

CENTRAL BEDFORDSHIRE HEALTH AND WELLBEING BOARD

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Joint Strategic Needs Assessment Executive Summary

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Public

Purpose of this report

1. To provide the Board with a comprehensive summary of the Health and Wellbeing needs in Central Bedfordshire and the areas which require further focus.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

1. **consider and endorse the 2017 Executive Summary of the Joint Strategic Needs Assessment for Central Bedfordshire; and**
2. **consider the areas of focus requiring action across the system which the Health and Wellbeing Board may also wish to incorporate into a re-freshed strategy.**

Issues

2. There are a number of common themes which have emerged from the JSNA:
 - a) The need to increase healthy life expectancy and promote independence by increasingly 'mainstreaming prevention'. This is important to both local residents and to the local health and care system that will need to meet rising demand if healthy life expectancy does not improve.
 - b) The need to reduce inequalities and disadvantage which can start from birth – so giving every child the best start in life is essential.

- c) The need to give mental and physical health parity – there is no health without mental health.
 - d) The need to be ambitious – whilst outcomes in Central Bedfordshire appear better than average – they should be as it is a relatively affluent area – so we should aim to be among the best.
2. To gain a full picture of the need, the executive summary should be read in full, however some of the main areas of focus for each chapter are outlined in the following paragraphs.
3. **Population and Place**
- a) Whilst life expectancy continues to increase for men and women, the number of years lived in good health has fallen – for men from 65.8 years to 64.7 years and for women from 64.8 years to 63.1 years.
 - b) The gap in life expectancy between the most and least deprived deciles continues to narrow for men from 6 years to 4.8 years but for women the gap is widening from 5.2 years to 5.7 years.
4. **Wider Determinants of Health**
- a) The impacts of Air Pollution are gaining in recognition as a public health issue and although air quality is generally good in Central Bedfordshire, tackling the effects of pollution in the three air quality management areas (Dunstable, Amphill and Sandy) remains a high priority.
 - b) Central Bedfordshire is a safe place to live and work there are pockets where crime and community safety concerns are higher. Hotspot areas continue to be the town centres, with Dunstable Town Centre remaining the largest generator of incidents. Compared to the previous year, levels of serious acquisitive crime have increased by 7%, domestic burglaries have increased by 22%, antisocial behaviour has fallen by 4% and domestic abuse incidents noted to have a child resident at the location of the incident has decreased by 4%.
 - c) Based on long-term migration trends and local demography issues, between 20,000 - 30,000 homes are needed to meet local demand up to 2031. The demand for predominately family housing (2, 3 and 4 bedroom homes) is expected to continue.
5. **Starting and Developing Well**
- a) Improving educational outcomes remain a priority particularly for Key Stage 2 and for disadvantaged pupils.

- b) Evidence from Looked After Children case reviews suggests that there are a number of core issues leading to family breakdown which need to be tackled – notably domestic abuse, substance misuse, parental mental health and disengagement of parents from the support offered and their capacity to effect lasting change. Criminality was also found to be a parental risk factor.
- c) Adverse Childhood Experiences (stressful events that children can be exposed to whilst growing up) are one of the strongest predictors of poor health and social outcomes in adults, therefore minimising the impact of these through early identification and support is key.
- d) Emotional health and wellbeing of parents, children and young people remain a high priority.

6. **Living and Working Well**

- a) The population level challenges around improving lifestyle remain with a higher percentage are classified as being overweight or obese and the impact of alcohol abuse continues to rise as indicated by alcohol related admissions. However the proportion of adult smokers continues to fall and the proportion of the population classified as active has increased.
- b) Driven in part by high levels of excess weight, the prevalence of diagnosed diabetes in adults aged 17 and over continues to rise and premature mortality from coronary heart disease (CHD) remains higher compared to statistical neighbours.
- c) The rising aging population is contributing to an increasing incidence of newly diagnosed cancers and the prevalence of chronic obstructive pulmonary disease (COPD).

7. **Ageing Well**

- a) Social isolation remains an issue and can have damaging effects on physical and mental health.
- b) The rates of injuries due to falls (and admissions to acute care) continues to increase and is now worse than statistical neighbours.
- c) There was a sharp increase in the reporting of concerns about individuals, resulting in a rise of safeguarding investigations and a reverse in the downward trend between the number of safeguarding alerts and safeguarding investigations. This may be because the safeguarding system is working better and a greater awareness of the need to report.

- d) Less than half of Carers in Central Bedfordshire feel they have the social contact they need.
 - e) The rate of statutory homelessness is rising and the numbers residing in temporary accommodation has increased significantly.
8. The JSNA executive summary should be widely disseminated to ensure that the findings inform strategic planning and commissioning. The JSNA has already informed the re-procurement of Community Health Services, the Better Care Plan, the STP and emerging quadrant plans. It will also inform the development of the Children and Young People's Plan, the Joint Health and Wellbeing Strategy and the Out of Hospital Strategy.

Financial and Risk Implications

9. The financial implications which result from changes to commissioning will be taken through the normal commissioning arrangements. The needs identified are significant and some will require changes or additional service provision if they are to be met.

Governance and Delivery Implications

10. The production of the JSNA is a requirement of the Health and Wellbeing Board discharged through the JSNA steering group.

Equalities Implications

11. The PSED requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to eliminate discrimination, harassment and victimisation, advance equality of opportunity, and foster good relations between in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
12. The JSNA has a consistent focus on identifying any inequalities and makes recommendations about how these could be reduced.

Implications for Work Programme

13. None directly.

Conclusion and next Steps

14. Generally, outcomes for residents of Central Bedfordshire are good, especially when compared to England, however the picture is more challenging when outcomes are compared with statistical neighbours.

15. The Health and Wellbeing Board may also wish to incorporate, some areas of focus requiring action across the system, into a re-freshed strategy. These include improving the emotional health and wellbeing of children and young people, preventing and minimising the impact of air pollution, the prevention and management of falls, reducing social isolation, the prevention and management of diabetes.

Appendices

Appendix A - Joint Strategic Needs Assessment Executive Summary

Background Papers

None