



Proposed Cumulative Impact Policy for
Off-Licenses in Doncaster

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1. Introduction

This report outlines the local data that could be used to support a Cumulative Impact Policy (CIP) for off-licenses in Doncaster. Doncaster is one of 20 pilot areas under the Local Alcohol Action Area; this forms part of a project assessing the feasibility of health as a licensing objective within the Licensing Act 2003. It has been produced in collaboration with the Home Office and Public Health England.

The proposed CIP is based in areas outside the Town Centre and would, where appropriate, seek to limit the density of off-licenses in residential communities. The reasoning for this is threefold; i) the national Alcohol Strategy 2012 identifies home drinking as a key driver for the increase in alcohol related harm, ii) Academic research shows that off-license density is associated with rates of alcohol harm (see section 3 below), iii) Doncaster already has a CIP for the Town Centre to manage on-licenses.

2. Objectives of this report

- To identify health and social care data relevant to a CIP for licensed premises. Within this, to acknowledge the validity, strengths and weaknesses of the sources available.
- To map the density of off-licenses in Doncaster against the indicators and indices of deprivation.
- To define and propose a geographic area that would benefit from a CIP.

3. Research linking outlet density to alcohol harm

There is an evidential link between the density of premises and alcohol harm;

Theall, K.P. et al (2009). The neighbourhood alcohol environment and alcohol-related morbidity. *Alcohol and Alcoholism*, **44**(5), pp.491-499.

Alcohol outlets had a significant impact on health and social outcomes at a neighborhood level, irrespective of individual consumption. There was a significant association between off-licence density and rates of liver disease, sexually transmitted infections and violence.

Livingston, M (2011). A longitudinal analysis of alcohol outlet density and domestic violence. *Addiction*, **106**(5), pp.919-925.

Alcohol outlets had a significant impact on rates of domestic violence; the affect was larger for off-licenses compared to on-licences. A 10% increase in the number of off-licenses increased hospital admissions by 1.9% (on-licenses = 0.5%).

Osterberg, E (2009). *Availability of Alcohol*, a chapter within *Alcohol in the European Union; Consumption, Harm and Policy Approaches*. WHO Regional Office for Europe, pp83-88.

Consistent evidence that limiting availability (regulating the density of outlets and times of sale) leads to a reduction in alcohol harm.

Alcohol Concern (2011). *One on every corner – The relationship between off-license density and alcohol harms in young people*. Report by the Alcohol Concern Youth Policy Project.

Moderate but significant relationship between off-license density and underage alcohol specific admissions; 10% of admissions were directly attributable to off-license density.

4. Priority Communities

There are 88 communities in Doncaster. These have been prioritised based on the levels of alcohol harm, and associated indicators, experienced by their populations.

These communities were defined in 2004 using ONS Output Areas. NHS Doncaster and Doncaster Council worked in unison, developing these to reflect natural boundaries and to create homogenous socio-economic geographies.

The prioritisation criteria is based on those communities that are significantly ‘worse’ than the Doncaster average using 95% confidence intervals (i.e. accounting for natural variation). The following indicators are argued to be directly or indirectly influenced by alcohol misuse. Numbers in structured drug and alcohol treatment and alcohol related hospital admissions are the primary criteria and the remaining indicators provide extra context;

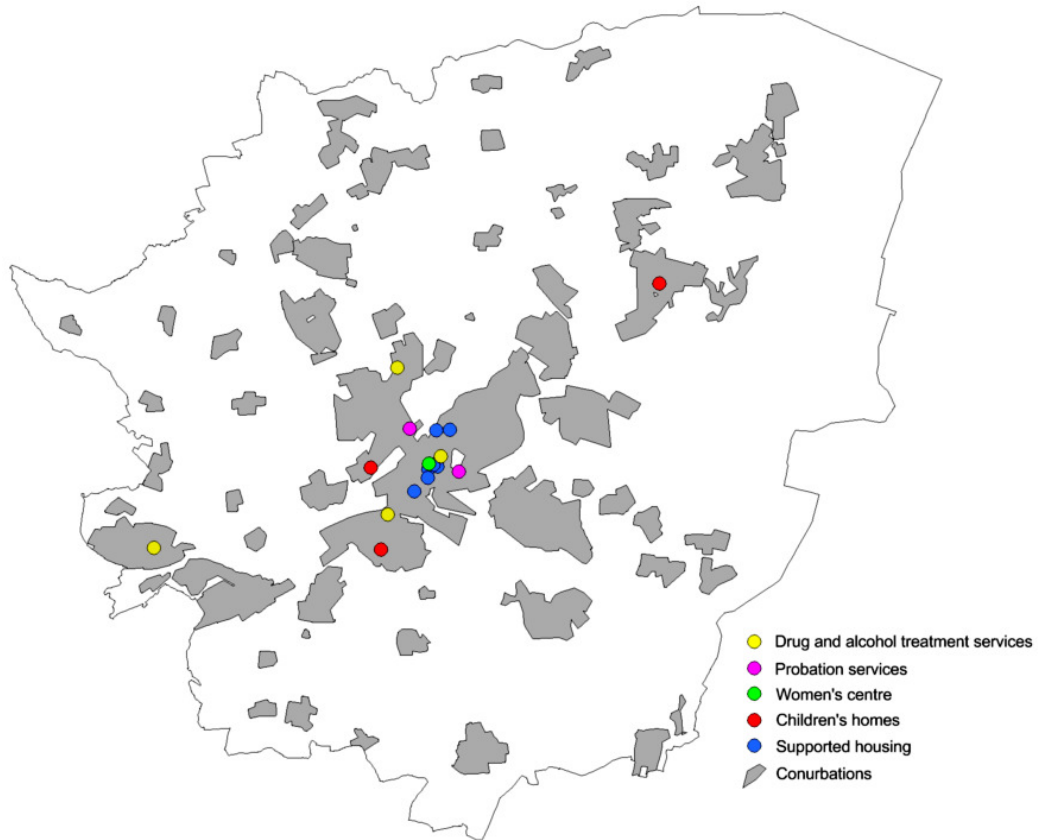
Numbers in structured drug and alcohol treatment	First time entrants to the Youth Justice Service
Alcohol related hospital admissions	Child social care referrals
A&E attendance under 18 years	NEET young people
Emergency admissions under 18 years	Teenage conceptions
Hospital admissions for self-harm	Unemployment
Antisocial behaviour	

9 communities have a significantly high number of residents in drug / alcohol treatment and significantly high rates of alcohol related hospital admissions and significantly worse outcomes for a number of the other indicators. Detailed profiles are available in Appendix 1.

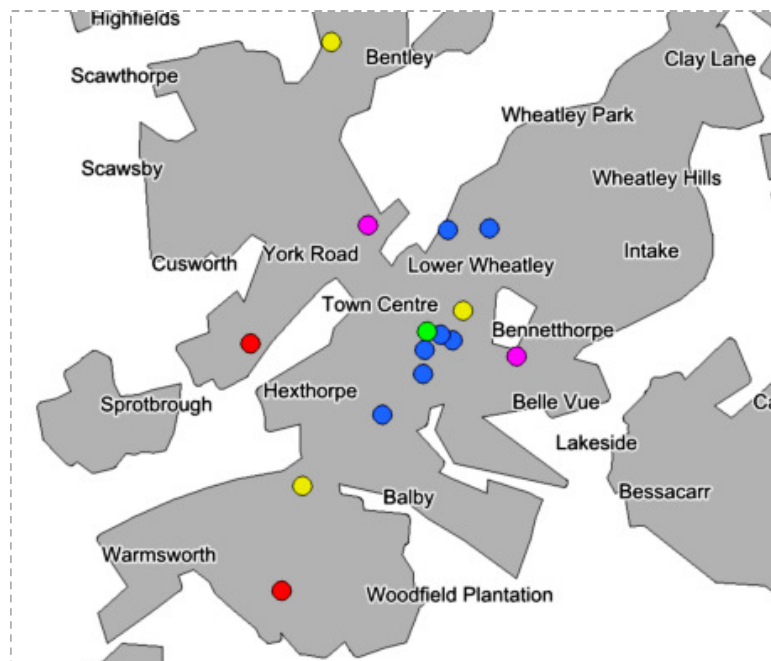


5. Key locations for vulnerable people

The maps below pinpoint locations frequented by people who may be vulnerable to alcohol misuse, either through their own misuse or that of others;



Urban centre of Doncaster

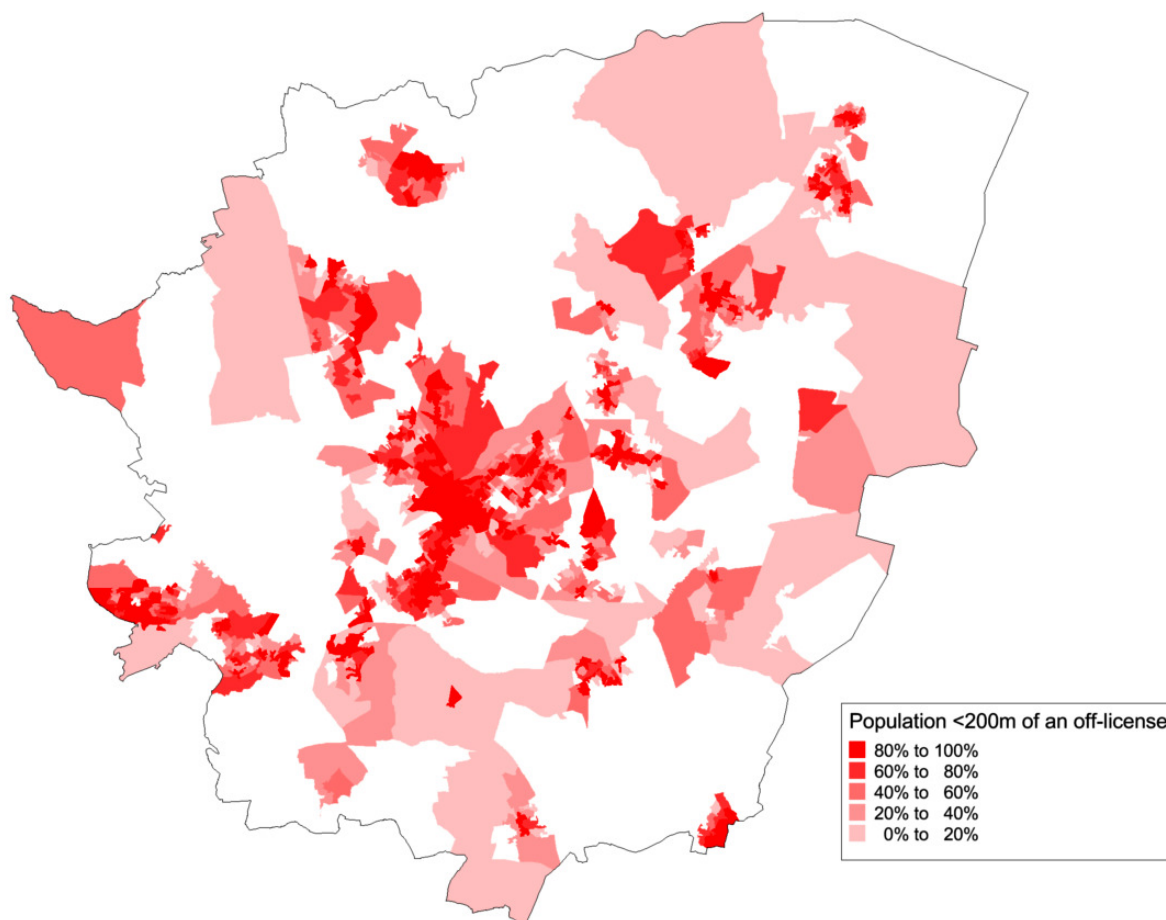


6. Off-license density

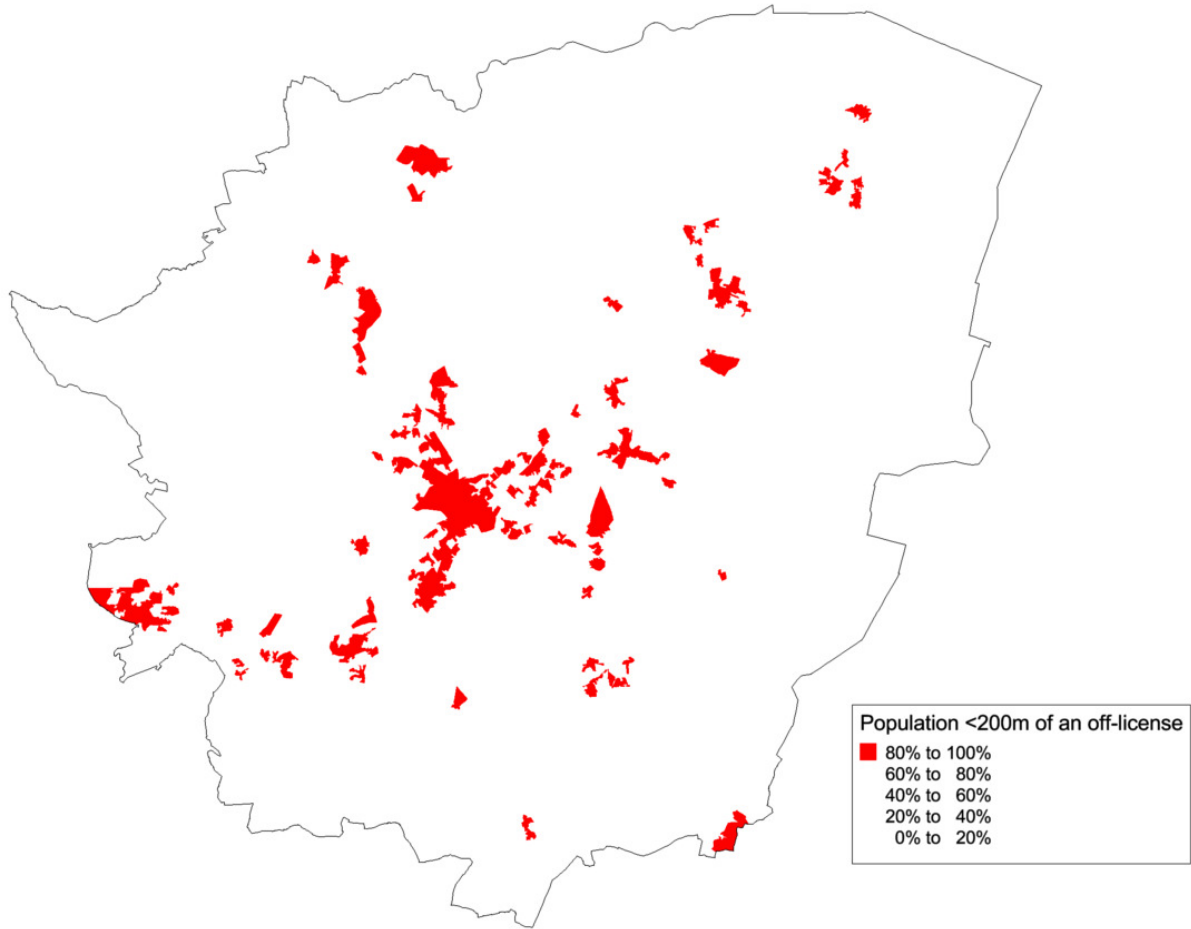
The following maps detail the % of residents that live within 200m of an off-license by ONS Output Area.

This has been calculated by creating a 200m buffer around the off-licenses. All Doncaster postcodes, which also contain the adult population for each postcode, have then been superimposed over the 200m buffer. It is then possible to identify the postcodes and populations that sit inside and outside the 200m boundary. The postcodes have then been aggregate into Output Areas to calculate the proportion of residents within 200m as a % of all residents.

This first map presents all Output Areas on a gradient from 0% of residents <200m up to 100% of residents <200m;

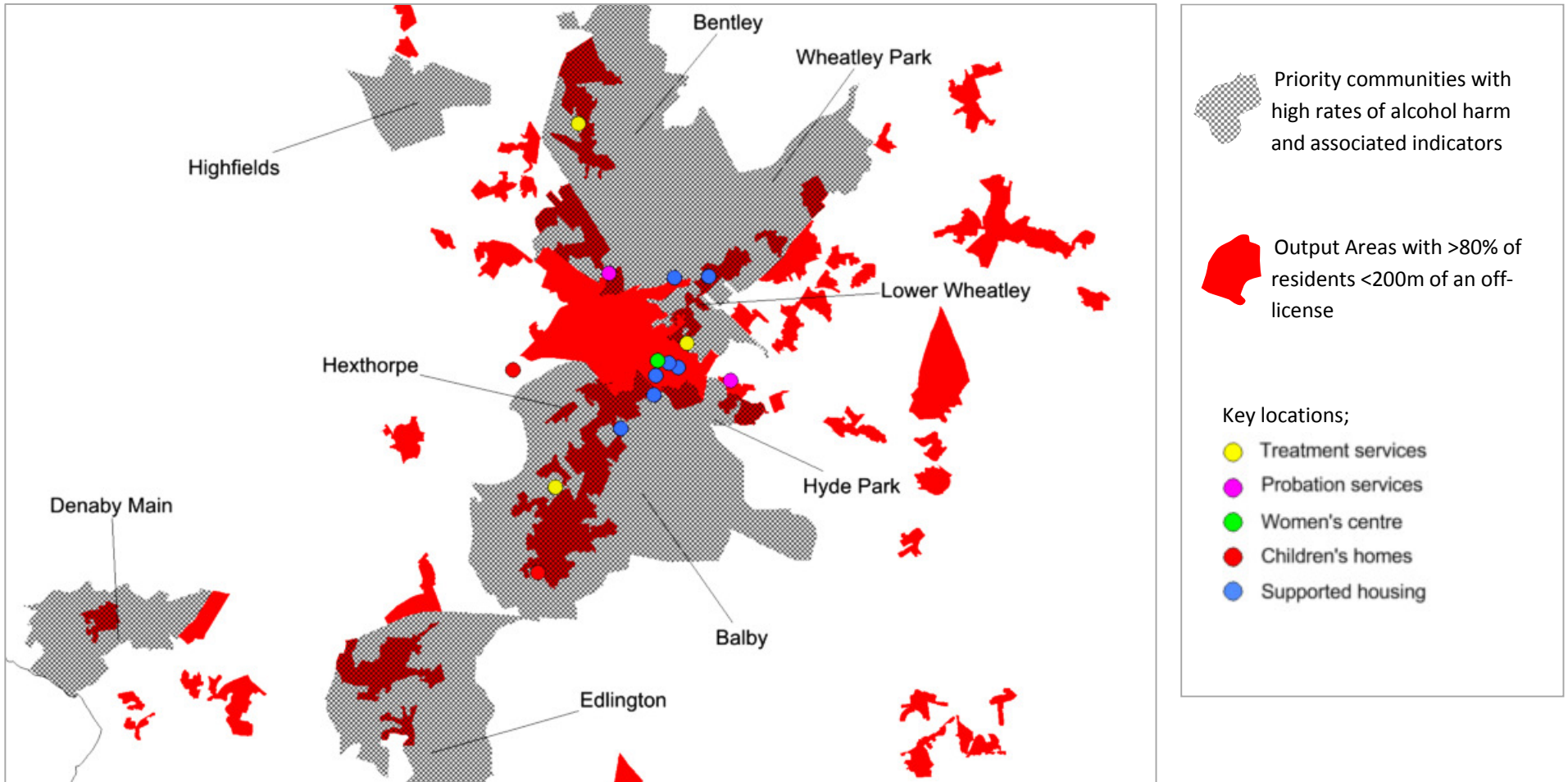


This second map presents only those Output Areas where >80% of the population live within 200m of an off-license. This isolates those Output Areas with the highest outlet density and the greatest availability of alcohol;

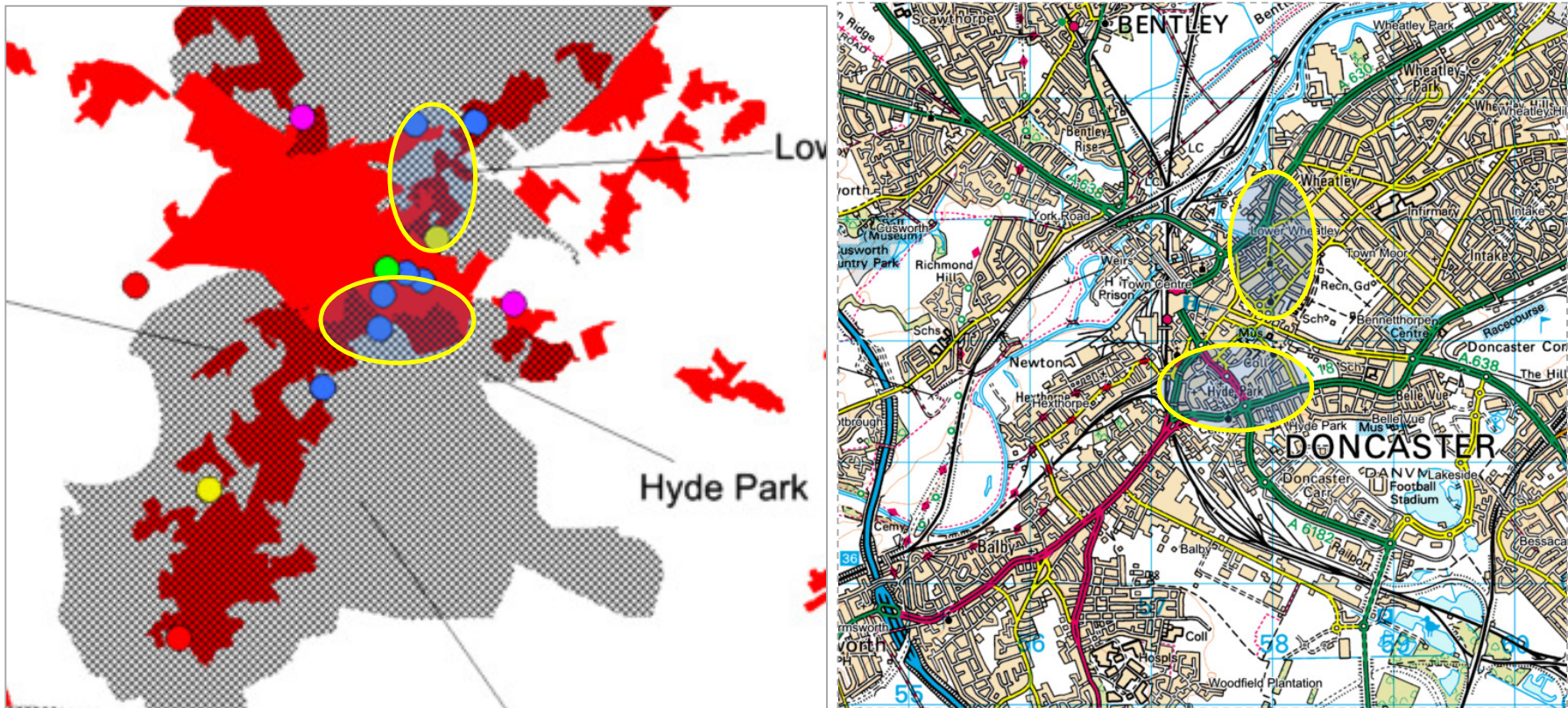


7. Overlay of priority communities, vulnerable locations and off-license density

The map below overlays each of the datasets in the previous sections; i) the 9 priority communities, ii) the key vulnerable locations and iii) the Output Areas where >80% of the population live <200m of an off-license.



The areas highlighted in yellow below are suggested as possible candidates for a CIP based on the health data, triangulating the different sources of information. However these are subject to the strengths and limitations identified in section 8.



8. Strengths and limitations of the data and process

Strengths

- The Licensing Authority believes that Community level data is at a low enough scale to evidence need for a CIP.
- Numerous datasets are available in the Community Profiles, which are already created as part of the Joint Strategic Needs Assessment. These can be easily collated and applied to the Licensing process (see profiles in Appendix 1). These community profiles are refreshed every 2-3 years meaning the datasets remain up to date.
- The Community Profiles contain a wide breadth of indicators with data covering direct alcohol harm (numbers in treatment, hospital admissions) but also the wider social impacts of alcohol (child social care referrals, teenage conceptions).
- Over half the indicators focus on children and young people. Issues affecting children and young people are particularly emotive and it may be easier to pass a CIP framed on these issues, negating the argument of personal choice and responsibility levelled at older drinkers. As discussed below, the emphasis on young people also has limitations.
- The process triangulates multiple sources with a holistic view based on alcohol harm, social impacts, vulnerable locations and off-license density. Coupled with a stakeholder consultation, this would present a strong evidence base to present to a Licensing Committee.
- The process is supported by a strong ethos of partnership working. Doncaster has a Data Observatory, giving a platform for analytical teams in different organisations to collaborate on specific projects. Data sharing agreements are in place and the Observatory can draw on a broad pool of expertise across the NHS, Police and Local Authority. The Community Profiles were produced through this process.

Limitations

- The effectiveness of the existing Town Centre CIP is unknown. The CIP may encourage applicants to accept more restrictive conditions but this has not been evaluated, and only one application has been successfully rejected. The CIP may act to discouraged applicants altogether but there is no way of measuring this.
- Health data cannot be aggregated and presented at small geographic scales. Low counts need to be suppressed to protect identities and statistical methods require a volume of data to identify significant differences. Community level is as low as health data can be meaningfully analysed. Output Areas and postcodes are not feasible. This would be an issue responding to new applicants within the CIP, where evidence needs to be relevant to specific, individual locations.

- It can be argued that the indicators used to prioritise the communities are all influenced by alcohol but some are more clearly linked than others. For instance, the number of NEET young people will be dependent on a number of factors at an individual, family, community and societal level. The role of alcohol should not be over emphasised for the indicators.
- This process was dependent on data that was readily available from the community profiles. Those indicators that had a link with alcohol tended to focus on children and young people (e.g. hospital activity for people under 18, first time entrants to the youth justice system, child social care referrals). Ideally the indicators would have been more balanced across the life course describing need in working Age people and older people. Some of the indicators in this report could just be incorporated into the existing objectives, e.g. protecting children from harm, without the need to create a new health objective.
- A high number of areas, and significant populations, were covered by the areas that overlap alcohol harm and high outlet density. It is impractical to impose a CIP across all these areas – CIPs usually regulate discrete areas numbering a handful of streets. Those areas that contained or bordered vulnerable locations (supported housing et cetera) also bordered the Town Centre, which already has a high density of on and off-licensed premises. The criteria in this process (prioritising the communities and mapping the % of residents <200m) could be more strict to isolate smaller areas.
- Presumably a CIP in residential areas would be more susceptible to displacement. A Town Centre CIP based on the evening economy is more workable as premises benefit from being near to each other so need to operate in specific streets and require a specific type of premise. A small business, such as a corner shop, benefits from great flexibility and could operate just outside the cumulative impact zone.
- Key datasets are missing. At present Public Health receives data on A&E attendance for alcohol related injury which names licensed premises where appropriate. But the field naming licensed premises is not consistently and rarely states off-licenses, plus there is an assumption that the actions of the named premise contributed to the injury. The data is not at postcode level and thus could not be used in this mapping exercise. Similarly, ambulance data is not available but would provide a useful insight.
- There is a risk that a CIP would create a protected zone that reduces competition in an area. Incumbents may not need to try as hard, so perversely standards may drop.
- Policy governing Cumulative Impact contradicts directives from other Government Departments. For example the Department of Culture, Media and Sport are seek to deregulate activities (i.e. alcohol within the Deregulation Bill currently in its Third reading at the House of Lords) at the same time the Home Office tightens controls. This creates conflict within local areas.

Appendix 1 - Profiles for the priority communities**Balby**

Indicator	Balby		Doncaster		Best Score	Range Doncaster	● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	217	13.5 (11.8, 15.4)	1,569	6.6 (6.3, 6.9)	1.6		●	25.7
2. Alcohol related hospital admissions	3,321	6,286 (6,067, 6,511)	45,315	5,542 (5,490, 5,595)	2,252.9		●	23,099.3
3. A&E attendance under 18yrs	1,736	364.9 (351.2, 378.7)	24,442	375.1 (371.4, 378.8)	118.7		●	614.9
4. Emergency admissions under 18yrs	497	104.5 (95.9, 113.5)	6,628	101.7 (99.4, 104.1)	5.2		●	152.3
5. Hospital admissions for self-harm	165	252.6 (215.1, 294.6)	1,898	206.8 (197.6, 216.4)	67.0		●	716.5
6. Antisocial behaviour incidents	9,371	450.9 (441.8, 460.1)	107,456	355.3 (353.2, 357.5)	64.1		●	865.9
7. First time entrants to the Youth Justice System	100	13.1 (10.6, 15.9)	1,144	9.9 (9.4, 10.5)	3.5		●	19.8
8. Child social care referrals	515	108.2 (99.5, 117.4)	6,797	104.3 (102.0, 106.7)	15.0		●	173.2
9. NEET young people	51	67.1 (50.4, 87.3)	521	46.0 (42.2, 50.0)	11.1		●	151.4
10. Teenage conceptions	65	57.2 (44.5, 72.4)	684	40.9 (37.9, 44.0)	17.7		●	126.7
11. Unemployment	1,035	76.1 (71.7, 80.7)	8,795	45.4 (44.5, 46.3)	0.0		●	124.6

Bentley

Indicator	Bentley		Doncaster		Best Score	Range Doncaster	● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	100	11.9 (9.7, 14.5)	1,569	6.6 (6.3, 6.9)	1.6		●	25.7
2. Alcohol related hospital admissions	1,864	6,989 (6,651, 7,340)	45,315	5,542 (5,490, 5,595)	2,252.9		●	23,099.3
3. A&E attendance under 18yrs	904	353.2 (334.7, 372.1)	24,442	375.1 (371.4, 378.8)	118.7		●	614.9
4. Emergency admissions under 18yrs	273	106.7 (95.0, 119.3)	6,628	101.7 (99.4, 104.1)	5.2		●	152.3
5. Hospital admissions for self-harm	120	356.3 (294.4, 427.3)	1,898	206.8 (197.6, 216.4)	67.0		●	716.5
6. Antisocial behaviour incidents	5,145	468.2 (455.5, 481.2)	107,456	355.3 (353.2, 357.5)	64.1		●	865.9
7. First time entrants to the Youth Justice System	50	12.0 (8.9, 15.8)	1,144	9.9 (9.4, 10.5)	3.5		●	19.8
8. Child social care referrals	283	110.6 (98.7, 123.4)	6,797	104.3 (102.0, 106.7)	15.0		●	173.2
9. NEET young people	24	56.3 (36.4, 82.6)	521	46.0 (42.2, 50.0)	11.1		●	151.4
10. Teenage conceptions	55	85.5 (65.1, 109.8)	684	40.9 (37.9, 44.0)	17.7		●	126.7
11. Unemployment	445	62.8 (57.3, 68.7)	8,795	45.4 (44.5, 46.3)	0.0		●	124.6

Denaby Main

Indicator	Denaby Main		Doncaster		Best Score	Range Doncaster	<ul style="list-style-type: none"> ● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster 	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	52	16.4 (12.3 , 21.5)	1,569	6.6 (6.3 , 6.9)	1.6		25.7	
2. Alcohol related hospital admissions	1,040	9,096 (8,529 , 9,691)	45,315	5,542 (5,490 , 5,595)	2,252.9		23,099.3	
3. A&E attendance under 18yrs	611	569.3 (539.1 , 599.2)	24,442	375.1 (371.4 , 378.8)	118.7		614.9	
4. Emergency admissions under 18yrs	107	99.7 (82.4 , 119.2)	6,628	101.7 (99.4 , 104.1)	5.2		152.3	
5. Hospital admissions for self-harm	54	489.9 (365.0 , 643.0)	1,898	206.8 (197.6 , 216.4)	67.0		716.5	
6. Antisocial behaviour incidents	2,322	552.5 (530.2 , 575.4)	107,456	355.3 (353.2 , 357.5)	64.1		865.9	
7. First time entrants to the Youth Justice System	31	15.6 (10.6 , 22.1)	1,144	9.9 (9.4 , 10.5)	3.5		19.8	
8. Child social care referrals	120	111.8 (93.6 , 132.2)	6,797	104.3 (102.0 , 106.7)	15.0		173.2	
9. NEET young people	18	96.7 (57.9 , 149.4)	521	46.0 (42.2 , 50.0)	11.1		151.4	
10. Teenage conceptions	10	40.8 (19.8 , 73.8)	684	40.9 (37.9 , 44.0)	17.7		126.7	
11. Unemployment	195	77.7 (67.5 , 88.9)	8,795	45.4 (44.5 , 46.3)	0.0		124.6	

Edlington

Indicator	Edlington		Doncaster		Best Score	Range Doncaster	<ul style="list-style-type: none"> ● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster 	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	56	9.8 (7.4 , 12.7)	1,569	6.6 (6.3 , 6.9)	1.6		25.7	
2. Alcohol related hospital admissions	1,206	6,407 (6,032 , 6,798)	45,315	5,542 (5,490 , 5,595)	2,252.9		23,099.3	
3. A&E attendance under 18yrs	694	405.6 (382.2 , 429.3)	24,442	375.1 (371.4 , 378.8)	118.7		614.9	
4. Emergency admissions under 18yrs	164	95.8 (82.3 , 110.8)	6,628	101.7 (99.4 , 104.1)	5.2		152.3	
5. Hospital admissions for self-harm	45	188.8 (137.3 , 253.1)	1,898	206.8 (197.6 , 216.4)	67.0		716.5	
6. Antisocial behaviour incidents	3,631	481.9 (466.3 , 497.8)	107,456	355.3 (353.2 , 357.5)	64.1		865.9	
7. First time entrants to the Youth Justice System	47	15.6 (11.4 , 20.6)	1,144	9.9 (9.4 , 10.5)	3.5		19.8	
8. Child social care referrals	212	123.9 (108.6 , 140.4)	6,797	104.3 (102.0 , 106.7)	15.0		173.2	
9. NEET young people	22	76.0 (47.9 , 113.1)	521	46.0 (42.2 , 50.0)	11.1		151.4	
10. Teenage conceptions	25	56.3 (36.8 , 82.0)	684	40.9 (37.9 , 44.0)	17.7		126.7	
11. Unemployment	325	66.7 (59.9 , 74.1)	8,795	45.4 (44.5 , 46.3)	0.0		124.6	

Hexthorpe

Indicator	Hexthorpe		Doncaster		Best Score	Range Doncaster	● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	44	15.9 (11.6, 21.3)	1,569	6.6 (6.3, 6.9)	1.6			25.7
2. Alcohol related hospital admissions	712	7,969 (7,374, 8,599)	45,315	5,542 (5,490, 5,595)	2,252.9			23,099.3
3. A&E attendance under 18yrs	397	460.0 (426.4, 494.0)	24,442	375.1 (371.4, 378.8)	118.7			614.9
4. Emergency admissions under 18yrs	117	135.6 (113.4, 160.2)	6,628	101.7 (99.4, 104.1)	5.2			152.3
5. Hospital admissions for self-harm	39	365.3 (255.3, 505.0)	1,898	206.8 (197.6, 216.4)	67.0			716.5
6. Antisocial behaviour incidents	1,848	517.5 (494.2, 541.6)	107,456	355.3 (353.2, 357.5)	64.1			865.9
7. First time entrants to the Youth Justice System	22	17.4 (10.9, 26.2)	1,144	9.9 (9.4, 10.5)	3.5			19.8
8. Child social care referrals	128	148.3 (125.3, 173.8)	6,797	104.3 (102.0, 106.7)	15.0			173.2
9. NEET young people	7	61.6 (25.2, 122.4)	521	46.0 (42.2, 50.0)	11.1			151.4
10. Teenage conceptions	13	74.0 (40.0, 123.2)	684	40.9 (37.9, 44.0)	17.7			126.7
11. Unemployment	295	124.6 (111.5, 138.6)	8,795	45.4 (44.5, 46.3)	0.0			124.6

Highfields

Indicator	Highfields		Doncaster		Best Score	Range Doncaster	● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	13	13.8 (7.4, 23.6)	1,569	6.6 (6.3, 6.9)	1.6			25.7
2. Alcohol related hospital admissions	250	9,932 (8,555, 11,425)	45,315	5,542 (5,490, 5,595)	2,252.9			23,099.3
3. A&E attendance under 18yrs	170	376.7 (331.8, 423.2)	24,442	375.1 (371.4, 378.8)	118.7			614.9
4. Emergency admissions under 18yrs	41	90.9 (66.0, 121.2)	6,628	101.7 (99.4, 104.1)	5.2			152.3
5. Hospital admissions for self-harm	14	327.9 (177.6, 552.5)	1,898	206.8 (197.6, 216.4)	67.0			716.5
6. Antisocial behaviour incidents	599	435.6 (401.4, 472.0)	107,456	355.3 (353.2, 357.5)	64.1			865.9
7. First time entrants to the Youth Justice System	6	9.2 (3.4, 20.0)	1,144	9.9 (9.4, 10.5)	3.5			19.8
8. Child social care referrals	67	148.5 (117.0, 184.7)	6,797	104.3 (102.0, 106.7)	15.0			173.2
9. NEET young people	10	151.4 (73.5, 263.7)	521	46.0 (42.2, 50.0)	11.1			151.4
10. Teenage conceptions	14	126.7 (71.0, 203.5)	684	40.9 (37.9, 44.0)	17.7			126.7
11. Unemployment	75	86.1 (68.3, 106.7)	8,795	45.4 (44.5, 46.3)	0.0			124.6

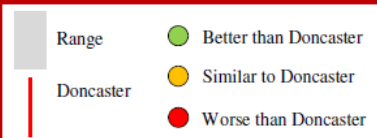
Hyde Park

Indicator	Hyde Park		Doncaster		Best Score	Range Doncaster	<ul style="list-style-type: none"> ● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster 	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	34	12.1 (8.4, 16.9)	1,569	6.6 (6.3, 6.9)	1.6		25.7	
2. Alcohol related hospital admissions	555	7,293 (6,603, 8,028)	45,315	5,542 (5,490, 5,595)	2,252.9		23,099.3	
3. A&E attendance under 18yrs	452	409.2 (380.0, 438.8)	24,442	375.1 (371.4, 378.8)	118.7		614.9	
4. Emergency admissions under 18yrs	100	90.5 (74.3, 109.0)	6,628	101.7 (99.4, 104.1)	5.2		152.3	
5. Hospital admissions for self-harm	23	210.2 (122.9, 329.6)	1,898	206.8 (197.6, 216.4)	67.0		716.5	
6. Antisocial behaviour incidents	1,549	403.5 (383.6, 424.1)	107,456	355.3 (353.2, 357.5)	64.1		865.9	
7. First time entrants to the Youth Justice System	21	12.4 (7.7, 18.9)	1,144	9.9 (9.4, 10.5)	3.5		19.8	
8. Child social care referrals	93	84.2 (68.5, 102.1)	6,797	104.3 (102.0, 106.7)	15.0		173.2	
9. NEET young people	15	97.3 (54.9, 156.3)	521	46.0 (42.2, 50.0)	11.1		151.4	
10. Teenage conceptions	16	70.7 (40.9, 112.3)	684	40.9 (37.9, 44.0)	17.7		126.7	
11. Unemployment	285	110.7 (98.9, 123.5)	8,795	45.4 (44.5, 46.3)	0.0		124.6	

Lower Wheatley

Indicator	Lower Wheatley		Doncaster		Best Score	Range Doncaster	<ul style="list-style-type: none"> ● Better than Doncaster ● Similar to Doncaster ● Worse than Doncaster 	Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)				
1. Numbers in structured drug and alcohol treatment	111	25.7 (21.2, 30.8)	1,569	6.6 (6.3, 6.9)	1.6		25.7	
2. Alcohol related hospital admissions	1,184	9,095 (8,535, 9,680)	45,315	5,542 (5,490, 5,595)	2,252.9		23,099.3	
3. A&E attendance under 18yrs	392	397.0 (366.3, 428.3)	24,442	375.1 (371.4, 378.8)	118.7		614.9	
4. Emergency admissions under 18yrs	138	139.8 (118.7, 163.0)	6,628	101.7 (99.4, 104.1)	5.2		152.3	
5. Hospital admissions for self-harm	83	474.0 (369.8, 596.8)	1,898	206.8 (197.6, 216.4)	67.0		716.5	
6. Antisocial behaviour incidents	4,437	845.1 (820.5, 870.4)	107,456	355.3 (353.2, 357.5)	64.1		865.9	
7. First time entrants to the Youth Justice System	17	12.3 (7.2, 19.7)	1,144	9.9 (9.4, 10.5)	3.5		19.8	
8. Child social care referrals	125	126.6 (106.5, 149.0)	6,797	104.3 (102.0, 106.7)	15.0		173.2	
9. NEET young people	7	52.4 (21.3, 104.5)	521	46.0 (42.2, 50.0)	11.1		151.4	
10. Teenage conceptions	11	54.7 (27.6, 95.8)	684	40.9 (37.9, 44.0)	17.7		126.7	
11. Unemployment	415	110.5 (100.7, 121.0)	8,795	45.4 (44.5, 46.3)	0.0		124.6	

Wheatley Park

Indicator	Wheatley Park		Doncaster		Best Score		Worst Score
	Num.	Rate (95% CI)	Num.	Rate (95% CI)			
1. Numbers in structured drug and alcohol treatment	48	10.3 (7.6, 13.6)	1,569	6.6 (6.3, 6.9)	1.6		25.7
2. Alcohol related hospital admissions	900	6.515 (6,059, 6,995)	45,315	5.542 (5,490, 5,595)	2,252.9		23,099.3
3. A&E attendance under 18yrs	732	448.3 (424.0, 472.8)	24,442	375.1 (371.4, 378.8)	118.7		614.9
4. Emergency admissions under 18yrs	177	108.4 (93.7, 124.5)	6,628	101.7 (99.4, 104.1)	5.2		152.3
5. Hospital admissions for self-harm	46	230.3 (167.7, 308.2)	1,898	206.8 (197.6, 216.4)	67.0		716.5
6. Antisocial behaviour incidents	2,524	402.4 (386.8, 418.4)	107,456	355.3 (353.2, 357.5)	64.1		865.9
7. First time entrants to the Youth Justice System	39	14.1 (10.0, 19.2)	1,144	9.9 (9.4, 10.5)	3.5		19.8
8. Child social care referrals	127	77.8 (65.3, 91.9)	6,797	104.3 (102.0, 106.7)	15.0		173.2
9. NEET young people	12	44.2 (22.7, 76.8)	521	46.0 (42.2, 50.0)	11.1		151.4
10. Teenage conceptions	22	54.7 (34.6, 81.6)	684	40.9 (37.9, 44.0)	17.7		126.7
11. Unemployment	205	50.1 (43.6, 57.2)	8,795	45.4 (44.5, 46.3)	0.0		124.6