SUPPLEMENTARY 1 - PRESENTATION

THE HEALTH AND WELLBEING BOARD

Tuesday, 8 September 2015

Agenda Item 4. Joint Strategic Needs Assessment 2015 - Key Recommendations (Pages 1 - 45)

Contact Officer: Tina Robinson
Telephone: 020 8227 3285
E-mail: tina.robinson@lbdd.gov.uk
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Barking and Dagenham Joint Strategic Needs Assessment 2015

Ian Winter CBE
Snapshot of B&D
Population 198,294
Growth of 32,684 in the last decade

61.1 healthy life expectancy
77.7 life expectancy
London life expectancy average is 80.0

55.5 healthy life expectancy
82.4 life expectancy
London life expectancy average is 84.1

Ranked #22 on index of deprivation
In top 7% most deprived boroughs in England

9,700 unemployed
10.5% of residents (UK average = 5.7 %)

97,923 BME residents
49.4% of total population
Life expectancy
by ward
Health risks
Risk factors contributing to the burden of ill health:

- Smoking: 23.7%
- Blood pressure: 16.3%
- Obesity: 13.4%
- Alcohol: 12.9%
- Inactivity: 5.5%
- Diet: 4.4%
- Drugs: 4.1%
Hospital admissions
Smoking: 3,911 unplanned admissions
COPD: 1,068 unplanned admissions
Diabetes: 1,969 unplanned admissions
Hypertension: 3,722 unplanned admissions
Smoking
Smoking prevalence comparison

- Barking and Dagenham: 23.1%
- London: 17.3%
- England: 18.5%
650 people died from a smoking related illness

2013/14

years of life lost to smoking related illnesses (per smoker)

at least 5
1 in 20
11-15 year olds regularly smoke
(this is slightly lower than Lewisham but the same as Greenwich)
2 out of 3 adults who smoke started smoking before the age of 18
Chronic Obstructive Pulmonary Disease
COPD is the most common cause of hospital admissions for smokers

We have the highest rate of hospital admissions for COPD in London
Mortality from COPD

Our mortality from COPD is nearly double that of London and England.
• Starts smoking behind the bike shed at 11
• Keeps on smoking and drinking as a teenager
• Has a family and smokes at home and in his car
• Daughter (Esther) diagnosed with Asthma at 3
• Esther has 2 unplanned hospital admissions for asthma
• Diagnosed with COPD at 50
• Prescribed Viagra at 52
• Stops working at 54 after a heart attack
• Wife dies aged 67 of lung cancer
• At 68 he needs social care to manage at home
• Dies at 70
Struggles in later years with LTC
Loses 10 years of potential life
Does not see grandchildren reach adulthood
• Diagnosed with asthma at 3.
• Starts smoking at 13
• Has peer-led stop smoking sessions
• Stops smoking at 16
• Has a family at 21
• Father (Ted) dies of COPD
• Esther doesn't smoke and her husband and children don’t smoke
• Retires at 65 and helps care for grandchildren
• End of life at 85
Reaches 85 and lives independently
Meets two great grandchildren
Generational habit of smoking is broken
Hypertension
Hypertension is a time-bomb for our health economy
Patients with hypertension with controlled blood pressure, August 2015

Legend
LBBDADMIN_Super_Output_Areas
Percent
- 60% - 60%
- 60.1% - 72%
- 72.1% - 78%
- 78.1% - 84%
- 84.1% - 90%

Source: Health Analytics
<table>
<thead>
<tr>
<th>Description</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Numbers detected and on blood pressure register</td>
<td>25,181</td>
</tr>
<tr>
<td>Projected total number of people with high blood pressure in the borough</td>
<td>41,899</td>
</tr>
<tr>
<td>Predicted number undetected</td>
<td>16,718</td>
</tr>
</tbody>
</table>

Predicted people with high BP who are currently detected: **60%**
Obesity and diabetes
Overweight and obesity are a big problem in the borough; especially for our children.
There is a direct link between weight and developing type 2 diabetes.
Almost two thirds of population is overweight or obese

- Obese or overweight adults (64%)
- Healthy weight adults (36%)
1 in 10 adults in the borough lives with diabetes
(some adults also have undiagnosed diabetes)

Nationally this is 0.6 in 10 people
Targeted approach
QOF recorded COPD prevalence per ward
Barking and Dagenham, June 2014

Legend
Prevalence
- 0.8% - 1.1%
- 1.2% - 1.7%
- 1.8% - 2%
- 2.1%
- 2.2% - 2.4%
Percentage of reception children (age 4-5) who are obese or overweight, by ward, Barking and Dagenham, 2013/14 to 2014/15

Legend

TYPE
- INFANT
- JUNIOR
- PRIMARY

Reception Excess Weight

RperExcess / none
- 22.5% - 22.8%
- 22.9% - 25%
- 25.1% - 28%
- 26.1% - 26.9%
- 27% - 30.2%

London Borough of Barking & Dagenham
lbdd.gov.uk
Percentage of year 6 children (age 10-11) who are obese or overweight, by ward, Barking and Dagenham, 2013/14 to 2014/15

Legend

TYPE
- INFANT
- JUNIOR
- PRIMARY

Year 6 Excess Weight

Sheet15.Y6perExcess
- 37.8% - 38.8%
- 38.9% - 40.3%
- 40.4% - 42.3%
- 42.4% - 43.1%
- 43.2% - 46.7%
Adult Obesity Rate per ward

Legend
Adult Obesity Rate per Ward
Obese adults
- 24.8% - 25.5%
- 25.6% - 28.1%
- 28.2% - 29.3%
- 29.4% - 29.8%
- 29.9% - 30.5%

Source: Local Health, www.localhealth.org.uk
Diabetes (all types) prevalence, 17+ years, percentage, May 2015

Legend
LBBREADALL.LSOA_census2011
prevalence
- 0.6 - 2.5
- 2.6 - 5.1
- 5.2 - 7.3
- 7.4 - 9.5
- 9.6 - 11.7

Source: Health Analytics

London Borough of Barking & Dagenham
lbbd.gov.uk
Investment strategy
To make the biggest impact on mortality we need to think about how we use our resources individually and collectively.

Currently we spend equally across ages and health conditions. Going forward we should spend proportionately according to health risk factors.

Furthermore we should invest in our unhealthiest wards, this means disinvesting in others!
By using average healthy life expectancy, health risk factors and the heat maps we can determine where we need to invest.

Here's a first stab at what that might look like...
Discussion