

REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 22 October 2014
AGENDA ITEM:	7
SUBJECT:	JSNA key dataset 2014/15
BOARD SPONSOR:	Dr Mike Robinson, Director of Public Health, Croydon Council
CORPORATE PRIORITY/POLICY CONTEXT:	
<p>Joint Strategic Needs Assessment (JSNA) is a statutory requirement of local authorities and CCGs. The findings of the Key Dataset (one part of the 2014/15 Croydon JSNA) will be of interest to a range of stakeholders and should inform strategic decision making and priority setting. In particular, the report will inform the refresh of the Joint Health and Wellbeing Strategy.</p>	
FINANCIAL IMPACT:	
No immediate financial implications.	

1. RECOMMENDATIONS

This report recommends that, having considered the public sector equality duty and the Joint Health and Wellbeing Strategy, the Health and Wellbeing Board:

- 1.1 Provide approval for the 2014/15 JSNA Key Dataset, allowing this to be disseminated to stakeholders in a timely fashion.**
- 1.2 Note the findings highlighted by this report, and consider the report alongside the broader information included in the Key Dataset, in the refresh of the Joint Health and Wellbeing Strategy.**
- 1.3 Use the findings from the Key Dataset in their ongoing work to oversee health and wellbeing in Croydon.**

2. EXECUTIVE SUMMARY

2.1 The summary of the JSNA Key Dataset highlights areas where Croydon's performance relative to the rest of England is better/improving over time or worse/deteriorating over time. This report shows main messages from the dataset grouped by improvement areas from the Joint Health and Wellbeing Strategy.

2.2 The areas where Croydon is described as performing well include: educational attainment at ages 16-19, looked after children living in the same placement for at least 2 years, breastfeeding, road casualties, HIV testing, excess mortality in serious mental illness, and permanent admissions to care homes.

- 2.3 The areas where Croydon's performance is described as a challenge include: childhood immunisations, youth offending, excess weight in 10-11 year olds, HIV and sexually transmitted infections, flu vaccination, drug and alcohol treatment, gap in life expectancy between deprived and affluent areas for women, NHS health checks, homelessness, carers' satisfaction with services, people entering talking therapies, and diagnosis rate for dementia.
- 2.4 The areas described as emerging issues (i.e. where area could become a future challenge if current trends continue) include: educational attainment at key stage 2, life expectancy for men, cancer incidence and deaths, emergency readmissions within 30 days of discharge, emergency admissions for chronic ambulatory care sensitive conditions, and adult re-offending.
- 2.5 Other areas where Croydon's population has high need or emerging need relative to other areas include: children eligible for free school meals, unaccompanied asylum seeking children, autistic spectrum disorder, severe mental illness prevalence, and diabetes prevalence.

3. DETAIL

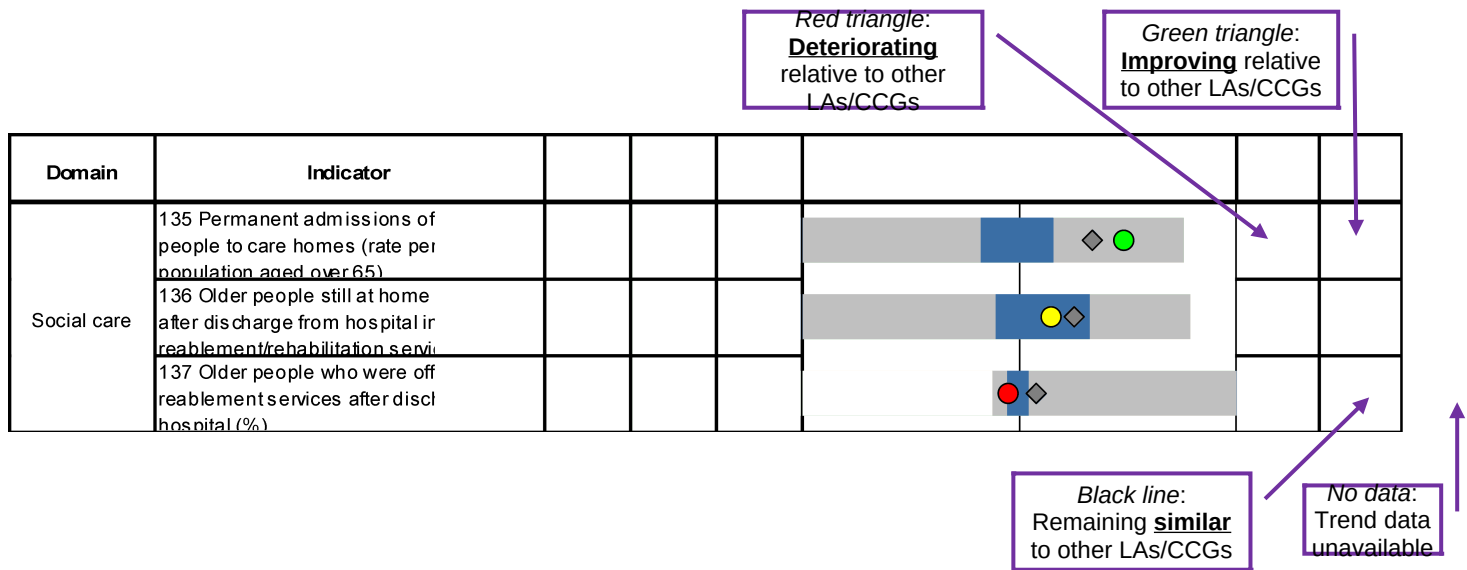
3.1 Background

The JSNA Key Dataset brings together comparative data to show Croydon's relative position in relation to more than 200 indicators relating to health and wellbeing. It should be used both to investigate Croydon's performance in specific areas (such as crime, social care, health services) and to inform strategic prioritisation and commissioning decisions across the breadth of health and wellbeing.

The set of indicators has been developed over the lifetime of the JSNA. The data is from publically available sources on the Internet (with the exception of 5 indicators that are accessible via websites with restricted access). The indicators included in the 2014/15 dataset were refreshed through consultation with stakeholders and the changes are detailed in Appendix 3 of the report.

The information is intended to give an overview of comparative data for Croydon to inform strategic prioritisation and commissioning decisions. Areas highlighted in the report should be investigated further in the context of other local intelligence.

The **columns on the right** show the **1 year and 3 year trend**, based primarily on Croydon's ranking relative to other local authorities/CCGs.



As with all comparative data of this kind, there is an inevitable **time lag**. The JSNA Key Dataset has kept this to a minimum by using most recent data from each source that was available at the cut off point for this report (5th August 2014).

It is important to grasp that the trend data compares **relative performance or need**. There may be areas where Croydon has improved on its own performance in previous years, however, if others in the country are improving at a faster rate than Croydon is improving locally, Croydon's ranking will have fallen and will show deterioration in performance.

It is also important to remember that the indicators in this Dataset are a selection, and only part of the story. Although the indicators in the Dataset are constantly updated in consultation with service leads, there are many areas where data is simply not available (such as the number of problem drinkers), or of low quality (such as data on diet), or where data is available but where indicators have not been prioritized by stakeholders for inclusion in the Dataset. For this reason, the Dataset should be used in conjunction with other local intelligence to inform commissioning decisions.

3.3 How the information was summarised

There are many potential approaches to summarising the wealth of information contained in the dataset. In previous years, the approach used focused mainly on trends over time, while also considering current performance.

This year's approach was developed to consider equally current performance and trends over time, in order to identify levels of need or performance that fall into the following 5 categories:

- **Areas where Croydon is performing well:** areas where Croydon's performance is relatively good;
- **Challenges:** areas where Croydon's performance needs to improve;
- **Emerging issues:** areas that will become challenges if current trends continue;
- **High need:** areas where Croydon has high need relative to the rest of England and need is increasing or staying the same;
- **Emerging needs:** areas that will become high need if current trends continue.

More detail about the method used and the full list of indicators highlighted in the summary is on pages 6 to 14 of the JSNA Key Dataset report.

The last two categories describe indicators that are considered strictly measures of need rather than performance. Many of the indicators in the dataset measure both need and performance to some extent.

To aid in interpretation of the information, the main messages from the summary have been grouped under the improvement areas in the Joint Health and Wellbeing Strategy.

3.4 Main areas where Croydon is performing well

These are areas where Croydon's performance is better than other local authorities/CCGs and the trend is improving¹.

Areas where Croydon is performing well <i>(Areas where Croydon's performance is relatively good)</i>	
1) Giving our children a good start in life	2) Preventing illness and injury and helping people recover
<ul style="list-style-type: none"> • Educational attainment at age 16-19 (including gap for children eligible for free school meals) • Looked after children living in the same placement for at least 2 years • Breastfeeding 	<ul style="list-style-type: none"> • Road casualties • Uptake of HIV testing
3) Preventing premature death and long term health conditions	4) Supporting people to be resilient and independent
<ul style="list-style-type: none"> • Excess mortality in adults with serious mental illness 	<ul style="list-style-type: none"> • Permanent admissions to care homes
5) Providing integrated, safe, high quality services	6) Improving people's experience of care

Each area in the table is considered alongside relevant sections from the JSNA Key Dataset below.

¹ For some indicators where Croydon is currently in the best performing 25% LAs/CCGs, the trend may show no improvement or deterioration. The method is described in full on page 7 on the JSNA Key Dataset report.




- Croydon performs well for indicators relating to **educational attainment at ages 16-19**. The data is for 2012/13. The position of the green circle shows that Croydon is in the top ranking 25% of local authorities for most of the indicators and performance has mostly improved over the last 1-3 years. (Educational attainment at key stage 2 is considered later in this report, under 'emerging issues'.)

Domain	Indicator						
School attainment	67 Attainment at key stage 4 (% 5+ GCSEs at grades A*-C incl English and Maths)						
	68 Gap in attainment at key sta (between pupils receiving free meals and the rest)						
School absence	69 Pupil absence (% of half da						
Education and training	114 16-18 year olds not in edu employment or training (% of 1 olds)						
	115 19 year olds attaining 2 A-I equivalent (% of 19 year olds)						


- In Croydon in 2013, 82% of **looked after children had been living in the same placement** for at least 2 years, compared with the England average of 67%. The position of the circle shows that Croydon is in the top ranking 25% of local authorities. (The indicator on unaccompanied asylum seeking children is considered later in this report, under 'areas of need'.)

Domain	Indicator						
Looked after children	72 Looked after children (per 1 population)						
	73 Unaccompanied asylum se children (per 10,000 child popul						
	74 Looked after children living i placement for at least 2 years (looked after children)						



- Croydon is in the top ranking 25% of local authorities for **breastfeeding** and **smoking during pregnancy** and the trend columns show performance has mostly improved over the last 3 years. For breastfeeding prevalence at 6-8 weeks, Croydon's performance is better than the London average (indicated by the position of the green circle to the right of the grey diamond), whereas for smoking during pregnancy, Croydon's performance is worse than the London average.

Domain	Indicator						
Maternal and child health	89 Smoking during pregnancy (mothers)						
	90 Breastfeeding initiation with (% of mothers)						
	91 Breastfeeding prevalence a from birth (% of infants)						

- Croydon is in the top ranking 25% of local authorities for **road casualties** and performance has improved over the last 3 years.

Domain	Indicator						
Road accidents	27 Killed or seriously injured c on roads (rate per 100,000 pop.						

- Croydon is in the top ranking 25% of local authorities for **uptake of HIV testing** and **excess mortality in adults with serious mental illness**. These indicators are considered later in this report, alongside other indicators from the HIV and sexually transmitted infections section and the mental health section, under 'challenges'.
- Croydon is in the top ranking 25% of local authorities for **permanent admissions to care homes**, for both adults aged under 65 and over 65. The position of the circle to the right of the grey diamond shows that Croydon is also performing better than the London average.

Domain	Indicator						
Social care	129 Permanent admissions of aged 18 to 64 to care homes (r 100 000 population aged 18-64						
Social care	135 Permanent admissions of people to care homes (rate per population aged over 65)						

3.5 Main challenges

These are areas where Croydon's performance is worse than other local authorities/CCGs and the trend is deteriorating².

Challenges <i>(Areas where Croydon's performance needs to improve)</i>	
1) Giving our children a good start in life	2) Preventing illness and injury and helping people recover
<ul style="list-style-type: none"> • Childhood immunisations • Youth offending • Excess weight in 10-11 year olds 	<ul style="list-style-type: none"> • HIV, sexually transmitted infections and reproductive health • Flu vaccination • Drug and alcohol treatment
3) Preventing premature death and long term health conditions	4) Supporting people to be resilient and independent
<ul style="list-style-type: none"> • Gap in life expectancy between deprived and affluent areas for women • NHS health checks 	<ul style="list-style-type: none"> • Homelessness • Carers' satisfaction with services
5) Providing integrated, safe, high quality services	6) Improving people's experience of care
<ul style="list-style-type: none"> • People entering talking therapies • Diagnosis rate for dementia 	

² For some indicators where Croydon is currently in the worst performing 25% LAs/CCGs, the trend may show no improvement or deterioration. The method is described in full on page 7 on the JSNA Key Dataset report.

- Croydon's performance is consistently within the worst 25% of local authorities for **childhood immunisations**. The position of the circle shows that Croydon is close to the London average for most of the indicators, but performs particularly worse than the London average for uptake of immunisations at age 5.

Domain	Indicator							
	54 DTaP / IPV / Hib vaccination (1 year old)							
	55 Hib / MenC booster vaccination coverage (2 years old)							
	56 PCV booster vaccination coverage (5 years old)							

- Croydon has a higher rate of **youth offending and re-offending** than the England and London averages, and the trend has deteriorated relative to other local authorities over the last 1-3 years.

Domain	Indicator							
Youth offending	70 First-time entrants to the youth system (rate per 100,000 10-17)							
	71 Youth re-offending (% re-offending within 12 months)							

- Croydon's performance is in the worst 25% of local authorities and lower than the London average for **seasonal flu vaccination**, both uptake in at-risk groups aged under 65 and in older people aged over 65.

Domain	Indicator						
Vaccination	128 Flu vaccination coverage (≥ individuals aged 6 months to 65)						
Vaccination	131 Flu vaccination coverage (≥ 65)						
	132 PPV vaccination coverage (≥ 65)						

- Trend data for many of the indicators on drugs and alcohol shows deterioration in Croydon's performance over the last 3 years. The indicators on completion of **drug and alcohol treatment** are highlighted as challenges, because Croydon's performance is significantly worse than the London and England averages for treatment of non-opiate users and alcohol treatment.

Domain	Indicator						
Drugs	226 Opiate and/or crack cocaine (estimated % of population aged 16-25)						
	227 Drug offences (rate per 1,000 population)						
	228 Successful completion of treatment (opiate users) (% of total treatment)						

- The **gap in life expectancy for women between deprived and affluent geographical areas** within Croydon is highlighted as a challenge, and is considered alongside other indicators for life expectancy in the 'emerging issues' section of this report.

- Croydon's performance on indicators for the **NHS health checks** programme is currently among the worst ranking local authorities in England. The data is for 2013/14 and reflects that following the transfer of Public Health duties to local authorities in April 2013, the way Croydon had been inviting people (making offers) for an NHS Health Check was no longer viable. Public Health has been working to develop alternative ways of running the programme and these indicators will be expected to improve.

Domain	Indicator						
NHS health checks	258 Offered an NHS health check (cumulative % of eligible people 74)						
	259 Received an NHS health check (cumulative % of eligible people 74)						

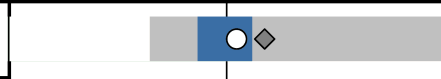
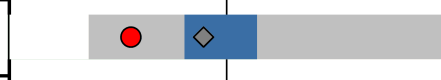
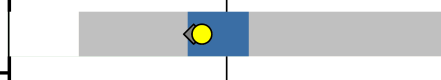
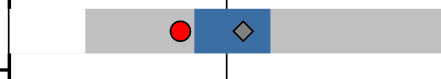
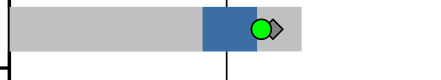



- The rate of **households in temporary accommodation** has increased in Croydon more than other local authorities over the last 1-3 years. Croydon has a higher rate of homelessness than the London average.

Domain	Indicator						
Homelessness	10 Homelessness acceptance (1,000 households)						
	11 Households in temporary accommodation (rate per 1,000 households)						
	12 Households in bed & break accommodation (rate per 1,000 households)						

- Among the indicators below that relate to carers, the last three relate to carers' satisfaction with services, as reported by carers in the national Carers' Survey for 2012/13.

Domain	Indicator							
Carers	39 Carer reported quality of life							
	40 Health-related quality of life (score)							
	41 Isolation in adult carers (% of respondents who had as much contact as they would like)							

- In the section of indicators below on mental health, the first two red circles are highlighted as challenges (**people entering talking therapies** and **diagnosis rate for dementia**) and the third red circle (prevalence of severe mental illness) is highlighted under the section on areas of need. Excess mortality for adults with serious mental illness is highlighted as an area where Croydon is performing well.

Domain	Indicator						
	193 Spend per head on mental health						
	194 People entering talking therapies (% of people estimated to have depression)						
	195 Recovery following talking therapy (% of people moving to recovery receiving treatment)						
							
							
							
							
							

3.6 Main emerging issues

These are areas that are not currently highlighted as challenges, but where Croydon's performance is still worse than the England average, and the trend data shows deterioration, so that they are likely to become areas of challenge if current trends continue.

Emerging issues <i>(Areas that will become challenges if current trends continue)</i>	
1) Giving our children a good start in life	2) Preventing illness and injury and helping people recover
<ul style="list-style-type: none"> Educational attainment at key stage 2 	
3) Preventing premature death and long term health conditions	4) Supporting people to be resilient and independent
<ul style="list-style-type: none"> Life expectancy for men (including gap between deprived and affluent areas) Cancer incidence and deaths 	<ul style="list-style-type: none"> Emergency readmissions within 30 days of discharge
5) Providing integrated, safe, high quality services	6) Improving people's experience of care
<ul style="list-style-type: none"> Emergency admissions for chronic ambulatory care sensitive conditions 	
Wider determinants of health	
<ul style="list-style-type: none"> Adult re-offending 	

- Although Croydon is performing well for educational attainment at ages 16-19, **attainment at key stage 2** has deteriorated relative to other local authorities in the last year and will be highlighted as a challenge next year if current trends continue. The gap for pupils receiving free school meals is also lower than the London average, although close to the England average.

Domain	Indicator							
School attainment	65 Attainment at key stage 2 (% level 4 in reading, writing and mathematics)							
	66 Gap in attainment at key stage 2 (between pupils receiving free meals and the rest)							

- Although most of the **life expectancy** indicators do not show Croydon to be significantly different than the England average (reflected by the yellow circles), it should be noted that:
 - More of the indicators show deterioration over the last 1-3 years than improvement.
 - The gap in life expectancy for women between deprived and affluent geographical areas within Croydon is highlighted as a challenge. This indicator should be considered in context with indicator 139, which shows life expectancy for women for Croydon as a whole compared with other local authorities, and also in context of the other life expectancy indicators for women shown below.
 - Several of the life expectancy indicators for men (including 146 that shows the gap between deprived and affluent areas) are highlighted as emerging issues, meaning that if current trends continue, the indicator is likely to become a future challenge.

Domain	Indicator							
Life expectancy	138 Life expectancy at birth (m							
	139 Life expectancy at birth (w							
	140 Life expectancy at age 75 (

- There are a large number of indicators on **cancer** in the dataset (see pages 32-34 of the JSNA Key Dataset report), and the trend data shows more indicators to have deteriorated rather than improved in the last 1-3 years. The breast cancer and prostate cancer sections are shown below, selected because some of the indicators in them (breast screening rate and incidence of prostate cancer) are highlighted as challenges, and others (incidence of breast cancer and deaths from prostate cancer) are highlighted as emerging issues.

Domain	Indicator						
All cancers	161 Spend per head on cancer tumours						
	162 Two week wait cancer GP (rate per 100,000 population)						
	163 Incidence of all cancers (rate per 100,000 population)						
Breast cancer	176 Breast screening rate (% aged 53-70)						
	177 Incidence of breast cancer (100,000 population)						
	178 Deaths from breast cancer (100,000 population)						
Prostate cancer	181 Incidence of prostate cancer (100,000 population)						
	182 Deaths from prostate cancer (100,000 population)						

- Among the indicators on **hospital admissions**, emergency readmissions within 30 days of discharge and emergency admissions for chronic ambulatory care sensitive conditions are highlighted as emerging issues, and all cause elective hospital admissions is highlighted as a challenge, because Croydon's performance is significantly worse than the England average, and the trend data shows deterioration over the last 1-3 years.

Domain	Indicator						
Admission to hospital	245 All cause elective hospital admissions (rate per 1,000 pop)						
	246 All cause emergency hospital admissions (rate per 1,000 pop)						
	247 Emergency readmissions days of discharge from hospital						

- Among the indicators on crime and violence, **adult re-offending** is highlighted as an emerging issue. Although the rate of adult re-offending is close to the England average, the 1 and 3 year trend both show deterioration, indicating that this area would become a future challenge if current trends continue.

Domain	Indicator						
Crime	13 Total police recorded crime (1,000 population)						
	14 Adult re-offending (% re-offending within 12 months)						
	15 Average number of re-offences (number per offender)						

3.7 Main areas of need

Many of the indicators in the dataset measure both need and performance to some extent, however this section describes indicators that are considered strictly measures of need rather than performance, and highlights those where Croydon has relatively high need compared to other local authorities/CCGs.



Areas of ‘high need’ are those where there are much higher levels of need in Croydon than other local authorities/CCGs and need is increasing or staying the same³.

Areas of ‘emerging need’ are those areas that are not currently highlighted as high need, but where Croydon’s has higher need than the England average, and the trend data shows deterioration, so that they are likely to become areas of high need if current trends continue.

Areas of need

High need <i>(Areas where there are much higher levels of need in Croydon than other local authorities/CCGs)</i>	Emerging need <i>(Areas that will become high need if current trends continue)</i>
1) Giving our children a good start in life	3) Preventing premature death and long term health conditions
<ul style="list-style-type: none"> Children eligible for free school meals Unaccompanied asylum seeking children Autistic spectrum disorder prevalence 	<ul style="list-style-type: none"> Diabetes prevalence
3) Preventing premature death and long term health conditions	
<ul style="list-style-type: none"> Severe mental illness prevalence 	

- Croydon has a relatively high proportion of children eligible for free school meals, particularly at primary school level, for which the Croydon rate is higher than the London average.

Domain	Indicator						
Poverty	46 School children known to be free school meals (% of primary pupils)						
	47 School children known to be free school meals (% of secondary pupils)						

³ The method is described in full on page 13 on the JSNA Key Dataset report.

- Croydon has the highest rate of **unaccompanied asylum seeking children** of any local authority in England, due to the location of the Home Office UK Border Agency in the borough.

Domain	Indicator						
Looked after children	73 Unaccompanied asylum seeking children (per 10,000 child population)						

- **Autistic spectrum disorder prevalence** is highlighted as an area of high need. Croydon has a higher prevalence of autistic spectrum disorder than London and England and trend data shows deterioration (i.e. greater increase than other local authorities) over the last 1-3 years.

Domain	Indicator						
Learning disability	83 Learning difficulties known to schools (rate per 1,000 pupils)						
	84 Autistic spectrum disorder prevalence in schools (rate per 1,000 pupils)						

- **Severe mental illness prevalence** is an area of high need, considered in the mental health section under 'main challenges' above.
- Croydon has a slightly higher **prevalence of diabetes** than the England average and the trend has deteriorated (i.e. greater increase than other local authorities) over the last 3 years, so this is highlighted as an area of emerging need.

Domain	Indicator						
	186 Spend per head on endocrine, nutritional and metabolic problems						
	187 GP recorded diabetes prevalence of adults aged over 17						
	188 Access to diabetic retinopathy screening (attended screening those offered screening)						

3.8 Conclusion

The JSNA Key Dataset contains a wealth of information that can be used to inform strategic prioritisation, commissioning decisions and the refresh of the Joint Health and Wellbeing Strategy.

This report highlights some of the main messages from the JSNA Key Dataset based on current performance and trend data, grouped by improvement areas from the Joint Health and Wellbeing Strategy. The report should be considered alongside the broader information included in the JSNA Key Dataset.

4. CONSULTATION

4.1 The set of indicators has been developed over the lifetime of the JSNA through discussion with the JSNA Steering Group and service heads. The 2014/15 Key Dataset has been discussed at the multi-agency JSNA Steering Group which includes staff from the local authority, Croydon Health Services, Clinical Commissioning Group, HealthWatch and CVA and with relevant staff from various agencies nominated by the JSNA Steering Group.

5. SERVICE INTEGRATION

5.1 The dataset includes indicators of how effectively sections of the healthcare system are working together. The most relevant sections are those on social care (page 18 of the JSNA Key Dataset report) and health services (pages 41-43).

6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

6.1 There are no financial impacts.

7. LEGAL CONSIDERATIONS

7.1 There are no legal impacts.

8. HUMAN RESOURCES IMPACT

8.1 There are no human resources impacts.

9. EQUALITIES IMPACT

9.1 The report as a whole highlights areas of inequality where performance and need in Croydon is different from other local authorities/CCGs in England. The following sections also highlight inequalities between population groups within Croydon's population: life expectancy, healthy life expectancy and disability-free life expectancy (page 30 of the JSNA Key Dataset report), school readiness and school attainment (pages 21-22), mental health and learning disability (page 28).

9.2 Equalities issues are built into the JSNA prioritization process. Each topic submission is scored against eight criteria, one of which is the number of

equalities groups that are impacted upon by the topic under consideration.

10. ENVIRONMENTAL IMPACT

10.1 The dataset includes indicators of relevance to the environment. Relevant sections are those on environment, noise and air pollution (page 17 of the JSNA Key Dataset report).

11. CRIME AND DISORDER REDUCTION IMPACT

11.1 The dataset includes indicators or relevance to crime and disorder. Relevant sections are those on crime and violence (page 16 of the JSNA Key Dataset report) and youth offending (page 22).

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BACKGROUND DOCUMENTS: JSNA Croydon Key Dataset 2014/15