

Joint Strategic Needs Assessment (JSNA) Place-based Approach

Stakeholder Event: Oswestry





Overview

- Why are we all here?
- Why and what is a needs assessment?
- Why are you here?
- Today and moving forward





Oswestry: Joint Strategic Needs Assessment

- Local Authorities and CCGs (now ICS) have a legal Statutory Duty to undertake a Joint Strategic Needs Assessment (JSNA), through the health and wellbeing board.
- The JSNA seeks to identify **current** and **future health and wellbeing** needs in the local population and identify strategic **priorities** to inform commissioning of services based on those needs.
- These priorities in turn inform the **Health and Wellbeing Strategy** and **Integrated Care Strategy**, key documents as a basis for commissioning health and social care services in the local area.
- The JSNA aims to achieve the following through an evidence base and consultation:
 - Identify the health and wellbeing needs of the population of Highley;
 - Map the services/assets in the area;
 - Define achievable improvements in health and wellbeing outcomes for the local community.
 - Target services and resources where there is most need
 - Support commissioners, stakeholders and communities to deliver better health and wellbeing
 outcomes for the local community by making recommendations for how services can be improved /
 redesigned to make sure they are being delivered to the people who need them most.





Shropshire Health and Wellbeing Strategy 2022 – 2027

Vision: For Shropshire people to be the healthiest and most fulfilled in England

- Reducing inequalities
- Improving Population Health
- Working with and building strong and vibrant communities
- Joined up working

		Shropshire		Region England		d England			
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
Life expectancy and causes of death									
Life expectancy at birth (Male)	2018 - 20	-	-	80.2	78.5	79.4	74.1		
Life expectancy at birth (Female)	2018 - 20	-	-	83.7	82.5	83.1	79.0		
Under 75 mortality rate from all causes	2018 - 20	-	3,043	296.5	365.2	336.5	570.7	(220
Under 75 mortality rate from all cardiovascular diseases	2017 - 19	-	616	59.4	77.0	70.4	121.6		39
Under 75 mortality rate from cancer	2017 - 19	-	1,239	119.0	135.0	129.2	182.4	(O 37
Suicide rate	2018 - 20	-	96	11.4	10.5	10.4	20.3	0	
njuries and ill health									
Killed and seriously injured (KSI) casualties on England's roads (historic data)	2016 - 18	-	-	-	-	-	-		-
Emergency Hospital Admissions for Intentional Self- Harm	2020/21	→	435	146.8	166.6	181.2	471.7		4
Hip fractures in people aged 65 and over	2020/21	-	455	553	584	529	746		
Cancer diagnosed at early stage (experimental statistics)	2017	→	693	49.2%	51.4%	52.2%	36.8%	0	61.0
Estimated diabetes diagnosis rate	2018	-	-	71.4%	86.3%	78.0%	54.3%		
Estimated dementia diagnosis rate (aged 65 and over) < 66.7%	2022	-	3,251	60.1%	58.9%	62.0%	41.2%		
(significantly)									
Behavioural risk factors									
Admission episodes for alcohol-specific conditions - Under 18s	2018/19 - 20/21	-	40	22.2	24.9	29.3	84.0		
Admission episodes for alcohol-related conditions (Narrow): Old Method	2018/19	•	2,368	689	739	664	1,127	q	3
Smoking Prevalence in adults (18+) - current smokers (APS)	2019	-	36,082	13.7%	14.1%	13.9%	27.5%	O	
Percentage of physically active adults	2020/21	-	-	72.9%	63.0%	65.9%	48.8%		3.4
Percentage of adults (aged 18+) classified as overweight or obese	2020/21	-	-	68.0%	66.8%	63.5%	76.3%		
Child health									
Under 18s conception rate / 1,000	2020	-	62	11.5	15.1	13.0	30.4		2
Smoking status at time of delivery	2020/21	-	264	11.0%	10.6%	9.6%	21.4%		1.8
Breastfeeding initiation	2016/17	-	2,019	78.4%	68.9%	74.5%	37.9%		96.7
Infant mortality rate	2018 - 20	-	37	4.7	5.6	3.9	8.3	0	
Year 6: Prevalence of obesity (including severe obesity)	2019/20	-	-	15.1%*	23.9%	21.0%	30.1%		0
Inequalities									
Deprivation score (IMD 2015)	2015	-	-	16.7	-	21.8	42.0		0
Smoking prevalence in adults in routine and manual occupations (18-64) - current smokers (APS)	2019	-	-	25.6%	23.3%	24.5%	60.3%	O I	3.5
Inequality in life expectancy at birth (Male)	2018 - 20	-	-	5.5	10.1	9.7	17.0		0
Inequality in life expectancy at birth (Female)	2018 - 20	-	-	3.5	7.9	7.9	13.9		0
Wider determinants of health									
Children in low income families (under 16s)	2016		5,850	12.2%	20.3%	17.0%	31.8%		0
Average Attainment 8 score	2020/21	-	146,700	50.3	49.5	50.9	42.7		
Percentage of people in employment	2020/21	-	139,300				59.5%		
Statutory homelessness - Eligible homeless people not in priority need	2017/18	-	388	2.8	1.1	0.8	-	Insufficient number of valu	es for a spine cha
Violent crime - hospital admissions for violence (including sexual violence)	2018/19 - 20/21	-	170	20.0	37.7	41.9	116.8		0
Health protection									
Excess winter deaths index	Aug 2019 -	_	100	16 70/	19 00/	17.4%	50.2%		0.7



Shropshire's JSNA – Place based

Priorities place-based from 2019 onwards, focusing on local places/localities/communities. Why?

- Common/shared and best available evidence base
- Collectively understand the health and wellbeing needs of communities
- Understand the unique needs of people in a given location by working together to gain local knowledge and insight
- Asset-based approach that seeks to highlight the strengths, capacity and knowledge of all those involved





Today people in Oswestry are living longer, but not necessarily healthier lives...

Measure	England	Shropshire	Range (Ward)	Range (Ward)
IMD Score	21.7	17.2	3.7 (Copthorne)	37.6 (Harlescott)
Life expectancy at birth, (Male)	79.7	80.5	75.3 (Sundorne)	85.8 (Copthorne)
Life expectancy at birth, (Female)	83.2	83.6	79.5 (Tern)	89.6 (Clun)
Deaths all causes, all ages, SMR	100	96.7	65.4 (Copthorne)	145 (Worfield)
Deaths all causes, under 75, SMR	100	89.7	55.2 (Clun)	149 (Sundorne)
Preventable deaths, under 75, SMR	100	85.7	48.2 (Corvedale)	160.6 (Sundorne)

Indicator	Shropshire	England
Healthy Life Expectancy (HLE) Males	62.8	63.1
Inequality in HLE Males	5.5	9.7
HLE Females	67.1	63.9
Inequality in HLE Females	3.5	7.9

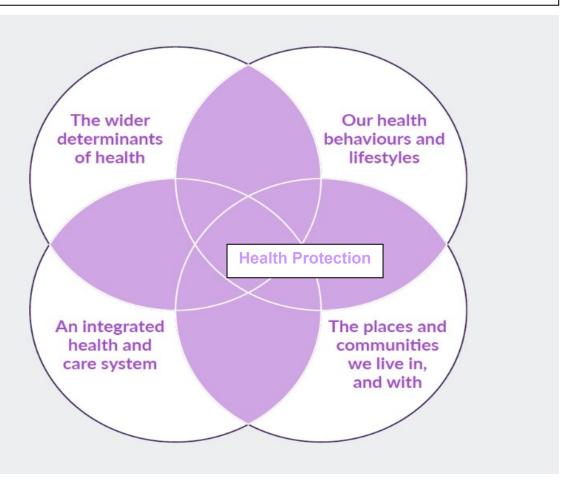
Area	Oswestry	Shrewsbury
Healthy Life Expectancy	66.1 years	72.7 years
Life Expectancy	82.1 years	84.4 years



What makes us healthy?

Understanding and Addressing Inequalities – taking a preventative approach

10% of a population's health and wellbeing is linked to healthcare access





Understanding our Population Health/Population Health Management (Insight/JSNA)



Place Based

✓ As well as the overall JSNA for Shropshire, JSNAs are being produced around smaller localities – namely Place Plan Areas

- ✓ There are 18 place plan areas in Shropshire, usually (not always) focused on a market town and its surrounding rural communities
- ✓ Based along geographical/communities boundaries rather than political ones

Community Engagement

Stakeholder and Resident engagement via:

- ✓ Questionnaires to residents
- ✓ Interviews
- ✓ Focus Groups
- ✓ Attending key meetings/groups

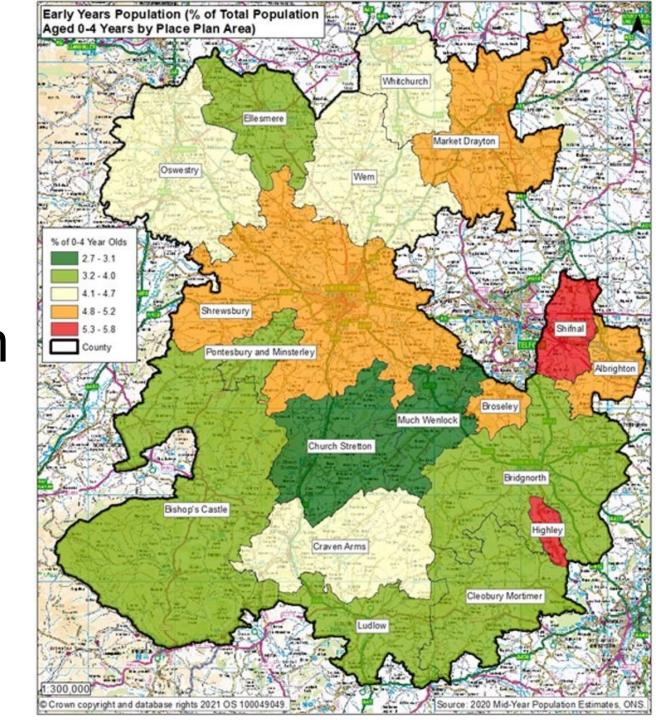
Web based JSNA

https://www.shropshire.gov.uk/public-health/jsna-data-beta/

✓ The web-based JSNA is an interactive tool that allows users to explore data relating to health need in Shropshire.



Oswestry Place Plan Examples of Key Health and Wellbeing Data





Ranking of Ward in Indicator out of 62 wards in Shropshire – lowest number is worse

				Oswestry		Gobowen, Selattyn a		Ruyton
Indicator	Oswestry East	Oswestry West	St Martin's	South	St Oswald	nd Weston Rhyn	Llanymynech	and Baschurch
Unemployment	16	9	29	5	41	25	54	47
Child Poverty, English Indices of Deprivation, 2019	10	8	12	41	32	20	38	54
Income deprivation, English Indices of Deprivation, 2019	8	9	12	18	32	18	50	59
IMD Score, 2019	19	15	24	26	37	28	24	60
Long term unemployment	9	5	30	2	48	40	27	53
General fertility rate: live births per 1,000 women aged 15-44 years	23	34	19	57	20	44	40	38
Low birth weight of live babies	8	31	11	22	9	45	55	34
A&E attendances in under 5 years old, three year average	45	54	62	57	61	60	46	36
Emergency admissions in under 5s	58	57	63	59	60	61	45	36
Emergency hospital admissions for injuries in under 15 years old	57	61	62	60	58	63	38	35
RANK OF AVERAGE RANK (lower number is worse)	14	24	30	33	50	52	53	59



Smoking in Pregnancy

Background

Smoking in pregnancy has long been recognised as having significantly negative health impacts for the growth and development of the baby and the health of the mother including complications in labour, miscarriage, still birth, premature birth and low birth weight. Reduced smoking in pregnancy will have health benefits for both mother and child and reduced costs to the NHS.

Methodology

Smoking at time of delivery is the number of mothers known to be smokers at time of delivery as a percentage of all maternities (live or still birth). The Place Plan area figures are based on those mothers who lived in that place plan area who delivered a child at Shrewsbury and Telford Hospitals Trust (SATH). Because there are very few deliveries in some of the place plan areas in one year, these figures are the combination of the last 5 years – 2016/17 to 2020/21. The Oswestry % v Shropshire is a statistical comparison of the two areas to take into account the different number of children in those areas, based on a 95% confidence interval using the Wilson scoring method.

Caveats

The data shown here concerns mothers who delivered a child at SATH only, not mothers from the area who delivered in other hospital providers.

Results

Oswestry had 940 deliveries in this 5 year period, which is the 2nd highest of all place plan areas behind Shrewsbury. The 5 year percentage for smoking at delivery for Oswestry (16.5%) is statistically higher than Shropshire's (12.8%) – 3 place plan areas had a higher percentage of mothers smoking at delivery. For this same cohort of mothers, the percentage known to be smokers at time of booking who lived in Oswestry was 17.6%, statistically higher than the Shropshire figure of 14%.

5 year Smoking at Delivery and at Booking data for Shropshire and Oswestry Place Plan Area, 2016/17 to 2020/21

Indicator	Oswestry Place Plan Area	Shropshire Overall	Highley % v Shropshire
Number of deliveries	940	10,289	
Percentage of mothers who were known to be smoking at time of delivery	16.5%	12.8%	Higher
Percentage of mothers who were known to be smoking at time of booking	17.6%	14.0%	Higher

Source: SATH Maternity Dataset for 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21



Quality & Outcomes Framework (QOF) Indicators 2020/21

	i	i	
Key to colour codes on table			
Area is statistically higher for this indicator than Shropshire			
Area is statistically similar for this indicator to Shropshire			
Area is statistically lower for this indicator than Shropshire			
Indicator	Oswestry Place Plan Area Eligible population	Oswestry Place Plan Area Prevalence for indicator	NHS Shropshire, Telford and Wrekin CCG
AF Prevalence	39,650	2.7%	2.5%
CHD Prevalence	39,650	3.4%	3.5%
Heart failure Prevalence	39,650	1.0%	0.9%
Heart failure due to LVSD Prevalence	39,650	0.4%	-
Hypertension Prevalence	39,650	16.9%	15.6%
Peripheral arterial disease Prevalence	39,650	0.8%	0.8%
Stroke and transient ischaemic attack Prevalence	39,650	2.5%	2.4%
COPD Prevalence	39,650	2.1%	2%
Asthma Prevalence (6+)	37,496	7.2%	7.1%
Obesity Prevalence (18+)	32 387	6.6%	7 3%



High dependency and other long term conditions group, cancer Prevalence

Mental health and neurology group, dementia Prevalence

Mental health and neurology group, learning disabilities Prevalence

Mental health and neurology group, mental health Prevalence

Musculoskeletal group, rheumatoid arthritis Prevalence (16+)

Mental health and neurology group, depression Prevalence (18+)

Mental health and neurology group, epilepsy Prevalence (18+)

Musculoskeletal group, osteoporosis Prevalence (50+)

High dependency and other long term conditions group, palliative care Prevalence

High dependency and other long term conditions group, diabetes mellitus Prevalence (17+)

Non-diabetic hyperglycaemia group, non-diabetic hyperglycaemia Prevalence (18+)

High dependency and other long term conditions group, chronic kidney disease Prevalence (18+)

Indicator

Shropshire	QOF Indicators 2020/21

Key to colour codes on table		
Area is statistically higher for this indicator than Shropshire		
Area is statistically similar for this indicator to Shropshire		
Area is statistically lower for this indicator than Shropshire		

Oswestry Place

Plan Area

Eligible

population

39.650

39.650

39.650

39.650

39.650

33,319

32,846

32,387

32,387

32,387

32,387

18,325

Oswestry Place

Plan Area

Prevalence for

indicator

4.0%

0.5%

1.0%

0.6%

0.8%

1.0%

7.1%

6.7%

16.0%

1.0%

5.6%

1.9%

NHS Shropshire,

Telford and

Wrekin CCG

4%

0.4%

0.9%

0.5%

0.8%

0.9%

7.3%

5.7%

14.5%

0.9%

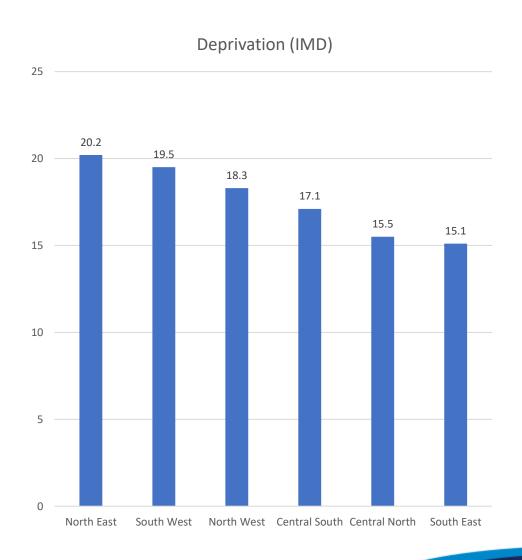
4.6%

0.9%



Deprivation 2020/21

		CYP aged 5 to 18 living in 20% most deprived quintile relative to England	Deprivation (IMD)
Central South	1742	1112	17.1
Central North	1473	753	15.5
North East	2375	326	20.2
North West	1698	339	18.3
South East	972	0	15.1
South West	1097	203	19.5
Shropshire	9357	2733	17.1

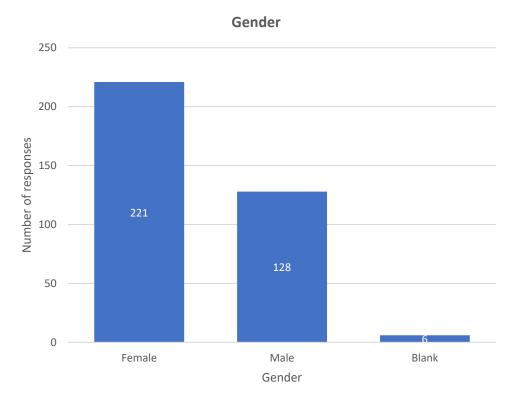




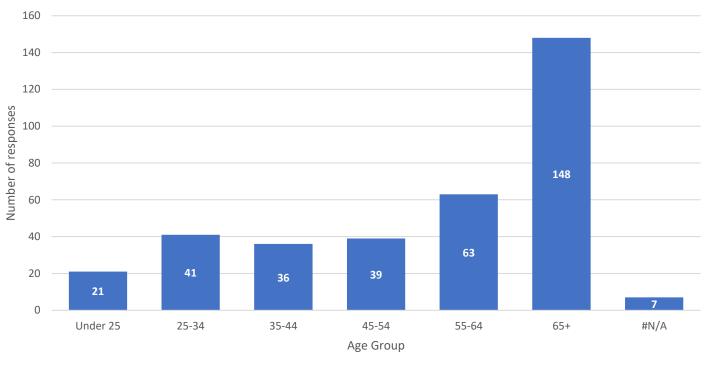
Overview of Survey Results

Ward based on the postcode supplied	
Chirk North (Wrexham)	2
Chirk South (Wrexham)	1
Ellesmere Urban	2
Gobowen, Selattyn and Weston Rhyn	38
Ketley & Overdale	1
_landysilio (Powys)	4
_langyniew and Meifod (Powys)	1
lanrhaeadr-ym-Mochnant and Llansilin (Powys)	1
_lanymynech	22
_oton	1
Oswestry East	25
Oswestry South	15
Oswestry West	18
Ruyton and Baschurch	3
St Martin's	89
St Oswald	25
Tern	1
Whittington	22
Nrenbury (Cheshire) _	1
¥N/A	83
Grand Total	355

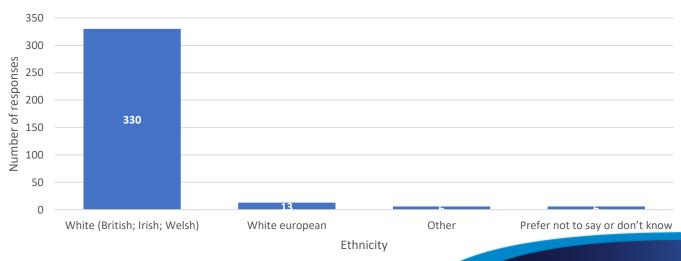




Age Group

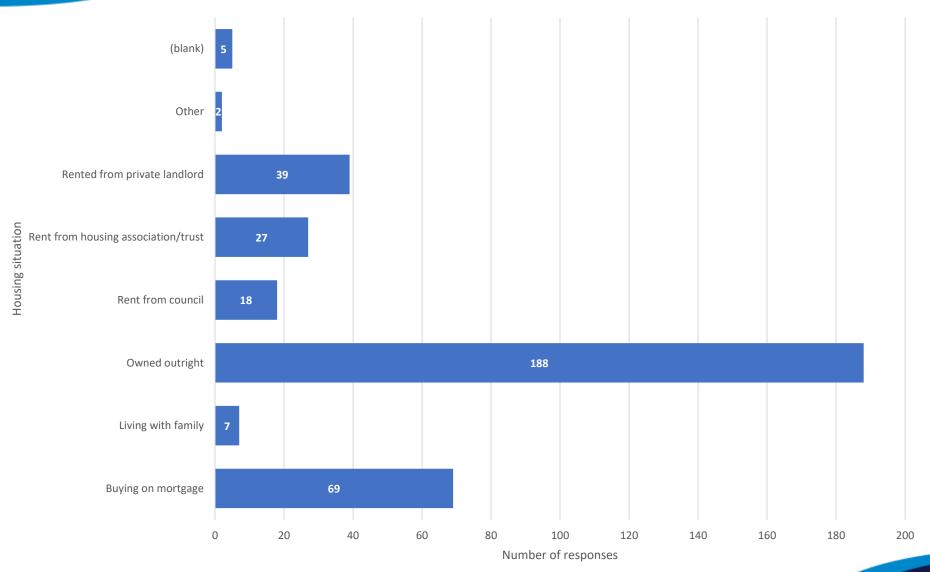


Ethnicity

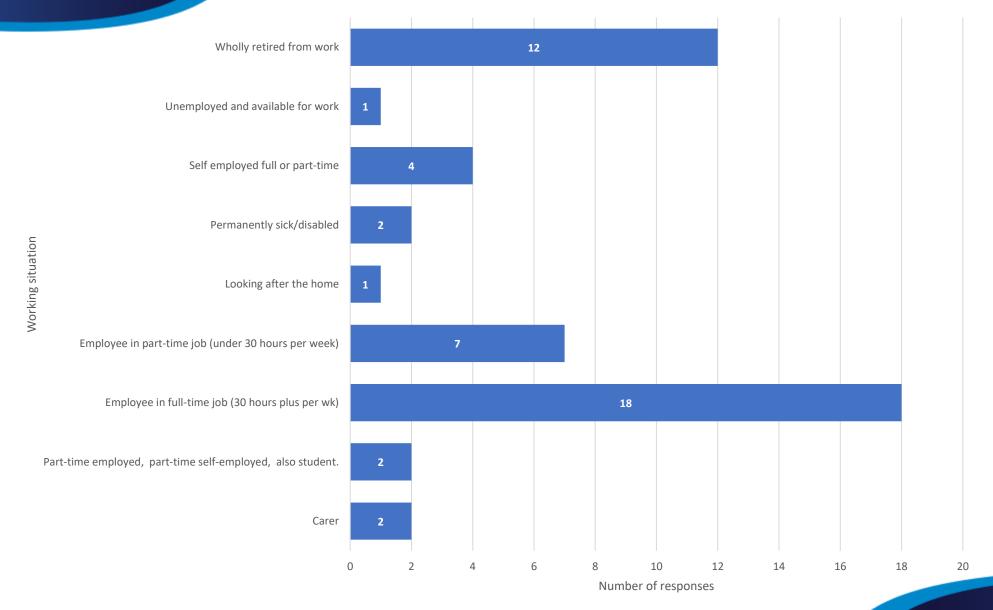






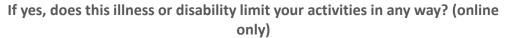


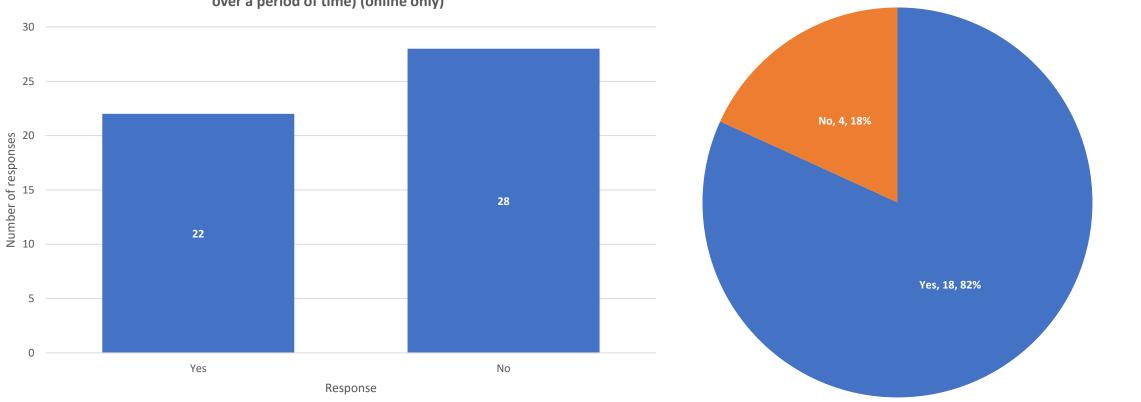
Working Situation





Do you have any long-standing illness and/or disability? (long-standing means anything that has troubled you over a period of time or that is likely to affect you over a period of time) (online only)

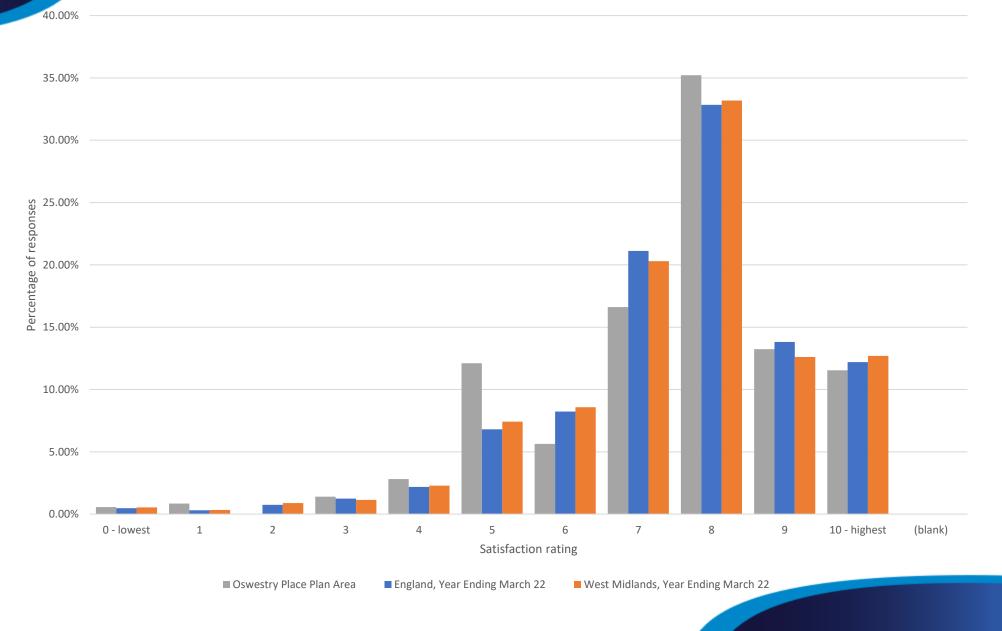






England and West Midlands figures from Annual Population Survey, ONS, for year ending March 2022

Oswestry figures from local survey

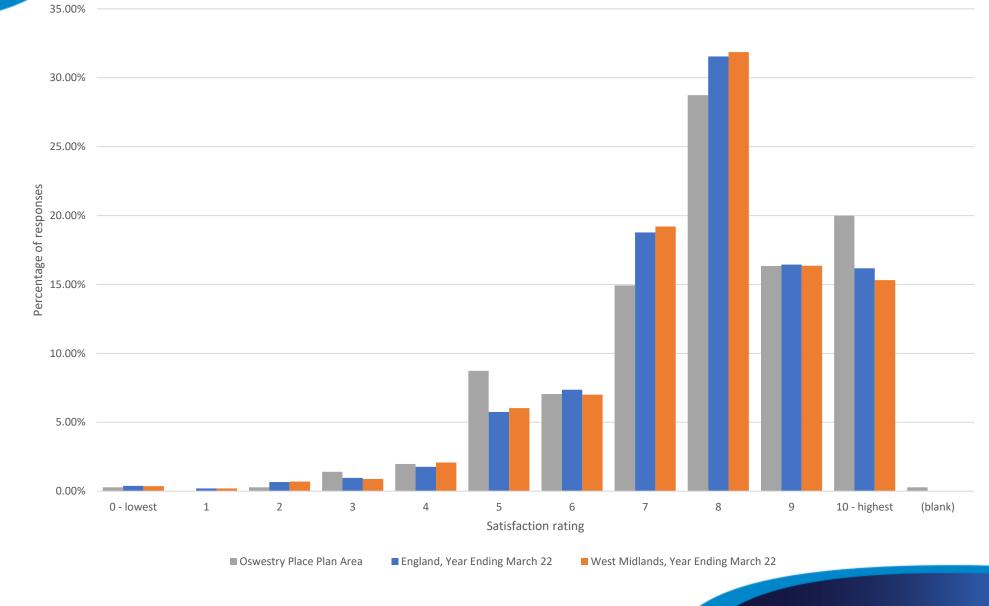




On a scale of 0-10, with 0 being lowest and 10 being highest, overall, to what extent do you feel that the things you do in your life are worthwhile?

England and West Midlands figures from Annual Population Survey, ONS, for year ending March 2022

Oswestry figures from local survey



5

■ England, Year Ending March 22

Satisfaction rating

6

8

■ West Midlands, Year Ending March 22

9

10 - highest

(blank)

30.00%

0 - lowest

2

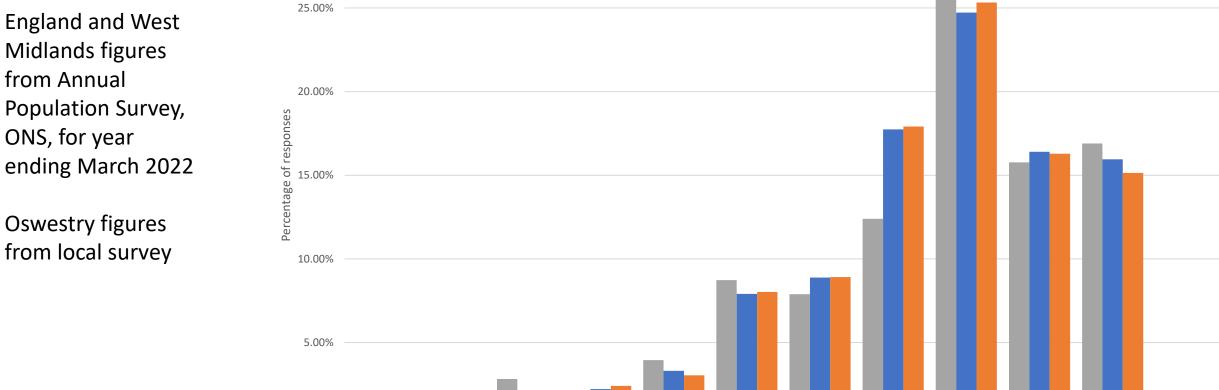
■ Oswestry Place Plan Area

3

England and West Midlands figures from Annual

Oswestry figures from local survey

ONS, for year

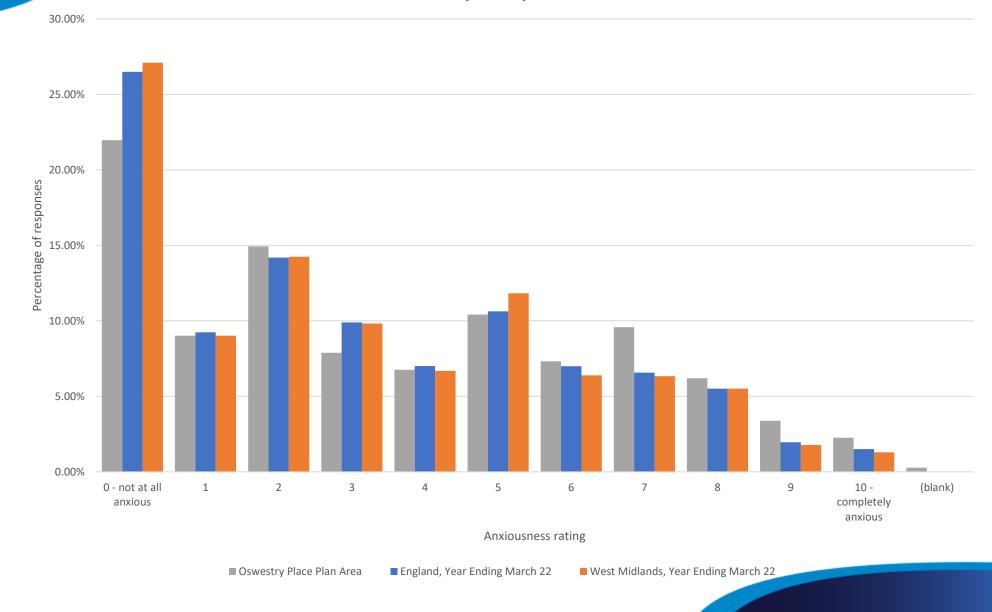




On a scale where 0 is "not at all anxious" and 10 is "completely anxious", overall, how anxious did you feel yesterday?

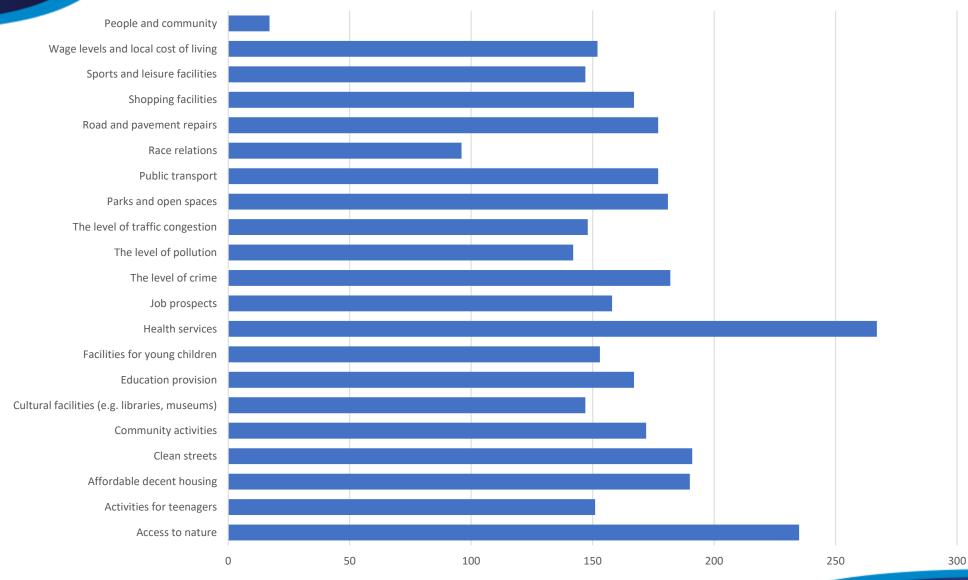
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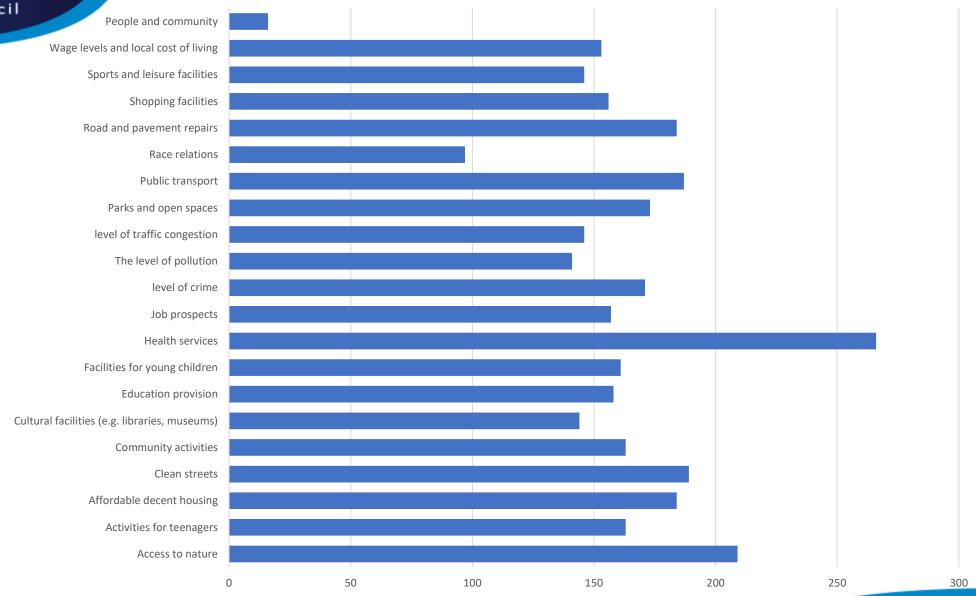




Thinking generally, which of the things below would you say are the most important in making somewhere a good place to live?

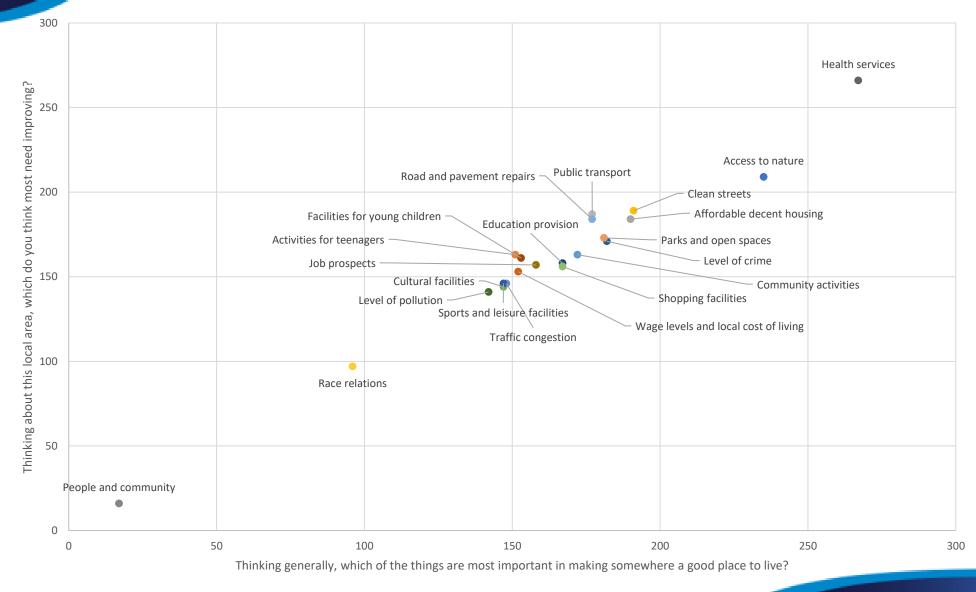


Thinking about this local area, which things do you think most need improving? (Online only)

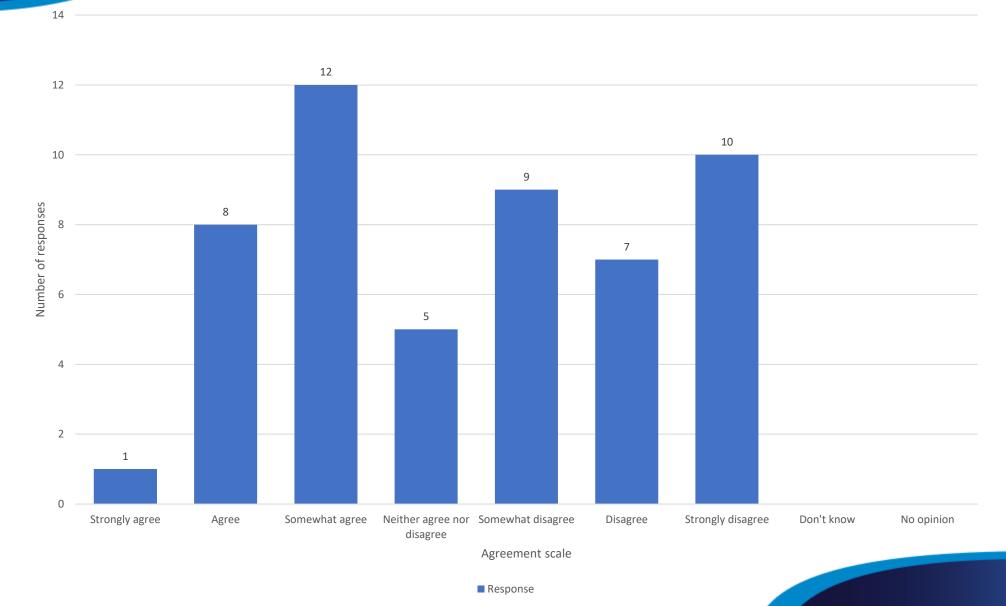




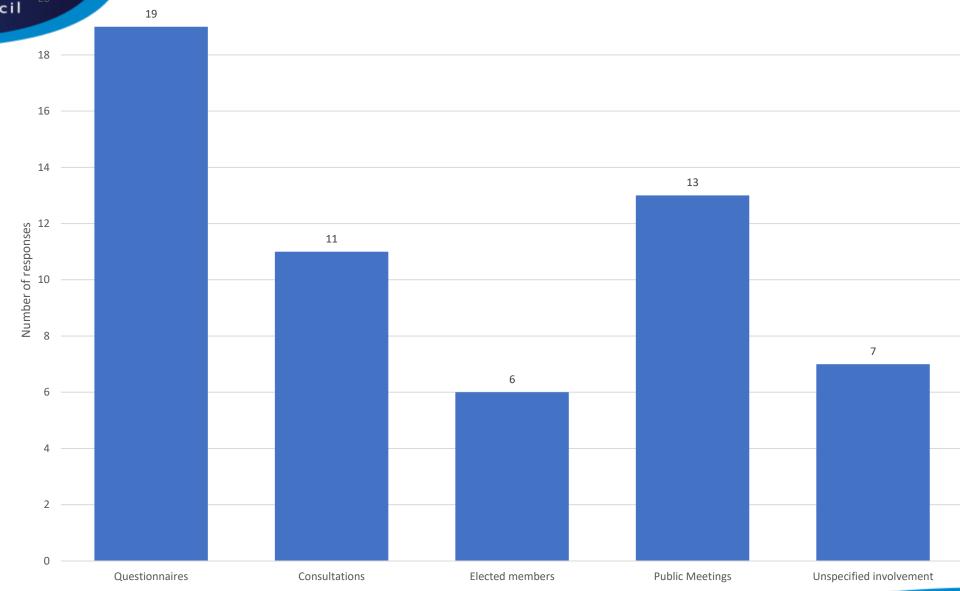
What are the most important factors in making somewhere a good place to live v What needs improving the most in Oswestry



Do you agree or disagree that you can influence decisions affecting your local area? (Online only)

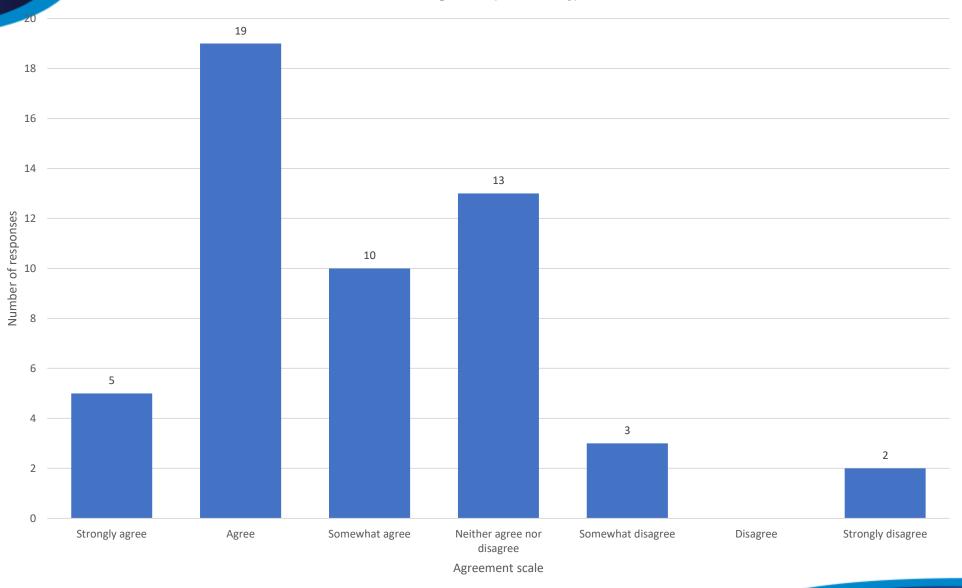






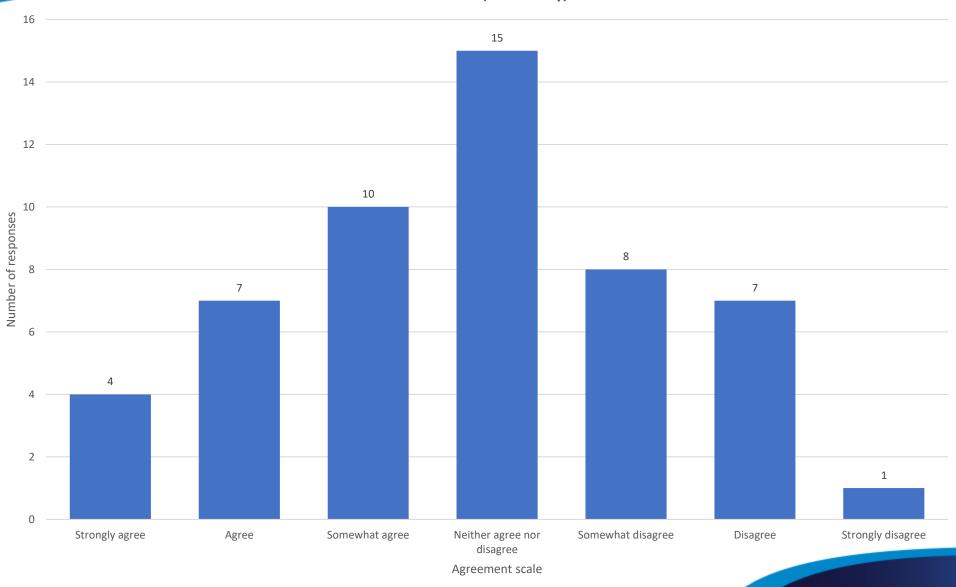


To what extent do you agree or disagree that your local area is a place where people from different backgrounds get on well together? (Online only)

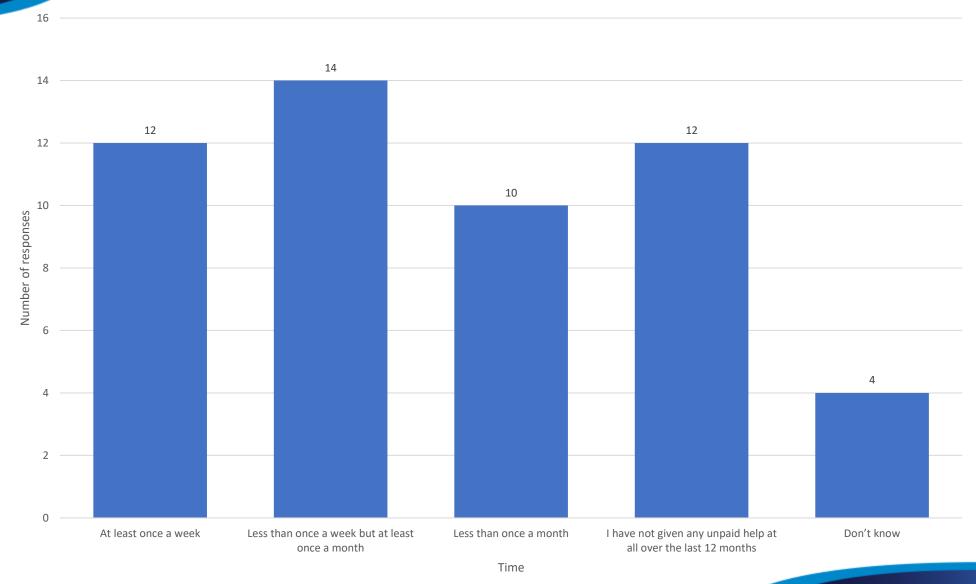




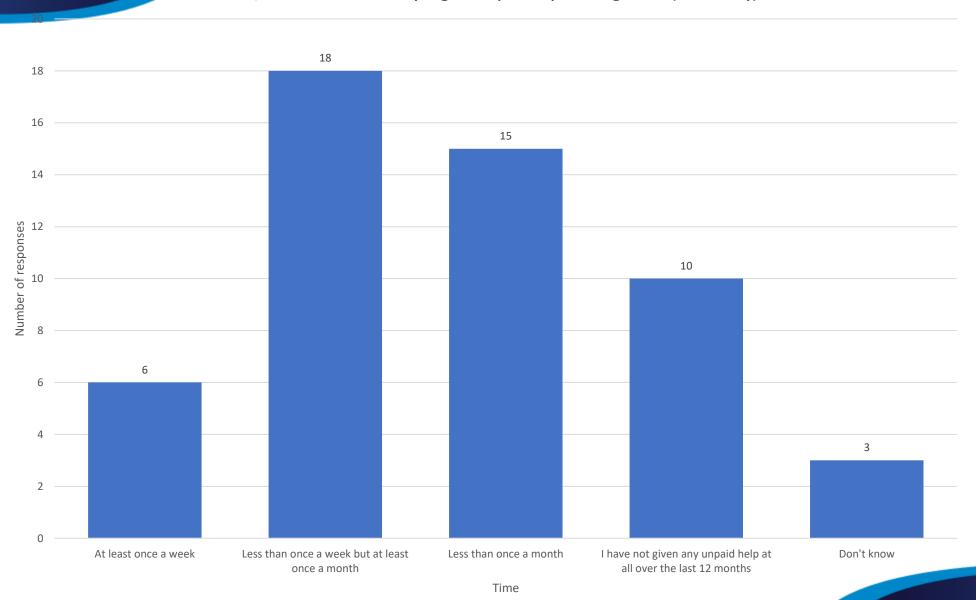
In your local area, would you agree that there's a problem with people not treating each other with respect and consideration? (Online only)



Overall, about how often over the last 12 months have you given unpaid help to any group(s), club(s) or organisation(s)? Please only include work that is unpaid and not for your family (Online only)

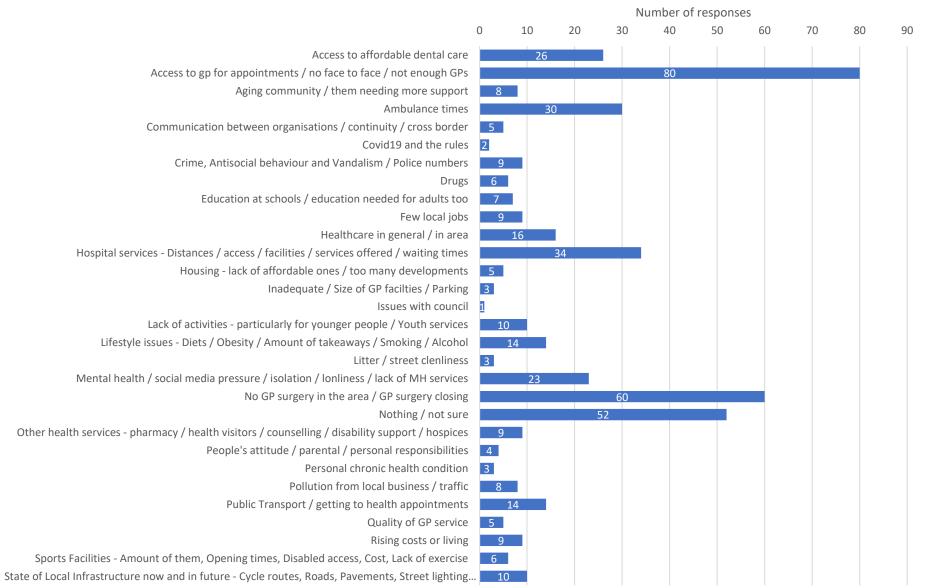


Overall, about how often have you given unpaid help as a neighbour? (Online only)





What do you think the biggest issues are regarding health and wellbeing in your area?



Note – 89 respondents supplied their postcode, which identified them as being in the Saint Martin's ward – Saint Martin's had a branch surgery of Chirk medical practice that closed in May 2022

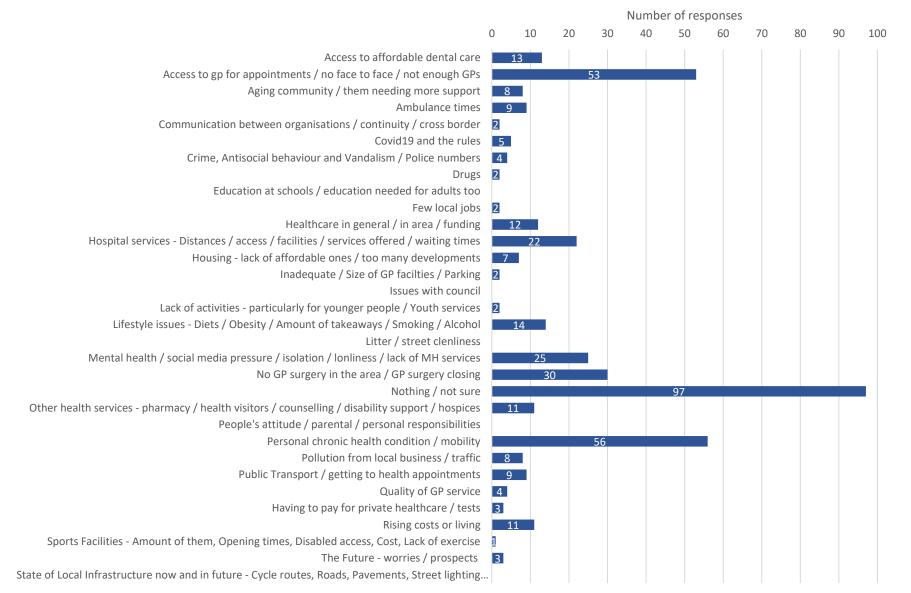
"No maternity services in Oswestry, had to deliver in Telford. No NHS dentistry in Oswestry."

"No surgery in the village - To get to chirk on public transport you have to go to Oswestry then chirk. 4000 people in Shropshire registered at Chirk"

"No surgery. If you need any hospital attention you need to go to Shrewsbury or Telford. Impossible if you don't drive. If your a widow it's a bit grim. Closed the cottage hospital in Oswestry. Not many buses and expenses "



What do you think the biggest health issues are that affect you and your family?



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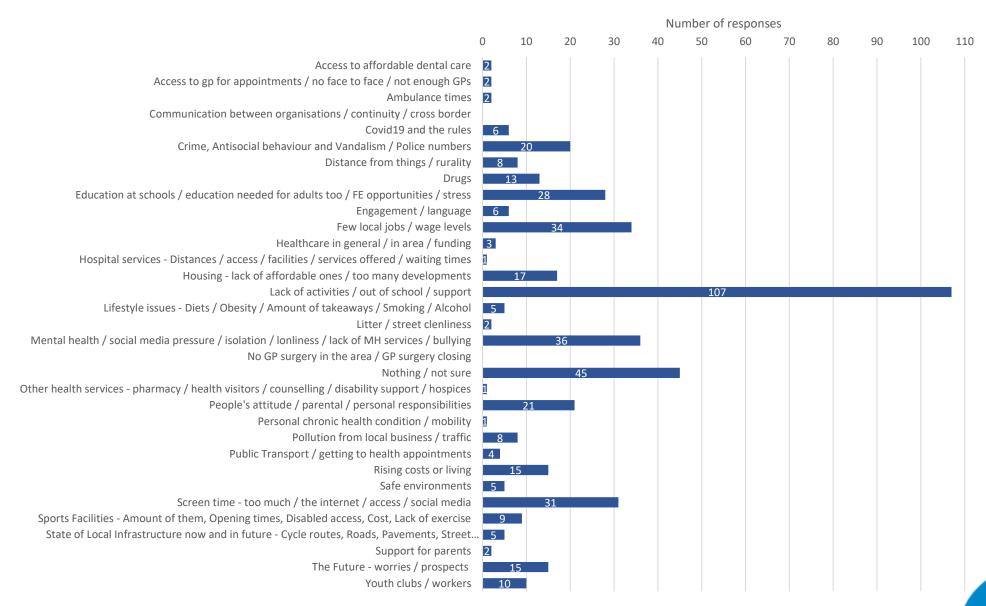
"Lack of doctors surgery and public transport. Nearest surgery Chirk nearest bus stop for Chirk around a mile. I am 78 years old, suffering from arthritis and cancer and cannot walk more than a few yards with the aid of a stick. I am not alone - many local residents have similar problems. It is not acceptable in a village of this size not to have access to medical facilities, particularly with the number of new houses currently being built. Why wasn't the provision of surgery premises mandated in the plans of one of these new estates in order to attract or retain a GP practice? The introduction of telephone consultations - particularly difficult for the elderly with hearing problems."

"Public transport bus cut from half hourly to hourly"

"The stress of rising costs of living and impact on emotional health"



What do you think are the biggest issues facing children and young people?



Note – 89 respondents supplied their postcode, which identified them as being in the Saint Martin's ward – Saint Martin's had a branch surgery of Chirk medical practice that closed in May 2022

"Access to services that keep them engaged and learn life skills. Access. Bullying"

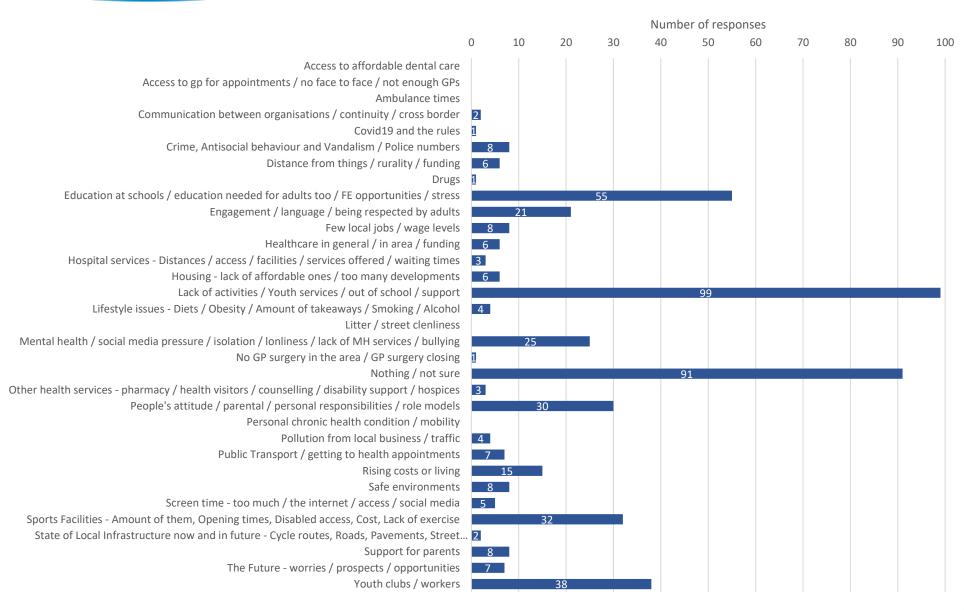
"Lack of early intervention and youth services. This leads to bigger problems which cost more to tackle and wastes young people's lives. Also poverty."

"Lack of jobs in the area. Covid having an effect. Not being able to do what they want to do, depression and mental health issues"

"Safe environments to build resilience away from family"



What needs to be done to support children and young people?



Note – 89 respondents supplied their postcode, which identified them as being in the Saint Martin's ward – Saint Martin's had a branch surgery of Chirk medical practice that closed in May 2022

"More activities for young people, maybe based around getting young people together to solve issues in their community, to help them feel invested in their town? "

"More counsellors in community rather than reliance on schools"

"Need to accept that all children aren't academic, have more things in place for those that aren't. Apprentices are a great idea but a lot of the time they're just used for cheap labour with no job progression"

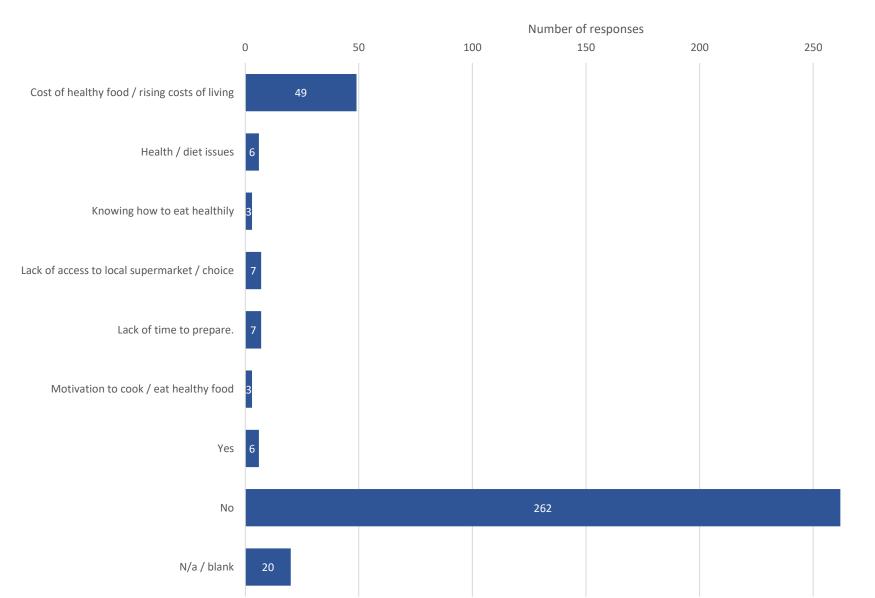
"Refund youth activities - always seems to be the first thing that gets cut."

"Total overhaul in education so that the child is the centre and that their needs are met. Also more youth organisations as services have been decimated. Plus involve them in make decisions in local communities."

"Youth outreach work, pro active policing going into schools to educate on dangers of crime/ drugs, sessions for parents as well "



Are there challenges for you and your family in eating healthy food?



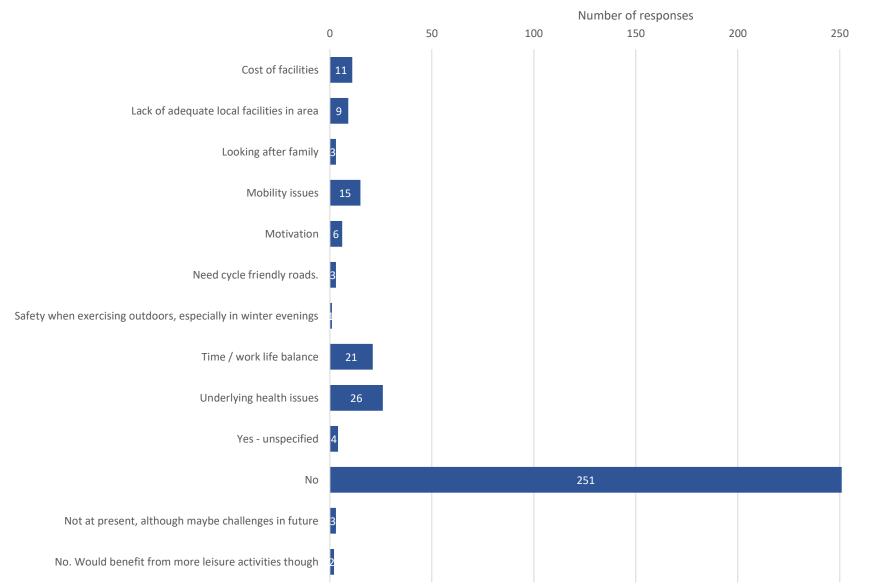
"Cost of more healthy food - Junk food is cheaper than healthy food"

"Cost and time. I feel like
I work all the time to
make a below average
wage and don't have the
time or energy to scratch
cook all the time."

"No - we are vegan and eat healthily. We are lucky to be able to afford that"



Are there challenges for you and your family with regard to being active in your daily life?



"We're both disabled. No gyms in St Martins. Have to go to Oswestry or Chirk to go to a gym or swimming pool."

300

"With two full time working parents on shift patterns family time is normally late evenings or one day a week we struggle to do family active activities together. On an individual basis we are all quite active when we have time."

"Yes- lack of access to affordable sports facilities e.g. indoor sports court hire/ classes "



Group Discussion

- 1. What do you think of the data you have seen? Does it match what you thought it would be? Have we missed anything?
- 2. Are there priorities or themes that should be considered?





Next Steps

- 1. Use information from today to complete the locality needs assessment
- 2. Work together with Stakeholders to produce an action plan based on the key themes
- 3. Continue to work together to deliver actions