Tisbury Community Area Joint Strategic Needs Assessment

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Introduction

In order to plan the right services for the people of Wiltshire, we review the future health care and wellbeing needs of the local population through a process known as the Joint Strategic Needs Assessment (JSNA) each year. This results in a report which describes those needs and transforms data into knowledge and knowledge into wisdom. This informs the strategic direction of service delivery which will help meet those needs. As we prepare this report, we discuss it with local people and their representatives through formal and informal consultation and engagement.

This year, in order to make this engagement more meaningful, we have extended the county-wide JSNA report by producing a series of community-level health profiles. This document covers the Tisbury Community Area (as at April 2009), and is intended to be part of the overall Tisbury Community Area Profile.

This document has been produced by NHS Wiltshire in collaboration with Wiltshire Council, with contributions from Wiltshire Police and Dr Foster Intelligence, and using data from the Office for National Statistics (ONS).

Some of the indicators presented in this document use data from small areas or small populations and some use data from a relatively short time period. The impact of natural random variation in these datasets is greater than in larger datasets and this must be taken into account when interpreting data.

For each indicator presented, the 20 Community Areas are ranked from best (ranked 1st), eg lowest proportion of smokers, to worst (ranked 20th), eg the lowest proportion of people self-reporting good or very good health. A glossary of terms and definitions is given at the back of this document.

A full methodology document is available on request from NHS Wiltshire, telephone 01380 733808 or email jsna@wiltshire.nhs.uk.

We welcome your comments or questions about this document. Please email them to jsna@wiltshire.nhs.uk. All of the 20 Community Area Health JSNAs will also be made available on the JSNA website http://www.wiltshirejsna.org/ and the Wiltshire and Swindon Intelligence Network http://www.intelligencenetwork.org.uk.

Summary

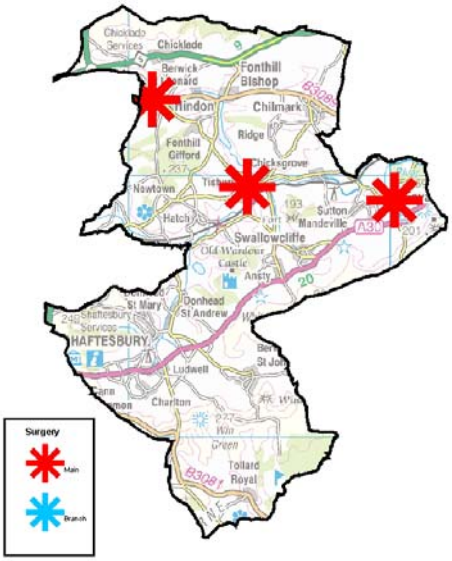
Tisbury Community Area has a resident population of 7,360 and has three main GP surgeries. In terms of deprivation the Tisbury Community Area includes one Super Output Area (SOA) that lies within the 20% most deprived SOAs in Wiltshire.

It has a significantly lower all age all cause mortality rate than the Wiltshire average and ranks 1st out of the 20 Community Areas (ranked from 1st best to 20th worst). It had the highest percentage of deaths at home (30.0%) out of all the community areas and this was significantly higher than the Wiltshire average of 19.9%.

It compares favourably (1st) among the community areas for falls admissions to hospital (low admission rate) and Disability Living Allowance (DLA) (low claimant rate), however it compares less favourably (20th) on long standing illness, disability or infirmity (high numbers) and cancer admissions to hospital (high admission rate).

Map of Tisbury Community Area

(with GP surgeries)



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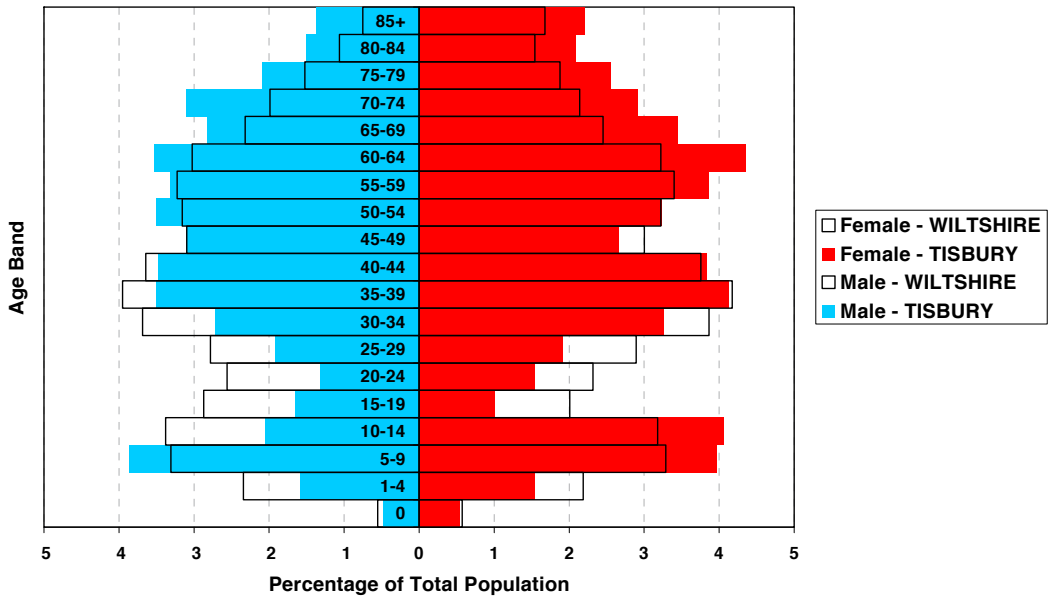
Population

Tisbury Community Area has an overall resident population of 7,360. It has proportionately larger percentages of people aged over 50 than the Wiltshire average but smaller percentages in most of the younger age groups (under 40s) apart from 5 to 9 (females) and 5 to 14 (males).

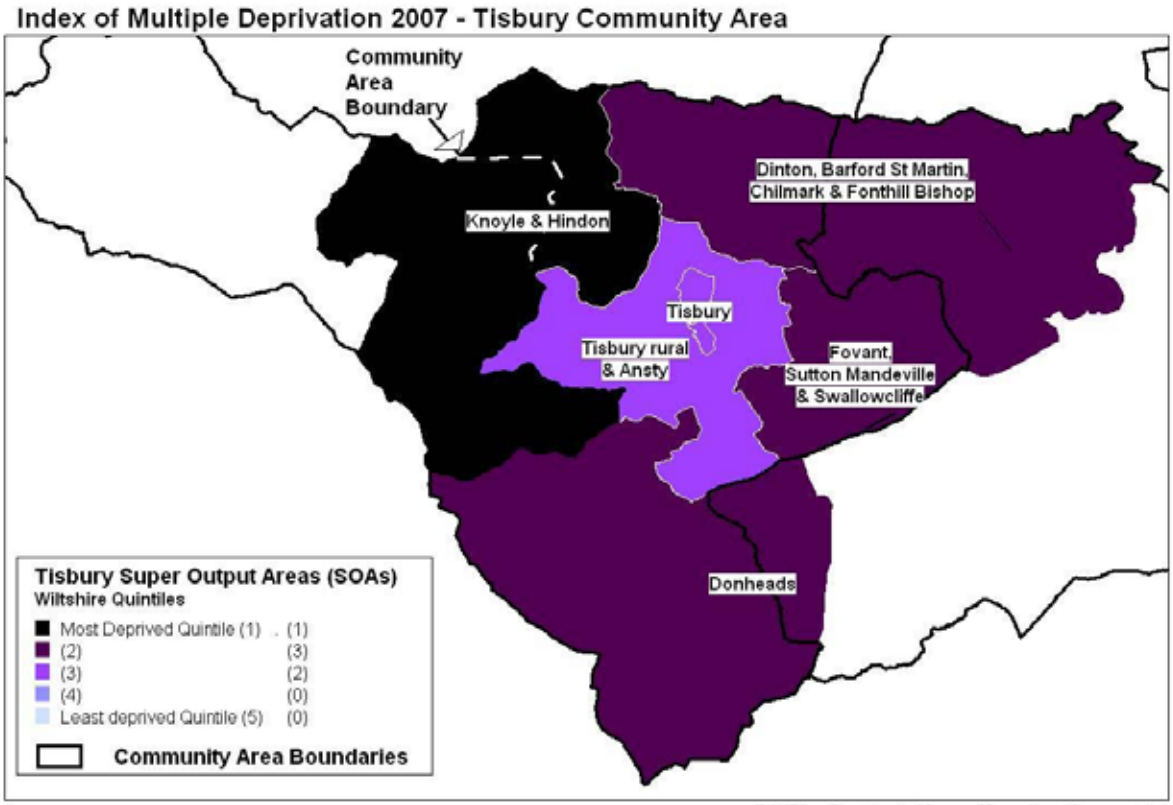


Deprivation

Deprivation is a multi-dimensional concept that focuses on the inability of individuals to play a full part and enjoy full opportunities in the life of their community or society. It is emphasized as lack of financial or material resources, but also social, cultural and political aspects.

The Index of Multiple Deprivation (IMD) 2007 brings together 37 indicators covering specific aspects of deprivation. These aspects include income, employment, health and disability, education, skills and training, barriers to housing and services, living environment and crime. Deprivation is associated with an unmet need in these areas. The IMD provides a comparative ranking of areas of deprivation across England.

Knoyle and Hindon (a part of which lies in the Mere Community Area) is the most deprived area in Tisbury Community Area. Nationally it is in the 3rd most deprived quintile (15,818th most deprived area in England out of 32,482).



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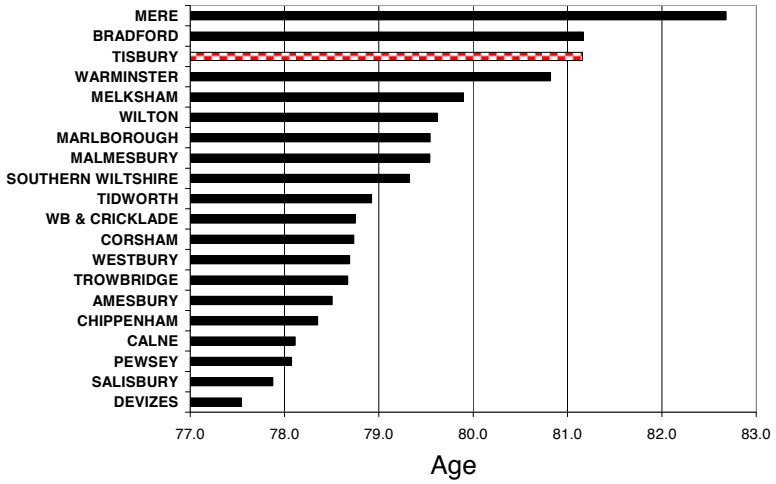
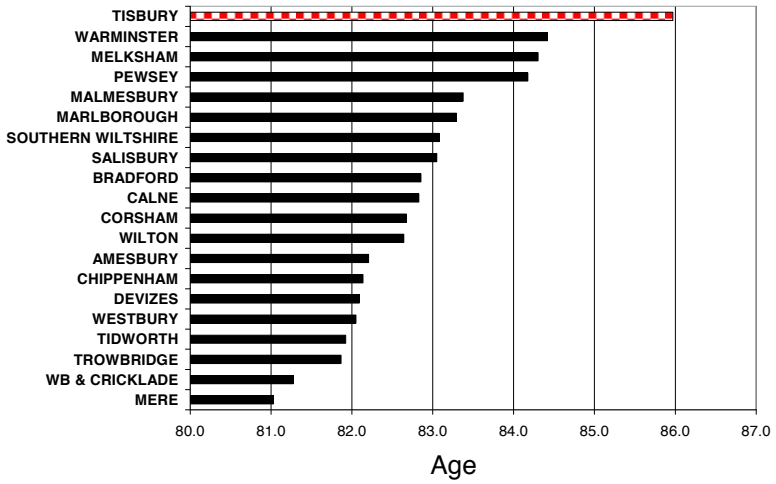
Life expectancy

Life expectancy is a measure of overall health and is useful in highlighting health inequalities between areas. There is a clear gradient in life expectancy between the most and the least deprived wards in Wiltshire with a gap of 5.2 years between these two groups.

Males



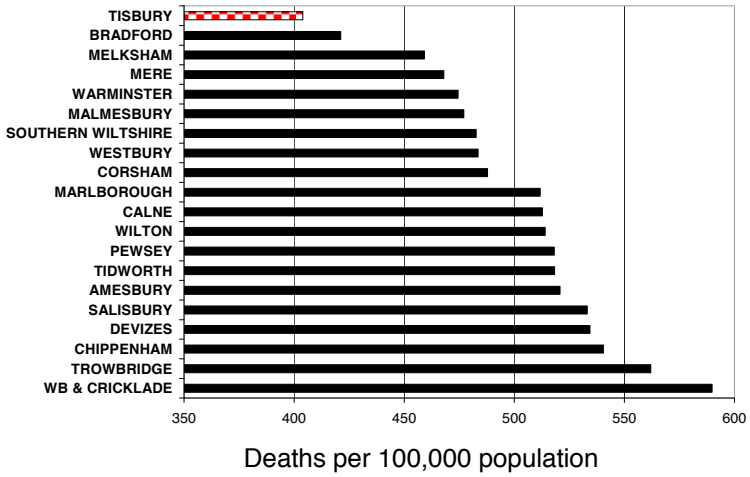
Females



Life expectancy at birth, estimated using data from 2004 to 2006, for males in Tisbury is 81.2 years and 86.0 years for females. The averages for Wiltshire are 79.0 years for males and 82.8 years for females. Tisbury ranks 3rd for males and 1st for females amongst the 20 Community Areas.

Mortality

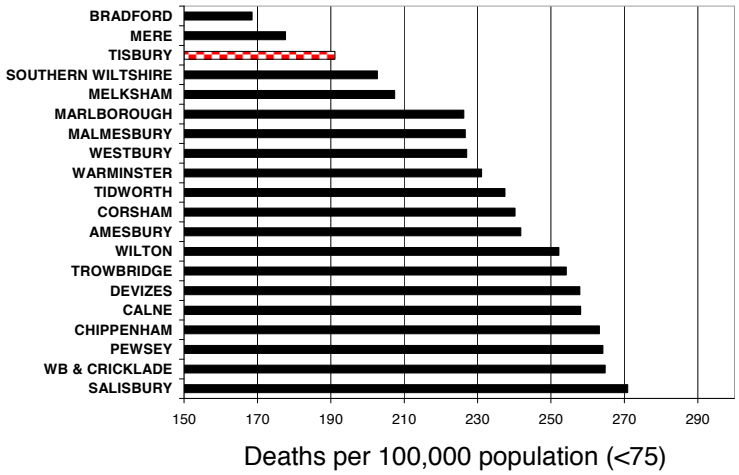
All age all cause mortality



All cause mortality rates (adjusted for age differences between the Community Areas) are a measure of the overall health of a population and together with life expectancy are amongst the most useful indicators in highlighting health inequalities between areas.

There were 404 deaths (of any age, any cause) per 100,000 population between 2004 and 2006 in Tisbury. This is statistically significantly lower than the Wiltshire average of 508 per 100,000. Tisbury ranks 1st out of the 20 Community Areas.

Premature (< 75) all cause mortality

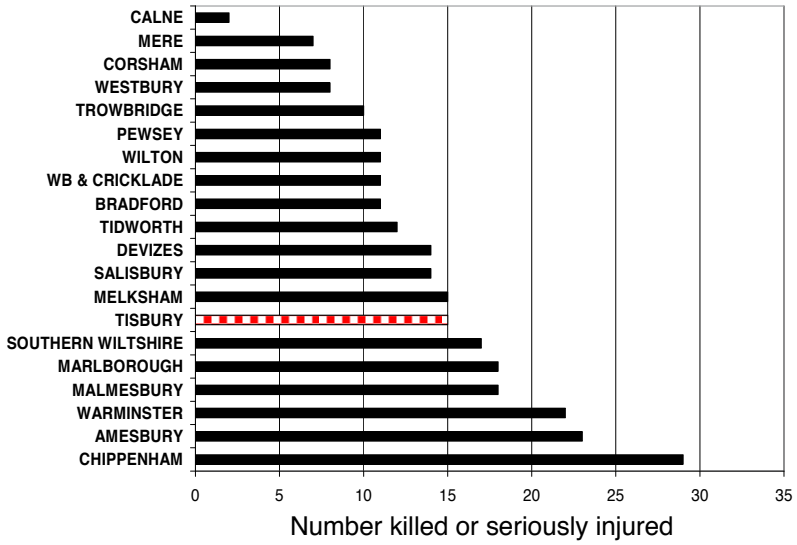


Premature mortality shows us how many and which deaths we can prevent. Premature mortality is defined as deaths in people younger then 75. There were 191 premature deaths per 100,000 population under 75 between 2004 and 2006 in Tisbury which is equivalent to 1 in 1,570 people under 75 dying each year. This compares to the Wiltshire average of 240 per 100,000. Tisbury ranks 3rd out of 20 Community Areas.

Health and wellbeing indicators

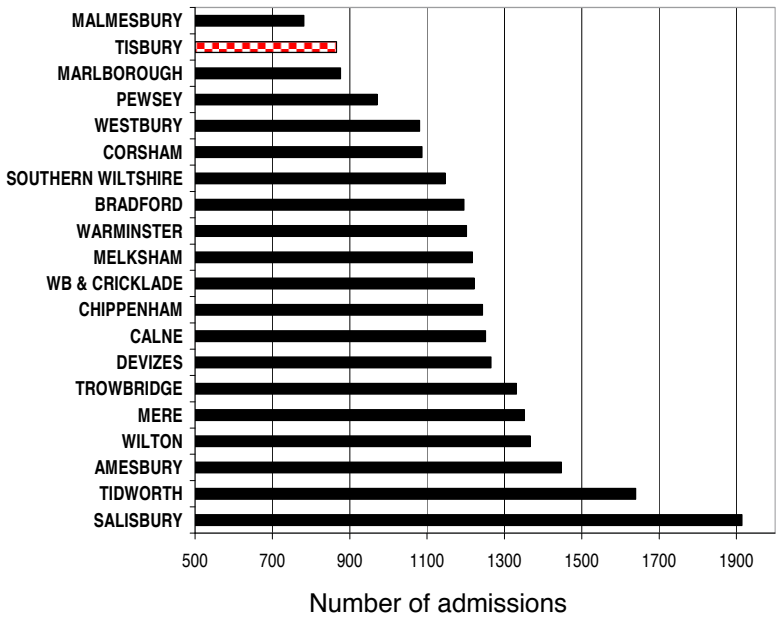
The following indicators are important in relation to health and wellbeing and need to be addressed with appropriate initiatives in order to improve the health and wellbeing of the local population and reduce inequalities. Further details on inequalities, life-style factors and health and wellbeing are presented in the core JSNA document for Wiltshire 2008/09, which can be viewed at the JSNA website http://www.wiltshirejsna.org

Traffic accidents



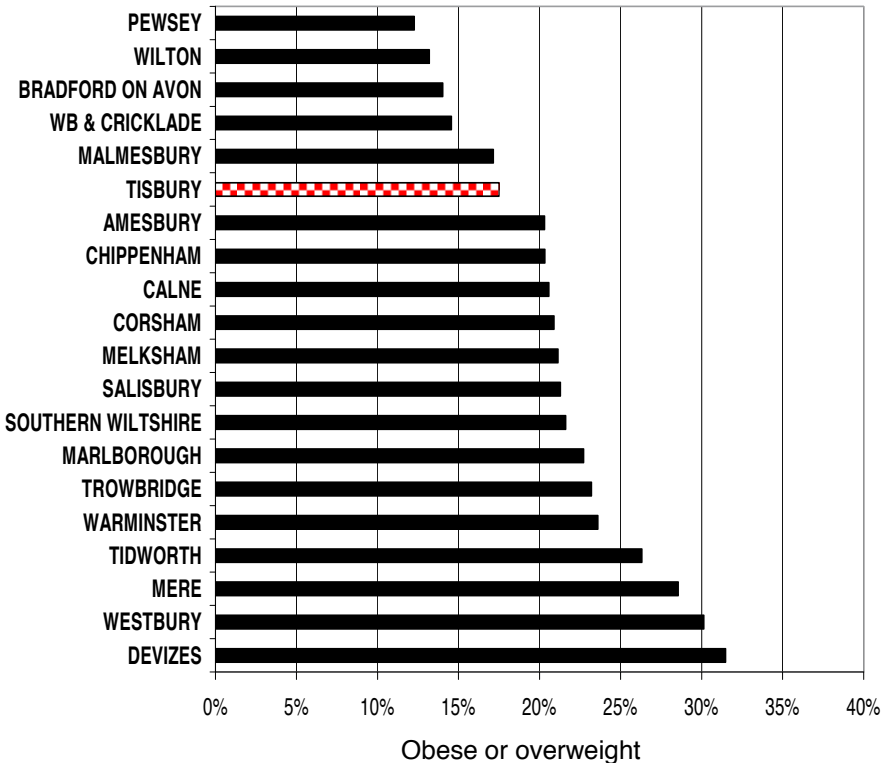
There were 15 people killed or seriously injured on roads in Tisbury in 2008 according to data from Wiltshire Police. This is slightly higher than the average of 13.8 per Community Area in Wiltshire overall. Tisbury ranks 13th equal out of the 20 Community Areas. When comparing areas the volume of traffic and type of roads in each area should be taken into account.

Hospital admissions related to alcohol



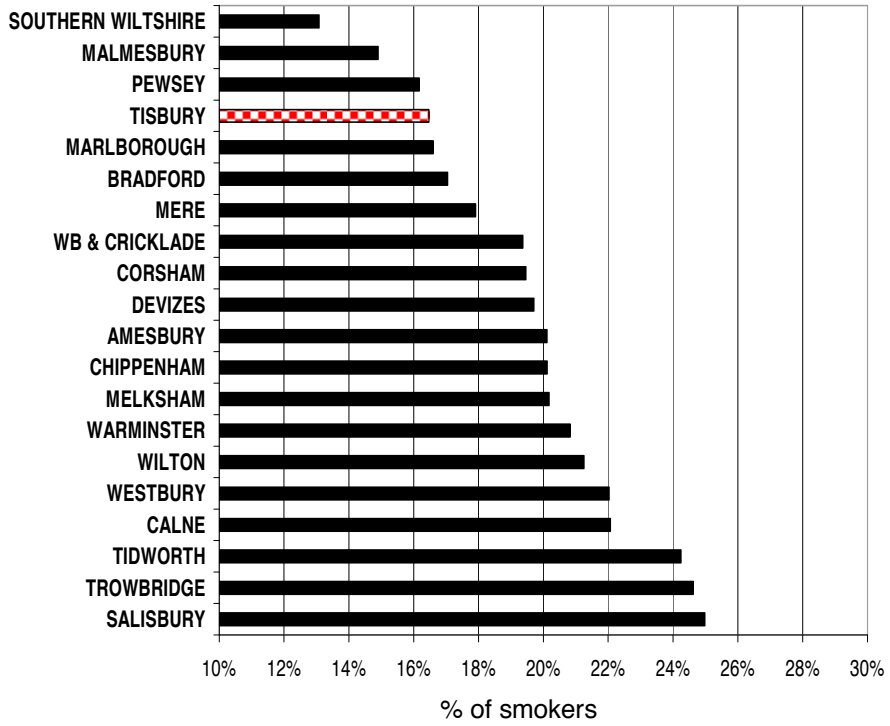
Alcohol misuse is associated with significant health, wellbeing and social problems. After taking account of its age profile, there were 866 hospital inpatient admissions per 100,000 people in Tisbury between May 2008 and April 2009 which were due to alcohol related causes. This is much lower than the Wiltshire average of 1,324 and is equivalent to one admission per 115 people. Tisbury ranks 2nd out of the 20 Community Areas.

Childhood obesity



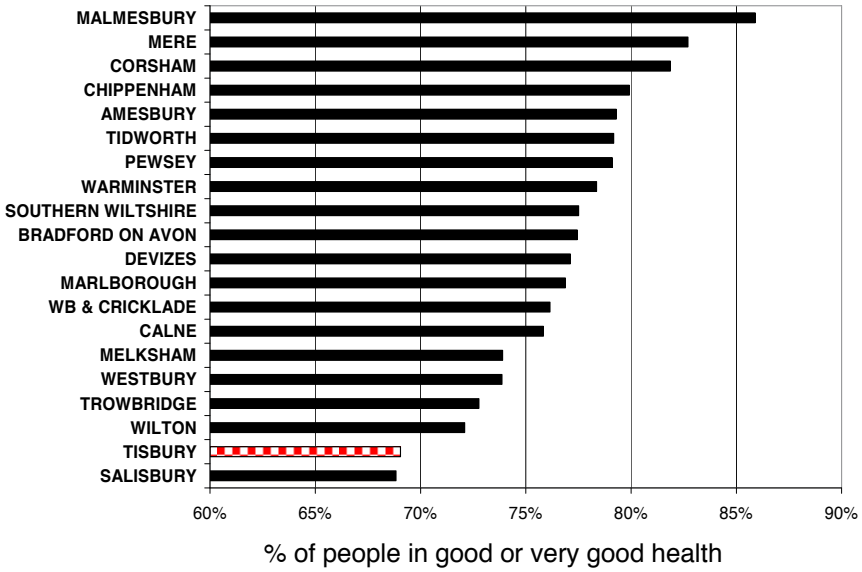
Obesity in childhood leads to serious health problems in adulthood and premature mortality. Children in the school reception year (aged 4 to 5 years) had their heights and weights measured in 2007/08. Just over 1 in 6 (17.5%) of the children measured in Tisbury were found to be overweight or obese compared to an average of 21.8% in Wiltshire. Tisbury ranks 6th out of the 20 Community Areas.

Smoking prevalence



Smoking is strongly linked to many causes of premature mortality, such as many cancers and cardio-vascular diseases. The percentage of the total population who smoke has been estimated using 2006 survey data and local population and deprivation information. These estimates show that 16.5% of people in Tisbury smoke which is lower than the Wiltshire average of 20.2% and ranks Tisbury 4th out of the 20 Community Areas. The Wiltshire NHS Stop Smoking service provides support for those wishing to quit smoking. The service is available at walk-in clinics, GP practices, and some pharmacies. For more information please phone the NHS Free smoking helpline 08000224332 or visit www.nhs.uk/smokefree.

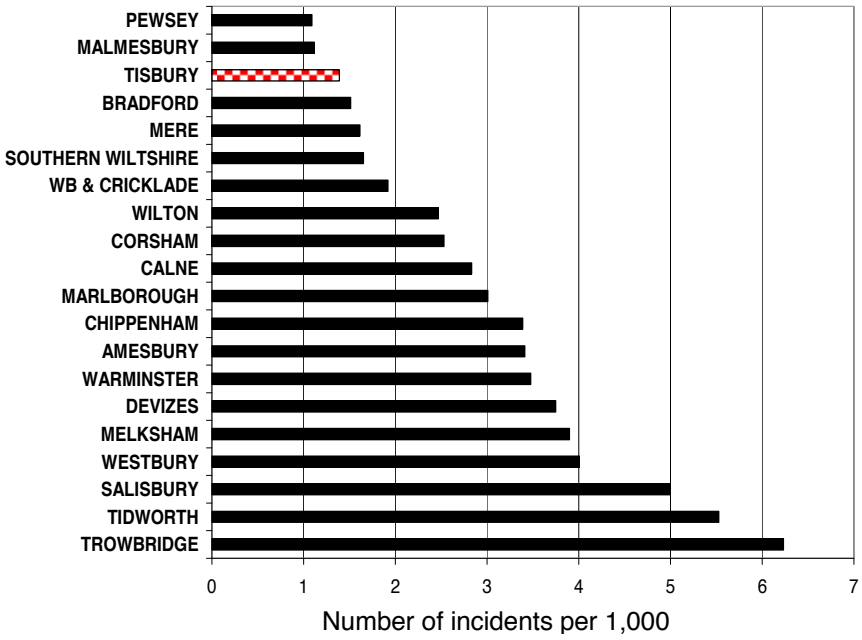
Self-reported health



Respondents to the 2008 Wiltshire Place and Household surveys were asked how good their health was in general. The percentage of people saying they were in good or very good health in Tisbury was 69.0% compared to the Wiltshire average of 76.8%.Tisbury ranks 19th out of the 20 Community Areas.

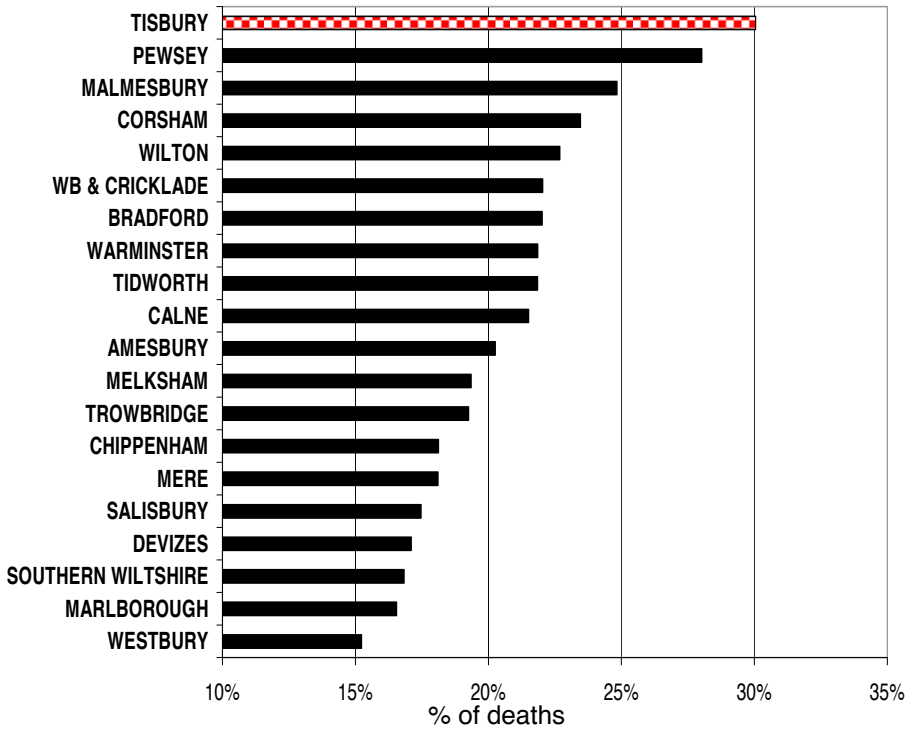
Domestic violence

Wiltshire Police record a range of domestic violence-related incidents that involve violence against the person or sexual assault. It is nationally recognised that domestic violence is vastly under reported with only 20% of incidents reported to the police. There were 1.4 incidents reported in Tisbury in April 2008 to June 2009 per 1,000 people (aged 15 or over). This compares with the Wiltshire average of 3.4 per 1,000 and ranks Tisbury 3rd out of the 20 Community Areas. Agencies in Wiltshire are working to increase the proportion of domestic violence incidents that are reported to the Police, therefore a higher incident rate will reflect higher reporting rates as well as higher prevalence.



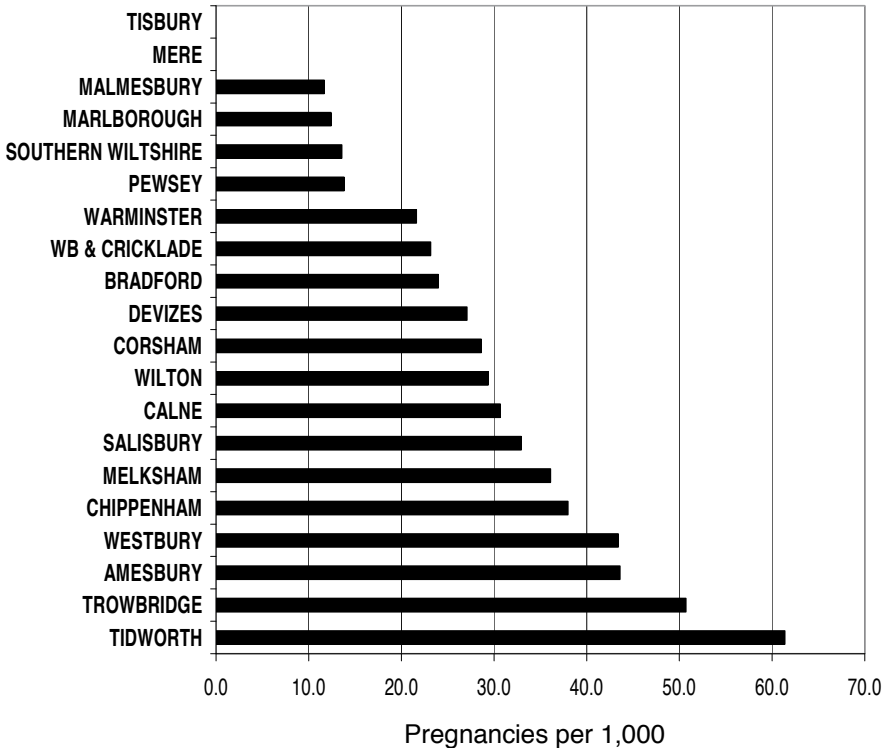
Anyone wishing to seek help and advice on domestic violence issues can contact the National 24hr Domestic Violence Helpline on 0808 200 0247, the Men's Advice Line and Enquiries (MALE) on 0808 801 0327, or log on to www.speakoutwiltshire.com.

Deaths occurring at home



Being able to choose where to die is important. Nationally 64% of people say they would wish to die at home. In Wiltshire we are following the national strategy to support people in their home at the end of their lives. In Tisbury 30.0% of deaths occurred at home (2004 to 2006). This is significantly higher than the Wiltshire average of 19.9%. Tisbury ranks 1st out of the 20 Community Areas.

Teenage pregnancy



Teenage pregnancy is associated with significant health and wellbeing problems for the mother-to-be and the child. Figures for Community Areas were based on 2007/08 and 2008/09 data. There was a small number of teenage pregnancies in Tisbury during this time, and because of confidentiality protection guidelines we are not able to publish the actual figure and rate. Similar principle applies to Mere.

Other indicators

The indicators presented below provide more information on the health and wellbeing of the local population for the Community Area. For each of them the percentage or prevalence in the local population is compared to the Wiltshire average (and the highest and lowest Community Area figures). The last column presents the ranking of the Community Area in the County, where 1 is the best rank and 20 the worst rank.

Indicator Footnote	TISBURY CA Value	TISBURY CA Rate*	Lowest rate	Wiltshire Average Rate	Highest rate	CA Rank (out of 20)
Long-standing illness, disability or infirmity?[1] Source: Wiltshire Council. % self-reporting "Yes" on 2008 Place Survey (unstandardised)	34	41.5	23.5	32.4	41.5	20
Chlamydia Screening[2] Source: NHS Wiltshire Screening Programme. Screens per 1,000 15-24 population 2007/08	31	47.0	27.3	91.0	215.9	18
Child Wellbeing Index 2009 [number] Source: DCLG. Lower score indicates a higher level of well being		96.0	56.5	79.8	126.0	18
Disability Living Allowance claimants[2] Source: DWP. Crude rate per 1,000 population	159	21.2	21.2	32.4	42.8	1
Alcohol consumption[1] Source: Experian Target Group Index survey. % of people reporting that they have an alcoholic drink every day	1172	15.6	9.5	13.7	16.5	15
Purchasing of fruit[1] Source: Experian Target Group Index survey. % of people reporting that they did NOT spend £2 on fruit in the week previous to the survey	444	5.9	4.2	6.5	9.3	10
Exercise - leisure centre attendance[1] Source: Experian Target Group Index survey. % of people reporting that they have NOT visited a leisure centre in the last 12 months	4578	60.8	54.0	62.0	71.4	10
Fractured Neck of Femur - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 S72	10	79.0	30.5	75.7	121.3	10
Stroke - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 I60-I69	15	87.4	60.9	111.4	182.6	4
Chronic Obstructive Pulmonary Disease - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 J40-J44	12	74.8	45.3	96.0	184.5	3
Asthma - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 J45-J46	2	25.7	11.7	97.1	172.7	2
Coronary Heart Disease (CHD) - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 I20-I25	30	296.6	186.5	302.6	419.5	11
Diabetes - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 E10-E44	3	35.6	22.0	58.4	102.9	4
Cancer - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 C00-C97	316	4015.0	1381.4	1958.4	4015.0	20
Falls - Hospital Admissions[3] 2007/08. Hospital Episode Statistics (Inpatient Admissions) by Primary Diagnosis. Directly standardised rates (by age) per 100,000 population. ICD10 W00-W19	39	290.7	290.7	392.1	452.4	1
Mortality from Circulatory Disease (CVD)[3] 2004-06 mortality data. Directly standardised rates (by age) per 100,000 population. ICD10 I00-I99	91	151.8	146.0	171.1	207.0	3
Mortality from Cancer[3] 2004-06 mortality data. Directly standardised rates (by age) per 100,000 population. ICD10 C00-C97	58	127.2	110.7	153.5	176.1	3
Breastfeeding[1] Source: NHS Wiltshire. % of mothers breastfeeding (partially or completely) at 6 to 8 weeks. 2008/09 data	21	39.6	15.0	35.5	57.2	8
Dental Health - children [number] Average number of fillings, decayed or missing teeth per child aged 5 surveyed. Modelled from 2005/06 Dental Health Survey data		1.6	0.0	1.6	3.4	11

[1] %, [2] per 1,000, [3] per 100,000

Glossary

All age all cause mortality	Deaths from any cause at any age.
BMI	Body mass index
CHD	Coronary heart disease
Commissioning	A continuous cycle of activities that contribute to the securing of services, including the specification of services to be delivered, contract negotiations, target setting, monitoring and managing performance.
Community Area	20 local administrative areas of Wiltshire based on research into local communities and normally centred around a local town.
Community Area Board	18 formally constituted arms of Wiltshire Council with delegated authority to act as a local executive of the Council. The Boards consist of elected Council members and representatives from health, police, fire and other organizations. All Boards apart from South West Wiltshire are co-terminous with Area Partnerships.
Community Area Partnership	20 key local bodies to act as the co-ordinated voice of the community with representation from town and parish councils, local business, the voluntary sector, local people and community leaders. The partnerships carry out consultations, debate local issues and prioritise community needs in Community Area Plans.
COPD	Chronic obstructive pulmonary disease
CVD	Cardio-vascular disease
DCLG	Department for Communities and Local Government
DH/DoH	Department of Health
Dr Foster Intelligence	A public-private partnership between the NHS Information Centre (a special health authority of the NHS) and Dr Foster, a commercial provider of healthcare information.
IMD	Index of Multiple Deprivation
Life expectancy at birth	Life expectancy at birth is an estimate of the average number of years a new-born baby would survive if they experienced the particular area's age-specific mortality rates for the time period under consideration throughout their life. The figure reflects mortality among those living in the area in each time period, rather than mortality among those born in each area.
NHS Wiltshire	New name for Wiltshire PCT
Obese (child)	Above the 98th percentile when compared with the UK 1990 growth chart for age and gender of the child.
ONS	Office for National Statistics
Overweight (child)	Between the 91st and 98th percentile when compared with the UK 1990 growth chart for age and gender of the child.
SOA	Super Output Area: nationally defined geographical area for use in small area statistics containing 1,000 to 2,000 people.
Wiltshire Council	Unitary council formed 1st April 2009.