

Report of: Director of Public Health

Report to South Leeds (Outer) Area Committee

Date: Monday 13th February 2012

Subject: Joint Strategic Needs Assessment and Area profiles

Are specific electoral Wards affected?	<input type="checkbox"/> Yes
If relevant, name(s) of Ward(s):	ALL
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> No
If relevant, Access to Information Procedure Rule number:	
Appendix number:	

Summary of main issues

1. The Leeds Joint Strategic Needs Assessment (JSNA) is presently being updated and includes within it 108 Middle Super Output Area (MSOA) profiles and profiles for each Area Committee and each Clinical Commissioning Group. It will be the primary document for agreeing the Joint Health and Well Being Strategy for the City.
2. Each Area Committee is broken down into MSOAs. An MSOA is a geographic area designed to improve the reporting of small area statistics in England and Wales. The minimum population for an MSOA is 5000.
3. Cross Cutting themes are emerging across all the key data sets: wider public policies that impact on health and well being; prevention and early identification of disease programmes; increased public awareness of health and wellbeing; secondary prevention programmes; increasing move towards a holistic focus; and impact assessment in terms of inequalities in health.
4. With the exception of Morley East and Morley West all 11 MSOAs have equal or lower mortality rates than that of Leeds overall with a wide variation in the issues affecting the population health and well being. This is detailed in the appendix of telling the tale of two MSOAs – the most affluent MSOA which is West Ardsley, and the most deprived which is Morley East.
5. Cancers is the priority condition in relation to health and wellbeing needs for the area. These are strongly associated with socio-economic disadvantage and lifestyle behaviours, in particular smoking.

Recommendations

- 5.1. That the Area Committee considers the prioritisation of action in line with the diverse needs within the population.
- 5.2. While recognising mortality rates for Outer South are below the average for Leeds further considerations are given to the MSOA profiles showing most significant health and wellbeing issues which are Morley East; Morley West and East Ardsley.
- 5.3. That consideration is given to the lead roles of different agencies in terms of addressing these needs.

1 Purpose of this report

- 1.1 The purpose of this paper is to update the Outer South Area Committee on the emerging priorities for this area flowing from the refresh of the Leeds JSNA.

2 Background information

- 2.1 The Health & Social Care Bill gives the JSNA a central role in the new health and social care system. It will be at the heart of the role of the new Health and Well Being Boards and is seen as the primary process for identifying needs and building a robust evidence base on which to base local commissioning plans. It provides an objective analysis of local current and future needs for adults and children, assembling a wide range of quantitative and qualitative data, including user views. In future Local Authorities and CCGs will each have an equal and explicit obligation to prepare the JSNA, and to do so through the Health and Wellbeing Board. There is a new legal obligation on NHS and Local Authority commissioners to have regard to the JSNA in exercising their relevant commissioning functions.
- 2.2 Public Health in the Local government paper published December 2011 makes it clear Local Authorities should decide which services to prioritise based on local need and priorities. This should be informed by the JSNA. It also states the need to engage local communities and the third sector more widely in the provision of public health and to deliver best value and best outcomes.
- 2.3 The profiles are in line with the new guidance now published.
- 2.4 The first JSNA for Leeds was published in 2009. Two of the key gaps in the original JSNA were having more locality level data and ensuring qualitative data was included of local people's views. For the 2012 refresh each of the core data sets will include local people's views. There has also been the development of Locality Profiling for different geographies. Middle Super Output Area Profiles (108), Area Committee Profiles (10) and Clinical Commissioning Group (3) and planned development of General Practice Profiles (113).

3 Main issues

- 3.1 In February 2012 an analysis of the overall priorities for Leeds from all of the data and qualitative information within the JSNA will be produced within an Executive

Summary of the JSNA. For the city of Leeds across all the areas covered within the JSNA there are some emerging cross cutting themes:

- **Wider programmes that impact on health and well being** – focus on children, impact of poverty, housing, education , transport etc.
- **Prevention programmes** – focusing on smoking, alcohol weight management, mental health, support.
- **Early identification programmes** – NHS Health Check/Lung Cancer; risk, early referral for wider support.
- **Increased awareness** – e.g. of symptoms of key conditions, or agencies/information.
- **Secondary prevention programme** – effective management in relation to health and social needs.
- **Increasingly move towards having a holistic focus** – e.g. rather than a long specific disease pathways, focusing instead on the person and their needs
- Impact assessment in terms of inequalities in health.

3.2 The Area Committee profile details information about the population within the area, wider factors that affect health taken form the Neighbourhood Index; GP prevalence data with a focus on long term conditions and healthy lifestyle; mortality data; alcohol admissions data and adult social care data .

3.3 **Key issues for Outer South Area Committee:**

3.3.1 The health and wellbeing of the population within the Outer South Area Committee boundaries is widely variable. The majority of the population live as wealthy achievers or are comfortably off, well above the Leeds average. However there are a slightly higher proportion of people living with moderate means than the rest of Leeds and it is likely that this group of people have levels of existing health problems in line with the average for Leeds.

3.3.2 In order to prioritise action within the Outer South Area there needs to be an understanding at a smaller geography level. The profiles of the 11 MSOAs within the Outer South Area are all different- the detail of each is within their MSOAs profiles.

3.4 **Priority Areas:**

3.4.1 **Morley East: (Newlands & Denshaws, Glen Estate. map of neighbourhoods in this MSOA – Appendix B)** has the highest premature death rates for women in Outer South, is considerably higher than the average for Leeds and a significant outlier for female deaths caused by cancer. Cancer deaths in men are also higher than the Leeds average contributing to the highest early death rate for both men and women combined. Deaths are more likely to be prevented if people recognise symptoms and seek an early diagnosis. Many cancers are caused by smoking, poor diet and alcohol misuse and are associated with higher levels of deprivation. Prevalence of smoking and obesity is not known for this area as GP recorded data is suppressed as over 25% of the population are registered with a non-Leeds GP or audit of the GP data has not been possible.

- 3.4.2 67% of households are in owner-occupation and 22% are renting from the local authority (through and ALMO). Semi-detached housing accounts for 40% of the stock and terraced housing for a further 35%. 53% of properties are classified in Council Tax Band A and 34% in Bands B and C.
- 3.5 **Morley West: (New Brighton, Bruntcliffe, Elmfield, Bridge Street & Britannia Road. map of neighbourhoods in this MSOA – Appendix C)**
- 3.5.1 Alcohol related hospital admissions rates are higher than the Leeds average and has the highest levels of hospital admissions directly caused by alcohol in the Outer South area. As is usual the male admission rate is much higher than that for females.
- 3.5.2 This area has the highest premature death rates for men largely attributable to cancer in the outer South. It also has a slightly higher than average premature death rate than Leeds for both males and females across all diseases There are 6,404 people living with higher levels of deprivation than in the rest of the outer South area¹. Prevalence of smoking and obesity is not known for this area as GP recorded data is suppressed as over 25% of the population are registered with a non-Leeds GP or audit of the GP data has not been possible.
- 3.5.3 The population is predominantly White British and the age breakdown shows a higher than average proportion of older people. The number of females over 85 is unusually high which may indicate the presence of care homes in this area. 57% of households are in owner-occupation and 20% are renting from the local authority (through an ALMO). Terraced housing accounts for 38% of the stock, semi-detached housing for 22% and purpose built flats for a further 23%. 59% of properties are classified in Council Tax Band A and 35% in Bands B and C.
- 3.5.4 **East Ardsley:** levels of GP recording shows that coronary heart disease is higher than the average for Leeds with levels of smoking and obesity just above average. There is a low premature mortality rate for men but a rate for females with cancers and neoplasm's being higher than average for Leeds. The premature death rate for women is the 2nd highest for Outer South.
- 3.5.5 The population is predominantly White British and the age breakdown shows a slightly higher than average proportion of children and young people. 65% of households are in owner-occupation and 22% are renting from the local authority (through an ALMO). Semi-detached housing accounts for 45% of the stock, terraced housing for 27.5% and detached housing for a further 20%. 53% of properties are classified in Council Tax Band A and 31% in Bands B and C.
- 3.6 **A summary of one of the least deprived areas:**
- 3.6.1 **West Ardsley:** has lower than levels of coronary heart disease, cancers and COPD than the Leeds average. The prevalence of smoking and the number of people admitted to hospital with alcohol related hospital admissions in much lower than the Leeds average. Levels of obesity are at the Leeds average.

¹ people living in the 4th most deprived quintile (there are five quintiles and no-one lives in the most deprived 5th quintile in Outer South)

- 3.6.2 There is also has a lower than average premature mortality rate for males with a slightly higher rate for females with cancers and neoplasm's being the main causes of death for women.
- 3.6.3 The population is predominantly White British and the age breakdown shows a lower than average proportion of older people. 89% of households are in owner-occupation. Detached housing accounts for 48% of the stock with semi-detached housing accounting for a further 37%. 73% of properties are classified in Council Tax Bands C-H.
- 3.6.4 **Appendix A** gives a comparison between two of these MSOAs across the spectrum of described need.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 A qualitative data library has been established to include all consultations over the last two years Over 100 items have been analysed and interwoven within the JSNA data packs to give a view of the local people.
A large stakeholder's workshop to share emerging finding and consult on how to ensure Leeds produces a quality JSNA was held in September. A Third sector event is planned for January.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 An Equality Impact Assessment will be carried out in February on the produced documentation and process prior to being published.

4.3 Council policies and City Priorities

- 4.3.1 The JSNA has already been used to inform the State of the City report and will be the key document for developing the future Joint Health and Well Being Strategy for the City.

5 Conclusions

- 5.1 In order to tackle the inequalities present within the area committee, agreed action across partner agencies are required.
- The NHS (and in the future Clinical Commissioning Groups) to reduce numbers of people living with preventable ill health and people dying prematurely, whilst reducing the gap between communities.
 - The Local Authority to lead (with support from the NHS) helping people to live healthy lifestyles, make healthy choices and reduce health inequalities

- The Local Authority to lead improvements in the wider factors which affect health and wellbeing and health inequalities including housing, income, employment and education

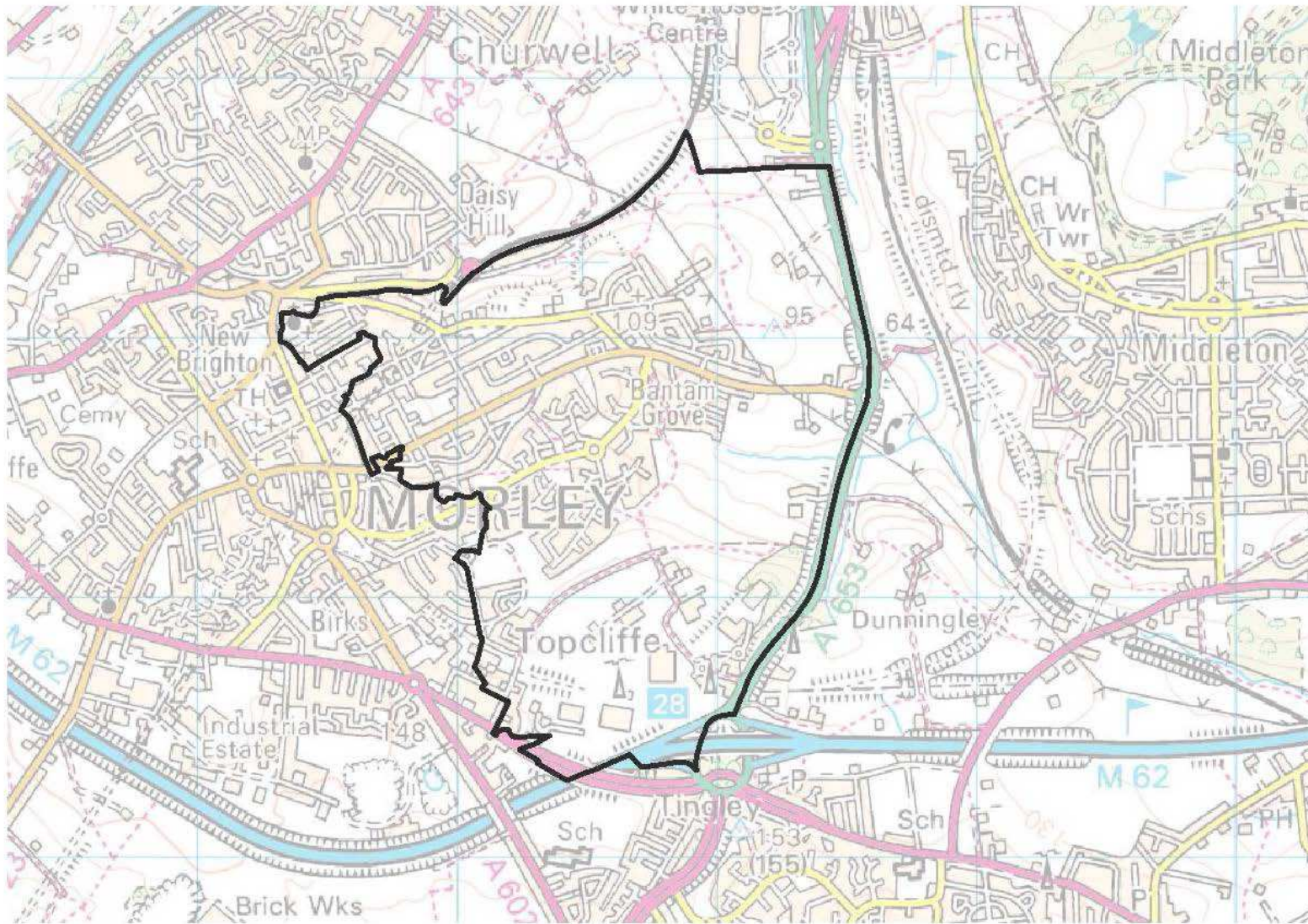
6 Recommendations

- 6.1 That the area committee considers the prioritisation of action in line with diverse needs within the population.
- 6.2 That further considerations is given to the MSOA profiles for Outer South Leeds in line with the present actions taking place within this area.

Appendix A - Table of 2 MOSA's Affluent MSOA compared to most deprived MSOA

Outer South	Population	Life expectancy	Existing Health problems	Future problems	Smoking prevalence	CHD Prevalence	Population type	BME	Educational attainment	Children in workless households	Claiming job seeker allowance
West Ardsley (E02002437) Leeds Index 96	6,407 Proportion of 20 to 34 year olds is less than the Leeds average and 40 to 64 year olds is higher	81.45 Male 85.14 female	1.8%	0.0%	15.2%	3.1%	Wealthy Achievers	4.09%	73.12% at Key Stage 4 70.24% at Key Stage 2	3.60%	1.68%
Morley East (E02002431) Leeds Index 40	8,259 Proportion of 20 to 24 year olds is lower than the Leeds average, 30 to 54 year olds is slightly higher, but follows the same profile as the Leeds average	76.19 Male 81.10 Female	13.2%	23.2%	Unknown insufficient data	Unknown insufficient data	Moderate Means	4.69%	52.87% at Key Stage 4 73.12% at Key Stage 2	14.62%	3.96%

Appendix B - Morley East (E02002431) Middle Layer Super Output Areas (MSOA) map of neighbourhoods



Appendix C - Morley West (E02002433) Middle Layer Super Output Areas (MSOA) map of neighbourhoods

