

# SUMMARY OF SOMERSET'S JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) 2011



**NHS**  
Somerset

## Background

**This is a summary of Somerset's latest Joint Strategic Needs Assessment (JSNA).**

Somerset's JSNA 2011 contains updated information on our health, social and environmental influences, how current need is being met, existing health inequalities and the experiences and views of local people. It also examines two key themes which are housing and health and wellbeing in the older population (including a focus on older

carers and the over 85 age group). The JSNA plays an important role in informing the people who buy health and social care and related services for the population of Somerset and it is also a useful resource for groups and individuals. The full document, which is divided into sections, is available online at [www.sine.org.uk/jsna](http://www.sine.org.uk/jsna). This short summary gives a flavour of the wealth of information and evidence collected together to complete Somerset's JSNA 2011.

## Some information about the geography, population, economy and employment.....

Somerset has a population of about 530,200 people (based on 2010 population estimates) and covers an area of 3,452 km<sup>2</sup>. The county is split into five districts; Mendip, Sedgemoor, South Somerset, Taunton Deane and West Somerset. About one in four people live in one of Somerset's three largest towns, Taunton (58,200 people), Yeovil (41,800 people) and Bridgwater (35,200 people). In 2033, the Somerset population is projected to be 619,400, an increase of 18% from 2008. The largest increase is projected to be in Somerset's older population, in particular, the 90+ population which will more than treble from 5,100 in 2008 to 18,700 in 2033.

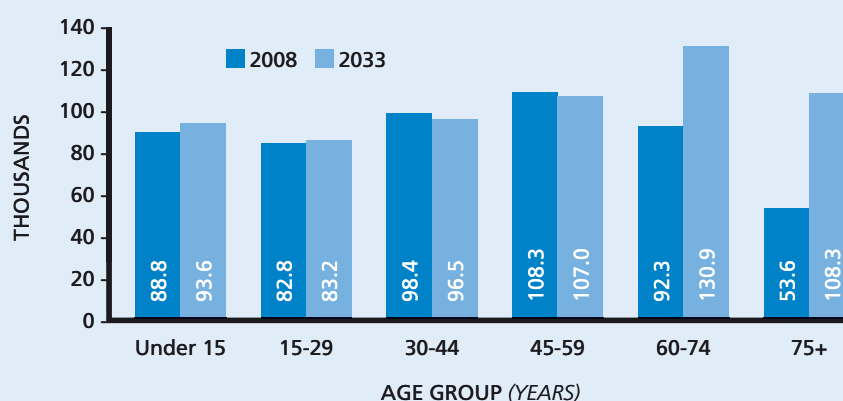
Following a decline between 1999 and 2008, the number of key 'out of work' claimants has risen in Somerset from 27,090 (8.4% of the working age population) in August 2008 to 30,090

(9.5% of the working age population) in November 2010. The Somerset figure is similar to the regional figure of 9.9% and less than the national figure of 12.2%. This claimant group includes job seekers, disabled people claiming employment support allowance and incapacity benefits,

lone parents and others on income related benefits.

The majority of the increase since August 2008 (around the start of the economic downturn) can be attributed to an increase in the number of people claiming Job

Figure 1: Somerset's population projections 2008 to 2033 by age



Source: Office for National Statistics (ONS)

Seeker's Allowance (JSA). The percentage of the working age population claiming JSA varies considerably across the county.

Youth unemployment is of particular concern, with 5.8% of 18 to 24 year olds claiming JSA in Somerset, compared to 2.3% of 25 to 49 year olds and 1.1% of 50 to 64 year olds. The issue of youth unemployment is mirrored at a regional and national level also.

In 2010 there were 1,009 16 to 19 year olds in Somerset who were Not in Education, Employment or Training (NEET). Taunton Deane has the highest percentage of 16-19 year old NEETs in Somerset at 4.1% and Mendip the lowest at 3.1%.

Figure 2: How many people work in different sectors? (% 16-64 years) Dec 2010

Sector	Somerset (number)	Somerset (%)	South West (%)	Great Britain (%)
Agriculture and fishing	11,400	4.9	1.8	1.0
Energy and water	4,300	1.8	1.5	1.6
Manufacturing	31,800	13.8	11.1	9.9
Construction	15,100	6.5	7.6	7.6
Distribution, hotels and restaurants	51,100	22.2	18.8	18.5
Transport and communications	12,500	5.4	7.3	8.5
Banking, finance and insurance	25,000	10.8	14.4	16.1
Public admin. education and health	65,100	28.2	31.2	30.7
Other services	13,200	5.7	5.6	5.5

Source: NOMIS

## Some of the things you told us...

- Health services must be accessible and in terms of social care, affordable. Some people are not accessing health services.
- There are many difficulties getting to hospital appointments. It is hard to get to a hospital for 8am from a rural area in terms of public transport, when a bus can't be taken before a certain time. People are faced with having to change an appointment to a later time, if they could, or paying a lot of money to get there by taxi.
- Social interaction and stimulation help people keep

healthy and active both mentally and physically e.g. The University of the Third Age, Senior Citizens' Forums, church groups, luncheon clubs. Active Living Centres are a very good and positive resource for older people.

- People need good, accessible advice and information about sheltered housing and residential homes
- In terms of caring, respite is extremely important. *"Without it a carer is on duty 24 hours – sorting out medication, looking after my wife, making tea, meals, washing up, laying the table...."*

- An older carer describes part of the nature of caring for his wife's condition as *"little things gathered together become a lump, they build up.... you (the carer) have to go along with the mind (of the person being cared for) – you can't fight against it, not without distressing yourself."*
- Access to consultation is difficult for people with sensory needs.



## Some information from other sections of the JSNA...



### Housing

- the number of households in Somerset is projected to increase by 65,000 (29%) to 291,000 by 2033. By 2030, there are likely to be around 70,000 65+ single-person households, posing significant challenges to health and social care services
- a substantial proportion of dwellings fail to meet the Decent Homes Standard, with implications for not only physical but also mental health. Poor insulation will also increase fuel poverty as more money would need to be spent on heating costs
- the ratio of house price to earnings is greater in all Somerset's districts than the national average. It is particularly high in West Somerset where, even in an economic downturn, house prices at the market entry levels are almost nine times the average earnings figure
- supported housing is a vital service to help vulnerable groups, such as the elderly, those with dementia, learning disabilities and people with problems related to substance and alcohol misuse. Somerset County Council and its partners have long adopted a policy of floating support, which improves outcomes by promoting independent living wherever possible and reduces the need for residential care. This has the effect of benefiting the lives of individuals and being a more cost-effective model

### Health Inequalities

- life expectancy for both males and females in Somerset is higher than the national average but there is a considerable difference of 14.5 years between the highest and lowest wards
- those living in relatively deprived areas are more likely to die before the age of 75 from lung cancer, circulatory disease, chronic liver disease and suicide. Similar inequalities exist in relation to potential causes of ill health, such as the propensity to smoke, and also mental health and dementia
- In 2010, the County had worse rates than the England average for skin cancer, smoking in pregnancy and road injuries and deaths

- Overall, Somerset has significantly better rates than the England average for deaths from heart disease and stroke under 75 years old, admissions to hospital for alcohol related harm, breastfeeding initiation and under 18 teenage pregnancy

### Health and Wellbeing in the Older Population

- the average life expectancy at age 65 for people in Somerset is similar to that in the SW region and better than the national average
- amongst those in the very elderly group (aged 85 years and over) circulatory disease and cancer account for a significant proportion of the burden of disease. Projected estimates suggest that the number of those in this age group with limiting long-term illness will increase by 15% between 2011 and 2015
- during 2010/11 in Somerset there were 14,333 admissions to hospital amongst those aged 85 years and over – a substantial number when considered alongside the total 85+ population of 17,076. More than a half of these were emergency admissions
- there are proactive initiatives aimed at older people to support the maintenance of good health, including screening and health checks, promoting 'active living' and falls prevention. These initiatives will assume increasing importance as the population ages



### Older carers

- the projected increases in the older population have significant implications for carers as they become older themselves
- there are issues with accurate estimates of the numbers as many carers do not identify themselves as such, but solely as a family member
- older people in households may be both carers and cared for and an event such as hospital illness means a solution has to be found for both
- independence is highly valued by this group of older people and to help address their future needs it is important carers know about their entitlements and how to access them

# Summary of Somerset's Joint Strategic Needs Assessment (JSNA) 2011



The JSNA in its full form can be read or downloaded in sections from [www.sine.org.uk/jsna](http://www.sine.org.uk/jsna)

## Contact

Jo Purvis - JSNA Project Manager  
01935 384 000  
jo.purvis@somerset.nhs.uk

Mike Smith - Information Manager  
0845 345 9166  
mjsmith@somerset.gov.uk

**ACCESS** - if you would like this information in another language or format, please ask us

Se deseja obter informação noutra idioma ou formato, diga-nos.

Se desiderate ricevere informazioni in un'altra lingua o in un altro formato, siete pregati di chiedere.

Informationen können auch in anderen Sprachen oder Formaten angefordert werden.

Jazeli chcieliby Państwo uzyskać informacje w innym języku lub w innym formacie, prosimy dac nam znac.

如欲索取以另一语文印制或另一格式制作的资料，请与我们联系。

Tel: 01935 385 020 Fax: 01935 384 079 Email: [translations@somerset.nhs.uk](mailto:translations@somerset.nhs.uk)