Contact at 3.5 years (pre-school)	185 weeks	208 weeks

Chart 3: Percentage of contacts received within age range, below the minimum age, and above the maximum age



Summary

The majority of all contacts (77%) are made within the specified age range, though there is some variation between contact points. If a child has their appointment outside of the age threshold, it's more likely to be before the minimum age, apart from at the first two contact points. The largest percentage of children not seen within the age range is at 3.5 years, where over two-fifths (43%) have their contact before the lower age threshold.

Flying Start

Flying Start is the Welsh Government's targeted Early Years programme for families with children aged less than four years of age. It offers families access to enhanced health visiting services, free part-time childcare for two to three year olds, parenting support, and support for the development of speech, language and communication. The programme has been targeted at defined geographical areas within each local authority 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 caseload of children who live in the designated Flying Start areas has been transferred from generic health visiting services to Flying Start. Generic health services and all members of the Flying Start health skill mix team collaborate to ensure the best possible support is made available to children and their families.

Statistics describing activity within Flying Start programme areas as well as outcomes for children living in Flying Start and other areas are published annually: [Flying Start: summary statistics](#).

Summary

[Chart 4a](#) to [Chart 4j](#) show the differences between the percentage of eligible children receiving Healthy Child Wales Programme contacts who live in Flying Start areas and non-Flying Start areas.

Overall, at the Wales level, there has been little difference between the percentage of eligible children receiving contacts in Flying Start areas and non-Flying Start areas. In the latest quarter, the percentage of eligible children receiving their contact was 73% in both Flying Start and non-Flying Start areas.

There were some differences in the first two quarters, when the percentage of eligible children receiving contacts in non-Flying Start areas was higher than Flying Start areas at all contact points. This is likely to be explained by the different visiting schedules already in place for the Flying Start programme being aligned to the Healthy Child Wales Programme, which have been resolved over time.

There are some small variations in the percentage of eligible children receiving their contact at different contact points for children living in Flying Start and non-Flying Start areas. For example in the latest quarter, the rate is slightly higher in Flying Start areas for contacts at 6 months and 3.5 years, whereas at 10-days and 6-8 weeks, the rate is slightly higher in non-Flying Start areas.

Note that Flying Start families receive an enhanced health visiting service with additional visits at 24+ week gestation, from the baby's birth to six weeks old and between the ages of 9-12 months and 18-24 months.

Quarterly time series: Percentage of eligible children receiving Healthy Child Wales Programme contacts at each contact point, Flying Start (FS) and Non-Flying Start (Non-FS)

Chart 4a: Contact at 10-14 days

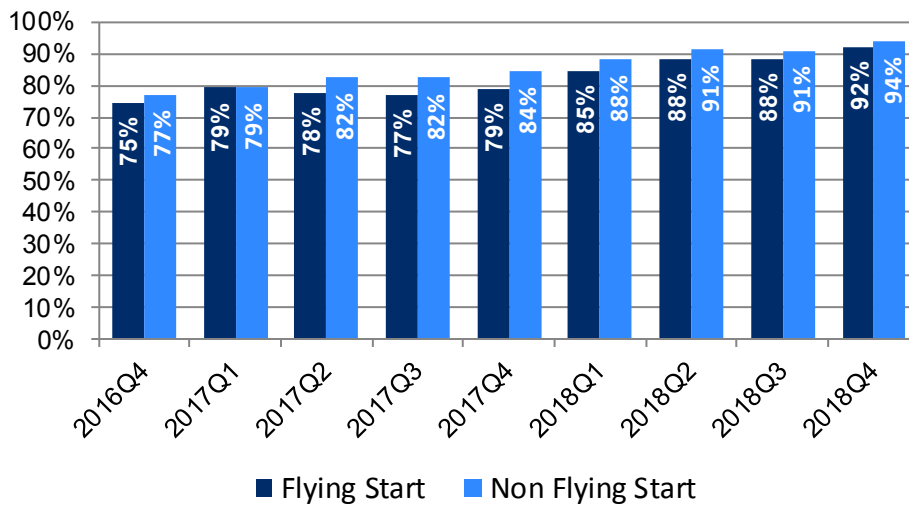


Chart 4b: Physical examination at 6-8 weeks

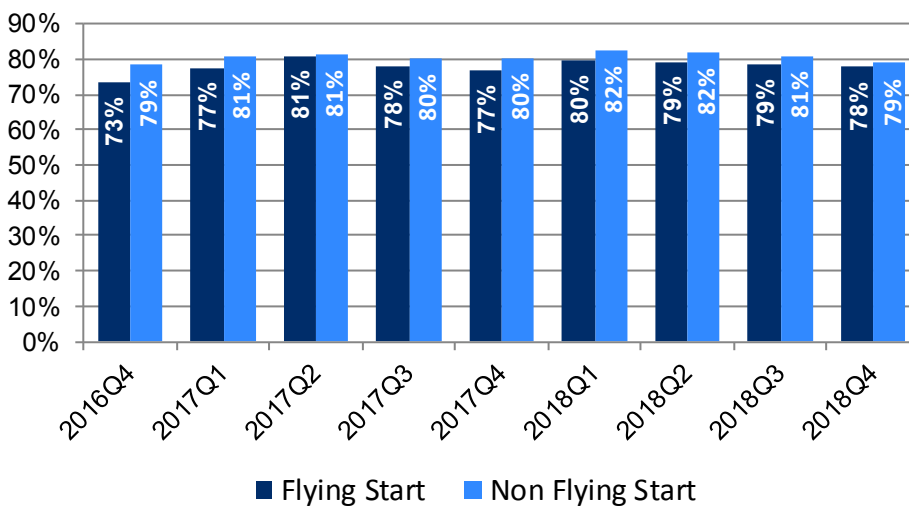


Chart 4c: Weight and measurement at 8 weeks

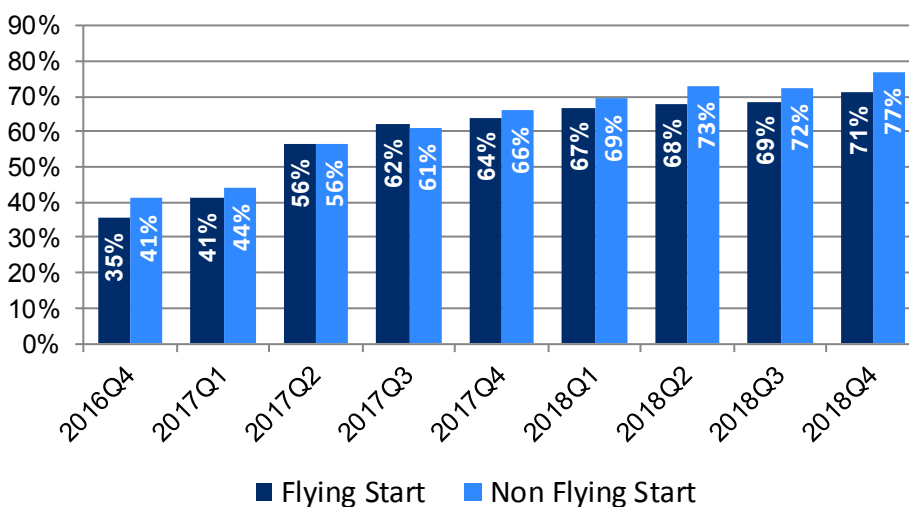


Chart 4d: Weight and measurement at 12 weeks

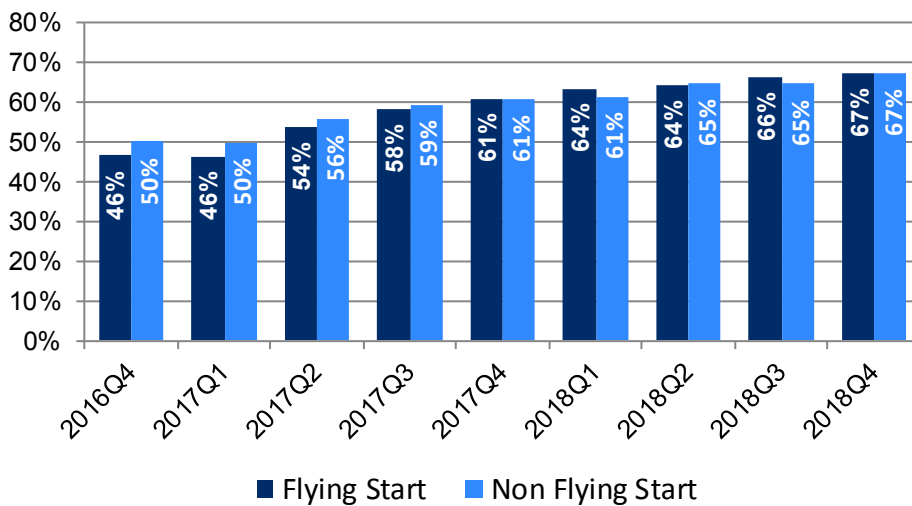


Chart 4e: Weight and measurement at 16 weeks

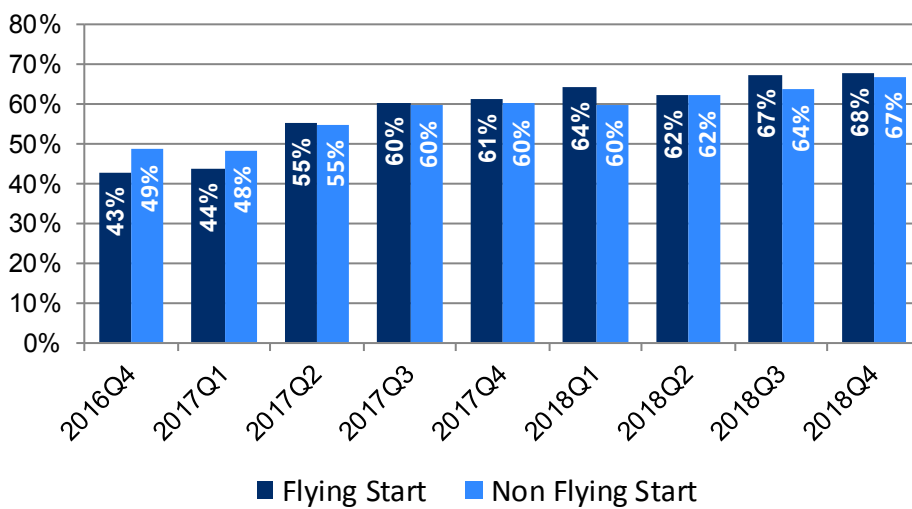


Chart 4f: Contact at 6 months

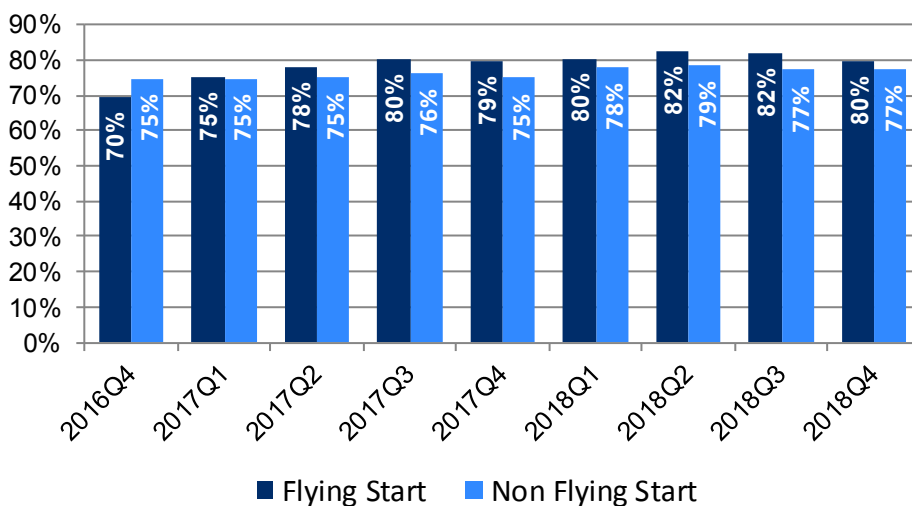


Chart 4g: Health Visitor contact at 15 months

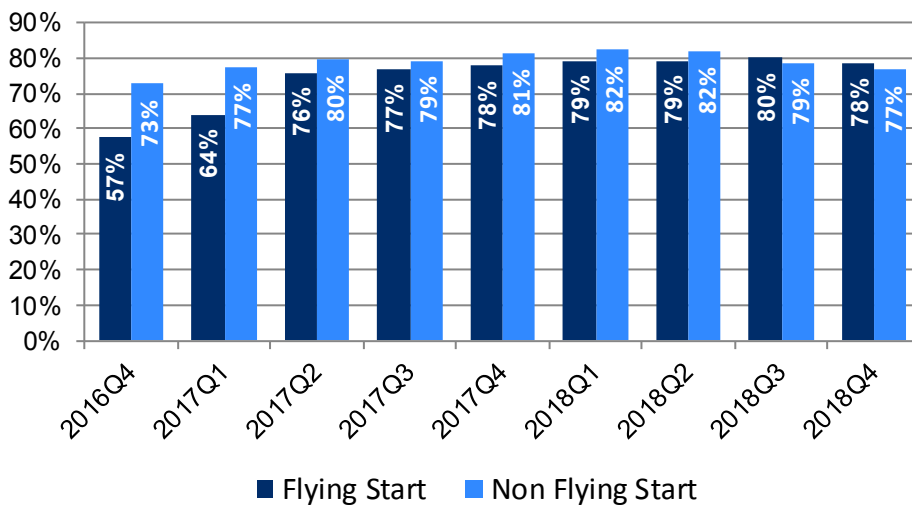


Chart 4h: Health visitor contact at 27 months

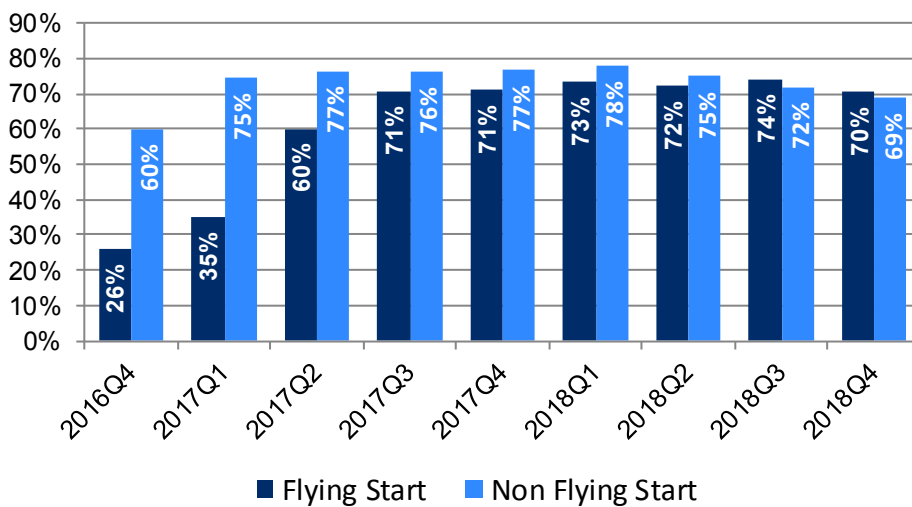


Chart 4i: Contact at 3.5 years (pre-school)

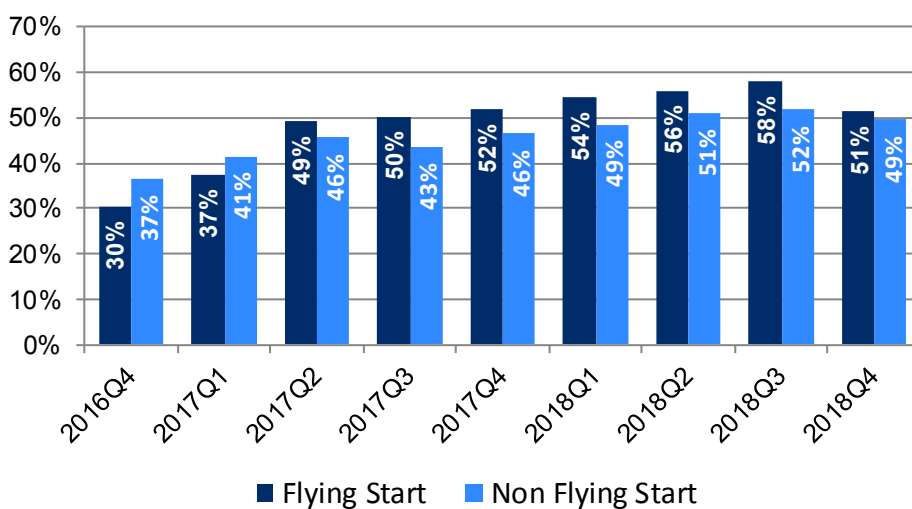
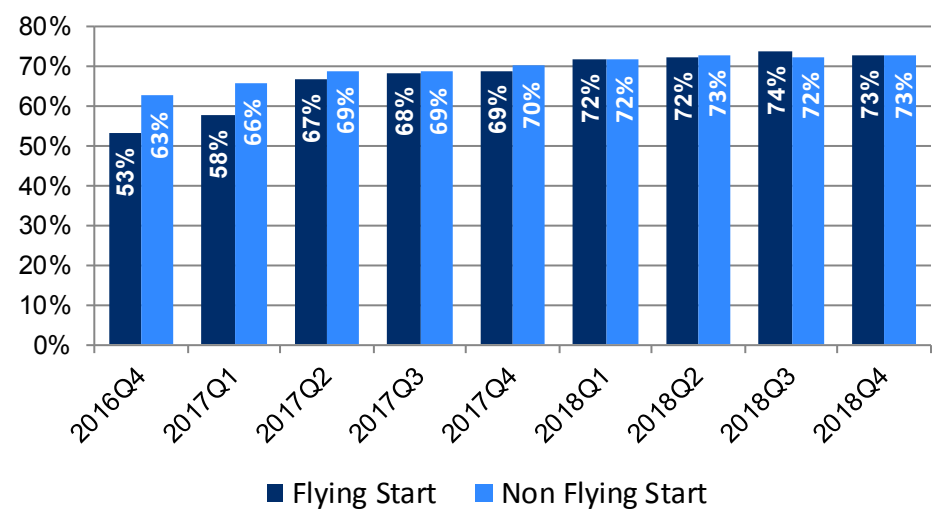


Chart 4j: Total contacts to eligible children



Longitudinal view

The information collected on the National Community Child Health Database (NCCHD) allows us to track a child's progress through the Healthy Child Wales Programme and produce a longitudinal analysis.

A child born on the day the programme was introduced would have been eligible for all contacts from the 10-14 day contact, up to and including the 15 month contact, but would not yet be old enough to have received the 27 month and 3.5 year contacts. Similarly, a child aged around 2 years and 3 months at the start of the programme would have only been eligible for the contacts at 27 month and 3.5 years but not any of the earlier contacts. Tables 3 and 4 show a longitudinal summary of the programme at the Wales level.

Table 3: Percentage of children receiving all of their contacts throughout the programme, by contact point

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	83.9%								
6 weeks	69.1%	81.4%							
8 weeks	46.7%	52.6%	62.0%						
12 weeks	34.4%	38.8%	44.7%	59.1%					
16 weeks	26.9%	30.5%	34.6%	43.5%	58.3%				
6 months	22.9%	26.4%	29.8%	37.1%	48.9%	78.2%			
15 months	18.2%	20.7%	23.1%	30.2%	40.1%	66.8%	80.8%		
27 months	-	-	-	-	27.7%	53.3%	63.6%	73.9%	
3.5 years	-	-	-	-	-	-	-	39.2%	51.0%

Table 3 highlights two main features:

- The highlighted numbers on the diagonal of the table, shows the percentage of eligible children receiving that contact between 1 October 2016 (when the programme began) and 31 December 2018 (the latest available data).
 - For example, throughout the duration of the programme, 83.9% (or 53,169 children out of 63,341) of children who were eligible for a contact at 10-14 days, received that contact. Similarly, the next highlighted number shows that 81.4% (or 51,501 of children out of 63,246) of children who were eligible for a contact at 6-8 weeks, received that contact.
- Reading down each column of numbers shows the percentage of children who received the corresponding contact shown on the left-most column and all previous contacts within the column.
 - For example, 69.1% of children eligible for both the 10-14 day and the 6-8 week contact, received both contacts; 46.7% of children eligible for contacts at 10-14 days, 6-8 weeks and 8 weeks, received all three contacts; and continuing to the bottom of the column, 18.2% of children who were eligible for all contacts between 10-14 days and 15 months received all of the contacts.

- All other columns can be interpreted the same way; reading down from the 8 week column, a third of children (34.6%) who were eligible for contacts at 8 weeks, 12 weeks and 16 weeks received all three contacts.

The highlighted data in Table 3 shows that throughout the duration of the programme around 8 out of 10 eligible children received their contacts at 10-14 days, 6-8 weeks, 6 months and 15 months. Other contact points have lower take up, with the lowest at 3.5 years where half of eligible children received their contact.

Table 3 also shows that it is unlikely that a child will receive all the contacts available to them. Of the children who have been eligible for the most contacts (those born close to the last quarter of 2016) around 1 out of 6 has received all contacts available to them between 10-14 days and 15 months.

Some of the largest drop offs in 'take-up' occur between the contact points at 6-8 weeks, 8, 12 and 16 weeks. Of those who have been eligible for all 4 contacts, 3 out of 10 eligible children received all 4.

The other large fall appears to happen between the contact points of 27 month and 3.5 years, largely due to low take up of the 3.5 years contact. The majority of those children receiving the contact at 3.5 years would also have received their 27 month contact.

Table 4: Percentage of eligible children receiving no contacts throughout the programme, by contact point

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	16.1%								
6 weeks	3.6%	18.6%							
8 weeks	2.3%	8.5%	38.0%						
12 weeks	1.8%	6.0%	23.2%	40.9%					
16 weeks	1.4%	4.8%	17.4%	25.7%	41.7%				
6 months	0.6%	1.7%	5.5%	8.6%	12.5%	21.8%			
15 months	0.4%	0.8%	2.3%	3.0%	4.0%	6.1%	19.2%		
27 months	-	-	-	-	2.3%	2.9%	6.3%	26.1%	
3.5 years	-	-	-	-	-	-	-	16.7%	49.0%

Table 4 shows the longitudinal analysis of children not receiving contacts throughout the Healthy Child Wales Programme and should be interpreted in the same way as Table 3.

- The highlighted cells across the diagonal of the table shows the percentage of children who were eligible for a contact but did not receive it at each contact point, and when added to the corresponding number in Table 3, will equal 100%.
- For example, 16.1% (10,172 out of 63,341) of all children eligible to receive a contact at 10-14 days, did not receive it, and 18.6% (11,745 out of 63,246) of all children eligible to receive a contact at 6-8 weeks, did not receive it.

- Reading down the columns shows the percentage of eligible children who did not receive their contact at the corresponding point on the left-most column, and did not receive all previous contacts they were eligible for.
 - For example, 3.6% of children eligible for a contact at 10-14 days and 6-8 weeks did not receive both contacts; 2.3% of children eligible for contacts at 10-14 days, 6-8 weeks and 8 weeks did not receive any of the contacts; and continuing down to the bottom of the column, 0.4% of children did not receive any of the contacts they were eligible for between 10-14 days and 15 months.

Table 4 shows that the vast majority of children have received at least one contact throughout the programme, but there are a small number of children who have yet to be seen. Of those eligible for the most contacts (those born around the last quarter of 2016), over 96% are seen either at 10-14 days or 6-8 weeks (or both); however, by the 15 month contact (the last contact they are currently eligible for) 0.4% (or 86 children) have not received any contact as part of the programme.

While 'take up' of all the contacts between 6-8 weeks and 16 weeks is relatively low, just over 95% of eligible children received at least one of these contacts.

Weight and height measurements are taken at the 8, 12 and 16 weeks contact points and around 1 in 6 children have not received these appointments since the start of the programme.

Annex 1: Local health board profiles

Data for 2018 is shown in the charts below. A full time series of local health board quarterly data is available on [StatsWales](https://stats.wales.gov.uk/).

Percentage of eligible children receiving contact at each contact point, by health board, 2018

Chart 5a: Contact at 10-14 days

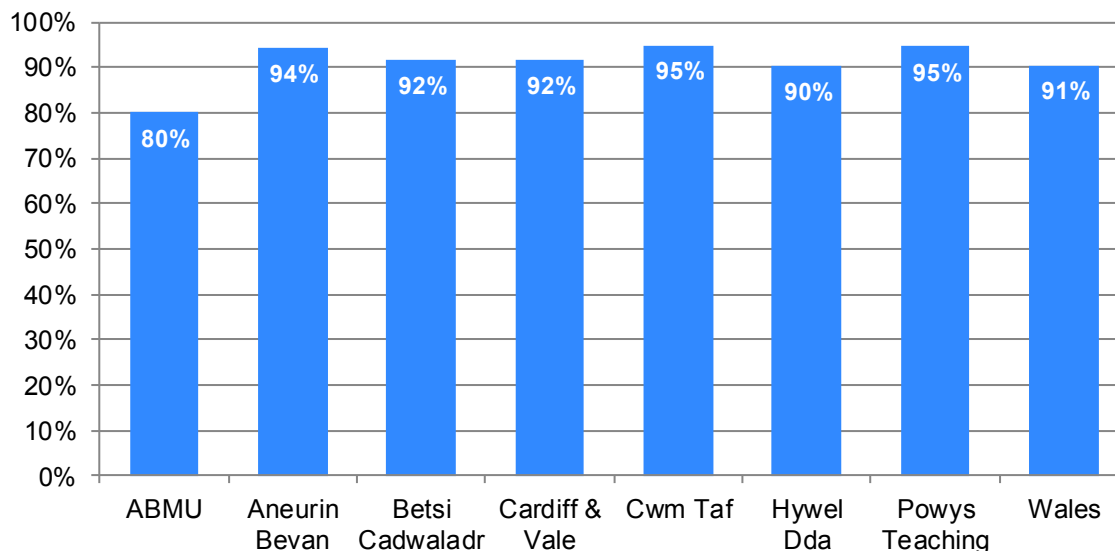


Chart 5b: Physical examination at 6-8 weeks

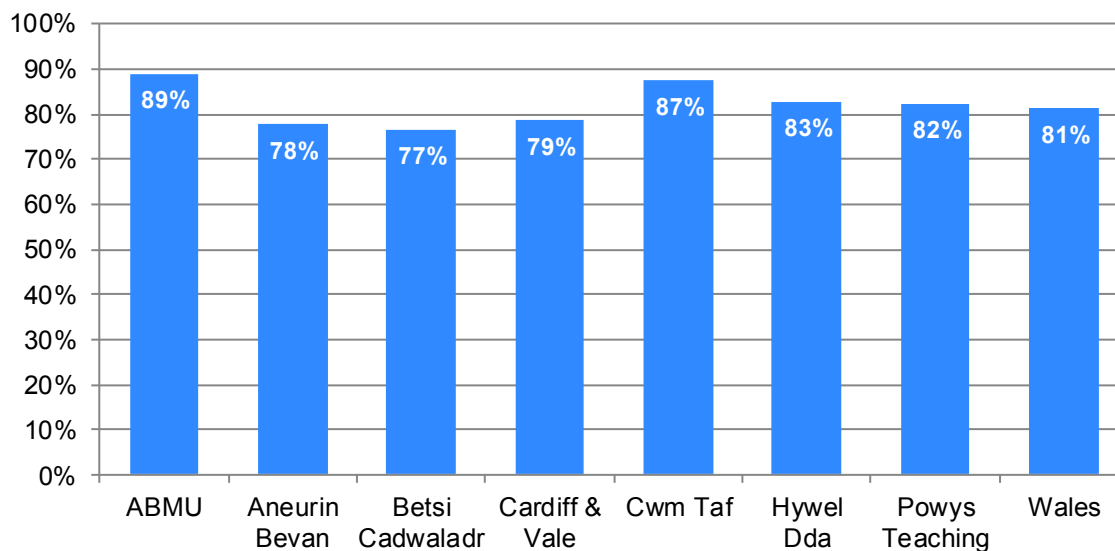


Chart 5c: Weight and measurement at 8 weeks

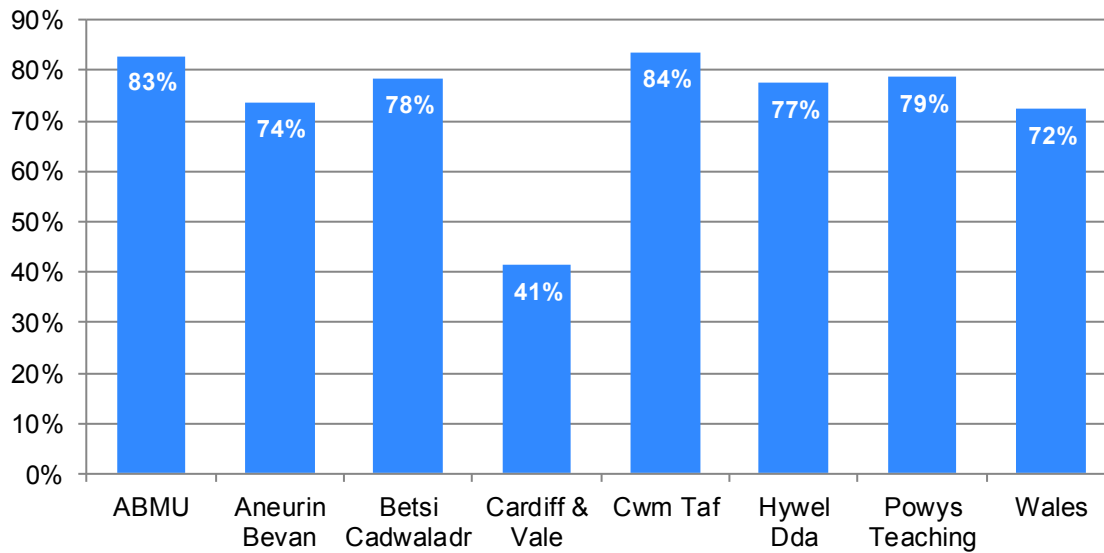


Chart 5d: Weight and measurement at 12 weeks

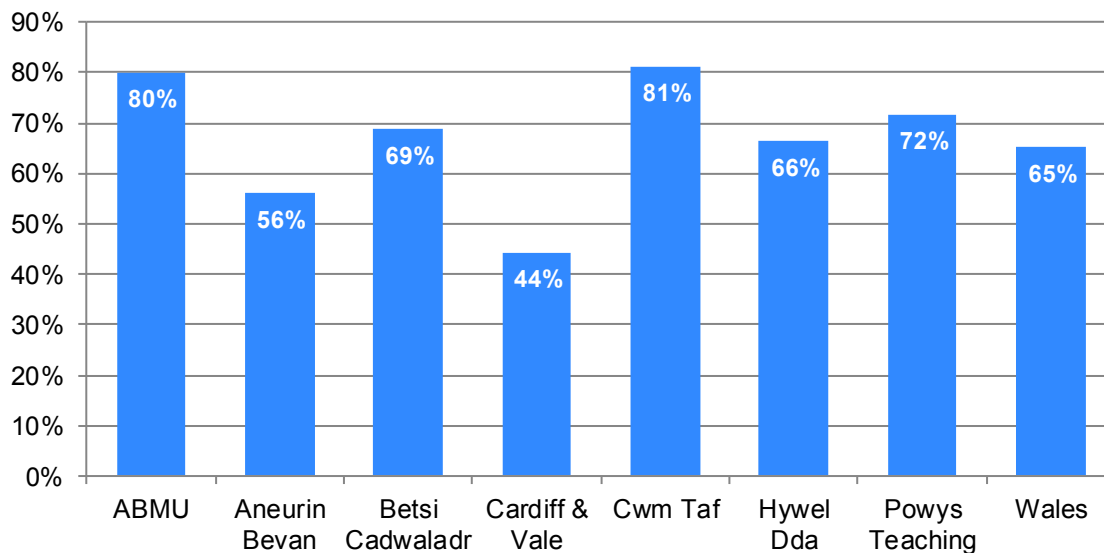


Chart 5e: Weight and measurement at 16 weeks

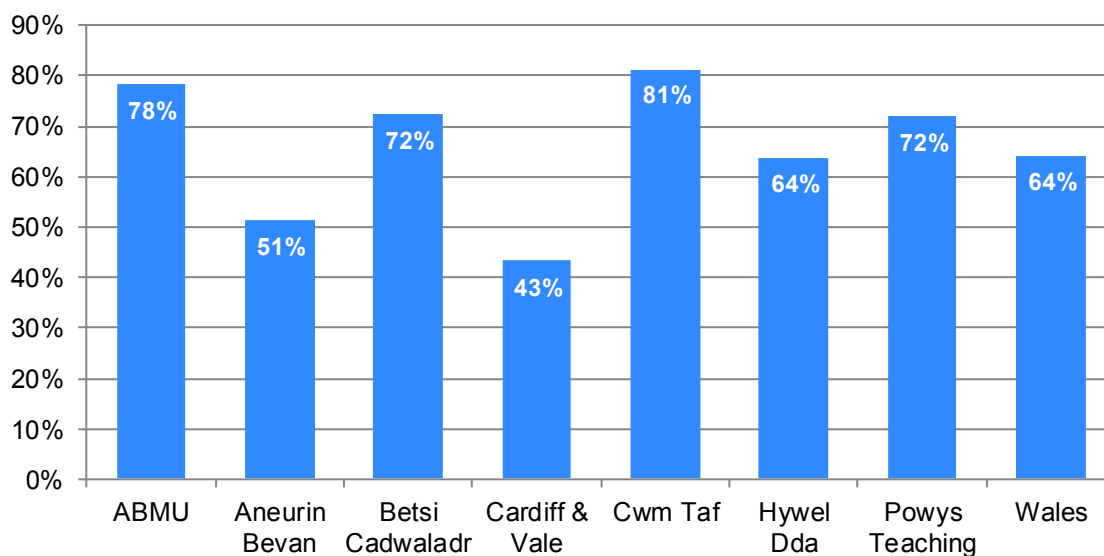


Chart 5f: Contact at 6 months

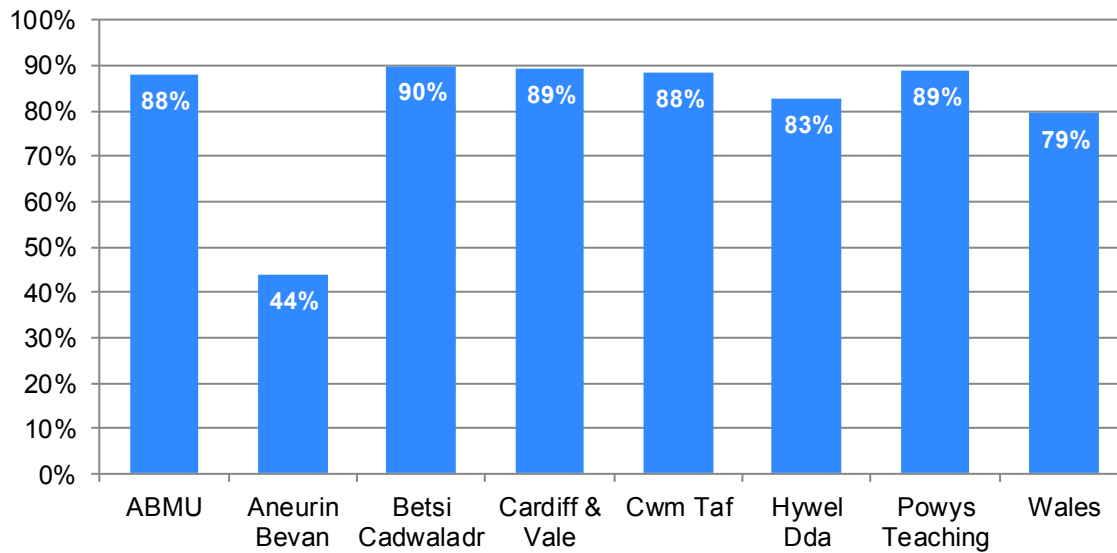


Chart 5g: Health Visitor contact at 15 months

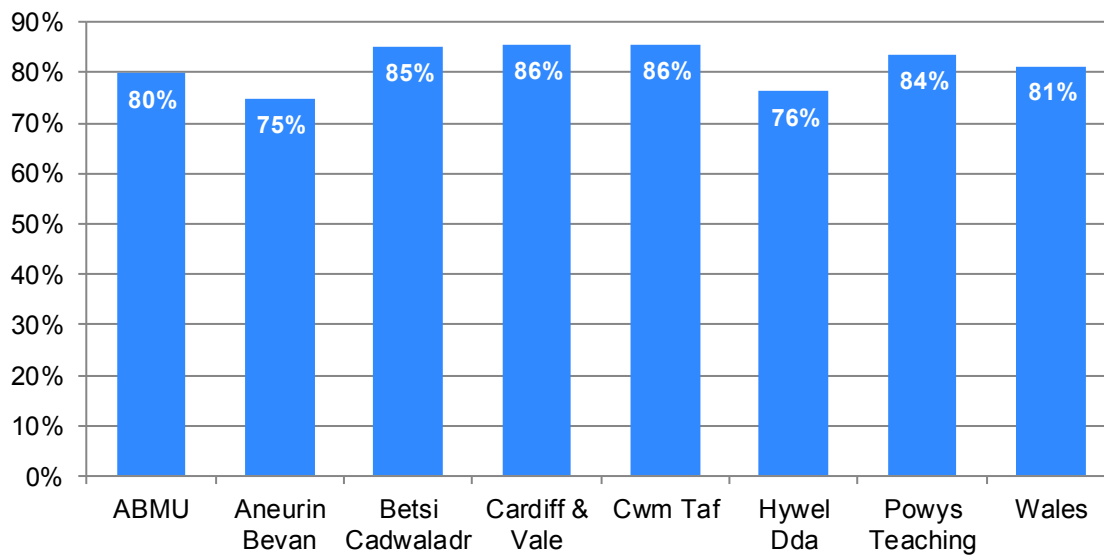


Chart 5h: Health visitor contact at 27 months

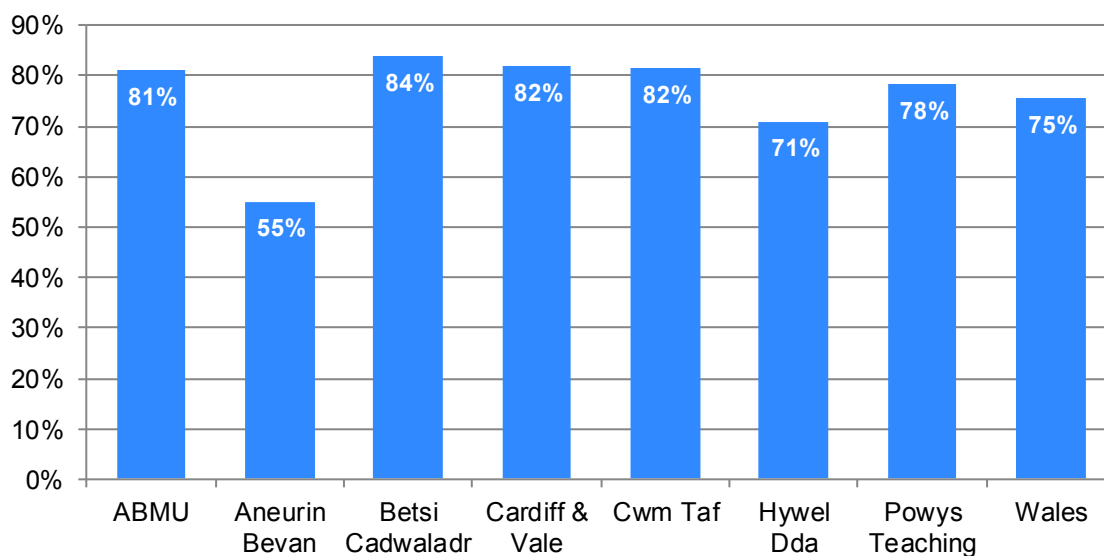
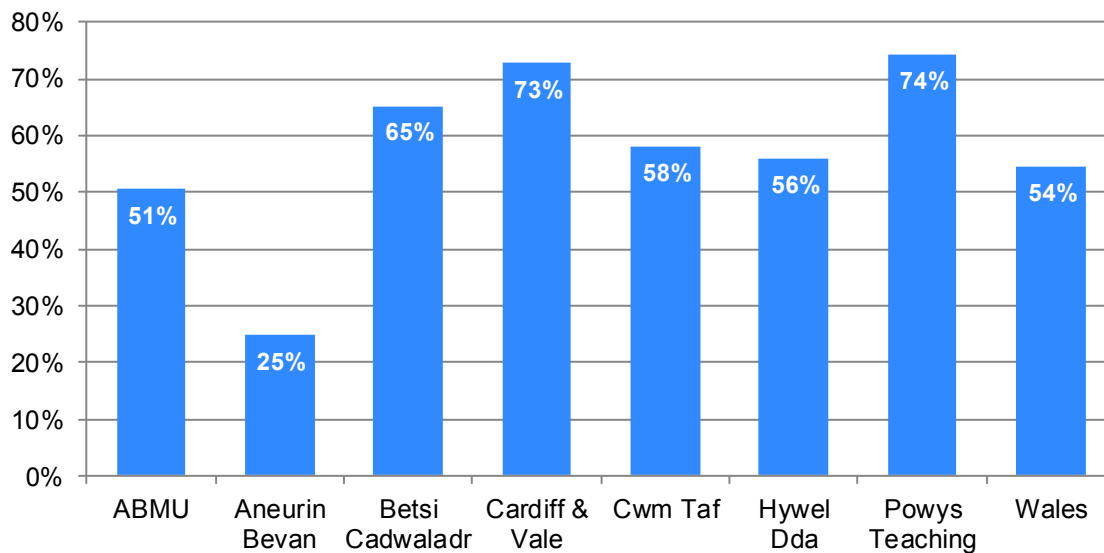


Chart 5i: Contact at 3.5 years (pre-school)



Note

There are various reasons why the percentage of eligible children receiving contact at each contact point differs between health board areas.

For example, in Aneurin Bevan, resource shortages have meant that the 6 month contacts has not been made available to all eligible children; and in Cardiff and Vale resource issues and data entry problems have resulted in the health board being unable to offer some contacts to children at 8, 12 and 16 weeks.

All health boards continue to work internally and with Welsh Government to improve compliance with the programme and improved data management.

Annex 2: Percentage of eligible children receiving contacts, by local authority of residence, 2018

	10-14 <u>days</u>	6-8 <u>weeks</u>	8 <u>weeks</u>	12 <u>weeks</u>	16 <u>weeks</u>	6 <u>months</u>	15 <u>months</u>	27 <u>months</u>	3.5 <u>years</u>	Total <u>contacts</u>
Abertawe Bro Morgannwg										
Bridgend	93%	92%	90%	85%	82%	82%	68%	72%	40%	71%
Neath Port Talbot	73%	91%	84%	82%	81%	93%	87%	86%	42%	73%
Swansea	77%	86%	78%	75%	74%	89%	83%	83%	63%	71%
Aneurin Bevan										
Blaenau Gwent	94%	78%	73%	62%	57%	58%	73%	54%	30%	59%
Caerphilly	95%	79%	65%	42%	37%	27%	59%	40%	20%	48%
Monmouthshire	93%	85%	82%	61%	58%	44%	85%	64%	22%	61%
Newport	94%	72%	78%	64%	58%	60%	79%	72%	25%	61%
Torfaen	95%	80%	76%	62%	58%	37%	89%	45%	35%	59%
Betsi Cadwaladr										
Conwy	95%	79%	77%	70%	74%	93%	89%	85%	73%	73%
Denbighshire	90%	61%	70%	67%	70%	89%	81%	78%	54%	65%
Flintshire	93%	73%	77%	67%	67%	86%	80%	80%	62%	69%
Gwynedd	96%	85%	86%	67%	67%	93%	91%	89%	69%	75%
Isle of Anglesey	96%	87%	88%	64%	84%	95%	94%	91%	66%	78%
Wrexham	85%	77%	77%	75%	76%	88%	83%	83%	69%	71%
Cardiff and Vale										
Cardiff	91%	77%	41%	44%	42%	89%	84%	80%	73%	63%
The Vale of Glamorgan	94%	85%	45%	47%	49%	92%	90%	89%	73%	67%
Cwm Taf										
Merthyr Tydfil	94%	89%	85%	81%	82%	84%	81%	73%	27%	70%
Rhondda Cynon Taf	95%	87%	82%	81%	81%	89%	87%	83%	67%	75%
Hywel Dda										
Carmarthenshire	86%	77%	73%	69%	66%	82%	77%	75%	53%	66%
Ceredigion	95%	91%	87%	82%	74%	79%	74%	70%	76%	72%
Pembrokeshire	95%	89%	81%	55%	55%	86%	77%	66%	50%	65%
Powys										
Powys	95%	83%	79%	72%	73%	89%	84%	79%	74%	73%

Annex 3: Percentage of children receiving all of their contacts throughout the programme, by contact point and local health board

Note: The same child may be counted in multiple health boards if they move home. For example, if a child lived in Betsi Cadwaladr for contacts 10-14 days to 6 months, then moved to Hywel Dda between their 6 month and 15 month contact, they would be counted in Betsi Cadwaladr in the columns '10-14 days' up to '6 months'; and in Hywel Dda from the 15 month column onwards.

Betsi Cadwaladr University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	86.6%								
6 weeks	68.2%	77.6%							
8 weeks	52.8%	58.0%	73.6%						
12 weeks	38.5%	42.0%	52.3%	66.5%					
16 weeks	29.8%	32.3%	39.8%	48.9%	67.8%				
6 months	27.8%	30.4%	37.1%	45.5%	63.0%	90.3%			
15 months	22.9%	25.3%	30.4%	39.0%	54.0%	78.0%	79.3%		
27 months	-	-	-	-	36.8%	62.8%	63.6%	82.6%	
3.5 years	-	-	-	-	-	-	-	56.4%	52.9%

Hywel Dda University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	80.1%								
6 weeks	69.0%	84.7%							
8 weeks	51.8%	59.9%	67.7%						
12 weeks	36.2%	41.8%	46.2%	61.5%					
16 weeks	26.9%	31.0%	33.8%	43.5%	59.6%				
6 months	24.4%	28.2%	30.4%	39.2%	53.3%	84.2%			
15 months	14.5%	20.1%	21.7%	31.0%	43.8%	71.9%	77.3%		
27 months	-	-	-	-	31.1%	55.5%	60.6%	70.3%	
3.5 years	-	-	-	-	-	-	-	38.6%	57.8%

Abertawe Bro Morgannwg University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	74.6%								
6 weeks	66.6%	87.4%							
8 weeks	56.5%	72.6%	80.3%						
12 weeks	49.0%	62.7%	68.4%	79.0%					
16 weeks	43.4%	55.3%	59.8%	67.9%	78.3%				
6 months	38.8%	50.1%	54.2%	61.3%	70.1%	86.5%			
15 months	35.4%	40.5%	44.1%	51.1%	58.7%	72.8%	80.5%		
27 months	-	-	-	-	41.9%	60.4%	68.6%	74.7%	
3.5 years	-	-	-	-	-	-	-	35.6%	50.2%

Cwm Taf University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	93.8%								
6 weeks	82.8%	87.9%							
8 weeks	69.1%	72.7%	80.4%						
12 weeks	58.3%	61.7%	67.8%	81.1%					
16 weeks	49.4%	52.5%	57.6%	68.1%	79.9%				
6 months	44.7%	47.2%	51.7%	61.3%	71.2%	87.6%			
15 months	40.5%	42.9%	45.3%	54.6%	62.5%	76.7%	82.3%		
27 months	-	-	-	-	45.4%	64.4%	68.3%	74.8%	
3.5 years	-	-	-	-	-	-	-	39.6%	59.0%

Aneurin Bevan University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	91.4%								
6 weeks	72.6%	78.2%							
8 weeks	46.5%	47.8%	59.1%						
12 weeks	28.4%	28.8%	34.8%	50.8%					
16 weeks	18.7%	19.0%	22.7%	31.3%	45.9%				
6 months	10.0%	10.3%	12.4%	17.1%	23.4%	40.8%			
15 months	6.6%	6.4%	7.4%	12.8%	18.3%	33.2%	80.5%		
27 months	-	-	-	-	6.1%	19.7%	51.2%	61.8%	
3.5 years	-	-	-	-	-	-	-	8.7%	23.8%

Cardiff and Vale University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	80.4%								
6 weeks	63.0%	78.2%							
8 weeks	12.5%	14.0%	17.0%						
12 weeks	5.9%	6.7%	7.8%	24.0%					
16 weeks	3.2%	3.6%	4.1%	11.4%	26.3%				
6 months	2.3%	2.8%	3.1%	9.6%	22.5%	87.3%			
15 months	0.6%	0.8%	0.9%	4.5%	13.8%	75.7%	84.7%		
27 months	-	-	-	-	13.4%	63.9%	72.4%	78.3%	
3.5 years	-	-	-	-	-	-	-	56.4%	68.7%

Powys Teaching

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	68.9%								
6 weeks	56.4%	81.0%							
8 weeks	44.9%	55.0%	64.3%						
12 weeks	33.7%	39.2%	44.7%	61.9%					
16 weeks	26.0%	29.3%	32.9%	44.5%	61.9%				
6 months	22.9%	26.3%	29.4%	39.2%	54.6%	87.6%			
15 months	8.3%	15.1%	16.9%	27.6%	42.0%	76.3%	81.8%		
27 months	-	-	-	-	39.7%	61.5%	65.1%	72.4%	
3.5 years	-	-	-	-	-	-	-	46.3%	68.2%

Annex 4: Percentage of eligible children receiving no contacts throughout the programme, by contact point and local health board

Note: The same child may be counted in multiple health boards if they move home. For example, if a child lived in Betsi Cadwaladr for contacts 10-14 days to 6 months, then moved to Hywel Dda between their 6 month and 15 month contact, they would be counted in Betsi Cadwaladr in the columns '10-14 days' up to '6 months'; and in Hywel Dda from the 15 month column onwards.

Betsi Cadwaladr University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	13.4%								
6 weeks	4.0%	22.4%							
8 weeks	2.1%	6.2%	26.4%						
12 weeks	1.5%	3.6%	11.7%	33.5%					
16 weeks	1.1%	2.3%	6.5%	14.0%	32.2%				
6 months	0.7%	1.1%	2.2%	3.6%	5.5%	9.7%			
15 months	0.5%	0.7%	1.2%	1.6%	2.3%	3.3%	20.7%		
27 months	-	-	-	-	0.7%	1.1%	5.3%	17.4%	
3.5 years	-	-	-	-	-	-	-	8.8%	47.1%

Hywel Dda University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	19.9%								
6 weeks	4.2%	15.3%							
8 weeks	2.4%	6.6%	32.3%						
12 weeks	1.8%	4.3%	16.3%	38.5%					
16 weeks	1.4%	3.4%	11.3%	21.9%	40.4%				
6 months	0.9%	1.7%	4.0%	6.3%	9.0%	15.8%			
15 months	0.7%	1.1%	3.0%	4.1%	4.9%	6.7%	22.7%		
27 months	-	-	-	-	2.6%	4.4%	9.9%	29.7%	
3.5 years	-	-	-	-	-	-	-	20.1%	42.2%

Abertawe Bro Morgannwg University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	25.4%								
6 weeks	3.7%	12.6%							
8 weeks	1.6%	4.3%	19.7%						
12 weeks	1.2%	2.6%	8.7%	21.0%					
16 weeks	0.9%	2.0%	6.0%	10.2%	21.7%				
6 months	0.3%	0.7%	2.0%	2.8%	4.8%	13.5%			
15 months	0.1%	0.3%	0.6%	0.9%	1.8%	5.2%	19.5%		
27 months	-	-	-	-	1.7%	2.9%	6.2%	25.3%	
3.5 years	-	-	-	-	-	-	-	18.2%	49.8%

Cwm Taf University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	6.2%								
6 weeks	1.3%	12.1%							
8 weeks	0.7%	3.8%	19.6%						
12 weeks	0.5%	1.5%	5.8%	18.9%					
16 weeks	0.3%	0.9%	3.0%	6.5%	20.1%				
6 months	0.1%	0.3%	0.8%	1.6%	3.5%	12.4%			
15 months	0.1%	0.2%	0.4%	0.6%	1.3%	4.0%	17.7%		
27 months	-	-	-	-	0.5%	2.3%	5.8%	25.2%	
3.5 years	-	-	-	-	-	-	-	20.5%	41.0%

Aneurin Bevan University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	8.6%								
6 weeks	2.4%	21.8%							
8 weeks	1.7%	10.0%	40.9%						
12 weeks	1.4%	6.5%	24.3%	49.2%					
16 weeks	1.2%	5.1%	18.5%	33.9%	54.1%				
6 months	0.9%	3.4%	13.8%	24.7%	36.5%	59.2%			
15 months	0.4%	1.3%	5.3%	6.8%	9.1%	12.8%	19.5%		
27 months	-	-	-	-	5.0%	4.8%	6.8%	38.2%	
3.5 years	-	-	-	-	-	-	-	26.2%	76.2%

Cardiff and Vale University

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	19.6%								
6 weeks	4.9%	21.8%							
8 weeks	4.2%	18.3%	83.0%						
12 weeks	3.8%	15.8%	67.3%	76.0%					
16 weeks	3.3%	13.8%	55.6%	61.6%	73.7%				
6 months	0.6%	2.4%	7.7%	8.3%	9.9%	12.7%			
15 months	0.2%	0.8%	3.0%	3.1%	3.4%	3.9%	15.3%		
27 months	-	-	-	-	2.8%	2.1%	5.0%	21.7%	
3.5 years	-	-	-	-	-	-	-	10.2%	31.3%

Powys Teaching

%	10-14 days	6 weeks	8 weeks	12 weeks	16 weeks	6 months	15 months	27 months	3.5 years
10-14 days	31.1%								
6 weeks	7.0%	19.0%							
8 weeks	4.6%	8.6%	35.7%						
12 weeks	3.3%	5.5%	18.9%	38.1%					
16 weeks	2.4%	4.0%	12.1%	21.0%	38.1%				
6 months	0.6%	1.3%	2.2%	3.5%	5.5%	12.4%			
15 months	0.6%	0.9%	1.3%	1.6%	2.4%	3.9%	18.2%		
27 months	-	-	-	-	1.6%	2.3%	5.4%	27.6%	
3.5 years	-	-	-	-	-	-	-	10.4%	31.8%

Key Quality Information

The Healthy Child Wales Programme

Further information on the [Healthy Child Wales Programme](#) (HCWP) can be found on the Welsh Government website and the [NHS Wales Data Dictionary](#).

Source

Maintained by NHS Wales Informatics Service (NWIS), the [National Community Child Health Database \(NCCHD\)](#) is Wales' national community child health database and 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.

Coverage

Statistics in the release relate to contacts by health professionals with children resident in Wales.

Bridgend local authority moving health board

Health service provision for residents of Bridgend local authority has moved from Abertawe Bro Morgannwg to Cwm Taf on April 1st 2019. This [joint statement](#) provides further detail. The health board names were confirmed in [this statement](#) with Cwm Taf University Health Board becoming Cwm Taf Morgannwg University Health Board and Abertawe Bro Morgannwg University Health Board becoming Swansea Bay University Health Board.

As a result, the quarterly data for Jan-Mar 2019 (provisionally due for publication on StatsWales in August 2019) will be the last quarter in the time series for both Cwm Taf and Abertawe Bro Morgannwg. The subsequent quarterly data for Apr-Jun 2019 (provisionally due for publication on StatsWales in November 2019) will include data for the two new health boards, Cwm Taf Morgannwg and Swansea Bay.

The next annual statistical release, provisionally scheduled for June 2018 may see data published for both the old and new health boards. Data for Cwm Taf and Abertawe Bro Morgannwg will only refer to the first quarter of 2019 (Jan-Mar) while data for Cwm Taf Morgannwg and Swansea Bay will only refer to the last 3 quarters of 2019 (Apr-Jun, Jul-Sep, Oct-Dec).

Time series for all five other health boards and at the Wales level will remain unaffected.

Related statistics

[Births: Data from the National Community Child Health Database](#) statistics on where and when babies were born, their birth weight, whether they were preterm and about their mothers - their age and whether the babies were breastfed.

[Flying Start](#) provides key statistics from the Flying Start programme for each of the 22 local authorities in Wales.

[Maternity statistics](#) provides statistics on maternity services in Wales including antenatal care, care at delivery and outcomes for babies.

Data access, confidentiality and disclosure control

The extract supplied to Welsh Government by NWIS has been anonymised so that it contains no personal identifiable information.

Statistics take into account our disclosure control guidance and follow ONS confidentiality guidelines for Health statistics available from: [ONS best-practice guidelines](#).

Revisions

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

What are the potential uses of these statistics?

These statistics will be used in a variety of ways. Some examples of these are:

- advice to Ministers
- to inform debate in the National Assembly for Wales and beyond
- to make publicly available data on child health statistics in Wales
- monitoring service delivery
- policy development
- providing advice on birth choices.

Users of this data

The main users of this data are likely to be:

- ministers and the Members Research Service in the National Assembly for Wales
- local health boards
- the research community
- students, academics and universities
- those concerned with child health, Individual citizens and private hospitals
- NHS organisations
- voluntary birth organisations.

Relevance

The statistics provide an opportunity to monitor the implementation of the HCWP and provide an insight into the profile of the early years in Wales.

Users of the statistics are encouraged to contact Welsh Government to let us know how they use the data.

Key users have been contacted prior to release of this data and will continue to be liaised with as the statistical release develops.

The release will be adapted to respond to policy changes ensuring our statistics remain relevant.

Accuracy

HCWP data is a newly established part of NCCHD and data quality is mixed. Welsh Government and NWIS are working with health boards to improve completeness and quality. Only a selection of the available data items has been included in this statistical release but as the data quality improves its scope may be expanded.

Completeness

Data completeness varies across data items, but is sufficiently high to produce official statistics.

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

Timeliness and punctuality

The NCCHD is refreshed from data derived from local child health systems every quarter. The next statistical release is planned for June 2020, following the April NCCHD refresh and will cover the whole calendar year for 2019.

To supplement the annual statistical release, quarterly data are published on [StatsWales](#).

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.

Open data tables are available via [StatsWales](#) every quarter.

We aim to use plain English in our outputs and all outputs adhere to the Welsh Government's [accessibility policy](#). 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 source data provided, this will be shown in the statistical outputs. Where advance warning is known of future changes these will be pre-announced in accordance with Welsh Government arrangements.

Data collected from NCCHD adheres to national standards and are coherent within and across health organisations in Wales.

England has a [Healthy Child Programme](#) which is similar scheme to Healthy Child Wales.

Scotland has a [Child Health Programme](#) which differs somewhat from the Healthy Child Wales Programme.

Northern Ireland statistics on public health are available from the [Northern Ireland Public Health Agency](#) and demography statistics from the [Northern Ireland Statistics & Research Agency \(NISRA\)](#).

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.

Information on the indicators, along with narratives for each of the well-being goals and associated technical information is available in the [Well-being of Wales report](#).

As a national indicator under the Act they must be referred to in the analyses of local well-being produced by public services boards when they are analysing the state of economic, social, environmental and cultural well-being in their areas.

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/healthy-child-wales-programme>

Next update

June 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

Open Government Licence

All content is available under the [Open Government Licence v3.0](#), except where otherwise stated.

