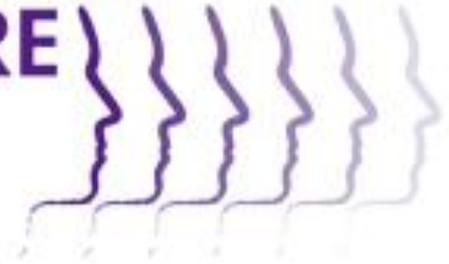


LEICESTERSHIRE  
*together*

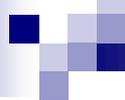


## JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Key findings from the  
Leicestershire JSNA and Oadby  
and Wigston summary

Peter Marks,  
Director of Public Health

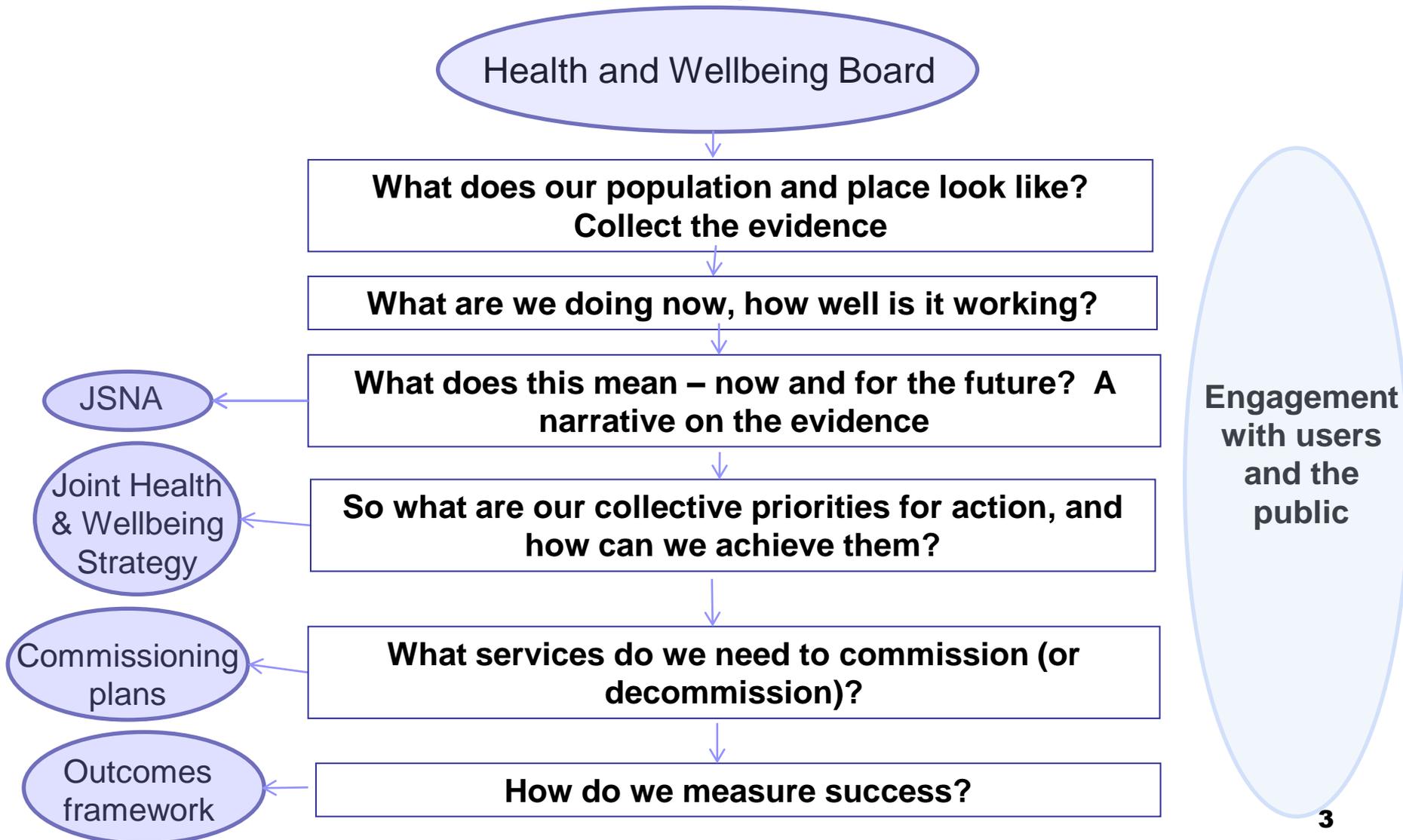




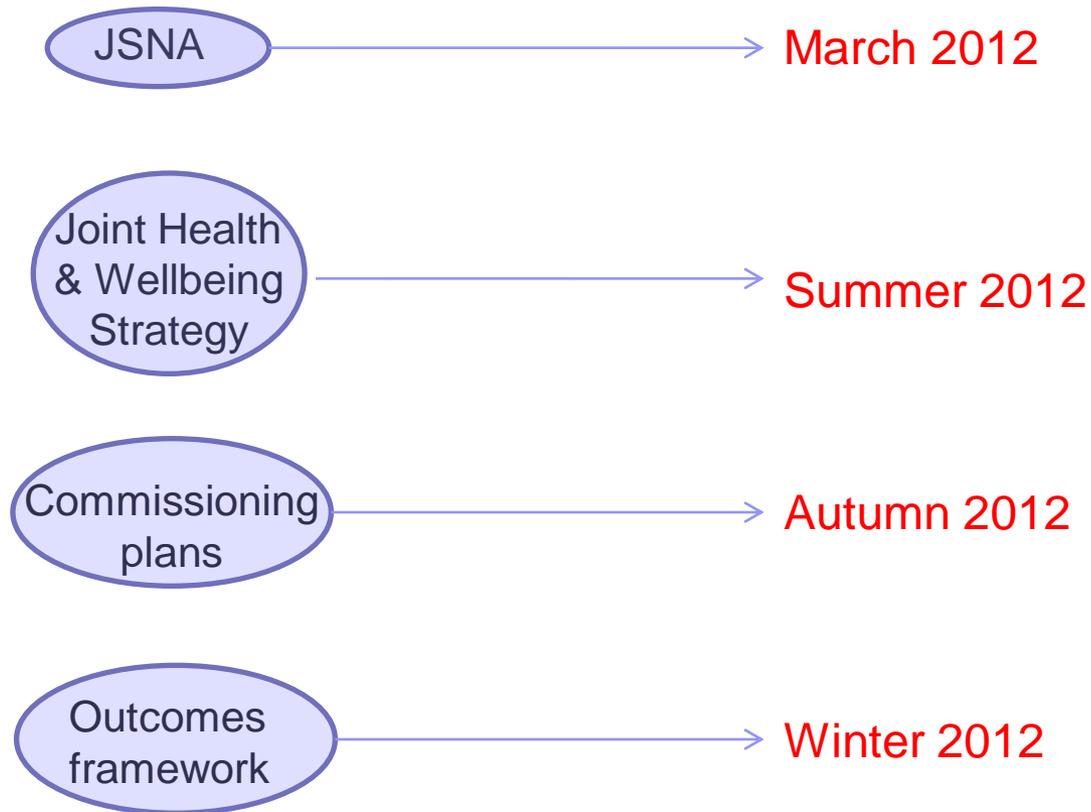
# What is a JSNA?

- Joint Strategic Needs Assessment (JSNA) identifies “the big picture” in terms of the health and wellbeing needs and inequalities of a local population
- JSNA describes a process that identifies current and future health and wellbeing needs in light of existing services, and informs future service planning taking into account evidence of effectiveness

# JSNAs and joint health and wellbeing strategies



# Timescales



# JSNA 22 detailed chapters

- Demography
- Deprivation and the Economy
- Housing
- Children and Young People
- Health Inequalities
- Staying Healthy
- Sexual Health
- Long Term Conditions
- Cancer
- Mental Health
- Learning Disabilities
- Physical Disabilities
- Older People
- Dementia
- End of Life Care
- Carers
- Offender Health
- Wellbeing / Happiness
- Primary Care
- NHS Hospital Care
- Adult Social Care – Service Usage, Assessment and Development in Social Care
- Assets

# JSNA 22 detailed chapters

## Background and wider determinants

- **Demography**
- **Deprivation and the Economy**
- **Housing**
- Children and Young People
- **Health Inequalities**
- Staying Healthy
- Sexual Health
- Long Term Conditions
- Cancer
- Mental Health
- Learning Disabilities
- Physical Disabilities
- Older People
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- Carers
- Offender Health
- **Wellbeing / Happiness**
- Primary Care
- NHS Hospital Care
- Adult Social Care – Service Usage, Assessment and Development in Social Care
- **Assets**

# JSNA 22 detailed chapters

## Chapters on need

- Demography
- Deprivation and the Economy
- Housing
- Children and Young People
- Health Inequalities
- Staying Healthy
- Sexual Health
- Long Term Conditions
- Cancer
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# JSNA 22 detailed chapters

## Service provision

- Demography
- Deprivation and the Economy
- Housing
- Children and Young People
- Health Inequalities
- Staying Healthy
- Sexual Health
- Long Term Conditions
- Cancer
- Mental Health
- Learning Disabilities
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# 2012 JSNA – key priorities

- Giving children the best start in life
- Managing the shift to early intervention and prevention
- Supporting the ageing population

In addition to targeting specific parts of the life course the following cross cutting themes have been identified:

- Targeting the communities with the greatest needs
- Improving mental health and wellbeing

# 2012 JSNA – key priorities

- Leicestershire Together recognises that addressing these health needs can only be done in partnership with the other commissioning hubs of Leicestershire Together
- “influencing other boards” has been identified as a key priority for ensuring that the Health and Wellbeing Board delivers improved health outcomes across the life course. E.g.
  - Children and Young People Commissioning Board
  - The Leicester and Leicestershire Enterprise Partnership Environment Board
  - Safer Communities Commissioning Board
  - Stronger Communities Board
  - Housing Services Partnership
  - Housing Planning Infrastructure Group
  - Leicestershire Rural Partnership
  - Community Budget Programme Board
  - Voluntary and Community Sector Strategy Group

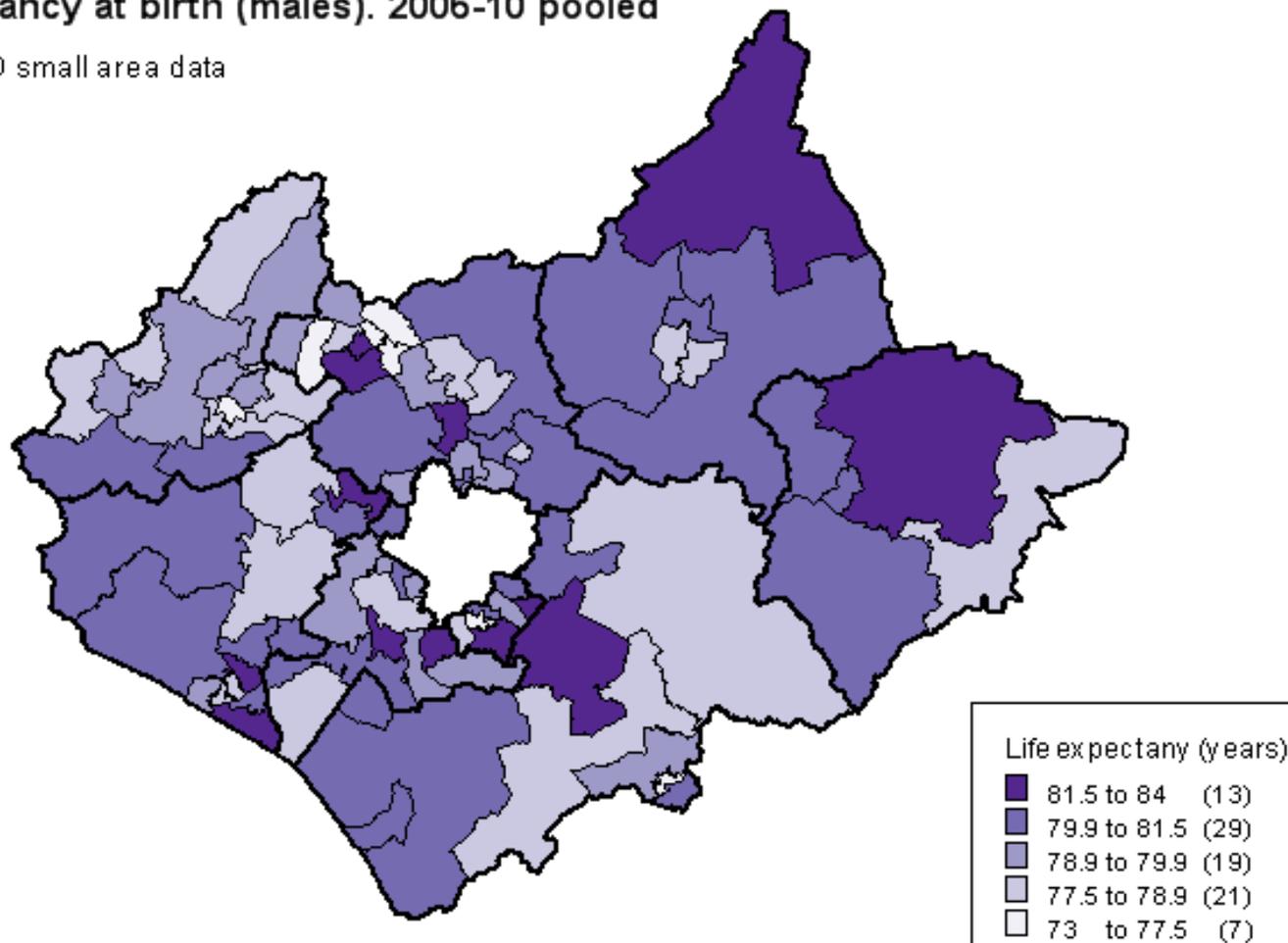
# What does this mean for Oadby and Wigston?

## Background and wider determinants

- In 2008/09 76.6% of the residents of Oadby and Wigston surveyed reported their health and wellbeing status as being 'very good' or 'good'. This was higher than the England average (75.8%).
- In 2007-09 life expectancy for males in Oadby and Wigston was 79.9 years, this is significantly higher than the England average (78.3). Life expectancy for females in Oadby and Wigston was 83 years, which is not significantly different to the England average (82.3).
- However, the gap in life expectancy between the best-off and worst-off males in Oadby and Wigston can be estimated to be 6.7 years for males and for females as 9.3 years.
- Although these gaps are not significantly different to the England averages (8.9 for males and 5.9 for females) it suggests inequalities exist.

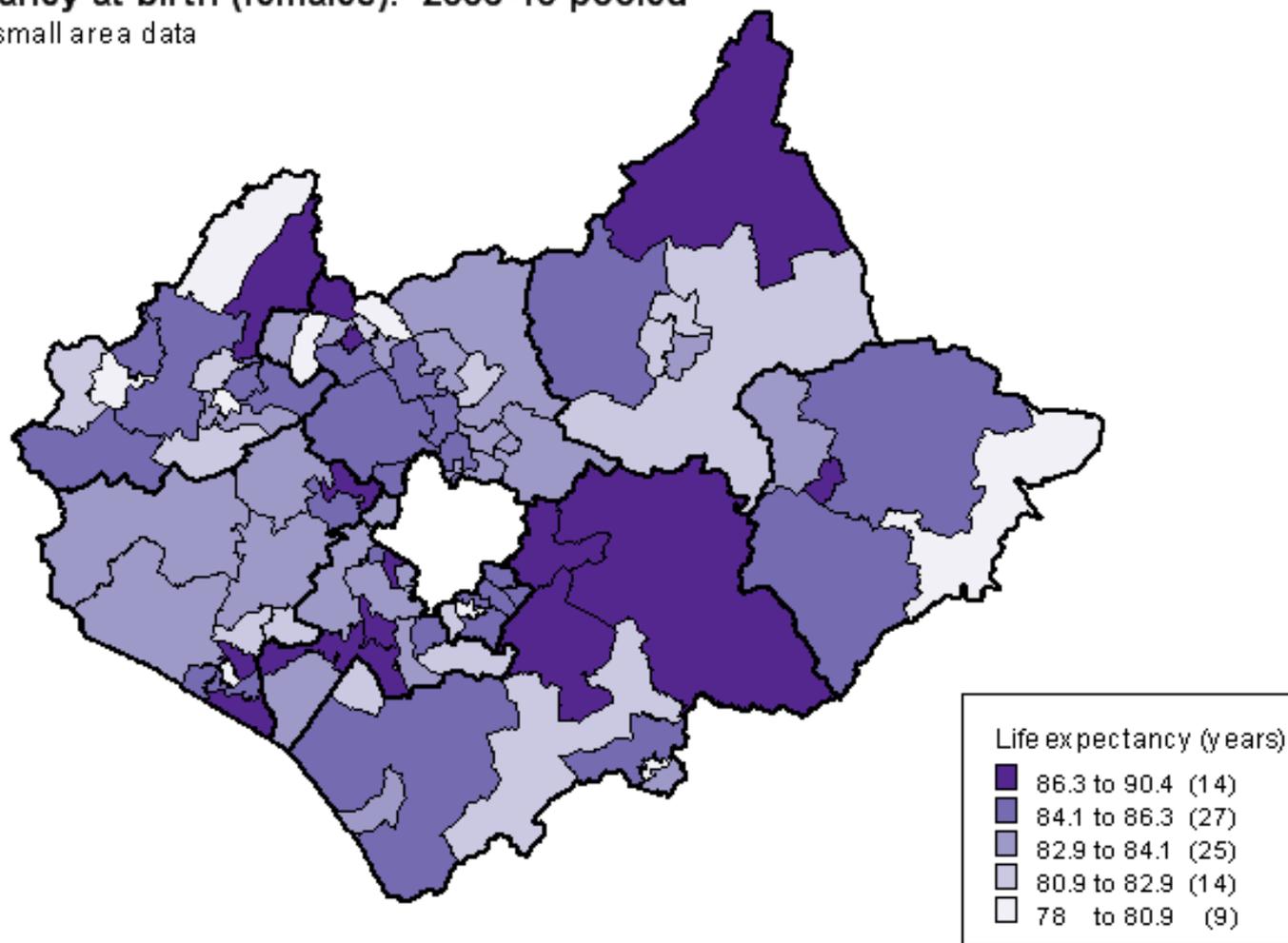
## Life expectancy at birth (males). 2006-10 pooled

Source: APHO small area data



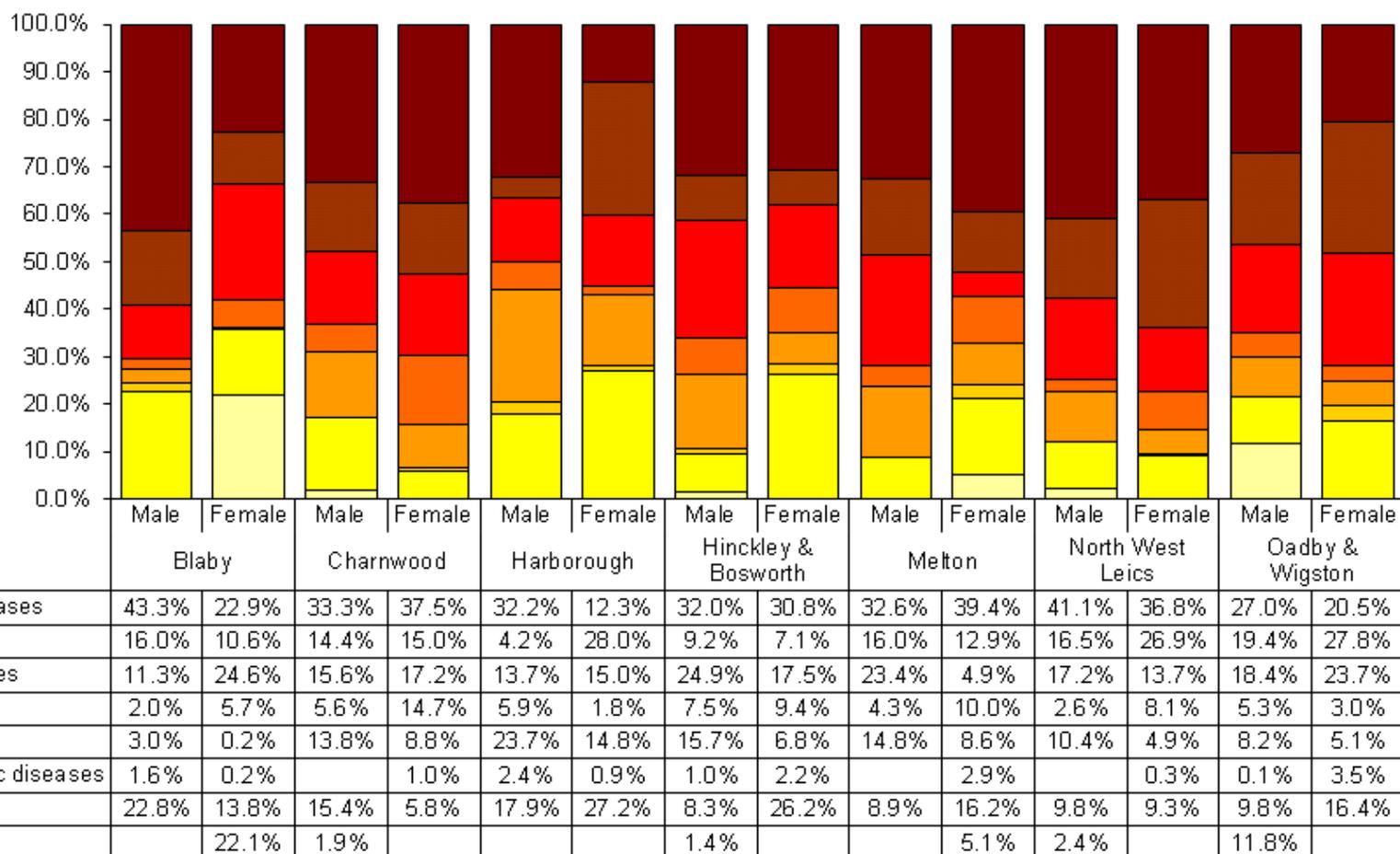
### Life expectancy at birth (females). 2006-10 pooled

Source: PHO small area data



# Causes of inequality in life expectancy

Breakdown of life expectancy gap between MDQ of LAD and England's least deprived quintile by cause of death

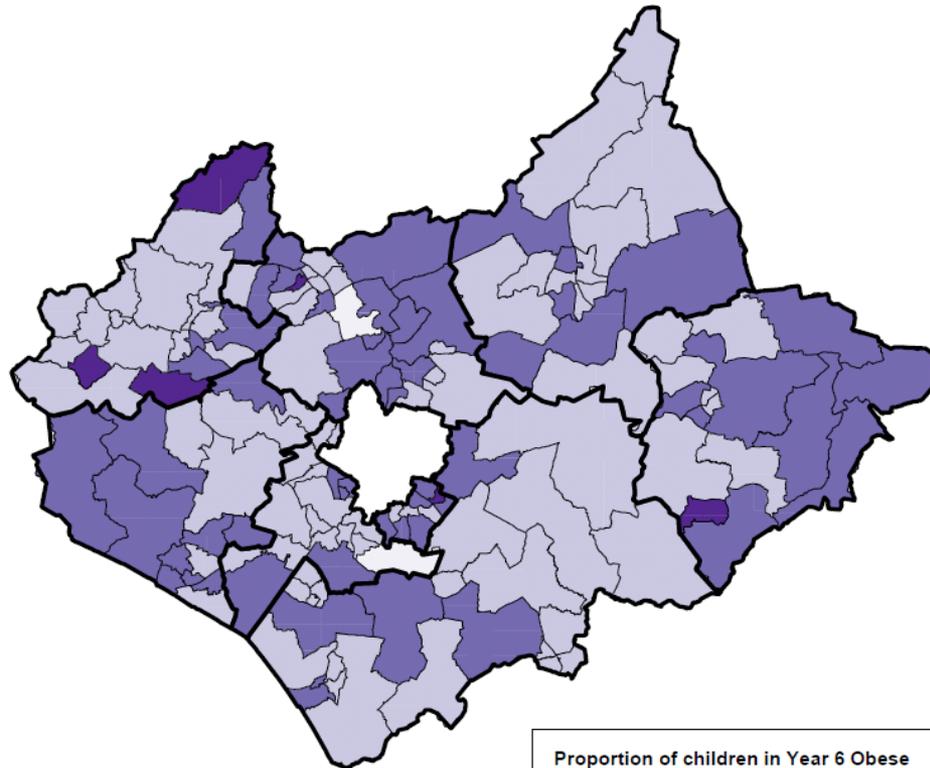


# What does this mean for Oadby and Wigston?

## Giving children the best start in life

- In 2007/09 the infant mortality rate in Oadby and Wigston was 2.5 deaths in infants under one year per 1000 live births. This is not significantly different to the England average (4.7).
- Breastfeeding rates in Oadby and Wigston are better than the England average with 48% of women still breastfeeding at 6-8 weeks compared to 44.9% nationally).
- In 2009/10 16.7% of children in year 6 in Oadby and Wigston were obese. This is lower than the England average (18.7%), but not significantly so.
- Between 2007 and 2009 the under-18 conception rate in Oadby and Wigston was 31.9 births per 1000 women aged 15 - 17. This is lower than the England average (40.2).

Proportion of children in Year 6 who are Obese  
LCR wards, 2009/10 NCMP data



Proportion of children in Year 6 Obese  
Significant difference from the LCR average

Higher than the LCR average	(58)
Lower than the LCR average	(83)
Significantly higher than the LCR average	(6)
Significantly lower than the LCR average	(2)

In 2009/10 in year 6 children in Oadby and Wigston the Oadby Uplands ward had a significantly high rate of obesity compared to the LCR average. However, new data for 2010/11 shows no wards in Oadby and Wigston are significantly high.

# What does this mean for Oadby and Wigston?

## Early intervention and prevention

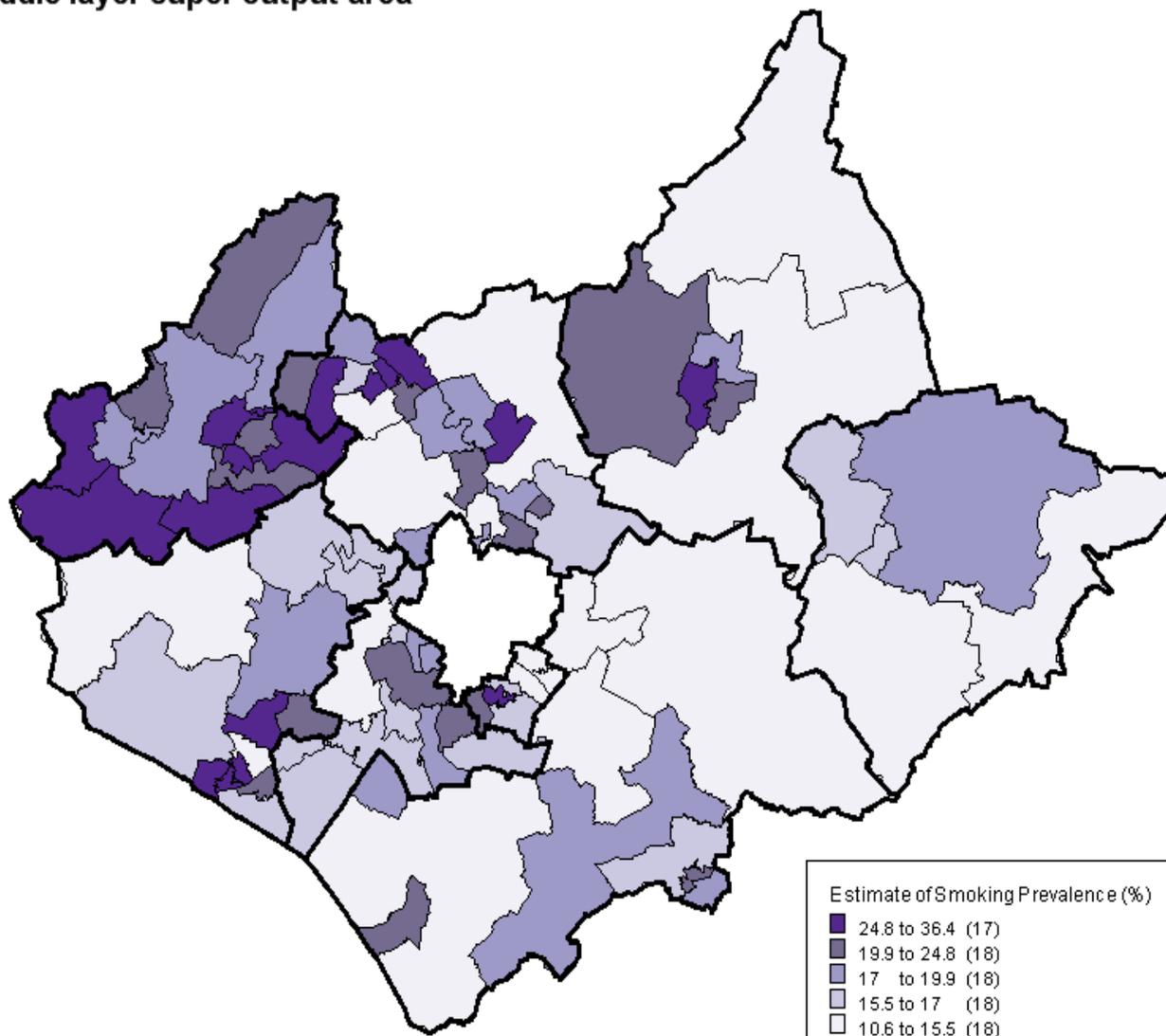
### Smoking

- In 2009/10 it was estimated that around 11200 adults in Oadby and Wigston smoke (23.9%). However, in the same year 504 adults in Oadby and Wigston set a date to quit smoking, and of these 260 (51.6%) had quit at 4 weeks.

### Obesity

- In 2006/08 it was estimated that 11100 (23.8%) adults in Oadby and Wigston were obese. This is not significantly different to the England average (24.2%).
- In 2006/08 it was estimated that 29.9% of adults in Oadby and Wigston ate 5 or more portions of fruit and vegetables per day, and 20.1% of adults took part in physical activity.

**Estimates of adult smoking prevalence, Adults aged 16 and over; 2006-08**  
**Middle layer super output area**



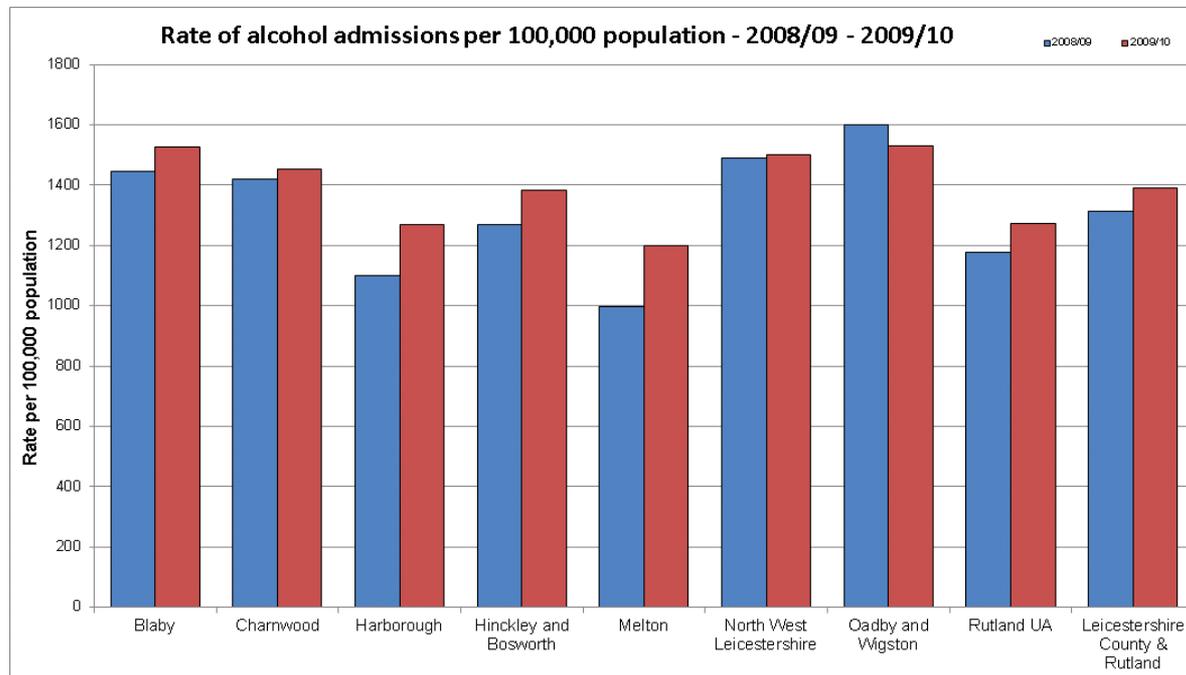
Based on APHO JSNA Small Area Indicators  
Modelled estimates, based on individual-level data from the Health Survey for England.

# What does this mean for Oadby and Wigston?

## Early intervention and prevention

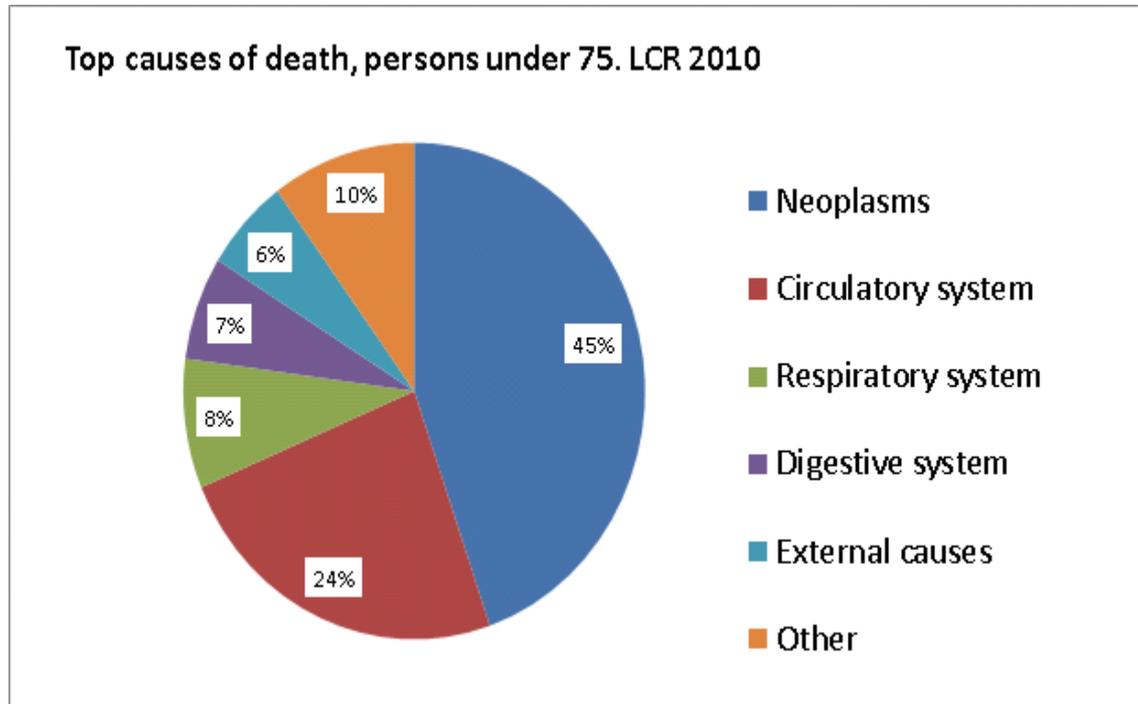
### Alcohol

- In 2009/10 there were 1530 admissions to hospital for alcohol related conditions per 100,000 population in Oadby and Wigston. This is lower than the England average (1743 per 100,000 population.)
- There are estimated to be around 7200 adults in Oadby and Wigston who binge drink (15.5% of the population).



# What does this mean for Oadby and Wigston?

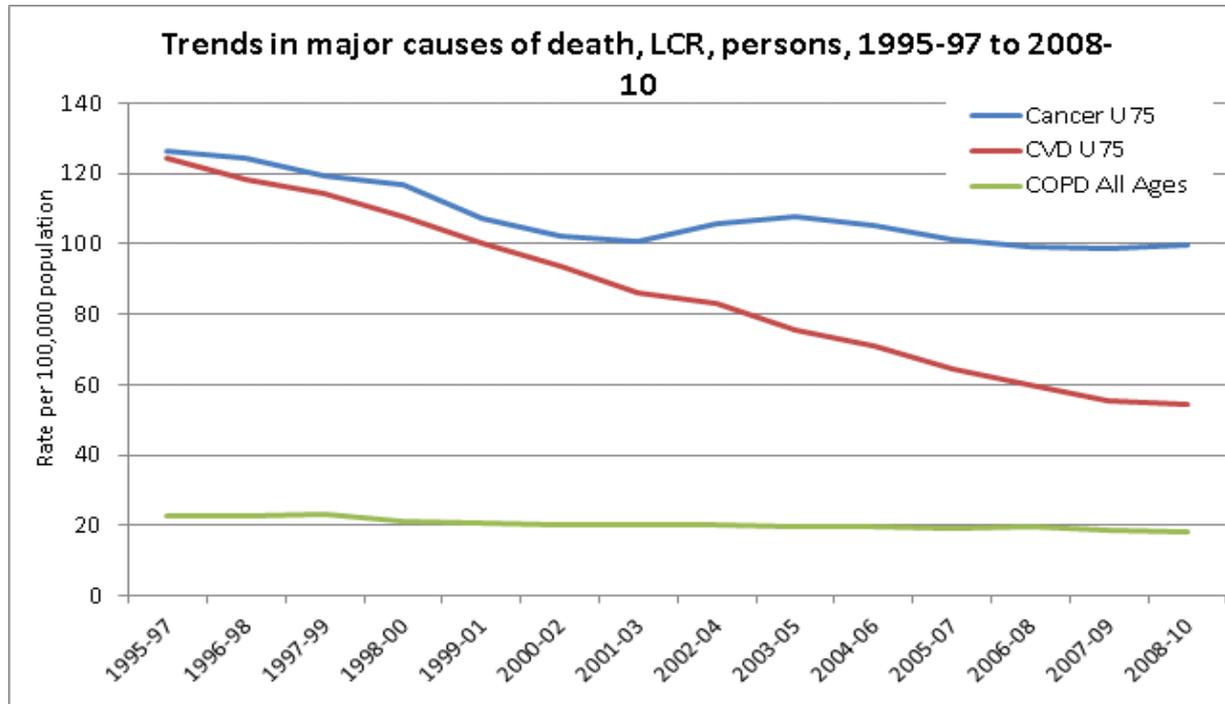
## Burden of ill health



- In LCR in 2010 the top causes of premature (under 75) mortality were cancer (45%), circulatory disease (24 %) and respiratory disease (8%).

# What does this mean for Oadby and Wigston?

## Burden of ill health



- In LCR in 2010 the top causes of premature (under 75) mortality were cancer (45%), circulatory disease (24 %) and respiratory disease (8%).

# What does this mean for Oadby and Wigston?

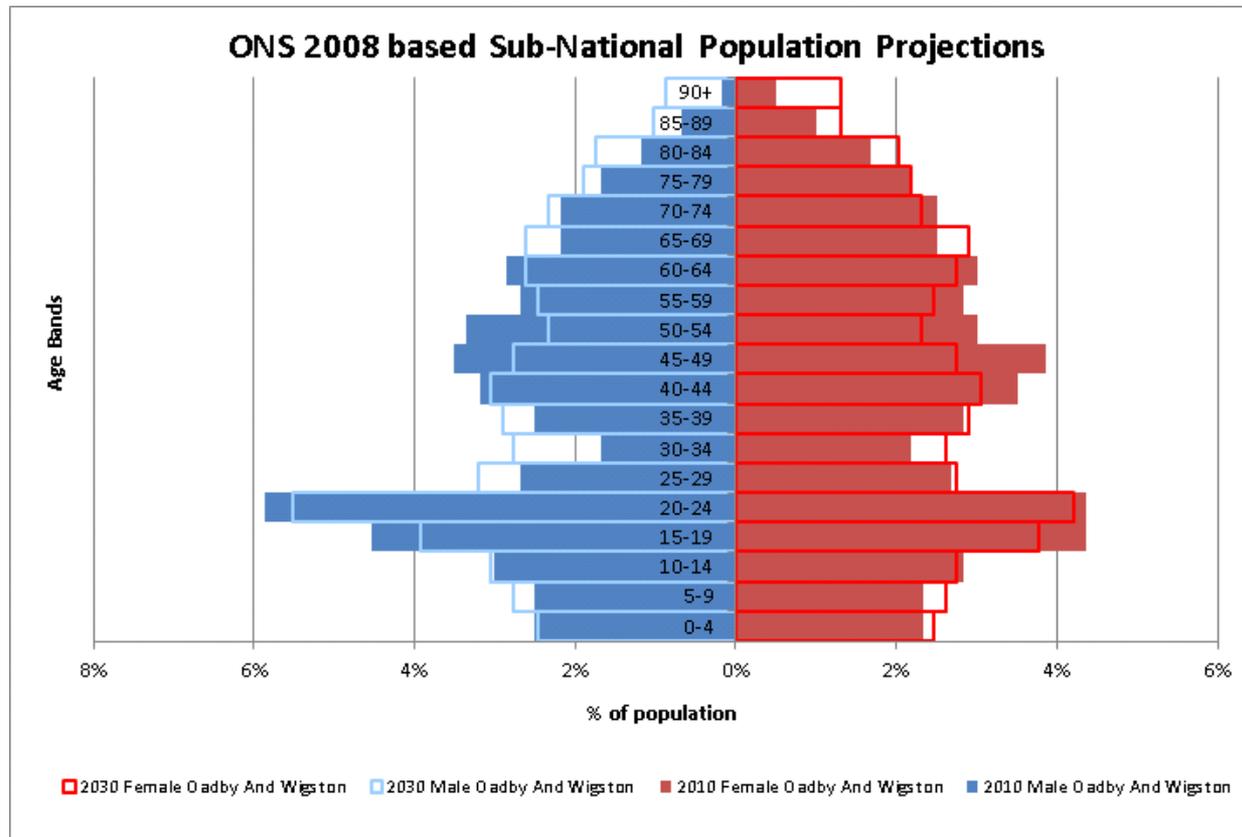
## Burden of ill health

- Mortality rates from circulatory disease and chronic obstructive pulmonary disease (COPD) in Oadby and Wigston are significantly lower than the England average. Cancer mortality rates in Oadby and Wigston are similar to the England average.
- Comparing modelled estimates of disease to the GP recorded prevalence suggests that in Oadby and Wigston there are approximately:
  - 420 patients with undiagnosed CHD
  - 5610 patients with undiagnosed hypertension

# What does this mean for Oadby and Wigston?

## Older people

- In 2010 there are approximately 14500 people aged over 60 in Oadby and Wigston, and 3200 aged over 80. The population of Oadby & Wigston aged over 60 is estimated to increase by around 40% by 2030..

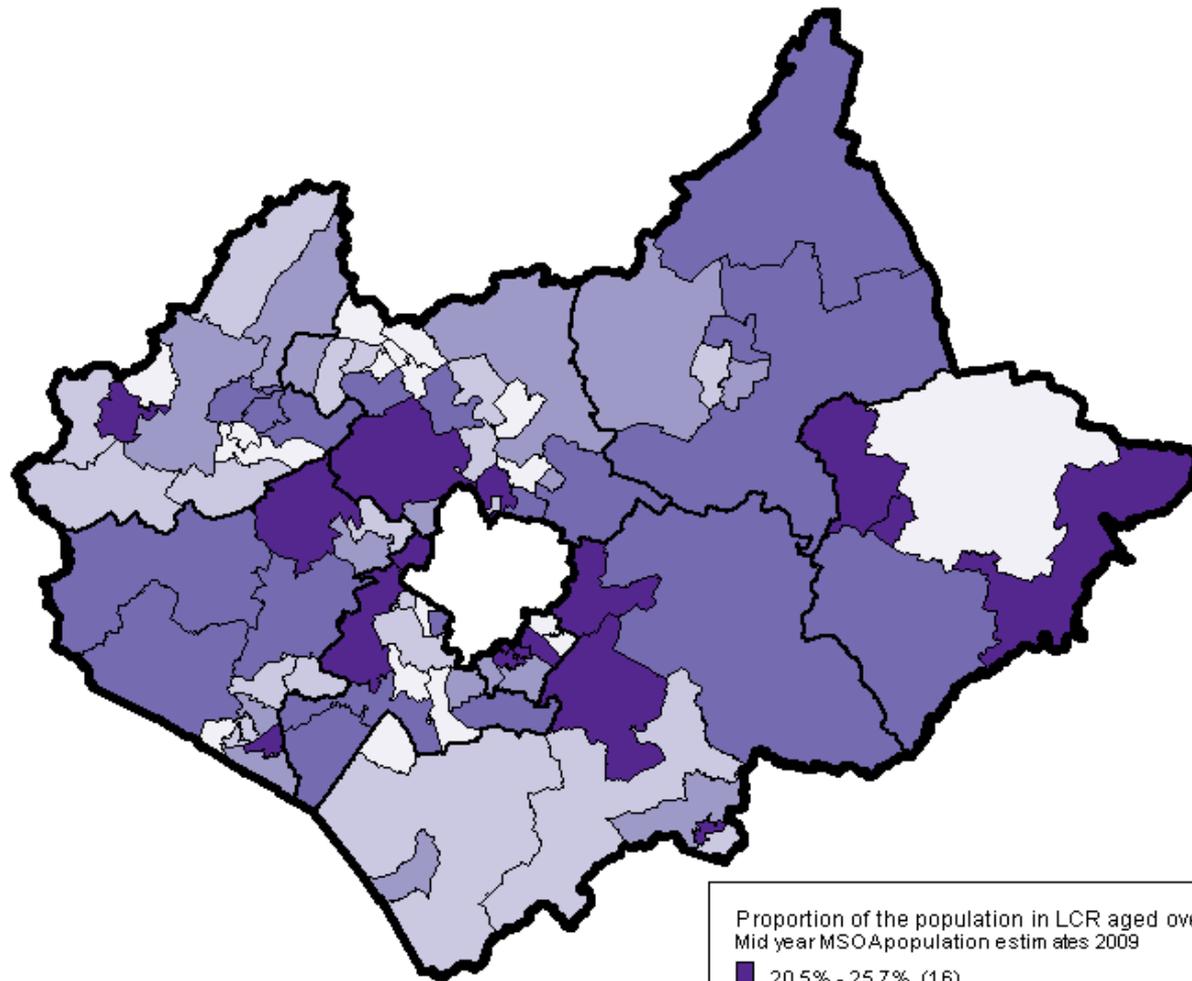


# What does this mean for Oadby and Wigston?

## Older people

- In 2007-09 life expectancy for men at age 65 in Oadby and Wigston is 19 years and life expectancy for women at age 65 in Oadby and Wigston is 21.1 years.
- Around 2700 of the population aged over 75 in Oadby and Wigston are predicted to live alone in 2010, and this number is predicted to increase to 4200 by 2030 (54% increase).
- In 2010 there are estimated to be around 4800 people in Oadby and Wigston over the age of 65 with a limiting long term illness. By 2030 this is estimated to increase to around 6910, an increase of 43.9%.

**Proportion of the population of Leicestershire County and Rutland aged over 65. 2009 mid-year population estimates (MSOA)**

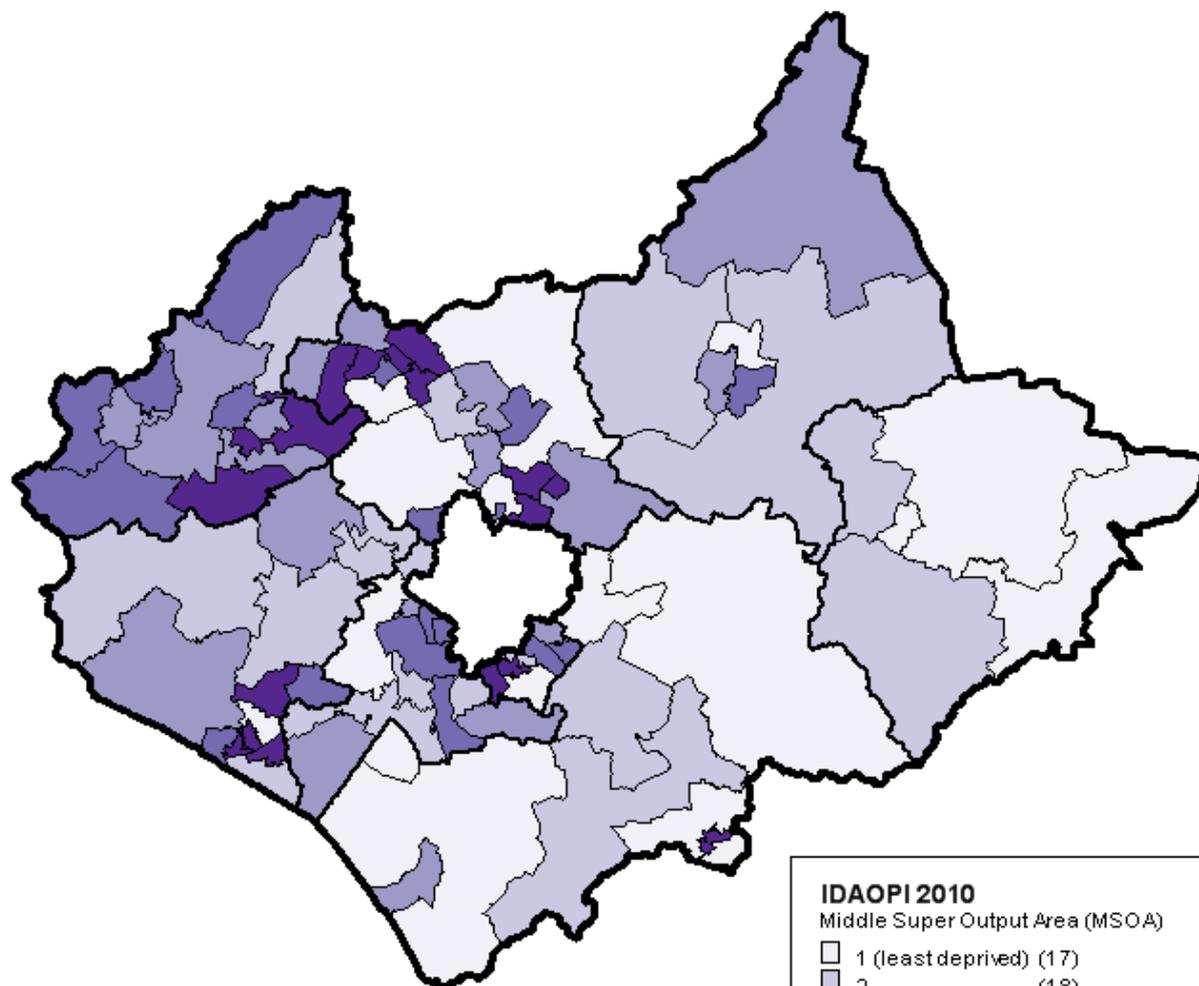


Proportion of the population in LCR aged over 65  
Mid year MSOA population estimates 2009

- 20.5% - 25.7% (16)
- 18.6% - 20.5% (19)
- 17.7% - 18.6% (16)
- 15% - 17.7% (20)
- 7.8% - 15% (18)

## Income deprivation affecting older people (IDAOP) - Quintiles within LCR

Published by Department for Communities and Local Government (DCLG)



### IDAOP 2010

Middle Super Output Area (MSOA)

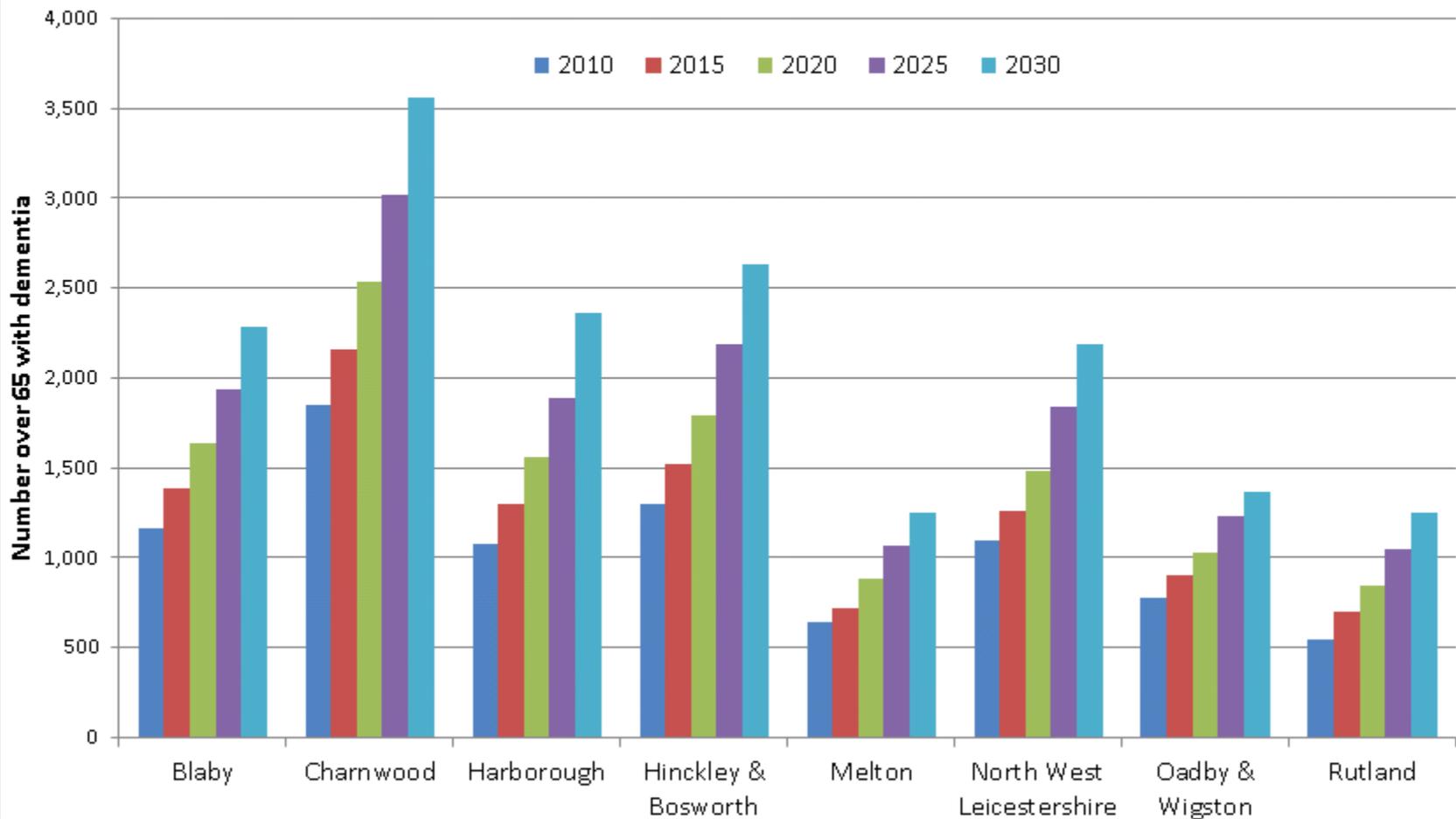
- |                    |      |
|--------------------|------|
| 1 (least deprived) | (17) |
| 2                  | (18) |
| 3                  | (18) |
| 4                  | (18) |
| 5 (most deprived)  | (18) |

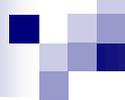
# What does this mean for Oadby and Wigston?

## Impact of the ageing population

- In 2010 there are estimated to be around 800 people in Oadby and Wigston with dementia. By 2030 this is estimated to increase to around 1400 people, an increase of 77%.
- The Census 2001 estimates that in 2001 there were around 5830 people in Oadby and Wigston who were providing unpaid care. This equates to 10.4% of the population.
- The increase in the older population is likely to impact substantially on the numbers of carers, particularly older carers.
- In 2010 there were estimated to be around 1240 carers aged over 65 in Oadby and Wigston, by 2030 this is estimated to increase to around 1650, a 33% increase.

## Number of population aged 65 and over with predicted dementia, 2010 - 2030 (source poppi.org.uk)





# How will the JSNA be used locally?

- How can Oadby and Wigston help deliver the priorities identified in the JSNA?
- How will you use the JSNA locally to inform local priority setting?
- What are the issues that are specific to Oadby and Wigston that need to be addressed locally?

# Where can you find the JSNA?

- [http://www.lsr-online.org/reports/leicestershire\\_joint\\_strategic\\_needs\\_assessment\\_jsna\\_2012\\_key\\_documents](http://www.lsr-online.org/reports/leicestershire_joint_strategic_needs_assessment_jsna_2012_key_documents)