PLACE BASED NEEDS ASSESSMENT HENLEY, STUDLEY & ALCESTER

Warwickshire Joint Strategic Needs Assessment

February 2019





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KEY MESSAGES

DEMOGRAPHICS

- The JSNA area has a higher proportion of residents aged over 65 (27.5%) compared to the Warwickshire population (20.6%); this age group is expected to increase significantly by 2041, from 9,670 to 13,731 people.
- Almost one third (27.9%) of households were classified as single-person households at the last Census (2011), over half of which were people aged 65 years and over living alone.
- The area has a high proportion of residents aged over 85 and this group is expected to increase by 127%, from 1,266 to 2,874 by 2041. There is a concern from local stakeholders that a smaller population of working age residents may lead to gaps in the support available to the increasing number of older people living in the community in the future.

HEALTH

- In 2014 and 2016 life expectancy at birth was 80.6 years for males and 84.1 years for females in the area, higher than the Warwickshire averages (79.9 and 83.6 years respectively).
- Young people living in the area have high hospital admission rates for emergency and planned hospital admissions, in particular the 15 to 24 age group. During 2014/15 to 2016/17, the crude emergency admissions rate for injuries among 15 to 24 year olds was 144.7 per 10,000 population, higher than the Warwickshire rate of 119.6 per 10,000.
- The crude rate of hospital admissions for injuries (unintentional and deliberate) for 15 to 24 year olds in England was 133.1 per 10,000 population during 2011/12 to 2015/16; rates were significantly higher than this in Alcester (271.8) and Studley (188.9) over the same period.
- There is a higher prevalence of heart related conditions in this JSNA area, likely related to the older age profiles of the areas. Additionally, the estimated prevalence of undiagnosed hypertension (for those aged 16+) in 2015 was significantly higher than the national figure (12.2%) across seven of the eight GP surgeries.
- The estimated prevalence of heart failure (for those aged 16+) nationally in 2015 was 1.4%; all eight of the GP surgeries in the JSNA area had higher recorded prevalence.
- In the JSNA area, the age-standardised rate of coronary heart disease related emergency admissions was 2,550 per 100,000 people (during 2014/15 to 2016/17), lower than the Warwickshire rate of 3,113, but higher than the other three JSNA areas within Stratford-on-Avon District.
- The recorded prevalence of strokes among patients of six of the eight GP surgeries in the JSNA area was higher than the national figure.
- Recorded prevalence of atrial fibrillation among patients of six of the eight GP surgeries was higher than the national figure the highest being at both the Alcester Health Centre (2.9%) and Bidford Health Centre (2.9%).
- Recorded cancer prevalence is higher among patients of the GP surgeries within the JSNA area. This may in part be explained by the older age profile and good uptake of cancer



screening programmes locally. For example all eight GP surgeries in the JSNA area have a higher proportion of women aged 25 to 64 years old attending cervical screening compared to the national average.

- In 2014/15, the rate of new cancers (crude incidence rate) was significantly higher than the England rate (523 per 100,000 population) in five of the GP surgeries in the JSNA area.
- Focusing on cancer related emergency admissions, the local age-standardised rate was lower than the Warwickshire rate (510 and 604 per 100,000 people respectively) during 2014/15 to 2016/17. However, the local rate has been increasing over the last three years, suggesting room for improved management of cancers.
- The mental health of young people was raised as a concern by professional and public stakeholders during the consultation for producing this needs assessment and analysis of health data supports the concern for young people with mental health issues living in the JSNA area.
- High rates of admissions following self-harm among local 10 to 24 year olds also indicates higher levels of mental health challenges among the local population. The crude rate in the JSNA area was 52.7 compared to 43.0 per 10,000 population (2014/15 to 2016/17). Concerningly, the JSNA area ranks highest on this indicator when compared to the other three Stratford JSNA areas and ranks 5th out of the total 22 JSNA areas.
- Nationally, in 2016/17, the recorded prevalence for diabetes for people aged 17+ was 6.7%. Only one GP surgery in the JSNA area had a figure significantly higher than the national figure.
- Obesity rates among residents of this JSNA area are not higher than local or national rates, however rates are rising nationally and needs to be addressed among the whole population. Excess weight is linked to an increased risk of circulatory conditions, diabetes, certain cancers and other chronic conditions. Nationally, in 2016/17, the recorded prevalence for obesity for people aged 18+ was 9.7%. Only one surgery reported a figure significantly higher than the national figure Alcester Health Centre (11.2%), for both 2015/16 and 2016/17.
- The National Child Measurement Programme data reveals that 13.2% of local Reception age children are classified as 'overweight' which is higher than the Warwickshire proportion of 12.6%. For Year 6 children, 13.2% are classified as 'overweight'.
- Data for the number of people accessing treatment for substance misuse shows the JSNA area accounted for 28.0% (69) of the total referrals in 2016/17 for the district, of which over half (51%) were for alcohol treatment.
- The 2011 Census reveals that 11.6% of JSNA residents are providing care where 19.3% of these carers are providing 50+ hours of care per week. Both Alcester North & Conway Lower Super Output Area (LSOA) (31.4%) and Henley East & Beaudesert LSOA (29.4%) have a higher proportion of resident carers providing 50+ hours of care per week.
- In the JSNA area at March 2018, Alcester Health Centre has the highest prevalence of dementia in patients aged 65+, with 4.3% of the 65 plus patient practice list (65 patients) registered as having dementia.
- Schools Health Needs Assessment data reveals that in 2016/17, 8.1% of Year 6 children attending schools in the JSNA area advised they have asthma and for Year 9 this increased to 13.5% of children.



SOCIAL CARE

- The number of 'Children Looked After' has increased in the JSNA area, from 19 in 2016/17 to 23 in 2017/18. The rate of 'Children Looked After' in the JSNA area (35.03 per 10,000 children) was higher than the district figure of 32.75 per 10,000 and lower than the county figure of 55.68 per 10,000.
- There has been an 8% increase in the number of new adult social care assessments completed for residents of the JSNA area, an increase from 299 in 2016 to 323 in 2017.
- In the JSNA area, in 2017, two thirds of those in receipt of a social care package (66.2%) received a community package, which is slightly higher than the Warwickshire average (60.6%). One fifth (21.9%) of social care clients in the JSNA area received a residential package.
- A high proportion of social care clients in the JSNA area received an 'Older People' package (50.9%).

DEPRIVATION, POVERTY, ECONOMY & EDUCATION

- None of the LSOAs within the JSNA area are within the top 30% most deprived areas nationally. The most deprived LSOA is 'Alcester North & Conway' (within the top 40%).
- Over a quarter (26.8%) of all families living in the JSNA area were claiming tax credits (710 children), which is higher than the overall Stratford-on-Avon District proportion of 23.6%.
- In the JSNA area, 10.2% (1,617) of households are considered to be fuel poor. The two areas of concern for fuel poverty were both Studley South LSOA (13.7% 93 households) and Tanworth LSOA at 13.1% (102 households).
- At Arden Food Bank there was an 88.1% increase (96 adults) in adult visitors when comparing the period 1st April 2016 to 31st March 2017 to the corresponding period of 2017/18.
- Reasons for people accessing the Arden food bank over the past two years have shifted with a large increase seen in the number of people accessing the service due to a low income, an increase to 41.8% of visitors in 2017/18.
- Citizen's Advice data reveals that the issues of most concern to JSNA residents are benefits and tax credits.
- There has been an increase in the claimant count over the past two years in the JSNA area with 255 people claiming benefits principally for the reason of being unemployed at August 2018 (an increase from 140 claimants at August 2017).
- In the JSNA area in 2017, 92.2% of all children (nursery to Year 13) attend a 'good or outstanding' school
- Over two thirds (77.7%) of all children in Early Years education residing in the JSNA area for 2017 are achieving a 'Good Level of Development'.
- At Key Stage 2, performance improved for those children classed as 'disadvantaged' achieving the Expected Standard in Reading, Writing & Maths (2017), an increase to 41.4% in 2017. For 'Other' children their performance worsened, down to 61.6% in 2017 (from 67.6% in 2016).



COMMUNITY SAFETY

- Road traffic collisions (with injuries) have reduced in the JSNA area by 14.5% since 2016. However, the area ranks 4th out of 22 JSNA areas (where 1st is worst) for the volume of road traffic collisions. In the JSNA area Sambourne LSOA reported the highest volume of accidents over a three year period (47 accidents) and the highest rate per 1,000 population (25.85).
- Crime in the JSNA area remains low and the area ranks 16th out of 22 JSNA areas for recorded crime (where 1st has the highest crime rate in 2017). The level of anti-social behaviour being reported to Police in the JSNA area remains low. The anti-social behaviour rate per 1,000 population in the JSNA area is lower than the Warwickshire average (18.7 and 30.3 respectively).

ENVIRONMENT

- There is one area in Studley (Studley 4 located on the High Street) that exceeds the air quality standard objective for Nitrogen Dioxide (NO₂) of 40 μ g/m3. Four of the other areas in Studley have been recorded as having NO₂ levels of 30-40 μ g/m3. NO₂ levels have been increasing over the past five years and may continue to increase in future years, particularly with the planned development work locally.
- Air pollution in Henley-in-Arden is a concern and one site on the High Street has recorded NO₂ levels of 30-40 μg/m3. The site has seen levels increase over the past five years, from 28.5 in 2012 to 34.2 in 2016 and is an area to maintain a focus on in coming years.

RURAL & SOCIAL ISOLATION

- Social and rural isolation is an issue for some residents of the JSNA area, particularly the elderly and those with medical conditions.
- There are concerns over elderly people living in the JSNA area not having access to reliable, cost effective and suitable (assisted) public and community transport to access local health and care services or support.
- Census 2011 data reveals that 11.9% of households (1,800) in the JSNA area do not have access to a car or van Alcester East & Island (24.1%) and Alcester North & Conway (23.4%) have the highest proportion of households that do not have access to a car or van which will significantly limit the ability of residents to access services outside of Alcester town.

CONSULTATION

- People working in the JSNA area consider 'healthy lifestyles' and 'mental health and wellbeing' to be priority areas for improvement across all age groups of JSNA residents.
- Two further areas which people working in the area indicated need improving were 'community activities and opportunities to develop social networks'.
- Reported barriers to improving health and wellbeing for local residents include poor public transport links, mainly due to the rural nature of the area, alongside a lack of community venues, a lack of funding and a lack of knowledge to improve health and wellbeing.



- Residents were asked (from a list) which issues they felt are priority areas for health and wellbeing in the local area. 'Promoting mental health and wellbeing' was selected by 76% of all respondents living in the JSNA area closely followed by 'access to health services' (65%).
- Residents were asked to rank which things in the local area they value in terms of supporting positive health and wellbeing; 'green space/outdoor activity' and 'access to local community groups and activities' ranked the highest.
- When asked to select what could be better in the local area to support health and wellbeing, many respondents were keen to have safe walking and cycle routes and better access to transport.

RECOMMENDATIONS

These recommendations for Henley, Studley & Alcester have been agreed by the steering group for the area. They draw on the data included in this report and the wider engagement work that has been carried out with stakeholders. A more detailed recommendations and action plan are published separately.

- Ensure services plan for the growth in population aged 65 and over.
- **Promote healthy lifestyles**, including physical activity, diet and safe alcohol consumption to reduce risk factors for long-term diseases.
- Increase opportunities for social connections across all age groups, particularly for those with limited access to transport or where a lack of community venues may limit opportunities for social contact.
- Identify opportunities to **improve cancer care in the community**, reducing the need for patients to access care as an emergency and ensuring people living with and beyond cancer are appropriately supported.
- Increase pro-active identification of hypertension and diabetes and empower patients to self-manage and take appropriate action to reduce the risk of serious adverse health events and complications.
- Support people caring for friends or relatives, including children and young people who have caring responsibilities for parents, and adults caring for older people with dementia or cognitive impairment.
- Strengthen links between health professionals and housing officers to **ensure older people are living in appropriate accommodation** which is warm and minimises the risk of harm from falls.
- Work with partners within health, schools and community settings to **improve mental** health among children and young people.
- Investigate opportunities to reduce harm from air pollution in identified areas with poorer air quality.
- Collaborate with Food Banks operators and Citizens Advice Bureau staff to identify opportunities to **address poverty locally**.
- Increase the range of opportunities for physical activity including safe walking and cycling routes, use of parks and green spaces and community-based activities, including provision that will appeal to young people, men and older people.
- Improve **road safety** particularly around the Sambourne area.



INTRODUCTION & LOCAL CONTEXT

JSNA GEOGRAPHICAL AREA





The Henley, Studley and Alcester JSNA area is located within Stratford-on-Avon District and includes the main settlements of Alcester, Bidford-on-Avon, Henley-in-Arden, Studley and Claverdon (Figure 1). There are six Middle Super Output Areas covering the area: Alcester MSOA; Bidford, Salford & Welford MSOA; Claverdon & Henley MSOA; Kinwarton, Aston Cantlow & Bardon MSOA; Studley MSOA; Tanworth & Sambourne MSOA.

The area is rural in nature, covering a wide geographical base with contrasting neighbourhoods of both affluence and deprivation.

The small towns and villages were once Roman towns with Roman roads and the River Avon passes through. Major roads such as part of the M40, the A435 and A46 also pass through the area and there are connections via train through to Birmingham and Stratford.

Within the area there is one children's centre located in Alcester which serves a wide geographical area and offers outreach activities and services to families. There are also 18 primary schools, five secondary schools and one secondary special school.

The area has a variety of parks and recreational spaces such as Jubilee Fields (Alcester), Studley Sport and Social Club and The Big Meadow (Bidford-on-Avon). However, there are a number of new housing developments either being built or planned for the future. This is leading to an increasing demand on local services, in particular the demand on school places, health services and community assets. An increase in traffic, a lack of accessible transport links, increased air pollution and damage to the local environment are regularly cited as impacting on the quality of life for residents.

It should be noted here that a <u>glossary document</u> has also been produced to support the main report. This contains definitions of potentially unfamiliar terms.

DEMOGRAPHICS

POPULATION

The mid-year 2016 population estimate for the Henley, Studley & Alcester JSNA area is 35,209¹. The largest population is found in the Kinwarton Lower Super Output Area (LSOA) (2,212) with the least populated area being Alcester North & Conway LSOA (1,306).

Figure 2 shows that there are a higher proportion of residents aged over 65 (27.5%), in the JSNA area compared to in the Warwickshire population (20.6%). At an LSOA level, Kinwarton LSOA has the highest proportion of over 65's (43.3%) compared to Bidford East, Waterloo & Broom LSOA which has the least (17.6%). The over 65 population in the JSNA area is expected to increase significantly by 2041 – increasing by 42% from 9,670 to 13,731 people (an increase of 4,061)².

The JSNA area also has a higher proportion of the resident population aged over 85 (3.6% - 2,874 people) compared to the Warwickshire population (2.6%)¹, with this population expected to increase by 127% (1,608 people) to 2,874 by 2041^2 . At LSOA level, Henley West LSOA has the highest proportion of over 85's living within it (5.6%) compared to Bidford East, Waterloo & Broom LSOA which has the least (2.3%).



Figure 2 also shows that there is a much lower volume and proportion of working age residents living in the JSNA area. There is a concern from stakeholders that having a smaller population of working age residents is likely to lead to issues with there being less people able to support the increasing number of older people living in the community in the future.



Figure 2 – Henley, Studley & Alcester JSNA Area Population Pyramid (Mid-2016 Population Estimates)

% Female % Male % Warwickshire % Female % Warwickshire % Male

Source: ONS, Mid Year 2016 Population Estimates

ETHNICITY

In the Henley, Studley & Alcester JSNA area, in 2011, the majority of the population (95%) were classified as White British with 5% classified as of Black Minority & Ethnic (BME) origin³. This was in contrast to 11.5% of the Warwickshire population who were of BME origin. In addition, in 2011, a large majority of the JSNA's resident population were born in the UK (95.7%), higher than the Warwickshire figure of 91.7%. Of those people not born in the UK, the main groups were residents born in the Middle East & Asia (0.8%) and Africa (0.6%)⁴.

HOUSEHOLDS

In 2011, there were 15,146 households in the Henley, Studley & Alcester JSNA area, the majority of which were one family households (67.8%)⁵. A further, 27.9% of households were classified as one person households, over half of which had a person aged 65 years and over living within it.



Focusing on younger households, 26.0% (3,933) of all households in the JSNA area are home to families with dependent children, which includes all families where people are married, co-habiting partners, lone parents and other.

In 2011, in Warwickshire, 70% of homes were categorised as 'owned'; in the Henley, Studley & Alcester JSNA area this proportion was slightly higher at 74.2%⁶. The proportion of 'social rented' homes (12.7%) and privately rented homes (10.6%) in the JSNA area was lower than the Warwickshire figure (13.8% and 14.1% respectively). This is not surprising given that the JSNA area is considered to be among one of the more affluent areas in Warwickshire.

MOSAIC PROFILE

In 2017, in the JSNA area, three Mosaic Groups made up over half (53.8%) of the Henley, Studley & Alcester JSNA area population (Figure 3)⁷. 'Country Living' was the most prominent group comprising 25.7% of the population. This can be compared to a much lower 10.7% of the wider Warwickshire population. Dominant characteristics for this group include well-off older home owners, living in rural locations, enjoying country life.

	MOSAIC GROUP	HENLEY, STUDLEY & ALCESTER JSNA AREA	STRATFORD-ON- AVON DISTRICT	WARWICKSHIRE
Α	COUNTRY LIVING	25.7%	27.5%	10.7%
В	PRESTIGE POSITIONS	12.2%	11.8%	9.9%
С	CITY PROSPERITY	0%	0.4%	0.8%
D	DOMESTIC SUCCESS	5.2%	7.0%	8.3%
E	SUBURBAN STABILITY	8.3%	5.0%	9.6%
F	SENIOR SECURITY	10.6%	7.5%	9.6%
G	RURAL REALITY	15.9%	18.6%	7.4%
Н	ASPIRING HOMEMAKERS	7.1%	7.7%	11.0%
1	URBAN COHESION	0.2%	1.1%	1.6%
J	RENTAL HUBS	1.2%	3.5%	5.9%
K	MODEST TRADITIONS	2.8%	1.5%	6.0%
L	TRANSIENT RENTERS	2.4%	1.6%	5.5%
М	FAMILY BASICS	2.2%	1.7%	6.0%
Ν	VINTAGE VALUE	5.3%	4.4%	5.7%
0	MUNICIPAL CHALLENGE	0.8%	0.6%	2.2%

Figure 3: JSNA Area Mosaic Profile, % in each group (the top 5 groups in each area are highlighted)

Source: Experian, Mosaic 2017

Around 16% of households in the Henley, Studley & Alcester JSNA area were classified as 'Rural Reality' (more than double the Warwickshire proportion of 7.4%). Dominant characteristics for this group are householders living in inexpensive homes in village and rural communities. 'Prestige Positions' features as the third highest Mosaic Group, with 12.2% of the households in this group.

Individuals in the three main groups are most likely to be receptive to postal and email communications, reflecting the older profile of the JSNA area. It is also worth noting that these groups are not particularly innovative with technology, where households in the 'County Living' Group are considered 'late majority' for adopting technology and are unlikely to have the latest gadgets.



HEALTH

OVERVIEW

This section presents data on the health of the population of the Henley, Studley and Alcester JSNA area. There are numerous health-related measures that have been considered. The measures reported are those where performance is significantly worse than England or South Warwickshire CCG. Where the data is 'RAG rated', green signifies significantly better than England, amber similar and red worse.

Health data is collected at a primary and secondary care level. For the data collected at primary care (general practice) level, because all residents in the JSNA area are not registered at the same practice, a method was developed that gives an indication of the health of the JSNA area. If 25% or more of the registered population of a general practice lived within the Henley, Studley and Alcester JSNA boundary, or a practice had more than 2,000 registered patients living in the JSNA area, then this general practice is included in the analysis. Also included are those practices which community based healthcare teams working in the JSNA area collaborate through the 'Out of Hospital' programme (Lapworth and Trinity Court Surgeries). Using this method, data for eight general practices are reported for the JSNA area (Figure 4).

GP Practice	Number of registered patients living in JSNA Area	% of surgery population living in JSNA Area
Henley in Arden Medical Centre	6,315	95.6%
Alcester Health Centre	5,099	89.9%
The Arrow Surgery	4,914	88.0%
Pool Medical Centre	6,012	80.0%
Tanworth in Arden Medical Centre	2,798	63.1%
Bidford Health Centre	7,180	60.9%
Trinity Court Surgery	2,408	13.5%
Lapworth Surgery	41	1.6%

Figure 4: General Practices in the Henley, Studley & Alcester JSNA Area Analysis

Source: NHS Digital, Patients registered at a GP practice, April 2018

BIRTH RATES AND LIFE EXPECTANCY

In 2016, in the Henley, Studley and Alcester JSNA area, the fertility rate was 62.6 live births per 1,000 females aged 15-44 years⁸. The rate in the JSNA area is higher than the Warwickshire rate of 61.0 per 1,000 and has increased slightly since 2013 (61.8 per 1,000).

In the JSNA area, between 2014 and 2016, life expectancy at birth was 80.6 years for males and 84.1 years for females, which is higher than the Warwickshire averages (79.9 years for males and 83.6 years for females)⁹. In the JSNA area, across the relevant Middle Super Output Areas (MSOAs), between 2011-2015, healthy life expectancy (HLE) for females ranged from 67.4 years in the Alcester MSOA to 69.6 years in the Tanworth & Sambourne MSOA. HLE for males ranged from 64.1 years in the Studley MSOA to 69.5 years in the Tanworth & Sambourne MSOA¹⁰.



In the JSNA area in 2011-2015, the disability-free life expectancy (DFLE) for females ranged between 65.8 years in the Studley MSOA to 69.7 years in the Kinwarton, Aston Cantlow & Bardon MSOA¹⁰. For males DFLE ranged between 64 years in the Studley MSOA to 69.6 years in the Tanworth & Sambourne MSOA (69.6).

MORTALITY

In the Henley, Studley and Alcester JSNA area, in the period 2013-2017, the top causes of death were cancer, circulatory disease and respiratory disease¹¹. The age-standardised mortality rates for these categories are not significantly different to Warwickshire, however for all age respiratory disease in particular, the JSNA area is performing significantly better than Warwickshire (93.0 vs 115.0 per 100,000 population for the period 2013-2017).

For Warwickshire, during the period 2013 to 2017, the directly age standardised mortality rate for deaths of all causes was 908 per 100,000 population¹¹. By comparison, the JSNA area rate was 855 per 100,000 population.

Within the JSNA area there were six LSOAs which had age-standardised mortality rates (per 100,000 people) higher than the Warwickshire rate; Dunnington & Salford Priors LSOA (1,488 per 100,000), Kinwarton LSOA (1,285 per 100,000), Tanworth LSOA (1,268 per 100,000), Bidford East Waterloo & Broom LSOA (1,115 per 100,000), Studley North (1,107 per 100,000) and Alcester East & Island (939 per 100,000)¹¹. By comparison the LSOA with the lowest mortality rate was Alcester South, Arrow & Weethley (649 per 100,000).

EMERGENCY HOSPITAL ADMISSIONS

In the Henley, Studley and Alcester JSNA area, there is a concern over the levels of admissions to hospital for young people, in particular among 15 to 24 year olds. Between 2014/15 to 2016/17 (a three year average) the crude rate for emergency admissions for injuries (unintentional and deliberate) in 15 to 24 year olds was 144.7 per 10,000 population which is higher than the Warwickshire rate (119.6 per 10,000)¹².

Of the six MSOAs across the JSNA area, for the period 2011/12 to 2015/16, the crude rate of hospital admissions for injuries for 15 to 24 year olds in two of the MSOAs, Alcester MSOA (271.8 per 10,000) and Studley MSOA (188.9 per 10,000) was significantly higher than the national figure (133.1 per 10,000)¹⁰. The Alcester rate was more than double the England rate.

The crude rate of emergency hospital admissions for children under five years between 2013/14 and 2015/16 in England was 149.2 per 1,000 population. Of the six MSOAs across the JSNA area, two of the MSOAs had a rate significantly worse than the England figure; Kinwarton, Aston Cantlow & Bardon MSOA (184.4 per 1,000) and Claverdon & Henley MSOA (183.9 per 1,000)¹⁰.

Further data comes from the School Health Needs Assessment which is run by the Warwickshire School Health and Wellbeing Service. In the 2017/18 academic year, the response rates were 45.5% for Reception children, 92.1% for Year 6 children and 46.6% for Year 9 children. Reception children's parents are asked "in the past year has your child been to the accident and emergency department following an accident or serious injury?". For children attending schools in the JSNA area, 2017/18



data reveals that 5.6% of parents advised that their child had been to A&E in the last twelve months, which was lower than the Warwickshire total of 9.8%¹³. However, this increases by the time children reach Year 6 and Year 9. For Year 6 children, 18.4% of children attending schools in the JSNA area advised that they had been to A&E following an accident or serious injury in the last twelve months and for Year 9 this increased to 27.4% of children. Both figures are lower than the Warwickshire average.

HEART CONDITIONS

In the JSNA area, analysis of the health data has revealed a concern for heart related conditions for residents and links to the ageing population.

Hypertension (High blood pressure): Nationally, in 2016/17, the recorded prevalence of hypertension for people of all ages was 13.8%¹⁴. In this period, all of the GP surgeries in the JSNA area report significantly higher hypertension prevalence compared to the national figure, the highest being at The Arrow GP Surgery (19.6%) and the lowest being at Lapworth GP Surgery (15.5%) (Figure 5). This may be linked to the age profile of those registered at the surgeries as the risk of developing hypertension increases with age.

A comparison of recorded prevalence rates and modelled prevalence estimates for GP Practice populations gives an indication of the level of unmet need. The estimated prevalence of undiagnosed hypertension (for those aged 16+) in 2015 was significantly higher than the national figure (12.2%) across seven of the eight GP surgeries. In the JSNA area, the GP surgery with the highest estimated prevalence of undiagnosed hypertension was Henley-in-Arden Medical Centre $(13.9\%)^{14}$.

In 2016/17, data for the GP surgeries in the JSNA area showed that the percentage of patients with hypertension in whom the last blood pressure reading (measured in the previous 12 months) was 150/90 mmHg or less, was significantly better than the national figure (80.0%) at Bidford Health Centre (83.4%) and Trinity Court Surgery (83.9%) but significantly worse at Pool Medical Centre $(71.4\%)^{14}$.





Figure 5: Hypertension – QOF prevalence (all ages) and undiagnosed hypertension (aged 16+)

Source: PHE, https://fingertips.phe.org.uk/ Note: based on different periods of data

Heart Failure: Nationally, in 2016/17, the recorded prevalence of heart failure (for people of all ages) was 0.8%. In this time period, three of the eight GP surgeries in the JSNA area report a prevalence significantly higher than the national figure - Alcester Health Centre 1.3%, Trinity Court Surgery 1.2% and Bidford Health Centre 1.1%¹⁴.

The estimated prevalence of heart failure (for those aged 16+) nationally in 2015 was 1.4% and for all of the eight GP surgeries in the JSNA area the prevalence was estimated to be significantly higher. The highest estimated prevalence being at Henley-in-Arden Medical Surgery (2.1%)¹⁴.

Coronary Heart Disease: In the Henley, Studley and Alcester JSNA area, the directly agestandardised emergency admission rate of 2,550 per 100,000 population (a three year average from 2014/15 to 2016/17) for coronary heart disease was lower than the Warwickshire rate of 3,113 per 100,000¹². However, the JSNA area had a rate higher than the other three JSNA areas in Stratfordon-Avon District (Southam JSNA area 2,455 per 100,000, Wellesbourne, Kineton & Shipston JSNA area 2,194 per 100,000 and Stratford-on-Avon JSNA area 2,220 per 100,000).

Atrial Fibrillation: Nationally, in 2016/17, the recorded prevalence of atrial fibrillation (for patients of all ages) was 1.8%¹⁴. In this time period, six of the eight GP surgeries had a figure significantly higher than the national figure, the highest being at both the Alcester Health Centre (2.9%) and Bidford Health Centre (2.9%). The prevalence in the remaining four surgeries was Tanworth-in-Arden Medical Centre 2.8%, Henley-in-Arden Medical Centre 2.6%, The Arrow Surgery 2.4% and Trinity Court Surgery 2.4%.

In 2016/17, 68.8% of patients at Alcester Health Centre were being treated with anti-coagulation therapy (a treatment to prevent complications such as strokes) – this was lower than the national average (81.2%)¹⁴. All of the other GP surgeries in the JSNA area were similar to the national average.



Mycardial Infarction and Strokes: In the Henley, Studley and Alcester JSNA area, the directly agestandardised emergency admission rate of 100.1 per 100,000 population (a three year average from 2014/15 to 2016/17) for Myocardial Infarction was lower than the Warwickshire rate of 114.7 per 100,000¹². However, the JSNA area had a rate higher than the other three JSNA areas in Stratfordon-Avon District (Wellesbourne, Kineton & Shipston JSNA area 99.5 per 100,000, Southam JSNA area 94.7 per 100,000 and Stratford-on-Avon JSNA area 88.5 per 100,000).

Nationally, in 2016/17, the recorded prevalence of stroke (for patients of all ages) was 1.7%¹⁴. During this time period, the prevalence in six of the eight GP surgeries in the JSNA area was significantly higher than the national figure, the highest proportion being at the Tanworth-in-Arden Medical Centre (2.5%) (Figure 6).



Figure 6: Stroke – QOF Prevalence (all ages) – 5 year trend (2012/13 – 2016/17)

CANCER

Cancer Screening: In 2016/17, all eight GP surgeries in the JSNA area had a higher proportion of women aged 25 to 64 years old attending cervical screening within a target period (3.5 or 5.5 year coverage) compared to the national figure (72.1%)¹⁴. The GP surgery with the highest proportion of women attending screening was Tanworth-in-Arden Medical Centre at 83.3%, followed by Lapworth Surgery (81.0%).

In 2016/17, the proportion of women aged 50-70 years screened for breast cancer in the last 36 months (three year coverage) was significantly higher than the England figure (72.5%) in three of the GP surgeries in the JSNA area (Tanworth-in-Arden Medical Centre 80.7%, Pool Medical Centre 80.4% and Alcester Health Centre 77.8%)¹⁴.

Prevalence: Nationally, in 2016/17, the percentage of people recorded as having cancer (all ages) was 2.6%¹⁴. In this period, all eight of the GP surgeries in the JSNA area had significantly higher percentages than the national figure with the highest being at Lapworth Surgery (4.3%) and Tanworth-in-Arden Medical Centre (4.0%) (Figure 7). It is important to note that higher recorded



Source: PHE, https://fingertips.phe.org.uk/

prevalence is likely to be related to the age profile of the area and uptake of screening programmes. As shown above, screening rates in the area are high, suggesting that higher prevalence may be a result of early identification of cancer. Early identification significantly improves survival rates and means that more people will live with, and beyond, cancer.



Figure 7: Cancer – QOF Prevalence (all ages) – 5 year trend (2012/13 – 2016/17)

In 2014/15, the rate of new cancer cases (crude incidence rate) was significantly higher than the England rate (523.0 per 100,000 population) in five of the GP surgeries in the JSNA area¹⁴. This will also be influenced by the higher uptake of screening programmes. The five surgeries with the highest rates of new cases were Tanworth-in-Arden Medical Centre (847.9 per 100,000), Pool Medical Centre (828.9 per 100,000), Henley-in-Arden Medical Centre (765.7 per 100,000), Bidford Health Centre (764.5 per 100,000) and Trinity Court Surgery (641.9 per 100,000).

Focusing on cancer related emergency admissions, in the Henley, Studley and Alcester JSNA area the directly age-standardised rate of 510 per 100,000 people (a three year average from 2014/15 to 2016/17) was lower than the Warwickshire rate of 604 per 100,000¹². However, the rate has increased over the last three years, from 447 per 100,000 in 2014/15, to 553 per 100,000 in 2016/17. This increasing rate of emergency admissions indicates room for improving the management of cancers in the community and potentially improving End of Life care pathways to enable people to die in their place of preference, and to avoid unnecessary hospital admissions in the palliative period if this is their preference.

In 2016/17, there were two GP surgeries in the JSNA area which had a significantly higher crude rate of inpatient or day-case emergency admissions for cancer compared to the national figure (543.2 per 100,000)¹⁴. Henley-in-Arden Medical Centre had the highest rate at 813.4 per 100,000 and Bidford Health Centre the second highest rate at 721.4 per 100,000.

Cancer Mortality: The directly age-standardised rate of cancer mortality in the JSNA area (for the period 2013-17) was 259 per 100,000 population¹². This is similar to the Warwickshire rate of 251 per 100,000. The premature mortality rate from cancer (under 75 years) was again similar to the Warwickshire rate (123 per 100,000 and 115 per 100,000 respectively).



Source: PHE, https://fingertips.phe.org.uk/

Cancer Support and Care: Nationally, in 2016/17, the recorded prevalence of patients in need of palliative/supportive care (for people of all ages) was $0.4\%^{14}$. Three of the eight GP surgeries in the JSNA area had figures significantly higher than the national figure, the highest being at The Arrow Surgery (0.9%), followed by both Bidford Health Centre and Trinity Court Surgery at 0.7%. This may be due to the higher proportion of older patients in these practices.

MENTAL HEALTH

The mental health of young people was raised as a concern by professionals in the early stages of producing this needs assessment and analysis of health data supports this anecdotal feedback.

The School Health Needs Assessment data from the Warwickshire School Health and Wellbeing Service for 2017/18 found that for children attending schools in the Henley, Studley and Alcester JSNA area, 30.0% of Reception children's parents advised that there was a history of emotional health issues including depression and/or anxiety in the family (similar to the Warwickshire total of 29.1%)¹³. Year 9 pupils were asked if they ever feel anxious/worried/stressed or in a low mood. Of pupils attending schools in the JSNA area 74.9% admitted to ever feeling anxious/worried/stressed or in a low mood compared to 68.7% in Warwickshire.

Self-Harm – Young People: In the Henley, Studley and Alcester JSNA area for the period 2014/15 to 2016/17, the crude rate of admissions for self-harm in 10-24 year olds was 52.7 per 10,000 population compared to 43.0 per 10,000 in Warwickshire¹². Of concern, the JSNA area ranks highest when compared to the other three Stratford JSNA areas and ranks 5th out of the total 22 JSNA geographies in relation to this indicator (Figure 8).



Figure 8: Self-Harm Emergency Admissions – ages 10-24 (Crude rate per 10,000 Population) - 3 year average

Source: NHS Digital, Hospital Episode Statistics Copyright © 2018, re-used with the permission of The Health & Social Care Information Centre

Mental Health - **Adults:** Focusing on new diagnoses of depression (for people aged 18+), nationally in 2016/17, the QOF incidence of depression was $1.5\%^{14}$. In this period, two GP surgeries in the JSNA area had an incidence rate of depression significantly higher than the national figure, Bidford Health Centre (2.7%) and Pool Medical Centre (2.1%). Comparatively two areas had incidence rates



significantly lower than the national figure, Lapworth Surgery (0.9%) and Alcester Health Centre (1.1%) (Figure 9).



Figure 9: Depression incidence – new diagnosis (aged 18+) – 5 year trend (2012/13 – 2016/17)

In 2016/17, the recorded percentage of adults (18+) registered with a diagnosis of depression was higher than the prevalence in England (9.1%) in two of the practices in the JSNA area, both Pool Medical Centre (13.6%) and Bidford Health Centre $(12.3\%)^{14}$.

In 2016/17, five of the eight GP surgeries in the JSNA area had a significantly lower percentage of patients recorded on their practice register with a diagnosed severe mental illness than the national figure of 0.9%, the remaining three were at a similar level¹⁴.

Modelled estimates for the prevalence of depression in 2015 in England was 15%, compared to the recorded prevalence of 9% (2016/17), suggesting that many cases of depression go undiagnosed. This also applies to surgeries in the JSNA area and in particular The Arrow Surgery stands out for having an estimated prevalence of depression of 16.3%, compared to a recorded prevalence of 9.2% $(2016/17)^{14}$.

The Parenting Project – Counselling Service: The Parenting Project runs a counselling service within Stratford-on-Avon District Children's Centres. They offer a service to parents/carers of children from pregnancy through to age 19 and offer up to 18 weekly sessions using either person-centred or integrative counselling/psychotherapy. Data has been analysed for three of the centres which were based within the JSNA area - Alcester, Studley and Henley-in-Arden (note - only Alcester Children's centre remains). Data for the two year period to June 2018 across the three centres reveals that 44 parents accessed counselling, the highest number being at the Studley centre (23 parents), the second highest at Alcester and the lowest at Henley-in-Arden¹⁵. Almost all of the parents accessing counselling at the centres were women (43 of the 44 parents). Almost half (45%) were aged between 26 to 35 years, around one third were aged between 36 to 45 years and a small number of parents were aged 19 to 25 years.

Of the two risk areas identified in the data, 18% (8) of parents had issues with self-harm and a small number reported suicidal thoughts. The team advise that many of the clients have experienced



abuse and/or neglect and adverse childhood experiences which usually underpin the presenting issues.

Dementia: In the JSNA area at March 2018, Alcester Health Centre had the highest prevalence of dementia in patients aged 65+, with 4.3% of patients on the practice list aged 65+ (65 patients) registered as having dementia¹⁶. This is higher than the CCG average (3.9%). Trinity Court Surgery had the highest number of patients aged 65 plus (134) registered as having dementia which is 3.5% of the 65 plus practice patient list.

In Alcester there is the provision of a dementia café, run by volunteers, which is dedicated to supporting people with memory problems/dementia, their families, carers, former carers and professional people. In the period 1st January to 31st August 2018, 2,601 people attended sessions at the café which is at a very similar level to the same period of 2017 when 2,594 people attended (0.2% increase) ¹⁷. Since January 2017 there has been an average of 317 people attending sessions per month. Sessions can include talks, music and singing, exercise, entertainment and speakers and presentations. The café began running day care from January 2018 (a maximum of 12 people per day, running two days a week). Numbers peaked in the summer month of July when there were 268 attendances for the month (includes up to 4 staff and 20 volunteers per session) which suggests this may be the key time of the year when families and carers need a break from providing care. The café has a clear demand from within the local and surrounding areas and the sessions are always consistently well attended, as is the more recent addition of the day care facility which provides relief to families and carers. Due to the demand and interest in the local service they are looking at ways of providing respite care to local people and are currently investigating this with the local authority.

LONG-TERM HEALTH CONDITIONS

Nationally, in 2016/17, the recorded prevalence for diabetes for people aged 17+ was 6.7%¹⁴. One GP surgery in the JSNA area had a figure significantly higher than the national figure - Pool Medical Centre (7.3%). The figures for Pool Medical Centre were consistently higher than the England figures over the five year period 2012/13-2016/17.





Figure 10: Diabetes Prevalence aged 17+ – 5 year trend (2012/13 – 2016/17)

Source: PHE, https://fingertips.phe.org.uk/

It is important to note that increasing obesity rates seen nationally will impact on future prevalence of Type II diabetes. Type II diabetes develops over time and can go unnoticed for some time. It is important that health practitioners are proactive in identifying early signs of disease to enable patients to manage and potentially reverse the condition.

LIFESTYLE RELATED HEALTH CONDITIONS

Obesity: Nationally, in 2016/17, the GP recorded prevalence for obesity for people aged 18+ was 9.7%¹⁴. Seven of the eight GP surgeries in the JSNA area report figures significantly lower than the national average (the lowest being at Lapworth Surgery 3.6%) with only one surgery reporting a figure significantly higher than the national figure - Alcester Health Centre (11.2%), in both 2015/16 and 2016/17.

However, GP recorded weight status has limitations and more robust data is available from the National Child Measurement Programme. For Reception children attending schools in the JSNA area the data reveals that 74.9% of children are classified as having a 'healthy weight'¹⁸. This is slightly below the Warwickshire proportion of 76.5%. In Year 6, 65.9% of children attending schools in the JSNA area were classified as having a 'healthy weight', similar to the Warwickshire proportion of 65.4%.

Focusing on children that are classified as 'overweight', in the JSNA area 13.2% of Reception children are classified as 'overweight', higher than the Warwickshire proportion of 12.6%. At Year 6, 27.5% of children attending schools in the JSNA area are classified as either 'overweight' or 'very overweight' which is lower than the Warwickshire figure of 30.4%.

Alcohol and Substance Misuse: In the Stratford-on-Avon District the directly age-standardised rate of hospital admissions where the primary diagnosis or any of the secondary diagnoses were



attributed to alcohol was 982.0 per 100,000 people in 2014/15 significantly lower than the England rate of 1,258.0¹⁴.

In Stratford-on-Avon District there were 247 unique referrals for drugs and alcohol treatment to Addaction for the twelve month period of 1st April 2016 to 31st March 2017¹⁹. The JSNA area accounts for 28.0% (69) of the total referrals in the period for the district, of which over half (51%) were for alcohol treatment. A further breakdown reveals that clients living in the JSNA area were also referred for non-opiate and alcohol treatment (17%), opiate treatment (16%) and non-opiate treatment (9%). This data only highlights the people actively seeking or being referred for treatment and does not provide any insight for those people regularly drinking alcohol at harmful levels that do not require medical support.

ASTHMA

Asthma is a common long-term inflammatory disease of the airways of the lungs which is aggravated by air pollution and poor air quality and is more likely to make an asthma sufferer's condition worse and trigger an attack.

Nationally, in 2016/17, the recorded prevalence of asthma (in people of all ages) was 5.9%¹⁴. Two of the GP surgeries in the JSNA areas had figures that were significantly higher than the national figure - both the Alcester Health Centre (6.8%) and Pool Medical Centre (6.7%). Prevalence in one GP surgery was significantly lower than the national figure - Henley-in-Arden Medical Centre (5.3%).



Figure 11: Asthma – QOF Prevalence (all ages)

Source: PHE, https://fingertips.phe.org.uk/

In the Schools Health Needs Assessment run by the Warwickshire School Health & Wellbeing Service (2017/18 data), reception children's parents are asked if their child has asthma. For children attending school in the Henley, Studley & Alcester JSNA area this increases by the age of the child. In reception, 7.2% of parents advised that their child had asthma which was similar to the Warwickshire total of 7.1%¹³. This increased by the time children get to Year 6 and Year 9. For Year 6



children attending school in the JSNA area, 8.1% of children advised they had asthma and for Year 9 this increased to 13.5% of children. Comparing the responses with those young people attending schools in the other Stratford-on-Avon JSNA areas, of the available data for Year 9 children, the JSNA area reports the highest proportion of children advising they have asthma at 13.5% compared to the Wellesbourne, Kineton & Shipston JSNA area at 11.5%.

CARING RESPONSIBILITIES

Data from the 2011 Census found that 11.6% of residents in the Henley, Studley & Alcester JSNA area were providing care, where 19.3% of these carers were providing 50+ hours of care per week²⁰. This was marginally higher than the Stratford-on-Avon District average figure where 11.3% of the total population were providing care and 18.7% of these carers were providing 50+ hours of care per week. However, at a smaller geographical level, residents of Studley West & Common LSOA were providing the highest proportion of care (15.1%) when compared to the other LSOAs in the JSNA area. There were two LSOAs within the JSNA area that had high levels of residents providing 50+ hours of care North & Conway (31.4%) and Henley East & Beaudesert (29.4%).

Nationally in2016/17, 17.9% of the GP registered population aged 18+ had a caring responsibility¹⁴. Focusing on the eight GP surgeries in the JSNA area, seven of the surgeries had a lower proportion of people aged 18+ with a caring responsibility when compared to the national figure. The lowest being at Trinity Court Surgery (13.1%). Only one GP has a figure which is considered to be significantly higher than the national figure - Pool Medical Centre (26.1%).

Data for young carers (aged 8 years and upwards) who have been referred to the Warwickshire Young Carers project shows that the number of young people supported by the project is lower in the Henley, Studley & Alcester JSNA area than the other three Stratford-on-Avon JSNA areas. At April 2018 there were 77 young people residing in the JSNA area being supported by the project and 15.6% (12) of these live in the Bidford East, Waterloo & Broom LSOA²¹.

SOCIAL CARE

With an increasing population predicted in the JSNA area and wider district, particularly in relation to older people, it is predicted that the demand on social care services will grow.

EARLY HELP

The number of Early Help Single Assessments (EHSA) initiated within the Henley, Studley & Alcester JSNA area increased by 20.5% between 2016/17 and 2017/18, an increase from 44 assessments in 2016/17 to 53 in 2017/18²². The highest number of assessments were recorded in the Kinwarton LSOA in 2017/18 (8) compared to an average of three typically recorded in each of the other LSOAs. Focusing on the proportion of early help evaluations that returned a positive outcome, 83% of those completed by the EHSA team for the period 1st April 2017 to 31st March 2018 received a positive outcome.



Priority Families Programme – The local programme supports the national Troubled Families programme, and focuses on the earliest possible intervention, working with vulnerable families which have multiple problems that can be expensive to address. For Phase 2 of the programme (from 1st April 2015 up to 31st March 2018) there were 92 priority families living in the Henley, Studley & Alcester JSNA area (2.61 per 1,000 population²³). The rate of priority families in this JSNA area ranked 18th out of the 22 JSNA areas (where 1st was home to the highest rate of priority families).

CHILDREN'S SOCIAL CARE

Warwickshire County Council's Mosaic system holds data on families receiving social care support. There are a number of interventions that a family can be the subject of.

Child Protection Plans: A child protection plan is a plan drawn up by the local authority. It sets out how the child can be kept safe, how things can be made better for the family and what support they will need. There has been a slight increase in the number of children subject to Child Protection Plans in the Henley, Studley & Alcester JSNA area. In 2017/18 there were 14 children subject to a Plan, compared to 13 in 2016/17 (a slight increase in the rate per 10,000 child population, from 19.90 to 21.33) ²⁴. However, the rate for the JSNA area was less than the county rate (46.49 per 10,000) and the district rate (30.60 per 10,000). At March 2018, the LSOA with the highest number of children on a child protection plan, compared to other LSOAs in the JSNA area, was the 'Studley West & Common LSOA' with five children on a plan (a rate of 177.94 per 10,000 children).

Child in Need Plans: A child in need plan will contain the support which is being provided to a child and/or family social services. In 2017/18 there were 123 children living in the Henley, Studley & Alcester JSNA area (a rate of 187.36 per 10,000 children) with a child in need plan²⁴. This is lower than both the county rate (296.61 per 10,000) and the district rate (229.28 per 10,000). At March 2018, Bidford East, Waterloo & Broom LSOA had the highest number of children with a child in need plan (12 children at a rate of 245.90 per 10,000) and Studley North LSOA has the highest rate of children with a child in need plan (11 children at a rate of 395.68 per 10,000 children). Three LSOAs in the JSNA area had a rate above the county rate (Studley North 395.68 per 10,000, Studley West & Common 391.46 per 10,000 and Alcester North & Conway 316.21 per 10,000).

Children Looked After: The number of 'Children Looked After' has increased in the JSNA area, from 19 in 2016/17 to 23 in 2017/18 (the rate has increased from 29.08 to 35.03 per 10,000 children)²⁴. At March 2018, over half (52.2%) of 'Children Looked After' were subject to a Full Care Order and 43.5% were subject to S20 Accommodation (this is the local authority's duty to provide a child with somewhere to live because the child doesn't currently have a home or a safe home). At March 2018 the rate of 'Children Looked After' in the JSNA area (35.03 per 10,000 children) was higher than the district figure of 32.75 per 10,000 but lower than the county figure of 55.68 per 10,000.

The numbers are very small at LSOA level but the Alcester North & Conway LSOA emerges as having the highest number of children that are 'Children Looked After' - 9 children (a rate of 355.73 per 10,000 children).



ADULT SOCIAL CARE

Warwickshire County Council's Mosaic case management system holds data on adults receiving social care support. When comparing data from 1st January to 31st December 2017 to the corresponding period of 2016, there was a 3.3% reduction in the number of active adult social care service users residing in the JSNA area, 645 in 2017 down from 667 in 2016²⁵. The JSNA area ranked 6th highest for the number of adult social care service users (645) when compared to the other JSNA areas across Warwickshire (out of 22 areas) and equates to 2.3% of the 18+ population residing in the JSNA area. For comparison, the JSNA area with the highest proportion of the 18+ population receiving an active social care package at March 2018 was Nuneaton Central (3.5%).

As the total number of people receiving a service reduced, there was an 8% increase in the number of new adult social care assessments completed for residents of the Henley, Studley & Alcester JSNA area, an increase from 299 in 2016 to 323 in 2017²⁵. In the JSNA area, in 2017, two thirds of service users (66.2%) received a community package which is slightly higher than the Warwickshire proportion (60.6%). One fifth (21.9%) of users in the JSNA area received a residential package. Figure 12 shows the breakdown of packages received for each of the JSNA areas in Stratford-on-Avon District. The Henley, Studley & Alcester JSNA area has the second highest volume of active service users when compared with the other Stratford-on-Avon District areas.





Source: Mosaic, Adult Social Care Data, InsightService, WCC

Breaking this down further into the type of package received, within the Henley, Studley & Alcester JSNA area a high proportion of service users are receiving an 'Older People' package (50.9% - a very slight increase from 50.7% in 2016).

Consultation has raised concerns that people can be too proud to accept help from social services and the services themselves are expensive. It is also cited as a fairly complicated process with long forms to complete for assessments. This has raised concerns around access to services for those that need assistance with the process.



DEPRIVATION, POVERTY, ECONOMY & EDUCATION

DEPRIVATION

The 2015 Indices of Deprivation measures relative deprivation in Lower Super Output Areas (LSOAs). The most commonly used of the indices is the Index of Multiple Deprivation (IMD), which incorporates all of the individual indices to provide an indication of overall deprivation levels in an area. The deprivation scores are ranked and split into deciles to allow comparison across all areas (LSOAs) nationally and to identify those areas in the top 10%, 20% and 30% most deprived nationally.

None of the LSOAs within the JSNA area are within the top 30% most deprived areas nationally²⁶. The most deprived LSOA is 'Alcester North & Conway' which is within the top 40% most deprived areas nationally, and four LSOAs rank within the top 50% most deprived areas nationally (Alcester East & Island LSOA, Bidford East, Waterloo & Broom LSOA, Studley South LSOA and Henley East & Beaudesert LSOA). Generally the area is considered to have fairly low levels of deprivation but Alcester is considered to be the most deprived part of the JSNA area as the top two areas ranking highest for deprivation are located within Alcester (both Alcester North & Conway LSOA and Alcester East & Island LSOA, ranking 12,626 and 13,284 respectively – out of 32,844 LSOAs nationally). By comparison Henley West LSOA ranks 29,702 and is the least deprived LSOA in the JSNA area.

The geography of the JSNA area covers a very large area and there is a clear divide between the more affluent and deprived LSOAs locally. This is reflected in the mean price paid for residential properties in the JSNA area at June 2017 which is £422,379²⁷ which is considerably higher than the Stratford-on-Avon District figure of £331,765. To look at the local variation we need to analyse this data down to LSOA level. The LSOA with the highest mean price paid for residential properties in June 2017 is the Claverdon LSOA at £613,429 which can be compared to the Alcester North & Conway LSOA which reports a much lower mean price of £181,647.

POVERTY

There are big variations across the Henley, Studley & Alcester JSNA area in relation to deprivation, this is particularly evident when analysing poverty data.

Child Poverty: In 2014, over a quarter (26.8%) of all families living in the JSNA area were claiming tax credits (this equates to 710 children), which is higher than the overall Stratford-on-Avon District proportion of 23.6% and lower than the Warwickshire proportion of 28.8%²⁸. In the JSNA area, the highest proportion of children aged under 16 living in low income families live in the Alcester East and Island LSOA (21.5%), compared to the lowest proportion in Wootton Wawen LSOA (2.9%) which highlights a big variation.

Fuel Poverty: In 2016, in the JSNA area, 10.2% (1,617) of households were considered to be fuel poor, which is lower than both the Stratford-on-Avon District proportion (10.5%) and Warwickshire proportion (11.1%²⁹). The two areas of concern for fuel poverty were Studley South LSOA, which had an estimated 13.7% of households living in fuel poverty (93 households) followed by Tanworth LSOA



at 13.1% (102 households). This can be compared to Wootton Wawen LSOA which had a much lower figure of 7.4% (49 households) estimated to be fuel poor.

Free School Meals: In the JSNA area in 2017, 6.25% of children were registered as eligible for and claiming a free school meal (265 children)³⁰. This is lower than the county figure of 8.76%. However, there were two LSOAs within the JSNA area which had double the JSNA area proportion of children registered as eligible and claiming a Free School Meal: Alcester East & Island - 15% (30 children) and Studley South - 14% (32 children).

Food Banks: It is possible that residents of the JSNA area living in poverty have accessed food banks, either accessing them regularly or at times of need (or crisis). The nearest food banks are run by Warwickshire Trussell Trust and are located in Arden (covering Alcester and Studley) and Henley-in-Arden. At the Arden food bank there was an 88.1% increase (96 adults) in adult visitors when comparing the period 1st April 2016 to 31st March 2017 to the corresponding period of 2017/18³¹. The number of adult visitors to the food bank increased from 109 in 2016/17 to 205 in 2017/18 and the number of children visitors increased by almost one third (31.0%) over the two year period (26 children) - from 84 visitors in 2016/17 to 110 in 2017/18. There were much smaller numbers visiting the Henley-in-Arden food bank and there was a reduction in visitor numbers between the two years, from 50 adults in 2016/17 to 23 adults in 2017/18. The analysis below focuses on the larger numbers attending the Arden food bank.

Reasons for people accessing the Arden food bank over the past two years have shifted with a large increase seen in the number of people accessing the service due to a low income, an increase from 21.3% of visitors in 2016/17 to 41.8% of visitors in 2017/18.

In 2017/18 the top three reasons for visitors accessing the food bank were low income (41.8%), benefit changes (22.9%) and benefit delays (16.3%) (Figure 13).





Citizen's Advice: Data across a two year period to March 2018 reveals that the issues of most concern to residents contacting Citizen's Advice were benefits and tax credits. Generally there has been a 14.3% reduction in the number of people presenting at Citizen's Advice that reside in the JSNA area (a reduction from 4,608 people in 2016/17 to 3,949 in 2017/18 – and Warwickshire for



Source: Warwickshire Trussell Trust, 2018

the wider area has experienced a reduction in people presenting³²). In 2017/18, 32.5% of the people visiting from the JSNA area were concerned about benefits and tax credits (1,228 visits). The second area of concern to JSNA residents was debt, with a 7.9% increase in visitors requiring debt advice when comparing the two periods (an increase from 718 visitors in 2016/17 to 775 in 2017/18). It is important to highlight how some further issues saw larger proportional increases although volumes were low, for example there was an increase of 222.2% in the number of visitors residing in the JSNA area who were seeking help with immigration and asylum issues (from 9 in 2016/17 to 29 in 2017/18) and discrimination concerns saw a 100% increase (from 11 in 2016/17 to 22 in 2017/18). Concerns in relation to these issues may increase at times of heavy media coverage.

ECONOMY

The annual pay for full-time workers resident in Stratford-on-Avon District increased to £31,560 in 2017 from £29,968 in 2013³³. Unfortunately the 2017 figure is unavailable for men as the figure is statistically unreliable but the figure for female full-time workers is lower than the district figure at £26,891 (14.8% lower) and reduced from £29,056 in 2016. This difference may be contributing in part to the poverty and deprivation in some parts of the JSNA area.

Business Sectors: In 2016, the top four business sectors that employed residents in the Henley, Studley & Alcester JSNA area were health (19.2%, 3,365 people), manufacturing (10.6%, 1,855), accommodation and food services (9.7%, 1,700) and professional, scientific and technical (9.3%, 1,635³⁴). The proportion of people residing in the JSNA area that work in the health sector was larger than the proportion across Warwickshire as a whole (11.5%).

Unemployment and Benefits: There has been an increase in the claimant count over the past two years in the JSNA area. The figures at August 2018 report that 255 people were claiming benefits principally for the reason of being unemployed, which is an increase from 140 claimants at August 2017³⁵. Bidford East, Waterloo & Broom LSOA had the highest number of claimants (35) at August 2018 of all the LSOAs in the JSNA area.

Universal Credit is a payment to help with living costs (for those on a low income or out of work) and has replaced six other benefits. The new benefit has been slowly implemented across Warwickshire. There is little value to looking at trends as levels have been slowly increasing over the last three years as the benefit has been implemented at different times in different locations. At February 2016, 31 people in the JSNA area were claiming Universal Credit, which increased to 102 at February 2017 and 393 at February 2018³⁶. The number of households in the JSNA area claiming the benefit was 31 households at February 2016, 53 households at February 2017 and 304 at February 2018.

EDUCATION

Data from the Insight Service's Education & Early Help team (based on the residence of each pupil) provides an overall very positive picture for education across the JSNA area, however it does show some variations at LSOA level.

In 2017 in the JSNA area, 92.2% of all children (nursery to Y13) attend a 'good or outstanding' school³⁰. This is better than the Warwickshire average of 85.3%.



Early Years: In 2017, over two thirds (77.7%) of all children in Early Years education residing in the JSNA area achieved a 'Good Level of Development' compared to the Stratford-on-Avon District average of 76.3%³⁷. The JSNA area figure has improved since 2016 (from 74.2%). By comparison, in 2017, of those children eligible for a Free School Meal, 69.6% achieved a 'Good Level of Development', which can be compared to 78.3% of children who are classified as 'not eligible for a Free School Meal'. These figures are an improvement on 2016 figures and are higher than the Stratford-on-Avon District averages. Focusing down at LSOA level in 2017, Aston Cantlow LSOA has the lowest percentage of 'all children' achieving a Good Level of Development (50%) alongside Studley North LSOA (54%). This can be compared to two LSOAs where 100% of children residing there achieved a GLD - Abbey, Grammar & Kings Coughton LSOA and Wootton Wawen LSOA.

Key Stage 2: The percentage of children residing in the JSNA area achieving the Expected Standard in Reading, Writing & Maths in 2017 (57.2%) declined from 2016 (60.8%)³⁷. In 2017, within the JSNA area, the LSOAs where young people performed the worst were Henley East & Beaudesert (41%) and Bidford East, Waterloo & Broom (41%). By comparison, young people living in Studley East & Priory LSOA reported the best performance (71%). Performance improved for those children classed as 'disadvantaged', an increase to 41.4% in 2017 from 34.8% in 2016. For 'Non-disadvantaged' children performance worsened, from 67.6% in 2016 to 61.6% in 2017.

A comparison to the other Stratford-on-Avon District JSNA areas reveals that overall, pupils residing in the Henley, Studley & Alcester JSNA area are not performing as well at Key Stage 2 levels compared to pupils residing in other nearby JSNA areas (Figure 14).



Figure 14: Percentage of children achieving the Expected Standard in Reading, Writing & Maths 2017 (KS2)

Source: WCC Insight Service, Education & Early Help Team

Key Stage 4: In the JSNA area in 2017, the average grade that 'all children' achieved for the new Key Stage 4 measure - Attainment 8 - was 5.2 (over 5 is considered a strong pass grade)³⁷. This is the



same as the Stratford-on-Avon District average of 5.2. For 'disadvantaged' children this is 4.2, which is higher than the Stratford-on-Avon District average of 3.9.

Young people residing in the JSNA area perform better than the Warwickshire average for the Progress 8 measure. In the JSNA area the score was 0.24 in 2017 for 'all children' which reveals that pupils have made above average progress compared to pupils with a similar prior attainment nationally. This was better than the Warwickshire average of 0.04 and just slightly better than the Stratford-on-Avon District average of 0.23.

In 2017, in the JSNA area, 59.3% of 'all children' achieved the new Key Stage 4 measure: 9 to 5 (Strong Pass) in English & Maths which is above the county average of 47.2% and district average of 57.1%³⁷. However focusing down at LSOA level there is a large divide where only 18% of children residing in the Alcester North & Conway LSOA achieved the new Key Stage 4 measure compared to 92% of children residing in the Bidford West & Wixford LSOA.

School Absence: In the JSNA area, the area performed the same as the district average for the percentage of pupils missing 10% of school. In 2016/17 in the JSNA area, 8% of pupils missed 10% or more of school³⁷. This can be compared to 8.1% for Stratford-on-Avon District and a higher 9.2% for Warwickshire. However focusing down at LSOA level there is a large difference in absence figures with Aston Cantlow LSOA performing the worst with 17% of pupils missing more than 10% of school. This can be compared to just 3% of pupils in the Bidford South, Marlcliff & Barton LSOA.

Education, Health & Care Plan: In the JSNA area in 2017, 2.62% of primary and secondary school children (111 pupils) had an Education, Health and Care plan³⁷. This was lower than the county figure of 2.96%. Focusing at LSOA level, the highest proportion was seen in the Studley West & Common LSOA, where 6% (11) of pupils have an Education, Health and Care plan.

COMMUNITY SAFETY

ROAD TRAFFIC COLLISIONS

Data on road traffic collisions with injuries is held by the Traffic & Road Safety Team at Warwickshire County Council. Road traffic collisions have reduced in the JSNA area by 14.5% since 2016³⁸. In the Henley, Studley and Alcester JSNA area there were 94 road traffic collisions with injuries for the 12 month period 1st January to 31st December 2017 compared to 110 in the corresponding period of 2016. However, the JSNA area ranks 4th out of 22 JSNA areas (where 1st is worst) for the volume of road traffic collisions, where 113 was the highest volume recorded in an area for 2017. It is also important to look at rate per 1,000 population for road traffic collisions alongside volume. In the JSNA area the rate per 1,000 population in 2017 was 2.67, which ranks 7th out of 22 JSNA areas (the highest rate being 7.19 in the Coleshill & Arley JSNA area).

In the JSNA area, the highest volume of road traffic collisions over a three year period (1st April 2015 to 31st March 2018) occurred in the Sambourne LSOA (47 accidents). This can be compared to the LSOA which reported the lowest level of accidents - with just one accident reported in the Alcester



North & Conway LSOA. Sambourne LSOA also reports the highest rate per 1,000 population in the JSNA area (25.85).

JSNA Area	2016 No.of Fatal RTCs	2016 No.of Serious RTCs	2016 No.of Slight RTCs	Total for 2016	2016 No.of Fatal RTCs	2017 No.of Serious RTCs	2017 No.of Slight RTCs	Total for 2017
Henley, Studley & Alcester	1	25	84	110	1	17	76	94
Stratford-on-Avon	1	27	69	97	2	15	63	80
Southam	3	12	43	58	5	14	35	54
Wellesbourne, Kineton & Shipston	2	19	38	59	4	8	30	42

Figure 15: Road Traffic Collision for Stratford-on-Avon District JSNA Areas, 2016 vs 2017
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Source: Traffic & Road Safety Team, WCC

RECORDED CRIME

Overall, crime in the Henley, Studley and Alcester JSNA area remains low and in 2017, the JSNA area ranked 16th out of 22 JSNA areas for recorded crime (where 1st has the highest crime rate) ³⁹. For the period 1st January to 31st December 2017, Warwickshire Police data from the Crime Recording System reveals that the recorded crime rate for the JSNA area (a rate per 1,000 population) is lower than the Warwickshire average, 55.13 compared to 74.99 in Warwickshire. Focusing down at an LSOA level, in 2017, the area of Studley East & Priory has the highest crime rate in the JSNA area of 98.14 per 1,000 population (153 crimes). This is followed by the second highest area, Earlswood LSOA with a rate of 78.72 per 1,000 (152 crimes). This can be compared to the area with the lowest crime rate, Bidford West & Wixford LSOA (21.50 per 1,000 population).

For the period Oct 17-Sept 18, when offences at the M40 services were removed to giver a truer representation of crime in rural areas, Studley with Mappleborough Green Ward had the highest crime rate (63.59 per 1,000 population), of which 11% 'other theft' offences were recorded. Alcester Town Ward had the second highest rate (62.89 per 1000 population) for all crime in rural areas, of which 'assault without injury' offences accounted for 16%.

Henley-in-Arden has seen the second highest rate (8.07 per 1,000 population) for residential burglary, and this area has easy access from Tanworth-in-Arden ward via Danzey Green Lane and Forde Hall Lane. This may suggest that cross border activity is occurring in both wards, with possible offenders from the West Midlands.

ANTI-SOCIAL BEHAVIOUR

Warwickshire Police record the number of anti-social behaviour incidents reported by Warwickshire residents and data is split into three categories, Environmental, Nuisance and Personal. The level of anti-social behaviour being reported to Police in the Henley, Studley and Alcester JSNA area remains low. For the period 1st January to 31st December 2017, the anti-social behaviour rate per 1,000 population in the JSNA area was lower than the Warwickshire average, 18.66 per 1,000 for the JSNA area compared to 30.25 in Warwickshire⁴⁰. In particular the level of 'nuisance' incidents reported to Police was lower than the Warwickshire average at 13.43 per 1,000 population for the JSNA area compared to 21.97 per 1,000 population for Warwickshire. Overall there has been an 8.4% reduction



in the level of reported anti-social behaviour in the JSNA area, from 717 incidents in 2016 to 657 in 2017.

ENVIRONMENT

Consultation with stakeholders has raised air quality as an issue within the JSNA area but evidence to support the issue is limited. The following sections analyse the available data.

NITROGEN OXIDE NO2

Stratford-on-Avon District Council's 'LAQM Annual Status Report 2017' stated that "long term monitoring data shows that there has been a notable improvement in air quality across the district since 2011". The report advises that, even with considerable new developments planned in the core strategy, key pollutants are projected to remain below national air quality objectives up to 2028. There is, however, one location in Studley (Studley 4) that exceeds the target which has been associated with traffic emissions. There is also a concern that the growth of nearby Redditch town will have the potential to impact on Studley's air quality. In particular, the proposal for the development of land for employment use at the Redditch Eastern Gateway. The Equality Impact Assessment Scoping exercise has identified potential air quality impacts at an early stage. The report highlights Studley as the area of concern within the JSNA area.

Focusing on the available Studley data for the past five years (2012 - 2016), data on Nitrogen Dioxide (specifically the annual mean concentration of NO₂) has been collected across a number of sites⁴¹. The European Commission air quality standard objective is 40 µg/m3 and any site exceeding this is classified as red.

There was one area in Studley – Studley 4 – (and the wider JSNA area) that was classified as red as it exceeded the air quality standard objective for NO₂ of 40 μ g/m3. All of the Studley sites are located on the main Alcester Road running through Studley. Four of the other Studley areas were classified as amber as they have readings between 30 – 40 μ g/m3. The levels have been increasing over the past five years (Figure 16) and may be considered likely to increase in future years, particularly with the planned development work locally.





Figure 16: Studley Sites - NO₂ Annual Mean Concentration (µg/m3) – 5 Year Trend

An area raised in consultation was a concern for air quality is Henley-in-Arden. There are two monitoring sites at Henley-in-Arden, where one site on the High Street currently measures green for the annual mean concentration of NO_2 but the other site (High Street 2) measures amber. The amber site has seen levels increase over the past five years, from 28.5 µg/m3 in 2012 to 34.2 µg/m3 in 2016 and is an area to maintain a focus on in coming years as an increase will likely contribute to the health of local residents.

RURAL AND SOCIAL ISOLATION

Loneliness and social isolation is now more recognised as being a public health issue. It is associated with harm to mental and physical health, as well as having broader social, financial and community implications.

Through consultation with stakeholders it has emerged that social and rural isolation is an issue for some residents of the JSNA area, particularly the elderly and those with medical conditions. There are concerns over elderly people not having access to reliable, cost effective and suitable (assisted) public and community transport to access local health and community wellbeing services. There are also access issues with broadband connectivity which can isolate those from accessing services online.

The Census 2011 data revealed that 11.9% of households (1,800) in the JSNA area do not have access to a car or van⁴². In particular the two LSOAs of Alcester East & Island (24.1%) and Alcester North & Conway (23.4%) had the highest proportion of households that do not have access to a car



Source: Stratford-on-Avon District Council - LAQM Annual Status Report 2017

or van which will significantly limit the ability of residents to access services outside of the Alcester town.

Previous research detailed in the WCC Public Health Report Loneliness and Social Isolation in Warwickshire Needs Assessment noted that risk of loneliness and social isolation is mainly centred around larger towns with small areas of high risk in the towns of Stratford, Alcester, Studley and Henley-in-Arden where 1-18% of households are at risk⁴³. The Stratford-on-Avon District Social Inclusion Partnership is conducting work around the issue and have proposed their Social Inclusion Statement priorities for 2018 through to 2023, with a focus on community resilience and emerging communities.

COMMUNITY ASSETS

It is difficult to keep an up-to-date list of local community assets (here defined as community groups and activities), particularly when many projects are short-term, can be limited to funding and times or location of events can change. However, over the summer period, research and information gathering was undertaken in order to identify current community assets within the JSNA area.

Community assets have been grouped into 10 broad themes. An individual community asset can appear across multiple themes (for example, a dementia café would feature in Older People, Advice & Support, Health & Wellbeing, and Community Cafes and Foods). From the information gathered so far (at a snapshot in time), the JSNA areas' community assets are listed in Figure 17 and are presented in a suite of ten maps in Appendix A. Descriptions of the community asset categories can be found in the glossary document.

Theme	Alcester (Arrow Weethley Civil Parish and Alcester Civil Parish	Henley-in- Arden (Henley-in- Arden Civil Parish)	Studley (Studley Civil Parish)	Bidford (Bidford Civil Parish)	Other (Tanworth- in-Arden Civil Parish and all other Civil Parish)
1. Children & Families	2	0	0	1	0
2. Young People	2	0	0	0	0
3. Older People	13	0	0	1	0
4. Community Venues & Meeting Points	13	0	1	1	0
5. Community Organisations & Social Groups	28	0	1	2	0

Figure 17: Count of community assets by theme in the JSNA area, Snapshot at October 2018



6. Leisure & Recreational Activities	27	0	0	0	0
7. Advice & Support	11	0	1	0	0
8. Community Cafes & Foods	5	0	0	0	0
9. Health & Wellbeing	20	1	1	1	1
10. Education & Learning	1	0	0	0	0

At October 2018, the theme with the largest number of community assets was 'community organisations and social groups', which includes community and resident action groups. The theme with the fewest community assets was 'education and learning', only one asset was recorded, which includes schools, colleges, universities, community based learning and training/work experience.

Geographically, the majority of the community assets are located in the main settlements, in particular Alcester, and very little is based out in the rural areas. The JSNA area is very large and there is a clear gap in provision to the north of the area (north of Alcester) but more generally outside of the Alcester area.

CONSULTATION

The following section summarises data and information from local knowledge and resources to highlight the health and wellbeing needs of people living in the Henley, Studley & Alcester JSNA area. In order to reflect local needs, this report incorporates the views of local communities, gathered through engagement with stakeholders and local residents and through surveys.

STAKEHOLDER EVENT - 14TH SEPTEMBER 2018

A stakeholder engagement event to understand the health and wellbeing needs of people living in the Henley, Studley & Alcester JSNA area, took place at Alcester Town Hall on 14th September 2018. The event included a presentation of the initial analysis and group sessions to discuss the data presented. In addition, drop-in sessions were also held. Residents were asked to indicate what supports positive health and well-being during different stages of the lifecourse (a full set of notes from the stakeholder event and drop-in session is presented in Appendix B). The main themes highlighted were:

Demographics	Agreement that the area has a generally older population and this is only going to get older which will present a range of challenges.
	Part of the JSNA includes the 'Golden Triangle' area of housing where prices are notoriously high.



Lloalth.	Control in a prime provident insure in the area. This acculation if the second
Health: Mental Health	Social isolation is an important issue in the area. This could be linked to the mental health rates as social isolation is a significant risk factor for poor mental health.
	Poor mental health is likely to be under-reported, particularly among older people and the figures will only show those with identified mental health problems.
	Poor mental health is often linked to ill-health, housing and debts.
	There are two grammar schools in the area which are likely to contribute to the high educational outcomes. However, high aspirations and pressure to meet targets and get good grades may contribute to the higher rates of mental health problems and self- harm (particularly among young/teenage girls). Stakeholders also expressed concerns regarding eating disorders and substance misuse among young people.
Health:	Stakeholders felt that the high levels of heart conditions could be
Heart Conditions	reduced through improving access to physical activities locally, currently GPs are only able to refer patients to the local gym, offering alternative activities may help to get more people active.
	There are 5 defibrillators within the town of Bidford and these have been used on multiple occasions and have saved lives. Stakeholders thought more defibrillators could usefully be deployed in the JSNA area.
Health:	There has been a significant rise in the number of people needing
Cancer	transport to hospital in order to attend appointments (including cancer treatments), in part due to the cost of public transport.
	Stakeholders recognised that higher rates of cancer are likely to be seen in an older population.
	Whilst waiting times need improving, stakeholder considered referral rates to be much better than 10 years ago and GPs are better at spotting the early signs of disease.
Poverty	Stakeholders recognised poverty as being polarised in the area – with affluent groups who eat out and do online shopping at more expensive supermarkets contrasted with families on benefits who need food banks. There are also food banks in Alcester and Evesham but it is thought that people often do not use their nearest/local food bank as they do not want to be seen by people they know.
Social Care	Concerns were expressed over barriers for older people accessing care, including pride preventing help-seeking, cost and long forms to complete. There is a need for the process to be simpler and easier.
	There are particular pockets of the JSNA area where more people are receiving home care.
	Stakeholders considered support for young people who are caring for adults to be a local priority.



Air Quality	Studley is a town where people live but the majority travel to another town or city to work. Most of the towns/villages are inhabited by commuters which adds to cars on the roads. The main road in Studley sees heavy trucks going to Redditch every day and is always congested. Stakeholders also expressed concern over air quality in Henley and Bidford, the latter related to people driving through Bidford in order to avoid congestion through Stratford.
Transport	Lack of public transport outside of towns and villages.
Young People	Some stakeholders considered youth provision to be lacking locally. Where there is provision of youth and community based activities stakeholders thought leadership, coordination and marketing needs developing.

JSNA SURVEYS

This section presents the findings of a Joint Strategic Needs Assessment survey administered to professionals (those working in the JSNA area) and residents (those living in the JSNA area). The findings presented below are based on responses to the surveys up to 20/09/18 (a full set of notes is presented in Appendix C).

Professionals: As of 20/09/18 there were 11 responses to the survey for professionals that work across the Stratford-on-Avon District; five of which were from individuals who work in the Henley, Studley and Alcester JSNA area. Although responses are low there are some key themes emerging in the JSNA area. Two key areas that respondents reported need improving among all age groups were 'healthy lifestyles' (for example, eat healthily, be active, stop smoking) and 'mental health and wellbeing'.

An additional priority for improvement was 'community activities and opportunities to develop social networks', in particular for older people and children. 'Housing and accommodation' were selected as key issues for working age and older people.

Professionals were also asked about potential barriers to improving health and wellbeing for people living in the JSNA area. The most commonly identified barrier was poor public transport links, mainly due to the rural nature of the area. A lack of community venues, a lack of funding and a lack of knowledge about improving health and wellbeing were also selected as local issues.

Residents: As of 20/09/18 there were 46 responses to the consultation survey by local residents living in the JSNA area. Whilst this cannot be considered a representative sample, responses provide useful indicators of the views of residents and support priorities identified in previous sections (such as a need for more opportunities for physical activity which can contribute to improved circulatory health). Residents were asked to select (from a list) which issues they felt are priority areas for health and wellbeing in the local area. 'Promoting mental health and wellbeing' was selected by 76% of all respondents living in the JSNA area closely followed by 'access to health services' which was selected by 65% of respondents.



	Number of respondents who selected this as a priority	Percentage of respondents who selected this as a priority
Promoting mental health and wellbeing	35	76%
Access to health services	30	65%
Opportunities for physical activity	28	61%
Support for those with long-term health conditions	27	59%
Parks and green spaces	25	54%
Support for carers	22	48%
Access to transport	22	48%
Community activities & opportunities to develop social networks	20	43%
Reducing substance misuse (alcohol, drugs)	17	37%
Availability of health foods	14	30%
Housing / accommodation	14	30%
Cost of living	11	24%
Access to other local services	8	17%
Employment and skills development	7	15%

Figure 18: Priority areas selected by residents for health and wellbeing in the local area

Specific issues that were raised include:

- GP appointments being very difficult to book at larger surgeries in the area. A request that GP appointments should be bookable within a few days, not weeks.
- Having a vibrant voluntary sector which is addressing issues of social isolation and loneliness but that relies upon a small group of active (elderly) volunteers.
- The lack of suitable local transport and the cost of these services.
- Access to mental health services for young people (particularly for those in crisis).

These findings are also supported by Figure 19 which highlights the top three things in the local area which support positive health and wellbeing that are valued most by local residents. 'Green space/outdoor activity' was ranked in the top three most often, and was ranked as a top priority by almost two thirds (63%) of all residents, closely followed by 'access to local community groups and activities' with 61% of respondents putting this among their top three issues.





Figure 19: Top 3 things in the local area which support positive health and wellbeing that are valued by residents

When asked for three things that could be better in the local area to improve health and wellbeing, a range of answers were provided by residents. Many respondents were keen to have safe walking and cycle routes and better access to transport:

"A proper cycle route alongside the river Avon - Direction Stratford & Evesham, which will encourage people to ride to work/school, ease congestion. Will also bring people to the area which will drive local business".

"Need better cycle paths especially on school routes".

"Improved access to public transport at an affordable cost".

"Improve road infrastructure to reduce queuing and hence pollution".

Another common theme was highlighted around education on healthy eating, fitness and access to affordable healthy food and fitness resources:

"Education in healthy eating/cooking for the young".

"Education on health fitness and well being through the local schools, tackle obesity and education as it iss not just about grades".

"Improved exercise options at local gym accessible to elderly to include swimming facilities".

"More connected green spaces in Studley to encourage jogging and exercise and cycling. We have green spaces that could be linked together to form an accessible network".



Residents of the JSNA area were also asked what local activities or events they would like to see in the local area. There were lots of responses here and some of them are included as themes below.

More local shops; a market supported by local businesses; free exercise classes; more sporting events; a public swimming pool; more social inclusion; the creation of local carer support groups; more clubs created e.g. wildlife, gardening; more community activities for men; better internet connection.



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