

Joint Strategic Needs Assessment 2010

From Assessment to Action

Key profiles

Draft actions for consultation

The source of all data presented is detailed in the JSNA document available;
www.wandsworth.gov.uk/observatory

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Priority areas to pool resources

JSNA 2010 Key messages

Geographical variations in ill-health

Obesity in children

High rates of Teenage conceptions

Chlamydia and other STI diagnoses

Wellbeing and mental health

Alcohol related admissions

Under 75 mortality

Personal needs and assistance for carers

Maintaining independence

Hospital admissions for falls

Winter deaths

Geographical variations in ill-health

The situation in Wandsworth

Mortality rates before the age of 75 show a clear variation in ill-health with the most deprived wards having high rates compared to England. Latchmere has the highest mortality rate (SMR) for males (152.5) and the second highest for females (138.2). Roehampton has the highest for females (158.0) and second highest for males (146.7). The life expectancy gap between the most and least deprived areas is 8 years for males, and 6 years for females. The largest cause of years of life lost is coronary heart disease which contributes to over one year of the life expectancy gap for males and 5 months for females.

The geographical variations in life expectancy and mortality underline the key inequalities in Wandsworth. The Health Inequalities Strategy will outline the major actions which can reduce the variation. Reducing these variations will be addressed by action on all of the JSNA key messages as suggested in the following slides.

Figure 1

The causes of health inequalities



Obesity in children

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The situation in Wandsworth

- In the school year 2008-9) the combined prevalence of overweight and obesity in Reception aged children was 21.1% while that in Year 6 children was 35.4%. The risk of being obese is greater for boys than girls. Analysis of three year data from the NCMP in Wandsworth (2006-9) showed that in Year 6 children aged children, 22.5% of boys and 20.1% of girls were at risk of obesity. Obesity also tends to be higher in children from ethnic minority groups, particularly black and mixed ethnic groups.

What social and economic drivers are associated with childhood obesity?

- Generally obesity prevalence tends to be greater in more deprived areas. Deprivation factors include economic elements such as children <16 living in households depend upon income support or children living with a lone parent claimant, and social elements such as education and housing.

Suggested solutions to prevent childhood obesity

- Focus on diet, behaviour change and physical activity in all weight management interventions, rather than any one alone.
- Opportunities for promoting activity to be built into the design of the physical environment.
- Whole-family approaches to eating well and being active, targeting those families most at risk

What is being done in Wandsworth to prevent childhood obesity

- Nutrition and Dietetic service offers the choice of 1:1 with a Dietitian, group or a healthy eating teaching session.
- Taster healthy eating and weight management sessions for patients referred to the Dietetic service.
- Training for 'Healthy Lifestyle Advisors' in GP practices to focus on behaviour change skills, nutrition and physical activity.
- Structured weight management groups & clinics are available throughout the borough during the day and in the evening.
- Mytime Active provide 90 days of training to front line staff on obesity awareness.
- Prevention and weight management services for families and children in schools and Children Centres.
- Specialist post-natal weight management programmes for mothers are available through children centres.
- Discounts for Rosemary Conley classes are available for people referred through the community weight management service.
- 'Footsteps', a referral pathway, provides access for patients to physical activity services.
- Seven health trainers provide 1:1 support, advice and signposting to lifestyles services

Teenage pregnancy

The situation in Wandsworth

- There were 136 under 18 conceptions in 2008, and 230 in 1998.

What social and economic drivers are associated with teenage pregnancy? (ie causes and consequences)

- Poor educational attendance and attainment at school
- Black Caribbean , mixed Black and mixed Asian children are more likely to become teenage parents
- Faith can be a protective factor but access to information about relationships and sexual health is still important
- Living in care / leaving care
- Involvement in the criminal justice system
- Lesbian, Gay, Bisexual and Transgender people have increased risk of early pregnancy or fatherhood
- The children of teenage parents are at increased risk of becoming teenage parents themselves.

Suggested solutions to teenage pregnancy

- A good general education
- Early childhood interventions which reduce risk factors and increase protective factors
- Youth development programmes
- School-based Sex and Relationships Education (SRE) linked to access to contraceptive services
- To offer one-to-one interventions for vulnerable children

What is being done in Wandsworth to prevent teenage pregnancy

- Co-ordination of Sex and Relationship Education including quality assessment
- Outreach work and condom distribution
- Focused work with vulnerable young people, at risk of teenage pregnancy
- Integrated reproductive sexual health provision via young people's point clinics
- Reducing repeat terminations project
- Reducing repeat conceptions via ACTogether project for young parents
- Emergency contraception via pharmacies

HIV and STI diagnoses

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The situation in Wandsworth

- The prevalence of diagnosed HIV in London has been consistently higher than the national average. In 2008 the prevalence of diagnosed HIV was 4.68 per 1,000. Late diagnosis has an important bearing on morbidity and mortality.
- Chlamydia is the most frequently diagnosed STI, the Wandsworth rate is high at 3204, per 100,000 people.

What social and economic drivers are associated with HIV and STIs?

- The two groups with the highest prevalence of HIV nationally are men who have sex with men (MSM) and black Africans. There is a concentration of black African residents living with HIV in the north-east of Wandsworth (27% of Wandsworth residents living with HIV are black African; 16% are black African women).
- Chlamydia infection is highest in young sexually active adults, especially those aged under 25

Suggested solutions to prevent and care for people with HIV and STIs

- Promotion of opportunistic HIV testing, and for people having a greater likelihood of being HIV positive.
- The National Chlamydia Screening Programme was begun in 2008/9 to offering opportunistic testing to 15-24 year olds.

What is being done in Wandsworth to prevent HIV and the spread of STIs

- Increasing the awareness of HIV and to encourage testing.
- GUM clinicians are visiting each GP in Wandsworth to offer training and encourage HIV testing.
- A project recommending HIV testing to all new registrations at GPs from the Wandle area .
- HIV testing is currently offered to all women in the antenatal service.
- Work with faith leaders with black African congregations to raise awareness, encouraging testing, and treatment.
- South West London work for the black African community, including a community testing pilot, and condom distribution.
- Increasing Chlamydia screening by GPs.
- Offering joint Chlamydia / Gonorrhoea screening in RSH.
- Teaming screening providers with the school nursing teams.
- Freephone number to request a kit be posted.
- Wandsworth prison will shortly open a joint Chlamydia / Gonorrhoea screening service.

Well-being and mental health

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The situation in Wandsworth

- The prevalence of mental health disorders amongst children and young people is estimated to be 11% for boys and 8% for girls aged between 5 and 15, or approximately 3,000 children in Wandsworth. Wandsworth has high prevalence of all types of common mental disorder. The rate for neurotic disorders is 200 per 1,000 population in Wandsworth compared to 182 in London, and 38 per 1,000 for depressive episodes compared to 35 in London. The rate of suicide and undetermined injury in 2008 was lower in Wandsworth (5.2) compared with Inner London (8.7).

What social and economic drivers are associated with well being and mental health?

- People with mental health problems are likely to engage in behaviour that increases the risk of poor mental health eg likely to have poor diets, take less exercise, smoke heavily and dependent on alcohol increasing risk of illness as cardiovascular disease. E.g. 44% of people with common mental health problems were smokers compared with 27% of people without these problems.
- Childrens issues may be linked to educational failure, family disruption, disability, ethnicity, offending and antisocial behaviour.
- The most deprived wards have the highest mental health need, other determinants include males, and black ethnic groups.
- Dementia and depression are factors for maintaining independence in older people.

Suggested solutions to improve well-being and mental health

- Population based preventive programmes around emotional wellbeing, arts and culture and community engagement, targeted support programmes and one to one specialist treatment.
- Health and social services should promote mental health for all, working with individuals and communities to promote inclusion and participation, and also to combat discrimination against individuals and groups with mental health problems.

• What is being done in Wandsworth to improve well-being and mental health

- Increasing Access to Psychological Therapies, for depression and anxiety and helping unemployed people back into work.
- Bibliotherapy, Books on Prescription, a partnership with the Libraries Service in Wandsworth.
- Mood Manager, DVD addressing depression, a partnership with Wandsworth Pharmacist
- SMILE DVD, enabling parents and schools to raise awareness of emotional health and well being
- Mental Health Resource Directory for all healthcare professionals listing services in Wandsworth and referral routes.
- Bereavement Pack for patients who are suffering from grief and sudden loss.
- Tamil Pack developed containing Tamil translations of the NICE guidelines on depression and anxiety.
- Living and Learning Courses; De-Stress through Exercise/Voice Work, Managing Stress and Relationships skills.
- Healthy Schools PSHE curriculum includes emotional health and well being
- Mental Health First Aid Instructor Training to raise awareness of mental health issues and sign post early to services.
- Child and adolescent mental health, Community Mental Health Teams and crisis intervention services for specialist treatment

Alcohol related admissions

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The situation in Wandsworth

- Estimates suggest that 40,000 Wandsworth residents (16-64) are drinking to a degree where they are putting their health at risk (Hazardous) or have already be experiencing health problems as a result of their drinking (hazardous) – this is 14% of the population. In 2008/09 over 3000 Wandsworth people were admitted to hospital for alcohol related harm, with 518 people receiving alcohol treatment services. There is no evidence to suggest that the incidence of alcohol misuse is more significant in any particular locality Wandsworth, although a number of areas such as Clapham, Tooting and Roehampton have flagged street drinker concerns.

What social and economic drivers are associated with alcohol?

- The highest level of ambulance call outs for alcohol related incidents and treatment for primary alcohol misuse is for those aged 35 – 44 years. 59% of people accessing treatment in 2008/09 were male, and the majority of people were White British.
- The homeless have greater levels of alcohol dependence. Over 74% of the combined caseloads of Wandsworth Floating Support and Outreach have been primary alcohol users.

Suggested solutions to prevent alcohol related admissions

- Alcohol screening and the provision of brief advice to those identified as hazardous/harmful drinkers. The SIPS research program suggests that screening is most effectively developed to large audiences in general practice.
- Structured alcohol treatment for alcohol dependence.

What is being done in Wandsworth to prevent alcohol related admissions

- There is one brief intervention post in St Georges hospital to support the delivery of alcohol screening and referral
- Treatment services for dependant drinkers in Wandsworth are at full capacity, among the measures to reduce this pressure is the establishment of the alcohol liaison team in St Georges Hospital

Under 75 mortality

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The situation in Wandsworth

- There were 1,800 under 75 deaths in Wandsworth between 2007 and 2009. Nearly 40% were for cancer and 25% were for circulatory disease. Wandsworth rates compare unfavourably with Inner London.
- The largest contributors to Wandsworth's cancer mortality are lung cancer and female breast cancer

What risk factors are associated with premature mortality?

- More deprived communities, males and certain ethnicities have higher risks. People with learning disability are particularly at risk of heart disease. Smoking: prevalence of 24.2%. Drinking, 19% drink more than (22-50 units per week for males and 15-35 units for women). Poor diet and lack of physical activity (4.5% of adults are obese), and exposure to ultraviolet radiation through sunbeds and sunlight

Suggested solutions to premature mortality

- Prevention, and intervention; Smoking cessation, NHS health checks, physical exercise brief intervention
- NHS screening programmes; Breast, cervical and bowel screening
- Reducing delays in diagnosis, awareness and system delays

What is being done in Wandsworth to prevent under 75 mortality

- GP based heart disease screening, and statin prescription according to risk
- Stop smoking, one to one and group or work based support and a programme for HMP Wandsworth
- Adult weight management programmes including weekly group sessions, healthy eating and weight management talks, education and one to one support
- Physical activity clinics to encourage and motivate people to be more active, based in GP surgeries
- Skin cancer awareness days and mole checks
- Wandsworth PCT are engaged in raising awareness and uptake of cancer screening programmes
- Health Trainers provide personalised health action plans, and signposting to healthy living resources Audit of system delays has been complete, with an associated action plan
- Redesign of services and pathways for long-term conditions such as diabetes and COPD

Carers

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The situation in Wandsworth

- There are estimated to be over 19,000 Carers in Wandsworth, 41% of Carers in Wandsworth are male.
- Estimate between 250-600 young carers, 54.2% of young carers have Special Educational Needs, compared to 28.7% of the general student population in Wandsworth. There is also a greater prevalence of mental health problems amongst young carers
- In the over 65 population, 800 people are carers receiving services for themselves
- A 2009 survey on the views of carers found that nearly half of all carers felt they were less physically healthy than people of the same age who were not carers, but nearly 70% felt themselves to be less emotionally healthy
- 80% of Carers are of working age so potentially juggle work and caring, and 19% provide 50+ hours of care a week
- 26% of carers received a needs assessment or review in 2010/11

What social and economic drivers are associated with help and support for carers ?

- People are living longer, but are less likely to have the support of an extended family
- Carers are experts at improving the quality of the lives of the people they care for
- Supporting Carers' health reduces pressures on health and social care services. Young Carers need recognition and support, but should not be encouraged to take on inappropriate caring roles.

Suggested help and support for carers

- National Strategy for Carers 2008 ; carers short breaks, re-entry into the job market, support for young carers, carers health checks, improved information, and staff training (including GPs) and NHS based pilot projects to better support carers
- Identification of carers remains a priority in order to promote independent living, this is particularly an issue for young carers and mental health service users where the role of the carer can more easily remain hidden

What is being done in Wandsworth to support and help carers

- Wandsworth's Young Carers' Project supports around 100 Young Carers aged 5-18
- Eligible Carers can now access services in their own right, according to their needs
- Funding for the Wandsworth Carers' Centre, which offers a drop-in facility and has two offices. Other voluntary organisations are also funded to support Carers, for example Age Concern Wandsworth and Wandsworth Mencap
- Carers breaks provided through social services and the NHS. For example the Respite Care at Home Voucher Scheme; the "Take a Break Holiday Grant"; and support for breaks at the Carers Centre and the Age Concern Carers' Support Service
- Carers' Emergency Support Scheme to ensure plans are in place in the event of an emergency
- Targeted and preventative services, offer a range of support accessed through all primary schools
- Young Carers are able to access the Extended School Disadvantage Subsidy, which entitles them to high-quality activities
- Information about the national helpline and websites for Carers can be found on www.carerswandsworth.org.uk

Maintaining independence

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The situation in Wandsworth

- The number of people of pensionable age is approximately 31,000. Of these 60% rely on the state pension only. For the 65+ population 5,000 were unable to manage at least one mobility activity, 2,000 were helped to live independently.
- The most common conditions in the over 65 group are hypertension (42%), and diabetes (19%). There is a high rate of excess winter deaths, and an increased trend of fractured neck of femur (falls). The number of people over 65 with depression is estimated at 2,300, the incidence of dementia is expected to increase, and approximately 4,500 people lose some bladder control. 20.3% of residents believe older people receive the support they need to live independently.

What social and economic drivers are associated with independence?

- Deprivation factors include economic elements such as low income, fuel poverty and social elements such as barriers to housing and key local services. Cold homes are associated with respiratory, circulatory disease and adverse effects on mental health.

Suggested help and support to ensure continued independence

- Maintaining health and well being. Physical ill health can also lead to worse mental well being, (depression often occurs after a stroke and being part of a tight community or family are known as a positive influence on treatment).
- Awareness and take up of winter fuel payments, 55% of private sector properties which fail the standard fail it on thermal comfort
- Nutrition and exercise support, services and staff training for signs and symptoms.
- Community safety awareness and fear of crime

What is being done in Wandsworth to support continued independence

- Wandsworth Strategy for Older People : Action plan 2008 – 2013.
- Enabling people to choose the appropriate care to die at home, was achieved for 18.5% of all Wandsworth deaths.
- People are supported to live at home through schemes such as the on line shopping service provided through Age Concern
- Expansion of the Expert Patient Programme (EPP) to enabling people to have more control over their condition.
- Range of physical activity services, including 'Active lifestyles 50+' and the Change 4 life programme
- Social networks, e.g. WATCH Lifeline community alarm, and outreach provided by Age Concern, and the library service.
- More self-contained apartments with on site care are available in line with the Wandsworth Older People Housing Strategy.
- As a result of local training and awareness of adult abuse, there has been an upward trend in the number of safeguarding alerts
- Self-directed support (Direct Payments and Individual Budgets) identifies the needs of an individual and then helps them identify the services they want to receive within their allocated budget.
- Transport; including the Freedom Pass, Wandsworth Community Transport and schemes for people with disabilities
- Local leisure centres provide exercise classes for older people.
- Partnership work to prevent delays in hospital discharges
- Activities to raise awareness of fuel poverty and target vulnerable households, offering grant (Warm Front) assistance

Hospital admissions for falls

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The situation in Wandsworth

- Serious falls will result in a hospital admission, the most debilitating falls result in a hip (neck of femur) fracture, and very often those people have been admitted to hospital for a previous fall, (50% of non-hip fractures go on to sustain a hip fracture). In total there were 832 fractures of neck of femurs between 2005 and 2010 for those aged 65 and over and registered with a Wandsworth GP. One hundred and eighty-six of these were males and 646 were females. The trend for both males and females is that the rate of hip fractures in the 65 years and older population is increasing.

What social and economic drivers are associated with falls? (ie causes and consequences)

- Older age (particularly caucasian women), a history of falls, chronic disease and impaired cognition, lone living, visual impairment including multifocal glasses, patients on four or more medications.

Suggested solutions to falls

- Better lighting, warning for slippery floors or uneven surfaces
- Increased physical activity to tackle depression and fear of falling,
- Ensuring a good diet, appropriate BMI and vitamin D levels
- Treating foot problems that otherwise give pain on walking or poorly fitting footwear.
- On average 50% of people experiencing a non-hip fragility fracture will go on to sustain a hip fracture, this population group are a prime target for early intervention

What is being done in Wandsworth to prevent falls

- **Falls risk assessment** is part of the initial assessment in inpatient geriatric wards, and by the Intermediate Care Team, Community Matrons and the Community Virtual Ward.
- Implementation of the Falls action plan with stakeholders including the NHS and the local authority is underway.
- Implement Falls Prevention and Bone Health Strategy

Excess winter deaths

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The situation in Wandsworth

- 109 excess winter deaths per year in Wandsworth since 2004, the level is higher than London and England.

What social and economic drivers are associated with winter deaths?

- Increasing age, particularly over 85 years, having a chronic respiratory or cardiovascular disease, and living alone
- Insufficient income to pay for fuel
- Not being vaccinated against flu
- Frailty and having a high risk of falls
- Learning disability, severe mental illness and dementia.
- Homelessness or sleeping rough.

Suggested solutions to prevent excess winter deaths

- Identify the most vulnerable, particularly elderly, in the community.
- Assessment for affordable warmth interventions, including energy efficiency, household income and fuel cost.
- Regular review of benefits entitlement and uptake
- Provision of annual medication review, and annual flu and pneumococcal vaccination
- Assessment and support programme to prevent falls
- Assessment for appropriate assistive technologies e.g. pendant alarms
- Help to develop a personal crisis contingency plan or ensure contact in severe weather if no friends or family.

What is being done in Wandsworth to prevent excess winter deaths

- **Annual flu vaccination campaign** and **falls risk assessment**
- Health and social care staff **contact people during severe weather, identify risks** and **check benefits entitlements**
- Older adult lunch clubs conversations about **how to keep warm** in winter.
- **Cold Busters** ,**Warm Front** , and **RE:New schemes** are available to improve energy efficiency of homes
- Ongoing work to improve the energy efficiency of council housing.
- **Age UK** provides help with benefits, supply of heaters, handyman service and adaptations to prevent falls.