

Bath and North East Somerset JSNA – 2012 – Executive Summary

<ul style="list-style-type: none"> • Overview & Trends <ul style="list-style-type: none"> • Population • Mortality and life expectancy • Disability and Long Term Conditions (LTCs) • Mental Health 	<p>Background Increase in population over time (primarily students), 50/50 men women, population just under 180,000 in 2010, and low levels of ethnic diversity</p> <p>Increase in births (more mothers over 30), expected increases in some young people ranges and older people.</p> <p>7% have physical disability, 12% sensory impairment, 1% autism, 16% mental health</p>	<p>Assets</p> <ul style="list-style-type: none"> • Low rates of long term conditions, and key disorder • Vaccination rates for people with LTCs are high • Emergency bed days, smoking levels are low amongst people with Long Term Conditions • SEN pupils are achieving well • Prevalence of mental health conditions are generally lower or in line with national rates • Suicide rates are low 	<p>Needs</p> <ul style="list-style-type: none"> • Conditions of the heart, cancer, lungs and diseases of the digestive system are the most common forms of death (in line with national) • Cancer incidence increasing • High rates of asthma amongst young people • Excess winter mortality is high, but this is not down to an increase in winter deaths • Self-harm and depression prevalence high (1000 more depression cases than expected) • Dementia highlighted as a concern by Healthy Conversation • BME population identified as at risk of mental health problems
<ul style="list-style-type: none"> • Service Use & Quality • Safeguarding • Carers 	<p>Assets</p> <ul style="list-style-type: none"> • Low rates of outpatient attendances, planned & unplanned admissions, low weighted prescribing costs, death rates in RUH low • 11% of population self-define as a carer, and evidence of carer satisfaction with services • High user satisfaction with social services • Over 700 voluntary sector agencies, delivering a wide range of service 	<p>Needs</p> <ul style="list-style-type: none"> • Ambulance service quality recorded as weak by CQC • Referrals into children's services increasing, Child Protection Plans increasing (increasing complexity in cases), but may relate to increased awareness following Baby P. • Year on year increase in adult safeguarding, national evidence of under-reporting and demographic trends suggest this increase will continue • 11 care institutions measured by CQC have improvement notices (out of 500 within 20 miles of Bath.) • Evidence of internal pressures across health and care system 	<p>Costs</p> <ul style="list-style-type: none"> • Older people's social care has low spend compared to comparable areas • Schools, child welfare and children's service all have low levels of spend. • Total NHS spend per head is higher than other areas and expenditure has increased by 34% since 06/07 • Adult care costs are comparably high
<ul style="list-style-type: none"> • Health Improvement and Protection • Health Determinants 	<p>Assets</p> <ul style="list-style-type: none"> • Low rates of infectious diseases • Lower level admissions for injuries than nationally • Reducing no. road traffic collisions • Low no. abortions, increase in contraceptive prescribing • Child health & immunisation uptake is generally good • 84% of adults know how much exercise they should be doing, (4% cycle to work, 19% walk) • No. of adults registered with GP as obese is low. • High fruit & veg consumption • Smoking rates are low, 56% would like to quit and evidence of cessation effectiveness • Rates of alcohol attributable hospital admissions are low compared to other areas but rising • Illicit drug use is stable and acquisitive crime is low, hospital admissions for CYP substance misuse is also low 	<p>Needs</p> <ul style="list-style-type: none"> • Chlamydia screening uptake increasing, but lower than national, % positive is lower than national • Increasing births placing strain on education places, • Increase in respiratory tract infections in <1 year olds • Significant GP practice variation in MMR • Significantly higher rate of overweight amongst children starting school, childhood obesity rate is still increasing – but this is in line with national and regional rates. • Between 74-90% adults not taking enough exercise – Cost and time main barrier to organised events, driver behaviour & road safety main reasons for not cycling more • Smoking a significant cause of death and higher in some groups than others • Alcohol specific admissions in U18s are higher than national, but most admissions still occur in over 25's. For men the highest rate of admissions is in 40-49yr olds. • Significant crime and disorder impacts of alcohol, and significant determinant of mental health problems • Proportion of drug users completing treatment low but rising 	
<ul style="list-style-type: none"> • Social Determinants & Natural Environment 	<p>Assets</p> <ul style="list-style-type: none"> • High levels of education achievement, bullying in line with national levels, absence low • No. benefits claimants and no. NEET are low • Highly skilled residential workforce • Overall child poverty levels are low • Historically low levels of crime and adult and youth reoffending levels are reducing • Evidence of untapped social capital • 53% of those in care feel they have good community connections • Interventions which boost individual social functioning have been highlighted as an opportunity by the care forum • Good access to natural environment • Reducing no. calls with regards environmental issues 	<p>Needs</p> <ul style="list-style-type: none"> • 1/3 of pupils do not feel their school deals effectively with bullying • Benefit claimants and NEETs increasing over time, teenage mothers and those with learning difficulties are highly represented. • Older people and those with mental health conditions likely to be affected by disability benefit changes • Significant evidence of under-reporting of Domestic Violence (78% victims recorded as women). • House prices and affordability is a significant challenge and benefit changes will increase pressure. High % of people aged 65+ are residents of nursing and care homes • Different approaches to social capital required in different areas. • Poor air quality in some areas which has been linked to poor health outcomes • Severe weather risk, fuel and utility price increases linked to climate change – 30,000 houses (over 40%) currently improperly insulated. 	

Data is accurate as provided to JSNA team at 22/03/12

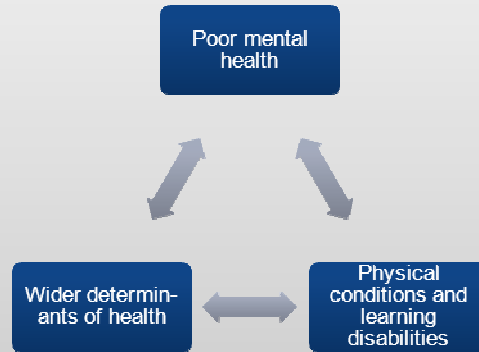
- **Cross-cutting Themes**

- Complex Families
- Aging Population
- People with multiple conditions or needs (co-morbidity)
- Social and Economic Differences
- Rural Areas

Complex families

- The Government estimates that there are 220 families in Bath and North East Somerset experiencing a range of needs and who are costing services between £250k and £330k each per year.
- Early work has identified 500 individuals in B&NES who are within a complex family
- There are notable geographical concentrations of these families

People with multiple conditions or needs (co-morbidity)



- There is a strong relationship between conditions.
- 46% of people with mental health problems have a long term condition and 30% of those with long term conditions have a mental health problem.

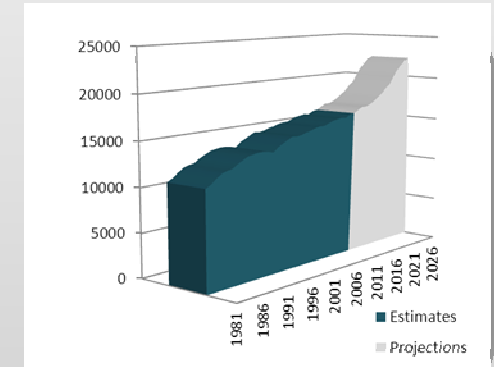
- Further relationships with sensory impairment and dementia.
- Higher rates of poverty and unemployment (and at risk of benefits changes) and people with mental health problems considered a particular risk group.
- 80% of homeless people have physical health conditions and 70% have mental health conditions
- Relationship between alcohol misuse and mental health conditions and also with a range of criminal behaviour, both as victims and offenders

Social and Economic Differences

- 20% of the population live in certain communities where there is:
 - Shorter life expectancy, increased prevalence of long-term conditions.
 - Poorer general health, lower breastfeeding levels, higher admissions for self-harm and poisoning
 - Poor dental health, higher rates of smoking and more than four times as likely to be admitted to hospital for alcohol specific conditions.
 - Significant relationship between unemployment, offending and education achievement.
 - Strong relationship between lower levels of social capital and inequality, however small area studies have shown strong willingness to be more involved.

Aging Population

- Increases in life expectancy will change the local population



- 7% of the population 75+ in 1981, increasing to 11% in 2026, (3% - 7%, 80+)
- Changes to disease profile and causes of death. For example, 85% of 85+ have moderate or severe hearing loss. Older people with LTC felt less confident in managing health
- Pressure on care provision (over 4700 elderly carers by 2026) and suitable accommodation (including affordable warmth)
- Strong desire to play more of a role in managing own health, care forum highlights need for activities to support independence

Rural Areas

- Certain rural areas have been identified as specifically high risk for fuel poverty and impacts of severe weather
- A number of complex families live in rural areas, and care forum consultation has raised accessing clients in rural areas as a barrier to service provision.
- Rural communities have been identified as possessing a greater than average level of social capital.