

**LEICESTERSHIRE  
JOINT STRATEGIC NEEDS  
ASSESSMENT**

**LOCALITY PROFILES**

**Harborough District**

**APRIL 2012**

**Produced by NHS Leicestershire County and Rutland Public Health Directorate**

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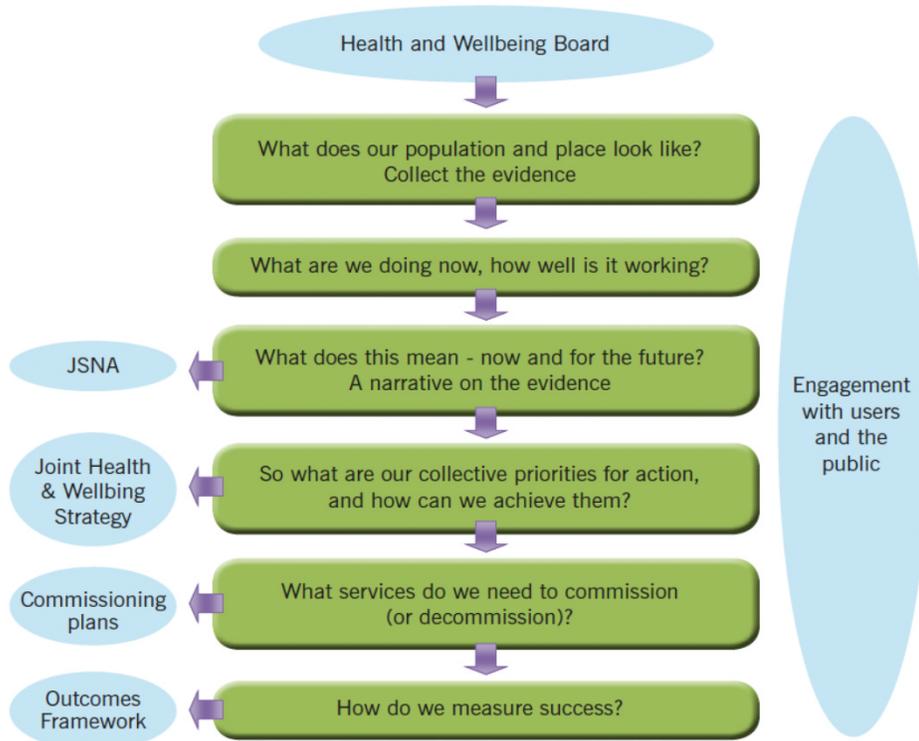
## Introduction

The Joint Strategic Needs Assessment (JSNA) is our overarching assessment of the health and wellbeing needs of our population across the wider health and social care economy. The JSNA is driven by the Shadow Health and Wellbeing Board in Leicestershire and is the basis for developing the Health and Wellbeing Strategy.

The Health and Social Care Bill, emphasizes the importance of the JSNA as the starting point for developing health and wellbeing strategies and underpinning commissioning decisions.

The Bill proposes the new statutory health and wellbeing boards will have three required functions:

- To oversee the production of the Joint Strategic Needs Assessment
- To develop a Joint Health and Wellbeing Strategy (JHWS)
- To develop joint commissioning intentions and ensure all commissioning intentions meet the needs identified by the JSNA and are in line with the JHWS



The Shadow Health and Wellbeing Board will monitor progress towards the objectives of the Joint Health and Wellbeing Strategy through the public health outcomes framework.

## 2012 Leicestershire JSNA Priorities

The strategic objective for the Health and Wellbeing Board is to “add quality and years to life”, by improving health throughout people’s lives, reducing inequalities and focusing on the needs of the local population.

The key priorities identified across the life course from the 2012 JSNA are:

- 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

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.

### ADDING QUALITY AND YEARS TO LIFE



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

## Note

Wherever possible this summary provides data at Harborough level, however where this is not possible a population weighted average has been calculated or the LCR value reported.

## Population of Harborough

- In 2010 the population of Harborough was estimated to be 84200 (mid 2010 population estimates). Around 26% of the population are aged 60 years and over.
- In 2010 there were 848 live births in Harborough, this is a rate of 59.6 births per 1000 women aged 15-44 years. This is significantly lower than the England average (65.5 per 1000 women).
- In 2004 7% of the population of Harborough are estimated to be from a non-white ethnic background. This is lower than the England average (12.5%).

## Deprivation

- Based on the indices of deprivation 2010, the average deprivation score for Harborough is 7.6.

## Life expectancy

### Males

- In 2007-09 life expectancy for males in Harborough was 79.6 years, this is significantly higher than the England average (78.3).

The gap in life expectancy between the best-off and worst-off males in Harborough for 2006-10 (the

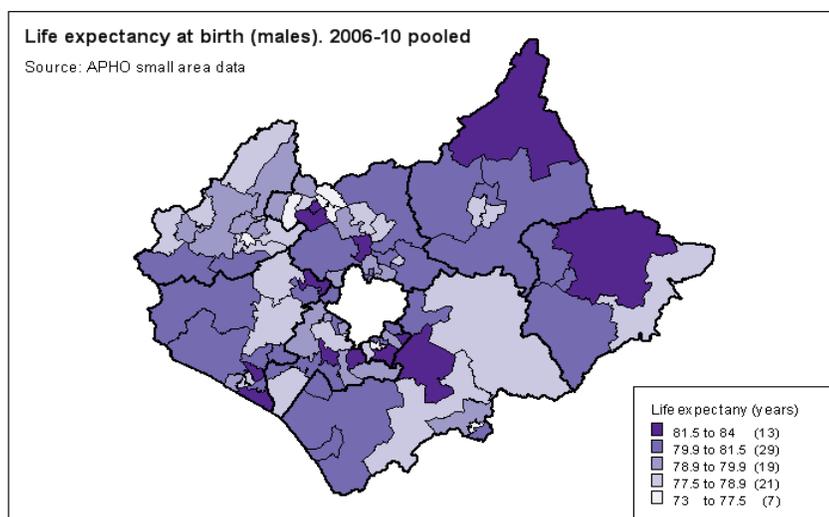
- Slope Index of Inequality) is 5 years. This is not significantly different to the median gap in life expectancy for all upper tier local authorities in England (8.9 years).

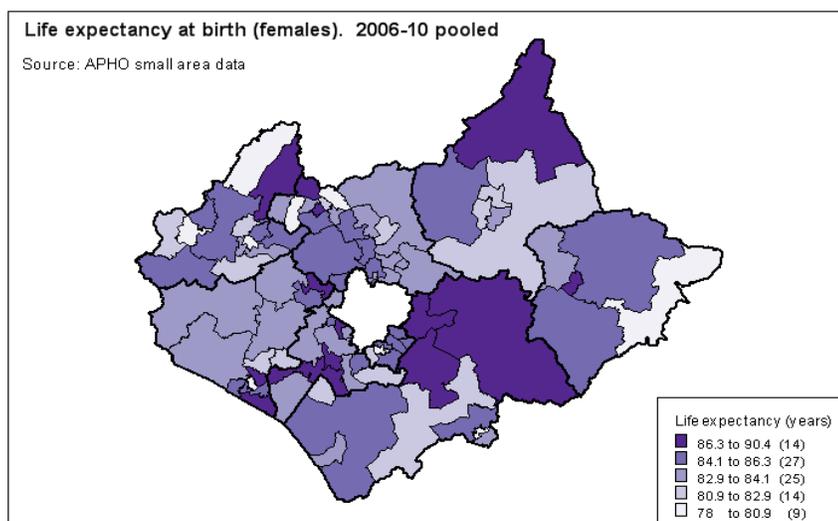
### Females

- In 2007-09 life expectancy for females in Harborough was 84.1 years, this is significantly higher than the England average (82.3).

The gap in life expectancy between the best-off and worst-off females in Harborough for 2006-10 (the

- Slope Index of Inequality) is 4.4 years. This is not significantly different to the median gap in life expectancy for all upper tier local authorities in England (5.9 years).





## Children's health

- In 2010 there were an estimated 20300 children and young people under the age of 20 in Harborough.

### Infant mortality

- In 2007/09 the infant mortality rate in Harborough was 3.5 deaths in infants under one year per 1000 live births. This is not significantly different to the England average (4.7).
- These figures represent very small numbers of deaths, and so should be interpreted with caution.

### Children in poverty

- At the beginning of 2011 an estimated 12890 (10.5%) of children under the age of 16 in Leicestershire were classed as living in poverty. This is lower than the England average (20.9%).

### Breastfeeding

- In 2009/10 the proportion of women still breastfeeding at 6-8 weeks in Harborough was 53.2%. This is higher than the England average (44.9%).

### Children's tooth decay

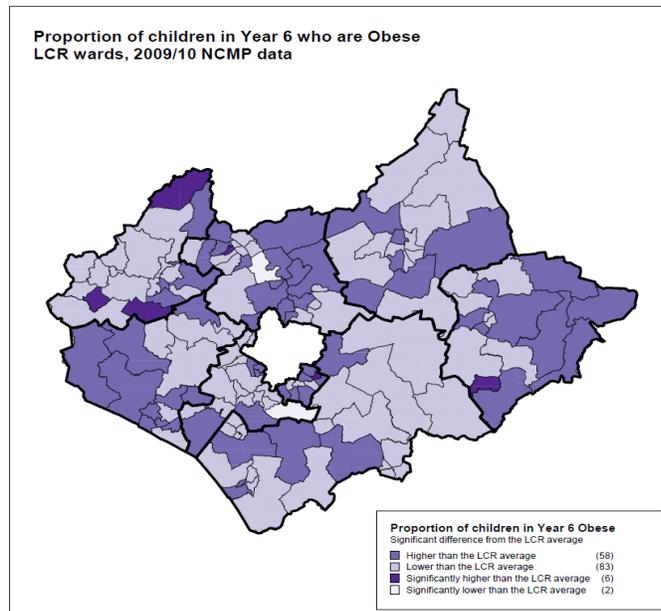
- In 2007/08 in Harborough the average number of decayed, missing or filled teeth in 5 year old children was 0.98. This is not significantly different to the England average (1.11).

### Accidental injury

- In 2008/09 in Leicestershire there were 104.3 emergency admissions for unintentional and deliberate injury to children and young people for every 10,000 children aged 0 to 17 years in the population. This is lower than the England average (117.4).

### Childhood obesity

- In 2009/10 9.2% of children in reception year in Harborough were obese. This is not significantly different to the England average (9.8%).
- In 2009/10 12.8% of children in year 6 in Harborough were obese. This is significantly lower than the England average (18.7%).



### Special educational needs

- In 2010 in Leicestershire there were 57 children in primary school with Special Educational Needs (with a statement) (2.2%). This is higher than the England average (1.4%).
- There were 92 children in secondary school in Leicestershire with Special Educational Needs (with a statement) (3.6%). This is higher than the England average (2%).

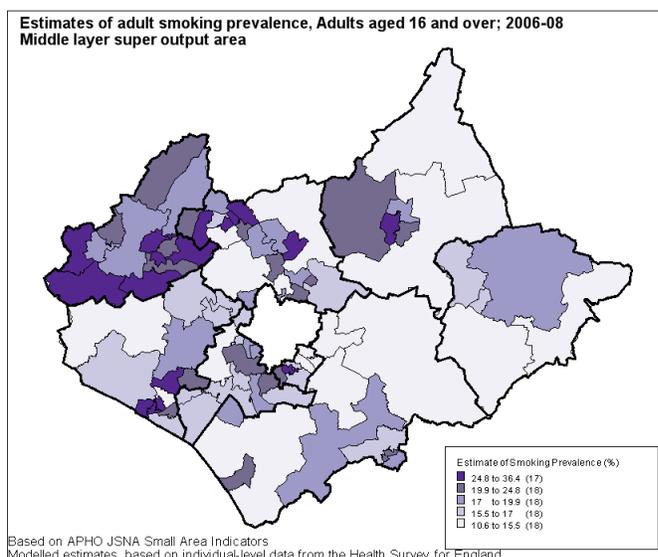
### Teenage conceptions

- Between 2007 and 2009 the under-18 conception rate in Harborough was 21 births per 1000 women aged 15 - 17. This is lower than the England average (40.2).
- The teenage conception rate in Harborough has decreased by 11% since the 1998 baseline.

## Staying healthy

### Smoking

- In 2009/10 it was estimated that 9800 adults in Harborough smoke (15%). This is significantly lower than the England average (21%).
- However, in the same year 905 adults in Harborough set a date to quit smoking, and of these 570 (63%) had quit at 4 weeks.



### Obesity

- In 2006/08 it was estimated that 15200 (23%) adults in Harborough were obese. This is not significantly different to the England average (24.2%).
- In 2006/08 it was estimated that 33.9% of adults in Harborough ate 5 or more portions of fruit and vegetables per day. This is not significantly different to the England average (28.7%).
- In 2008/09 it was estimated that 24.8% of adults in Harborough took part in physical activity. This is higher than the England average (21.6%).

### Alcohol

- In 2009/10 there were 1267 admissions to hospital for alcohol related conditions per 100,000 population in Harborough. This is lower than the England average (1743 per 100,000 population.)
- There are estimated to be around 13100 adults in Harborough who binge drink (19.8%). This is not significantly different to the England average (20.1%).

### Accidental injury

In 2007/09 there were 55 people killed or seriously injured on the road in Harborough. This is a rate of 66.9 per 100,000 population, which is significantly higher than the England average (48 per 100,000 population).

### Sexual health

- In 2010/11 there were 14840 attendances at GUM clinics in Leicestershire County and Rutland, 73.1% of these were first attendances. 93% of these first attendances at GUM clinics were seen within 48 hours.
- In 2009 there were 1552 NHS funded abortions in Leicestershire County and Rutland, of these 70% were conducted at under 10 weeks. This is lower than the England average (74.4%).

## Burden of ill health

- In 2008/09 80.3% of the residents of Harborough surveyed reported their health and wellbeing status as being 'very good' or 'good'. This was higher than the England average (75.8%).

- In 2009 there were 5382 deaths in Leicestershire County and Rutland, 1691 of these were premature (i.e. before the age of 75). Among the premature deaths the highest proportion were from cancer (46.6%), followed by circulatory disease (24.3%) and respiratory disease (9%).

- In 2007/09 there were 241 deaths in Harborough considered amenable to healthcare. This is a rate of 81.7 per 100,000 population, which is significantly lower than the England average (96.4 per 100,000 population).

### Circulatory disease

- In 2007/09 there were 168 premature deaths from circulatory disease in Harborough. This is a rate of 54.6 per 100,000 population, which is significantly lower than the England average (70.5 per 100,000 population).

### CHD

- In 2010/11 there were 2560 patients registered with Coronary Heart Disease (CHD) in Harborough. This is a GP recorded prevalence of 3.8%. However, model based estimates suggest that the actual prevalence is 4.6%, which would suggest there are around 590 patients with undiagnosed CHD in Harborough.

### Cancer

In 2007/09 there were 281 premature deaths from cancer in Harborough. This is a rate of 92.7 per 100,000 population, which is significantly lower than the England average (112.1 per 100,000 population).

### Respiratory disease

In 2007/09 there were 31 deaths from chronic obstructive pulmonary disease (COPD) in Harborough. This is a rate of 9.6 per 100,000 population, which is not significantly different to the England average (11.8 per 100,000 population).

### Diabetes

- In 2010/11 there were 3030 patients in Harborough registered with their GP as having diabetes. This is an estimated diabetes age-specific prevalence rate of 4.5%, which is significantly lower than the England average (5.5%).
- In 2005 there were an estimated 290 deaths in people aged between 20 and 79 years in Leicestershire County and Rutland from diabetes, which made up approximately 10.6% of all deaths in that year.

### Hypertension

- In 2010/11 there were 11060 patients registered with hypertension in Harborough. This is GP a recorded prevalence of 16.3%. However, model based estimates estimate that the actual prevalence is 31.4%, which would suggest there are around 10500 patients with undiagnosed hypertension in Harborough.

## Mental health

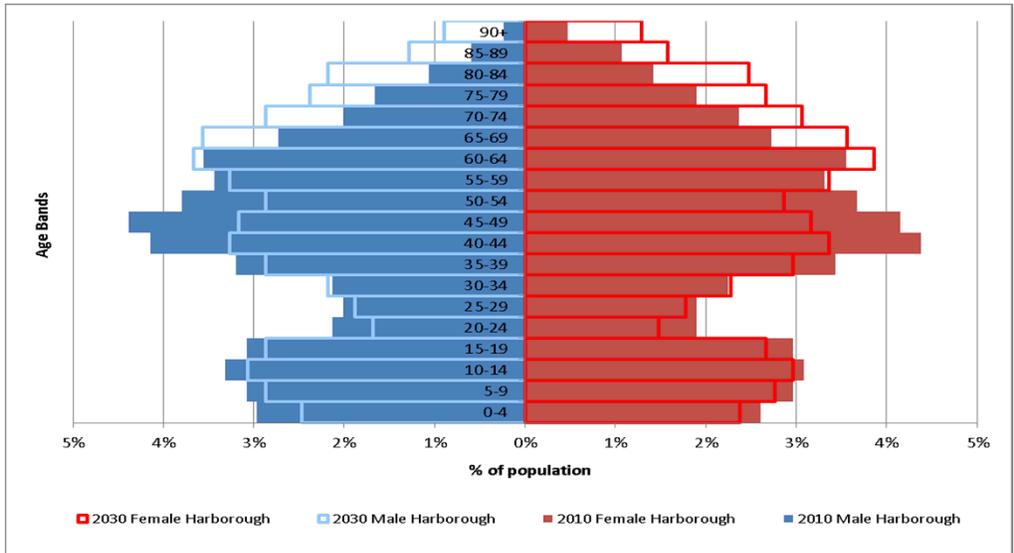
- In 2010/11 there were 482 people in Harborough registered with their GP as having a mental health disorder including schizophrenia, bipolar disorder and other psychoses. This equates to 0.6% of the population, which is lower than the England average (0.8%).

## Older people

- In 2010 there are 21700 people aged over 60 in Harborough, and 4200 aged over 80. The population of Harborough aged over 65 is estimated to increase by around 80% by 2030.

In 2007-09 life expectancy for men at age 65 in Harborough is 18.8 years. However, the 2001 Census estimated that healthy life expectancy in Harborough at 65 was 14.3 years. This was significantly higher than the England average (12.5 years).

- In 2007-09 life expectancy for women at age 65 in Harborough is 22.2 years. However, the Census 2001 estimated that healthy life expectancy at age 65 in Harborough was 15.6 years. This is significantly higher than the England average (14.5 years).
- Around 3500 of the population aged over 75 in Harborough are predicted to live alone in 2010, and this number is predicted to increase to around 7300 by 2030 (106% increase).
- In 2010 there are estimated to be around 6200 people in Harborough over the age of 65 with a limiting long term illness. By 2030 this is estimated to increase to around 11400, an increase of 85%.



## Falls

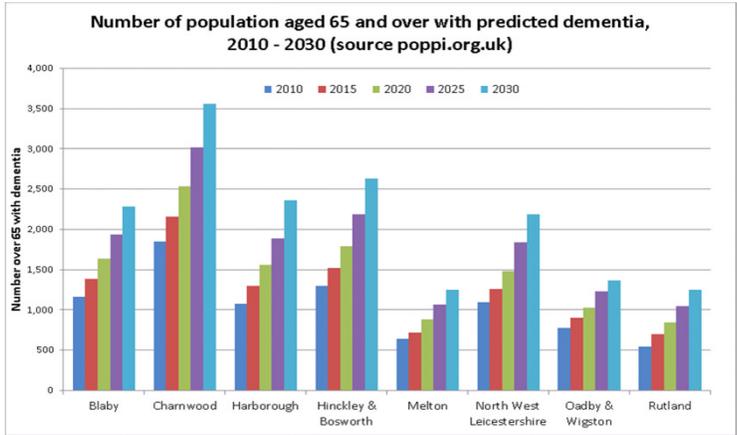
- In 2009/10 in males in Harborough there were 60.7 emergency admissions for hip fracture (which can be used as a proxy for falls) per 100,000 population, this was not significantly different to the England average (70.1 per 100,000 population).
- In 2009/10 in females in Harborough the rate of emergency admissions for falls was 124.5 per 100,000 population, this was not significantly different to the England average (119.2 per 100,000 population).

## Knee and hip replacements

- In 2008/09 there were 114 knee replacements in Harborough, which is a rate of 123.4 per 100,000 population, this is not significantly different to than the England average (128 per 100,000 population)
- In 2008/09 there were 94 hip replacements in Harborough, which is a rate of 102.4 per 100,000 population, this is not significantly different to than the England average (113.9 per 100,000 population)

## Dementia

- In 2010 there are estimated to be 1070 people in Harborough with dementia. By 2030 this is estimated to increase to 2360 people, an increase of 120%.



## End of life care

- National studies indicate that over half of people would prefer to die at home. In 2010 48.9% of deaths in Harborough took place in hospital and 17000% took place at home.

## Disabilities

### Learning disabilities

- In 2011 there are estimated to be 1530 people in Harborough with a learning disability. This equates to 2.3% of the population.

### Physical disabilities

- In 2011 there are estimated to be around 4280 people in Harborough aged 18-64 with a moderate physical disability (8.6%), this is higher than the England average (7.8%). This is estimated to increase to around 4510 people by 2030.

- There are estimated to be a further 1330 people in Harborough aged 18-64 with a serious physical disability (2.7%), this is higher than the England average (2.3%). This is estimated to increase to 1450 people by 2030.

## Carers

- The Census 2001 estimates that in 2001 there were 7680 people in Harborough who were providing unpaid care. This equates to 10% 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 1730 carers aged over 65 in Harborough, by 2030 this is estimated to increase to 2930, a 69% increase.

## References

This report is driven by the JSNA core dataset and all data references are available from:

[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)