

Health and equality data available for development of Urgent Care Options

The purpose of this brief is to capture the vast amount of health and equality information which was available to be used to develop the options for the new models of urgent care delivery in Sunderland, which are currently under consultation. The following paragraphs are (numbered 3.8 and 3.9) shows the information that was included in the outline business case.

3.8 Sunderland Joint Strategic Needs Assessment

As at 1st July 2017, 284,219 people are registered with a Sunderland general practice and this is predicted to rise to 285,000 by 2030. The population is forecast to grow by just over 1% by 2020 compared to 4.8% for England. Sunderland is much less ethnically diverse than the England average, but is becoming more ethnically diverse, driven by patterns of migration.

The population profile of Sunderland is changing with a rapidly ageing population and a declining younger population. The Sunderland population is projected to increase by just over 1% over the next ten years and by 3.2% over the next twenty years. Within this overall population growth, the rate of growth in particular age groups is significantly different. The under sixty five year old population is projected to decrease over this period by 2.6% over ten years and 5.3% over twenty years whilst the sixty five and over population is projected to increase by 18.9% over the next ten years and by 37.7% over the next twenty years. Older people use health and social care services more intensively than any other population group and so the growth in the absolute number of older people in Sunderland as well as the percentage of the total population has strong implications for the capacity and planning of health and care services.

3.9 Sunderland Health Issues and Concerns

People living in Sunderland experience higher levels of deprivation than the national average. Unhealthy lifestyles remain a key cause for increased rates of premature death. Many people in Sunderland continue to follow unhealthy lifestyle behaviours when compared to England. This is directly linked to a range of social, economic and environmental factors.

The health of people in Sunderland is varied compared with the England average. Sunderland is one of the 20% most deprived districts/unitary authorities in England and about 26% (12,600) of children live in low income families. Life expectancy for both men and women is lower than the England average. Life expectancy is 10.1 years lower for men and 8.2 years lower for women in the most deprived areas of Sunderland than in the least deprived areas.

Preventing premature deaths due to cancer, cardiovascular disease and respiratory disease remains a priority for health partners across the City. Current strategic plans [5] include a strong focus on identifying and managing long term conditions, including through self-care. There are currently programmes looking at hypertension, atrial fibrillation, diabetes treatment and diabetes prevention.

A key challenge for the Sunderland health economy is the need to manage the high and increasing levels of long term conditions in the population, including increasing proportions of people with multiple long term conditions.

Sunderland's population makes relatively high use of hospitals, with standardised rates of elective admissions that are 40% higher than the England average [6] and standardised rates of emergency admissions that are 18% higher than the England average [7]. The rate of alcohol-related harm hospital stays (adults) is 948 per 100,000 population, worse than the average for England. The rate of self-harm hospital stays is 180 per 100,000, which is better than the average for England which is 191.4. The rate of smoking related deaths is 423 per 100,000, worse than the average for England. This represents 648 deaths per year. Estimated levels of adult excess weight, smoking and physical activity are worse than the England average. The rate of hip fractures is worse than average.

There has been a vast amount of work done by the Sunderland Clinical Commissioning Group (SCCG) related to particular populations over the period of its existence, and so the challenges we face in Sunderland related to health inequalities and poverty are known well. A variety of information was available at the time to inform the options selected. Please see the links below, some of which also connect to other links

<https://www.sunderland.gov.uk/article/13880/Joint-Strategic-Needs-Assessment>

[https://www.sunderland.gov.uk/media/18724/Joint-Strategic-Needs-Assessment-Summary/pdf/Joint Strategic Needs Assessment- Summary .pdf](https://www.sunderland.gov.uk/media/18724/Joint-Strategic-Needs-Assessment-Summary/pdf/Joint%20Strategic%20Needs%20Assessment-Summary.pdf)

<https://www.sunderland.gov.uk/article/13270/Sunderland-city-data>

<http://www.ukcensusdata.com/sunderland-e08000024#sthash.X6whdLmd.dpbs>

[https://www.sunderland.gov.uk/media/19032/Equality-Analysis-for-CSDP-2017-/pdf/5 Equality Analysis for CSDP \(2017\).pdf](https://www.sunderland.gov.uk/media/19032/Equality-Analysis-for-CSDP-2017-/pdf/5%20Equality%20Analysis%20for%20CSDP%20(2017).pdf)

[https://www.sunderland.gov.uk/media/19603/Health-Related-Behaviours-Survey-2017/pdf/HRBS Sunderland Survey 2017 report1.pdf](https://www.sunderland.gov.uk/media/19603/Health-Related-Behaviours-Survey-2017/pdf/HRBS%20Sunderland%20Survey%202017%20report1.pdf)

In addition to this information, a significant amount of health and equality impact assessment work had also been undertaken for phase 1 of path to excellence. The links to which are below.

<https://pathtoexcellence.org.uk/wp-content/uploads/2018/02/Additional-information-to-IIA-Summary-Report.pdf>

<http://www.nesenate.nhs.uk/wp-content/uploads/2014/04/NE-Clinical-Senate-P2E-Emergency-and-Urgent-Paediatric-Services-Final-report-.pdf>

https://pathtoexcellence.org.uk/wp-content/uploads/2016/11/NHS_Travel-and-Transport-Impact-Baseline-Report-Full-report.pdf

There was a full programme of pre-engagement work undertaken to inform the model development. The reports for these are available on the Sunderland CCG website (link below), and the demographic profile for each piece of engagement work is included.

<http://www.sunderlandccg.nhs.uk/get-involved/urgent-care-services/people-told-us-far/>

To support all of this, SCCG is having an independent health and equality impact assessment, and a travel and transport impact assessment, of the proposed potential UC clinical models completed. These will be included in the decision making business case.

A full consultation with the public is currently underway.