

Executive Summary

EALING JOINT STRATEGIC NEEDS ASSESSMENT

EXECUTIVE SUMMARY

Background

Joint Strategic Needs Assessment (JSNA) is a partnership process to identify and understand the current and future health and well being needs of the local population leading to improved outcomes and reductions in health inequalities. The Local Government and Public Involvement in Health Act placed a duty on upper-tier local authorities and PCTs to undertake JSNA and from 1st April 2008 this became a joint statutory duty for directors of Adult Social Services, Directors of Public Health and Directors of Children and Young People's Services.

Ealing JSNA

The of the JSNA is to provide clear intelligence on the current and future health and well-being needs of all sectors of the population to inform commissioning plans and strategies. The JSNA is provides an overview of population and health trends, both actual and predicted, and considers the effect these will have on the need for local services, for example maternity services, services for older people, school places, employment opportunities or housing.

Given the complexities of health inequalities, well-being and ill-health, a range of data was analysed to give a picture of Ealing's health needs. For the purposes of this summary they have been grouped together under the following titles;

1. Population Characteristics
2. Social Economic Factors
3. Comparisons with Similar Authorities
4. Early Years and Young People
5. Adulthood
6. Older People
7. Life Expectancy and Diseases

The first three cover topics that are most associated with what Ealing is like as a place and how that impacts on health, well-being and health need. 4 to 6 address the three main life stages and specific issues that impact on those cohorts and title 7 covers life expectancy, disease and main causes of death.

Population Characteristics

According to the ONS the population of Ealing is estimated to have risen from 286,400 in 1994 to approximately 316,600 in 2009.

ONS projections suggest that, by 2020, the population will reach 334,700, with most of the increase due to an anticipated 14.5% rise in the number of people between 0 and 14 years old, closely followed by a 12.0% rise in the numbers of over 65 years of age. The increase in over 85s is expected to be 30.6%. However Ealing Council's estimate show that the population is likely to be 336,308 by 2020.

Population (000s)					
Year	0-14	15-24	25-64	65+	All Ages
2008	55.8	38.7	182.7	34.9	312.1
2020	63.9	35.1	196.5	39.1	334.7

Source: Office of National Statistics (ONS) 2008-based Sub national population projections

Black and minority ethnic (BME) communities, including individuals of mixed ethnicity, make up approximately 41.1% of the Ealing's total population, this compares to approximately 11.8% of England's population.

Social and Economic Factors

Ealing's economically active population is just above the London percentage (76% compared to 75.8%). The percentage claiming Jobseekers Allowance in Ealing is very similar to the London percentage. Income inequalities in Ealing are significant, with median income ranging from £19,150 annually in Southall Broadway to more than double that in Southfield at £39,651.

The 2010 Community Health Profiles were used to compare 32 health indicators. Ealing scored significantly worse than the England average for indicators such as, Child Poverty, Child Obesity, Tooth Decay in the Under 5s, Alcohol related Hospital Admissions and new cases of Tuberculosis.

The Index of multiple deprivation shows significant areas of deprivation in Southall, Northolt, areas of Acton and small pockets throughout the Borough, particularly in areas of dense social housing.

Comparisons with similar areas

To explore how health outcomes for Ealing compare with other similar local authorities the Office for National Statistics (ONS) area classification was used. A low health outcome score should act as a prompt for organisations to explore the underlying factors more fully and so develop local strategies and action plans to address them.

Health outcomes assessed were life expectancy, all cause mortality, deaths from circulatory disease, cancers, chronic obstructive pulmonary disease, stroke and coronary heart disease. Results showed Ealing in the middle third for both male and female life expectancy and all cause mortality. Ealing has a higher mortality rate for circulatory diseases, breast cancer and coronary heart disease than comparator authorities. This suggests that improvements are possible in life expectancy and all cause mortality, while strategies to combat circulatory diseases, breast cancer and coronary heart disease could be further enhanced.

Early Years and Young People (Age 0 – 17)

Infant mortality has fallen in Ealing, in line with England and Europe as a whole. The rate in Ealing is lower than the average for England but still above than the lowest in London, suggesting that improvement is still possible.

The proportion of mothers who initiate breastfeeding in Ealing is higher than in London. This percentage has remained relatively stable in recent years at around 87%

There are high numbers of under fives with decayed, missing or filled teeth and high proportions of children and young people with active decay or who have experienced decay. Nearly a third of all five year olds surveyed had active decay in Ealing.

Levels of obesity in boys in Ealing are high, above the London and national rates in reception and Year 6. Ealing girls in Year 6 have an obesity rate that is higher than the national rate but just below the London rate.

Ealing's performance in all areas of the Key Stage 1 is better now than in 2006. While there has been improvement over recent years, Ealing's performance does remain below England and London levels. The proportion of pupils in Ealing attaining 5 or more GCSEs at grades A* to C rose in 2008/09 as did the proportion attaining 5 GCSEs at grades A* to G including English and Mathematics. For those achieving 5 or more grades at A* to C, Ealing is above the national average but below the London average.

Nearly a quarter of Ealing's secondary school pupils are eligible for free school meals, above the London percentage and nearly double the national rate.

Northolt West End, Northolt Mandeville, Acton Central and Elthorne have highest numbers of under 18 conception rates, with Northolt West End having one of the highest rates in the country. However under 18 conceptions in the borough as a whole are falling.

Adults aged 18 – 64

76% of Ealing working age population are economically active; the vast majority are employed while just over 11% are self-employed. The mean income in the borough £35,643, below the London mean, and the median income is £29,088, also below the London median. 4.4% are claiming Job Seeker Allowance.

Ealing has a lower percentage of Detached and Semi-detached houses than Outer London and England. Ealing has higher percentages of homeowners, both outright or with a mortgage, than Greater London but lower than the England percentages. Ealing has lower than West London, Greater London and England levels for Social Renting.

Ealing's rate for alcohol related admissions has been rising for several years and is the highest in London. It is now more than double the 2002/03 rate. The effect of excessive alcohol intake on males in Ealing is a loss of nearly 9 months of life. For females the effect is a loss of just over 3 months of life.

Smoking prevalence in Ealing is highest amongst the manual group. Chewing tobacco is more common among South Asians in Ealing than the rest of the general public. The effects of smokeless tobacco are not as well publicised as cigarettes. The number of smoking quitters in Ealing has fallen by over three quarters between 2005/06 and 2008/09

Over the coming years it is anticipated that the population of those aged 18-64 within Ealing suffering from a disability will grow, by between 7% and 12% between now and 2030 across common disabilities.

Older People (aged 65 and over)

Older people population projections show that the total number of people over 65 years will grow by 4,200 between 2008 and 2020. The greatest percentage rise is in the 85 and over age group with a predicted increase of 30.6% or 1,500 people.

The prevalence of dementia increases with age and between 2010 and 2030 there is predicted to be a 39% increase in the number of over 65s suffering from dementia.

There were 6,130 people aged 65 and over who received social care services in 2009/10. Projected population growth would lead to increased demand, potentially rising to 7,458 by 2030. A 29% increase to 4,928 is predicted between 2010 and 2030 in the number of over 65s providing unpaid care. While nearly 13,000 over 65s live alone, it is expected that number will increase to 16,784 by 2030.

Estimates predict that just over 10,700 households in Ealing will be in fuel poverty by 2011. 2006 figures show that the percentage of households in fuel poverty in the borough is slightly higher than the London percentage.

Life Expectancy and Disease

In Ealing, as nationally, there is a long term trend of rising life expectancy for both males and females. Life expectancy is a general measure of health across the life course. Currently male life expectancy is 77.6 years and female is 82.6 years. There are large inequalities, however: there is a 9 year gap between the lowest and highest wards for males and for females the gap is 7 years. Healthy life expectancy at birth for women is nearly three years longer than for men in Ealing and at birth females can be expected to live disability-free for 2.3 years longer than males.

The top three main causes of death (Circulatory Diseases, Cancers and Respiratory Diseases) are the same for men and women in the borough but the proportions are slightly different.

- Deaths from circulatory diseases are falling in most local authorities however the rate in Ealing remains higher than the national and London rates.

- There is a long term trend of declining mortality from cancers. Survival following diagnosis is worse in England than in most of Europe, however, and there is a need for improvements in detection and care.

- The mortality rate in Ealing for Chronic Obstructive Pulmonary Disease (COPD) which includes bronchitis and emphysema is currently lower than England and London. There is a long term decline in mortality and this has been slightly higher in Ealing than in London and England as a whole.