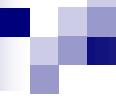


## JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Key findings from the Leicestershire  
JSNA and East Leicestershire and  
Rutland CCG summary

Public Health

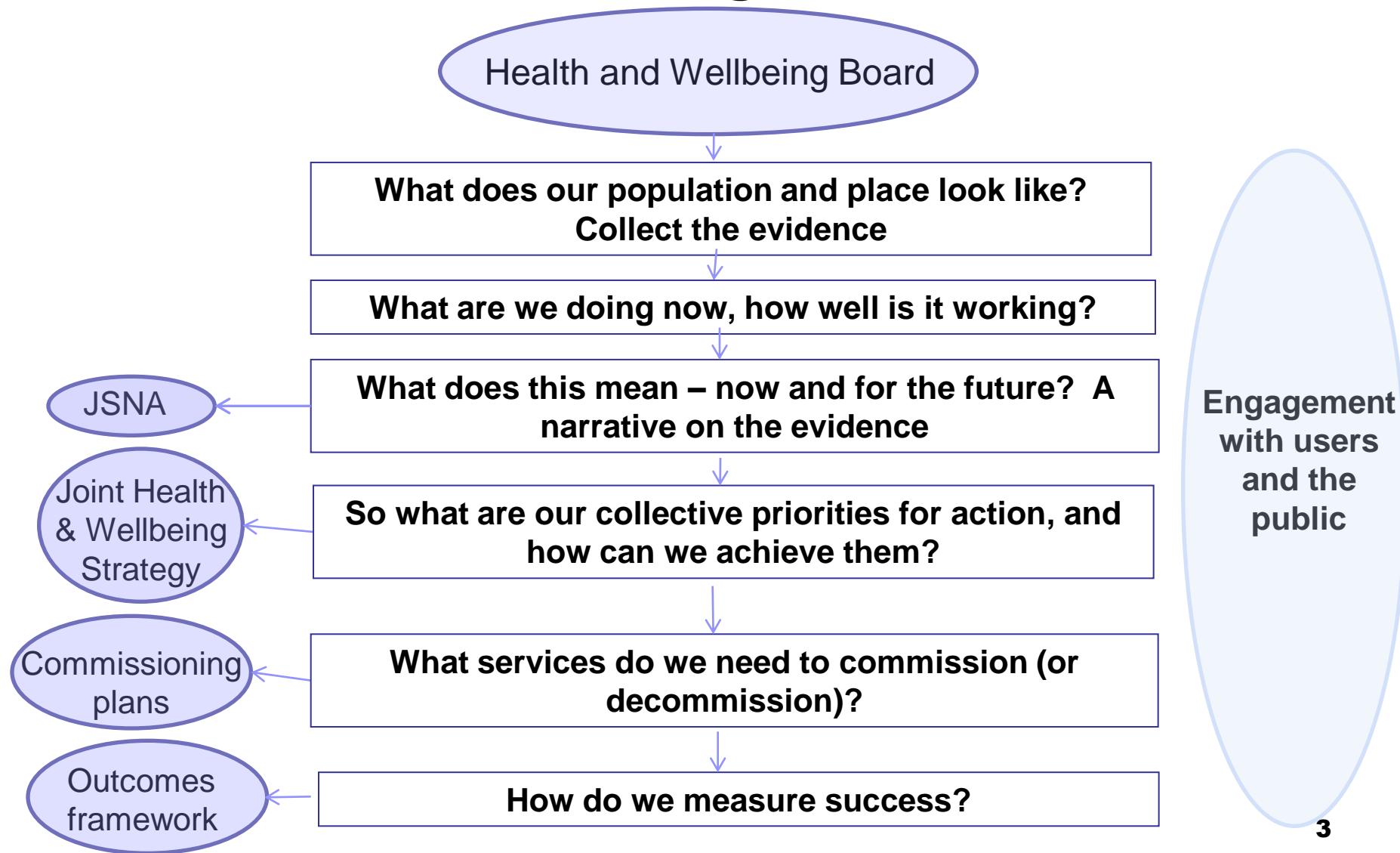




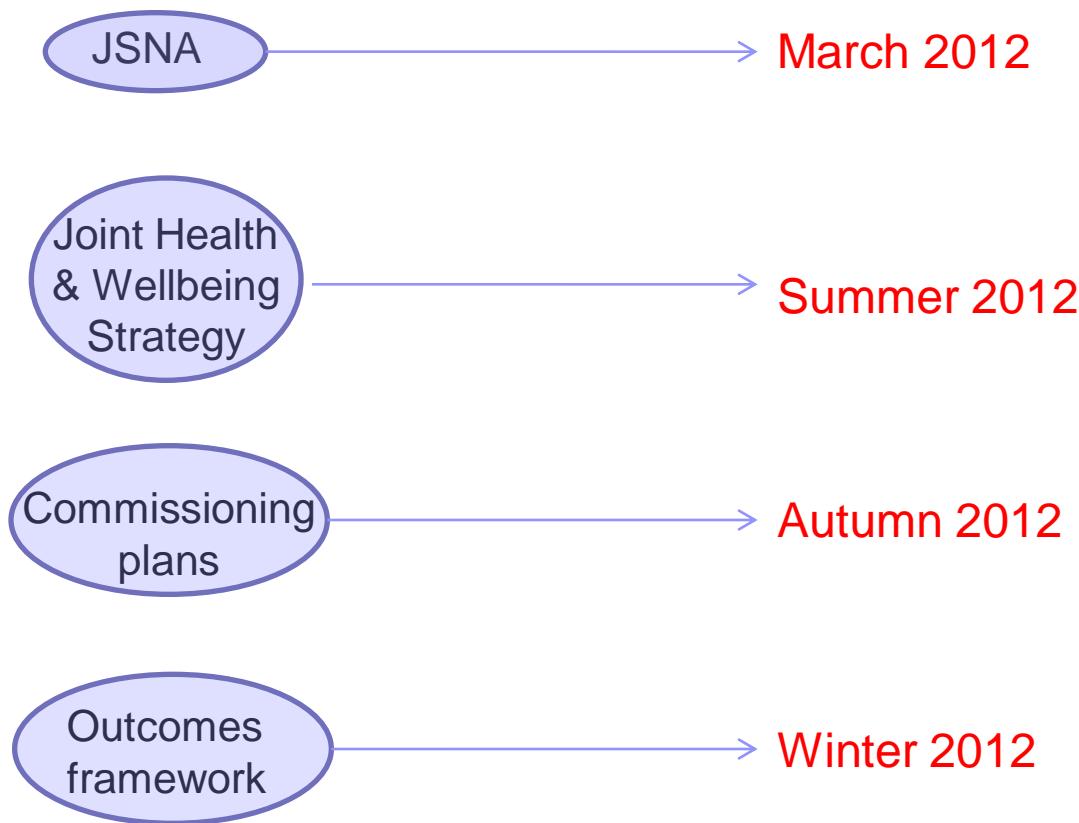
# What is a JSNA?

- 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
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# JSNA 22 detailed chapters

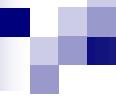
## Chapters on need

- Demography
- Deprivation and the Economy
- Housing
- Children and Young People
- Health Inequalities
- Staying Healthy
- Sexual Health
- Long Term Conditions
- Cancer
- Mental Health
- Learning Disabilities
- Physical Disabilities
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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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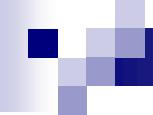


# 2012 JSNA – key priorities

- 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

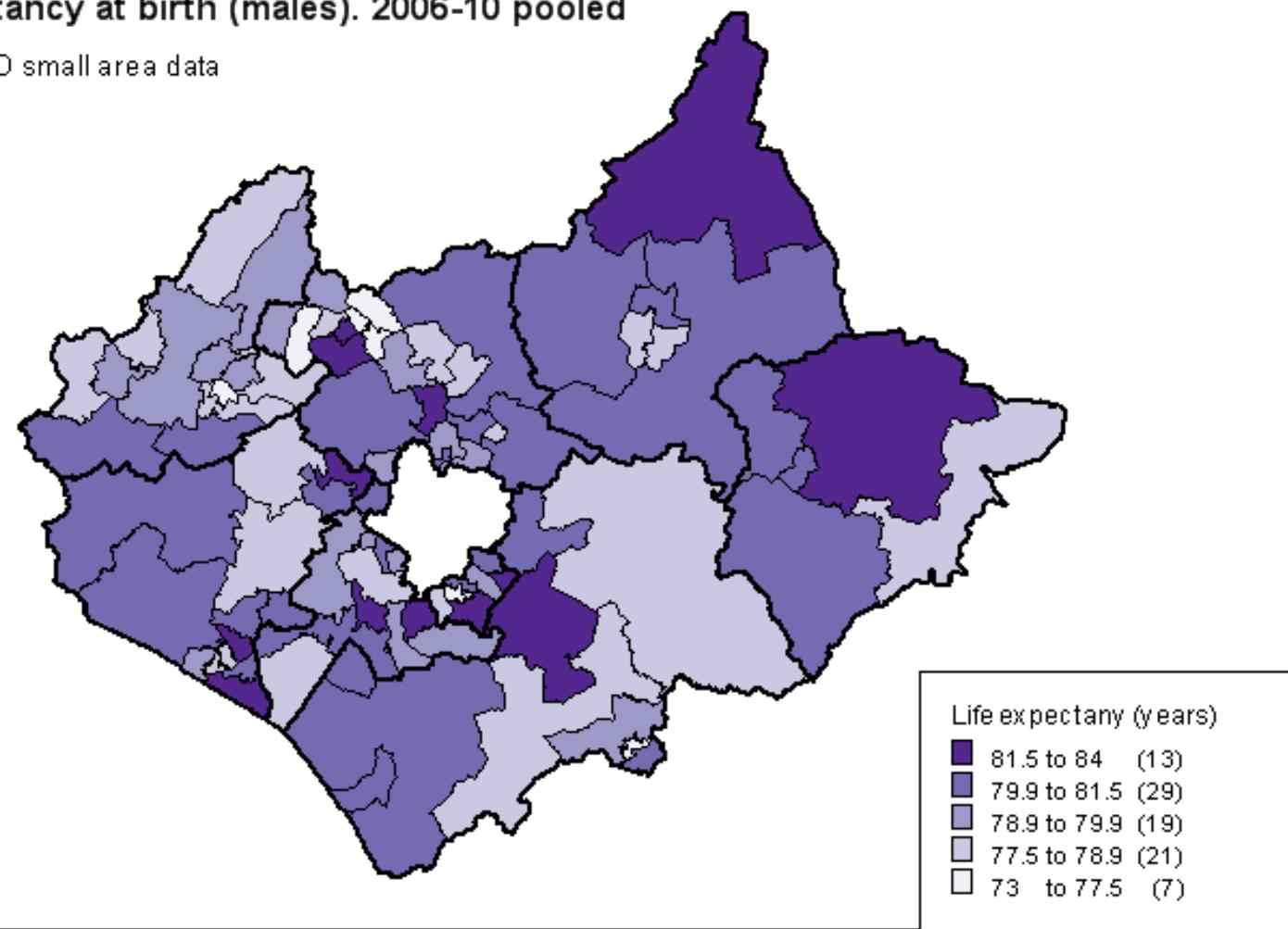
# What does this mean for East Leicestershire and Rutland CCG?

## Background and wider determinants

- In 2008/09 79.9% of the residents of East Leicestershire and Rutland CCG 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 and females in East Leicestershire and Rutland CCG was higher than the England average. Males could expect to live 80 years, whereas the England average was 78.3 years. Females could expect to live 83.8 years, compared to 82.3 years in England.
- However, the gap in life expectancy between the best-off and worst-off males in East Leicestershire and Rutland CCG can be estimated to be 4.3 years for males and for females as 4 years.
- Although the gap for males and females is lower than the England averages (8.9 years for males and 5.9 years for females), this suggests inequalities still exist.

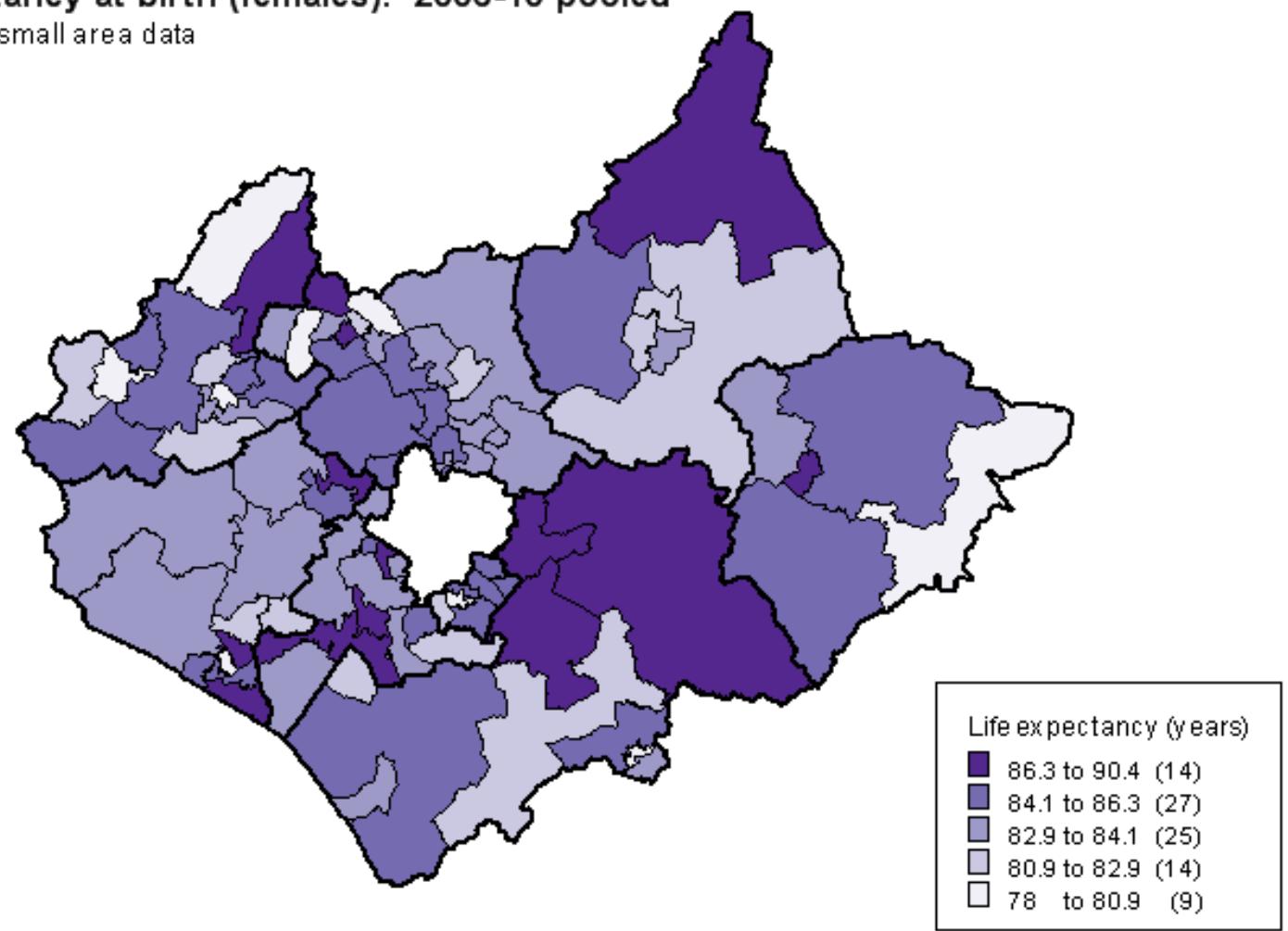
## Life expectancy at birth (males). 2006-10 pooled

Source: APHO small area data



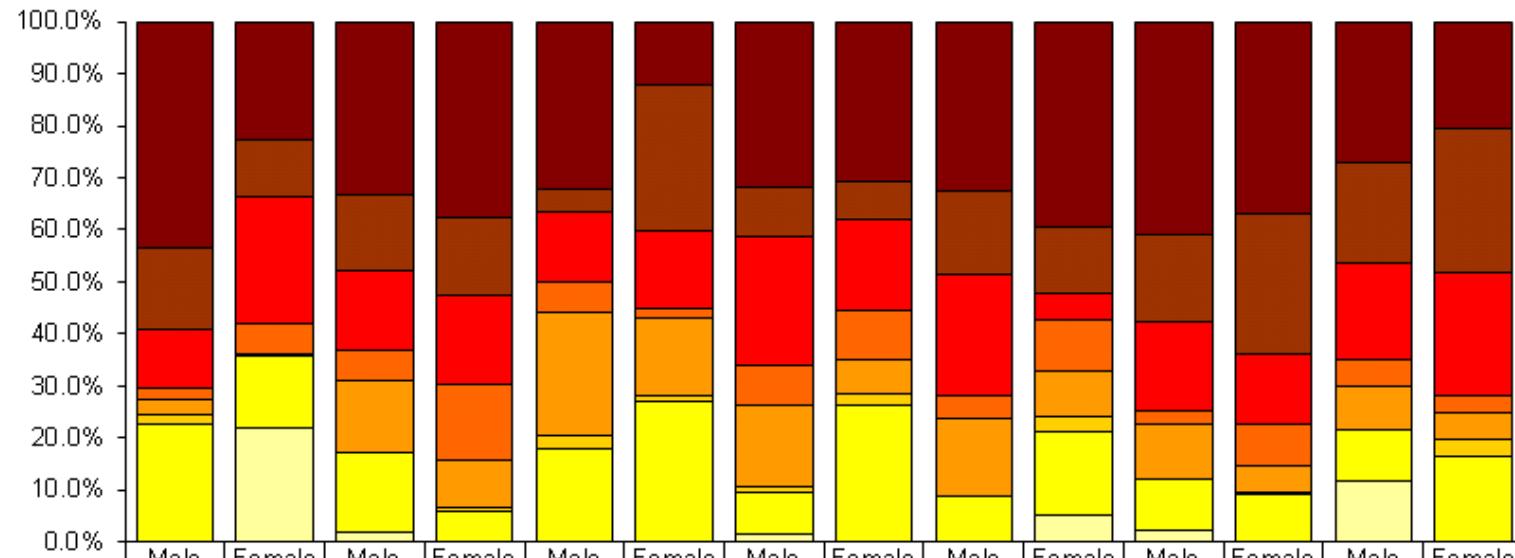
## Life expectancy at birth (females). 2006-10 pooled

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



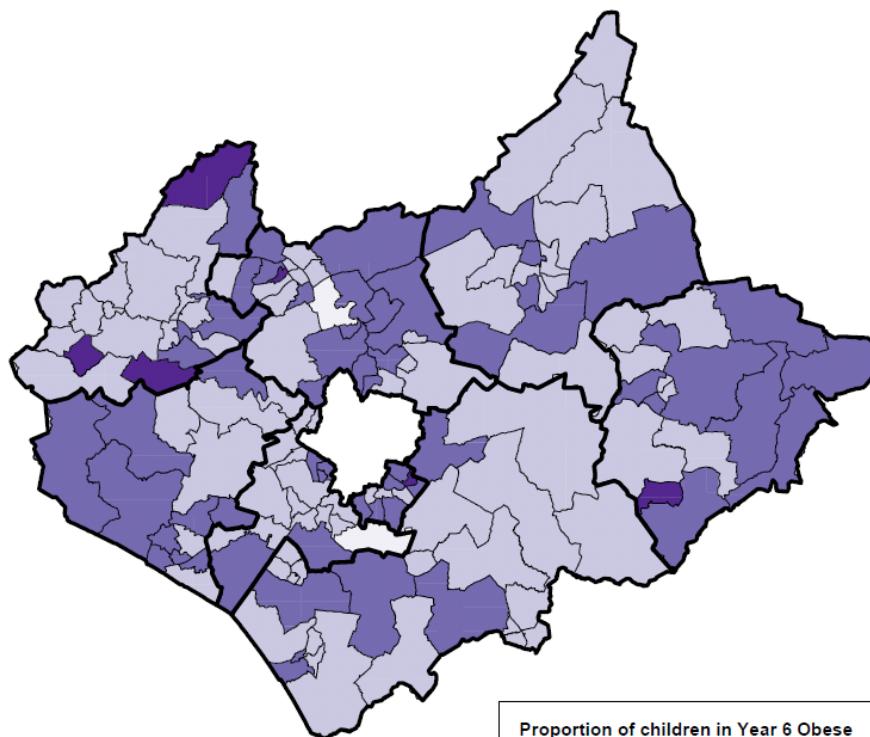
	Blaby	Charnwood	Harborough	Hinckley & Bosworth	Melton	North West Leics	Oadby & Wigston	
All Circulatory Diseases	43.3%	22.9%	33.3%	37.5%	32.2%	12.3%	32.0%	39.4%
All Cancers	16.0%	10.6%	14.4%	15.0%	4.2%	28.0%	9.2%	12.9%
Respiratory Diseases	11.3%	24.6%	15.6%	17.2%	13.7%	15.0%	24.9%	17.2%
Digestive	2.0%	5.7%	5.6%	14.7%	5.9%	1.8%	7.5%	10.0%
External Causes	3.0%	0.2%	13.8%	8.8%	23.7%	14.8%	15.7%	8.6%
Infectious * parasitic diseases	1.6%	0.2%		1.0%	2.4%	0.9%	1.0%	10.4%
Other	22.8%	13.8%	15.4%	5.8%	17.9%	27.2%	8.3%	16.2%
Under 28 days		22.1%	1.9%				11.8%	

# What does this mean for East Leicestershire and Rutland CCG?

## **Giving children the best start in life**

- In 2007/09 the infant mortality rate in East Leicestershire and Rutland CCG was 3.5 deaths in infants under one year per 1000 live births. This is lower than the England average (4.7).
- Breastfeeding rates in East Leicestershire and Rutland CCG are higher than the England average with 49.8% of women still breastfeeding at 6-8 weeks compared to 44.9% nationally).
- In 2009/10 children in East Leicestershire and Rutland CCG were less likely to be obese than the England average. 8.1% of children in reception and 14.7% in year 6 were obese compared to 9.8% and 18.7% nationally.
- Between 2007 and 2009 the under-18 conception rate in East Leicestershire and Rutland CCG was 26.3 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 Leicestershire 6 wards had a significantly high rate of obesity compared to the LCR average - Castle Donington, Ibstock and Heather, Measham, Uppingham, Loughborough Ashby and Oadby Uplands.

New data for 2010/11 shows that the 3 wards have a prevalence of obesity that is significantly higher than the LCR average: Ashfordby, Melton Egerton and Exton.

# What does this mean for East Leicestershire and Rutland CCG?

## **Early intervention and prevention**

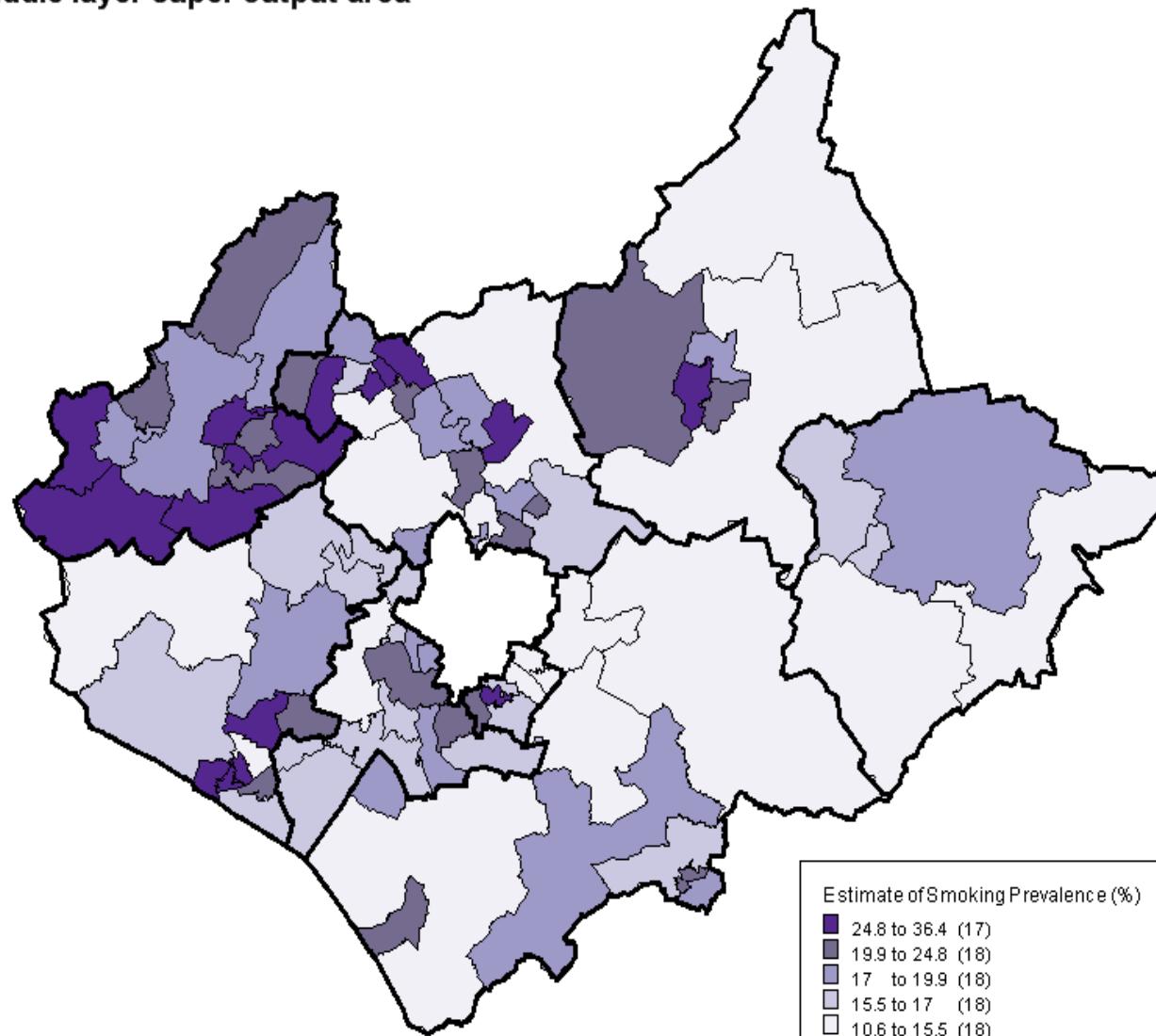
### **Smoking**

- In 2009/10 it was estimated that around 47200 adults in East Leicestershire and Rutland CCG smoke (18.4%). However, in the same year 3325 adults in East Leicestershire and Rutland CCG set a date to quit smoking, and of these 1982 (59.6%) had quit at 4 weeks.

### **Obesity**

- In 2006/08 it was estimated that 62100 (23.9%) adults in East Leicestershire and Rutland CCG were obese. This is not significantly different to the England average (24.2%).
- In 2006/08 it was estimated that 32% of adults in East Leicestershire and Rutland CCG ate 5 or more portions of fruit and vegetables per day, and 23.3% of adults took part in physical activity.

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

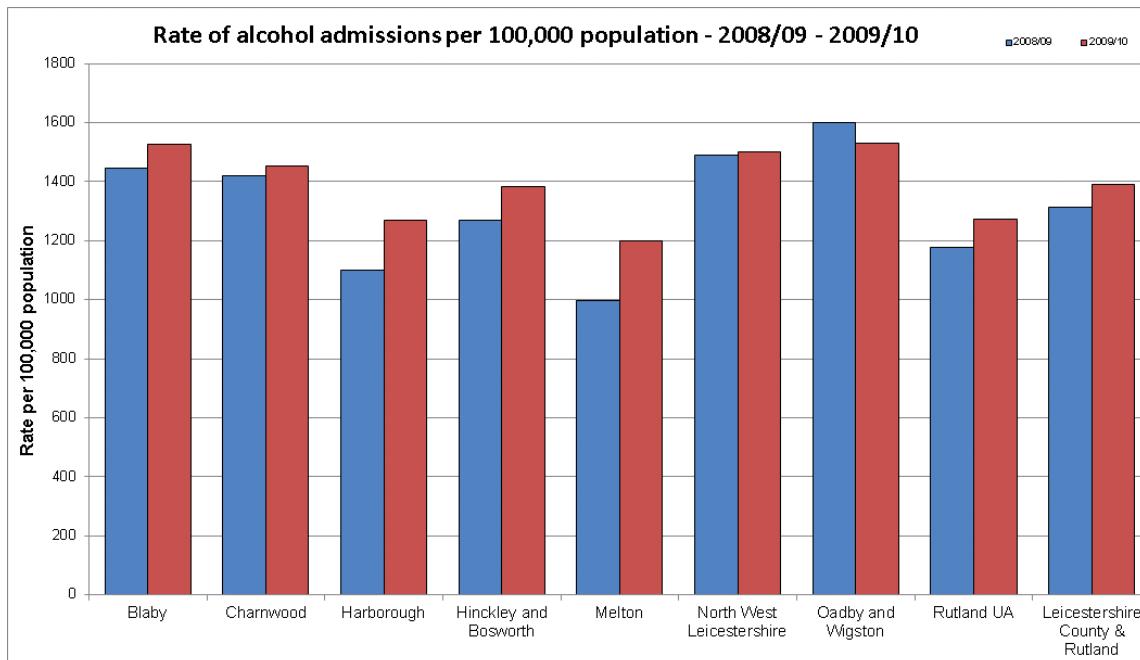


# What does this mean for East Leicestershire and Rutland CCG?

## Early intervention and prevention

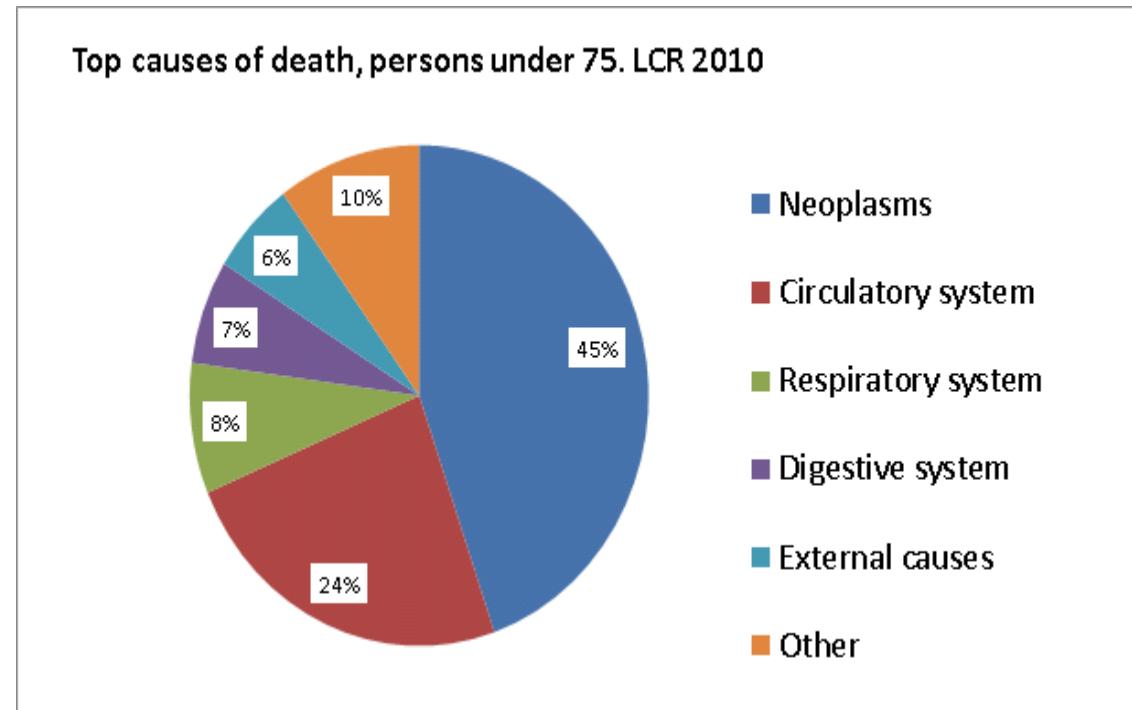
### Alcohol

- In 2009/10 there were 1394 admissions to hospital for alcohol related conditions per 100,000 population in East Leicestershire and Rutland CCG. This is lower than the England average (1743 per 100,000 population.)
- There are estimated to be around 47500 adults in East Leicestershire and Rutland CCG who binge drink (18.3% of the population).



# What does this mean for East Leicestershire and Rutland CCG?

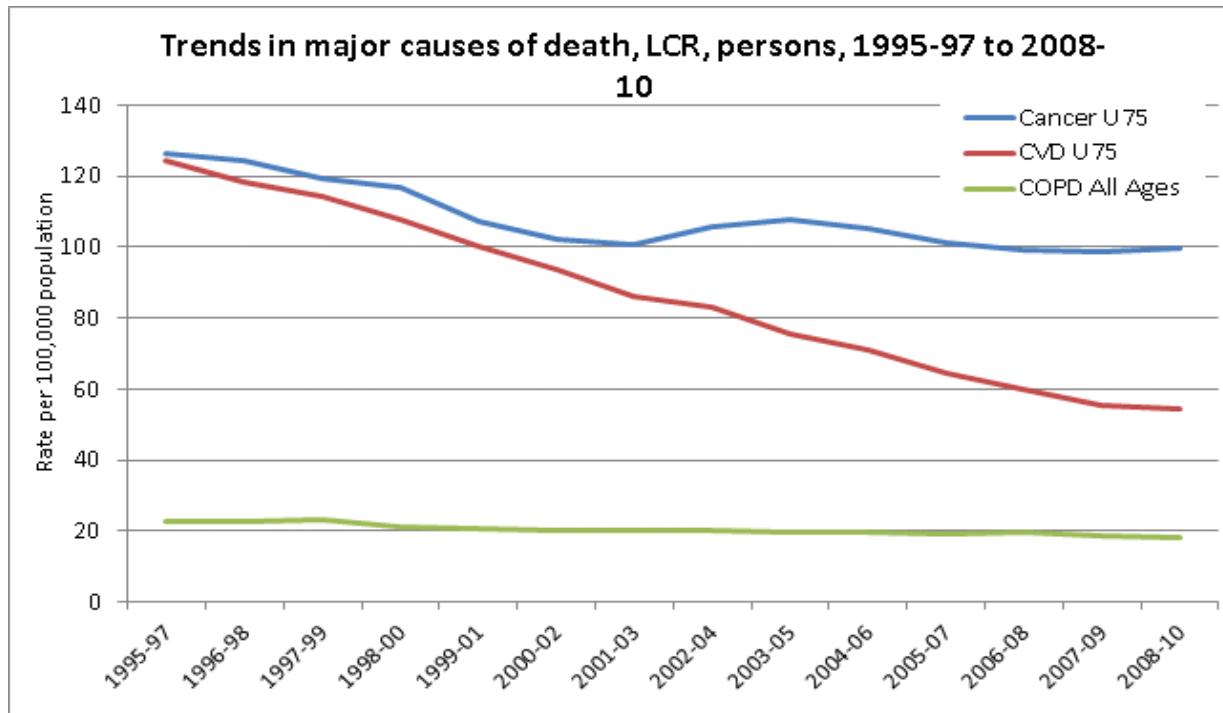
## Burden of ill health



- 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 East Leicestershire and Rutland CCG?

## Burden of ill health



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# What does this mean for East Leicestershire and Rutland CCG?

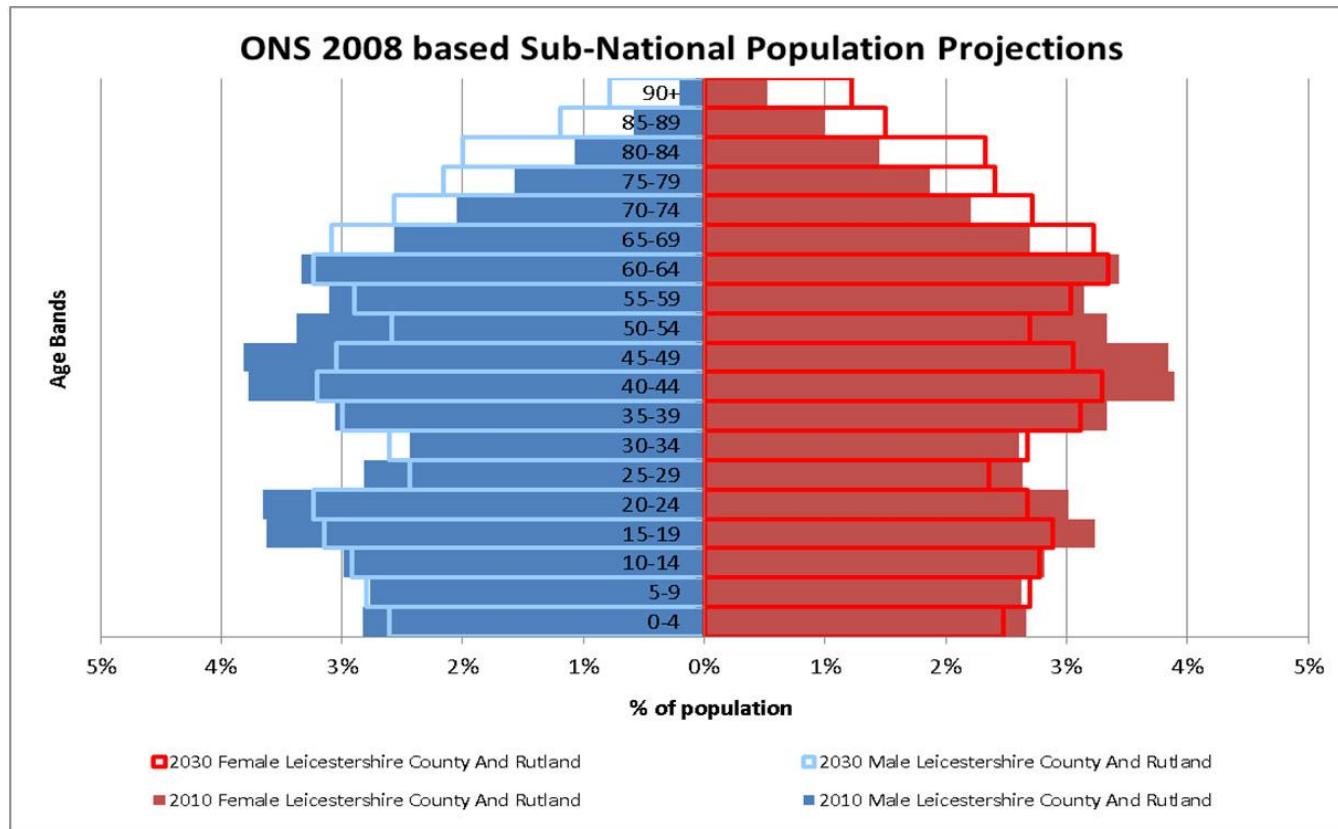
## Burden of ill health

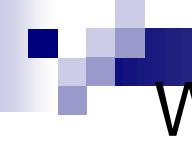
- Mortality rates from circulatory disease, cancer and chronic obstructive pulmonary disease (COPD) in East Leicestershire and Rutland CCG are lower than the England average.
- Comparing modelled estimates of disease to the GP recorded prevalence suggests that in East Leicestershire and Rutland CCG there are approximately:
  - 3000 patients with undiagnosed CHD
  - 37600 patients with undiagnosed hypertension

# What does this mean for East Leicestershire and Rutland CCG?

## Older people

- In 2010 there are approximately 80100 people aged over 60 in East Leicestershire and Rutland CCG, and 16000 aged over 80. The population of East Leicestershire and Rutland CCG aged over 60 is estimated to increase by around 60% by 2030.



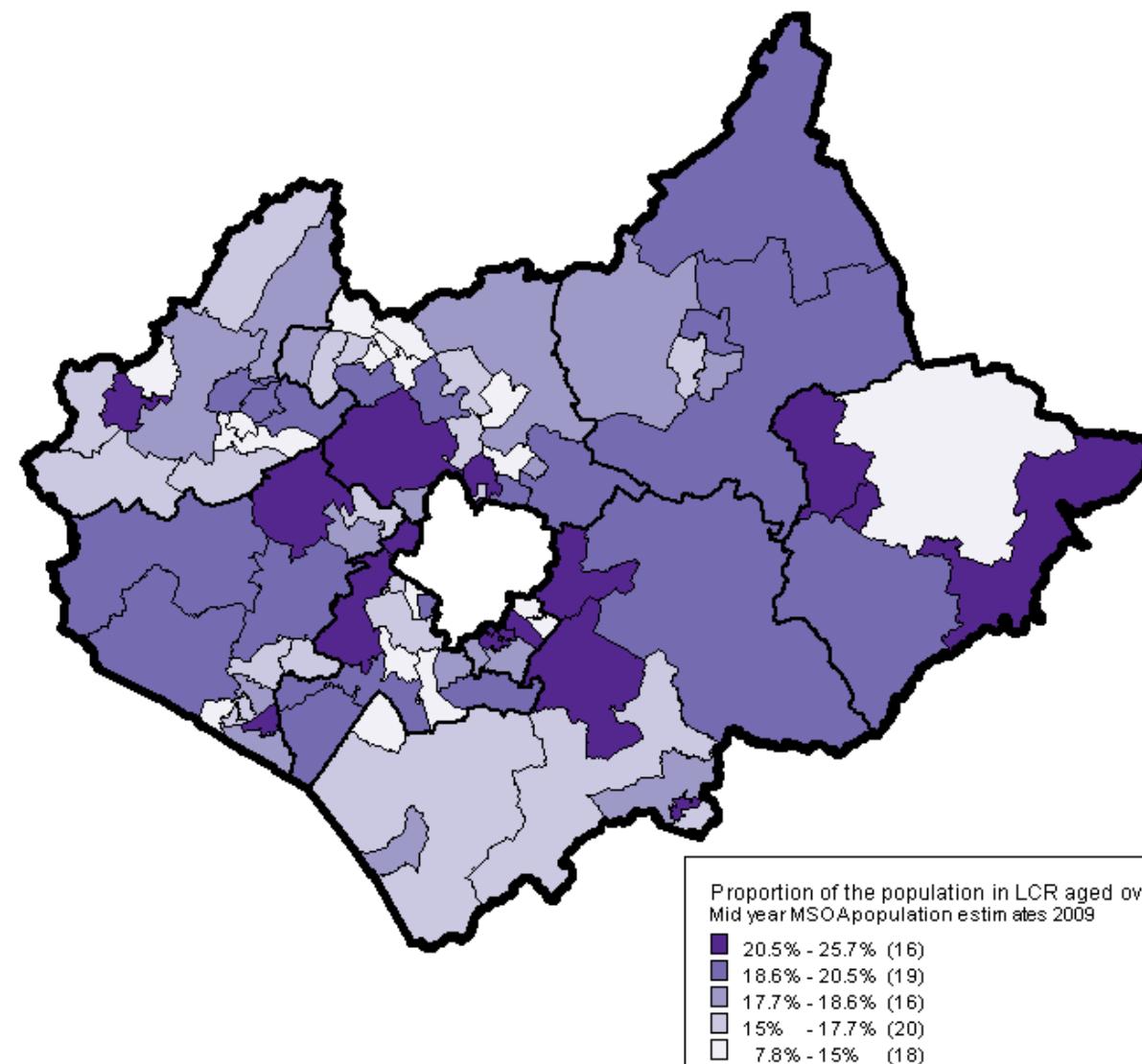


# What does this mean for East Leicestershire and Rutland CCG?

## Older people

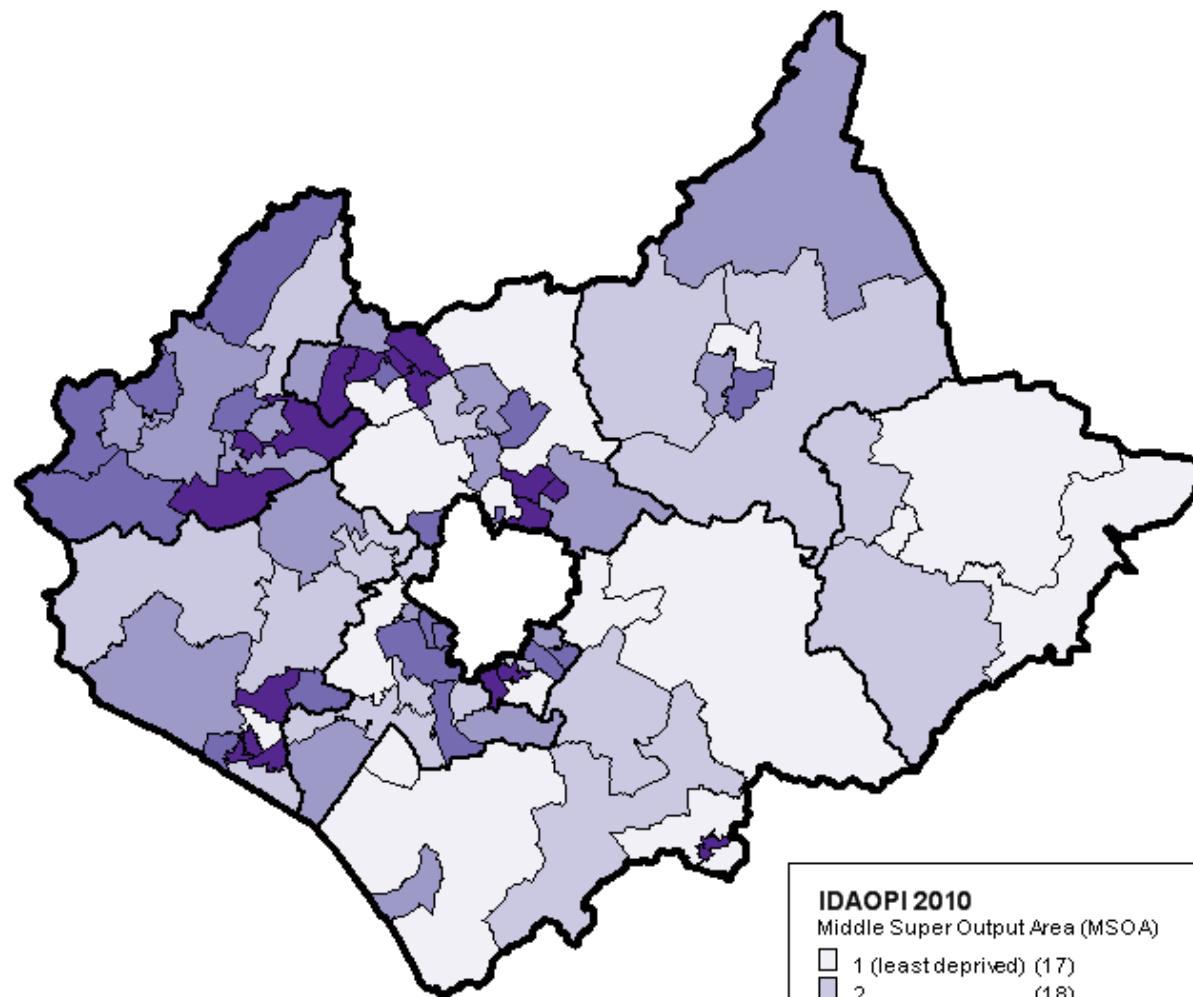
- In 2007-09 life expectancy for men at age 65 in East Leicestershire and Rutland CCG is 19.2 years and life expectancy for women at age 65 in East Leicestershire and Rutland CCG is 21.8 years.
- Around 14000 of the population aged over 75 in East Leicestershire and Rutland CCG are predicted to live alone in 2010, and this number is predicted to increase to 26200 by 2030 (87% increase).
- In 2010 there are estimated to be around 25440 people in East Leicestershire and Rutland CCG over the age of 65 with a limiting long term illness. By 2030 this is estimated to increase to around 42920, an increase of 68.7%.

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



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

Published by Department for Communities and Local Government (DCLG)

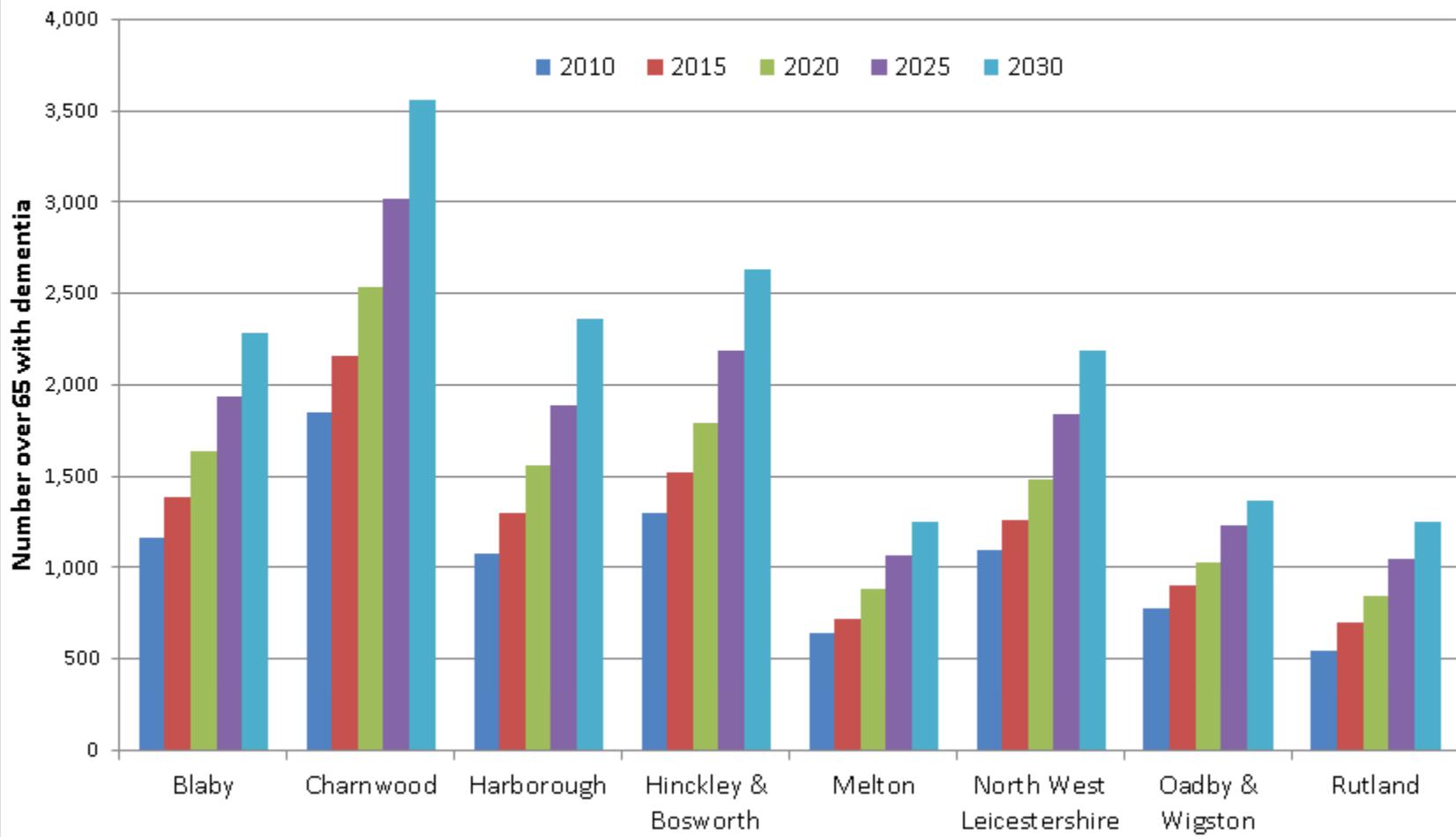


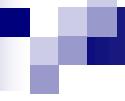
# What does this mean for East Leicestershire and Rutland CCG?

## Impact of the ageing population

- In 2010 there are estimated to be around 4200 people in East Leicestershire and Rutland CCG with dementia. By 2030 this is estimated to increase to around 8500 people, an increase of 103%.
- The Census 2001 estimates that in 2001 there were around 31150 people in East Leicestershire and Rutland CCG who were providing unpaid care. This equates to 10.2% 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 7020 carers aged over 65 in East Leicestershire and Rutland CCG, by 2030 this is estimated to increase to around 10800, a 54% 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 East Leicestershire and Rutland CCG 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 East Leicestershire and Rutland CCG that need to be addressed locally?

# Where can you find the JSNA?

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