

LEICESTER HEALTH AND WELLBEING BOARD

10 OCTOBER 2016

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| Title of the report: | Joint Strategic Needs Assessment (JSNA) 2016 |
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| Presenter: | Rod Moore, Consultant in Public Health, Leicester City Council |
| Purpose of report: For information - to update the Health and Wellbeing Board on progress on the high-level Joint Strategic Needs Assessment (JSNA) 2016. | |
| Key points to note: The JSNA 2016 is designed to be predominantly web-based and iterative in nature, with annual reviews of sections planned. It has been produced by a multi-agency team overseen by the JSNA Programme Board. A summary document, <i>Snapshots: Health and Wellbeing in Leicester</i> has been prepared to both accompany the briefings and promote use of the web pages. This is attached as Appendix A. The infographics in the <i>Snapshots</i> document will be made available on the web pages for downloading and use in presentations of various types. The first block of the Adults' section of JSNA 2016 is the final stages of delivery and will be live on the City Council website shortly. Subjects that will be covered in the first block are listed in Appendix B. The web-pages provide a brief summary of the topic (as a web page), links to a further (PDF) briefing on the topic and to links within, and also external to the council, to relevant plans, profiles and data sources. There are introductory pages which explain the purpose and use of the web-pages. The intention is that each section of the JSNA will be reviewed at least annually. There will further sections published in a second block within 2016/17 and those planned so far for this, are listed in Appendix C. The Children and Young People's (CYP) section of JSNA 2016 is also nearing completion. It too will be published on the JSNA web-pages. There are nine chapters in this CYP section (see Appendix D). There will be a separate briefing on these sections. Both the Adults' and Children and Young people's JSNA sections have involved two sets of engagement with stakeholders. Both sets of engagement have been delivered by VAL, following formal procurement. As further sections are added to the JSNA web-pages the <i>Snapshots</i> document will be updated. It is intended that it will retain its 'infographic' approach to presenting information. | |
| Actions required by the Health and Wellbeing Board members: NOTE the progress made and deliverables planned. | |

Summary of appendices:

Appendix A: *Snapshots: Health and Wellbeing in Leicester*

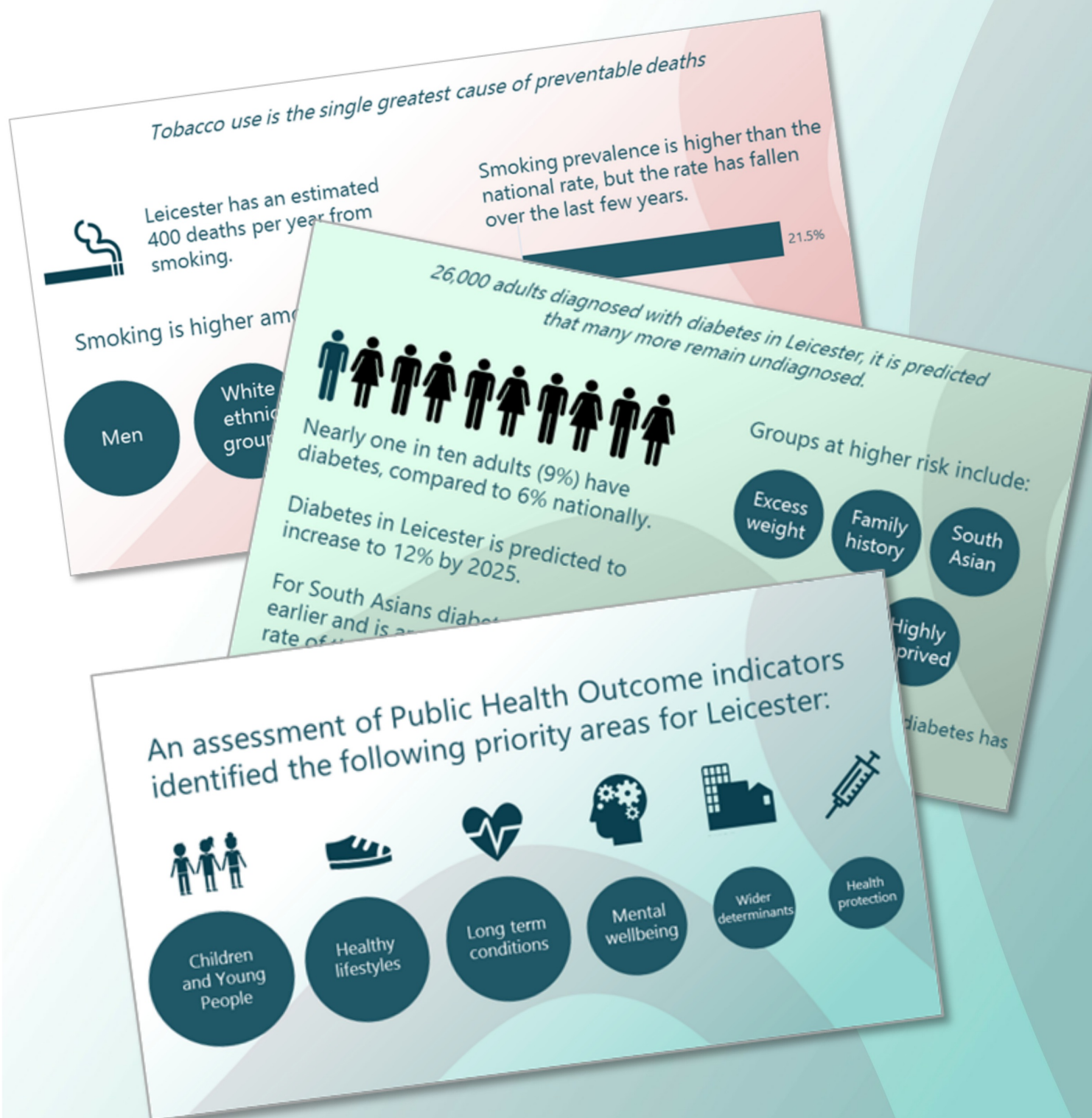
Appendix B: JSNA 2016 – Adults: Topics in the 1st block

Appendix C: JSNA 2016 – Adults: Topics planned for the 2nd block

Appendix D: JSNA 2016 – Children and young people: section topics

Snapshots:

Health and wellbeing in Leicester



JSNA 2016

This short report accompanies the Joint Strategic Needs Assessment (JSNA) pages on the Leicester City Council website www.leicester.gov.uk/JSNA

What's available and why?

The JSNA 2016 is a series of briefings, available at the above web address, which give an overview of topics related to the health and wellbeing of people in Leicester. These briefings are intended as starting points for discussion and consideration which can lead to action. Each briefing provides information on the topic it covers and links to further information, strategies and statistics as appropriate. These links include the more detailed and narrowly focused need assessments (JSpNAs) on specific topics, services, communities or conditions. Beside their relevance to health, social care and public health organisations, it is intended that the briefings will be helpful to those in the voluntary and community sector (and more widely) and supportive of combined efforts to improve health and wellbeing.

These briefings are not therefore a statement of policy of either Leicester City Council or NHS Leicester City Clinical Commissioning Group, or the Leicester Health and Wellbeing Board. The Leicester Health and Wellbeing Strategy presents the priorities for action to improve health and wellbeing which have been approved by the Health and Wellbeing Board and is available from: <http://www.leicester.gov.uk/your-council/policies-plans-and-strategies/health-and-social-care/health-and-wellbeing-board>

Publication

The JSNA 2016 is being put on its web pages in two blocks, the first covering the following.

- Alcohol
- Drugs
- Tobacco
- Obesity
- Sexual health
- Oral health
- Cardiovascular disease
- Diabetes
- Cancer
- Respiratory disease
- Dementia
- Mental health and wellbeing
- Learning disabilities
- End of life care
- Adult social care
- New arrivals

A second block will be added later in 2016 and will include the following.

- Children and young people
- Physical and sensory disabilities
- Physical activity
- Lesbian, gay, bisexual and transgender populations
- Homelessness

Your feedback is welcomed

The briefings on the web pages, and this document, will be reviewed at least annually and we welcome your comments and suggestions for improvement of specific briefings. Please send your comments to jsna@leicester.gov.uk or telephone 0116 454 2023.

Leicester has a younger age profile when compared to England

Leicester
population:
337,653

| Age | 2014 | 2038 |
|-------|------|------|
| < 19 | 27% | 26% |
| 20-64 | 61% | 58% |
| 65+ | 12% | 16% |

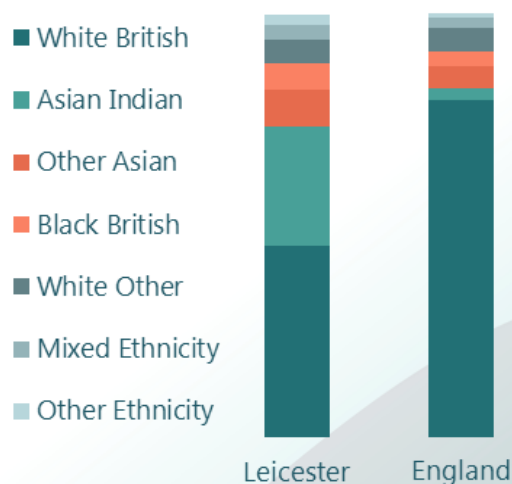


The population is forecast to rise at a faster rate than England, reaching 404,000 by 2038.

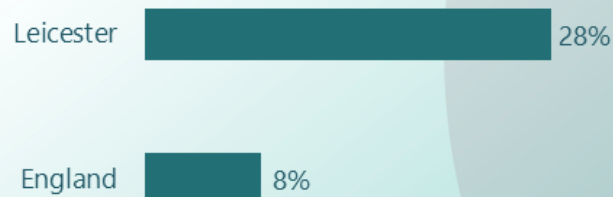
The proportion of people aged over 65 is forecast to increase.

Leicester is diverse

Ethnicity of Leicester and England



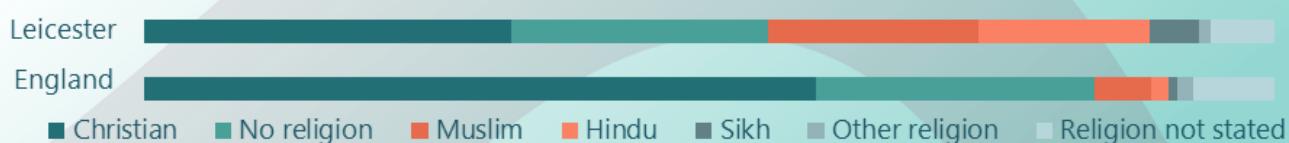
People whose main language is not English



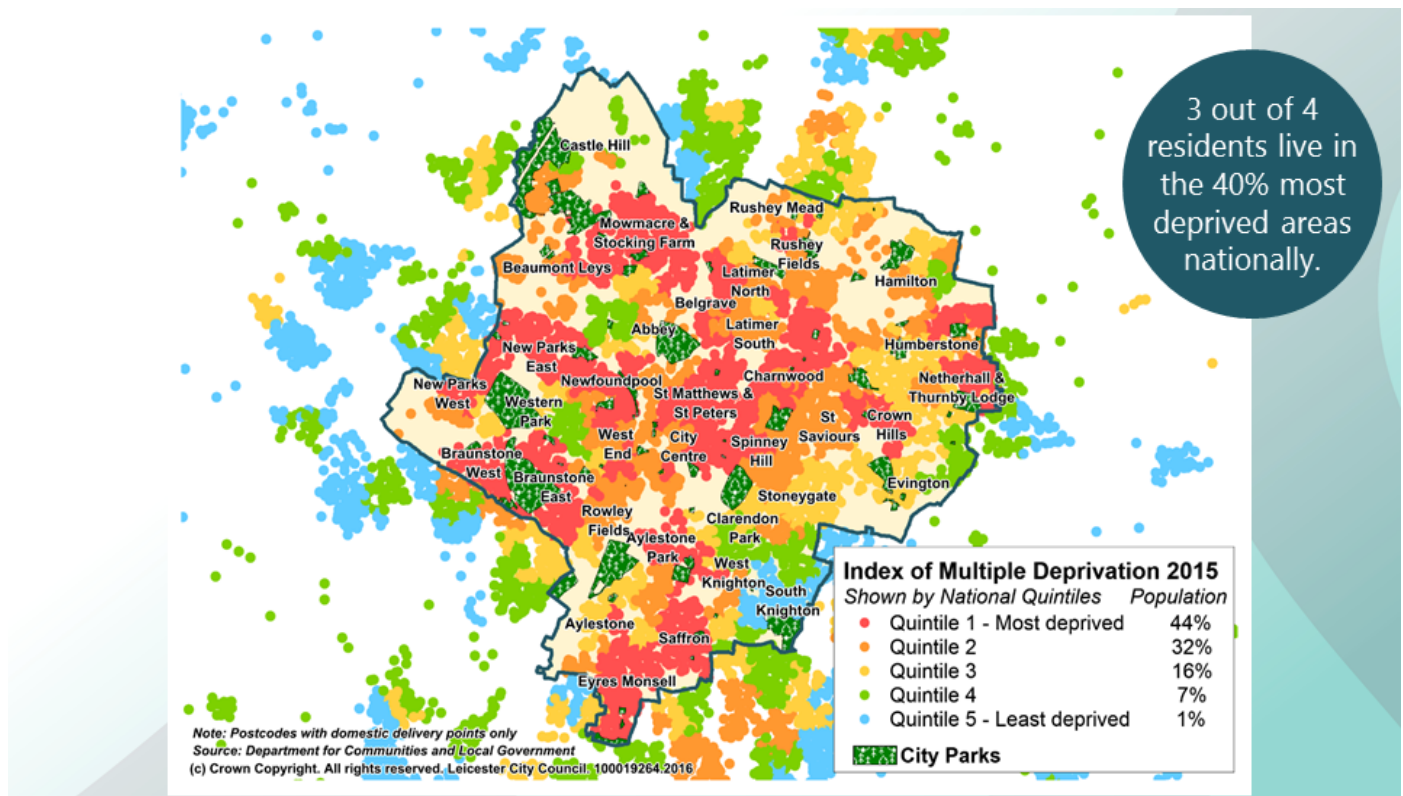
One in four households include someone with a disability or longterm illness

Leicester's LGBT community is estimated at 4%

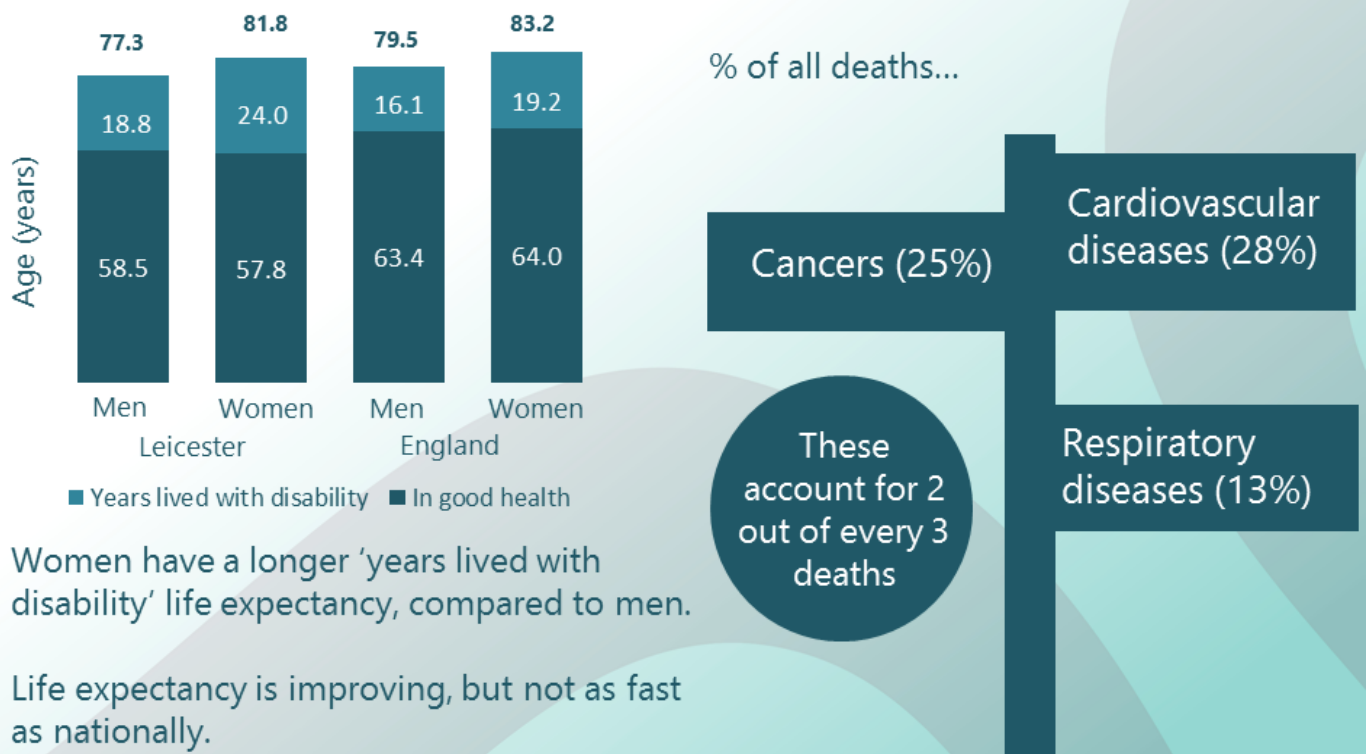
Religion



Leicester has areas of high deprivation



Leicester has a lower healthy life expectancy



Key issues

An assessment of Public Health Outcome indicators identified the following priority areas for Leicester:



The key areas for improving health and wellbeing in the city are:

Children and young people. Addressing the health and wellbeing issues faced by children and young people which have a significant impact on all areas of their development and life chances.

Lifestyles and prevention. Addressing the modifiable behaviour (e.g. smoking, poor diet, inactive lifestyle) and beliefs, which increase the likelihood of poorer health and wellbeing, long term conditions, increased use of health and social care services and which can lead to higher risk of premature death in mid- and later life.

Long term conditions. Reducing the impact of chronic health conditions which are, in large part, related to the major causes of early death in the city, through prevention, management and care.

Mental wellbeing. Addressing the actions which support health and wellbeing through the development of personal resilience, the ability to enjoy life and to adapt positively in the face of personal and social adversity.

Wider determinants of health and wellbeing. Addressing factors, beyond individual lifestyles, which drive poorer health and wellbeing and which require solutions based on the organised efforts of the community and wider society.

Health protection. Ensuring that systems which protect the public from threats to their health and wellbeing are in place and are effective.

Overview of briefings available on: www.leicester.gov.uk/jsna

Children and young people

Children and young people under 20 years old make up a quarter of Leicester's population



Over two thirds of Leicester's school children are from minority ethnic backgrounds.

| What's going well? | What needs improving? |
|---|---|
| <ul style="list-style-type: none"> Higher rates of childhood immunisations Higher rates of breastfeeding Lower hospital admissions for injury, mental health and self-harm | <ul style="list-style-type: none"> Infant mortality and low birthweight Obesity amongst primary school children School readiness of children at end of reception |

When compared with England

The Children and Young People's JSNA will be released later in 2016.

Lifestyle factors: Tobacco

Tobacco use is the single greatest cause of preventable deaths



Leicester has an estimated 400 deaths per year from smoking.

Smoking prevalence is higher than the national rate, but the rate has fallen over the last few years.

Smoking is higher amongst:



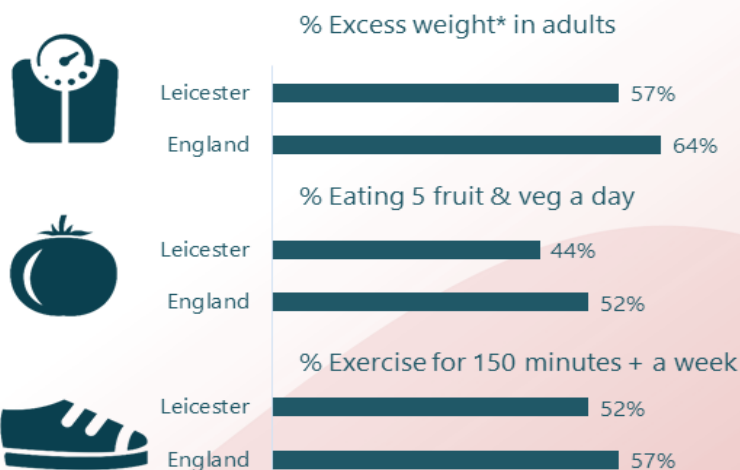
The Stop Smoking Service has a higher quit rate than nationally.

Local services include

- Stop Smoking Service aims to support people to stop smoking successfully, which includes targeted support for pregnant smokers and those with infants.
- Other actions include addressing cheap and illicit tobacco, encourage smoke-free homes, provide support to lifelong smokers with long-term conditions, and deliver treatment for smokeless tobacco.

Obesity

Obesity is a high risk factor for type 2 diabetes, stroke, heart disease and cancer



*Excess weight refers to those overweight or obese

Leicester has a better rate for excess weight but a worse rate for fruit and veg consumption.

The population achieving at least 150 minutes physical activity is worse but improving.

Obesity is higher among:

Women

Black
British

35-64
age
group

Local services include

- Services include universal services, lifestyle interventions, specialist interventions and bariatric surgery.
- Related lifestyle services include physical activity services in Leicester and the planned Healthy Leicester lifestyle hub.

Alcohol

Alcohol misuse is the third biggest lifestyle risk factor after smoking and obesity.

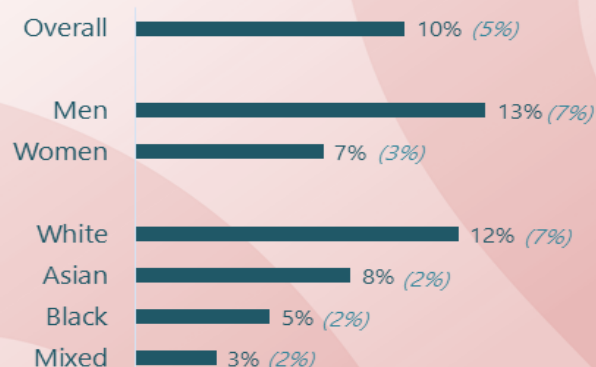
On average, half of Leicester's adult population drink less alcohol than nationally.

Harm is significantly higher than nationally, demonstrated by alcohol related hospital admissions, mortality and crime.

There has been a reduction in hospital admission rates related to alcohol since 2010/11.



% of Leicester adult drinking population drinking above the recommended units (as a % of all Leicester adults):



Local services include

- Awareness raising activities, brief interventions, and specialist treatment and support services.
- Specific services for vulnerable populations such as young people, those with dual diagnosis, treatment resistant drinkers, those in the criminal justice system and those in recovery.

Sexual health

Includes contraception, and testing and treatment of sexually transmitted infections.



The two most common sexually transmitted infections are chlamydia and genital warts.

Those at highest risk of poor sexual health include:

Men who have sex with men

Sex workers

Victims of domestic violence

Higher rate of newly diagnosed HIV cases than England (per 10,000 aged 15-59).



Over half of HIV diagnoses in Leicester are late, but this is improving.



Local services include

- The Integrated Sexual Health Service provides contraception, sexually transmitted infection testing and treatment, outreach work, psychosexual counselling and a young people's service.
- GP's provide contraception, while pharmacies provide free emergency hormonal contraception to under 25s.
- A sexual assault and rape centre is available to support men and women.
- Specific 'at risk' targeted services are also available.

Oral health

Oral health is an integral part of overall health and wellbeing.

Adults in Leicester report significantly poorer oral health than England.

Oral health problems are largely preventable.

Risk factors for oral disease include:

- High frequency of sugar in diet
- Smoking or chewing tobacco
- Excessive consumption of alcohol
- Poor oral hygiene
- Irregular dental attendance



Oral health issues in the city include...

Higher incidence of oral cancer

Fewer adults going to dentist

Lower satisfaction with dental services

Affordability of NHS dental charges is an issue

Local services include

- Leicester has an oral health promotion service.
- NHS dental practices deliver the majority of oral health services.

Drugs

Drug misuse is responsible for 1 in 7 deaths among people in 20s and 30s (2014)



Leicester has a higher rate than England of Opiate/Cocaine users and only half are in treatment.

Overall, drug use in the population is low and has reduced in the last 10 years.

Successful completion of treatment for both opiate and non opiate drug use is similar to national rates.

Groups more likely to misuse drugs:



Groups less likely to access treatment:



Local services include

- A community based service and another for those in the criminal justice system.
- Specialist detoxification and residential rehabilitation for a small number of local users each year.
- A housing related service supports those at risk of homelessness.
- Peer support and mutual aid programmes to encourage healthier lives, and supporting abstinence.

Conditions: Cardiovascular disease (CVD)

CVD include stroke and disorders of the heart, and accounts for a third of all deaths nationally.



Over one in four deaths (28%) are from CVD in Leicester.

About 10,000 people in Leicester have diagnosed coronary heart disease.

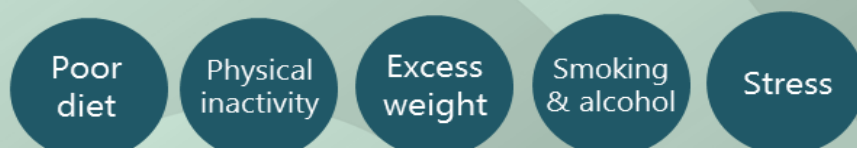
4,600 people are recorded as having had a stroke or transient ischaemic attacks (TIA).

CVD is a major contributor to the Leicester and England life expectancy gap.

Risk is higher for:



Modifiable risk factors include:

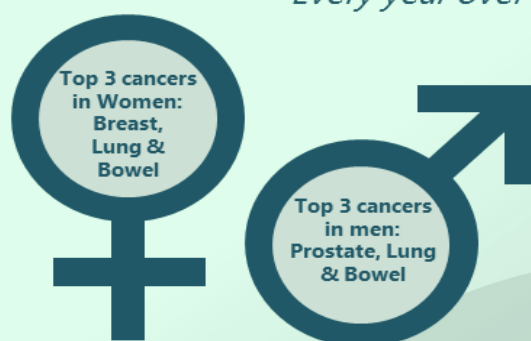


Local services include

- Three main service areas include prevention, early diagnosis and management.
- NHS health checks help ascertain cardiovascular conditions in the 40+ population in Leicester.
- Integrated Cardiovascular Service which develops capability within primary care to seek out, detect, diagnose and treat adult patients who are at higher risk of atrial fibrillation and heart failure.

Cancer

*Cancer is the second most common cause of death in Leicester.
Every year over 1,100 people are diagnosed.*



4,800 cancer patients on GP registers, 1.3% of the population.

Cancer accounts for 25% of all deaths in Leicester and a third of deaths for the under 75s.

Cancer issues in the city include:

Low survival rates, but rising

50% of cancer diagnoses are late

Uptake of screening is lower than national rates

Breast and Bowel cancer survival is low

There has been a reduction in cancer mortality rates in under 75s.

Local services include

- Prevention, early diagnosis and treatment are the main focus.
- Prevention activity involves tackling modifiable risks such as smoking and obesity, and raising awareness of non-modifiable risks such as family history.
- Early diagnosis via breast, bowel and cervical cancer screening programmes and GP referrals.

Respiratory disease

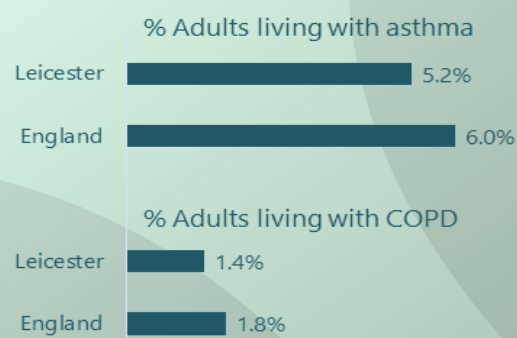
1 in 7 in the UK are affected by a respiratory disease, such as chronic obstructive pulmonary disease (COPD) or asthma.



About one in seven deaths (13.7%) are attributed to respiratory diseases.

Asthma affects all ages.

COPD more likely to affect men and the over 40s.



There has been a reduction in the under 75 mortality rate from respiratory disease.

Local services include

- Prevention activity through the Stop Smoking Services.
- Ascertainment involves diagnosis, mainly in primary care, with a focus on detection of chronic obstructive pulmonary disease (COPD) and asthma.
- Specialist nursing service delivered by the local, community trust, serving housebound patients and providing clinics in community hospitals.

Diabetes

26,000 adults diagnosed with diabetes in Leicester, it is predicted that many more remain undiagnosed.



Nearly one in ten adults (9%) have diabetes, compared to 6% nationally.

Diabetes in Leicester is predicted to increase to 12% by 2025.

For South Asians diabetes develops earlier and is around four times the rate of the white population.

Groups at higher risk include:

Excess weight

Family history

South Asian

Older people

Highly deprived

Prevalence of recorded diabetes has increased.

Local services include

- GP practices provide diabetes services, a specialist service is offered to those with complex needs.
- Specialist services include in-patient care, insulin pumps, renal, foot, children/adolescents, pregnancy-related, Type 1 and rare/complex diabetes care.
- There are also local health professional and patient educational programmes.

Dementia

Dementia is caused by a number of diseases that affect the brain.



Dementia cases are set to rise in the future, a reflection of our ageing population.

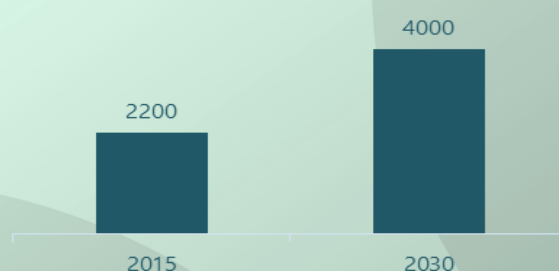
It is important to:

Diagnose cases early

Improve support for carers

Personalise care plans

Diagnosed and expected dementia cases in Leicester



It is expected that there will be 800 new cases a year.

More people over 65 have dementia but younger people get dementia too.

Local services include

- Memory assessment, secondary care at the acute and community trusts, primary and community health and social care services and local nursing and residential homes.
- Increasingly, services are designed on the basis of need, following the patient journey from early diagnosis to end of life care.

Mental health and wellbeing

Common mental health problems are set to increase by 10% over the next 10 years.

18-64
year olds



Over 65
year olds



One in four working age adults and one in ten older people have a common mental health problem.

About 1 in 100 have a serious mental health illness.

Mental health issues in the city include:

Under
diagnosis of
depression

Higher rates
of hospital
admission for
mental illness



Worse than
average
outcomes

Local services include

- Service providers include Child and Adolescent Mental Health Services, Open Mind Improving Access to Psychological Therapies, in-patient and specialist mental health services, GPs.
- Services range from initial recognition and assessment, advice, support and treatment of complex disorders.

End of life care

End of life care helps all those with advanced, progressive or incurable illness to live as well as possible until they die.



About three quarters of deaths in Leicester (1,725 - 2,050 people) will require palliative care.

An additional 400 deaths forecast each year, of which 250 may use palliative care services.

Caring for someone can be:

Physically
demanding

Mentally
challenging

Highly
stressful

Patients on the palliative care register with a care plan

70%

Patients with a care plan who died in their preferred place.

88%

Local services include

- Adult end of life care services are distributed across primary and secondary healthcare, local authority adult social care services and the voluntary and independent sectors.
- Community care, supporting people in the last days of life, include specialist palliative care provided by LOROS, the Hospice At Home service delivered by Marie Curie, Macmillan Nurses, LOROS specialist nursing and community nurses.

Learning disabilities

National estimates are that 20 in every 1,000 people have a mild to moderate learning disability with an additional 3-4 people in every 1,000 having severe learning disabilities.



In Leicester, nearly 2,000 people are registered with learning disabilities (LD) through their GP.

However, in 2015 it was estimated that the real figure is over 6,000.

Life expectancy is lower for people with learning disabilities, but increasing.

Prevalence is higher amongst:

15-19
year olds

40 – 59
year olds

White
ethnic
groups

Support
available for
people with LD
to live in their
own home

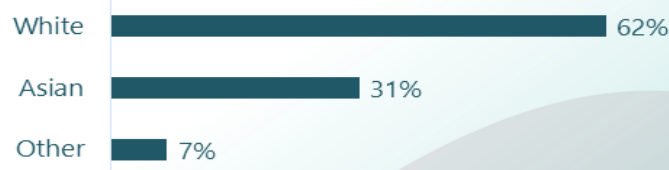
Local services include

- Personalised services, for example, personal budgets, allowing client purchasing of services; different supported living options.
- Employment-Plus, a specific Council-based employment service aimed at supporting people with learning disabilities into employment; health and social care support for transition from children's to adults' services; and support of carers.

Adult social care

Over 5,000 adults receive long term support provided by Leicester City Council

Services are personalised to support independence, and ability to live in own home where possible.



Primary support reasons include:

| 18-64 | 65+ |
|--|---|
| <ul style="list-style-type: none"> • Learning disabilities • Physical support • Mental health | <ul style="list-style-type: none"> • Physical support • Mental health • Memory/Cognition |

Future challenges

A reducing
budget

Care Act
requires
support for
carers



Higher
demand for
social care
support

Increasing
and ageing
population

Local services include

- Support for nutritional, personal care, home habitation, social, safety, work, education and training, and caring needs.
- People eligible include older people (65+), people with physical and/or sensory disabilities, learning disabilities, mental health difficulties, HIV/AIDS, drug or alcohol problems; long-term or terminal illness or those caring for people who are in any of these groups.

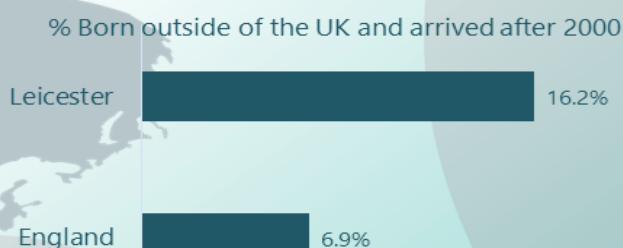
New arrivals

New arrivals are a substantial mix of populations with differing health and social care needs.



Currently there are about 1,000 asylum seekers in Leicester, and this number is increasing.

The stressful circumstances by which asylum seekers arrive in the UK means that the prevalence of mental ill health is high.



Being younger, healthier, with fewer children, economic migrants tend to be infrequent users of healthcare.

However, the use of emergency care is higher among this group.

Local services include

- Services offer accommodation, emergency support and provisions, support in accessing services, information, advocacy, skills enhancement and training, and particular support to young people, notably unaccompanied young asylum seekers.

Sources

| | |
|-------------------------------|---|
| Leicester population | ONS mid-year estimates, 2014, ONS population forecasts (2014 based), Census 2011, Leicester Health and Wellbeing Survey 2015 |
| Leicester deprivation | Department for Communities and Local Government, IMD 2015. |
| Life expectancy and mortality | Office for National Statistics mortality data 2012-14, Life expectancy and Healthy Life expectancy at birth 2012-2014 |
| Children and Young People | Children's JSNA briefings 2016 (forthcoming) |
| Tobacco | Local Tobacco Control Profiles, Public Health England (PHE), 2015, Health and Social Care Information Centre: Statistics on Smoking, 2015 |
| Obesity | Active People Survey, Sport England, 2015. |
| Alcohol | Health and Wellbeing Survey 2015, Local Alcohol Profiles for England: Public Health England 2015 |
| Sexual Health | JSNA online briefing: Sexual health, Sexual and Reproductive Health Profiles: Public Health England, 2015 |
| Oral Health | Leicester Dental Survey 2015 |
| Drugs | Crime Survey for England and Wales 2013/14, Public Health Outcomes Framework Indicators 2015 |
| Diabetes | NHS Quality Outcomes Framework data March 2015, Diabetes prevalence model; Yorkshire and Humber Public Health Observatory |
| Coronary Heart Disease | NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015 |
| Cardiovascular disease | NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015 |
| Cancer | NHS Quality Outcomes Framework data March 2015, Health and Social Care Information Centre, Office for National Statistics mortality data |
| Respiratory disease | NHS Quality Outcomes Framework data March 2015, Public Health Outcomes Framework Indicators 2015 |
| Dementia | NHS Quality Outcomes Framework data March 2015, Dementia UK, The full report 2007 |
| Mental health | Projecting Older People Population Information, Projecting Adult Needs and Service Information, http://www.leicester.gov.uk/media/178811/mental-health-jsna.pdf |
| End of life care | PHE: End of Life Care Profiles, Where people die (1974–2030): past trends, future projections and implications for care B. Gomes and I. Higginson, Palliat Med 2008; 22; 33 |
| Learning disabilities | NHS Quality Outcomes Framework data March 2015, Age-specific standardised mortality rates in people with Learning Disability. Journal of Intellectual Disability Research |
| Adult Social Care | Leicester City Council, Service data. |
| New arrivals | ONS Census 2011, Future Vision Coalition, 2009 |
| Infographics | Gurjeet Rajania, Public Health Analyst, Division of Public Health, Leicester City Council and Noun Project. |

Stay involved

If you would like to join the JSNA email group and be kept up to date with changes and additions to the JSNA web pages, please contact jsna@leicester.gov.uk

Sandie Harwood, Leicester City Council, Division of Public Health, 4th Floor, Halford Wing, City Hall, 115 Charles Street, Leicester. LE1 1FZ., Tel: 0116 454 2023.

Appendix B: JSNA 2016 – Adults: Topics in the 1st block

- Lifestyle Factors
 - Alcohol
 - Drugs
 - Tobacco
 - Obesity
 - Sexual health
 - Oral health
- Conditions, Populations and Services
 - Mental Health and wellbeing
 - Dementia
 - Learning disabilities
 - New Arrivals
 - Cardiovascular Disease
 - Diabetes
 - Cancer
 - Respiratory disease
 - End of life care
 - Adult social care

Appendix C: JSNA 2016 – Adults: Topics planned for the 2nd block

- Lifestyle Factors, Conditions, Populations and Services
 - Children and young people
 - Physical and sensory disabilities
 - Physical activity
 - Lesbian, gay, bisexual and transgender (LGBT) populations
 - Homelessness

Appendix D: JSNA 2016 – Children and young people: section topics

- Introduction
- Demography
- Families of interest
- Pre-conception and pregnancy
- Early years (0-4 years)
- School years (5-9 years)
- Adolescence (10-14 years)
- Young adulthood (15-19 years)
- Adulthood (20-24 years)