

# North Yorkshire Joint Strategic Needs Assessment Annual Update 2016

## **Hambleton Richmondshire and Whitby CCG Summary**

The aim of this document is to provide an annual update and identification of new areas of need across North Yorkshire and the Clinical Commissioning Group localities.

The annual update does not provide the fine detail behind needs in the population but it does point local partners to where further investigation and deeper explorations are required. The annual update highlights indicators where North Yorkshire could improve relative to the national average in the NHS Outcomes Framework, the Adult Social Care Outcomes Framework, the Public Health Outcomes Framework and other key profiles.

### **Further Detail**

Detailed topic and district summaries for North Yorkshire are available from the North Yorkshire Partnerships website. Recent needs assessments done by Public Health are also available; along with recent JSNA sub editorial lead needs assessments. The list of links to these documents is in [Appendix 1](#).

### **Feedback**

These summaries are Public Health's view of what issues areas should be focusing on; we welcome feedback, challenge or insight from areas on the content.

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## NHS Hambleton Richmondshire Whitby

### Who we are – population demographics

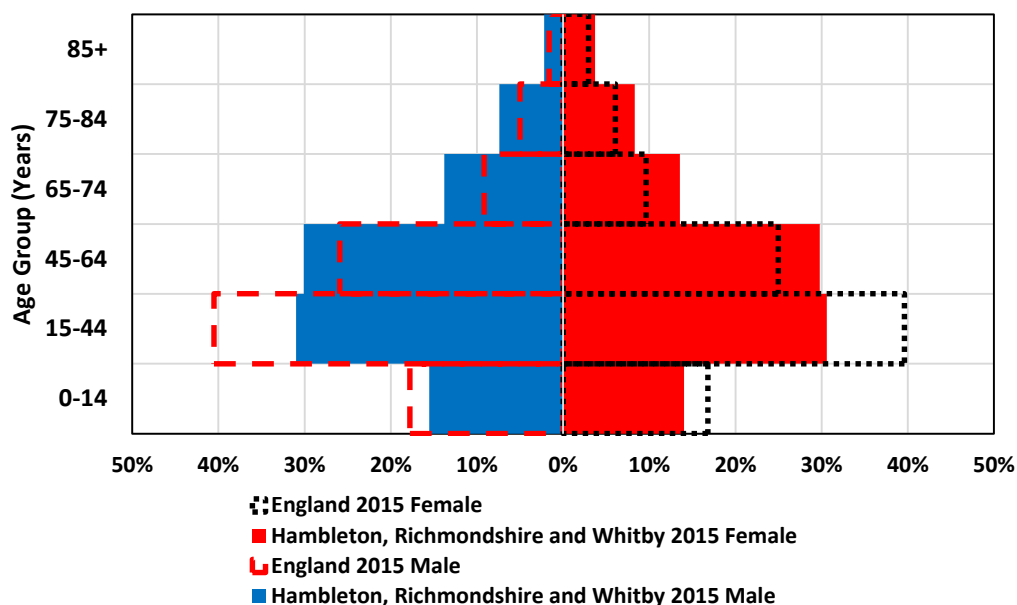
Hambleton is a large mainly rural district, running from York in the south to Darlington in the north. Approximately 10% falls within the North York Moors National Park. There are five market towns, Bedale, Easingwold, Northallerton, Stokesley and Thirsk, and 130 villages. Just over half of the population live outside the market towns and population density is one of the lowest in the country. Richmondshire is one of the largest districts in England, covering an area of just over 500 square miles (1319 square kilometres) two thirds of which is in Yorkshire Dales main centres include Richmond, Catterick Garrison, Leyburn, Hawes and Reeth. Outside of urban centres and market towns HRW is sparsely populated with 70.6% of the population living in rural areas and 15.3% of the population living in areas which are defined as super sparse (less than 50 persons/km). The CCG extends across parts of the North Yorkshire Moors to the seaside town of Whitby.

For HRW, the 2015 Index of Multiple Deprivation (IMD) identifies 3 Lower Super Output Areas (LSOAs) out of 95 total within HRW) which are amongst the 20% most deprived in England. Approximately 4300 people live in these three LSOA and include parts of the Colburn ward in Richmondshire and the Streonshalh and West Cliff wards in Whitby.

The total number of patients registered to practices within the CCG is currently 143,538. In contrast, the ONS mid-year population estimate for 2015 gave a CCG-wide population of 153,800, forecast to rise to 155,200 by 2020. HRW has around 1,400 births and 1,400 deaths annually. The population is ageing. Life expectancy at birth is 80.6 for men and 84.3 for women, both above the national average. Life expectancy varies for men and women considerably across North Yorkshire. The life expectancy gap at birth in North Yorkshire (between the most affluent and most deprived) is 6.8 years for males and 5.5 years for females. Within Hambleton, this gap is 4.3 years for males and 2.9 years for females. Within Richmondshire there is no significant gap. Within Scarborough the gap is 9.1 years for males and 5.6 years for females.

Age Group	2015 CCG Population (% total)	% Point Diff to England profile	LA % projected change 2015-2020	England % projected change 2015-20
0-14	21201 (14.8%)	-2.4%	1.3%	2.1%
15-44	44192 (30.8%)	-9.3%	-4.6%	-3.7%
45-64	42982 (29.9%)	4.5%	1.6%	-0.1%
65-74	19603 (13.7%)	4.3%	5.2%	2.2%
75-84	11306 (7.9%)	2.4%	12.1%	7.8%
85+	4254 (3.0%)	0.7%	16.8%	12.1%
All Ages	159768		1.5%	

**NHS Hambleton, Richmond & Whitby Population Pyramid showing demographic difference between 2015 and England 2015**  
 Source: HSCIC, GP Patient Registrations (October 2015)



### The world around us – the wider environment and community

The number of living in “low income families” (as defined by the Department for Work & Pensions) across the CCG area is in the region of 2800 children. There are concentrations of children in Northallerton, Whitby, Colburn and Catterick.

The rate of homelessness households is higher in Hambleton (2.1 per 1000 households) and Richmondshire (2.4 per 1000 households) than in any other part of the County. The rate in Hambleton has dipped below the national average (2.3 per 1000 households) although the rate in Richmondshire remains marginally above that observed nationally. The health outcomes for the homeless are poorer when compared to the non-homeless, this group are also less likely to access the services they need.

Across the CCG, fuel poverty (households deemed to be “fuel poor” by DECC, i.e. households which have required fuel costs above the national average and, if such households spent that amount on fuel, would be left with a residual income below the official poverty line) is below the national average. However, this masks areas in which fuel poverty is a real issue, notably in parts of Whitby, the rural north of Hambleton, Colburn/Catterick Garrison and upper Swaledale.

The presence of two national parks within the CCG boundary highlights a number of issues, ranging from the importance of tourism to the local economy (including high numbers of tourist to the area each year), pressures on housing supply in rural areas and the isolated nature of many small communities, particularly in the upper Swaledale area.

There is also a strong military presence within the CCG area, including an army garrison at Catterick and an RAF station at Leeming.

### How we live – lifestyle and behaviours

Childhood obesity is a mixed picture for the CCG. Among reception-aged children the National Child Measurement Programme (NCMP) identified that the Whitby area has significantly higher prevalence of reception and year 6 children with excess weight. Ward and MSOA data from NCMP also identified Northallerton and Colburn as areas where excess weight in year 6 children is an issue.

The percentage of mothers smoking at the time of delivery across the CCG was above the national average (13.0% locally, compared to 10.7% nationally) at the end of Q1 2015/16. However, over the last nine quarters for which data is available, there is considerable local variation in the rate of mothers smoking at delivery from a peak in Q4 2013/14 of 14.1% to a low of 9.7% in Q1 2014/15. The average over the last nine quarters was 11.9%.

Overall smoking prevalence across the CCG is lower than that the national average (14.5% locally, compared to 18.4% nationally, based upon QOF estimates). However, in Richmondshire, smoking prevalence (both overall and within the routine & manual group) is above the national average, as is the rate of alcohol related hospital admissions (persons). More positively, the percentage of adults with excess weight is lower than the national average and a higher proportion of adults lead an active lifestyle.

Across Hambleton there is evidence of some positive lifestyle choices, with overall smoking prevalence, the percentage of the population eating 5-a-day and the rate of alcohol related hospital admissions (persons) all better than the national average. However, the percentage of adults with excess weight and adults with active lifestyles are both worse than those observed nationally, whilst prevalence of smoking within the routine & manual group is higher than that observed regionally and nationally.

Although the rate of alcohol related hospital admissions in both Hambleton and Richmondshire is below the national average, there is evidence of an increasing trend in the rate of alcohol related hospital admissions over the last five years in both districts. The trend is most pronounced among males in where the rate has risen from 588 per 100,000 in Richmondshire and 535 per 100,000 in Hambleton in 2009/10 to 733 and 722 respectively in 2013/14. By comparison, the national rate has remained stable at around 830 per 100,000.

Mirroring the wider County, the rate of killed and seriously injured (KSI) casualties on the roads across the CCG is above the national average, significantly so in Hambleton & Richmondshire (85.6 per 100,000 and 100.8 per 100,000 respectively, compared to 39.3 per 100,000 nationally). Whilst the rate has slowly fallen across both districts, there has been little change in the gap between local rates and those reported nationally.

Across both Hambleton & Richmondshire the rate of hospital admissions caused by unintentional and deliberate injuries in children and young people aged 0-14 is significantly higher than that reported nationally (141.7 per 100,000 in Hambleton and 169.4 per 100,000 in Richmondshire compared to 112.2 nationally). The North Yorkshire Public Health team is undertaking detailed analysis of this issue to gain a better understanding of the scale and nature of the problem.

## Health and illness

The picture across the CCG in terms of mortality is mixed. Mortality in the under 75 age group from coronary heart disease and respiratory conditions are significantly better than the national average, whilst the mortality rate from stroke in the over 75 age group is significantly higher than the national average. Mortality from causes considered preventable is significantly lower in Hambleton (150 per 100,000) and Richmondshire (140 per 100,000).

The potential years of lost life from conditions considered amenable to health care are lower across the CCG for males and females than that observed nationally, reflecting the generally better levels of health enjoyed by much of the CCG population.

QOF data indicates higher rates of prevalence of hypertension, stroke and CHD across the CCG than that reported nationally. Hypertension detection rate for the CCG is 55.1% (compared with the national of 55.5% and similar CCG average of 56.7%) indicating an undiagnosed population. Diabetes prevalence is lower than the national or similar CCG average (5.5% locally compared to 6% nationally and across similar CCGs) - given the relationship with CVD this is surprising. 40% of patients with diabetes in the CCG are meeting treatment targets, significantly better than that observed nationally (36%). Improving the detection of hypertension and diabetes is likely to reduce the premature deaths in the area.

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## The services we use

The population of the CCG is primarily served by South Tees Hospitals Foundation Trust, through the Friary Hospital and the James Cook University Hospital. The Trust was inspected by the Care Quality Commission in December 2014 when it was given an overall rating of requiring improvement. A copy of the report can be accessed via the CQC website [here](#).

The percentage of NHS Health Check Uptake amongst those offered is significantly lower in Hambleton, Richmondshire & Whitby CCG (46.4%) compared to England (49%). NHS Health Checks present an opportunity to identify high risk patients and begin treatment sooner for CVD.

The CCG generally performs above the national average in terms of screening for breast, bowel and cervical cancer, although the proportion of females aged 50 to 70 screened for breast cancer within 6 months of invitation is slightly below the national average (71.9% locally, compared to 72.8% nationally). In 2013 50.2% of all cancers were diagnosed at Stage 1 or Stage 2, which is above the national average of 37.3%. However, a significantly higher proportion of lung cancers are not diagnosed until late stage (57 per 100,000 locally, compared to 45 per 100,000 nationally), whilst the rate of urgent GP referrals for suspected cancer (all cancers) is above the national average (3054 per 100,000 locally compared to 2399 per 100,000 nationally) and significantly worse than similar CCGs (2747 per 100,000). More positively, the percentage of all cancers receiving definitive treatment within urgent GP referral is better than the national average (89% locally compared to 86% nationally) and significantly better than similar CCGs (85%).

The Commissioning for Value information pack for the CCG identified 443 “complex” patients across the CCG who averaged around 6 admissions per year. Approximately half of this group of patients are aged 70 or over. The most common reasons for admission of “complex” patients were as a result of circulatory conditions (156 patients) and gastro-intestinal conditions (148 patients). The most common co-morbidity associated with these admissions were respiratory conditions.

The rate of emergency admissions for acute conditions that should not usually require hospital admission is higher for Hambleton, Richmondshire and Whitby CCG compared to the national rate (1446 per 100,000 locally compared to 1273 per 100,000 nationally). The gap between the CCG rate and the national rate is widening, from 62 per 100,000 in 2011/12 to 174 per 100,000 in 2014/15.

## Appendix 1 Resources

### North Yorkshire JSNA

**Description:**

Our joint strategic needs assessment looks at what we know about the people of North Yorkshire and their current and future health and wellbeing needs. It does not look at the particular needs of individual people; it looks at the 'big picture' of people's needs in North Yorkshire and where needs are not being met as well as they could be. It sets out to answer the following:

- What do people need?
- What are we doing already?
- Is it working?
- Are there things we should be doing but are not? and
- Are we targeting services properly?

**Access:**

<http://www.nypartnerships.org.uk/index.aspx?articleid=26753>

### NHS NHS Hambleton Richmondshire Whitby Operational Plan

The CCG's most recent operations plan and 5 year forward view are available from the below. The forward view outlines the commissioning priorities for the CCG in the coming years. The operational plan is plan for the activity of the CCG in the coming financial year and how the CCG is progressing toward its 5 year view.

**Access:**

<http://www.hambletonrichmondshireandwhitbyccg.nhs.uk/reports-and-publications/>

### North Yorkshire Pharmaceutical Needs Assessment 2015

**Description:**

PNAs will be key documents for the NHS England as they inform its decisions on applications to open new pharmacies and dispensing appliance contractor premises. PNAs also inform commissioning of enhanced services from pharmacies by NHS England.

**Access:**

<http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=30543&p=0>

### NEW North Yorkshire Healthy Weight Needs Assessment 2015 (adults and children)

**Access:**

[www.nypartnerships.org.uk](http://www.nypartnerships.org.uk) March 2015

### NEW North Yorkshire Winter Health Needs Assessment 2015

**Access:**

[www.nypartnerships.org.uk](http://www.nypartnerships.org.uk) March 2015

### NEW North Yorkshire Tobacco Control Needs Assessment 2014

**Access:**

<http://m.northyorks.gov.uk/CHttpHandler.ashx?id=29906&p=0>

### NEW North Yorkshire Alcohol Needs Assessment 2014

**Access:**

<http://m.northyorks.gov.uk/CHttpHandler.ashx?id=27202&p=0>

#### NEW North Yorkshire Sexual Health Needs Assessment 2014

**Access:**

<http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=29154&p=0>

#### NHS Commissioning for Value: Integrated Care pathways

**Description:**

The Integrated Care pack focuses upon the identification of the extent to which complex patients utilise resources across programmes of care and the urgent care system.

**Access:**

<https://www.england.nhs.uk/wp-content/uploads/2015/02/hambitn-richmdshr-whtby-ccg.pdf>

#### NHS Commissioning for Value Tool 2014/15

**Description:**

The Commissioning for Value Tool allows clinical commissioning groups to view maps, charts and tables for the indicators in the Commissioning for Value packs, and provides the facility to compare performance against other clinical commissioning groups, including those identified as the 10 most similar, in addition to benchmarking performance against the national picture.

**Access:**

<http://ccgtools.england.nhs.uk/cfv2014/html/atlas.html>

#### North Yorkshire Substance Misuse Needs Assessment 2013

**Access:**

<http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=25551&p=0>

#### Public Health Profiles

**Description:**

The Public Health Profiles site acts as a “one stop shop” for a wealth of public health information, and hosts a wide range of profile information and data at district, county and CCG level. This includes access health profiles, the children and young people’s health benchmarking tool and condition specific data (e.g. CVD, liver disease and cancer)

**Access:**

<http://fingertips.phe.org.uk/>

#### Public Health Outcomes Framework

**Description:**

The Public Health Outcomes Framework Healthy lives, healthy people: Improving outcomes and supporting transparency sets out a vision for public health, desired outcomes and the indicators that will help us understand how well public health is being improved and protected.

Downloadable profiles are available for North Yorkshire and district level data is available using the online tool

**Access:**

[www.phoutcomes.info](http://www.phoutcomes.info)

#### Clinical Commissioning Group Outcomes framework

The CCG Outcomes Indicator Set provides clear, comparative information for CCGs, Health and Wellbeing Boards, local authorities, patients and the public about the quality of health services commissioned by CCGs and the associated health outcomes. The indicators are useful for CCGs and Health and Wellbeing Boards in identifying

local priorities for quality improvement and to demonstrate progress that local health systems are making on outcomes.

**Access:**

<http://www.england.nhs.uk/resources/resources-for-ccgs/ccg-out-tool/>

APHO Health Profiles

**Description:**

The Health Profiles are used to help prioritise and plan services. They are designed to help show the differences in health (or factors that affect health) between different places within England, so that the right services can be put in place for each area.

Downloadable profiles are available for North Yorkshire and each district.

**Access:**

[http://www.apho.org.uk/resource/view.aspx?QN=HP\\_RESULTS&GEOGRAPHY=36](http://www.apho.org.uk/resource/view.aspx?QN=HP_RESULTS&GEOGRAPHY=36)

NHS England Outcomes Framework Benchmarking Packs

**Description:**

These indicators have been designed to provide national-level accountability for the outcomes the NHS delivers and drive transparency, quality improvement and outcome measurement throughout the NHS.

The purpose of these packs is to provide CCGs and Health and Wellbeing (HWB) partners with a quick and easy-to-use summary of their current position on outcomes as they take up their role, building on the data sets in the CCG outcomes indicators and other existing data sets. The information should be used alongside the local intelligence being collected to inform local Joint Strategic Needs Assessments and it will support commissioners working together to set the priorities for the Joint Health and Wellbeing Strategy.

**Access:**

<http://www.england.nhs.uk/la-ccg-data/>

NEW NHS Right Care Packs

**Description:**

Working with Public Health England and NHS Right Care, NHS England is providing a suite of materials to support effective 'commissioning for value'. This includes a range of comprehensive data packs and online tools.

The use of this localised information as part of the annual planning cycle is encouraged. It will support discussions about prioritising areas for change and utilising resources, and will help local leaders make improvements in healthcare quality, outcomes and efficiency.

The information in the packs will be of particular interest to CCG clinical and management leads with responsibility for finance, performance, improvement and health outcomes; to area team leads; and to commissioning support teams who are helping CCGs with this work. A range of additional free support to accompany the data is set out within each pack.

**Access:**

<http://www.england.nhs.uk/resources/resources-for-ccgs/comm-for-value/>

Public Health Spend and Outcomes Tool

**Description:**

The Spend and outcome tool (SPOT) gives local authorities and clinical commissioning groups in England an overview of spend and outcomes across key areas of business. The tool is an interactive spread sheet that allows you to explore the data in detail. You can also download a pdf factsheet that has the information from the tool.

**Access:**

<http://www.yhpho.org.uk/default.aspx?RID=49488>



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## Clinical Commissioning Groups Spend and Outcomes Tool

**Description:**

The Spend and outcome tool (SPOT) gives local authorities and clinical commissioning groups in England an overview of spend and outcomes across key areas of business. The tool is an interactive spreadsheet that allows you to explore the data in detail. You can also download a pdf factsheet that has the information from the tool.

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