

JSNA Annual Summary 2019 & Housing JSNA

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Joint Strategic Needs Assessment Annual Summary 2019

A life course approach



Introduction

- The JSNA process collectively paints the ‘big picture’ view of current and future health, wellbeing and care needs of people in Worcestershire.
- The report aims to highlight potential issues which may need further investigation and action.
- Specific indicators and data are presented in the report around:
 - newly identified and persistent issues
 - review of issues identified in last year’s JSNA annual summary
 - indicators showing good performance

Key points to note

Compared to England, Worcestershire performs well on many measures of health and wellbeing.

Life expectancy is higher than the England average for both females and males, and deaths from causes considered preventable are significantly lower in Worcestershire than England.

However, where measures are better than England this shouldn't stifle ambition to continue to improve them. It should also be remembered that Worcestershire is a relatively affluent County in England and therefore indicators are often expected to be better.

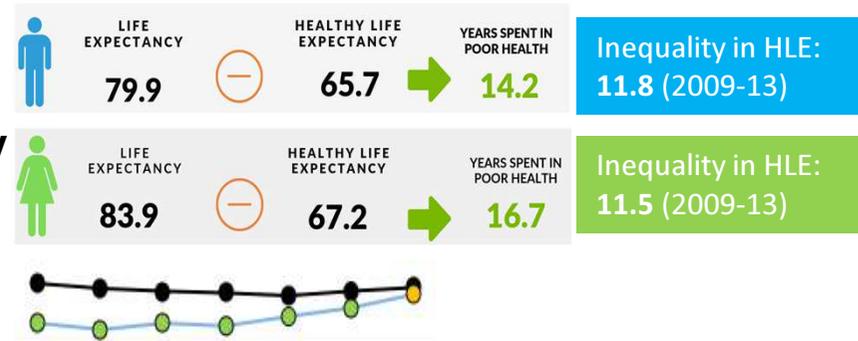
Where Worcestershire performs much better than England, this can mask underlying differences in outcomes between the most and the least affluent residents.

Worcestershire indicators showing positive trends



Emerging issues

- Increasing inequalities in life expectancy
- Upward trend in killed or seriously injured on the roads
- Wide variation in uptake in cancer screening programmes between GP practices
- Upward trend in emergency re-admissions, some of which may be avoidable.
- Upward trend in smoking in pregnancy which increases risk of health problems for mothers and babies.
- Adult excess weight is trending upwards (65% overweight or obese) - significantly higher in Worcestershire than England



Bowel Cancer Screening: 21 out of 70 (30.0%) practices in Worcestershire did not meet the national screening target of 60%



Nationally, the rate of emergency re-admissions has been increasing. This trend has also been seen locally and all Worcestershire Clinical Commissioning Groups (CCGs) have seen a significant increase in emergency re-admissions since 2013.

12.8%

OF PREGNANT WOMEN SMOKE. THIS IS SIGNIFICANTLY HIGHER THAN THE ENGLAND AVERAGE, AND IS INCREASING.



Persistent issues

- **Antibiotic prescribing in primary care** has remained consistently higher than England, but is showing a declining trend
- **Persistent areas of poor air quality**
- **Significant inequality in school readiness**
- **Significant inequality in educational outcomes for those with free school meal status**
- **Numbers of children needing social care** are continuing to rise
- **Significant children's oral health inequality**
- **Poor breastfeeding initiation rates**
- **Significant rise in deaths from drugs misuse**



1600 cases of COPD / CVD by 2030

21%

is the average gap in attainment at KS1 for Children receiving Free School Meals

AS AT 31ST MARCH 2018 THERE WERE

793

CHILDREN IN CARE

There is a higher rate of children in care compared to England

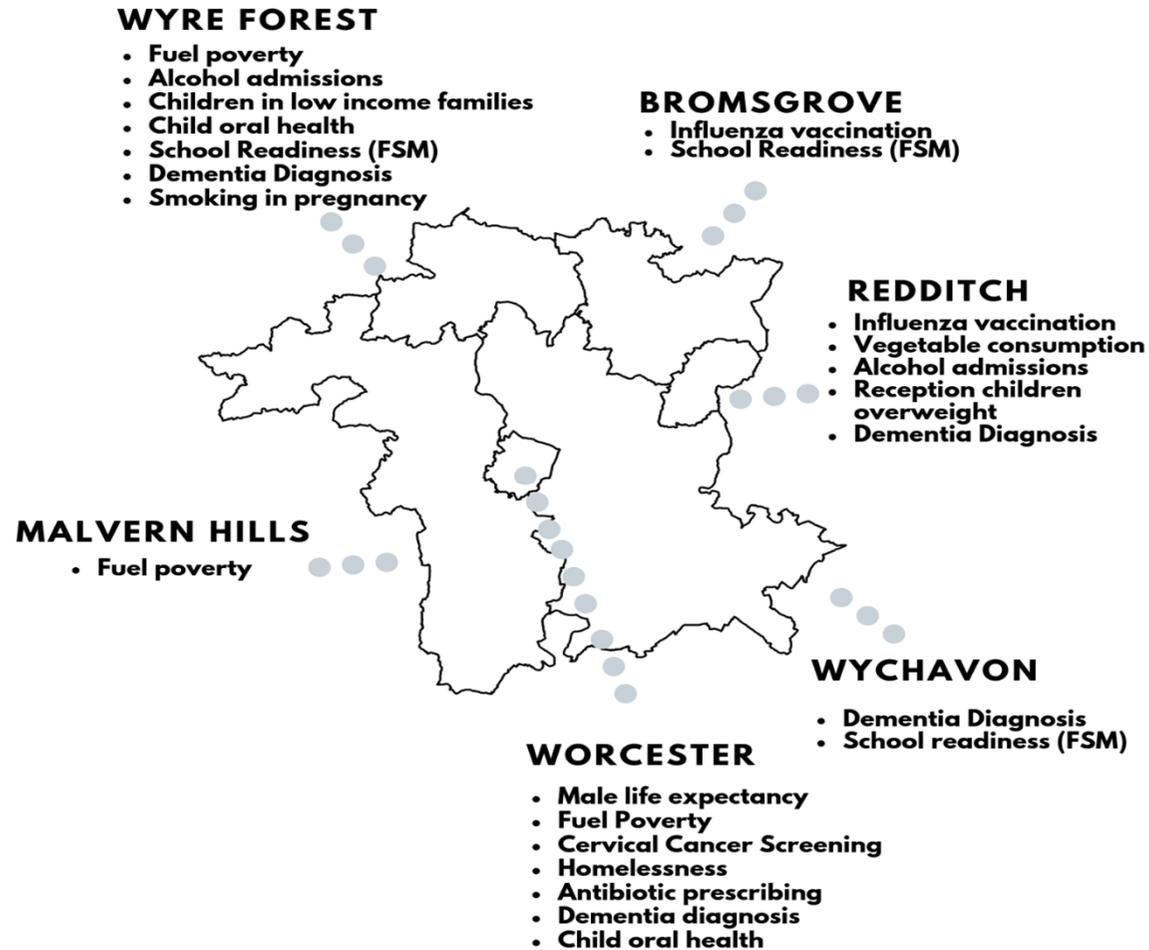
WORCESTERSHIRE: 68/10,000 0-17YRS

ENGLAND: 64/10,000 0-17YRS

Figure 38. Percentage of Five-Year Olds With any Dental Decay (2016/17)



District data – worse than England



Interactive dashboards

Dashboard Information (Power BI Data)

Please note: some data on these Power BI dashboards is currently not compatible with screen readers.

Health & Well-being Board Strategy
Dashboard – County Data

Health & Well-being Board Strategy
Dashboard – District Data

Worcestershire Population and
Projections

Children and Young People Dashboard

Air Quality Dashboard

Local Health

<http://www.worcestershire.gov.uk/jsnapublications>

Housing JSNA headlines

Key Developments



This report has been produced against background of increased interest in the link between housing and health and some national initiatives including:

- **2018 PHE MoU document** *Improving Health and Care through the home: A National Memorandum of Understanding*. It sets out:
 - A shared commitment to joint action across sectors,
 - principles for joint working,
 - the framework for designing and delivering healthy homes, communities and services
 - success criteria to deliver and measure impact.
- **Building regulations/EPC guidelines**- changes to improve accessibility of homes and energy efficiency.
- **Homelessness legislation**- increased duties for local authorities
- **Planning for Health**- Health Impact Assessment

Contributors to this report

- Worcestershire County Council representatives.
- District council representatives.
- NHS Redditch and Bromsgrove, South Worcestershire and Wyre Forest Clinical Commissioning Groups
- Worcestershire Healthwatch.

Link between housing and health



WIDER DETERMINANTS OF HEALTH



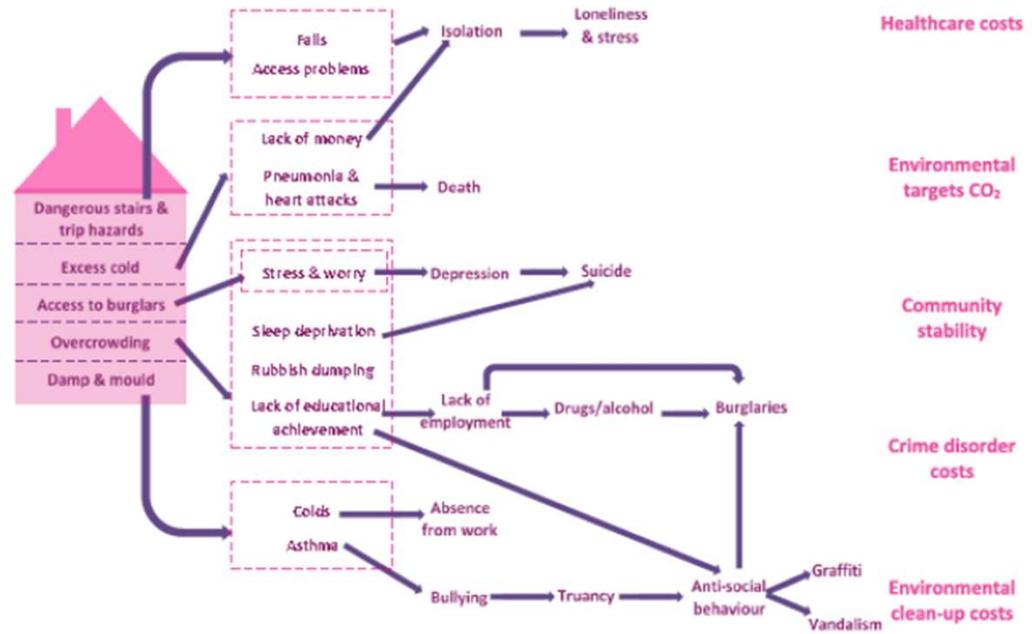
EVIDENCE STRONGEST FOR COLD HOMES AND FUEL POVERTY HAVING ADVERSE EFFECTS ON BOTH MENTAL AND PHYSICAL HEALTH.



OTHER HEALTH IMPACTS INCLUDE FALLS, RESPIRATORY CONDITIONS AND MENTAL HEALTH (DEPRESSION AND ANXIETY)

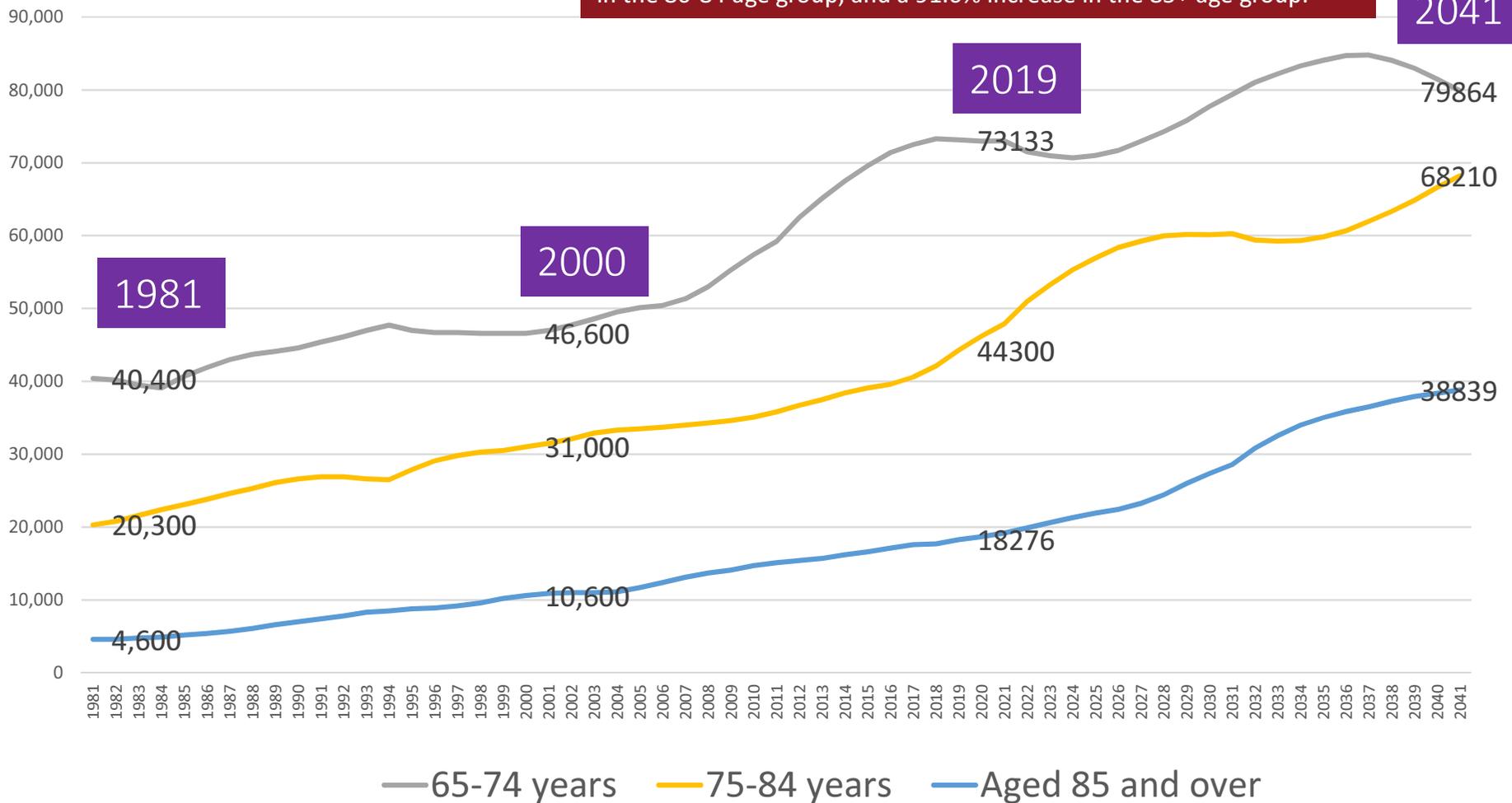


HOMELESSNESS AND ROUGH SLEEPING CAN RESULT IN MULTIPLE ADVERSE PHYSICAL AND MENTAL HEALTH IMPACTS.



Worcestershire population estimates and projections

Between 2019 - 2035, it is projected that there will be a 46.8% increase in the 80-84 age group, and a 91.6% increase in the 85+ age group.



Key indicators

The Worcestershire figures for most public health indicators related to housing are similar to England. However, we might expect a relatively affluent county such as Worcestershire to have better values.

Homeless young people is the only public health indicator which is significantly worse than England. Fuel poverty, overall homelessness and housing affordability measures are slightly worse than England.

	Period	Worcestershire	Trend	England
Fuel Poverty	2016	11.5%	Improving	11.1%
Overcrowded Households	2011	2.7%	-	4.8%
Discharge from Hospital (still at home 91 days following discharge) (65+)	2017/18	81.4%	Improving	82.9%
Statutory Homelessness (rate per 1000)	2017/18	2.7	Flat	2.4
Homelessness (young people aged 16-24)	2017/18	0.68	Improving	0.52
Housing Affordability Ratio	2016	8.1	-	7.2

Summary of findings (1/2)

Housing and health issues pertinent to older people include falls prevention, accessibility of buildings, discharge for hospital, mental health and helping people to die at home.

- Large proportion of non-decent housing in Worcestershire, ranging from 26.6% in Redditch to 44.0% in Malvern Hills (2011).

Non-decent housing includes hazards to health and thermal comfort which are both related to public health issues.

Home environments affect well-being, risk of disease and demands on health and care services.

- Warm, safe and secure homes are needed to help lead healthy, independent lives and to recover from illness - 11.5% of Worcestershire households are in fuel poverty (2016)

Previous research indicates that the strongest evidence on links between housing and health concerns fuel poverty and energy efficiency.

- Interventions in this field, targeted on the most deprived and vulnerable households, are likely to have a significant effect on the health of the population.

Summary of findings (2/2)

In common with the rest of the country, Worcestershire districts have seen a considerable decrease in the affordability of housing relative to earnings.

Fuel poverty remains a significant issue.

Homelessness, including rough sleeping, is an important concern in Worcestershire. Many indicators are close to the national level. The economic recession saw statutory homelessness in the county peak in 2011, since then it has fallen, but it remains above pre-2011 levels.

There are cost effective interventions which can be utilised further such as interventions for home assessment and modifications are cost effective in falls prevention.

Good health includes physical, mental and social wellbeing. Support for good health, including health care services provision, requires the application of best practice in a range of areas, including planning.

Recommendations	Lead Organisation(s)
Joint working in Housing and Health	
<p>1. To take forward locally the objectives in the National Memorandum of Understanding. Stakeholders should use evidence and information to inform plans, strategies and commissioning at a local level. This will help to ensure that home and housing circumstances and their effect on health and wellbeing are suitably considered.</p>	<p>Health and Wellbeing Board Worcestershire Strategic Housing Partnership</p>
<p>2. To support the development of a joint preventative approach that maintains people’s independence at home, reduces hospital admissions and provides effective discharge from hospital.</p>	<p>Health and Wellbeing Board, Worcestershire Strategic Housing Partnership</p>
Warm and healthy homes	
<p>3. Fuel poverty is a major issue affecting the county, there will be a need to build upon interventions in Worcestershire to address thermal comfort and low incomes.</p>	<p>Warmer Worcestershire network (WCC, District Councils, Act on Energy Age UK Hereford and Worcester Fire and Rescue Service, Public Health Practitioners, Care and Repair) Integrated Care for Older People (ICOPE) in Worcestershire</p>
Ageing population	
<p>4. There is a need to ensure readiness for future increases in the number of older people and single person households. Action is required to improve the quality, suitability and availability of homes.</p>	<p>WCC (Adult Social Care/Public Health), Worcestershire Strategic Housing Partnership/ local planning authorities</p>

Homelessness and rough sleeping	
5. Ensuring that needs of homeless people are included in Joint Strategic Needs Assessments to inform local planning and commissioning.	WCC Public Health
6. Ensuring awareness amongst policy makers of severity and nature of health problems for homeless people.	Health and Wellbeing Board, Worcestershire Strategic Housing Partnership
7. Improving access to health services for homeless people through joint working between local agencies.	Health and Wellbeing Board, Worcestershire Strategic Housing Partnership
8. Continuing to work in partnership in line with Worcestershire Homelessness and Rough Sleeping Strategy.	Worcestershire Strategic Housing Partnership
Falls prevention	
9. Services (in house and commissioned) to collaborate across health, social care and housing to ensure that a prevention focus with information, advice and adaptation services is available across the County.	WCC Public Health, Worcestershire Strategic Housing Partnership
Children and young people	
10. Joint working to reduce unintentional injuries using the NICE guidance. Including: <ul style="list-style-type: none"> • Collecting information. • Determining and addressing barriers to creating a safe home environment. • Getting the community involved using 'community champions'. • Carrying out home safety assessments. • Supplying and installing home safety equipment. 	Worcestershire Children First, environmental health, Fire and rescue services, Health visiting

Planning for Health	
<p>11. Wyre Forest District Council, Redditch Borough Council and Bromsgrove District Council to consider adopting a similar approach to that set out in the South Worcestershire Planning for Health SPD.</p>	<p>WCC Public Health and district council planning authorities</p>
<p>12. Further develop planning processes conducive to health and wellbeing, using tools such as Health Impact Assessments and the Public Health England Healthy Places Programme.</p>	<p>WCC public health, WCC planning and district council planning authorities</p>

THANK YOU