

JOINT NEEDS ASSESSMENT WEST SOMERSET



NHS
Somerset

Background

In 2010 NHS Somerset and Somerset County Council, with support from West Somerset District Council and other organisations and agencies, undertook an analysis of health and social care within the district of West Somerset. This work follows on from a county-wide Joint Strategic Needs Assessment (JSNA) produced in 2008 and to be updated in 2011.

The needs assessment describes factors that affect the health and wellbeing of local people and provides an important source of information and comment to those responsible for providing, improving

and commissioning services. It gives a better understanding of local issues and an opportunity for both the community and agencies to make a difference to the way services are provided.

This is a summary of some of the information contained in the full Joint Needs Assessment (JNA) for West Somerset (details on the back cover) and includes recommendations and comments from consultations undertaken by Somerset Local Involvement Network (LINK), Somerset Youth Volunteering Network and with members of two patient participation groups.

Population by age

% of population in each age group	Exmoor	Mid-West Somerset	Minehead	Quantocks	Watchet & Williton	West Somerset	Somerset	England
Under 5	3.2	3.3	3.9	3.7	5.0	3.9	5.3	6.2
5-15	9.0	9.7	10.3	9.9	12.6	10.3	12.5	12.7
Working age (Men and women 16-64)	50.8	52.6	50.4	51.2	52.1	51.2	57.3	61.9
60 / 65 – 74	21.3	21.9	17.4	22.2	18.0	19.6	14.5	11.4
75+	15.5	12.3	17.7	12.7	12.1	14.8	10.2	7.84

West Somerset Population Projections

Figures in '000s	2008	2018	2028
All Ages	35.6	36.7	39.2
Under 15	4.6	4.5	4.6
15-29	4.9	4.4	4.3
30-44	4.8	3.7	4.2
45-59	7.6	8.0	6.7
60-74	8.4	9.7	10.6
75+	5.2	6.5	8.9

Key Issues

Ageing population

One in three people are aged 65 or more and within twenty years this is projected to be almost one in two

Affordable housing

Median house prices are 10% more than the county average but earnings are relatively low

Accessibility

Quick access to hospitals by public transport is difficult for many

Deprivation

Based on the Index of Multiple Deprivation, the area is more deprived than the county average, mainly due to barriers to housing and services

Health

Prevalence of depression and learning disabilities is high compared with Somerset as a whole.

Alcohol consumption

Rates of dangerous daily alcohol consumption are above the national average and there is a relatively high rate of alcohol-related admissions

Summary

West Somerset is predominantly rural covering an area of just over a fifth of the county. However, the population of 35,600 is dispersed and accounts for less than 10% of the county. It has two distinctive areas – the Quantock Hills and Exmoor National Park.

Tourism is estimated to support about 15% of all employment in the district and a relatively large proportion of the working age population is self-employed compared with the rest of Somerset. The proportion claiming any type of benefit is slightly higher than the county average. The single largest reason for people claiming incapacity benefit and/or severe disability benefit is mental health problems.

Life expectancy in West Somerset is in line with the rest of Somerset and better than the national average. However, there are differences within the district with the area of Watchet and Williton having the

lowest life expectancy for both men and women. About a third of the population is over the age of 65 years, compared with about one in four across the county and one in five nationally. The proportion of older people is projected to increase in the future and will account for just under half the total population in about two decades.

West Somerset is relatively deprived compared with the rest of Somerset, based on the Index of Multiple Deprivation. A combination of higher than average house prices (median prices 10% more than Somerset as a whole) and relatively low earnings make affordable housing a key issue.

Access to both district and community hospitals by public transport is also a key issue with only 7% able to access their nearest district hospital within 60 minutes by public transport during weekdays and 65% able to access their

nearest community hospital within 60 minutes.

The main causes of death are cardiovascular disease and cancer in line with the rest of the county and country. West Somerset appears to have a higher prevalence of depression and learning disabilities compared with the rest of the county. Rates of smoking (although not in young women) and obesity are in general better than the national averages. However, the rates of dangerous daily alcohol consumption is higher than the country as a whole (and in line with the rest of the county).

West Somerset has a higher rate of alcohol specific admissions compared to the county average and overall the rates of alcohol related admissions are higher in West Somerset and the county compared to the national average.

What did local people say about health and wellbeing?

(these are some of the comments and observations taken from the 'Voice' section of the JNA. Direct quotes are in italics)

There is a manifest lack of knowledge about distance across many agencies and a lack of wanting to understand. Many patients from this area with hospital outpatient appointments have to stay at the hospital all day.

There was praise for practice nurses and receptionists at a local surgery and the fact that patients are able

to know so much more about their GPs now.

Drug rehabilitation services were considered limited.

Mid-wifery – a labour ward is needed at the new community hospital.

The budget for district nurse provision does not reflect how far they have to travel in the course of their work. This applies equally to the number of doctors in the practice; housecalls in the area (Exmoor) can take a doctor away for half a day or more because of the distances involved.

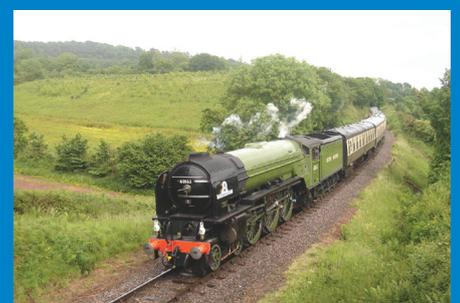
There is a huge gap in mental health services, not enough Community Psychiatric Nurses (CPNs). Rural communities are vulnerable to mental health problems.

Do enough people know about the Minor Injury Unit?

Large numbers of people live in sub-standard housing.

More local services – a place to go and have contact and people to talk to, rather than be lonely and dwell on your problems. If people do not have a job they are isolated.

A need for frequent and reliable transport links and a cheaper bus pass (especially for the under 60s).



...and what did young people say?

People always remember when young people do bad stuff, never older people.

It feels intimidating going into Blenheim Gardens day or night!

I feel threatened by people from Butlins when they've been drinking.

Drugs – Police don't seem to take much action, only one lesson on drugs and some didn't even get this.

Young people who drink and smoke will go onto harder drugs.

Teenage pregnancy – over half thought teenage pregnancy was common in the town and/or school. Nearly all said more widely available contraception and better education was needed to reduce the numbers of teenage pregnancy and some had strong opinions.

Contraception is free in places, there is no excuse.

I'd find it more embarrassing to have an 18 year old pregnant girlfriend than to get contraception.

Transport – there were many negative comments about a lack of public transport and the expense and timing of transport – affecting both social and working opportunities for young people.

We have to pay for transport, which is insane!

Not much choice of schools.

Leisure – every group/individual mentioned the lack of a decent and affordable swimming pool; many were passionate about this.

An example of 'raw data' from one of the sessions with young people in West Somerset



Photo courtesy of SYVN

Recommendations for action:

General

- Increase the number of affordable homes and improve the quality of housing stock
- Improve (access to) public transport, particularly in terms of services and timings
- Continue to improve training and employment opportunities for young people

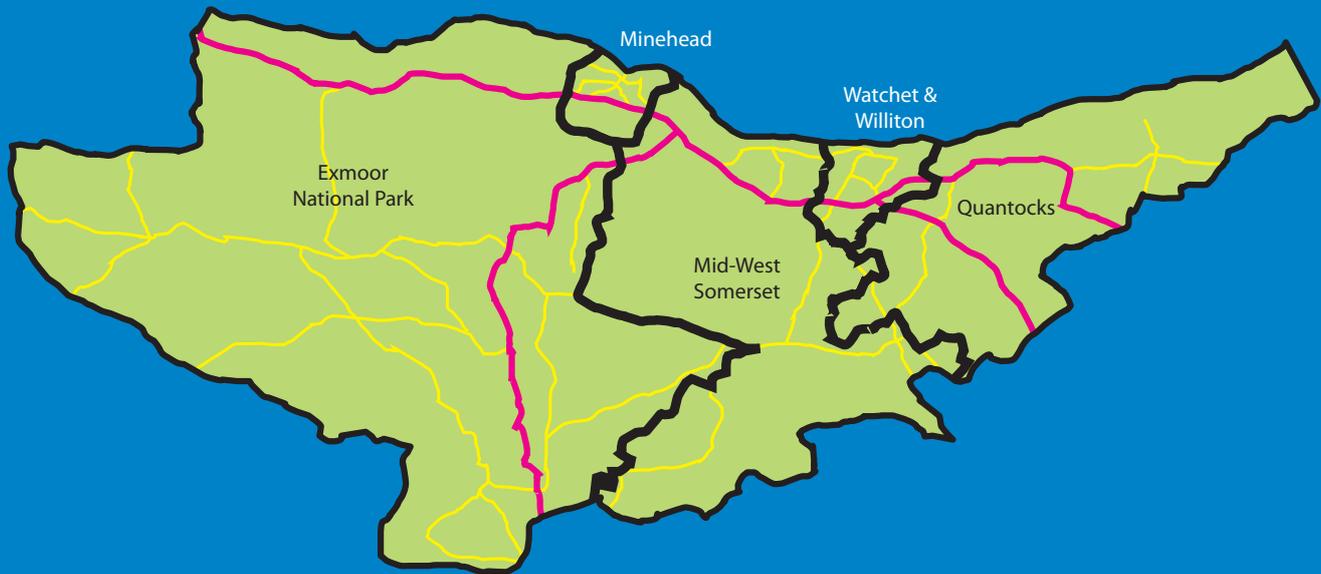
Wellbeing

- Review measures to tackle anti-social behaviour working via local community groups
- Improve access to local services by better signposting of available services through social media and relevant local facilities
- Improve leisure facilities and activities for young people

Health specific

- Undertake a review of alcohol related admissions and continue to develop service initiatives to respond to alcohol misuse
- Continue work on improving access to sexual health services
- Continue work on addressing variations in screening and immunisation uptake
- Continue with ongoing work on smoking, obesity and diabetes by developing additional capacity for smoking services (particularly focusing on young women and in light of the influx of people with Hinkley C) and improving the detection of people with diabetes to reduce the impact on cardiovascular disease and cancer
- Continue the review of out of hours services and access to local hospitals
- Undertake work to review and address barriers to dementia services access
- Undertake work to review provision of local mental health services
- Continue the review of learning disabilities services in line with need

West Somerset showing the five community areas in the Joint Needs Assessment



Useful links

West Somerset District Council
Tel: 01643 703 704
www.westsomersetonline.gov.uk

Somerset County Council
Tel: 0845 345 9166
www.somerset.gov.uk

Somerset Local Involvement Network (LINK)
Tel: 01458 254 404
www.somersetlink.org.uk

NHS Somerset
Tel: 01935 384 000
www.somerset.nhs.uk

Somerset Youth Volunteering Network
www.somersetyouth.org.uk
Tel: 01458 836 130

The full Joint Needs Assessment for West Somerset and this summary version is available online at:

**www.westsomersetonline.gov.uk
www.sine.org.uk/publications/jsna
www.somerset.nhs.uk/welcome/publications/joint-strategic-needs-assessments/**

We welcome your comments. Email: jo.purvis@somerset.nhs.uk

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