

HEALTH AND WELLBEING BOARD



TO:	Blackburn with Darwen Health and Wellbeing Board
FROM:	Director of Public Health
DATE:	22 nd September 2014

SUBJECT: ISNA Locality Stories

1. PURPOSE:

To update the Health and Wellbeing Board on the development of the Integrated Strategic Needs Assessment Locality Stories and

1. Note and agree the four draft ISNA Locality Stories for Blackburn North, East, West and Darwen
2. To agree a process for development through to March 2015

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

The Health and Wellbeing Board agrees to:

1. Note and agree the four draft ISNA Locality Stories for Blackburn North, East, West and Darwen
2. To agree a process for development through to March 2015

3. BACKGROUND

In July 2011 the Shadow Health and Wellbeing Board approved the development process and broad priorities for the Integrated Strategic Needs Assessment¹ which incorporates the statutory duty of the local authority and the CCG to produce a JSNA along with a governance structure and approach to prioritisation.

The Health and Social Care Act 2012 and the statutory guidance² on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies (JHWS), sets out clear processes and duties for Health and Wellbeing Boards, CCGs, Local Authorities and NHS CB to develop their commissioning plans. *"CCGs, the NHS CB, and local authorities' plans for commissioning services will be expected to be informed by relevant JSNAs and JHWSs. Where plans are not in line with*

¹ Blackburn with Darwen Health and Wellbeing Board, Integrated Strategic Needs Assessment, July 2011

² DoH, Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, March 2013

JSNAs and JHWS, CCGs, the NHS CB and local authorities must be able to explain why”.

At the last meeting of the Health and Wellbeing Board on 23rd June, the Board endorsed the scope of the ISNA to date and agreed to a programme of Priorities for the ISNA for 2014/15 which will comprise:

- An update of the Story of Place for 2014
- Development of a story of place for localities
- ISNA Summary update in September 2014
- Children and Families – completion of the ISNA for Children's and Young People's Emotional Health and Wellbeing
- Housing and Health –Adults with complex needs
- The economy employment and health – Worklessness
- Older people – Falls prevention

4. RATIONALE

In line with the Statutory Duty to produce the JSNA jointly with the CCG it is important for the Health and Wellbeing Board to receive a regular update on the progress and development of the ISNA. During the course of the last year partners have been moving towards planning and delivering services and improving health and wellbeing in four agreed localities. The development of Locality Stories will provide the needs and assets assessment to underpin commissioning and service planning for the four localities in Blackburn with Darwen.

5. KEY ISSUES

For the past four years the approach to ISNA has been to focus on four major priority ISNAs, of which the Dementia ISNA is a good example.

Following this robust approach since 2011 the Blackburn with Darwen ISNA comprises a strong suite of linked documents and processes:

- The ISNA Story of Place
- The ISNA Summary
- ISNAs for key priority areas
 - Children and Families – Families with Complex Needs, Child Poverty Needs Assessment
 - Older People – Dementia, and Loneliness and Isolation
 - Local Economy – Local Economic Assessment
- Other completed ISNAs
 - CVD
 - Cancers
 - Alcohol
 - Sexual Health
 - Children's Dental Health

- ISNAs that are part complete and to be completed by December 2014
 - Roma and Traveller Communities
 - Learning Difficulties
 - Substance Misuse
- Priority ISNAs due to be completed during 2014/15
 - Local Economy – worklessness
 - Housing and Health – adults with complex needs in Houses of Multiple Occupation (HMOs)
 - Children and Families – Children and Young People’s Mental Health and Infant and Child Mortality.

Completed ISNA’s can be found on the Council Website at
<http://www.blackburn.gov.uk/Pages/Integrated-strategic-needs-assessment.aspx>

However the majority of the development has looked at issues for the borough as a whole and the move to locality working requires a stronger focus on the needs and assets in the four localities. It will further require that service planners and commissioners consider the differences between the four areas and the individual priorities in relation to service design.

The attached locality stories for Blackburn North, East, West and for Darwen present the key data for each of the four localities and comprise a summary of Census data, the Index of Multiple Deprivation and key health data. They will provide a basis for each locality to come to an understanding of the health needs of the areas and the priority neighbourhoods within. However the needs analysis is only a part of the story and the current draft will be developed over the course of the next six months through a process of engagement and involvement with communities and business to ensure that they are fully reflective of the community story for each locality and the assets for creating and sustaining health and wellbeing.

6. POLICY IMPLICATIONS

Development and publishing the ISNA is the statutory duty of the Health and Wellbeing Board. Approval of this report establishes process and governance for the future development of the ISNA Locality Stories, thus enabling the Board to discharge its statutory duty.

7. FINANCIAL IMPLICATIONS

There are no financial implications of this report for Blackburn with Darwen Borough Council or partners.

8. LEGAL IMPLICATIONS

The Health and Social Care Act 2012 places a duty on Health & Wellbeing Boards to prepare an assessment of relevant needs, through the Joint Strategic Needs Assessments (JSNA). There is also a duty to prepare a strategy for meeting those needs, through the Joint Health and Wellbeing Strategies (JHWS). Furthermore, there is a duty to provide an opinion as to whether the Commissioning Plan has taken proper account of the JHWS.

9. RESOURCE IMPLICATIONS

There are no resource implications of this report for Blackburn with Darwen Borough Council or partners.

10. EQUALITY AND HEALTH IMPLICATIONS

ISNAs highlight the needs in the borough and do not have direct impact on equality and health, however the activities in any associated action plans do require EIAs in order to ensure that the activities comply with the Public Sector Equality Duty and do not adversely impact any of the protected characteristics within the Equality Act.

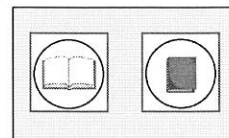
11. CONSULTATIONS

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DATE:	6/08/2014
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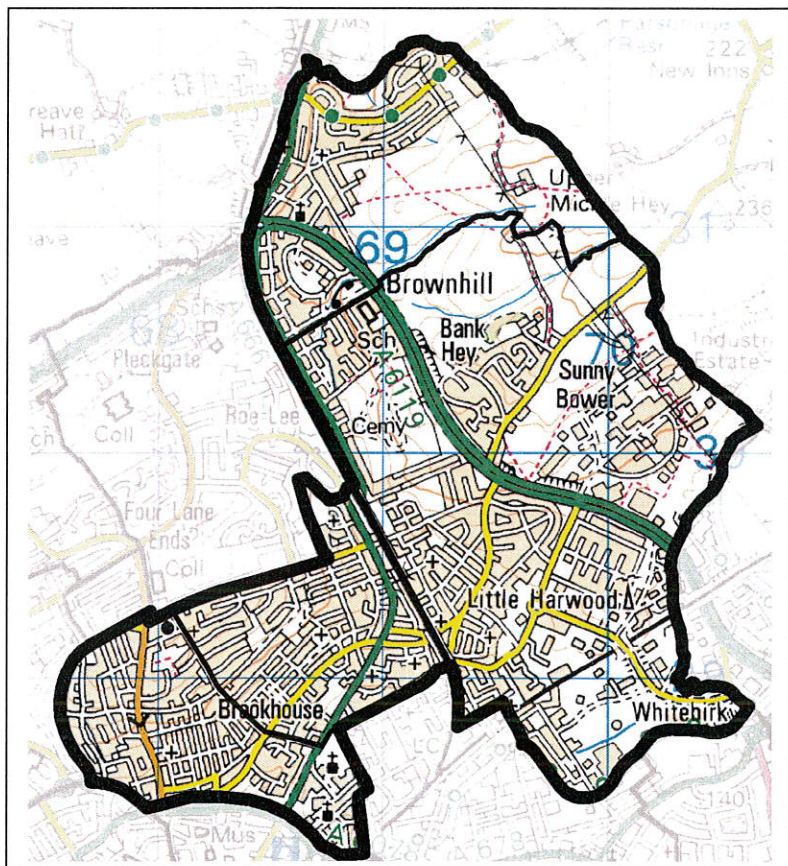
BACKGROUND PAPER:	ISNA Locality Stories 2014; Blackburn North, East, West and Darwen
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Blackburn with Darwen ISNA Story 2014

North Locality Story

The ISNA Story for Blackburn North Locality is based on strategic analysis of published data and trends and a sound understanding of the needs and assets of residents and communities developed from a comprehensive programme of engagement and involvement over the last four years. The story will continue to develop over the next six months with opportunities for residents, businesses and local partners to add their story from their experience of Blackburn North.



Blackburn North is not simply one place, it is made up of closely linked communities:

- Shear brow
- Brook house
- Whitebirk
- Little Harwood
- Sunny Bower
- Bank Hey
- Brownhill

The south west neighbourhoods of Shearbrown and Brookhouse are very close to Blackburn Town centre although by some measure cut off from the Town centre by Barbara Castle Way. They comprise high density terraced housing on the valley side characterised by very steep streets. Little Harwood is similar although has more diverse housing with social housing and some larger family housing. To the north of the ring road are Bank Hey and Sunny Bower with more modern and larger and privately owned housing.

People

Almost 24,000 people live in the North Locality (23,717) in more than 7,650 households. The area has a very young population with almost one in three people aged under 20 (32.8%), compared with 29% for the Borough and 24% nationally. It also proportion of people of younger working age (16-44) with 44% compared with 40% in the Borough and 39.4% nationally. This also means a smaller part of the community is aged over 65 with just over one in ten over pensionable age (10.5%) compared with 13% in Blackburn with Darwen and 16% nationally.

Ethnicity and religion – more than two out of three residents have South Asian ethnicity (67%), with more than one in three Indian (36.8%) and more than one in four Pakistani (26.4%). The numbers of South Asian residents is reflected in the religious make-up of the locality with two thirds of residents being Muslim (65.8%). Almost three in ten residents (29%) was born outside the UK, and almost a third (30%) of that group came to the UK since 2000, although there have been inflows since the 60s and small numbers of immigrants since the 1940s.

Language – More than three in ten North Locality Residents did not speak English as their main language (31%), compared with 13% in the Borough. The most spoken languages after English were Gujarati spoken as main language by 3,252, Punjabi by 1,397 and Urdu by 1,184. In more than four out of ten households not all residents have English as their main language and almost one in five (18%) where no one in the households speaks English.

With a young population more than four out of ten households have dependent children (42.3%) compared with 35% in the Borough and 29% nationally. Conversely the proportion of single person households (27%) is lower than both the Borough (30%) and national (30%) level. The difference is not as marked for single parent households aged 65+ where one in ten households in the North locality (10.3%) compares with 10.9% in the Borough and 12.4% nationally.

Starting Well

Child Development – There is an issue with low birth weight in the North locality with 10.4% of children weighing less than 2500g at birth, compared with 9.4% for the Borough and 7.4% nationally. In the northern parts of Shear Brow, in Brookhouse and in the south of Little Harwood and Whitebirk the rate reaches more than 11%. Early child development is poorer than the Borough average with 35% of children achieving a good level of development compared with 41% across the Borough and 52% nationally. The poorest levels of child development are found in Shearbrown, Brookhouse and the southern parts of Little Harwood and Whitebirk.

Learning - by the time children get to 11 though, they are starting to catch up to the borough average levels, with Key Stage 2 results for reading writing and maths at 73% compared with 75% across the Borough and nationally. Then by 16 the rate for achieving good grades at GCSE at 59.3% has almost caught the Borough average of 59.8%, which is on a par with the national rate of 60.6% and parts of Shearbrown and Brookhouse are above national average. School absences (4.4%) are lower than Borough (5.2%) or national figures with the northern parts of Shearbrown less than 4%.

Obesity – Young children in the North locality do not appear to have a problem with obesity and the locality figure (9%) is less than both the Borough (10%) and national (9.4%) rate for children in reception. However by the time children reach the end of primary school, the Obesity rate (20.3%) is higher than the Borough (18.5%) and national (19.1%) rate. In parts of Brookhouse, Little Harwood and Whitebirk it reaches one in four children (25%).

Child Poverty – Almost three in ten children in the North (28%) live in poverty and in the south east corner of Brookhouse either side of Whalley Old Road more than four in ten children live in poverty.

Children and Young People's Health – parents of children aged 0-15 were marginally less likely to rate their child's health as good (96.3%) than those in the borough (96.6%) or England (97.1)

Living Well

Learning and skills – skill levels as indicated by qualification level compare poorly with local and national rates with fewer than one in five residents (18%) having a level 4 qualification or better (degree level) compared with three in ten nationally (30%). The picture is the same for those residents without a qualification with 28% in North Locality comparing with 23% in the Borough and 15% nationally.

Deprivation – Levels of deprivation in the North Locality are relatively high with an overall deprivation score of 40.1 compared with 35.2 for Blackburn with Darwen and 21.5 for England. The locality includes part of one of the small areas (Lower Super Output Areas or LSOAs) amongst the one percent of most deprived LSOAs in the country. The Brookhouse area includes three LSOAs amongst the most deprived 10% and Shearbrown include one in this group. Little Harwood has two small areas among the most 20% most deprived nationally. Fuel Poverty is also higher overall in the North Locality (21%) than for the Borough (14%) and England (10%) with average fuel cost taking more than one in five households below the poverty line. This is particularly intense in two small areas nearest to the town centre and Shearbrown and in the northern-most part of Brookhouse and the bordering area in Little Harwood, between Oak Street and Whalley Old Road.

Work and Jobs – a smaller proportion of residents of working age are working or looking for work in the North locality than is each of the three other localities. Economic inactivity rates stand at almost four in ten (39% aged 16-64), compared with the Borough (30%) and nationally (23%). This is particularly the case in

Brookhouse where more than 40% of working age residents are not economically active. This is mainly because of the numbers of women who are economically inactive in the area, as an employment shown through the Job Seekers Allowance claimant rate (3.3%) is just less than the borough average (3.4%) and the rate of claiming out of work benefits (14.4%) is also lower than the Borough average (15.5%). Seven out of ten residents of working age are either working or looking for work, but the rates differ significantly between men (75%) and women (46%). Women are much more likely to be looking after home or family (25%) in Blackburn North than in the Borough as a whole (14%). Almost 15% of working residents are employed in manufacturing, a little less than the Borough (16%) but still higher than nationally (9%). The largest employment sector is wholesale and retail which employs almost one in four working residents (23%) compared with 18% in Blackburn with Darwen and 16% nationally. This along with the restaurant sector which employs 6% of working residents accounts for almost three out of ten working people (28.8%), higher than either the Borough (22.7%) or nationally (21.5%).

Housing – Housing is predominantly privately owned with three out of four households owning their own home (75%) compared with 65% in the Borough and a similar proportion nationally. Although the percentage of households buying their home with a mortgage fell from 28% in 2001 to 24% in 2011, while private renting almost doubled from 7% to 13%. The older housing is located in the parts of Shear Brow and Brookhouse nearest to the town centre with new housing moving to the north. The North Locality has the biggest problem with overcrowded households with almost 11% compared with 7% for the Borough and this is concentrated in Shearbrown, Brookhouse and parts of Whitebirk. Two out of three properties are in Council Band A (67%) compared with 59% across the Borough and 25% nationally.

Health - People in the younger working age groups (16-49) were about as likely to feel they were in good health (85%) as those across the borough (85.8%) although a little less than nationally (89.7%). People in older working age groups (50-64) were less likely to rate their health as good (53%) than either those across the Borough (62%) or nationally (73%). This pattern was mirrored for those people with a long-term activity-limiting illness where younger workers before 50 were about as likely to have limiting illness as residents across the Borough and nationally, while those aged 50-64 were more likely (45.1%) compared with the Borough (34.3%) and nationally (23.4%).

Lifestyles – adults aged 16+ were marginally less likely to be obese (23.7%) than those across the borough (24.6%) or nationally (24.1%). For a majority Muslim area, binge drinking rates (9.8%) are low as would be expected compared with 18.9% across the borough and 20% nationally. Areas of the north locality are as low as 8%.

Disease – The incidence of various diseases varies between the four localities, with links to a range of risk factors. In each case the incidence is measured as a standardised registration ratio where the national rate is 100. The incidence of **cancers** in the North Locality is the lowest of the four localities with a standard rate of 102.9 compared with 107.6 across Blackburn with Darwen. In parts of Shearbrown the rate is less than 100. The incidence of **breast cancer** (93.1) is lower than the Borough (101.8), and in Shearbrown, and Brookhouse rates are as low as 80. For **colorectal cancer** the rate in the North Locality is 102, although as high as 110 in the Sunny Bower, Bank Hey and further north. The incidence of **lung cancer** in Blackburn with Darwen (131.9) is almost a third higher than the national rate, and the North Locality mirrors that rate (132.0). The incidence of prostate cancer (88.9) is lower than across the borough (96.6).

Ageing Well

There are almost 2,500 people aged 65+ in the North Locality, a little more than one in ten residents (10.5%), compared with 12.9% across the Borough and 16.3% nationally. One in ten households (10.3%) are people aged 65+ living alone compared with 12.4% nationally; while 5.2% of households in the north locality comprise two or more people aged 65+, lower than either the borough (6.4%) or nationally (8.4%).

Health – People aged 65+ in the North locality tend to rate themselves as good health less (37.6%) than comparable groups across the Borough (41.6%) and nationally (49.4%). They are more likely to identify that

they have an illness that limits their activity a lot (37.7%) compared with those aged 65+ across the Borough (34.4%) and Nationally (26.9%).

Use of Health Services – Across the borough, emergency admissions to hospital for all causes standardised for the age of the population are one third higher (135.8) compared with nationally (100). In the north locality this increases to 141.6 and the rate in the areas of Shearbrown and Brookhouse which border the town centre are more than 75% greater than nationally. Emergency admissions for **coronary heart disease** (CHD) are 70% higher than nationally, with the highest rate which reaches more than two and a half times the national figure to be found in the north of Shearbrown. **Planned admissions for CHD** are high across the southern part of the locality and average more than twice the national average (239.3). **Emergency admissions for heart attacks** are 80% higher than nationally with the same geographical pattern as CHD. **Emergency Admissions for hip fractures** are 13% higher than nationally and higher than across the Borough (104.6) and reach 50% higher than nationally in the south of Shearbrown and Brookhouse. The converse is that **planned admissions for hip replacement** are low at 23% lower than national rates.

Life Expectancy – life expectancy for the North locality is 74.1 years for men, and although this is less than the national average of 78.3, it is a little lower than across the borough (74.5). Life expectancy is lowest in the southern parts of Shearbrown and Brookhouse which border the town centre. Women can expect to live 79.4 years in the North locality which is much the same as across the Borough (79.5) and 2.9 years less than across England. It is women in the same neighbourhoods of the south of Shearbrown and Brookhouse that can expect to have the shortest lives at around 76 years. The same geographical patterns show for deaths for all causes under 75, where the standard rate for the North is 139 compared with 139.4 against the standard of 100 for England. For each cause of death, the rates have been standardised to ensure that they are comparable with the national rate indexed to 100. In the southern part of Shearbrown and Brookhouse, residents are more than 80% more likely to die aged under 75. Although the rate for **deaths from cancer** (111) is lower than the borough average of 117, the geographical pattern persists and it in the same areas next to the town centre where the rate is as much as 50% higher than the national average. **Deaths from circulatory disease** are one third higher in Blackburn with Darwen (135) than nationally, and in the north more than 50% higher (153.7). In Shearbrown and parts of Brookhouse the rate for deaths from circulatory disease is double the national rate and those aged under 75 are almost one and a half times more likely to die from a circulatory disease than the comparable age group nationally. Deaths from **coronary heart disease** (CHD) show the same pattern with the North locality figure (160) at about the same level as that for the Borough (162), while in the area of Shearbrown and Brookhouse that neighbours the town centre the rate is as high as 210 or more than double the national level. **Deaths from stroke** are particularly high with the data suggesting that people in the North locality are more than 70% more likely to die than the national average and more than two and a half times more likely (260) in Shearbrown and parts of Brookhouse.

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Version 1.2	
Version 1.3	
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