

PLACE BASED NEEDS ASSESSMENT

NUNEATON CENTRAL

Warwickshire Joint Strategic Needs Assessment

March 2019



REPORT DETAILS

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KEY MESSAGES

Demographics

- The population of Nuneaton Central is younger than the Warwickshire population with particularly higher proportions of 0-9 year olds and 20-39 year olds.
- In 2011, in Nuneaton Central more of the population were born in the Middle East and Asia, classed themselves as Asian/Asian British and followed the Muslim religion compared to the populations of Warwickshire and England.
- In 2011, in Nuneaton Central there were more one person households with fewer people owning their own homes and more people renting than in the populations of Warwickshire and England.
- In 2017, house prices were lower in Nuneaton Central than in Warwickshire.
- The Mosaic profile for the area indicates that the population in Nuneaton Central are more likely to have a low/modest income and live in low cost affordable housing than the population in Warwickshire.

Health

- In Nuneaton Central in recent years (2013-2016) there were a higher rate of births to females aged 15-44 than in the Warwickshire population.
- In 2014-16, life expectancy at birth was lower for residents living in Nuneaton Central for both males (75.9yrs) and females (80.9yrs) compared to individuals residing in N&B Borough, Warwickshire and England.
- Healthy life expectancy in MSOAs in Nuneaton Central is lower than in all but one other JSNA geography (Nuneaton Common & West).
- In 2017/18, for the six general practitioner practices where residents in Nuneaton Central make up a high proportion of the practice register: five of the practices were significantly worse than England for prevalence of diabetes, four of the practices were significantly worse for prevalence of hypertension, obesity and chronic kidney disease (CKD) and three of the practices were significantly worse for estimated smoking prevalence and percentage of persons aged 60-74, screened for bowel cancer in last 30 months (2.5 year coverage)..
- Between 2014/15 and 2016/17 residents living in Nuneaton Central compared to all 22 JSNA geographies had :
 - The highest directly standardised rate (DSR) of emergency admissions for all ages (10,586.2 per 100,000 population)
 - The highest DSR of emergency admissions for coronary heart disease (4,863.6 per 100,000 population)
 - The highest DSR of emergency admissions for COPD (1,230.9 per 100,000 population 35+)
 - The highest DSR of emergency admissions for stroke (1,070 per 100,000 population)
 - The 2nd highest crude rate of emergency admissions for injury in 15-24 year olds (162 per 10,000 population)
 - The 4th highest DSR of emergency admissions for Myocardial Infarction (heart attack) (147.0 per 100,000)
 - The 4th highest DSR of emergency admissions for diabetes (275.5 per 100,000)
 - The 5th highest DSR of emergency admissions for hip fracture (131.9 per 100,000 population aged 65+)
- In the 5 years, 2013-2017, Nuneaton Central was significantly worse than the Warwickshire rate for deaths from all causes, all ages; all causes, under 75; circulatory disease, all ages;

circulatory disease, under 75; coronary heart disease (CHD), all ages; CHD, under 75; respiratory, all ages.

- Between 2014-16, 8.9% of live births to mothers in Nuneaton Central were classed as low birth weight; the highest proportion of all JSNA geographies in Warwickshire.
- Between 2014-16, 0.7% of births were to mothers under 18 (Warwickshire 0.8%) and 5.4% were to mothers under 20 years of age (Warwickshire 3.4%).
- A&E attendance is higher in 0-4 year olds in Nuneaton Central than in Warwickshire and in all but one of the other JSNA geographies.
- Between 2013/14 and 2016/17, 9.0% of 4-5 year olds were classed as obese the 9th highest of the 22 JSNA geographies, and 19.3% of 10-11 year olds the 5th highest of the JSNA geographies.
- In April 2018, 167 young carers were known to be living in the Nuneaton Central area. Within Nuneaton Central they were more likely to live in Middlemarch & Swimming Pool (17), Wem Brook East (16), Abbey North (16), Abbey West (15), Hilltop (13) and Attleborough Central (13).
- In 2017/18 the prevalence of patients diagnosed severe mental illness and depression was significantly higher than the prevalence in England in patients registered at Chaucer Surgery.
- In Nuneaton Central, between 2014/15 and 2017/18, the crude emergency admission rate for self-harm was 5.5 per 1,000 10-24 year olds. This was the fourth highest of the 22 JSNA areas.
- In November 2018, the percentage of patients aged 65 and over with a recorded dementia diagnosis was higher than the average for Warwickshire North CCG and England at Chaucer Surgery, Queens Road Surgery and Riversley Surgery.

Deprivation

- The Index of Multiple Deprivation 2015 puts three LSOAs in Nuneaton Central in the most deprived 10% in the Country – Abbey Town Centre, Middlemarch & Swimming Pool and Hilltop.
- A number of LSOAs were also in the most deprived 10% in the crime decile: Abbey Priory, Attleborough North West, Bar Pool East & Greenmoor and Abbey West.
- Abbey Priory was also in the most deprived decile for Living Environment and Income Deprivation amongst Older People.
- In 2014, in Warwickshire, 14% of children under 16 were living in low income families and in N&B Borough 20.4%. In the Nuneaton Central area there eight LSOAs where the proportion was higher than the N&B Borough average – Hilltop (44.1%) , Middlemarch & Swimming Pool (41.3%), Abbey North (35.2%), Wem Brook East (28.2%), Attleborough Central (28.2%), Attleborough North West (25.8%),Riversley (21.8%), and Attleborough North East (20.6%).
- In 2015, in Warwickshire 12.2% of households were fuel poor and in Nuneaton Central 13.8% with, 12 of the 18 LSOAs in Nuneaton Central having greater than the Warwickshire proportion in fuel poverty. The most fuel deprived areas were Abbey Priory, Attleborough North East and Abbey North.
- In 2011, households in Nuneaton Central were less likely to own a car than households in other JSNA areas.
- There are two food banks located in the Nuneaton Central area. In 2017/18, the four Nuneaton Foodbanks distributed more tonnes of food and fed more adults and children than in 2016/17. The main reasons for use of foodbanks was low income and benefit delays.
- Between April 2016 to March 2018, there was an increase in people living in Nuneaton Central contacting Citizen's Advice. The main reasons for making contact were benefits and tax credits and debt.

Economy

- Benefit claimants (principally for the reason of being unemployed) from the Nuneaton Central area make up over 10% of claimants in Warwickshire; 11.5% in February 2018 a reduction.
- Areas in Nuneaton Central where numbers of claimants are higher are Abbey Town Centre, Abbey North and Riversley.
- The sector employing the most people in Nuneaton Central in 2016 was the health sector (27.7%) followed by the retail sector (13.6%).

Education and Employment

- In 2017, 4-5 year olds living in Nuneaton Central were less likely to achieve a good level of development than those living in Warwickshire. However, those eligible for a free school meal were more likely to achieve a GLD and the percentages achieving a GLD have improved since 2016.
- In 2017, 10-11 year olds in Nuneaton central were less likely to achieve the expected standard in reading, writing and maths than those living in Warwickshire. However, those eligible for a free school meal were more likely to achieve the expected standard and the percentages achieving this have improved since 2016.
- In 2017, the proportion of 15-16 year olds achieving a strong pass in English and Maths was lower in Nuneaton Central than for Warwickshire. Those eligible for FSM did better in Nuneaton Central than in Warwickshire.
- In the 2016/17 academic year, there were a higher proportion of children registered for free school meals in Nuneaton Central than in N&B Borough and in Warwickshire.
- A smaller proportion (68%) of children living in the Nuneaton Central area than Warwickshire (85%) attended a school that was judged as good or outstanding by Ofsted.
- In 2011, a higher proportion of the adult population, almost 30%, had no academic or professional qualifications compared to the N&B Borough and Warwickshire adult populations (28% and 21.6%).

Social Care

- In 2017, 3.5% of the adult population in Nuneaton Central were active users of social care, higher than in N&B Borough and Warwickshire. The highest number of new assessments was also completed in the Nuneaton Central area in 2017 compared to other JSNA areas.
- In 2017, in the Nuneaton Central area, the majority of adult social care packages were for older people (40%). The area had a slightly higher proportion of residents with an active package for learning disability than the Warwickshire average (14%vs 12%) but the area with the biggest difference was reablement with 7% of packages for this in Nuneaton Central compared to 11% in Warwickshire.
- In both 2016/2017 and 2017/8 there was a higher rate of CLA than in N&B Borough and Warwickshire, with the rate increasing between the two years from 103.52 per 10,000 children in 2016/17 to 117.91 in 2017/18.
- In 2016/17 the rate of children subject to a child protection plan was higher in Nuneaton Central than in N&B Borough and Warwickshire. However, in 2017/18 this rate was less than in both in N&B Borough and Warwickshire at 42.3 per 10,000 children.
- In 2016/17 and 2017/18, a higher percentage of 18-21 years old in Nuneaton Central were receiving a service after leaving care, 2.82% and 2.32% respectively.

Community Safety

- In the two years, 2016-2017, there were 20 accidental dwelling fire incidents in the Nuneaton Central area, a rate of 1.6 per 1,000 households, higher than the Warwickshire average and the sixth highest of the 22 JSNA areas.
- During 2017, across Nuneaton Central there were a total of 4,270 crimes, a rate of 141.5 crimes per 1,000 population, higher than both the borough and county crime rates and the highest rate of the 22 JSNA areas
- During 2017, Nuneaton Central had a higher rate of total ASB incidents compared to the borough and county figures and the highest rate of the 22 JSNA areas. Rates across Nuneaton Central, the borough and county decreased slightly compared to rates in 2016 with the majority of ASB incidents being categorised as nuisance.
- In 2016/17 and 2017/18, in Nuneaton Central the rate of incidents reported to the police with a domestic marker was higher than any of the other JSNA areas and both the N&B Borough and county rates.

Environment

- One of the air quality objectives in England is for the annual mean NO₂ concentration to be less than 40 µg/m³. In 2017, this was exceeded at two of the sites within Nuneaton Central and the Midlands Road/Corporation Street AQMA - 90 Corporation Street (NB27) and 16 Midland Road (NB29).

RECOMMENDATIONS

GENERAL

- Expand use of customer referral forms to support signposting and raising awareness of a range of services locally.
- Develop a single point of access to share information on services for older people using a range of formats e.g. digital, care navigators, leaflets/displays/posters, and word of mouth.
- Increase support for all carers, including older carers.
- Review the social prescribing offer, including services that support mental wellbeing, and look to expand the offer to reflect local needs.
- Consider the establishment of local worker forums to share good practice, raise awareness of issues and provide networking, e.g. local services, volunteering opportunities etc.
- Continue to monitor air quality in the area and review measures to reduce emissions from road traffic.
- Share information from the JSNA widely with partners for planning and actions.
- Seek additional information to provide evidence on concerns raised on:
 - Best start, including pregnancy loss, pre-birth education and mental health impact
 - Substance misuse
 - Prescribing (antidepressants and methadone use)
 - Employment/unemployment
 - Carers, especially those not registered or recognised
 - Suicides - linking to age, gender, aspirations
 - Hard to reach groups with multiple and complex needs, homeless, gypsy and traveller communities/transient residents, minority groups
 - 999 call out data - for correlation between hospital admissions and obesity

DEPRIVATION

- Develop strategies to address long standing deprivation, including increasing access to employment opportunities (other than jobs that are 'low-skilled').
- Address the gap in IT skills locally and offer employability skills opportunities to bridge skill gaps e.g. learning how to code.
- Map current assets/ best practice of organisations working with young people and schools in the area.
- Review type and amount of social housing in the area to be shared with stakeholders
- Review property standards/warmth and SAP (Standard Assessment Procedure for the energy rating of dwellings) ratings for households in the area and develop a plan to improve these aspects
- Target resources to engage with hard to reach groups to understand their challenges/needs in more detail with a view to co-designing services and implementing partnership initiatives to address issues

- Adopt a more targeted support approach for vulnerable communities reflecting need identified from the engagement work, mapping initiatives and services over the last 10 years e.g. Passport to Health, #onething, Big Local and any evaluation associated with the projects.
- Promote use of green spaces, including parks, canals and outdoor groups.
- Review community safety in parks and take appropriate action to reduce crime.

MENTAL HEALTH

- Support partners to ensure community assets and services are mapped and shared, with a mechanism to keep this information up to date. Include support/services available for young people and transition services.
- Ensure patients get the right level of support at the right time.
- Increase training and raise awareness of all mental health services, especially third sector, including *Mental Health First Aid* training for front line staff.
- Ensure mental health organisations are easy to access for all.
- Gather further local intelligence to find out the root causes of depression and anxiety (the data and local insight suggest that depression rates are underestimated).
- Improve the design of services to address complex needs e.g. alcohol services and mental health services supporting patients with both needs.
- Improve access to crisis support, weekend provision and review thresholds.
- Implement strategies to reduce stigma attached to mental health.
- Raise awareness around the importance of access to support to prevent crisis.
- Develop skills of social workers to meet severe needs to avoid hospital admissions.
- Address the gap between first and second tier mental health services.
- Reduce the delay between referral and treatment and promote services that can help people waiting for an appointment e.g. MIND
- Provide more support for young people around transition between schools and transition between children and adult services.
- Services for frequent attenders and vulnerable people (right support, right time).
- Utilise and build on Coventry & Warwickshire Year of Wellbeing to promote local mental health services and raise awareness of the issues around mental health.
- Improve perinatal and postnatal mental health.

CHILDREN AND YOUNG PEOPLE

- Gather further information on the emerging mental health concerns for children and young people.
- Address gaps left by de-commissioned services e.g. Sure Start where removal of the service had an effect on community sense of belonging.
- Review and look at strategies to address the lack of affordable childcare in the area.
- Local governments to build stronger relationships and engagement with schools.
- Review transport options for parents who are required to travel to University Hospital Coventry & Warwickshire.
- Improve signposting and information to services for young people.

- Improve communication with young people e.g. through use of social media e.g. “Chat health” to reach more young people.
- Ensure young people have access to support to ensure smooth school transition.
- Support the libraries working with families to help children prepare for school.
- Extend ‘Preparing for Life Skills’ for looked after children.
- Promote parenting programmes and consider including young people.
- Take forward learnings from promotion of ‘Tour of Britain’.
- Promote the ‘Daily Mile’ initiative in schools.
- Undertake work to promote the benefits of volunteering for young people and source suitable opportunities for young people.
- Support and increase the number of young people who have higher aspirations.
- Improve access to psychological support e.g. waiting times, accessibility and data referrals.

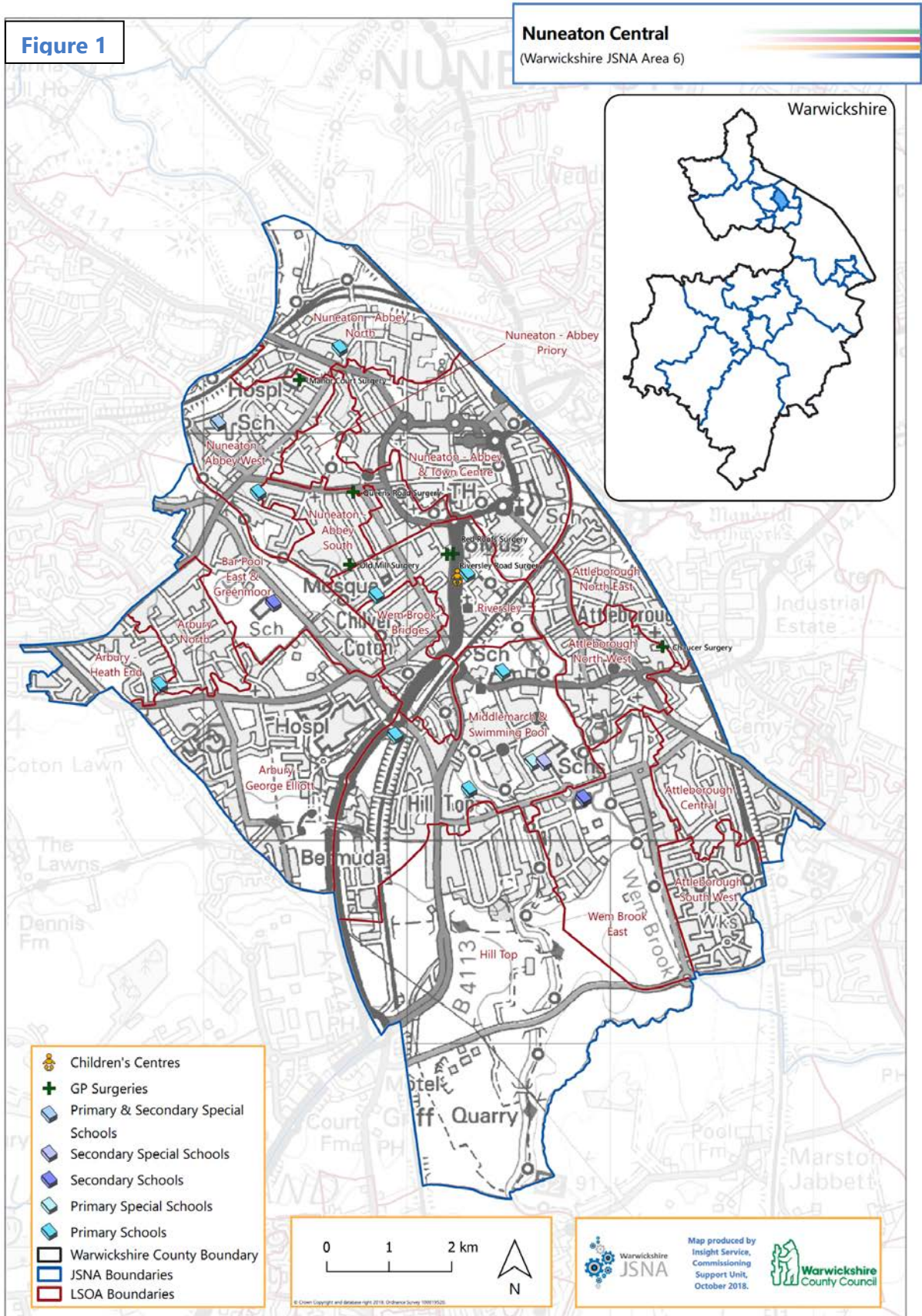
LONG TERM CONDITIONS AND HEALTH

- Review and develop clearer strategies to reduce emergency admissions, keep people out of hospital, independent and at home with quality support, including hospital discharge support.
- Review support and education offer for carers and raise awareness of the offer.
- Different models of care for the elderly need to be looked at - more innovative, cohesive, engaged.
- Review ways to promote screening programmes, including settings and ensuring information is culturally sensitive and from trusted sources.
- Increase understanding around diagnosis and the management of conditions, especially for black, Asian and minority ethnic communities, including travellers.
- Extend the use of social prescribing including buddies and navigators across a range of settings.
- Provide information in a range of settings about community based (VCS) services.
- Ensure services for younger people with long term conditions are appropriate.
- Take action to ensure information is ‘accessible’ for all, including ensuring health information is presented in a non-clinical way.
- Access to physiotherapy/appropriate exercise made easier and more sustained.
- Increase signposting to ‘Fitter Futures’ and widening of referral pathway.
- Address the lack of/ limited bus services - even for those living in central Nuneaton.
- More information on low cost healthy food options, including myth busting around fresh/frozen foods and costs.
- Link to locally accessible food outlets with healthy alternatives for fast-food.
- Health education needs to be tailored to local communities, out of hospitals/medical settings to be more relevant to local people.
- Ensure more is done to sustain community based providers.
- Increase information available in pharmacies, surgeries and community centres to ensure early support can be accessed for all medical conditions.
- Culturally sensitive and accurate information to be produced from trusted sources.
- Develop a central Directory of Services.
- Increase publication of Dementia Action Alliance/Dementia Friendly Communities.

- Develop a fully integrated frailty service for the North of Warwickshire. This would include arrangements to case find frail elderly patients and support the management of long term or frailty related conditions, prevent A&E attendance and admission through step up services when urgent care issues arise, establish a front door frailty service at A&E to return people home when people require emergency care at the hospital, strengthen in-hospital frailty services to reduce length of stay when frail patients require a short hospital stay and develop a true, non-hospital based 'Discharge to Assess' service for the population in North Warwickshire.
- Seek to improve same day emergency care access in the community and at the hospital, aiming to deal with a defined percentage of patients requiring urgent and emergency care without recourse to hospital admission.
- Identify three out-patient pathways which could be delivered away from the acute hospital environment and work with Primary and Community Care colleagues to move a proportion of these patients through newly designed pathways within the next two years.

INTRODUCTION

Figure 1



LOCAL CONTEXT

JSNA GEOGRAPHICAL AREA

The Nuneaton Central JSNA area lies in the borough of Nuneaton and Bedworth in Warwickshire. Within the geography are 18 lower super output areas (Figure 1). The area incorporates the town centre of Nuneaton and the suburbs and villages of Attleborough, Bermuda, Chilvers Coton and Hilltop. The town centre lies 3 miles from the Leicestershire border, 8 miles from Staffordshire and 12 miles from Derbyshire. The A444 primary road which runs between Coventry and Burton upon Trent goes through the area as do three railway lines; the Trent Valley section of the West Coast Main Line (WCML) with trains to London Euston, Crewe, Liverpool and Manchester; the Birmingham-Leicester-Peterborough Line with trains to Birmingham, Leicester, Peterborough and Cambridge and the Nuneaton to Coventry branch line. The River Anker and Wem Brook also run through the area.

Within the Nuneaton Central area there is one of the three main hospitals in Warwickshire, the George Eliot Hospital managed by the George Eliot Hospital NHS Trust. The hospital is a 352-bed district general hospital that provides a range of elective, non-elective, surgical, medical, women's, children's, diagnostic and therapeutic services; the hospital has an accident and emergency department. There are also six general practices in the area.

There are a number of recreational facilities, leisure centres and open spaces in Nuneaton Central including Pingles Leisure Centre, Pingles Stadium, Jubilee Sports Centre, Nuneaton Recreational Ground, Riversley Park and Lingmoor Park. There is a museum and art gallery within the grounds of Riversley Park.

Within the Nuneaton Central JSNA area there are three secondary schools, one of which is a special school; nine primary schools, one of which is a special school; and an all through special school (Figure 1 & 2). Also within the area is one of the 14 Children and Family Centre's in Warwickshire (the Riversley Park Children and Family Centre) (Figure 1).

Figure 2 – Schools situated in the Nuneaton Central JSNA Area

School name	Type	Phase
Abbey C.Of E. Infant School	Infant	Primary
Queens CofE Academy	Junior	Primary
Glendale Infant School	Infant	Primary
All Saints C.Of E. Primary School, Nuneaton	Primary	Primary
Middlemarch School	Junior	Primary
Wembrook Primary School	Primary	Primary
Chilvers Coton Community Infant School	Infant	Primary
Our Lady and St Joseph Catholic Academy	Primary	Primary
St. Thomas More Catholic School and Sixth Form College	Secondary	Secondary
The George Eliot School	Secondary	Secondary
Discovery Academy	Special	All Through
Oak Wood Primary School	Special	Primary
Oak Wood Secondary School	Special	Secondary

There are a number of buildings of worship in Nuneaton Central including the Church of England churches - St Nicholas Parish Church, All Saint's Church, Holy Trinity and St Marys Abbey, and the Roman Catholic Our Lady of the Angels. There is a mosque in Chilvers Coton and two gurdwaras: the Nuneaton Guru Nanak Gurdwara in Park Avenue, Attleborough, and the Shri Guru Tegh Bahadur Gurdwara in Marlborough Road, Chilvers Coton.

Where available, data is presented throughout this document for the JSNA, or at LSOA level. Not all data is available at all geographies, but is presented at as low a level as possible. It must also be noted that time periods vary as the data has been collated from a wide range of sources.

There is a [glossary document](#) to support this report. This contains definitions of potentially unfamiliar terms.

DEMOGRAPHICS

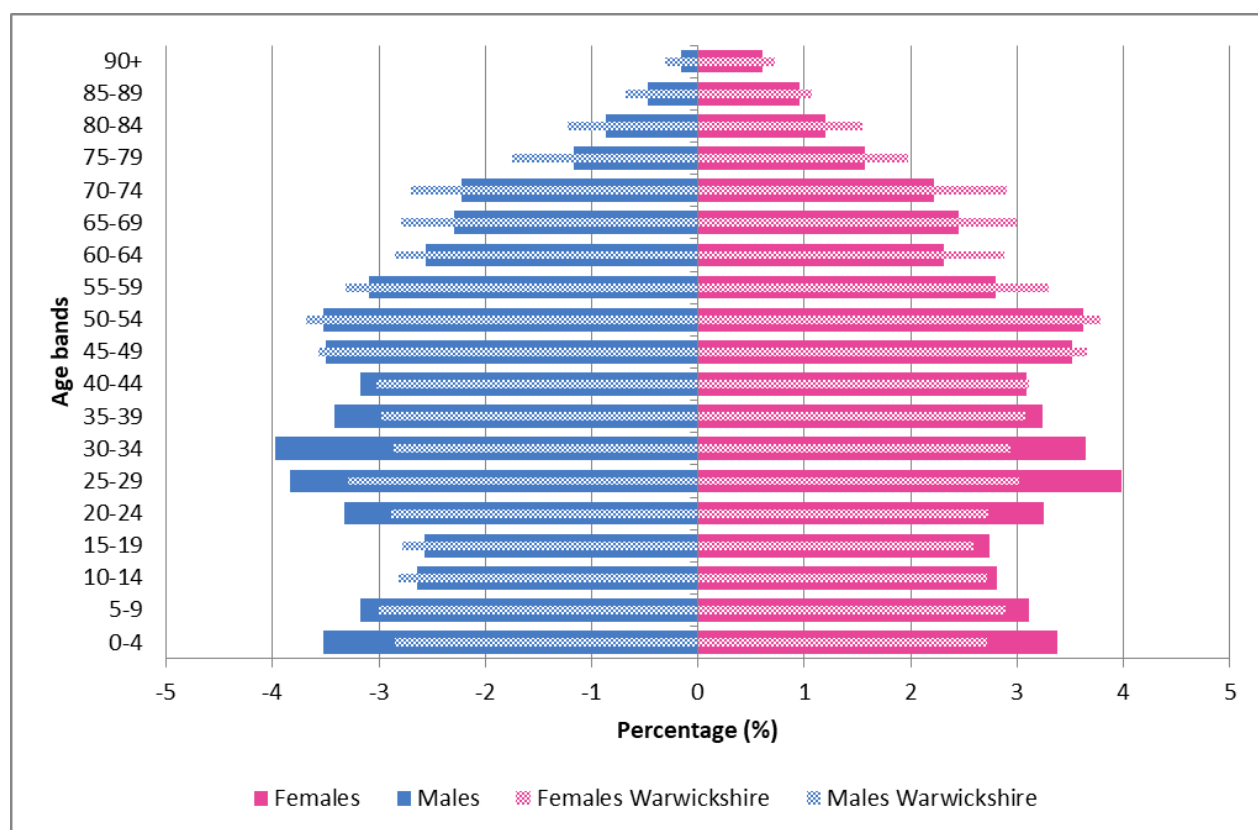
POPULATION

In mid-2017, the population of Nuneaton Central was estimated to be 30,167, with 14,934 males and 15,233 females¹.

Nuneaton Central has a younger population than the overall Warwickshire population with lower proportions of the population in all age groups above the age of 45 (Figure 3). Around 29% of the population were 20-39 year old compared to 24% of the Warwickshire population. The proportion of 0-9 year olds was also higher (13.6% compared to 11.5%) whereas the proportion of 10-19 year olds was very similar to Warwickshire. When comparing the population to the population in England, Nuneaton Central has a younger population, with in particular higher proportions of 0-4 year olds and 20-34 year olds, and lower proportions of age groups 55 and over.

This was an increase of 1,011 persons (3.5%) in Nuneaton Central between 2011 and 2017². These population growth trends are likely to continue into the future based on the population projections available for the borough³. Between 2016 and 2041, Nuneaton & Bedworth's population is projected to increase by 13,107 people (10.39%). The rate of growth will be greatest in the 90+ age group (a projected increase of 169.5%), and the 65+ age group is projected to increase by 42.3% which could result in greater health and social care pressures. The working age population (18-64 years) is expected to grow by 1.9% and the 0-17 age group by 5.3% during this time period. This may be particularly pertinent given Nuneaton Central's current young/working-age population structure.

Figure 3: Population Distribution – Nuneaton Central & Warwickshire (2017)



Source: ONS (2018), Mid-2017 Population Estimates

COUNTRY OF BIRTH AND ETHNICITY

The population of Nuneaton Central is relatively diverse. In 2011, Nuneaton Central had a higher proportion of its population who were born outside the UK than in both Nuneaton & Bedworth (N&B) Borough and Warwickshire (Figure 4)⁴. The difference was mainly in the percentage of individuals who were born in the Middle East and Asia with 6.1% in Nuneaton Central compared to 3.0% in N&B Borough and 2.5% in Warwickshire. Over half (54%) of those born in the Middle East and Asia were born in India. Of the residents born in EU Countries other than the UK, 48.7% were born in Poland.

Figure 4 Birthplaces of residents in Nuneaton Central (2011)

	United Kingdom		EU Countries (not incl. UK)		Africa		Middle East & Asia		Other	
	n	%	n	%	n	%	n	%	n	%
Nuneaton Central	25758	88.7	927	3.2	459	1.6	1773	6.1	131	0.4
Nuneaton & Bedworth Borough	116764	93.2	2284	2.4	1262	1.0	3695	3.0	511	0.4
Warwickshire	500118	91.7	15565	3.9	6032	1.1	13811	2.5	4496	0.4
England		86.2		5.1		2.4		4.8		1.6

Source: Table QS 203 EW, Census 2011, ONS Crown Copyright Reserved, 2011

In 2011, Nuneaton Central had a higher proportion of the population whose ethnic group was described as Asian/Asian British (12.8%) than in N&B Borough (6.3%), Warwickshire (4.6%) and England (7.8%), and a lower proportion of the population described as White (84.2%)⁵.

RELIGION

Figure 5 shows that in 2011, there were more individuals who stated their religion to be Muslim in Nuneaton Central (7.8%) than in N&B Borough (2.3%), Warwickshire (1.1%) and England (5.0%)⁶. There were also more individuals who were Hindu (1.8%) and Buddhist (0.9%) but fewer individuals who were Christian (56.9%).

Figure 5 Percentage of religions of residents in Nuneaton Central (2011)

	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Other religion	No religion	Religion not stated
Nuneaton Central	56.9	0.9	1.8	0.0	7.8	1.4	0.5	24.6	6.1
Nuneaton & Bedworth Borough	63.6	0.3	1.1	0.0	2.3	2.2	0.4	24.0	6.1
Warwickshire	64.5	0.3	1.0	0.1	1.1	1.7	0.4	24.1	6.8
England	59.4	0.5	1.5	0.5	5.0	0.8	0.4	24.7	7.2

Source: Census 2011, ONS Crown Copyright Reserved, 2011, Table QS210EW

HOUSEHOLD COMPOSITION AND TENURE

In 2011, there were more one person households in Nuneaton Central (33.9%) than in both N&B Borough (28.6%), Warwickshire (29.0%) and England (30.2%). Conversely, there were fewer households classed as one family only (59.6% in Nuneaton Central compared to 65.9% in N&B Borough, 64.9% in Warwickshire and 61.8% in England)⁷. In addition, fewer people owned their own home and more people rented (both social and private) in Nuneaton Central than in N&B Borough, Warwickshire and England (Figure 6).

Figure 6 Tenure of Residents in Nuneaton Central (2011)

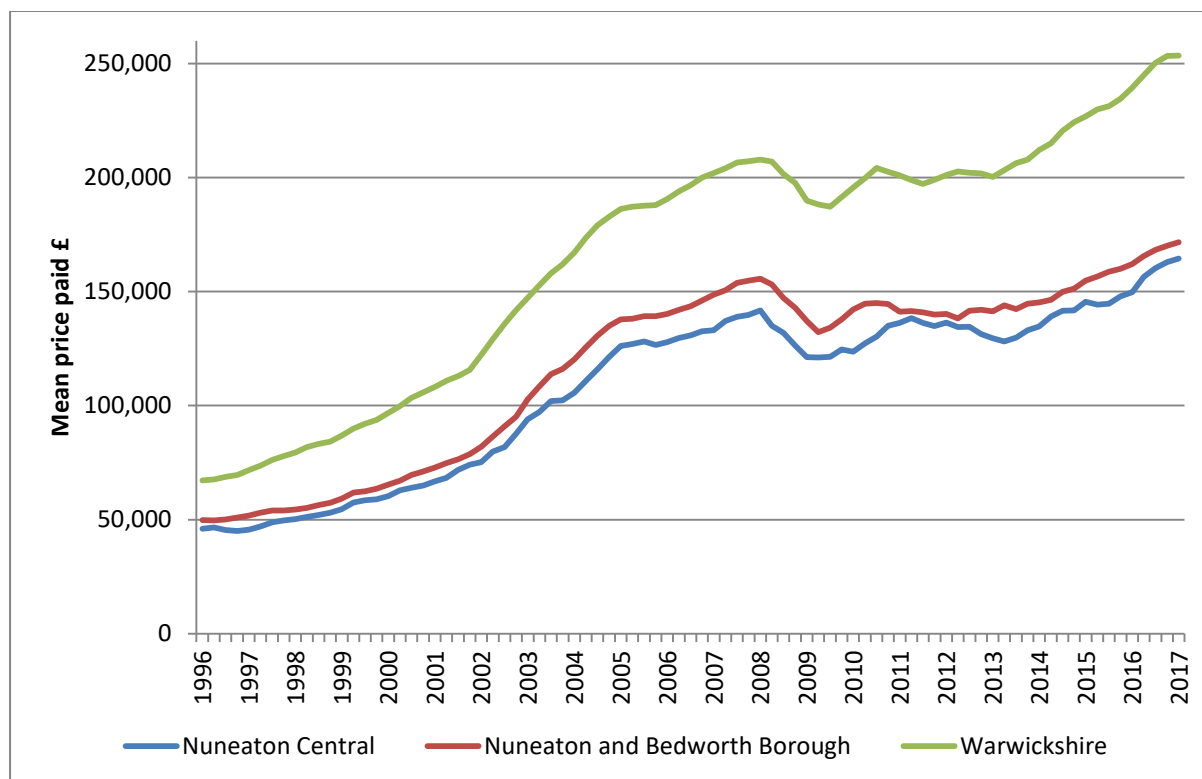
	Owned	Part owned/ part rented	Social rented	Private rented	Living rent free
Nuneaton Central	59.8	0.7	19.0	19.3	1.2
Nuneaton and Bedworth Borough	71.4	0.5	14.5	12.7	1.0
Warwickshire	70.0	0.8	13.8	14.1	1.2
England	64.8	0.7	16.5	16.9	1.1

Source: Census 2011, ONS Crown Copyright Reserved, Table QS403EW

The mean price paid for residential properties in Nuneaton Central is slightly lower than in N&B Borough and considerably lower than in Warwickshire. This gap has increased in recent years (Figure 7). In 2017, the mean price paid for residential properties was £164,427 in Nuneaton Central

compared to £253,495 in Warwickshire; within Nuneaton Central the mean price ranged from £104,644 in Abbey North LSOA to £191,449 in Attleborough South West LSOA⁸.

Figure 7 Mean house prices paid for residential property, 1996-2017*



Source: Office for National Statistics, HPSSA Dataset 47 *The mean house price for Nuneaton Central was calculated averaging the mean of house price for LSOAs in Nuneaton Central.

MOSAIC PROFILE

Mosaic is a profiling tool which uses a wide range of data to allocate households into similar groups and types based on likely common characteristics. Figure 7 shows the Mosaic profile of Nuneaton Central compared to the N&B Borough and county equivalents. Mosaic groups making up over 10% of the population are highlighted in bold; 72% of residents in Nuneaton Central are allocated to one of five groups⁹:

- Group L ‘Transient Renters’ – single people privately renting low cost homes for the short term
- Group K ‘Modest Traditions’ – mature homeowners of value homes enjoying stable lifestyles
- Group M ‘Family Basics’ – families with limited resources who have to budget to make ends meet
- Group H ‘Aspiring homemakers’ – younger households settling down in housing priced within their means.
- Group N ‘Vintage Value’ – elderly people reliant on support to meet financial or practical needs

Four out of the five groups are over-represented when compared with the county profile, but the percentage in the aspiring homemakers group in Nuneaton Central is similar to in Warwickshire. The

predominant groups in Nuneaton Central are more likely to have a low/modest income and, as a result, will live in low-cost/affordable housing.

Figure 8 Mosaic Profile of Residents in Nuneaton Central, Nuneaton & Bedworth Borough and Warwickshire

MOSAIC GROUP		NUNEATON CENTRAL	NUNEATON & BEDWORTH	WARWICKSHIRE
A	COUNTRY LIVING	0%	0.13%	10.7%
B	PRESTIGE POSITIONS	0.91%	5.18%	9.9%
C	CITY PROSPERITY	0%	0.00%	0.8%
D	DOMESTIC SUCCESS	2.98%	5.87%	8.3%
E	SUBURBAN STABILITY	8.44%	13.89%	9.6%
F	SENIOR SECURITY	5.37%	11.83%	9.6%
G	RURAL REALITY	0%	0.19%	7.4%
H	ASPIRING HOMEMAKERS	12.04%	13.71%	11.0%
I	URBAN COHESION	2.50%	0.72%	1.6%
J	RENTAL HUBS	1.74%	0.98%	5.9%
K	MODEST TRADITIONS	17.52%	13.06%	6.0%
L	TRANSIENT RENTERS	18.13%	9.88%	5.5%
M	FAMILY BASICS	14.07%	11.83%	6.0%
N	VINTAGE VALUE	10.67%	8.08%	5.7%
O	MUNICIPAL CHALLENGE	5.62%	4.65%	2.2%

Source: Experian, Mosaic Public Sector 2017

Within those five groups in Nuneaton Central, a number of lower super output areas (LSOAs) have particularly higher proportions of:

- ‘Transient Renters’ - Abbey Priory (48%), Abbey South (36%), Attleborough North East (38%), Abbey North (29%) and Abbey Town Centre (25%)
- ‘Family basics’ - Middlemarch & Swimming Pool (43%), Wem Brook East (42%) and Hill Top (41%)
- ‘Aspiring Homemakers’ - Attleborough South West (31%), Arbury George Eliot (29%) and Arbury North (28%)
- ‘Modest Traditions’ – Abbey North (29%) and Wem Brook Bridges (28%)
- ‘Vintage Value’- Attleborough North West (30%)

VETERANS

In April 2016, a needs assessment¹⁰ identified Nuneaton as having a high number of veterans. Geographical hotspots in the Nuneaton Central area are Abbey, Bar Pool, Wembrook, and Attleborough.

A key service is provided by Veterans’ Contact Point (VCP) in Bentley Road, Nuneaton. This is a service run by veterans for veterans and their families, which provides a drop in/no appointment necessary service. In 2017 approximately 300 people accessed their services the majority being from CV10 and CV11, which include the hotspots listed above. Some 15% of cases are from the Nepalese community in Nuneaton, which is significantly higher than the expected demographic for this community group.

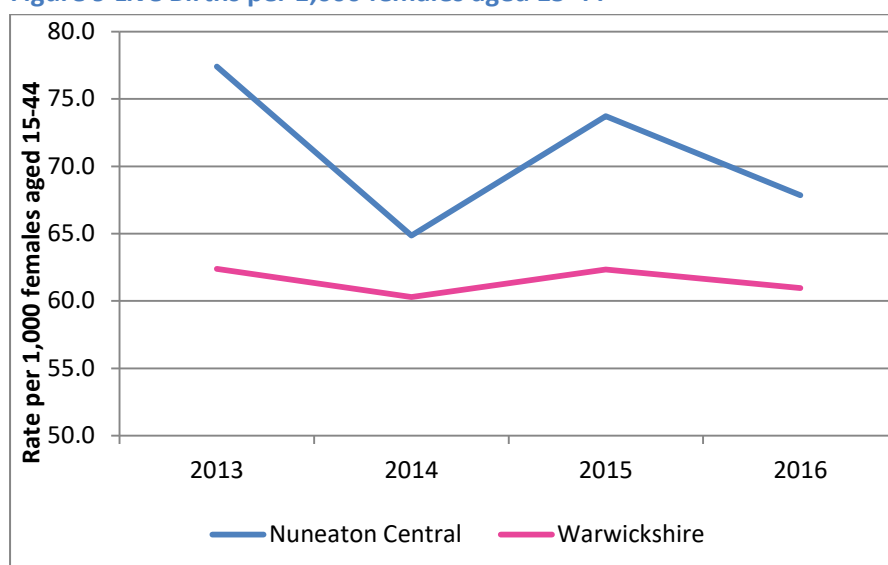
HEALTH

This section presents data on the health of the population of Nuneaton Central. There are numerous health-related measures that have been considered. The measures reported are those where performance is significantly worse than England or Warwickshire North CCG.

BIRTH RATE

The rate of live births to females aged 15-44 years is consistently higher in Nuneaton Central than the Warwickshire average; 67.9 per 1,000 females aged 15-44 in Nuneaton Central in 2016 compared to 61.0 per 1,000 in Warwickshire (Figure 9)¹¹. In 2016, there were 405 births in Nuneaton Central, 6.8% of all live births in Warwickshire.

Figure 9 Live Births per 1,000 females aged 15-44



Source: ONS Mid-2016 Population Estimates and Public Health Birth Files

LIFE EXPECTANCY

In the period 2014-2016, life expectancy at birth for males residing in Nuneaton Central was 75.9 years and for females was 80.9 years (compared to 79.9 and 83.6 years in Warwickshire)¹². This means that males in Nuneaton Central can expect to live for four years less than the average Warwickshire resident and females almost three years less. Males and females in Nuneaton Central have the lowest life expectancy at birth of all the JSNA areas. Lower life expectancy is generally more prevalent in the north of the county than the south which is consistent with the pattern of deprivation and health inequalities across Warwickshire. Although life expectancy has generally been increasing, there is growing evidence that much of the additional time is spent in poor health. Years spent in poor health impact on families and workplaces, and increase pressure on health and social care services.

PRIMARY CARE DATA

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 Nuneaton Central are not registered at the same practice, a method was developed that gives an indication of the health of residents living in Nuneaton Central. If 25% or more of the registered population of a general practice lived within the Nuneaton Central 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. Using this method, data for six general practices are reported for Nuneaton Central (Figure 10).

Figure 10 General Practices with 25%+ of the registered population residing in Nuneaton Central

Practice code	Practice Name	Number of registered patients living in Nuneaton Central	% of surgery population living in Nuneaton Central
Y04882	Chaucer Surgery	2,084	72.3
M84621	Queens Road Surgery	1,950	70.5
M84041	Riversley Road Surgery	3,064	62.3
M84001	Red Roofs Surgery	8,646	57.1
M84051	Old Mill Surgery	5,706	48.5
M84022	Manor Court Surgery	4,054	46.2

Source: NHS Digital, Patients Registered at a GP Practice, April 2018

Around 78% of all Nuneaton Central residents are registered at one of these six surgeries. A further 6,219 residents are registered at an additional 24 GP practices within Warwickshire, Coventry or at a different general practice within England¹³. This may reflect the younger more transient nature of the population.

A range of health indicators were considered for each of the six GP practices. Figure 11 shows indicators where one or more of the practices were either significantly worse (red) or significantly better (green) than England in 2017/18. Five of the practices were significantly worse than England for prevalence of diabetes, four of the practices were significantly worse for prevalence of hypertension, obesity and chronic kidney disease (CKD) and three of the practices were significantly worse for estimated smoking prevalence and percentage of persons aged 60-74, screened for bowel cancer in last 30 months (2.5 year coverage)¹⁴. Trends for these indicators are presented in this section.

Figure 11 – Summary of prevalence of selected health measures for the six GP practices, 2017/18

Health Indicator	GP Practice					
	Chaucer	Manor Court	Old Mill	Queens Road	Red Roofs	Riversley Road
	%	%	%	%	%	%
Diabetes: QOF prevalence (17+)	8.9	8.7	6.8	9.4	7.7	9.8
Hypertension: QOF prevalence (all ages)	18.2	18.0	13.1	12.8	18.9	16.8
Obesity: QOF prevalence (18+)	9.1	13.0	8.9	13.4	10.9	13.7
Estimated smoking prevalence (QOF)	21.8	22.4	17.9	19.6	19.6	18.3
CHD: QOF prevalence (all ages)	3.4	2.9	2.3	2.3	3.4	3.6
COPD: QOF prevalence (all ages)	2.1	2.0	1.4	1.6	2.1	1.7
Atrial fibrillation: QOF prevalence	2.2	1.9	1.3	1.0	2.5	2.1
Stroke: QOF prevalence (all ages)	1.7	1.4	1.2	0.9	2.3	2.4
Heart Failure: QOF prevalence (all ages)	1.1	0.6	0.5	0.7	1.0	2.1
Mental Health: QOF prevalence (all ages)	1.5	0.9	0.6	1.3	1.0	0.7
Depression: Recorded prevalence (aged 18+)	12.4	9.3	4.8	6.7	9.8	7.7
Depression: QOF incidence (18+)	2.0	1.2	0.4	1.2	1.8	1.4
Cancer: QOF prevalence (all ages)	2.3	2.5	1.8	2.0	2.8	2.7
Persons, 60-74, screened for bowel cancer last 30 months (2.5 year coverage, %)	53.2	55.8	59.4	52.5	60.8	56.3
Females, 50-70, screened for breast cancer last 36 months (3 year coverage, %)	73.8	75.2	78.7	75.4	72.3	84.0
% with a long-standing health condition	61.8	54.3	45.0	46.2	63.4	51.4
Chronic Kidney Disease QOF prevalence (18+ yrs)	6.8	7.9	4.1	4.2	10.8	9.8
% reporting blindness or severe visual impairment	0.5	4.2	0.5	1.5	3.0	3.0
Osteoporosis: QOF prevalence (50+)	0.3	0.3	0.3	1.0	0.9	2.2
Learning disability: QOF prevalence	0.5	0.7	0.5	0.5	0.8	0.6
Epilepsy: QOF prevalence (18+)	0.6	0.9	0.8	0.5	1.3	1.2

Source: Public Health England, National General Practice Profiles, Fingertips, Accessed January 2019.

OBESITY

The percentage of patients aged 18 and over with a body mass index (BMI) greater than or equal to 30 in the previous 12 months, as recorded on practice disease registers was significantly higher than the percentage in England from 2015/16 to 2017/18 in four of the GP practices: Queens Road Surgery, Riversley Road Surgery, Red Roofs Surgery and Manor Court Surgery¹⁴. The percentage was similar to the England percentage (9.8%) in 2017/18 for Chaucer Surgery (9.1%) after being significantly higher in the previous 2 years, and for Old Mill Surgery the percentage in 2015/16 and 2017/18 was similar to England, and significantly better in 2016/17 (Figure 12). The percentage was also significantly higher than the Warwickshire North CCG average in three of the six GP Practices in 2017/18: Queens Road Surgery, Riversley Road Surgery and Manor Court Surgery. Actual percentages are likely to be higher as not all registered patients will have had their BMI checked and recorded.

Figure 12 - Percentage of patients aged 18+ with a body mass index (BMI) greater than or equal to 30 in the previous 12 months

GP Practice	2015/16 %	2016/17 %	2017/18
Chaucer Surgery	11.3	11.4	9.1
Queens Road Surgery	15.1	15.1	13.4
Riversley Road Surgery	12.0	12.8	13.7
Red Roofs Surgery	15.9	11.9	10.9
Old Mill Surgery	9.7	8.9	8.9
Manor Court Surgery	11.6	12.1	13.0
WN CCG	10.5	10.7	10.6
England	9.5	9.7	9.8

Source; PHE, <https://fingertips.phe.org.uk/profile/general-practice>, accessed 4/1/2019

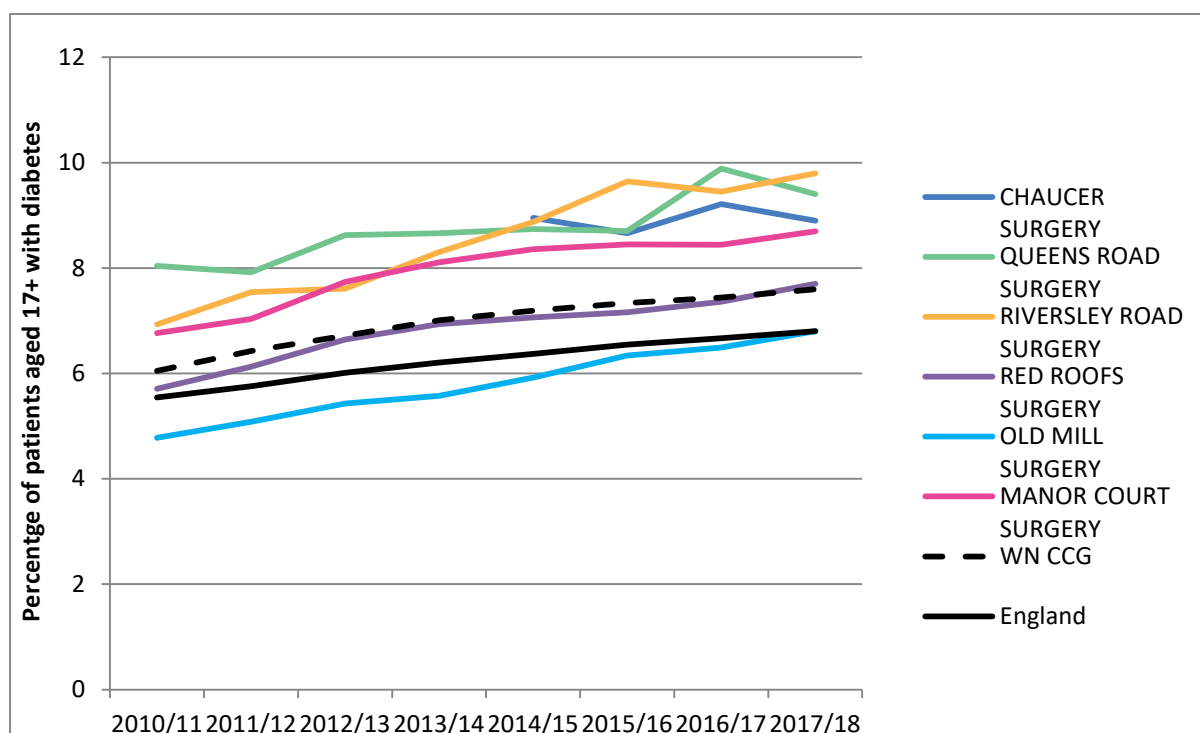
Obesity in children in Nuneaton Central is discussed in the Child Health section below.

DIABETES

The percentage of patients aged 17 years and over with diabetes mellitus, as recorded on practice disease registers was significantly higher than the percentage in England (6.8%) in 2017/18 in five of the six practices: Chaucer Surgery (8.9%), Queens Road Surgery (9.4%), Riversley Road Surgery (9.8%), Red Roofs Surgery (7.7%) and Manor Court Surgery (8.7%)¹⁴. This has been the case since 2010/11 for Queens Road Surgery, Riversley Road Surgery and Manor Court Surgery, since 2012/13 for Red Roofs Surgery and since 2014/15 for Chaucer Surgery (Figure 13). In 2017/18, the percentage of patients with diabetes was also significantly higher than the WN CCG percentage (7.6%) for Chaucer Surgery, Queens Road Surgery, Riversley Road Surgery and Manor Court Surgery. The actual percentage of registered patients with diabetes (both type 1 and type 2) is likely to be higher than the recorded percentage as some patients will have undiagnosed diabetes.

Between 2014/15 and 2017/18 the average standardised admission rate for emergency admissions to hospital related to diabetes was 306 per 100,000 population in Nuneaton Central. This was the second highest rate of the 22 JSNA areas (range 93 per 100,000 to 365 per 100,000)¹⁵.

Figure 13: Percentage of patients aged 17+ with diabetes mellitus, 2010/11-2017/18



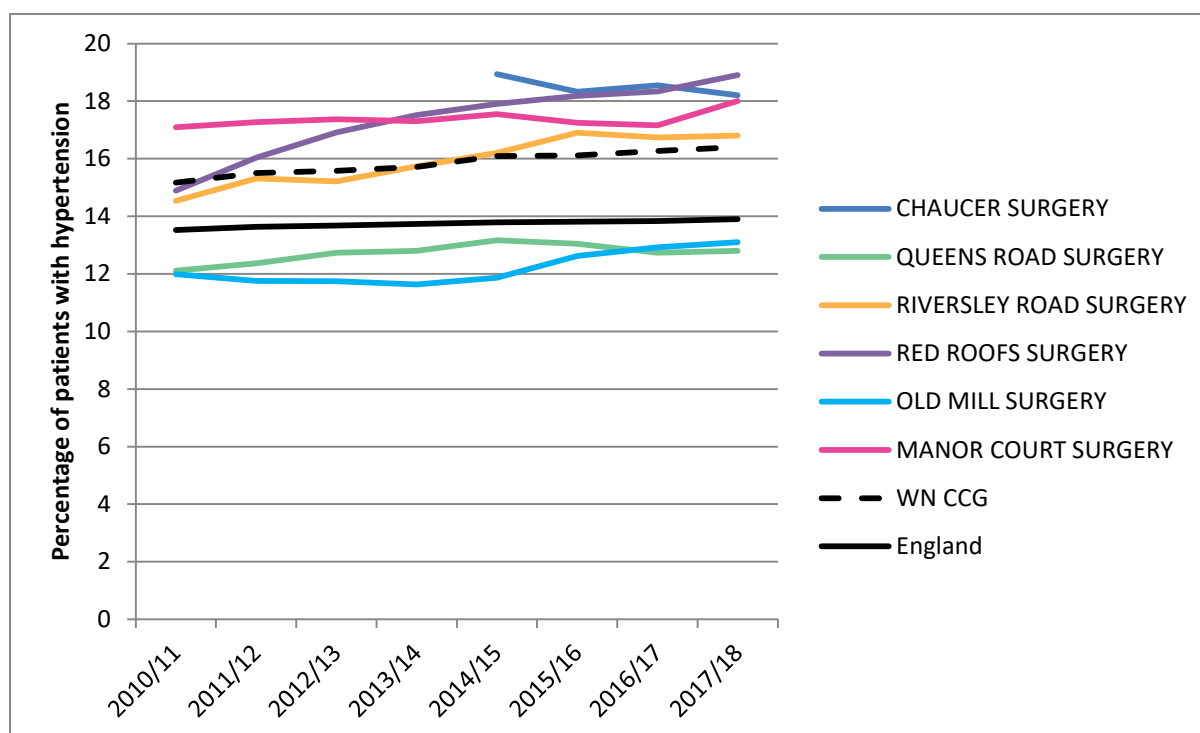
Source; PHE, <https://fingertips.phe.org.uk/profile/general-practice>, accessed 4/1/2019

HYPERTENSION

In 2017/18, the percentage of patients with established hypertension (high blood pressure), as recorded on practice disease registers was significantly higher than the percentage in England (13.9%) in 2017/18 in four of the six practices: Chaucer Surgery (18.2%), Riversley Road Surgery (16.8%), Red Roofs Surgery (18.9%) and Manor Court Surgery (18.0%)¹⁴. This has been the case since 2010/11 for Riversley Road Surgery, Red Roofs Surgery and Manor Court Surgery, and since 2014/15 for Chaucer Surgery (Figure 14). In 2017/18, the percentage of patients with hypertension was also significantly higher than the WN CCG percentage (16.4%) for Chaucer Surgery, Red Roofs Surgery and Manor Court Surgery. The actual percentage of registered patients with hypertension is likely to be higher than the recorded percentage as some patients will not have had their blood pressure taken and recorded.

Hypertension is a risk factor for heart disease and stroke. Between 2014/15 and 2017/18 the standardised admission rate for emergency admissions for coronary heart disease was 4,886 per 100,000 population in Nuneaton Central¹⁵. This was the highest of all of the JSNA areas (range 2,219 per 100,000 to 4,886 per 100,000). Within these coronary heart disease admissions, the standardised admission rate for emergency admissions for stroke was 1,063 per 100,000 population and for myocardial infarction (MI, heart attack) 150 per 100,000 population in Nuneaton Central¹⁵. For stroke, this was the highest of all of the JSNA areas (range 192 per 100,000 to 1,063 per 100,000) and for MI the fourth highest (range 83 per 100,000 to 162 per 100,000).

Figure 14: Percentage of patients with established hypertension, 2010/11-2017/18

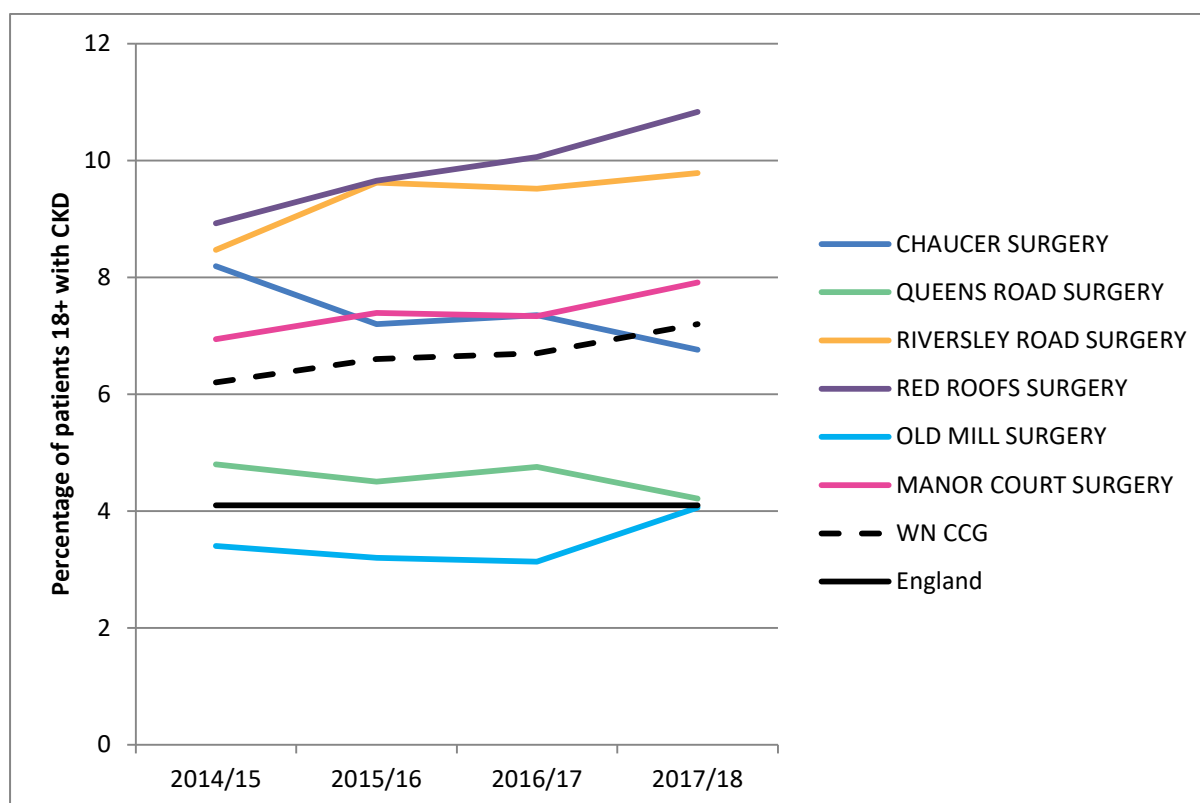


Source: PHE, <https://fingertips.phe.org.uk/profile/general-practice>, accessed 4/1/2019

CHRONIC KIDNEY DISEASE

Chronic Kidney Disease (CKD) is a long term condition. The prevalence of a low glomerular filtration rate (a measure of the how well the kidney is working where a GFR of 60 or higher is in the normal range) is strongly associated with diagnosed diabetes, hypertension and a higher BMI¹⁶. In 2017/18, the percentage of patients aged 18 years and over with CKD, as recorded on practice disease registers was significantly higher than the prevalence in England (4.1%) at Chaucer Surgery (6.8%), Riversley Road Surgery (9.8%), Red Roofs Surgery (10.8%) and Manor Court Surgery (7.9%)¹⁴. This has been the case since 2014/15 with levels at all but Chaucer Surgery steadily increasing throughout this time period (Figure 15). The prevalence of CKD at Red Roofs Surgery and Riversley Road Surgery has also been significantly higher than the average prevalence at practices at Warwickshire North CCG since 2014/15.

Figure 15: Percentage of patients aged 18+ with CKD, 2013/14-2017/18



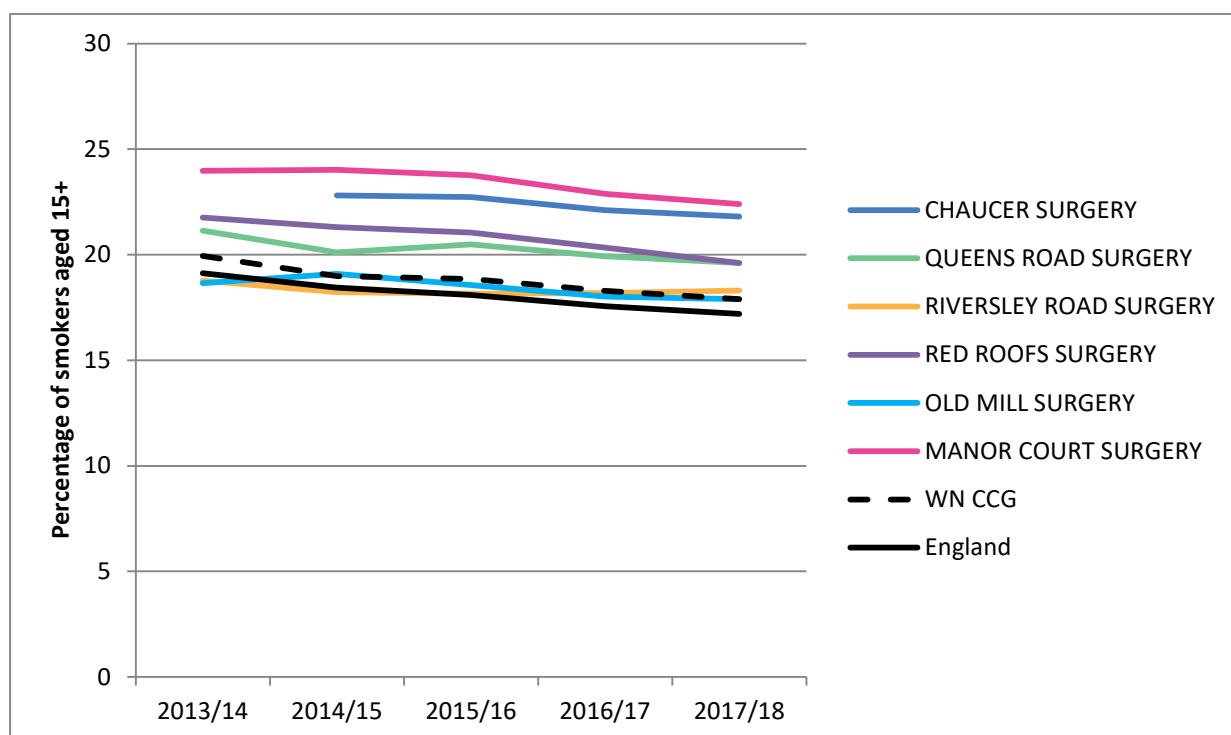
Source: PHE, <https://fingertips.phe.org.uk/profile/general-practice>, accessed 4/1/2019

SMOKING

In 2017/18, the proportion of registered patients aged 15 and over recorded as current smokers was significantly higher than the proportion in England (17.2%) at three of the practices: Chaucer Surgery (21.8%), Red Roofs Surgery (19.6%) and Manor Court Surgery (22.4%), and this has been the case since 2013/14 (Figure 16)¹⁴. The proportion of smokers registered at Queens Road Surgery was significantly higher than the England proportion between 2013/14 and 2016/17 but in 2017/18 there was no significant difference (19.6%). Chaucer Surgery, Red Roofs Surgery and Manor Court Surgery also had significantly higher proportions of smokers than Warwickshire North CCG between 2014/15 and 2017/18.

Smoking is linked with many diseases including heart disease, stroke and various cancers. It is also responsible for 83% of deaths from chronic obstructive pulmonary disease (COPD)¹⁷. Between 2014/15 and 2017/18, the standardised admission rate for emergency admissions for COPD in persons aged 35 and over was 1,223 per 100,000 population in Nuneaton Central¹⁵. This was the highest of all of the JSNA areas (range 406 per 100,000 to 1,223 per 100,000).

Figure 16: Percentage of patients aged 15 + recorded as smokers, 2013/14-2017/18



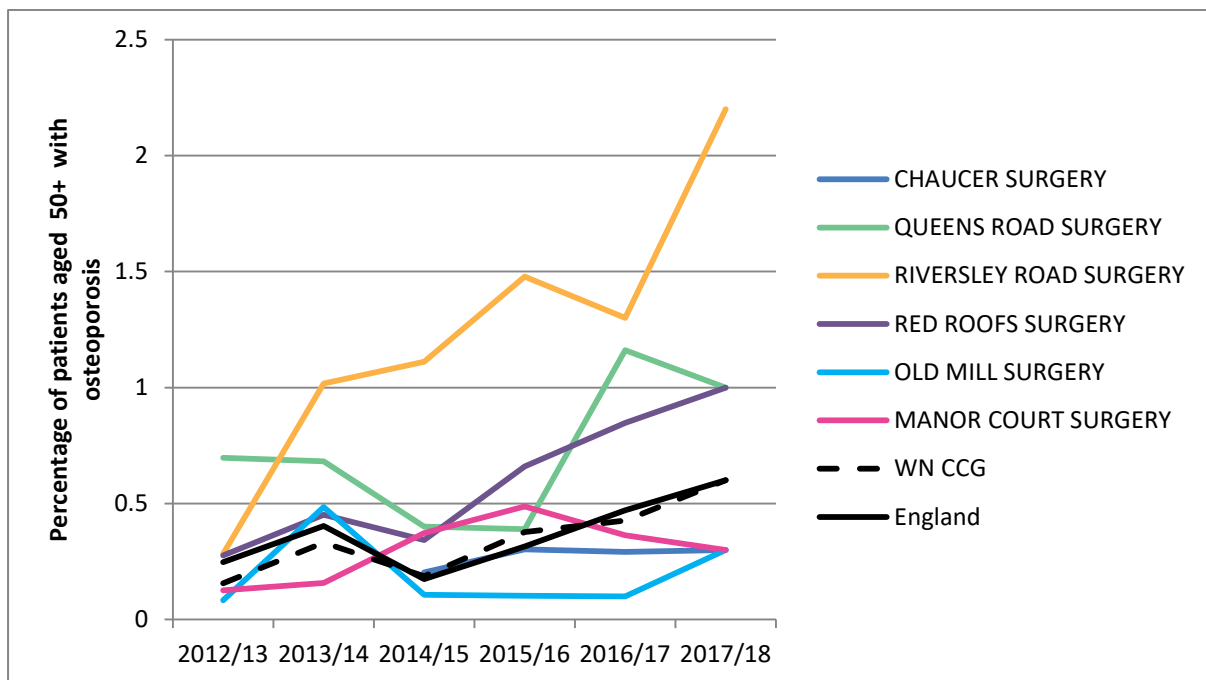
Source: PHE, <https://fingertips.phe.org.uk/>, accessed 4/1/201

OSTEOPOROSIS

In 2017/18, the percentage of patients with osteoporosis, as recorded on practice disease registers, for all patients aged 50 or older was significantly higher than the percentage for England (0.6%) for patients registered at Riversley Road Surgery (2.2%) and Red Roofs Surgery (1.0%) (Figure 17)¹⁴. The proportion had also been significantly higher at Queens Road Surgery in 2016/17 (1.2%) but reduced in 2017/18 (1%). The high percentage and recent increase of diagnosed osteoporosis at Riversley Road Surgery warrants investigation.

Hip fractures are more common in people with osteoporosis. Between 2014/15 and 2017/18 the standardised admission rate for emergency admissions for hip fractures in person aged 65 and over was 680 per 100,000 population in Nuneaton Central¹⁵. This was the fourth highest of the 22 JSNA areas (range 420 per 100,000 to 746 per 100,000).

Figure 17 Percentage of patients aged 50+ with diagnosed osteoporosis

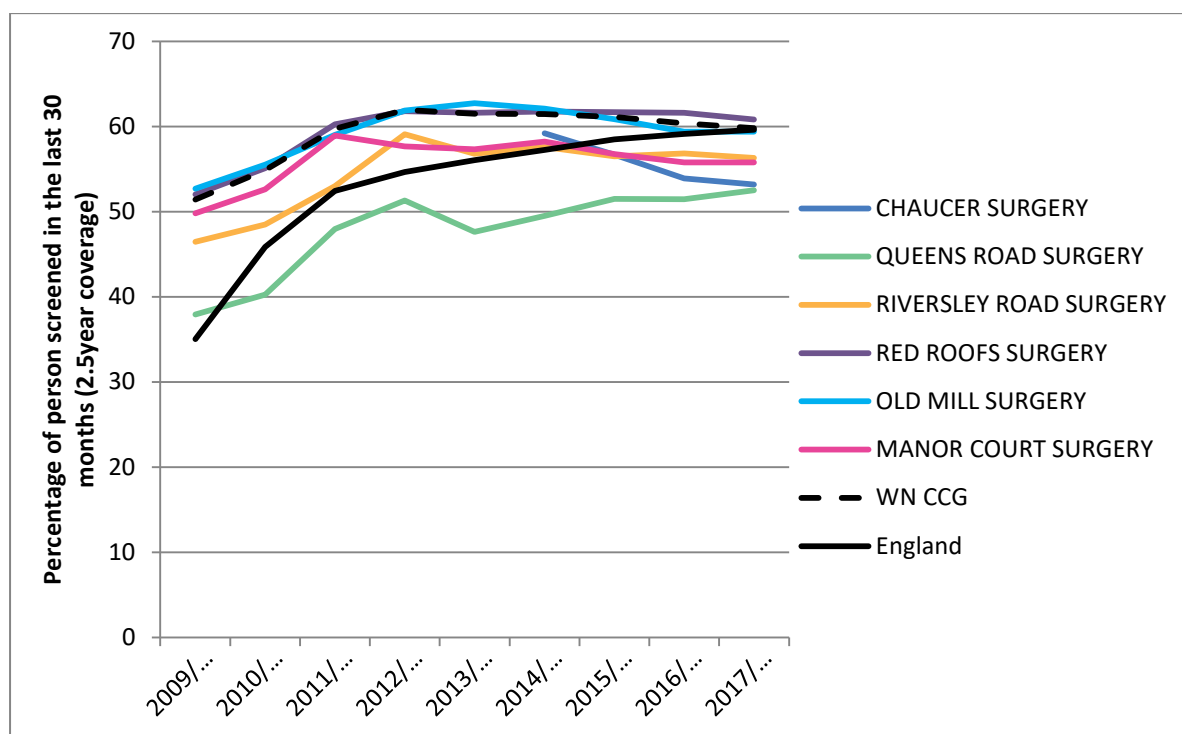


Source: PHE, <https://fingertips.phe.org.uk/>, accessed 4/1/201

CANCER SCREENING

Screening coverage for breast cancer (females 50-70 years) and cervical cancer (females 25-64 years) has generally been either similar to, or significantly higher than, the England average since 2012/13 in all six surgeries¹⁴. However, screening coverage for bowel cancer (persons aged 60-74 years) in 2017/18 was lower than the average in England (59.6%) at Chaucer Surgery (53.2%), Queens Road Surgery (52.5%) and Manor Court Surgery (55.8%). Coverage at Queens Road Surgery has been significantly below the rate in England since 2013/14 and at Manor Court since 2016/17 (Figure 18). All practices have seen a decrease in bowel screening coverage in recent years.

Figure 18 Percentage of persons screened in the last 30 months (2.5 year coverage), 2009/10 – 2017/18



Source: PHE, <https://fingertips.phe.org.uk/profile/general-practice>, accessed 4/1/2019

EMERGENCY HOSPITAL ADMISSIONS & MORTALITY

Between 2014/15 and 2017/18, the standardised admission rate for emergency admissions for all causes was 10,515 per 100,000 population in Nuneaton Central¹⁵. This was the highest of the 22 JSNA areas (range 5,934 per 100,000 to 10,515 per 100,000). Higher rates of emergency admissions can be linked with a number of factors both internal and external to the health service. External factors include deprivation (in areas where the most deprived 10% of the population live, the rate of emergency admissions is more than twice that seen in areas where the most affluent 10% of the population of England live), age (particularly very young children and those over 65), smoking rates (there is a positive relationship between the proportion of heavy smokers and a higher rate of emergency admissions), admissions to local authority funded long-term institutional care for adults, and lower rates of social care expenditure¹⁸.

In the 5 years 2013 to 2017, Nuneaton Central was significantly worse than the Warwickshire rate for deaths from the following causes (all directly standardised rates)¹⁹:

- All cause, all age - 1,184 per 100,000 (Warwickshire - 908 per 100,000)
- All cause, under 75 – 386 per 100,000 (Warwickshire - 278 per 100,000)
- Circulatory disease, all ages – 315 per 100,000 (Warwickshire - 232 per 100,000)
- Circulatory disease, under 75 – 92 per 100,000 (Warwickshire - 61 per 100,000)
- CHD, all age – 149 per 100,000 (Warwickshire - 100 per 100,000)
- CHD, under 75 – 59 per 100,000 (Warwickshire - 33 per 100,000)
- Respiratory, all age – 200 per 100,000 (Warwickshire - 115 per 100,000)

CHILD HEALTH

Low Birth Weight

Between 2014-16, 8.9% of live births to mothers in Nuneaton Central were babies weighing less than 2500g classed as low birth weight²⁰. This was the highest proportion of all JSNA geographies in Warwickshire (the lowest proportion was 4.2%).

Teenage Mothers

Between 2014-16, 0.7% of births were to mothers under 18 (Warwickshire 0.8%) and 5.4% were to mothers under 20 years of age (Warwickshire 3.4%)²⁰.

A&E attendance 0-4 year olds

Between 2014/15 and 2017/18, the attendance rate at accident and emergency was higher in 0-4 year olds in Nuneaton Central (757 per 1,000 population aged 0-4) than in Warwickshire (554 per 1,000)¹⁵. This was the second highest attendance rate of all 22 JSNA areas (range 362 per 1,000 to 845 per 1,000).

National Child Measurement Programme (2013/14 – 2016/17)

Data from the National Child Measurement Programme (NCMP) found that, for the four year period between 2013/14 and 2016/17, 13.1% of children living in Nuneaton Central who were in the reception year (aged 4-5 years) were overweight and 9.0% were very overweight²¹. During the same period 14.1% of children in year 6 (aged 10-11) were overweight and 19.3% were very overweight, illustrating a tendency for children in Nuneaton Central to increase in weight as they move through primary school. Of the 22 JSNA areas, the percentage of children overweight was the 9th highest of the of the JSNA areas (range 5.5% to 11.2%) for reception aged children and the 5th highest of the JSNA areas (range 9.8% to 22.1%) for year 6 children.

Young carers

In Warwickshire, in April 2018, the Young Carers Project was aware of 2,088 young carers (aged 6 to 25); 167 (8%) lived in the Nuneaton Central area²². Within Nuneaton Central, young carers were more likely to live in Middlemarch & Swimming Pool (17), Wem Brook East (16), Abbey North (16), Abbey West (15), Hilltop (13) and Attleborough Central (13).

MENTAL HEALTH

The prevalence of a diagnosed severe mental illness (schizophrenia, bipolar affective disorder and other psychoses) in patients registered at four of the six practices was similar to the prevalence in England (0.94%) in 2017/18, however patients at Chaucer Surgery had a significantly higher prevalence (1.53%) and patients at Old Mill Surgery had a significantly lower prevalence rate (0.59%)¹⁴. The pattern is similar for prevalence of depression with 12.4% of patients aged 18 and over recorded as having depression at Chaucer Surgery, significantly higher than the prevalence in England (9.9%) in 2017/18. The prevalence of depression at the Chaucer Surgery has been higher than England since 2014/15 and the trend is increasing (2014/15 – 8.8%, 2015/16 – 10.6%, 2016/17 - 11.4%)¹⁴.

Suicide and Self-Harm

The suicide rate in Nuneaton and Bedworth Borough in the 3-year period 2015-17 was 14.2 per 100,000 population, significantly higher than the England rate (9.6 per 100,000)²³. In Nuneaton Central, between 2014/15 and 2017/18, the crude emergency admission rate for self-harm was 5.5 per 1,000 10-24 year olds. This was the fourth highest of the 22 JSNA areas (range 2.4 per 1,000 to 7.2 per 1,000) and above the N&B Borough and Warwickshire averages (4.6 per 1,000 and 4.2 per 1,000 respectively)¹⁵. LSOAs in Nuneaton Central with a crude admission rate above 10 per 1,000 10-24 year olds during this four year period were Abbey North (14.2 per 1,000), Riversley (11.2 per 1,000) and Arbury George Eliot (10.3 per 1,000).

Dementia

In November 2018, the percentage of patients aged 65 and over with a recorded dementia diagnosis was higher than the average for WN CCG and England in three of the six practices – Chaucer Surgery, Queens Road Surgery and Riversley Surgery (Figure 19)²⁴. The number of patients with dementia is greater than would be expected in patients registered at Chaucer Surgery (expected number =43²⁵), this may reflect the presence of a nursing home(s) located in the practice’s catchment area.

Figure 19 – Prevalence of diagnosed dementia in patients aged 65 and over, November 2018

	Number on dementia register 65+	Patient list size 65+	Percentage with diagnosed dementia (%)
Chaucer Surgery	57	579	9.8
Queens Road Surgery	20	351	5.7
Riversley Road Surgery	49	939	5.2
Red Roofs Surgery	94	3117	3.0
Old Mill Surgery	65	1837	3.5
Manor Court Surgery	41	1573	2.6
WN CCG	1,355	38,415	3.5
England	448,534	10,348,568	4.3

Source: NHS Digital, Recorded Dementia Diagnoses- November 2018, <https://digital.nhs.uk/data-and-information/publications/statistical/recorded-dementia-diagnoses/november-2018>

DEPRIVATION & POVERTY

DEPRIVATION

The Index of Multiple Deprivation 2015 is the official measure of relative deprivation for small areas (LSOAs) in England. It ranks every small area in England from 1 (most deprived area) to 32,844 (least deprived area). Deprivation ‘deciles’ are published alongside ranks. Deciles are calculated by ranking the 32,844 LSOAs in England from most deprived to least deprived and dividing them into 10 equal groups ranging from the most deprived 10% to the least deprived 10% LSOAs nationally.

There are 3 LSOAs in Nuneaton Central that are in the most deprived 10% of LSOAs in England – Abbey Town Centre (ranked 2253), Middlemarch & Swimming Pool (ranked 2257) and Hilltop (ranked 3122) (Figure 20)²⁶. There are a further 3 LSOAs in the 20% most deprived - Abbey Priory (ranked 4256), Abbey North (ranked 4370) and Riversley (ranked 4963), and four LSOAs in the 30%

most deprived – Attleborough North West (ranked 7811), Wem Brook East (ranked 8334), Bar Pool East & Greenmoor (ranked 8712) and Abbey South (ranked 9034).

Figure 20 Index of Multiple Deprivation 2015 Deciles for LSOAs in Nuneaton Central

WCC LSOA Name	Index of Multiple Deprivation (IMD) Decile	Income Decile	Employment Decile	Education, Skills and Training Decile	Health Deprivation and Disability Decile	Crime Decile	Barriers to Housing and Services Decile	Living Environment Decile	Income Deprivation Affecting Children Index (IDACI) Decile	Income Deprivation Affecting Older People (IDAOPI) Decile	Children and Young People Sub-domain Decile
Abbey Town Centre	1	2	1	3	1	1	4	1	2	1	4
Middlemarch & Swimming Pool	1	1	1	1	2	4	4	6	1	2	1
Hill Top	1	1	2	1	2	1	4	6	1	2	2
Abbey Priory	2	3	2	3	3	1	7	1	4	1	3
Abbey North	2	2	2	2	2	2	7	2	2	3	1
Riversley	2	2	2	2	2	2	7	2	4	2	3
Attleborough North West	3	3	3	5	2	1	5	6	5	2	7
Wem Brook East	3	3	3	2	3	4	5	5	3	4	2
Bar Pool East & Greenmoor	3	4	4	3	3	1	8	2	4	3	2
Abbey South	3	4	3	3	2	3	8	3	5	2	4
Wem Brook Bridges	4	4	4	2	4	3	8	2	5	2	4
Abbey West	4	4	4	4	3	1	8	3	4	5	3
Attleborough Central	4	4	4	3	4	3	5	5	3	5	3
Attleborough North East	4	4	4	3	4	3	7	2	4	5	4
Arbury George Elliott	6	6	6	5	4	5	4	6	6	5	5
Arbury Heath End	6	6	6	4	6	4	9	6	4	9	5
Arbury North	6	7	5	5	5	4	10	6	7	7	8
Attleborough South West	7	6	7	7	6	7	3	10	6	5	6

Source: Ministry of Housing, Communities & Local Government (2015),

<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015>

The IMD combines information from 7 domain indices (which measure different types or dimensions of deprivation) to produce an overall relative measure of deprivation. The domain indices can be used on their own to focus on specific aspects of deprivation. There are also supplementary indices concerned with income deprivation among children (IDACI) and older people (IDAOP). There are other areas in Nuneaton Central outside the three LSOAs in the most deprived 10% that have indices that may warrant focus. In the Crime Decile, Abbey Priory, Attleborough North West, Bar Pool East & Greenmoor and Abbey West are all in the top 10%. Abbey Priory is also in the top 10% in the Living Environment Decile and the IDAOPI.

CHILD POVERTY

In Warwickshire, in 2015, 11.8% of children under 16 were in low income families whereas in N&B Borough 17.6% were in low income families - this figure is significantly worse than the England average (16.8%)²⁷. Half of the LSOAs in Nuneaton Central had a higher proportion of children under 16 in low income families than the N&B Borough average – Hilltop (38.6%), Middlemarch & Swimming Pool (35.8%), Abbey North (25.9%), Wem Brook East (24.8%), Attleborough Central (23.7%), Riversley (23.7%), Abbey Town Centre (19.9%), Attleborough North West (18.8%), and Abbey Priory (18.5%) (Figure 21). In most LSOAs in Nuneaton Central the percentage of children under 16 in low-income families has decreased since 2014, the exception to this was Arbury North and Riversley where the percentage of children increased by 1.8% and 1.9% respectively.

Figure 21 Percentages of Children in Low Income Families in Nuneaton Central LSOAs, 2014-2015

	2014		2015		Difference 2014-2015	
	% of Children in low-income families		% of Children in low-income families			
	Under 16	All Children	Under 16	All Children	Under 16	All Children
Hill Top	44.1%	39.2%	38.6%	35.5%	-5.5%	-3.7%
Middlemarch & Swimming Pool	41.3%	39.4%	35.8%	35.0%	-5.5%	-4.4%
Abbey North	35.2%	33.6%	25.9%	25.2%	-9.3%	-8.4%
Wem Brook East	28.2%	27.2%	24.8%	25.2%	-3.4%	-2.0%
Attleborough Central	28.2%	28.8%	23.7%	23.3%	-4.5%	-5.5%
Riversley	21.8%	23.2%	23.7%	23.8%	1.9%	0.6%
Abbey Town Centre	20.5%	19.2%	19.9%	18.9%	-0.6%	-0.3%
Attleborough North West	25.8%	26.0%	18.8%	19.8%	-7.0%	-6.2%
Abbey Priory	22.2%	22.5%	18.5%	19.4%	-3.7%	-3.1%
Attleborough North East	20.6%	19.1%	16.8%	15.6%	-3.8%	-3.5%
Wem Brook Bridges	17.3%	17.0%	15.4%	15.4%	-1.9%	-1.6%
Abbey West	14.2%	14.5%	13.6%	13.4%	-0.6%	-1.1%
Abbey South	14.6%	15.3%	12.8%	12.1%	-1.8%	-3.2%
Bar Pool East & Greenmoor	22.0%	20.9%	12.7%	12.1%	-9.3%	-8.8%
Arbury George Eliot	13.6%	13.3%	12.5%	13.9%	-1.1%	0.6%
Arbury Heath End	15.3%	14.5%	12.0%	10.9%	-3.3%	-3.6%
Arbury North	7.3%	6.2%	9.1%	7.3%	1.8%	1.1%
Attleborough South West	7.8%	8.5%	6.3%	6.6%	-1.5%	-1.9%

Source: <https://www.gov.uk/government/statistics/personal-tax-credits-children-in-low-income-families-local-measure-2015-snapshot-as-at-31-august-2015>

HOUSEHOLDS IN FUEL POVERTY

In 2016, in Warwickshire, 11.1% of households were categorised as fuel poor and in N&B Borough 12.0%; the average for England was 11.1%²⁸. In Nuneaton Central, 14.0% of households were categorised as fuel poor with 13 of the 18 LSOAs in Nuneaton Central having a higher proportion of households in fuel poverty than the borough average (Figure 22). Between 2015 and 2016, the proportion of households categorized as fuel poor increased in eight of the LSOAs in Nuneaton Central.

Figure 22 – Proportion of households in fuel poverty in LSOAs in Nuneaton Central, 2015-2016

LSOA Name	Proportion of households fuel poor (%)	Proportion of households fuel poor (%)	Difference 2015 to 2016
Abbey Priory	21.3	20.1	-1.2
Abbey North	17.8	19.6	1.8
Hill Top	13.8	17.7	3.9
Attleborough North East	19.4	17	-2.4
Bar Pool East & Greenmoor	13.7	15.9	2.2
Middlemarch & Swimming Pool	16.6	15.7	-0.9
Wem Brook Bridges	16.6	14.7	-1.9
Abbey West	13.6	14.4	0.8
Wem Brook East	14.0	14.3	0.3
Riversley	14.3	14.2	-0.1
Abbey South	14.4	13.9	-0.5
Attleborough Central	11.9	13.2	1.3
Abbey Town Centre	13.5	13.1	-0.4
Arbury George Eliot	10.0	12	2.0
Arbury Heath End	11.3	10.9	-0.4
Arbury North	10.6	9.9	-0.7
Attleborough North West	9.4	8.7	-0.7
Attleborough South West	5.6	6.8	1.2
Nuneaton Central	13.8	14.0	0.2

Source: Department for Business, Energy & Industrial Strategy, 2018

CAR OWNERSHIP

In 2011, households in Nuneaton Central were less likely to own a car than households in any of the other JSNA areas; 30% of households - did not own a car²⁹. The LSOAs with the highest proportion of households with no car were Abbey Town Centre (50%), Riversley (44%), Middlemarch & Swimming Pool (42%), Attleborough North West (41%) and Abbey North (41%). Persons of working age in Nuneaton Central were more likely to travel to work on foot than all but one of the other JSNA areas; 10.9% walked to work compared to 6.9% in Warwickshire.

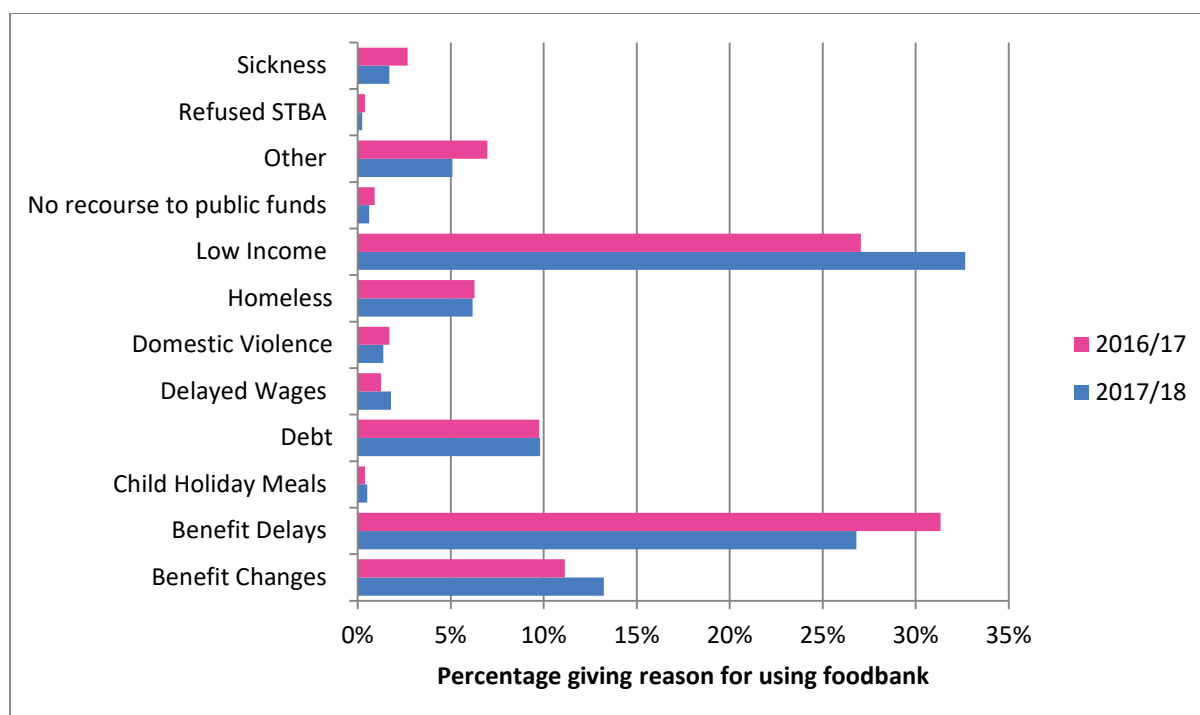
FOOD POVERTY

Nuneaton Foodbank (<https://nuneaton.foodbank.org.uk/>) opened in 2013. It is part of a nationwide network of foodbanks, supported by The Trussell Trust and funded by local churches and community groups. It has four locations within Nuneaton: Manor Court Baptist Church in Manor Court Road and Holy Trinity Church in Attleborough are within the Nuneaton Central JSNA area.

In 2017/18, the Nuneaton Foodbank distributed just over 37 tonnes of food to 2,761 adults and 1,517 children (4,278 individuals)³⁰. This was an increase from 2016/17 when almost 31 tonnes of food were distributed to 2,319 adults and 1,565 children (3,884 individuals). Between 1st April 2018 and 21st September 2018, 1,147 adults and 515 children (1,662) individuals were fed. The main crisis which caused the client to use the foodbank in 2017/18 was low income (33%), followed by benefit

delays (27%) and benefit changes (13%) (Figure 23). Since April 2018, the main causes have been benefit delays (25%), low income (24%) and benefit changes (17%).

Figure 23 – Crisis which caused use of Nuneaton Foodbank, 2016/17 & 2017/18



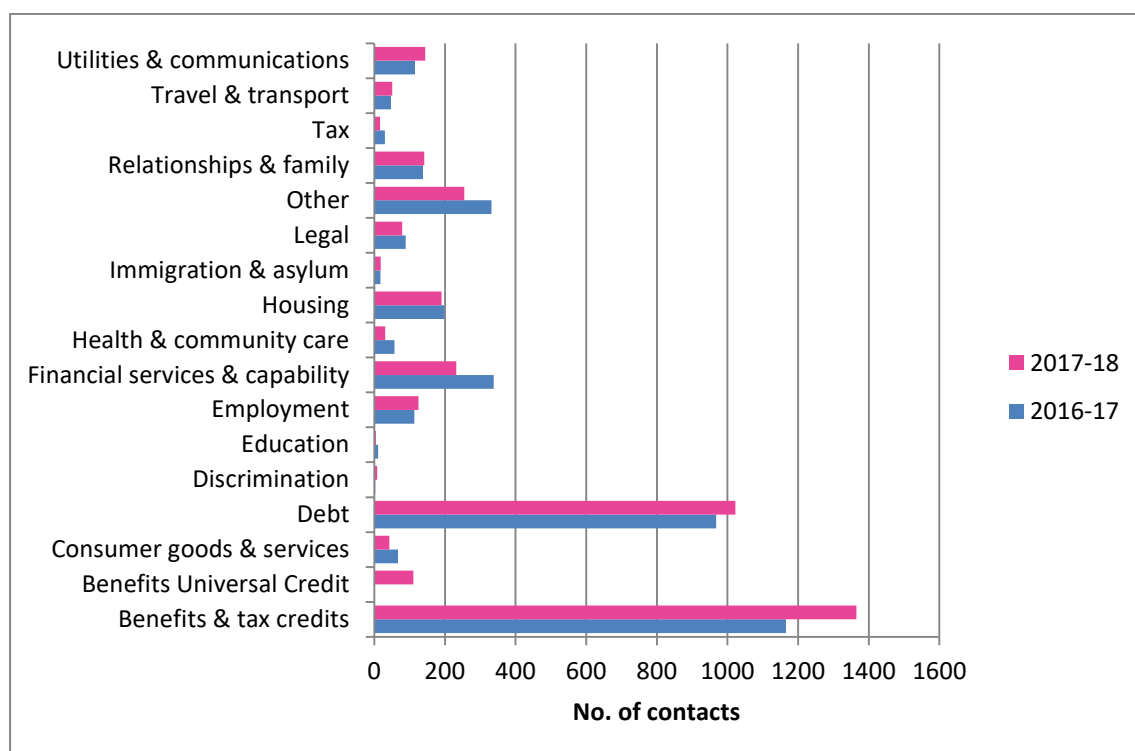
Source: Trussel Trust 2018

Local analysis of the data for 2017/18 by wards shows that, of the individuals using the Nuneaton foodbank, around 64% (2,670) were residents in the Nuneaton Central area with 28% (752) of these living in Abbey Ward, 20% (544) living in Bar Pool Ward, and 18% (482) living in Wem Brook Ward.

CITIZENS ADVICE DATA

Data across a two year period to March 2018 found that there was a 4% increase in the number of people living in Nuneaton Central contacting Citizen’s Advice, from 3,690 in 2016/17 to 3,836 in 2017/18³¹. This was against the Warwickshire trend which saw a 3% reduction in contacts during this period. The main reason for contacting Citizens Advice in 2017/18 for residents in Nuneaton Central was benefits and tax credits (36% of contacts, n=1,365), followed by debt (27% of contacts, n=1,022) (Figure 24) – these two areas saw noticeable increases in number of contacts between 2016/17 and 2017/18. In addition in 2017/18, a new category was added to the list of issues, Universal Credit, over one hundred residents (n=111) made contact for advice on this issue.

Figure 24 Reasons for contact with Citizens Advice by residents in Nuneaton Central



Source: Citizen’s Advice Warwickshire, 2018

Over the two year period, within the benefits and tax category, the most advice was asked about personal independence payment (22% of contacts), followed by employment support allowance (19%) and housing benefit (9%). In the debt category, the most advice was asked about council tax arrears (17%) followed by debt relief order (16%) and rent arrears (9%).

Of the 18 LSOAs in Nuneaton Central, residents in six LSOAs made almost half of the contacts with Citizen’s Advice - Abbey Town Centre (9.9% of contacts), Abbey North (9.0%), Middlemarch & Swimming Pool (8.1%), Riversley (8.0%), Abbey Priory (7.7%) and Attleborough Central (6.6%).

ECONOMY

CLAIMANT COUNT

The Claimant Count is an administrative measure of the number of people claiming benefit principally for the reason of being unemployed, using individual records from the benefit system. Claimants from the Nuneaton Central make up over 10% of claimants in Warwickshire; 11.5% in February 2018 a reduction since 2014 (Figure 25)³². Areas in Nuneaton Central where the number of claimants is higher are Abbey Town Centre (15% of claimants in Nuneaton Central), Abbey North (10%) and Riversley (10%).

Figure 25 Claimant count in Warwickshire, N&B Borough and Nuneaton Central

	February 2014	February 2015	February 2016	February 2017	February 2018
Warwickshire	6,240	3,990	3,540	3,825	5,095
Nuneaton & Bedworth	2,625	1,615	1,440	1,425	1,725
Nuneaton Central	884	515	460	445	585
% of claimants in Warwickshire	14.2	12.9	13.0	11.6	11.5

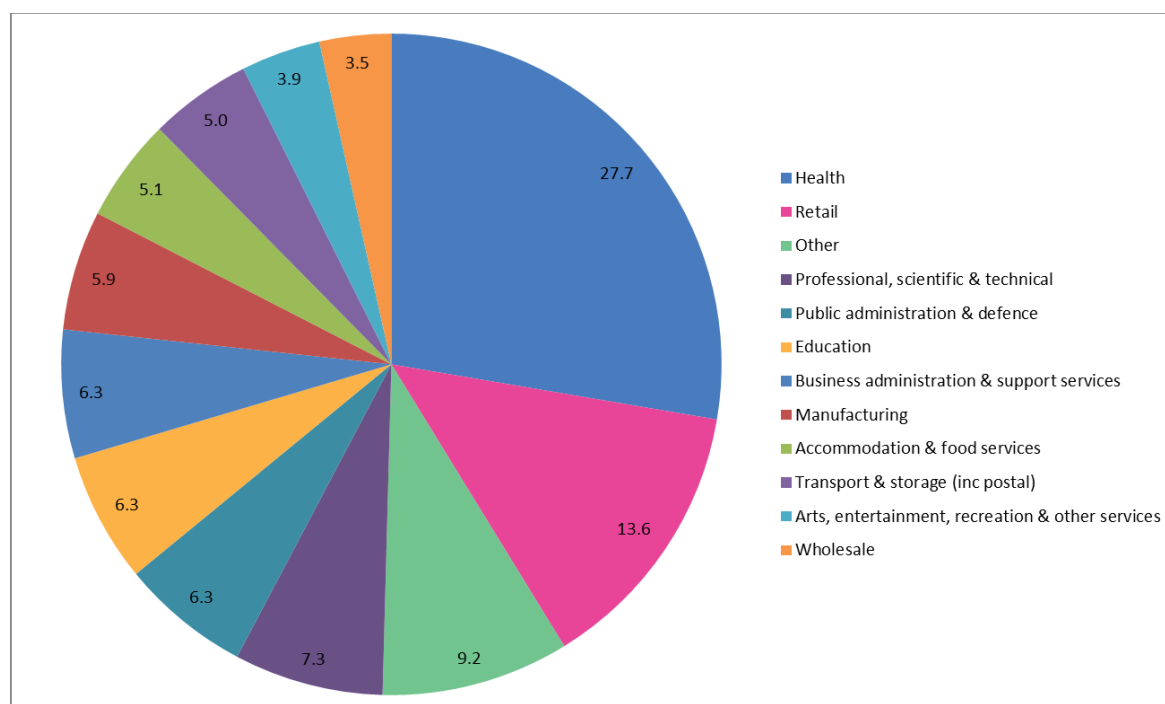
Source: DWP, Stat-Xplore

Under Universal Credit a broader span of claimants are required to look for work than under Jobseeker's Allowance. As Universal Credit Full Service is rolled out across areas in Warwickshire, the number of people recorded as being on the Claimant Count is therefore likely to rise.

EMPLOYMENT BY BUSINESS SECTOR

In 2016, the sector employing the most people in Nuneaton Central was the health sector (27.7%) followed by the retail sector (13.6%) (Figure 26)³³. It can be assumed that George Eliot Hospital in the Nuneaton Central JSNA area will provide the majority of the health sector jobs. Of the LSOAs, individuals living in Arbury George Eliot made up 66% of those working in the health sector; individuals living in Abbey Town Centre made up 79% of those working in the retail sector, 67% of those working in public administration & defence and 87% of those working in business administration & support services; and individuals living in Middlemarch & Swimming Pool made up 73% of those working in manufacturing.

Figure 26: Percentage of people employed by type of business sector in Nuneaton Central



Source: Office for National Statistics, Business Register and Employment Survey 2016

In 2011, the highest proportion of people employed in Nuneaton Central were categorised as working in elementary occupations (18.4%) compared to 12% in Warwickshire³⁴. The smallest proportion (7.4%) were categorised as managers, directors and senior officials; this compared to 12% in Warwickshire.

EDUCATION

In January 2018, there were 4,813 children and young people residing in Nuneaton Central attending state-funded nurseries, schools and colleges in Warwickshire.

EARLY YEARS - GOOD LEVEL OF DEVELOPMENT

In 2017, 4-5 year olds living in Nuneaton Central were less likely to achieve a good level of development (GLD) at the end of reception year than those living in Warwickshire or N&B Borough³⁵. However, those eligible for a free school meal were more likely to achieve a GLD and the percentage of children achieving a GLD increased since 2016 (Figure 27).

Figure 27 Percentage of aged 4-5 year olds achieving a Good Level of Development

	2016			2017		
	All children %	Eligible for a FSM %	Not eligible for a FSM %	All children %	Eligible for a FSM %	Not eligible for a FSM %
Nuneaton Central	64.3	42.9	67.4	68.3	58.1	69.6
Nuneaton & Bedworth Borough	66.3	51.4	68.5	67.8	53.1	69.9
Warwickshire	70.8	48.6	72.5	72.3	56.0	75.4

Source: Department for Education, 2017

KEY STAGE 2 - EXPECTED STANDARD IN READING, WRITING & MATHS

In 2017, 10-11 year olds in Nuneaton Central were less likely to achieve the expected standard in reading, writing and maths at the end of KS2 than those living in Warwickshire (Figure 28)³⁵. However, those eligible for a free school meal were more likely to achieve the expected standard and the percentages achieving this have improved since 2016.

Figure 28 Percentage of aged 10-11 year olds achieving the expected standard in Reading, Writing and Maths

	2016			2017		
	All children %	Eligible for a FSM %	Not eligible for a FSM %	All children %	Eligible for a FSM %	Not eligible for a FSM %
Nuneaton Central	54.4	35.5	65.4	57.7	44.3	64.5
Nuneaton & Bedworth Borough	50.2	31.7	59.3	58.7	44.1	65.2
Warwickshire	57.5	37.9	63.5	62.0	42.0	68.0

Source: Department for Education, 2017

KEY STAGE 4 - STUDENTS ACHIEVING THE NEW KEY STAGE 4 MEASURES: 9 TO 5 (STRONG PASS) IN ENGLISH & MATHS

In 2017, the proportion of 15-16 year olds achieving a strong pass (9 to 5) in English and maths was lower in Nuneaton Central than in Warwickshire (Figure 29)³⁵. Again those young people eligible for FSM did better in Nuneaton Central than in Warwickshire.

Figure 29 Percentage of 15-16 year olds achieving a strong pass in English and maths

	2017		
	All children %	Eligible for a FSM %	Not eligible for a FSM %
Nuneaton Central	39.0	25.3	45.2
Nuneaton & Bedworth Borough	36.0	20.6	41.8
Warwickshire	47.2	22.7	52.7

Source: Department for Education, 2017

SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)

In January 2018, 3.2% (n=143) of children residing in Nuneaton Central attending a state funded school in Warwickshire had an education, health and care plan (EHCP)³⁵. This was slightly higher than the Warwickshire average (3.0%) and made up 6.9% of all children living in Warwickshire with an EHCP; the fifth highest of the 22 JSNA areas (range 1.9% - 9.1%). The most common primary SEND need resulting in an EHCP was autistic spectrum disorder (ASD) accounting for 27.3% of EHCPs in Nuneaton Central, followed by moderate learning difficulty (15.4%), severe learning difficulty (14.7%), speech, language & communication needs (14.0%) and social, emotional and mental health (14.0%).

ABSENCE

Since the 2015/16 academic year a pupil has been classified as a persistent absentee if they miss 10% or more of their possible sessions. In 2016/17, 10.9% of school pupils residing in Nuneaton Central were persistently absent (in 2015/16 the proportion was 11%)³⁵. This was the 6th highest proportion across the 22 JSNA areas (range 5.5% to 13.5%); the Warwickshire average was 9.2%. The LSOAs in Nuneaton Central that had the highest proportions of persistent absenteeism were Hilltop (19%), Middlemarch & Swimming Pool (18%), Abbey Town Centre (18%) and Attleborough Central (13%).

OTHER EDUCATION DATA

In the 2017/18 academic year, there were a higher proportion of children registered as eligible and claiming for a free school meal in Nuneaton Central (13.1%) than in N&B Borough (12.5%) and in Warwickshire (9.2%)³⁶. A smaller proportion (68%) of children living in the Nuneaton Central area attended a school that was judged to be 'good' or 'outstanding' by Ofsted (N&B Borough - 73%, Warwickshire – 85%).

QUALIFICATIONS – ADULT POPULATION

In 2011, a higher proportion of the adult population in Nuneaton Central, almost 30%, had no academic or professional qualifications compared to the N&B Borough and Warwickshire adult populations (28% and 21.6% respectively) (Figure 30)³⁷. They were also less likely to have a degree or above (Level 4 qualification) - 16.4% compared to 18.6% of the population of N&B Borough and 28.8% of adults in Warwickshire.

Figure 30 Highest level of qualifications in adult population in Nuneaton Central (2011)

	No qualifications	Highest level of qualification: Level 1 qualifications	Highest level of qualification: Level 2 qualifications	Highest level of qualification: Apprenticeship	Highest level of qualification: Level 3 qualifications	Highest level of qualification: Level 4 qualifications and above	Highest level of qualification: Other qualifications
Nuneaton Central	29.9%	16.1%	16.3%	3.8%	11.4%	16.4%	6.0%
Nuneaton & Bedworth Borough	28.0%	15.6%	16.4%	4.8%	11.6%	18.6%	5.0%
Warwickshire	21.6%	12.9%	15.2%	4.1%	12.4%	28.8%	4.9%

Source: Census (2011) ONS Crown Copyright Reserved [from Nomis on 26 March 2018]

SOCIAL CARE

ADULTS SOCIAL CARE

In 2017, 3.5% (n=823) of the adult population in Nuneaton Central were active users of social care, higher than the proportion in N&B Borough and Warwickshire, and the highest of all the JSNA areas (Figure 31)³⁸. This has been the case between 2015 and 2017. The highest number of new assessments was also completed in the Nuneaton Central area in 2017 compared to the other JSNA areas (402 new assessments – 1.7% of the adult population compared to 1.1% of the population across Warwickshire).

Figure 31: Percentage of population (18+) who are active users of social care (2017)

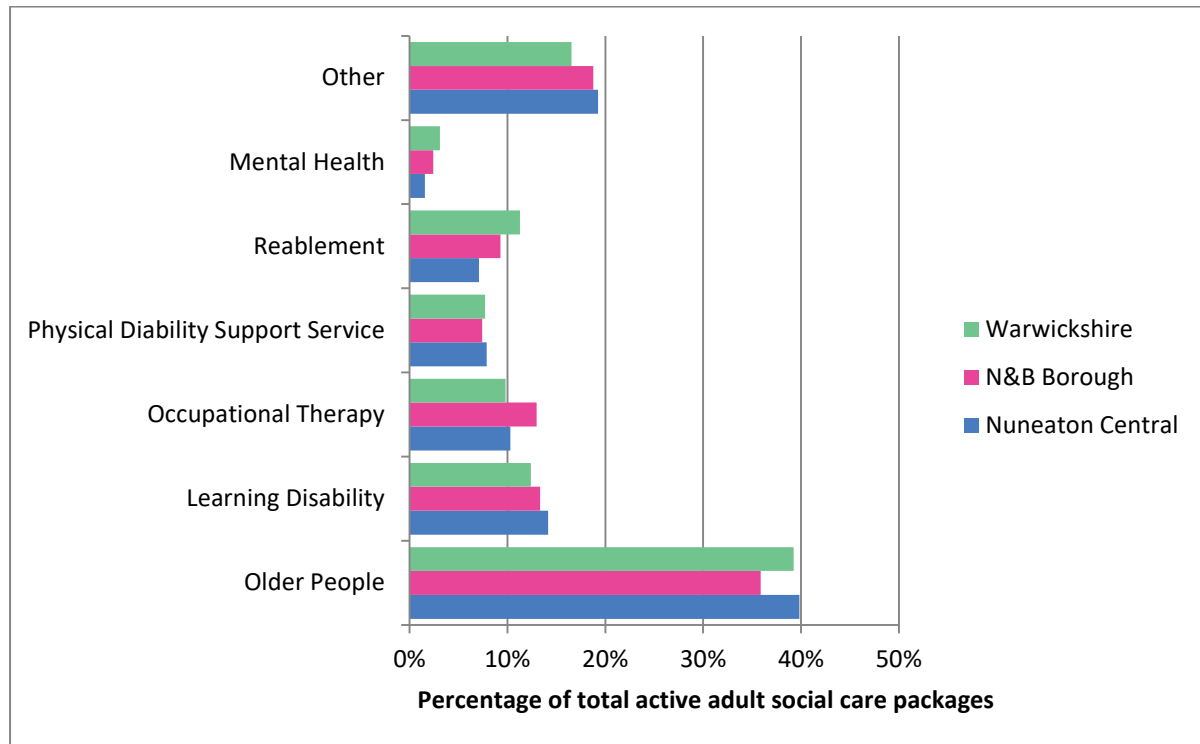
	Active Service Users (%)			Residential (%)			Community (%)			Low Level Services (%)		
	2015	2016	2017	2015	2016	2017	2015	2016	2017	2015	2016	2017
Nuneaton Central	3.6	3.6	3.5	0.9	0.9	1.1	2.0	2.0	2.0	0.9	0.9	0.8
Nuneaton & Bedworth	2.6	2.6	2.7	0.5	0.5	0.6	1.5	1.5	1.5	0.8	0.7	0.7
Warwickshire	2.3	2.3	2.3	0.5	0.4	0.5	1.4	1.2	1.4	0.6	0.5	0.5

Source: WCC Insight Service, 2018

In 2017, in the Nuneaton Central area, there were 904 active adult social care packages. The majority of these were for older people (40%) - a similar proportion to Warwickshire (39%) (Figure 32). Nuneaton Central had a slightly higher proportion of residents with an active package for learning disability than the Warwickshire average (14% vs 12%) but the area with the biggest

difference was reablement (a service, usually delivered in the home, which is offered to people with disabilities and those who are frail or recovering from an illness or injury) with 7% of packages for this in Nuneaton Central compared to 11% in Warwickshire.

Figure 32 Percentage of adult social care packages active by service area (2017)



Source: WCC Insight Service, 2018

CHILDREN'S SOCIAL CARE

Children Looked After (CLA)

At 31st March 2018 there was a higher rate of CLA in Nuneaton Central than in N&B Borough and Warwickshire, with the rate increasing from 104 per 10,000 children at 31st March 2017 to 118 per 10,000 children at 31st March 2018 (Figure 33)³⁹. Across the JSNA areas at 31st March 2018, the rate of CLA ranged from 15 per 10,000 to 124 per 10,000, with Nuneaton Central having the 2nd highest rate of the 22 JSNA areas (Nuneaton Common and West JSNA area had the highest rate). At 31st March 2018, the LSOAs within Nuneaton Central with the highest rates of CLA were Middlemarch & Swimming Pool (569 per 10,000), Abbey North (308 per 10,000), Attleborough North West (191 per 10,000), and Abbey Town Centre (190 per 10,000).

Figure 33: Numbers and rates of Children Looked After

	Number and rate of Children Looked After (at 31/3/ 2017) ^a			Number and rate of Children Looked After (at 31/3/2018) ^b		
	No.	Total no. of children in area	Rate per 10,000 of child population	No.	Total no. of children in area	Rate per 10,000 of child population
Nuneaton Central	68	6,569	103.52	78	6,615	117.91
Nuneaton and Bedworth Borough	247	27,203	90.80	249	27,403	90.87
Warwickshire	599	112,662	53.17	630	113,146	55.68

^a there were 698 CLA but Asylum Seekers do not have an originating address resulting in 599 matched to LSOA data, ^b there were 711 CLA but Asylum Seekers do not have an originating address resulting in 630 matched to LSOA data Source: WCC Insight Service, 2018, ONS mid-2016 population estimates

Child Protection Plan

At 31st March 2017 the rate of children subject to a child protection plan (CPP) was higher in Nuneaton Central than in N&B Borough and Warwickshire³⁹. However, at 31st March 2018 the rate was less than in both N&B Borough and Warwickshire (Figure 34). Across the JSNA areas at 31st March 2018 the rate of children subject to a CPP ranged from 3.38 per 10,000 to 132.82 per 10,000, with Nuneaton Central having the 9th highest rate of the 22 JSNA areas.

Figure 34: Numbers and rates of Children Subject to a Child Protection Plan

JSNA Name	Number of Children subject to a Child Protection Plan to 31/3/2017 ^a			Number of Children subject to a Child Protection Plan 31/3/2018 ^b		
	No.	Total no. of children in area	Rate per 10,000 children	No.	Total no. of children in area	Rate per 10,000 children
Nuneaton Central	40	6569	60.89	28	6615	42.33
Nuneaton & Bedworth Borough	143	27203	52.57	162	27403	59.12
Warwickshire	433	112662	38.43	526	113146	46.49

^a there were 3 children with a CPP who do not have a current address / current address did not match a LSOA resulting in 433 matched to LSOA data ^b there were 38 children with a CPP who do not have a current address / current address did not match a LSOA resulting in 526 matched to LSOA data Source: WCC Insight Service, 2018, ONS mid-2016 population estimates

Child in Need Plan

At 31st March 2018 there were 280 children subject to a Child in Need plan residing in the Nuneaton Central area, a rate of 423 per 10,000 children³⁹. Across the JSNA areas at 31st March 2018 the rate of children subject to a Child in Need Plan ranged from 146 per 10,000 to 549 per 10,000, with Nuneaton Central having the 2nd highest rate of the 22 JSNA areas. At 31st March 2018, the LSOAs within Nuneaton Central with the highest rates of children subject to a Child in Need plan were Middlemarch & Swimming Pool (1,050 per 10,000), Abbey North (846 per 10,000), Abbey Town Centre (798 per 10,000), and Wem Brook Bridges (588 per 10,000).

Young People aged 18-21 receiving a service from Leaving Care

At 31st March 2017 and 31st March 2018, a higher percentage of 18-21 years old in Nuneaton Central were receiving a service after leaving care than in N&B Borough and Warwickshire reflecting the higher rate of CLA in Nuneaton Central (Figure 35)³⁹. These are services and support in relation to health and wellbeing; relationships & keeping safe; education and training; employment; accommodation; and participation in society.

Figure 35: Number and percentage of 18-21 year olds receiving a service from Leaving Care

	Young People aged 18-21 receiving a service from Leaving Care at 31/3/2017 ^a			Young People aged 18-21 receiving a service from Leaving Care at 31/3/2018 ^b		
	No	Total no. 18-21	% of child population	No	Total no. 18-21	% of child population
Nuneaton Central	30	1062	2.82%	24	1036	2.32%
Nuneaton & Bedworth Borough	69	4,210	1.64%	56	4,088	1.37%
Warwickshire	165	18,451	0.89%	130	18,393	0.71%

^aUsing Main Current address; there were 165 out of 306 Care Leavers that had a postcode matching to LSOA data ^bUsing Main Current address; there were 130 out of 279 Care Leavers that had a postcode matching to LSOA data Source: WCC Insight Service, 2018, ONS mid-2016 population estimates

Early Help

In the period 1st April 2017 to 31st March 2018 there were 60 Early Help Single Assessments (EHSA) initiated in Nuneaton Central, a similar number to the same period in the previous year when 57 were carried out³⁹. The LSOAs with the highest number of EHSAs initiated in 2017/18 were Middlemarch and Swimming Pool (n=8), Abbey Town Centre (n=7), Abbey North (n=6) and Attleborough North East (n=6). The number of open Early Help Family Support Worker cases increased from 9 in 2016/17 to 15 in 2017/18.

Priority Families

Between 1st April 2015 and 31st March 2018 (3 years) there were 184 priority families identified in the Nuneaton Central area; a rate of 6.15 priority families per 1,000 population, higher than the Warwickshire average and the 5th highest rate of the JSNA areas (range 1.52 to 8.20 per 1,000) (Figure 36)⁴⁰. Priority families are families that have at least two of the following criteria: parents and children involved in crime and anti-social behaviour; children who have not been attending school regularly; children who need help (in need or subject to a Child Protection Plan); adults out of work or at risk of financial exclusion and young people at risk of worklessness; families affected by domestic violence and abuse; and parents and children with a range of health problems.

Figure 36: Number and rate of priority families

	Population (mid-2016)	Attached ^a	Claimed & Attached ^b	Total No. of priority families	Rate per 1,000 population
Nuneaton Central	29,906	131	53	184	6.15
Nuneaton & Bedworth Borough	127,019	559	229	788	6.20
Warwickshire	556,750	1522	953	2484	4.46

^aAttached = Families attached to the programme ^b Attached and Claimed = Families that have been attached to the programme and that have been successfully claimed.

Source: WCC Insight Service, 2018, ONS mid-2016 population estimates

COMMUNITY SAFETY

ROAD SAFETY

In Nuneaton Central, in 2017, there were 68 road traffic accidents (8 classified as fatal or serious and 60 classified as slight), a rate of 2.27 per 1,000 population⁴¹. This was lower than the Warwickshire average (2.46 per 1,000) and was a reduction on the previous year (73 accidents, 2.44 per 1,000). The LSOA with the highest rate of road traffic accidents was Abbey Town Centre (10.58 per 1,000 population) in contrast to Attleborough South West with a rate of 0.6 per 1,000 population.

ACCIDENTAL DWELLING FIRE INCIDENTS

In the two years, 2016-2017, there were 20 accidental dwelling fire incidents in the Nuneaton Central area, a rate of 1.6 per 1,000 households, higher than the Warwickshire average and the sixth highest of the 22 JSNA areas⁴². The LSOAs within Nuneaton Central where there were the most fires were Middlemarch & Swimming Pool and Abbey South.

CRIME AND ANTISOCIAL BEHAVIOUR

During 2017, across Nuneaton Central there were a total of 4,270 crimes, a rate of 141.5 crimes per 1,000 population, higher than both the borough and county crime rates (Figure 37) and the highest rate of the 22 JSNA areas (lowest 36.1 per 1,000)⁴³. The crime rate increased in all JSNA areas in Warwickshire between 2016 and 2017. The LSOA in Nuneaton Central in 2017 with the highest crime rate was Abbey Town Centre with a crime rate of 907.2 per 1,000 population (n=1,632 crimes). Other LSOAs in Nuneaton Central with high crime rates were Abbey West (186.6 per 1,000) and Middlemarch & Swimming Pool (171.7 per 1,000 population).

Figure 37: Crime Incidents, January 2016-December 2017

	2016		2017	
	No.	Rate per 1,000 popn	No.	Rate per 1,000 popn
Nuneaton Central	3,701	123.8	4,270	141.5
Nuneaton & Bedworth Borough	9,976	78.5	11,681	90.8
Warwickshire	35,538	63.8	41,749	73.9

Sources: Crime Information System, STORM Incident System, Warwickshire Police. ONS mid-2016 & mid-2017 population estimates

Figure 38 lists the anti-social behaviour (ASB) incidents by category for the 12 month period January to December 2017. Nuneaton Central had a higher rate of total ASB incidents compared to the borough and county figures and the highest rate of the 22 JSNA areas (lowest 12.6 per 1,000)⁴⁴. Rates across Nuneaton Central, the borough and county decreased slightly compared to rates in 2016 with the majority of ASB incidents being categorised as nuisance. Abbey Town Centre LSOA had the highest rates of ASB incidents within the Nuneaton Central area (293.5 per 1,000 population) followed by Attleborough North West (84.1 per 1,000), Riversley (74.9 per 1,000) and Hill Top (69.4 per 1,000).

Figure 38: ASB incidents by category, January-December 2017

	ASB category							
	Personal		Nuisance		Environmental		Total ASB incidents	
	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000
Nuneaton Central	246	8.2	1,266	40.6	174	5.8	1,646	54.6
Nuneaton & Bedworth Borough	847	6.6	3,759	29.2	548	4.3	5,154	40.1
Warwickshire	2,616	4.6	12,231	21.7	2,045	3.6	16,892	29.9

Source: STORM Incident System, Warwickshire Police, ONS mid-2017 population estimates

The Nuneaton and Bedworth Community Safety Partnership (CSP) Strategic Assessment examining data from October 2016 to September 2017⁴⁵, concluded that the overall level of recorded crime for Nuneaton and Bedworth Borough appears to be at its highest level for the last ten years, although it is not possible to make simple comparisons due to the nature and changes in the recording process. N&B CSP priorities for 2018/19 were confirmed as a focus on: alcohol misuse, domestic violence and abuse, residential burglary, personal and nuisance ASB and reducing re-offending. A number of cross cutting themes were also identified to be monitored – vulnerability; exploitation – understanding the issues around human trafficking; hate crime; radicalisation/terrorism/PREVENT; and cyber-crime.

DOMESTIC ABUSE

In 2016/17 and 2017/18, in Nuneaton Central the rate of incidents reported to the police with a domestic marker was higher than any of the other JSNA areas and both the N&B Borough and county rates (Figure 39)⁴⁴. Rates in Nuneaton Central decreased between 2016/17 and 2017/18. In

2017/18, the LSOAs in Nuneaton Central with the highest rates of domestic abuse were Abbey Town Centre (74.6 per 1,000 population) and Middlemarch & Swimming Pool (60.8 per 1,000).

Figure 39 Rates of domestic abuse, 2016/17 & 2017/18

	2016/17		2017/18	
	No.	Rate per 1,000	No.	Rate per 1,000
Nuneaton Central	773	25.9	724	24.0
Nuneaton & Bedworth Borough	2,396	18.9	2,302	17.9
Warwickshire	7,256	13.0	7,264	12.9

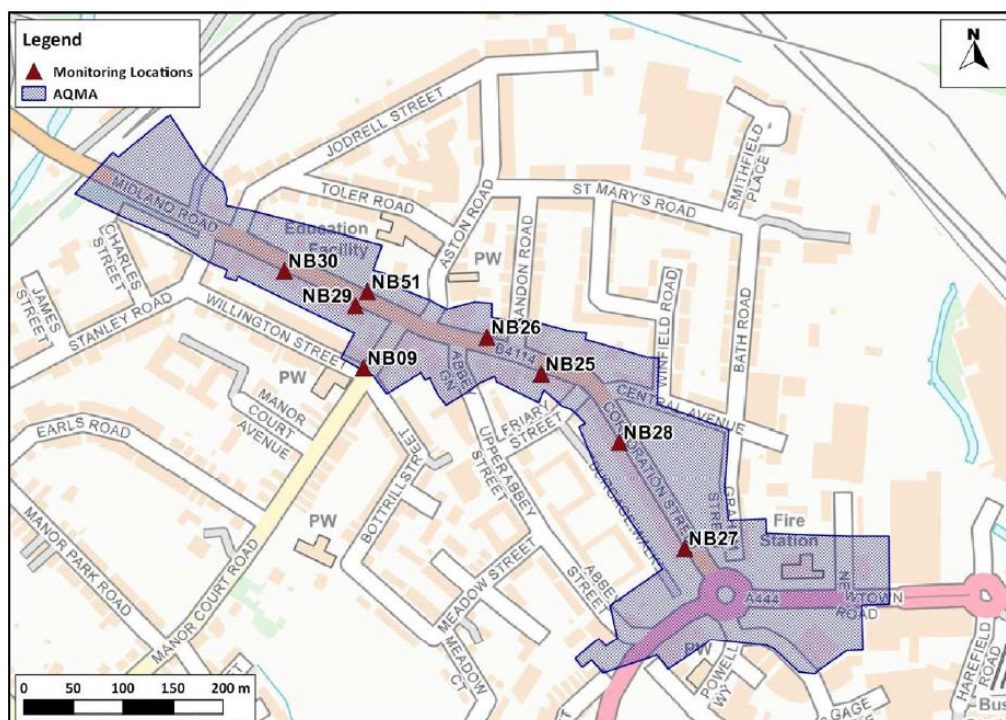
Source: Warwickshire Police STORM Incident System, ONS mid-2016 and mid-2017 population estimates

ENVIRONMENT

AIR QUALITY

Nuneaton and Bedworth Borough Council undertook non-automatic (passive) monitoring of nitrogen dioxide (NO₂) at 38 sites during 2017, 14 of these were in the Nuneaton Central area; 8 of which were within the Midlands Road/Corporation Street Air Quality Management Areas (AQMA) (Figure 40)⁴⁶. One of the air quality objectives in England is for the annual mean NO₂ concentration to be less than 40 µg/m³. In 2017, this was exceeded at two of the sites within the Midlands Road/Corporation Street AQMA - 90 Corporation Street (NB27) and 16 Midland Road (NB29). It is thought that the exceedance of NO₂ is predominantly due to emissions from road traffic.

Figure 40: Monitoring sites in the Midlands Road/Corporation Street AQMA



Source: Nuneaton & Bedworth 2018 Air Quality Annual Status Report, September 2018, NBBC

The Getting West Nuneaton Moving: Bermuda Connection (2018) highway scheme which focuses on creating a direct 1.3 mile two-way highway link between West Nuneaton and Griff Roundabout may have an impact on air quality in the areas around Wem Brook and Arbury. A health impact assessment carried out in 2018⁴⁷ concluded that there will be specific roads which will experience an increase in traffic volume, particularly at peak time. This may have an impact on the health and wellbeing of the residents of around 127 properties within Arbury ward. The main impacts will be in relation to increased numbers of traffic on the roads which could cause an increase in air and noise pollution and associated health conditions. However, within Wem Brook ward, there is expected to be a shift in road use, as volume reduces along the B4113, but increases along St. George's Way. This may alleviate congestion concerns, and could contribute towards improving the health outcomes within the ward, particularly if opportunities for active travel are supported.

COMMUNITY ASSETS

It is difficult to keep an up-to-date list of local assets, particularly when many projects are short term and times or location of events can change. In December 2018, research and information gathering was undertaken in order to identify current community assets within the Nuneaton Central JSNA area.

Figure 41: Count of community assets by theme in Nuneaton Central, December 2018

Theme	Count
1 - Children & Families	9
2 - Young People	10
3 - Older People	11
4 - Community Venues & Meeting Points	18
5 - Community Organisations & Social Groups	11
6 - Leisure & Recreational Activities	16
7 - Advice & Support	11
8 - Community Cafes & Foods	3
9 - Health & Wellbeing	15
10 - Education & Learning	4

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). Nuneaton Central's community assets are listed in Figure 41 and presented in a suite of ten maps in Appendix A. Descriptions of the community asset categories can be found in the glossary document.

LOCAL KNOWLEDGE

The following section includes data and information from local residents and stakeholders to highlight the health and wellbeing needs of people living in Nuneaton Central. 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.

SURVEY

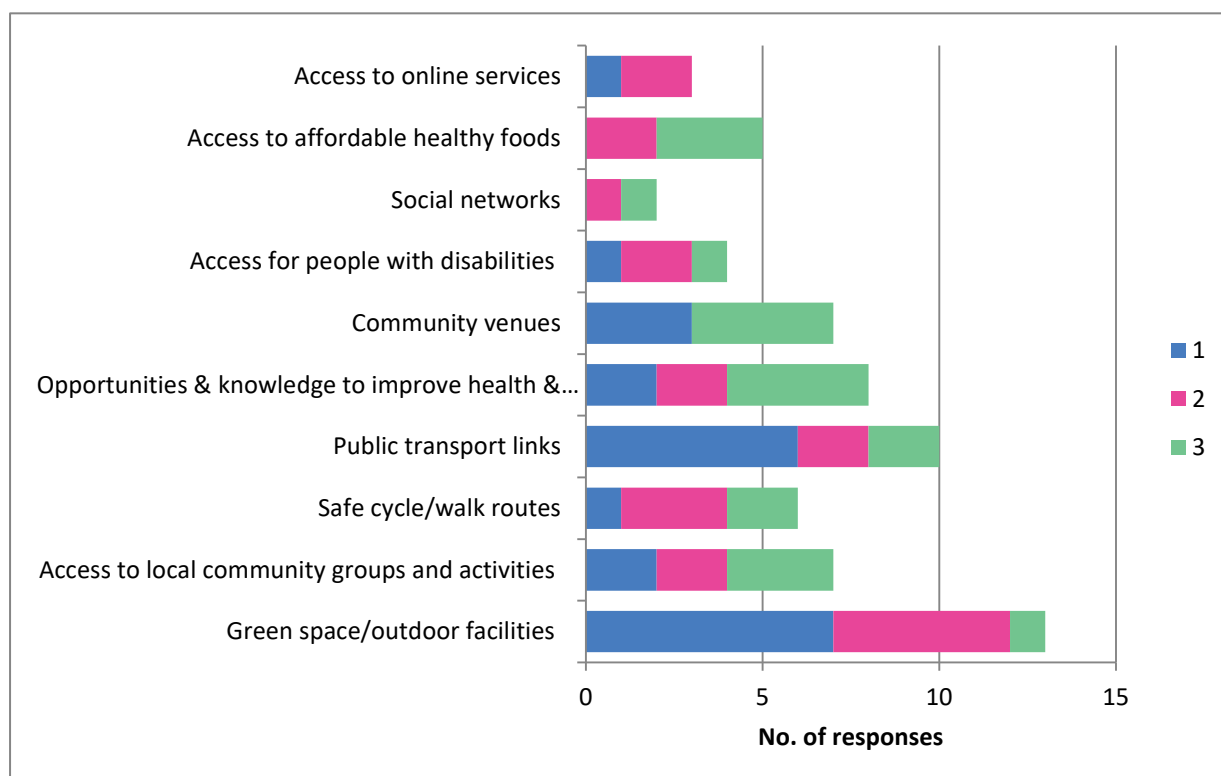
This section presents the findings of a Joint Strategic Needs Assessment survey administered to residents living in Warwickshire. Between 1st June 2018 and 16th November 2018, 574 responses were received to the survey of which 15.5% (89) were from residents living in Nuneaton & Bedworth Borough and 4.2% (24) specifically from residents living in Nuneaton Central. A summary of the findings for residents in Nuneaton Central are presented below – characteristics of people completing the survey and a full analysis are presented in Appendix B.

Residents were asked which they felt are priority areas for health and wellbeing in their local area. They were given a variety of options and were able to select each that applied. The five responses that had the highest percentage of responses were:

- Support for those with Long-term health conditions (63%, n=15)
- Parks and green spaces (58%, n=14)
- Promoting mental health and wellbeing (58%, n=14)
- Reducing substance misuse (58%, n=14)
- Community activities & opportunities to develop social networks (55%, n=13)

Residents were asked to identify the top 3 things they valued about the local area/local community which supports positive health and wellbeing (Figure 42). Green space and outdoor facilities was listed by the most respondents (54%, n=13) respondents as being one of the top three things they valued about the local area which supported positive health and wellbeing with 7 respondents ranking this as the thing they valued most. Public transport links was the next most common response with 42% (n=10) of respondents giving this as one of the top three things they valued with 6 respondents ranking this as the thing they valued most.

Figure 42 Responses to the question “What are the top 3 things that you value about the local area/local community which support positive health and wellbeing?”



A further open text question was asked what 3 things could be better in your local area to improve health and wellbeing. Areas for improvement that were mentioned most frequently were:

- A cleaner environment
- More outdoor activities and facilities
- Quicker and easier access to health services
- Better health and well-being awareness

STAKEHOLDER EVENTS

A stakeholder event was held at All Saints Church Hall on 12th September 2018. A presentation was given outlining some of the key data for Nuneaton Central followed by table top discussions on the data – overall impressions, what’s missing and emerging issues. This was followed by table top discussions focussing on:

- Deprivation (home ownership, child poverty, financial inclusion) and Regeneration (planning and transport)
- Mental health and wellbeing
- Children and young people (early years, education, young mothers) SoH can support with engagement with young mothers group
- Living with long term conditions – self management, CVD, COPD, support for families, presenting too late, screening uptake is low

The key discussion areas from this meeting are listed below:

General

- Requests for data on a number of areas that weren't presented at the meeting - pregnancy loss; carers, especially those not registered or recognised; suicides - linking to age, gender, aspirations; screening take-up; employment, unemployment and claimants; substance use/abuse; pharmacy data - type of medication most prescribed, e.g. methadone, antidepressants etc.; eviction, rent arrears, homelessness etc.
- Adult carers - lack of support and information available, needs of carers of people with mental health diagnosis; lack of signposting and social isolation
- Communications - gaps in community service
- Why has there been no change and improvement in the stats? What prevention measures are in place and what is working/making a difference. Interested in trends. Need to benchmark to assess effectiveness of interventions.
- Early education intervention – pre-birth planning / support with parents
- Transient residents - no sustainability in residents lives
- Data shows a high level impersonal picture of Nuneaton Central. There is a need to capture resident's views of data, but how do we reach them/involve them enough to work out solutions together. Need to design services together with the residents but respect those that don't wish to engage.
- There's a sense of a depressive response to services by some of the residents and it's a struggle to engage with people. Depression rates are underrated. Can we break down the data to understand for e.g. why people are depressed?
- Not enough extra care housing. Better communication needed to prevent future poverty - make the geography fit the community.
- School entry skills, e.g. reading, writing, speech and language, related to reduced time spent with parents.
- Lack of positives - unable to see how positives are working e.g. obesity
- Local differences within localities
- Air quality and less access to green space.
- Lower level of car ownership, so local hubs are important for family support and issues - links to food banks, suicide prevention work and P.H.I.L
- Impact of children's centre closures.
- Inappropriate emergency admissions

Mental Health and Wellbeing

- Everything impacts on mental health and wellbeing – need to consider wider determinants
- Organisations (not all) do have links to services but they are not always easy to follow as signposts.
- Referral times - people can't always choose times for appointments etc. MIND can support people in between referral and their appointment.
- Issues with cross over from CAMHS to adult
- Community links - support service would be useful and helpful. Young people need support especially around the time of school transition.
- Manor Court Baptist Church - fresh start groups (dependencies) about to launch - One to one mentoring/buddying service.
- ROSA - offer friendship groups (clients only).
- GP signposting to charities/3rd sector support could be improved. Springfield Mind support GP practices, something that needs replicating
- WCAVA have a mental health directory
- George Eliot Hospital (GEH) - looking at high intensity users. Need to know who is being targeted so that the appropriate support can be provided at the right time!

- Positive feedback from Recovery College sessions
- Crisis Team - Lack of weekend provision and thresholds too high. Stigma resulting in waiting until crisis point is reached - links also to lack of awareness and how to access support needed before crisis (lack of communication and gaps in crisis intervention).
- Training of staff in A&E required as well as 24/7 mental health crisis support in A&E (not currently available at GEH).
- Alcohol - services available won't support a person until they are sober. Both drugs and alcohol need addressing.
- Social workers are often unable to meet very severe needs so hospitals are then contacted. If there was more support there would be fewer crises. There's a big gap between first degree and 2nd degree mental health services and a large volume of low level mental health issues that won't be dealt with by current services. So training for grass roots organisations would be really beneficial.
- Some prevention work isn't getting through to some communities e.g. Gurkhas and veterans. There is a gap in local support for veterans. Coventry is currently the closest.
- There are inappropriate admissions because of the lack of capacity in services, and a requirement for social prescribing. IAPT (telephone assessment) is not always suitable and there is quite often a long waiting list.
- Dementia - concerns that dementia will reach critical mass within 10 years. Dementia Action Alliance and Dementia Friendly Communities needs to be publicised more. Diagnosis can be difficult to get but can be useful.
- Perinatal and postnatal mental health - All mums receive antenatal and postnatal contacts discussing mental health. Sophia (pregnancy loss support). New parents returning to work also require support and understanding.
- Mental health reactive care vs proactive support - what is commissioned
- Access to psychological support - waiting times, accessibility and data referrals

Deprivation

- Long standing deprivation generated from the impact of the loss of industry in the north.
- Underpinning themes - mental health and homelessness.
- There is an acceptance of life as it is with a lot of residents - low aspirations, lack of ambition and enthusiasm to progress.
- School attainment aligns with life expectancy - was making progress in schools but it is now more difficult due to academies. How do we influence and build relationships and engage with them. Need to start 'making a dent' in schools to influence future generations. Family centred approach through schools needed to tackle deprivation. Raise awareness of the importance of education etc.
- Majority of jobs available are low skilled. No large industry apart from MIRA - perceived barriers to access these jobs.
- Skill gap in IT e.g. coding.
- Problems with the ability to influence how schools are supporting young people with employment opportunities.
- There is a gap in support for carers. Support for the young but then cuts off.
- Healthy Living Network - project with schools and parents/carers etc. Head teachers bought in to the project - links with gathering data.
- Good idea to change the ethos of schools to community centres for mixed use.
- Worcester - Scheme aimed at young people. Good outcomes for improving educational attainment and aspirations
- Link between risky behaviours and deprivation. Community workers need to be supported by the JSNA.

- Neighbourhood watch - raises awareness. Expanded to other issues - environment and PCHO's work and building relationships.
- Community forums used to bring back work. Where are apprenticeships/volunteering available? Need to raise awareness. Make the unemployed aware that volunteering can count towards a job search as well as supporting the community. Have an employment one to one support service.
- Mixed age group community events - need to map as there is a gap in awareness of activities and groups taking place. Need repository of information and need to link social prescribing with all events, which will need the GPs to buy into it.
- Data from police and community safety on prevention work - do we have links?
- Need to understand the need for long term sustainability.
- Air Quality, Pollution and green spaces:
 - Cycling and walking - establish community walking networks and groups using the outdoor gym equipment.
 - Maintaining access to canals
 - Promote use to residents
 - Criminal abuse and crime happening in parks so need to improve community safety. Why are people committing crime? Link to alcohol and drug abuse

Children and Young People

- Emerging mental health concerns for children and young people
- From a GP perspective - improve signposting and information to services.
- Sure Start - removal of service has had an effect on the community and its sense of belonging.
- How can we promote the benefits of volunteering for young people and source suitable opportunities that young people would be interested in.
- Lack of affordable childcare in the area.
- Communication with young people - how do we do this? Use of social media? Are we using the correct channels to reach young people?
- "Chat health" - now in schools and proving very successful. Could this be expanded to reach young people?
- Could we extend 'Preparing for Life Skills' that looked after children might experience to help prepare for independent work - encourage young people to volunteer.
- Community development now focusing on older people. WCC Parenting Programmes - how can we promote them and should we have young people at the meetings.
- Learning lessons from promotion of 'Tour of Britain'. Feel good factor from something happening in Nuneaton.
- Promote positive facilities already happening.
- Daily Mile initiative in schools - getting children active and mobile. Can lead to good conversations on wellbeing with the children.
- National organisation 'Transforming Lives for good' - Nuneaton, Abbey Ward, Manor Court Baptist Church.
- Libraries working with families to help children prepare for school.
- Underweight children and exclusion rates missing from data.
- Sycamore counselling service, 5-18 yr olds. Nuneaton based. Steady rise in self referrals. Issues include anxiety, anger, stress and social media. Six schools contracted. Engages and influences family factors.
- Young Offender Scheme - numbers have dropped
- Limited children services at GEH. Many parents can't get to UHCW because of lack of transport.

Long Term Conditions

- Keeping people out of hospital and keeping them independent and in their own homes with proper support in place - frail and elderly pathways need investment in a different way. Dependence on good will of family, friends and carers. Support and education is needed for carers.
- Hospitals are a place of safety for many who don't actually need a bed for medical treatment.
- Quality needs to be kept high amongst statutory and private providers of care. For private care that is being charged for it is reasonable to have a certain expectation and be able to make demands.
- Different models of care for the elderly need to be looked at - more innovative, cohesive, engaged.
- People are frightened by the idea of screening. There is a stigma attached to the service and diagnosis. People are afraid to ask for help because of pride or a potential diagnosis. Sometimes the information is too clinical and not really 'accessible' for most. They can be given too much, too fast and go away not really understanding anything they have been told, and pride won't let them enquire further.
- There's a struggle and a lack of ability to sustain community based providers (finance, volunteers, members and information). More strength and potential in 'Social' health groups.
- Promotion and independence - how much information is given on hospital discharge about community based (VCS) services.
- Appropriate services for younger people with long term conditions
- Value to active signposting such as social prescribing - buddy/peer system? Buddie and navigators already in place
- Access to physiotherapy/appropriate exercise - needs to be easier to access and more sustained activity. More signposting to Fitter Futures and widening of referral pathway.
- Why do people ignore and present symptoms so late? How can this be promoted and where? Information in pharmacies, surgeries, community centres etc. There is a lack of understanding around diagnosis and the management of it, especially with BME communities, including travellers. Culturally sensitive - correct information needs to come from trusted sources rather than just from word of mouth.
- Lack of and limited bus services - even for those living in Central Nuneaton
- Type 2 diabetes - ethnicity, lifestyle, access to certain foods. Link to locally accessible food outlets / fast food / access to healthy alternatives. Some supermarkets (Tesco) offer free healthy snacks to children whilst parents shop e.g fruit.
- Lower income families may be buying food that lasts longer or can be frozen, rather than buying fresh food that has a limited shelf life. More education is needed at school around healthy food options (learned behaviour from peers).
- Are 'Professionals' prepared to support 'real' communities properly - hospital, centric education
- There is a need for a central directory of knowledgeable services to make active - Social prescribing
- 999 call out data - correlation between hospital admissions and obesity (all the secondary impact and conditions could link back to healthy weight management).

A fuller report and details of further engagement carried out in Nuneaton Central can be found in Appendix C.

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