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Subject: Health profiles and priorities for Dartford, Gravesham & Swanley 2015

Classification: Unrestricted

Summary:
This paper outlines the key health needs for DGS specifically relating to the current 2014/15 health profiles

Recommendation
It is hoped that this report will provide a starting point for discussion on the health priorities that are common across DGS and will inform the HWBB in future prioritisation.

1. Background and discussion

A paper was presented by the Executive Group at the June 2015 meeting of the Health & Wellbeing Board to review the current priorities for the Board. These were agreed at the inception of the HWBB in 2013 and included:

- Obesity
- Falls
- Health Inequalities
- Demographic pressures
- Mental Health
- Teenage Pregnancy

Following discussion at the last Board, it was felt strongly by several members that addressing all of these priorities proves difficult given the complexity of some of the health conditions. It was proposed that focusing on fewer priorities, possibly even identifying a single priority on which to focus, would be more effective in improving health and wellbeing for Dartford, Gravesham and Swanley. There would clearly be a need to review priorities depending on health need, national policy and local strategies. It was also expressed as preferable to identify priorities that are common to all local authorities in DGS.

To this end, it was agreed that a paper should be produced based on the Health Profiles 2015 for each of the local authority areas plus other relevant health profiling data, analysing the key health priorities for DGS. This paper lays out the key health priorities for discussion at the Board with the intention of aiding the Board in decision making.

2. HEALTH PROFILES 2015

The Association of Public Health Observatories (APHO) produces annual health profiles for each local authority area. These provide an overall health summary for each area and identify key health inequalities (Appendices A-C). The profile for Sevenoaks does not separate out the Swanley parishes and therefore a further health profile for Swanley district
has been produced to identify specific health inequalities for the northern parishes (Kent & Medway Public Health Observatory).

The following table shows the key indicators highlighted as significantly worse than the England average on the 2015 health summaries:

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<th>Dartford</th>
<th>Gravesham</th>
<th>Sevenoaks</th>
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<tbody>
<tr>
<td>Children in poverty</td>
<td></td>
<td></td>
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<tr>
<td>Violent crime (17.2%)</td>
<td>Violent crime (17.2%)</td>
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<tr>
<td>Obese children year 6 (23.2%)</td>
<td>Obese children year 6 (19.6%)</td>
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<td>Recorded diabetes</td>
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<td>Incidence of TB</td>
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<td>Under 75 mortality rate - cardiovascular</td>
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<tr>
<td>Killed and seriously injured on roads</td>
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Reviewing this, violent crime and child obesity are clearly priorities for both Dartford and Gravesham.

2.1 Obesity

It appears that Swanley is an outlier when compared to Dartford & Gravesham in respect to child obesity as the data at Sevenoaks local authority level does not indicate child obesity as a problem. On reviewing the Swanley specific data however, it shows a different picture:

This shows that the percentage of obese children in year 6 in Swanley in 2013/14 was actually similar to that in Dartford and Gravesham (22%).
Note that some numbers for Crockenhill & West Hill and Eynsford are low and have therefore been suppressed.

Percentage of children with excess weight in Swanley 2013/14

![Graph showing percentage of children with excess weight in Swanley 2013/14.](image)

Source: NCMP

Adult obesity rates although not flagged as significantly higher than England are still concerning in that 19-25% of people in DGS are obese. There are also high levels of physical inactivity in the population which need addressing. Children of two overweight parents are more likely to develop overweight themselves and obese children are more likely to progress to be overweight adults. Hence, there is a clear need to address obesity across the population.

2.2 Alcohol specific admissions

Admissions to hospital with alcohol specific problems have been increasing in the over 18s and although not significantly different to the England average, DGS is showing a worryingly increasing trend.

![Graph showing age-standardised admission rates for alcohol specific conditions in DGS and Kent, 2006/07 – 2013/14, All Ages.](image)

Source: SUS data, ONS, KMPHO
No trend data are currently available for Swanley hence detailed ward level data are provided instead in this graph to illustrate the current admissions status. There are well established links between drug and alcohol misuse and mental health issues, either as contributory factors to mental ill health or misuse amongst those with existing mental health problems. Therefore tackling substance misuse will naturally involve addressing mental ill health in the population.

2.3 Violent Crime
A significant amount of violent crime is domestic abuse and alcohol is often a contributory factor in much violent crime for both the offender and often for the victim as well. Therefore addressing alcohol (and drug) misuse has obvious implications for tackling violent crime which has been highlighted as significant in Dartford and Gravesham (figures have not yet been collated for Swanley but it is hoped these will be tabled at the Board meeting.).

2.4 Smoking
In the South East Five Year Forward View summaries produced by Public Health England, DGS CCG is shown to have high numbers of women still smoking at the time of delivery.
There is also an increasing trend in emergency and elective admissions for coronary heart disease, hypertension and COPD in DGS and this probably reflects the high smoking prevalence in the area. Approximately 30% of residents in DGS are smokers compared to 22% of adults in the whole of England (figure taken from Health Survey for England 2012) although some wards in Swanley have figures up to 35%.

2.5 Falls
Falls were identified as a priority for the HWBB in 2013 and subsequently significant programmes have continued to support the reduction in falls in DGS as evidenced in the graph below. It appears that emergency admissions are reducing or at least plateauing.
Existing programmes such as postural stability and joint programmes with other agencies such as fire and rescue and social care will continue to be essential to ensure an ongoing downward trend.

2.6 Mental health
The prevalence of mental ill health (including dementia) in DGS is on par with Kent and slightly lower than the England average although there is significant variation across the CCG leading to health inequalities.

There are clearly significant associated issues around mental health including a propensity for patients with mental health problems to have significantly higher levels of physical ill health, in part due to failure to engage with healthy lifestyles and not accessing healthcare appropriately. Similarly the converse is true, for example, where many patients with long term conditions suffer from depression.
2.7 Teenage conceptions

Teenage conception rates are generally reducing nationally and across Kent. Although the downward trend in teenage conception rates is very encouraging there are still several wards across DGS that have high rates that need addressing. These pockets of inequality are often overlooked in the average rate calculated for the borough and therefore targeted work needs to be undertaken to tackle the issues in specific areas, for example Northfleet North, Swanscombe, Greenhithe and Swanley White Oak.

2.8 Childhood injury

DGS CCG had the highest rates of admission for 0-17s due to unintentional and deliberate self-harm in the contract year 2012/2013 and this is something that should be monitored over the next couple of years to ensure it is not the beginning of an upward trend. These high rates in DGS have been reflected in the Swanley health profile and further breakdown of these data are being undertaken. Analysis of the cause of the injuries should highlight whether this is a child safeguarding issue for the area or the result of another cause such as high levels of road traffic accidents. It is particularly marked in the Swanley St Mary’s area in the 0-4 age group with rates nearly double those of the Kent average.

![Crude rate of emergency hospital admission for any diagnosis of childhood injury per 10,000 population, ages 0-4, 2011-2013](image)

3 SUMMARY

This paper has outlined the key health needs for DGS specifically relating to the current 2014/15 health profiles and reviewing the previously identified priorities for the HWBB. A cross cutting theme for all local authorities is clearly obesity although there are also significant issues around alcohol and smoking prevalence. Childhood injury rates warrant further investigation also.

In terms of priorities, obesity, alcohol and smoking have some of the greatest impacts on health. Obesity can lead to long term conditions, premature mortality, mental ill health and smoking is a well-known risk factor in premature mortality and impacts both adults and children alike. As highlighted, alcohol can have significant impacts on mental health and violent crime prevalence. All are significant issues for the residents of Dartford, Gravesham and Swanley and are associated with health inequalities across the area.

It is hoped that this paper has provided a starting point for discussion on the health priorities that are common across DGS and will inform the HWBB in future prioritisation