### Report to the Board

Date of meeting: 12 June 2007

Agenda Item 9

### **HEALTH NEEDS ASSESSMENT**

#### <u>Issue</u>

Local Health Needs Assessment for South Derbyshire.

### **Background**

Understanding the health needs of a given population is vital if we are to allocate limited resources to their best effectiveness.

Both the South Derbyshire LSP and local groups of GPs are engaged in providing and commissioning a range of services to improve health and well-being across South Derbyshire.

### **Details**

The government agenda to Involve clinicians in commissioning and resource prioritisation requires them to understand both local population needs and also the wider community based services already in existence.

GPs are used to dealing with individual sickness episodes and may not always appreciate the links between deprivation, health and wellbeing.

LSPs provide an opportunity to tackle some of these wider determinants of health through partnership working, however more clinical engagement in this area would add value. Some linking up between the clinicians and the LSP has been made through sharing stakeholder information on health service needs gleaned at the last LSP AGM.

A comprehensive assessment of the needs of the population will enable all commissioners and providers to understand where gaps in services lie and enable action plans to be developed accordingly.

#### **Recommendations**

It is recommended that the Board: -

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- Notes and supports the development of the Health Needs Assessment for South Derbyshire
- Receives a presentation on the report once finalised (late summer 2007)

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### Health Needs Assessment (HNA) for South Derbyshire

For nearly two decades South Derbyshire has been the fastest growing district in Derbyshire. Swadlincote, with a population of some 33,000 is the main administrative and commercial centre of the district. The rest of the area is mostly rural in character (SDDC Draft Gender Equality Scheme 2007-2010). Various reports exist e.g. Derbyshire Health Profile 2004; Director of Public Health Annual Report 2006 to give us some understanding of the demography and needs of the area however a detailed analysis of where we should be investing our limited resources to maximise health within South Derbyshire is lacking. Understanding the health needs of a given population is vital if we are to commission and provide services to their best effectiveness.

As well as informing the LSP, a comprehensive HNA would also support the Practice Based Commissioning (PBC) group in South Derbyshire. PBC groups consist of local GPs and other clinicians coming together to influence health services through commissioning and direct service provision. To achieve this, practices will have indicative budgets for most services. Practices will be discussing and shaping services with health professionals across primary and secondary care, social services and parts of local government.

Engaging clinicians in the commissioning process has the potential to improve the range and level of health services available to patients and benefit the specific needs of local communities. A comprehensive HNA will promote closer working between the LSP and the South Derbyshire PBC group by drawing together the prevention agenda as well as identifying any gaps in health care services.

#### **Aims**

### LSP perspective

To assist the LSP in the identification of key health priorities and related targets in order that the LSP Board owns and reflects these priorities in its actions.

To raise awareness of existing health promoting and health service activities within the South Derbyshire area in order that patients and the public can maximise opportunities to improve their health according to their needs

#### PBC perspective

To have a clearer understanding of the key health concerns in South Derbyshire including mortality and morbidity, access and quality issues including patient views

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### **PCT** perspective

To develop closer links between PBC and LSP groups in order that each group understands and complements the commissioning and service provision of the other through the sharing of health priorities and local intelligence.

Contents: for discussion/comments/additions etc

- Profile of the area including population characteristics and projections by age, ethnicity and gender: implications for service provision
- Key issues pertinent to the area e.g. patient flows to Burton, access, inequalities and some of the wider determinants of health (education, literacy and numeracy, housing, employment etc)
- Mortality and morbidity data by ward and by practice where possible (Coronary Heart Disease (CHD), cancers, cerebro vascular disease etc) including national targets and translated targets for South Derbyshire locality. To include explanations of relevance to Derbyshire as a county and whether this is a key issue for the South Derbyshire locality
- General practice profiles in relation to CHD, stroke, hypertension, diabetes, chronic obstructive pulmonary disease (COPD), epilepsy, cancer, mental health, asthma) including explanations of relevance to Derbyshire as a county and whether this is a key issue for the South Derbyshire locality
- Other issues e.g. sexual health, teenage pregnancy, drug and alcohol use, immunisation, child protection
- Long term conditions and referral patterns
- Examples of health promoting activity available locally including contact details and referral mechanisms

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