

West Sussex Joint Strategic Needs Assessment
High Level Summary and Emerging Issues (2010)

NHS West Sussex and West Sussex County Council have a joint responsibility to assess the overall health and well being needs of the population of West Sussex.

In 2008 a high level summary of needs was produced, as part of the wider work called the **Joint Strategic Needs Assessment (JSNA)**. This summary outlined the main challenges facing West Sussex, in terms of the population's health, social care and well being needs now, and into the future; it examined needs not service performance.

Many of the issues raised in the summary are fundamental and long term, for example an increasingly ageing population, and are not be expected to change much within a short time period. It is however important to keep under review high level assumptions and also identify emerging issues.

This briefing examines the initial issues raised in the 2008 summary, reviews their inclusion and outlines some of the work being undertaken to address them. Additional and/or emerging issues which were not identified in 2008 summary have also been included. To keep things brief, just an outline of *key* work or documents / strategies has been provided.

The Joint Strategic Needs Assessment is not a *single* document, or report, but incorporates a whole range of work being undertaken, as part of this briefing there are also references to more detailed needs assessment work, existing or proposed. For more detailed evidence on specific subjects please email jacqueline.clay@westsussex.gov.uk

This briefing is presented under the broad headings used in the 2008 summary:

- health inequalities
- promoting healthy living
- children and young people
- working age, employment and health
- later life, causes of ill health and mortality
- healthy and sustainable communities

Note : Latest data available referred in this summary relate to data available as of June 2010.

HEALTH INEQUALITIES 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ Overall people in West Sussex have a long life expectancy and enjoy good health, but this masks the considerable differences within the county. ❖ Differences in life expectancy are higher in West Sussex than in other parts of the South East Coast SHA region. 	<p>Remains true - although life expectancy increasing overall, considerable inequalities persist. Small area life expectancy has been recalculated using the Marmot Review method and there is a clear gradient both for men and women in West Sussex, with poorer life expectancy in deprived areas.</p>
<ul style="list-style-type: none"> ❖ There is evidence which suggests that differences (in relation to the wider determinants of health) are increasing. 	<p>Recession has acted to worsen the social determinants affecting health and well being – in all areas.</p>
<ul style="list-style-type: none"> ❖ There are increasing numbers of people in West Sussex living longer with disabilities, learning difficulties and limiting long term illness. 	<p>There are projected to be higher numbers of people with disabilities and living longer with long term conditions.</p>
<p>Additional / Emerging Issues</p> <ul style="list-style-type: none"> ○ The impact of the recession in the short, medium and longer term on health inequalities. 	

Key references / reports

1. *The Audit Commission* has reviewed, and reported on, the work to tackle Health Inequalities in West Sussex (2009).
2. *A sub-group of the Public Service Board (PSB), the Better Health for All Group*, chaired by John Marsland, Chief Executive of Chichester District Council, is championing progress to reduce health inequalities. This provides a clear reporting line to PSB, and supports a network of all Health and Well Being leads in local authorities (LAs) at both Tiers to ensure experience and good practice are shared. It meets regularly to review progress at a county level.
3. *West Sussex Health Inequalities Strategy (Promoting Health Equalities – Working together to improve quality of life in West Sussex“.*) has been drafted – final strategy to be adopted, following consultation, in autumn 2010.
4. *The Local Neighbourhood Improvement Area (LNIA)* network is focussed on action in the most deprived areas in the county and supports action at a very localised, neighbourhood level to reduce inequalities. This work is detailed in the LNIA action plans.
5. *Strong focus in NHS West Sussex Strategic Commissioning Plan* (Strategic Priority Goals 9 and 10) with action to prevent ill health and increase cancer survival rates in most deprived areas.
6. *Development of NI 175* on access to health services in rural areas.
7. Health needs assessments of vulnerable groups undertaken during 2010/2011 - offenders/ex-offenders and gypsy and travellers.

PROMOTING HEALTHY LIVING 2008 SUMMARY	REVIEW
<p>❖ Alcohol misuse has been identified as the dominant lifestyle issue in West Sussex, with levels of high risk drinking amongst younger people and alcohol-related admissions to hospital being growing concerns.</p>	<p>Alcohol remains highest priority in term of lifestyle risk factors - hospital admission rates have continued to increase.</p>
<p>❖ Although smoking rates overall are lower than national averages, estimates vary considerably between areas and between specific groups.</p>	<p>Estimates of smoking rates within some areas within West Sussex remain high – Crawley still estimated to have smoking rate of 27%.</p>
<p>❖ In relation to obesity in adulthood estimates vary considerably across the county, and are in line with low physical activity rates in parts of the county.</p>	<p>Obesity rates remain a concern – of <i>all</i> ages within the population, an issue for both children and adults.</p> <p>Current estimate of 180,000 adults obese in the county and at increased risk of conditions such as diabetes, hypertension, coronary vascular disease, stroke and cancer.</p>

Key references / reports

1. Clear focus by NHS West Sussex on main lifestyle factors which put health at risk – with specific focus on smoking rates, healthy weight and alcohol. Work to increase 4 week smoking quit rates to 4,200 people per year. Alcohol harm reduction clear priority of the HWBP.
2. Local areas promoting health lifestyles via localised various programmes and activities – including development of Wellbeing Centres in each district/borough.
3. *NHS West Sussex Healthy Weight Strategy* published 2008. Work to tackle obesity and physical activity rates continues – some indication of progress of programmes such as MEND.

CHILDREN AND YOUNG PEOPLE

Note : Since the 2008 summary, considerable work has been undertaken for the West Sussex Children and Young People's Plan (CYPP). To avoid duplication, this work is being used to inform the Joint Strategic Needs Assessment and considerable effort has been made to ensure NHS West Sussex and West Sussex County Council have consistently and jointly reviewed key datasets. The extensive *consultation* which has taken part for the Children and Young People's Plan forms part of the "voice" (views and opinions of needs) of the JSNA

CHILDREN & YOUNG PEOPLE - 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ Local lifestyle surveys of children and young people identified a number of key issues: <ul style="list-style-type: none"> ○ large numbers of young people adopting high risk or "binge style" drinking behaviour ○ higher rates of smoking amongst Year 10 girls and young women. ○ concerns reflected by young people in relation to bullying, safety and mental health. 	<p>These issues remain of high concern. The lifestyle survey was repeated in 2009 with a report published in June 2010.</p> <ul style="list-style-type: none"> ○ Concerns about bullying, safety and mental health remain. ○ A quarter of young people staying out after 11pm with associated higher risk of smoking, drinking, taking drugs and carrying weapons. ○ No increase the proportion of young people "binge" drinking though levels remain high.
<ul style="list-style-type: none"> ❖ The number of children living in low income households in West Sussex has increased in recent years. 	<p>Numbers of children living in poverty likely to have increased during recession.</p>
<ul style="list-style-type: none"> ❖ There are identified gaps in provision of high quality registered childcare within some of the most deprived neighbourhoods in the county. 	<p><i>To be verified</i> - there has been a revision of the West Sussex Childcare Sufficiency Assessment which identifies localised provision and gaps.</p>
<ul style="list-style-type: none"> ❖ In 2007, over 20% of Reception Class pupils and over 28% of Year 6 pupils were overweight or obese in West Sussex. 	<p>Childhood obesity rates were similar in 2008/9 and obesity remains a concern for all ages.</p>

CHILDREN & YOUNG PEOPLE - 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ The health and well being needs for specific groups of “vulnerable children and young people” including in public care and children with complex needs remain a high priority, including health needs and access to services, accommodation issues and support to maintain employment and education. 	<p>Remains a high priority (and identified within CYPP consultation) – outcomes for looked after children remain a concern.</p>
<p>Additional / Emerging Issues</p> <ul style="list-style-type: none"> ○ Need to promote and have effective inclusion (<i>identified by Aiming Higher for Disabled Children, CYPP consultation</i>) including:- <ul style="list-style-type: none"> i. Greater provision, support and engagement for children and families with a disability and SEN - <i>support to increase engagement, opportunities and increased need for specialist provision, access to mainstream opportunities</i> ii. Provision for young asylum seekers ○ Parenting and need for parenting support and early intervention especially in deprived areas (<i>identified via consultation, issues raised within LNIA network</i>) ○ Housing support for young adults – (<i>identified in discussion with social care and housing staff, NI indicators on settled accommodation</i>) ○ Looked after children placed from other LAs and informal fostering arrangements (<i>identified via consultation and specific coastal LAs</i>) ○ Support for children affected by domestic violence 	

Key references / reports

1. The West Sussex Children and Young People’s Plan 2010-2015 agreed and adopted.
2. A specific needs assessment of Vulnerable and Looked After Children undertaken as part of the JSNA.
3. Lifestyle survey of 14/15 year olds has been repeated (2010)
4. Review of bullying data undertaken to inform the West Sussex bullying strategy (2010)
5. West Sussex Parenting Strategy drafted.
6. Children and Young People’s Mental Health: A review of the views and experiences of young people in West Sussex (2009)
7. Summary of consultation responses to the Children and Young People’s Plan (2010)

WORKING AGE, EMPLOYMENT AND HEALTH - 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ Although unemployment is relatively low, the number of people of working age on ill health benefits is over 25,000. Mental health problems are the most stated reason for being on sickness benefits. ❖ The percentage of the working age on benefits varies considerably across West Sussex. 	<p>Increasing concern of higher unemployment rates. There has been a large increase in the number of people unemployed since 2008.</p>
<ul style="list-style-type: none"> ❖ An ageing population means that age dependency ratios are increasing; there will be fewer people of working age. A healthy workforce with reduced rates of sickness absence is, and will become, increasingly important. 	<p>Dependency ratios have increased.</p> <p>Population figures continue to confirm ageing population and increasing in very old in many areas.</p>
<ul style="list-style-type: none"> ❖ Increasing numbers of people are providing unpaid care – for partners, spouses, parents and for children (and for their children into adulthood). There are increasing numbers of people giving up work to become full time carers. The number of people in receipt of carers allowance is increasing across West Sussex. 	<p>There are growing numbers of carers.</p>
<ul style="list-style-type: none"> ❖ Key working age social care client groups are increasing, including working age adults with learning difficulties, physical and sensory impairment and mental health problems. 	<p>Remains true</p>

Key references / reports

1. West Sussex Interagency Carers Strategy (2010-2015)
2. Continued employment support for disadvantaged and vulnerable groups – including via Paritas.

LATER LIFE, CAUSES OF ILL HEALTH & MORTALITY - 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ The population of West Sussex is ageing. Although this has a considerable impact on health and social care provision, the implications require a far broader, community response; including the provision and access to services and local facilities and how the wider well being (including mental and emotional well being) of older people is promoted and maintained. Services designed need to take into account the key findings and recommendations from "Our Health, Our Care, Our Say" ❖ As the population ages there will be increasing numbers of people with long term conditions and disabilities, including dementia, physical, mobility and sensory impairments and general problems with carrying out daily activities. Increasing numbers of older people recognise their role as unpaid carers. 	<p>Population figures continue to confirm ageing population and increasing in very old in many areas.</p>
<ul style="list-style-type: none"> ❖ Inequalities persist in older age, with women more likely to be in pensioner poverty, and older people more likely to suffer from fuel poverty and may experience reduced access to services. 	<p>Remains true. Increasing fuel costs likely to increase fuel poverty for older people across the county.</p>
<ul style="list-style-type: none"> ❖ Mental and emotional health and well-being in older age is a priority. The South East Health Strategy (2008) highlighted that the South East has the second highest hospital admission rate for depression among women aged 65 and over in the country and that nationally depression amongst older people is under-diagnosed. 	<p>Remains true.</p>

LATER LIFE, CAUSES OF ILL HEALTH & MORTALITY - 2008 SUMMARY	REVIEW
<p>❖ Although overall mortality statistics show the main causes of all deaths, a clearer understanding of premature mortality (using Years of Potential Life Lost (YPLL) as a measure) shows that :-</p> <ul style="list-style-type: none"> ○ For women, breast cancer is the biggest cause of premature mortality in West Sussex, as it is nationally, although there are considerable differences between West Sussex and England in the other main causes of premature mortality – with accidents, suicides and colorectal cancer accounting for more premature deaths in women in West Sussex compared to national figures. ○ For men, Coronary Heart Disease (CHD) is the biggest cause of premature mortality in West Sussex (as it is nationally), and the main causes of premature death broadly reflect the national picture – although accidents, undetermined injury and suicide again have a greater impact on premature deaths in West Sussex compared to England as a whole. 	<p>Data reviewed by West Sussex Public Health Observatory – major killers remain as 2008 summary.</p>

Key references / reports

1. The 2009/2010 Annual Public Health Report "A Fair Old Age" focussed on the health and well being of older people.
2. National Dementia Strategy and West Sussex service.
3. A cross agency road safety group has been established
4. 2009 Suicide Audit and Review.
5. Development of NHS Health Check programme.
6. Continued increased of adoption of personal budgets in social care, and introduction in health.

HEALTHY AND SUSTAINABLE COMMUNITIES - 2008 SUMMARY	REVIEW
<ul style="list-style-type: none"> ❖ The nature of communities will change as population age structure changes. Rural services and communities have and will maintain an older age structure. ❖ The wider role of “communities” - health and social care tend to focus on identifying problems and then dealing with them – will need greater emphasis on prevention and “protection”; – identifying risks and reducing them and building capacity and resilience into communities. 	<p>Remains true.</p>
<ul style="list-style-type: none"> ❖ A move towards “progressive universalism” – services available to all but proactively (and explicitly) targeting a higher level of service to those most at risk. ❖ A huge range of services across West Sussex are important if we are to build resilience including: <ul style="list-style-type: none"> ○ Universal services such as education, primary care and community care especially health visiting; ○ Many services provided by the third sector; ○ Leisure services including physical activity and culture; ○ Community development and community planning services; ○ Community Partnership Teams and Neighbourhood Alliances; ○ Services that support economic development and regeneration; ○ Skills development; ○ Healthy Living Centres. 	<p>Increased importance of community services to support health and well being.</p> <p>“Proportionate universalism” and the need to target at all parts of the social gradient recommended by Marmot Review.</p>
<p><i>Additional / Emerging Issues</i></p> <ul style="list-style-type: none"> ○ Financial pressures on the public sector will make the current level of provision difficult to sustain. ○ Growing concerns on housing needs, including supported housing needs of more vulnerable groups. 	