1 Executive Summary

This section summarises key findings from the JSNA report. Sources are included in footnotes throughout the relevant sections of the report.

Please note that more detailed and additional findings are in the main body of the report.

Population and population groups (chapters 2 and 3)

A growing and aging population

- As of mid-2016, the estimated total population of Oxfordshire was 683,200\(^1\).

- Over the ten-year period, 2006 and 2016, there was an overall growth in the population of Oxfordshire of 52,100 people (+8.3%), similar to the increase across England (+8.4%).

- The five-year age band with the greatest increase over this period was the newly retired age group 65 to 69 (+41%). There was a decline in the population aged 35 to 44.

- District Councils' plans for new housing in existing (adopted) and draft local plans set out an ambition for new housing in Oxfordshire of 34,300 by the end of March 2022 and a further 47,200 homes by end March 2031, a total of 81,500 new homes in the next 15 years.

- Oxfordshire County Council population forecasts, based on these plans for housing growth, predict an increase in the number of Oxfordshire residents of +187,500 people (+27%) between 2016 and 2031, taking the total population of the county from 687,900 to 874,400.

- By 2031, the number of people aged 85 and over is expected to have increased by 55% in Oxfordshire overall, with the highest growth predicted in South Oxfordshire (+64%) and Vale of White Horse (+66%).

Increasing life expectancy. Inequalities remain

- Life expectancy is increasing. Between 2001-03 and 2014-16, the gap between male and female Life Expectancy in Oxfordshire decreased from 4.1 years to 3.2 years.

- Life expectancy by ward data for Oxford shows the gap in male life expectancy between the more affluent North ward and the relatively deprived ward of Northfield Brook has increased from 4 years in 2003-07 to 15 years in 2011-15. Female life expectancy in these wards has remained at similar levels with a gap of just over 10 years.

\(^1\) NOTE the Office for National Statistics revised the local authority 2016 mid-year population estimates on 23 March 2018. These have not yet been included in this JSNA publication as Oxford City Council and Oxfordshire County Council (as well as other Local Authorities outside Oxfordshire) have significant concerns about the revisions, which are being discussed with ONS. The revised estimates give Oxfordshire's population as 678,500, a reduction of 4,700.
Health of carers affected by caring role

- The latest survey of carers shows that around a third (34%) of Oxfordshire carer respondents have had to see their own GP in the past 12 months because of their caring role. This was a similar proportion in carers of all ages.

- It is possible that this action – to see their GP as a result of their caring role – is an early indication that their caring role is at risk, potentially affecting around 6,200 people in Oxfordshire currently being supported by an informal carer.

Wider determinants of health (chapter 4)

An affluent county with areas of deprivation

- Earnings remain relatively high for Oxfordshire residents.

- Despite relative affluence, income deprivation is an issue in urban and rural areas.
  - 14,000 children and 13,500 older people in Oxfordshire were affected by income deprivation.
  - Snapshot HMRC data (Aug14) shows almost 1 in 5 children aged 0-15 in Oxford were living in low income families.

- The increase in claimants of employment-related benefits in the older age group in Oxfordshire was above average.

Housing remains unaffordable

- House prices in Oxfordshire continue to increase at a higher rate than earnings and Centre for Cities has again ranked Oxford as the least affordable UK city for housing. In Oxford City, social rents charged by private registered providers in 2017 were 18% above the national average.

Homelessness remains an issue and benefit changes are affecting more households

- Over the past 6 years there has been an increase in people presenting as homeless and of people accepted as homeless and in priority need in Oxfordshire, although the latest data for 2016-17 shows a decline.

- Loss of private rented accommodation is an increasing cause of homelessness.

- The latest data shows a significant increase in the number of people rough-sleeping in Oxford.

- The number of households affected by the benefit cap across Oxfordshire has increased.

- There has been an increase in the proportion of households defined as “fuel poor” in each district of Oxfordshire.

- Oxfordshire’s Citizens Advice agencies have seen significantly more people needing help in relation to benefits, especially housing, employment and personal independence payments. Universal Credit has just been introduced in Oxfordshire, so it is too early to assess any impact.
Well qualified residents. Disadvantaged children doing less well than national average

- Oxfordshire has an above-average proportion of people with high level qualifications and a low proportion of people with no qualifications.
- Between 2016 and 2017 there was an increase in the proportion of children achieving a good level of development in all Early Learning Goals in each district in Oxfordshire, except for Cherwell where the rate declined. Girls continue to outperform boys.
- Early Years attainment for 5 year olds with Asian or Black ethnic backgrounds in Oxfordshire was below the South East average.
- The proportion of Oxfordshire’s disadvantaged pupils aged 10-11 achieving the expected standard at Key Stage 2 was below the England average in 2017
  - For pupils with SEN support, the proportion was 17% in Oxfordshire compared with 21% nationally.
  - For pupils with a first language other than English, the proportion was 55% in Oxfordshire compared with 61% nationally.
  - For pupils eligible for Free School Meals, the proportion was 38% in Oxfordshire compared with 43% nationally.
- Oxfordshire has a relatively high rate of unauthorised absences from school.

Environmental pressures

- Public Health England analysis found 423 fast food outlets in Oxfordshire of which 56% were in Cherwell and Oxford. The ward with the highest number of fast food outlets was Banbury Grimsbury & Castle (39 outlets).
- Oxfordshire continues to have 13 Air Quality Management Areas where the annual mean objective for nitrogen dioxide is being exceeded including the whole of Oxford city.
- The UK Health Alliance has identified opportunities from climate change including the co-benefits of emission reduction activities leading to healthier lifestyles (more walking/cycling, insulating homes and others).
- Isolation and loneliness have been found to be a significant health risk and a cause of increased use of health services. Areas rated as “high risk” for isolation and loneliness in Oxfordshire are mainly in urban centres.
- The British Social Attitudes Survey (national) shows an increasing willingness to walk short journeys of less than 2 miles, rather than go by car.
- A walking to school initiative, taken up by 18 schools in Oxfordshire so far, is showing an increase in active travel rates since September 2017 from 65% to 84% (+19pp).

Health conditions and causes of death (chapter 5)

A relatively healthy county overall

- The Public Health England health profile for Oxfordshire shows that, for the majority of health indicators, Oxfordshire is statistically better than the national average.
Indicators at county level where Oxfordshire is worse than average are: hospital admission episodes for alcohol-specific conditions in under 18s; killed and seriously injured on roads.

For the 3-year period, 2014 to 2016, total deaths of people aged under 75 from the four causes of: cardiovascular diseases, cancer, liver disease and respiratory disease in Oxfordshire was 3,396.

Of these **1,959** (58%) were considered preventable.

**Increase in rates of anxiety and depression, above-average self-harm and suicides of young people**

- In Oxfordshire, the average wellbeing scores for: life satisfaction, “things you do are worthwhile” and happiness, are slightly lower in 2016-17 compared with 2015-16 and the anxiety mean is higher.
- The number and rate of GP-registered patients in Oxfordshire with depression or anxiety has increased significantly each year for the past 4 years.
- The percentage of GP-registered patients with a recorded diagnosis of a severe and enduring mental health problem has increased in all districts. The rate in Oxford City remains well above the average for NHS Oxfordshire CCG.
- Rates of intentional self-harm in Oxfordshire are now statistically above the England average.
- There were 15 wards in Oxfordshire with a significantly higher admission ratio for intentional self-harm than England.
- There were 23 suicides of people aged under 25 in the Oxfordshire Clinical Commissioning Group area in 2014-16. The OCCG rate was statistically above the England average.

**Above average cancer diagnosis and lower (preventable) cancer mortality rate**

- The proportion of GP-registered patients with a cancer diagnosis in Oxfordshire has remained above the national average.
- Preventable deaths (preventable mortality) from cancer in Oxfordshire remains better than the England and South East averages.
- The cancer mortality rate for females in Cherwell increased to just above the national average.
- Rates of bowel cancer deaths were above average in Oxfordshire in 2016 for both males and females.

**Stroke and Dementia**

- Stroke in females in Oxford and males in Vale of White Horse each above average in 2016.
- In West Oxfordshire, the age-standardised mortality rate for females due to Dementia and Alzheimer’s disease increased in 2014, 2015 and again in 2016 to well above the national and regional averages.
• The mortality rate for females due to Dementia and Alzheimer’s disease was above the national average in Cherwell in 2015 and 2016.

**Knee and back pain affecting health and social care workers**

• Work-related musculoskeletal disorders account for 35% of all working days lost due to work-related ill health (national survey).

• Human health and social work activities is one of the four industries with significantly higher rates of WRMSDs when compared with the rates for all industries.

---

**Lifestyles (chapter 6)**

**Over half of adults overweight or obese. Slight increase in obesity of children**

• An estimated 55% of people aged 16 or over in Oxfordshire are classified as overweight or obese. This is below the national average.

• Data from the National Child Measurement Programme shows a similar level of obesity in younger children (aged 4-5 years) in Oxfordshire and a slight increase in obesity of children aged 10-11.

• In the 2016/17 academic year, a measure of prevalence of severe obesity was introduced. In Oxfordshire, around 110 (1.4%) reception year children were severely obese. In year 6, around 220 (3.4%) children were severely obese. Levels were highest in Oxford City.

**Overall decline in smoking and consumption of alcohol, with exception of some groups**

• Smoking prevalence in adults in routine and manual occupations was estimated at 24.5% in Oxfordshire, over double the rate of all adults and similar to the national average.

• Admissions for alcohol-related conditions were better than the England average in Oxfordshire overall and in rural districts. Oxford City had a similar rate to the national average.

• The rate of hospital admissions for alcohol-specific conditions in females under 18 in Oxfordshire has remained statistically above the national average in the latest data. The rate for males in Oxfordshire was similar to average.

**Increasing number of recorded victims of abuse**

• Police data shows an increase in recorded victims of most categories of abuse and exploitation in Oxfordshire (other than Child Sexual Exploitation which declined). There were over 100 recorded victims of modern slavery in Oxfordshire, almost three times in the number in 2016.
Service use (chapter 7)

High levels of health staff vacancies and health staff turnover

- In September 2017, there was a total of 644 advertised NHS vacancies (full time equivalents), 44% were for nurses/midwives and 22% were administrative and clerical.
- Turnover of Oxfordshire NHS Acute nursing & midwifery staff, other clinical and non-clinical staff in 2016-17 was well above the England average.

Increasing use of health services and increasing complexity of conditions

- Use of health services is increasing overall and per person. The number of times people visit their doctor or are treated in hospital has increased significantly in Oxfordshire (and nationally), especially in the older age group.
- After contacting an NHS service outside of GP surgery hours, 30% of Oxfordshire respondents attended A&E (34% nationally).
- The proportion of hospital inpatients with complicating comorbidities is increasing.

Falls causing highest use of ambulance services and above-average rate of injuries

- Ambulance data show the top condition requiring an ambulance for Oxfordshire residents was falls.
- Oxfordshire’s comparative rates of injuries due to falls in people aged 65+ and for people aged 80+ has recently improved, from statistically worse than average to similar to the South East average.

Delayed transfers of care have fallen, remaining above average

- The rate of delayed transfers of care (DTOC) within Oxfordshire has fallen but remains significantly higher than the England average.

Increase in referrals of children and young people to mental health services

- In the past year, there has (again) been an increase in the number of people referred for treatment to Oxford Health mental health services, particularly children and young people.
- As of December 2017, two thirds (66%) of young people, in the Oxfordshire Clinical Commissioning Group area referred to CAMHS, were seen within 12 weeks. In the previous 3 months (Sept-Nov17), less than half of referrals were seen within 12 weeks.

Increase in older clients supported at home, decline in number provided with social care reablement.

- There has been an increase in the proportion of older social care clients supported at home, from 44% of older clients in 2012 to 59% in 2017.
- Between 2015-16 and 2016-17 there was a 9% drop in the number of adults provided with short-term reablement services.
- Oxfordshire County Council estimates that: of the total number of older people receiving care in Oxfordshire, 40% (4,200) are being supported by the County Council or NHS funding and 60% (6,300) are self-funding their care.
Increase in children referred for social care services and children who are looked after

- Oxfordshire has seen increases in the number of children referred to social care, children on protection plans and children who are looked after.

- Care leavers in Oxfordshire are less likely than average to be in employment, education or training.

Expected growth in the oldest population is likely to increase demand for local health and social care services

- Assuming the use of health and social care services remains at current levels for the oldest age group (85+) would mean the forecast population growth in Oxfordshire leading to an increase in demand of:

  - +7,000 additional hospital inpatient spells for people aged 85+: from 12,600 in 2016-17 to 19,600 in 2031-32.
  - +1,000 additional clients supported by long term social care services aged 85+: from 1,900 in 2016-17 to 2,900 in 2031-32.