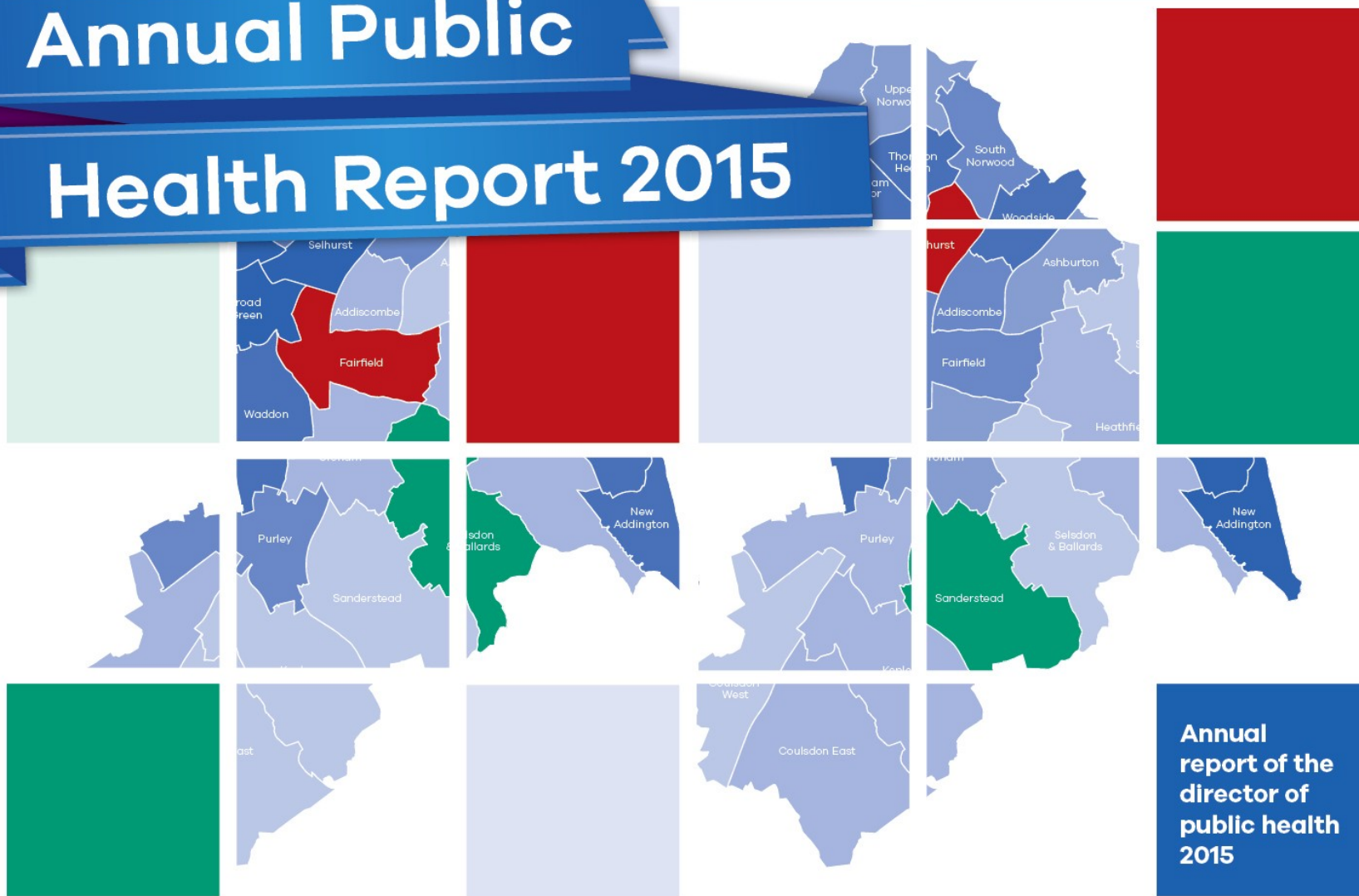


Annual Public

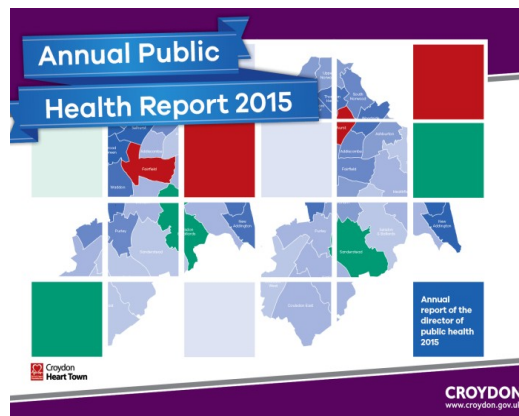
Health Report 2015



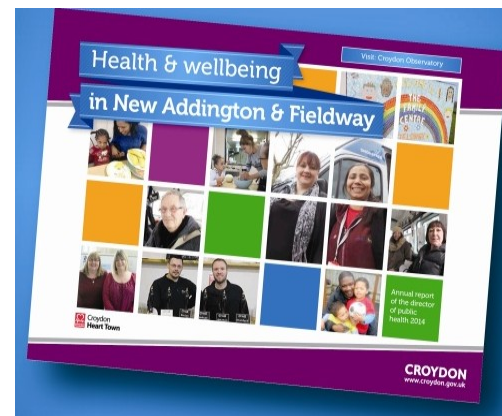
Annual
report of the
director of
public health
2015

- Statutory requirement of the Director of Public Health to produce an Annual Report

2015



2014



2013



- Focus of this year's report:**

- Highlight health inequalities in Croydon
- Reveal external factors contributing to how well people feel overall
- Demonstrate the council and partners' plans to continue to improve health and wellbeing

10 key areas that impact on health & well-being

- 1. Immunisations**
- 2. Child poverty**
- 3. Smoking**
- 4. Alcohol and drugs**
- 5. Obesity**
- 6. Diabetes**
- 7. Mental health**
- 8. Employment**
- 9. Maintaining the independence of older people**
- 10. Homelessness and overcrowding**

A snapshot of the 10 key health areas

Smoking

- 1 in 5 adults smoke
- 2/3 start before 18th Birthday

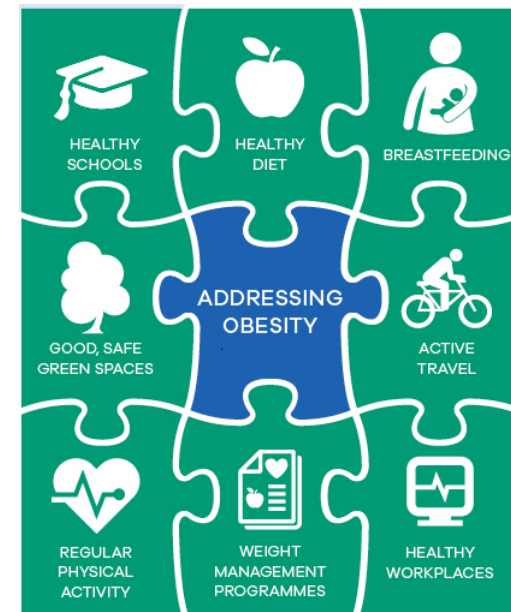


20-a-day smoker spends around **£2,900** per year

- £82 million** impact on Croydon's economy

Weight (obesity)

- 2 in 3 adults are overweight
- 2 in 5 10 to 11 year olds overweight or obese



- Obesity in children:
HIGHEST = West Thornton (45.3%)
LOWEST = Sanderstead (24.8%)

A snapshot of the 10 key health areas

Poverty

- 1 in 4 children live in poverty



Most at risk:

- Lone parents
- Family with disabled person
- Children in care

Child poverty in Croydon expected to rise to **27%** in next 4 years

Poor mental health

- Affects **1 in 6** adults in Croydon at any one time

Impacts on:

- Physical health
- Education
- Employment



HIGHEST =

New Addington (1.3%)

LOWEST =

Selsdon & Ballards(0.4%)

CHILDHOOD IMMUNISATIONS

EVERY CHILD needs to complete a **full immunisation schedule** to protect them from preventable infectious diseases... however not every child does

MMR is one of the immunisations in the programme and consists of two jabs, at age one and before starting school, protecting against **MEASLES, MUMPS** and **RUBELLA**



IN CROYDON



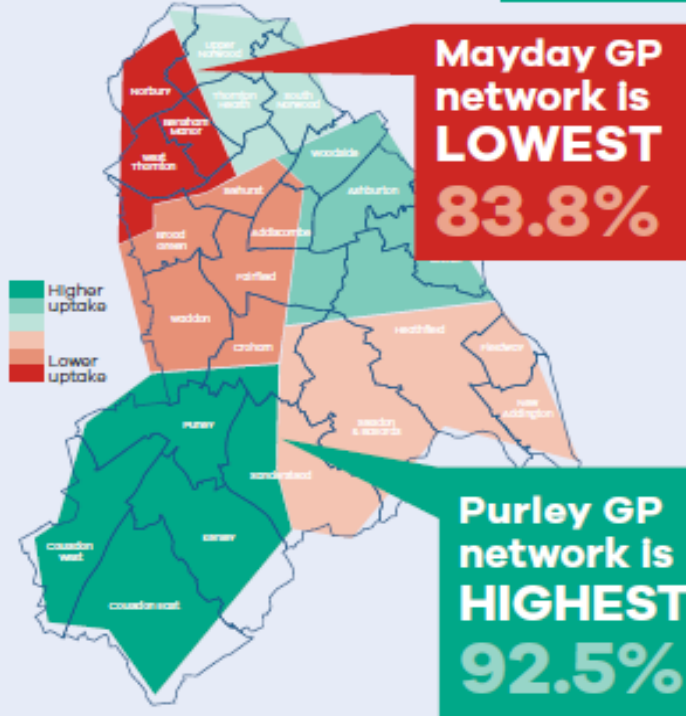
ARE NOT RECEIVING THE MMR JAB

HOW DOES IT WORK?

- V** Vaccine contains safe weaker versions of live measles, mumps and rubella viruses.
- I** It triggers the body to produce anti-bodies against these viruses.
- P** Providing protection – if your child comes in contact with one of the diseases their immune system immediately recognises it and produces anti-bodies to fight it.

MMR AT AGE 2 IN CROYDON

Uptake of MMR and other vaccinations varies between GP networks.



WHY DOES IT MATTER?



MEASLES, MUMPS AND RUBELLA ARE HIGHLY INFECTIOUS DISEASES AND CAN BE FATAL

THEY CAN ALSO CAUSE COMPLICATIONS...



Meningitis



Miscarriage



Swelling of the brain



Deafness

WHO IS MORE LIKELY TO MISS MMR?



CHILDREN FROM LARGE FAMILIES

CHILDREN FROM LOW PARENT FAMILIES

CHILDREN OF TEENAGE MOTHERS

TO PROTECT ANY COMMUNITY FROM THESE INFECTIONS, 95% COVERAGE OF IMMUNISATION IS NEEDED

IN CROYDON, COVERAGE IS 88% IN 2 YEAR OLDS AND ONLY 74% IN 5 YEAR OLDS

Coverage is increasing steadily. However, at current rates it will be

2035 before Croydon reaches 95% for the second dose of MMR

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO IMPROVE CHILDHOOD IMMUNISATIONS?

NHS



The NHS commissions all national immunisation programmes. NHS England decides the best way to ensure this happens. Locally, GPs offer the service and the Director of Public Health has a duty to ensure that the children of Croydon have the protection they need against infectious diseases like Measles, Mumps and Rubella.

WHAT MAKES A SUCCESSFUL GP SURGERY?



NHS England have found that the most successful GPs in Croydon had:

- 'Champions' for immunisations in their practice;
- Strong leadership;
- Systems in place to make sure that children did not fall through the net and so were more likely to get all their immunisations.

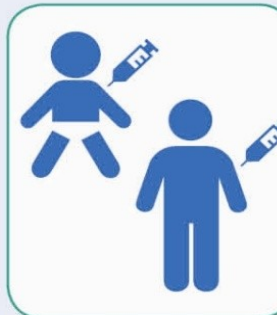
HERD IMMUNITY



To ensure the population is protected, enough children need to be vaccinated to make it hard for a disease to pass between people who aren't vaccinated. This is called "herd immunity".

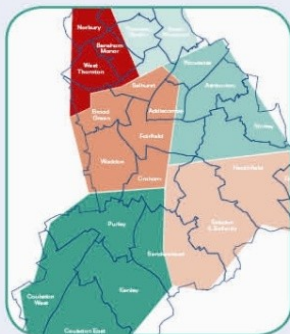
NHS England aims to achieve herd immunity level through 95% of children being vaccinated, as recommended by the World Health Organisation.

CROYDON'S FIVE YEAR PLAN FOR IMMUNISATIONS



- NHS England visit those Croydon GPs who are doing less well
- Sharing the best ideas should lead to an increase in children being immunised
- There will be a focus on making sure that the more vulnerable, such as those children who are 'looked after', get their jabs on time.

IMPROVING THE IMMUNISATIONS PROGRAMME IN CROYDON



In Croydon, the number of children vaccinated was not making enough progress. As such, NHS England were asked to report to the Croydon Health, Social Care and Housing Scrutiny Sub Committee.

NHS England has since been working with Croydon GPs to improve the accuracy of immunisation data. They have also been visiting practices to learn why more children have their jabs at one practice than at another.

WORKING TOGETHER



Many different people have a role in helping to protect Croydon's children from infectious diseases. These include not just traditional health professionals but early years staff and in the future maybe Council housing officers, working to ensure parents and carers have the right information about immunisations and are registered with GPs.

CHILD POVERTY

In Croydon **1 IN 4** (17,700) children live in **POVERTY**



Children born into poverty are **4 TIMES** more likely to be poor as adults as children of affluent parents.

WHY DOES IT MATTER?

<p>Children IN poverty</p> <p>MORE LIKELY TO</p>	<p>Be low birth weight</p>	<p>Be obese</p>	<p>Have mental health problems</p>
<p>Have health problems</p>	<p>Smoke drink and take drugs</p>	<p>Be breastfed</p> <p>LESS LIKELY TO</p>	<p>Achieve 5 A-C grades</p>

WHAT CAUSES FAMILIES TO LIVE IN POVERTY?

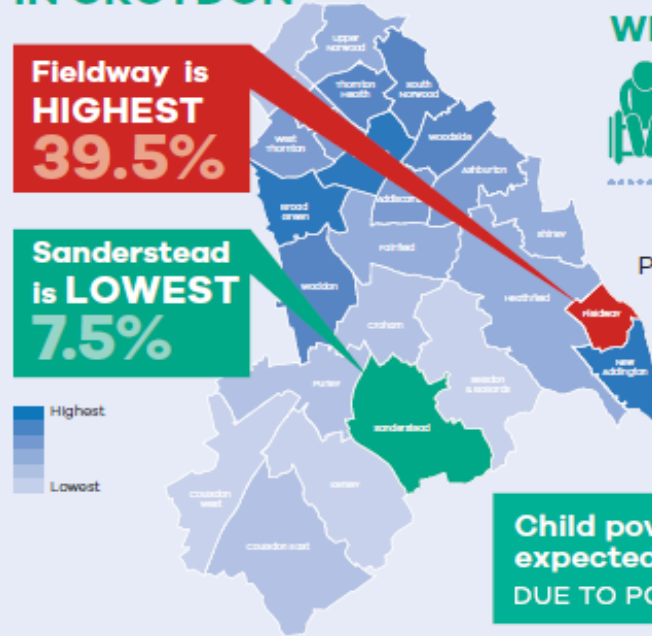
ASPIRATIONS AND RESILIENCE

COST OF LIVING

LOW WAGES AND UNEMPLOYMENT

NATIONAL AND LOCAL POLICY

CHILD POVERTY IN CROYDON



WHO IS AT RISK OF POVERTY?

Lone parent families, families with a disabled person, ethnic minority families, children in care, those with a parent in prison, those with special needs, those born to teenage mothers

CHILD POVERTY COSTS CROYDON'S ECONOMY £171 MILLION

<p>87m</p> <p>Services dealing with the consequences of child poverty</p>	<p>50m</p> <p>Lost earnings to individuals</p>	<p>34m</p> <p>Benefits and lost tax revenue</p>
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Child poverty is expected to rise to **27%** in Croydon in the next four years DUE TO POPULATION CHANGES AND WELFARE REFORM

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS CHILD POVERTY?

REDUCING BARRIERS TO EMPLOYMENT



Work is often the most sustainable route out of poverty.

- An online training resource to Croydon residents has been established.
- A Job Brokerage Service has been created. Working with Job Centre Plus, Croydon and John Ruskin colleges provide employers with three job-ready applicants for each vacancy, to take advantage of jobs created in Croydon's regeneration and commercial developments.
- A 'Welfare Gateway' has been developed, bringing together existing welfare arrangements to promote independence through an aligned financial, training/work and housing support offer. Budgeting advice to these residents saw an average saving £21 per week, per household.

SUPPORT TO YOUNG PEOPLE



- Arrangements are in place to develop a young person's led child poverty strategy.
- From September 2014, all Reception aged, Year 1 and Year 2 pupils have been entitled to a free school meal, as part of the Universal Infant Free School Meal initiative.

SUPPORT TO LONE PARENTS



A local survey of lone parents showed that this group face barriers to employment in terms of lack of jobs, lack of flexible and affordable child care support, lack of skills, training and work experience, and problems completing job applications and attending interviews.

- A six-week course, "First Steps into Work", for lone parents is being piloted. Run by Croydon Adult Learning & Training, Citizen's Advice Bureau and Woodlands Children's Centre it aims to break down barriers to employment
- Strategies are being developed to increase the opportunities for flexible working.

HEALTHY START



- Improvement in the availability of Healthy Start vitamins for pregnant and breastfeeding women, and infants and children under four years in low income families and at a higher risk of having low vitamin D stores.
- Healthy Start vitamins are now available in Croydon health centres, Woodlands Children's Centre and Cotelands in John Ruskin College.
- Going forward, provision of Healthy Start Vitamins in all Children Centres in Croydon.

SMOKING

In Croydon **1 IN 5** (58,000) adults **SMOKE**



TWO THIRDS OF PEOPLE START SMOKING BEFORE THEIR 18TH BIRTHDAY



WHY DOES IT MATTER?

Someone dies from smoking every day in Croydon



Smokers die **10 YEARS EARLY**, from diseases such as cancer, heart disease and lung disease

SMOKERS EXPERIENCE MORE:



Facial wrinkles



Impotence and infertility



Asthma and breathing problems



Pregnancy complications, miscarriages, early menopause



THERE ARE OVER **7,000** CHEMICALS IN CIGARETTE SMOKE

FACT

WHO SMOKES?

People most likely to smoke are those:

WITH A PARENT WHO SMOKES



3X

IN ROUTINE/MANUAL OCCUPATIONS



2X

WITH DEPRESSION

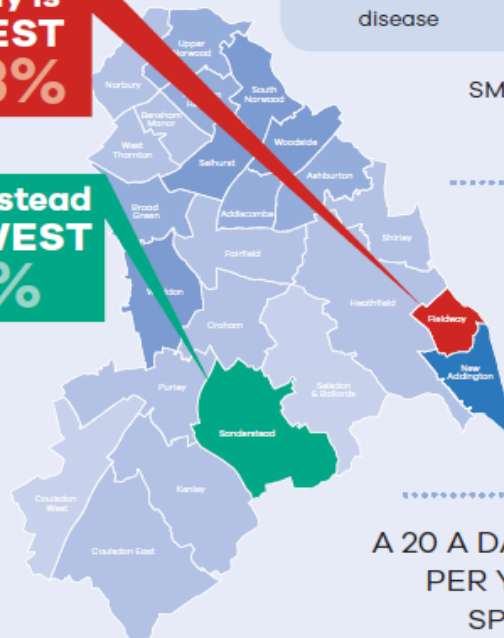


2X

SMOKING IN CROYDON

Fieldway is **HIGHEST** **29.3%**

Sanderstead is **LOWEST** **11.2%**



SMOKING IS HIGHEST IN THE MOST DEPRIVED WARDS

SMOKING IS THE NUMBER ONE CAUSE OF HEALTH INEQUALITIES

#1

EACH YEAR SMOKING COSTS CROYDON'S ECONOMY

£82 MILLION



In the most deprived households, more than 10% of disposal income goes on tobacco



E-cigarette use is growing. There is very little evidence as yet on these products.



Shisha smokers inhale as much smoke in a single session as smoking 56 cigarettes

Did you know?

Illegal/smuggled tobacco has been reported to contain human faeces, mould and dead flies... production is often not regulated.

A 20 A DAY SMOKER SPENDS ON AVERAGE **£2,900** PER YEAR. SOMEONE SMOKING FROM 14 TO 50 WILL SPEND MORE THAN **£100,000** ON TOBACCO

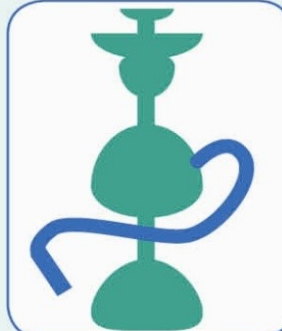
WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS SMOKING?

STOPPING SMOKING



- Smoking is the biggest single cause of health inequalities. Quitting smoking is the most important action smokers can take to improve their health
- For most smokers, quitting is extremely difficult. Fewer than 5% of unaided quit attempts last for twelve months
- Smoking cessation services are one of the most cost-effective health interventions we have. Croydon's evidence-based stop smoking services have helped nearly 18,000 people quit smoking since 2001, preventing an estimated 890 deaths. In the last year alone, Croydon supported over 2,200 local people to successfully quit for four weeks; 790 had still quit at twelve weeks.
- People who use our stop smoking services and nicotine replacement therapy are four times more likely to succeed in quitting than without medication and behavioural support.
- Croydon currently offers medication that is completely free to all and supports service-users to quit for up to twelve weeks.
- Croydon is developing its stop smoking services in order to offer more tailored services for populations of particular concern. For example, pregnant women, young people, those with severe mental health issues and people with debilitating long-term conditions.

TOBACCO REGULATION



- The council is taking a range of measures to tackle shisha (waterpipe smoking), illicit tobacco and e-cigarettes. These include developing a comprehensive plan with public health, trading standards, environmental health, voluntary agencies, GPs, schools and businesses. The plan will provide clear communication, firm regulation and tough enforcement to help eliminate the risks from tobacco and 'novel' smoked products.
- Public health also works with Trading Standards to educate local businesses and their staff on the harms of underage sales. There are plans to involve local school children in delivering this innovative work.

CAMPAIGNS AND PREVENTION



- Through campaigns such as Stoptober and National No Smoking Day, Croydon promotes a smokefree borough to help reduce both smoking prevalence and passive smoking, including smoking in homes where children are present.
- Through Healthy Schools, Croydon works to implement whole school policies on tobacco, featuring in-school provision for smoking education and access to help and support for pupils, staff and families.
 - A programme of tobacco training events is delivered throughout the year to equip local professionals from the NHS, community pharmacies, teachers, statutory and voluntary services to be able to offer advice, guidance and support to smokers who want to quit.

ALCOHOL

In Croydon **1 IN 6** (52,000) adults drink at **RISKY LEVELS**



1 IN 9 (34,000) adults **BINGE DRINK**

1 IN 3 secondary **SCHOOL CHILDREN** have drunk alcohol



WHO MISUSES ALCOHOL?

MEN	2X	PEOPLE WITH MENTAL HEALTH DISORDERS	5.5X
PEOPLE LIVING IN A DEPRIVED AREA	2.5X	WOMEN SUFFERING DOMESTIC ABUSE	15X
CHILDREN OF PROBLEM DRINKER	4X		

OTHER RISK FACTORS:

- People who are homeless
- People on probation
- Young offenders
- Looked after children

WHY DOES IT MATTER?

Almost half of all violent crime is related to alcohol

FACT

The most deprived are 3-5 times more likely to die of an alcohol-specific cause

ALCOHOL IS



The third biggest lifestyle risk factor for illness and death



An important cause of health inequalities

LINKED TO:



Liver disease



Heart disease



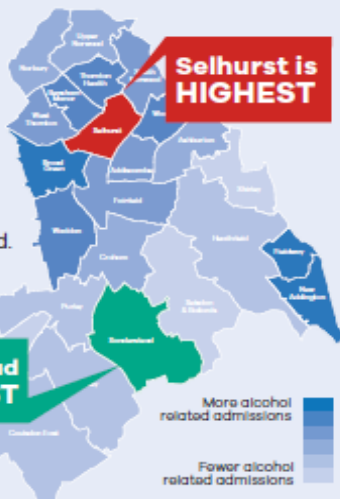
Poor mental health



Cancer

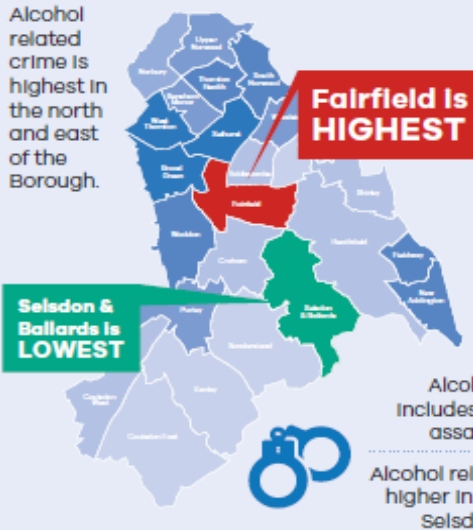
ALCOHOL RELATED HOSPITAL ADMISSIONS

Alcohol related hospital admissions are twice as high in Selhurst than in Sanderstead.



ALCOHOL RELATED CRIME

Alcohol related crime is highest in the north and east of the Borough.



Alcohol related crime includes violence, sexual assault and burglary.

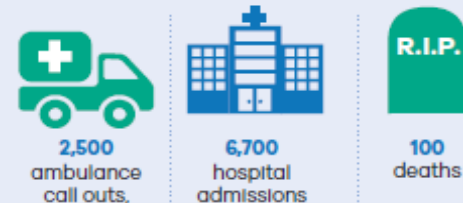
Alcohol related crime is **7x** higher in Fairfield than in Selsdon and Ballards.

HOSPITAL USE

Nationally, alcohol related hospital admission rates have more than doubled in the last 12 years.

Nationally, 40% of weekend attendances are caused by alcohol.

EACH YEAR IN CROYDON ALCOHOL ACCOUNTS FOR AROUND:



EACH YEAR ALCOHOL COSTS THE ECONOMY IN CROYDON **£144 MILLION**



DRUGS



NATIONALLY, 1 IN 11 adults and 1 IN 5 16 - 24 year olds have used an illegal drug in the last year, most commonly cannabis

At least 1 IN 25 adults and 1 IN 14 16-24 year olds use **CLUB DRUGS** such as ecstasy, ketamine and legal highs. Some club drug users are injecting



IN CROYDON 1 IN 125 (1,914 adults) use **OPIATES** (such as heroin) or **CRACK**



1 IN 6 people who use opiates or crack are **INJECTING DRUGS**

WHO USES DRUGS IN CROYDON?

MEN 2X

PEOPLE LIVING IN DEPRIVED AREAS 2X



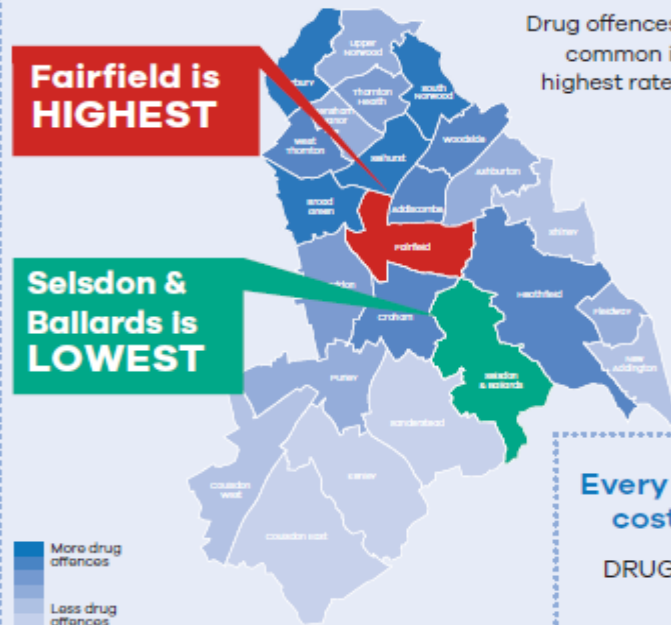
OTHER RISK FACTORS:

Parental drug use, childhood abuse, being in care, mental health problems.

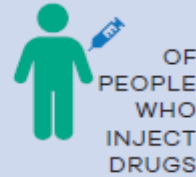
DRUG OFFENCES IN CROYDON

Fairfield is HIGHEST

Selsdon & Ballards is LOWEST



DANGERS OF INJECTING DRUGS



OF PEOPLE WHO INJECT DRUGS



Share needles/ syringes



Living with hepatitis C



Living with HIV

DRUGS ARE BAD FOR HEALTH



Drug use can damage the lungs, circulatory system, liver, bones



Cannabis, and club drugs are strongly linked to psychosis and schizophrenia



Mortality is 10X higher among heroin users than in the general population

Deaths involving club drugs and some prescription medicines are rising

Drug offences are 23 times more common in Fairfield, with the highest rate, than in the lowest.

DRUG USERS MAY COMMIT CRIME TO FUND DRUG USE



IN CROYDON THERE ARE 2000 DRUG OFFENCES PER YEAR

3 OUT OF 4 DRUG OFFENCES RELATE TO POSSESSION OF CANNABIS

AT LEAST 1 IN 2 PRISONERS USE DRUGS



Every year drug addiction costs Croydon a total of **£96.8M**

DRUG OFFENCES, SUCH AS **POSSESSION** OR **SUPPLY**, ARE CONCENTRATED IN AREAS OF DISADVANTAGE

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS

ALCOHOL AND DRUG PROBLEMS?

PREVENTION



Preventing harm from alcohol and drug misuse is complex. Organisations across health, social care, enforcement, education and the voluntary and community sector work in partnership to tackle the harms from alcohol and drugs.

Croydon supports the delivery of universal and targeted health education and promotion in schools and colleges which can delay the age at which young people start to drink and help prevent young people experimenting with drugs. Our Healthy Schools Programme, local websites and locally commissioned services such as Turning Point and Croydon Talkbus give children and young people accurate information about drugs and alcohol, and teach them the skills and confidence to manage peer pressure and resist drug and alcohol use.

For both adults and young people, campaigns such as Dry January and Alcohol Awareness, help to raise awareness and offer advice about sensible drinking. Our Drug and Alcohol treatment provider, Turning Point, delivers specialised training for professionals in alcohol and drug awareness. Croydon initiatives such as Best Start and the Think Family agenda increase resilience in parents and children and help children to achieve better outcomes.

ALCOHOL SPECIFIC PREVENTION



Reducing the availability of alcohol can reduce inequalities. Croydon has introduced a voluntary ban on high strength, low cost beers and ciders, which was adopted by licensed premises in the town centre.

The public health team have led a borough wide alcohol partnership with three priorities:

- Extending Croydon's alcohol Identification and Brief Advice programme across pharmacies, general practice, A&E and the voluntary sector. Services are encouraged to target people living in deprived areas.
- Publication of a website that delivers messages about safe drinking, offers advice and helps people get extra support
<https://www.croydon.gov.uk/supporting-sensible-drinking-in-croydon>
- Developing an A&E data sharing initiative to prevent alcohol related violence, together with Croydon University Hospital and the Safer Croydon Partnership.

DRUG SPECIFIC PREVENTION



Through the National Crime Agency and local policing, there are wide spread efforts to reduce the supply of drugs, including new psychoactive substances or "legal highs". Much of this takes place at an international level however local policing is vital and includes reducing the cultivation of cannabis and tackling drug dealing.

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS

ALCOHOL AND DRUG PROBLEMS? - CONTINUED

DIAGNOSIS



Locally, early intervention with young people with emerging problematic substance misuse issues (typically cannabis and alcohol misuse) is a priority. Specialist services aim to support these young people to be drug free at the end of their treatment.

The vast majority of adults and young people drinking at risky levels can be identified and supported through the alcohol Identification and Brief Advice programme. A smaller number are dependent on alcohol and require specialist treatment. For adults, specialist services are usually accessed by self-referral or visiting a GP.

Some people who misuse alcohol or drugs are identified through the criminal justice system. They can enter treatment voluntarily, as part of a community sentence, when in prison or when leaving prison on probation. Persistent and problematic offenders who misuse drugs or alcohol are supported within the Integrated Offender Management programme.

MANAGEMENT



Specialist treatment is provided by the Croydon Recovery Network operated by Turning Point. It is recovery orientated, aiming to help people become free from dependence on drugs and alcohol by providing a network of services. Each person has a recovery plan tailored to the needs of themselves and their families.

Treatment is delivered in a variety of settings such as the Family Justice Centre, hostels, GP surgeries, A&E and voluntary sector, aiming to reach vulnerable groups.

We also have over 20 mutual aid groups across the borough that help people to support each other.

PREVENTING COMPLICATIONS OF DRUG USE



Hepatitis B and C screening, treatment and Hep B vaccination are available to people who are injecting drug users. Around 15 local pharmacies provide needle exchange services to prevent transmission of blood borne viruses and give safer injecting information.

OBESITY

In Croydon **2 IN 3** adults (181,000) are overweight or **OBES**



2 IN 5 10-11 year olds (1,300) are overweight or obese in Croydon



Weight problems usually start in childhood. The prevalence of obesity **DOUBLES** between ages 4–5 years and 10–11 years. **HALF** of parents do not recognise their children are overweight or obese. **97%** of obese or overweight children have overweight parents.



WHY DOES OBESITY AND OVERWEIGHT MATTER?

OBESITY CAN LEAD TO STIGMA, BULLYING, LOW SELF ESTEEM AND HARMS HEALTH AND IS ASSOCIATED WITH:



Depression and anxiety



Osteoarthritis and back pain



Fertility problems



Stroke



Heart and liver disease



Type 2 diabetes

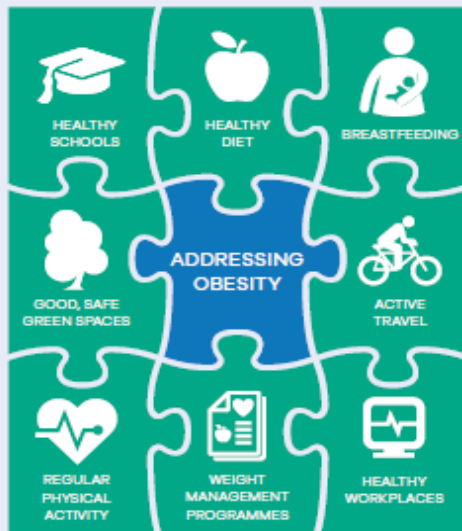


Asthma and sleep apnoea



Cancer

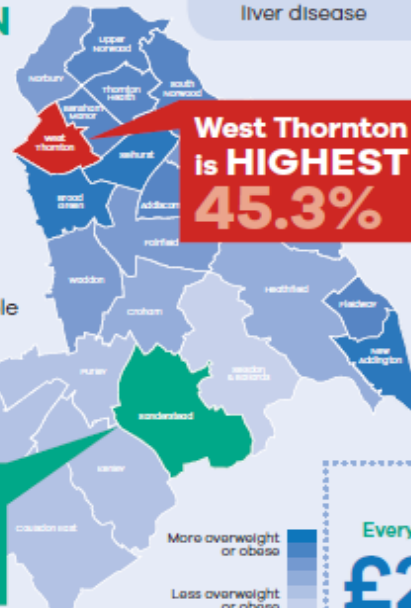
OBESITY IS COMPLEX



OBESITY IN CHILDREN AGED 10-11 YEARS

People living in poorer areas are more than twice as likely to be overweight as people living in more prosperous areas.

Sanderstead is LOWEST 24.8%



WHO IS MOST LIKELY TO HAVE WEIGHT PROBLEMS?



Weight problems are more common in certain black and minority ethnic groups, and people with a disability.



With Croydon becoming increasingly deprived, we would expect obesity levels to rise and the inequality gap to widen.

Obesity has huge costs to society **£190M**
 Every year, obesity costs the Croydon economy **£2.5M** OF THIS IS SPENT ON SOCIAL CARE

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO REDUCE OBESITY?

HEALTHIER EATING



Croydon is a Food Flagship borough aiming to transform food culture through school food projects, community gardening initiatives and healthier food businesses. Phunkyfoods targets early years and primary school children, via healthy lifestyle curriculum activities and resources, to prevent obesity and related health problems. Eatwell Croydon encourages shops, cafes and take-aways to use healthier cooking methods and to offer healthy food choices. Twenty food outlets have signed up so far. Breastfed children have less risk of obesity. Croydon Health Services are working towards stage 3 'Baby Friendly' accreditation, with hospitals, community services and Children Centres working together to support breastfeeding.

INDIVIDUAL WEIGHT MANAGEMENT



The Alive n' Kicking child weight management project helps overweight children and their families. Weight Watchers provides adult weight loss programmes based on a balanced, healthy diet plus promotion of physical activity.

MORE PHYSICAL ACTIVITY



The 'Croydon Challenge' Parks and Open Spaces initiative is working to maintain and improve use of local parks and to coordinate physical activity resources, while still reducing costs.

Croydon Council encourages physically active staff by developing active travel schemes, providing showers and cycle racks, and creating new opportunities for staff to be physically active.

The Sports and Physical Activity Team provide a MI Change programme, which is a personal health and fitness programme to support Croydon residents to become more physically active.

SCHOOL WEIGHT AND HEIGHT MONITORING



The National Child Measurement Programme assesses school pupils' weight and height. Parents receive their child's results and are encouraged to take positive action; so far, one-third plan to do so.

DIABETES

In Croydon an estimated **1 IN 13** people have diabetes



AROUND **19,900** PEOPLE HAVE BEEN DIAGNOSED



AN ADDITIONAL **6,400** DON'T KNOW THEY HAVE IT

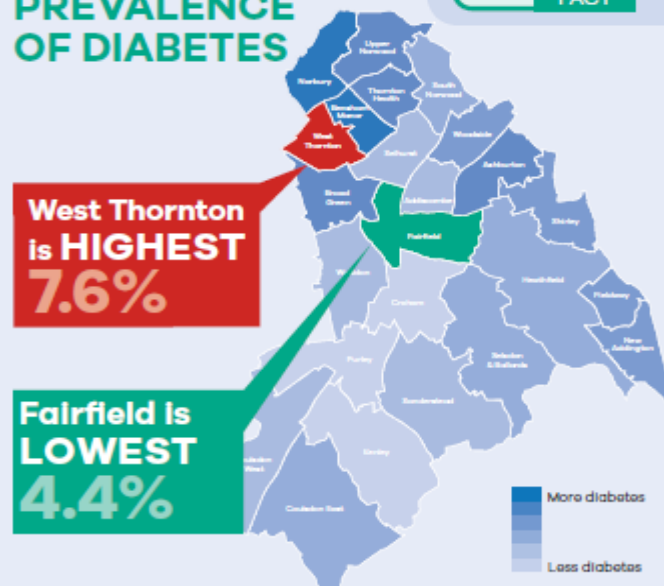
COST FOR CROYDON
£123.7 MILLION

£51M COST TO NHS

- 20% is related to diabetes treatment
- 80% is related to management of complications

£72.7M cost to wider society, including informal care, social care and lost productivity costs

PREVALENCE OF DIABETES



WHY DOES IT MATTER?

PEOPLE WITH DIABETES ARE MORE LIKELY TO SUFFER FROM:



38%
OF MAJOR
AMPUTATIONS
ARE IN
PEOPLE WITH
DIABETES

FACT



3x

Renal failure



2.5x

Heart failure



R.I.P.

306
PEOPLE DIE
EACH YEAR
IN CROYDON
BECAUSE OF
DIABETES

FACT



14%

14% of sight loss
is in people with
diabetes



2x

Stroke

WHO IS AT RISK FROM TYPE 2 DIABETES?

SOUTH ASIAN ETHNICITY **6X**

OBESSE **5X**

BLACK ETHNICITY **3X**

DEPRIVED AREAS **2.5X**

PREGNANT WOMEN **5% DEVELOP DIABETES**



THERE ARE TWO TYPES OF DIABETES

TYPE 1 diabetics do not make enough insulin and cannot be prevented



Most **TYPE 2** diabetes can be prevented.

ABOUT **90%** OF DIABETES IS TYPE 2

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS DIABETES?

PREVENTION



- Type 2 diabetes can be prevented through eating healthily and maintaining a healthy weight, particularly in childhood.
- A Joint Needs Assessment aimed at tackling obesity has enabled action across council departments and partner organisations.
- A new children's weight management service has been launched. In its first few months it has engaged with over 100 overweight 4 - 12 year olds, particularly those who live in Croydon's most deprived areas.
- Croydon is a Food Flagship Borough, this includes establishment of a Community Gardening Project and a Community Food Centre.

MANAGEMENT



- Croydon Clinical Commissioning Group (CCG) commissions hospital and community services to treat and manage patients with diabetes.
- For most patients, their GP or Practice Nurse is able to provide them with high quality care and can safely manage their condition.
- For more complex cases, there is a community service run by a Consultant and six Diabetic Specialist Nurses.
- Croydon University Hospital provides care for all acute diabetic conditions that cannot be managed safely in the community.
- Public Health Croydon produces annual GP profiles which show practices how they are performing in the management of diabetes compared to their peers and to local and national standards.

DIAGNOSIS



- An estimated 6400 people in Croydon have diabetes but are not aware of their underlying condition.
- The NHS Health Checks programme identifies individuals aged 40-74 who are at risk of developing diabetes
- Individuals who are overweight are directed to weight management services and are offered advice on diet, exercise and weight reduction.
- A simple blood test carried out during health checks can identify those who already have diabetes or are at high risk of developing it.
- Health checks are offered at 22 locations around Croydon and a Community Outreach Service has been set up to target high risk individuals especially in the North and West of the borough.

PREVENTING COMPLICATIONS



- Poorly controlled diabetes can cause complications which can be life threatening and have long-term effects on the eyes, heart, kidneys, nerves and feet.
- Croydon CCG commissions a Patient Education Service, which enables patients to better manage their diabetes and prevent complications.
- Each month 2000 patients are seen in a specialist eye screening service. Patients are either referred for treatment or, if well, are seen annually to continue to monitor for eye disease.

MENTAL HEALTH

In Croydon **1 in 6** adults (67,000 people) have a mental health problem at any one time



Most common are **ANXIETY** and **DEPRESSION**



Half of all lifetime mental health problems begin by **AGE 14**



Parenting during the first few years of life is critical

WHY DOES IT MATTER?

Poor mental health affects and is affected by every part of a person's life:

- physical health,
- health behaviours,
- education,
- employment,
- relationships,
- social inclusion,
- financial security
- housing.

FACT



up to 4 x

Risk of smoking



3 x

Risk of alcohol dependency



25%

25% have serious housing problems

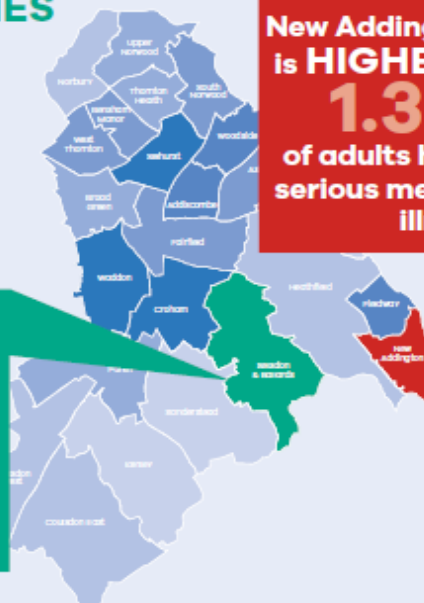


People with schizophrenia die 15-20 years earlier

1 in 95 adults (4,100 people) have a **SERIOUS MENTAL ILLNESS** such as schizophrenia or bipolar disorder

PEOPLE WITH SERIOUS MENTAL ILLNESS HAVE THE BIGGEST INEQUALITIES

- More people with serious mental illness
- Less people with serious mental illness



New Addington is HIGHEST
1.3%
of adults have serious mental illness

Selsdon and Ballards is LOWEST
0.4%
of adults have serious mental illness

STRONG COMMUNITY RESILIENCE AND MENTAL WELL-BEING prevents illness, reduces risk factors and supports recovery



WHO IS MOST AT RISK?

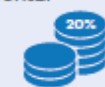
Psychosis is **7 X** more common in those of African-Caribbean descent. People in debt have **3 X** risk of mental disorder.

Depression and anxiety are:

- **4-10 X** more common in those unemployed for more than 12 weeks
- **3 X** more common in gypsies and travellers.

Mental health problems are:

- **3 X** as common in children in households with lowest 20% of income.
- Emotional and conduct disorder is **4-5 X** as common in children of those with poor parental mental health.



EVERY YEAR, THE COST TO CROYDON OF MENTAL HEALTH IS
£1.1 BN (TOTAL ECONOMIC AND SOCIAL COST)
£290 M (HEALTH AND SOCIAL SERVICES COST)

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO IMPROVE MENTAL HEALTH?

PREVENTION



Preventing mental illness is the most important way to improve mental health. Almost all Croydon Council services contribute to wellbeing, including parks and leisure, welfare advice, support for volunteering, education, and employment services.

Parenting programmes and early years support increase resilience in parents and children and lay the foundations of life-long wellbeing

Healthy behaviours contribute greatly to mental wellbeing. Croydon Council and its partners' services support Croydon residents and workers to be physically active, eat well, maintain a healthy weight, drink alcohol sensibly and not smoke.

There are five actions that individuals can take to improve mental wellbeing: Connect; Be Active; Take Notice; Keep Learning and Give.

MANAGEMENT



A recovery-focussed approach is central to supporting people with serious mental illness. Council and CCG commissioners are redesigning adult mental health services to provide: quicker GP access to specialists; improved community support; more management of crises outside hospitals. Improving the physical health of people with mental health problems is a priority. There is now: better access to healthy behaviour change support; a medication review service; and provision of appropriate physical health care to reduce health inequalities and early death in people with serious mental illness.

EARLY INTERVENTION



Early intervention is cost-effective and brings longer-lasting benefits. Local initiatives include:

- Training people who work with children and young people to identify emerging problems and ensure they, and their families, have the right support
- Increasing links between voluntary sector and primary care to help people with mental health problems access more wellbeing services
- New service supporting young people with (or at risk of) psychosis, including help for their families
- Increasing access to talking therapies and providing online support
- Increased diagnosis of dementia, helping to improve people's care experience and reduce hospital and social care use.

UNEMPLOYMENT AND HEALTH

In Croydon **1 IN 10** working age adults (**24,500** people) claim out-of-work benefits



Another **22,200** adults don't work and don't receive benefits

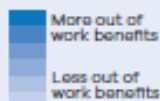
THE LONGER PEOPLE ARE UNEMPLOYED



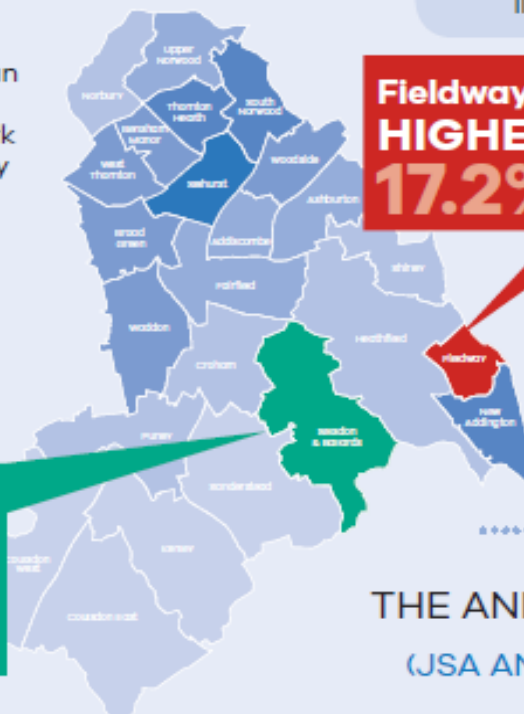
- the greater the impact on their health
- the less chance they have of re-employment

ADULTS CLAIMING OUT OF WORK BENEFITS

There are more than 4x as many adults claiming out of work benefits in Fieldway as in Selsdon and Ballards.



Selsdon and Ballards is LOWEST 3.9%



Fieldway is HIGHEST 17.2%

WHY DOES IT MATTER?

UNEMPLOYMENT CAN LEAD TO POOR HEALTH, AND POOR HEALTH CAN LEAD TO UNEMPLOYMENT



Greater risk of death **2x**

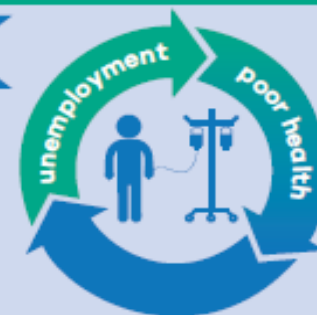


Risk of limiting long-term illness **2x**



Risk of mental illness **2x**

40% of unemployed young people have mental health problems



Unemployment can also lead to social isolation and exclusion, poor quality of life and low levels of general wellbeing



FACT

WHO IS MOST AT RISK?



Children of non-working parents



Those with poor skills and qualifications



Job-seekers who need flexible hours (ie due to child care)



People aged 50 and over

THE ANNUAL COSTS FOR CROYDON ARE **£144.7 M**
(JSA AND ESA PLUS ASSOCIATED HOUSING BENEFITS, PER YEAR)

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS UNEMPLOYMENT?

CREATING NEW JOBS IN CROYDON



- Developing Croydon as an attractive place to live and work
- Investing in housing and the wider infrastructure across Croydon
- Attracting businesses to Croydon
- Providing start-up schemes for local small businesses

KEEPING PEOPLE IN WORK



- Supporting local businesses as employers
- Providing skills development, training and support
- Promoting a healthy working environment, including an awareness of the importance of good mental health and a healthy work-life balance
- Supporting employers to provide flexible working

HELPING PEOPLE TO APPLY FOR JOBS



- Improving the educational attainment of all young people in Croydon
- Working with schools and colleges to help young people choose a career
- Working closely with Croydon's Job Centres
- Supporting apprenticeships in local businesses
- Providing skills development, training and support to Croydon residents

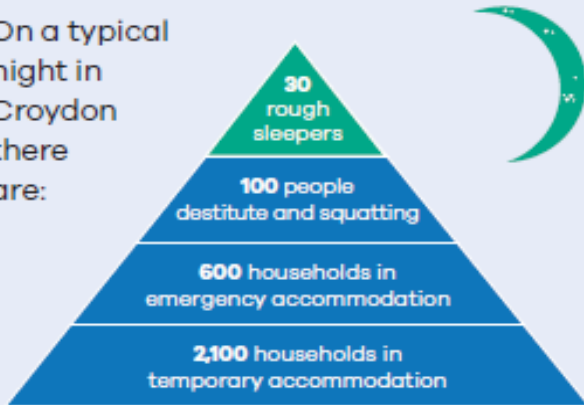
HELPING THE PEOPLE WHO NEED JOBS MOST



- Supporting people by tackling a number of their needs, such as employment, debt, housing and health, at the same time
- Targeting specific groups such as young people, older people, and people out of work due to ill health or disability
- Promoting equality and diversity

HOMELESSNESS AND OVERCROWDING

On a typical night in Croydon there are:



WHY DOES ROUGH SLEEPING MATTER? ROUGH SLEEPERS HAVE PARTICULARLY BAD HEALTH



22 x
Risk of alcohol and drug related death



13 x
Risk of violence



9 x
Risk of suicide



3 x
Risk of fatal traffic accident or fall



2 x
Risk of fatal infection

HOMELESSNESS IN CROYDON

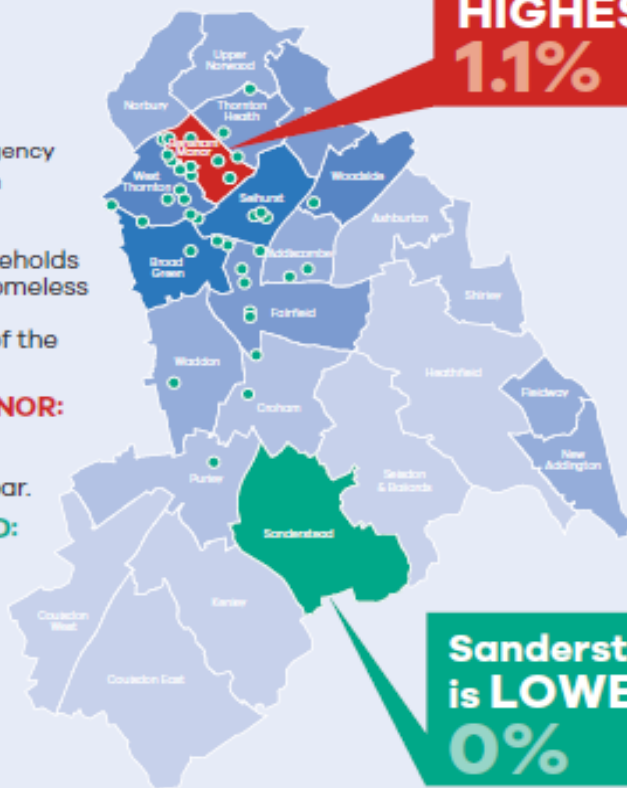
More homelessness
Less homelessness

Homeless emergency accommodation

The rate of households presenting as homeless is highest in the north and east of the Borough.

BENSHAM MANOR: 65 households accepted as homeless last year.

SANDERSTEAD: NO households accepted as homeless.



Bensham Manor is HIGHEST 1.1%

Sanderstead is LOWEST 0%



WHY IS TEMPORARY ACCOMMODATION AN ISSUE?

IT IS LINKED TO **PHYSICAL AND MENTAL** HEALTH PROBLEMS AND CAN HAVE LONG TERM IMPACTS ON CHILD DEVELOPMENT

Temporary accommodation is more common than rough sleeping. Although the health effects are less severe, living in temporary accommodation is also not good for health.



Respiratory problems



School absence; behavioural problems



Stigma/bullying and social exclusion



Stress, depression, anxiety



Lack of facilities to cook meals



Children witnessing traumatic events and feeling unsafe

ANXIETY AND DEPRESSION IS **3 X** MORE COMMON AMONGST CHILDREN WHO HAVE LIVED IN TEMPORARY ACCOMMODATION FOR MORE THAN A YEAR.

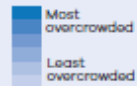
IN 2014/15, CROYDON IS FORECAST TO SPEND **£3.2 M** ON EMERGENCY ACCOMMODATION, AND **£1.8 M** ON LONGER-TERM TEMPORARY ACCOMMODATION

In Croydon **1 in 12** households (12,000 households) are overcrowded

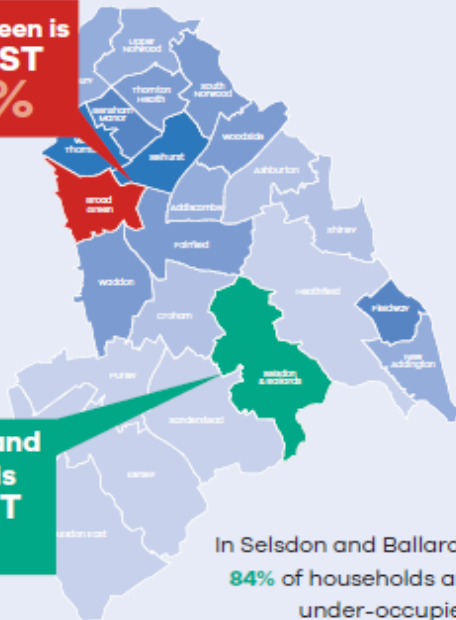


1 in 72 (2,000 households) are very overcrowded

OVERCROWDED HOUSEHOLDS



Broad Green is HIGHEST 18.3%

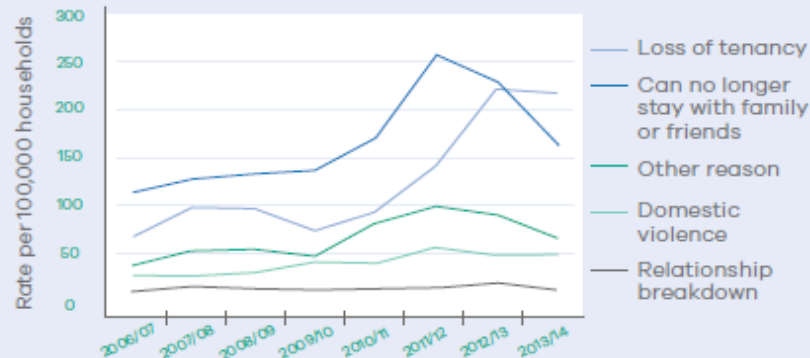


Selsdon and Ballards is LOWEST 2.4%

In Selsdon and Ballards, **84%** of households are under-occupied

LOSS OF A TENANCY IS NOW THE MAIN REASON FOR HOMELESSNESS IN CROYDON

Trend in newly accepted homeless households by cause



IF RECENT TRENDS CONTINUE, BY 2019:

50 PEOPLE will sleep rough each night and there will be

4,500

Croydon households living in temporary accommodation

CONCEALED FAMILIES ARE THOSE LIVING IN MULTI-FAMILY HOUSEHOLDS, IN ADDITION TO THE PRIMARY FAMILY.

There were **2,700** concealed families in Croydon in 2011

If trends continue, Croydon will have **3,700** concealed families by 2019



WHY DOES OVERCROWDING MATTER?

PEOPLE IN OVERCROWDED HOUSEHOLDS ARE MORE LIKELY TO HAVE:



Overcrowding means children sleeping in living rooms, dining rooms, and sharing bedrooms with parents



Meningitis



Respiratory problems



Sleep disturbance



Stress, depression and anxiety

Overcrowding can negatively affect child development and education

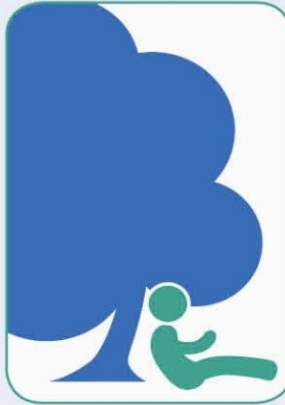


FACT

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO ADDRESS

HOMELESSNESS AND OVERCROWDING?

PREVENTING HOMELESSNESS



The council is developing a strategic, partnership approach to tackling homelessness, working together with stakeholders to publish a final plan by 2016. Projects to reduce households in temporary accommodation are progressing.

Services to support households facing homelessness include independent housing advice, a domestic violence 'sanctuary service', and accommodation assistance for young people moving on from hostels or supported accommodation.

The council's new 'single gateway' service, developed with public health funding, will maximise homelessness prevention through comprehensive needs assessments and integrated, targeted responses. Interventions include: financial management training; affordable credit provision; digital service provision and enabling; Universal Credit preparation; and development of employment skills and opportunities to help Croydon residents secure better jobs.

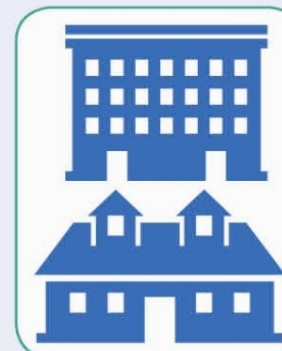
Over the next five years, 9,500 new homes will be built by the council and its partners' Croydon Promise scheme.

SUPPORTING THOSE IN TEMPORARY ACCOMMODATION



- The council will improve communication with homeless households and the availability of information.
- Health services and other support including access to employment will be better targeted to households living in temporary accommodation.
- The council will work with parents and schools to ensure children do not miss education when living in temporary accommodation and receive the appropriate support.

TACKLING OVERCROWDING THROUGH:



- Maximising social housing development via affordable housing policy
- Engaging with housing associations
- Converting properties into larger homes
- Prioritising housing needs of under-occupying tenants (freeing up larger properties) and severely overcrowded households
- Enabling overcrowded households to move into the private sector

MAINTAINING THE INDEPENDENCE OF OLDER PEOPLE

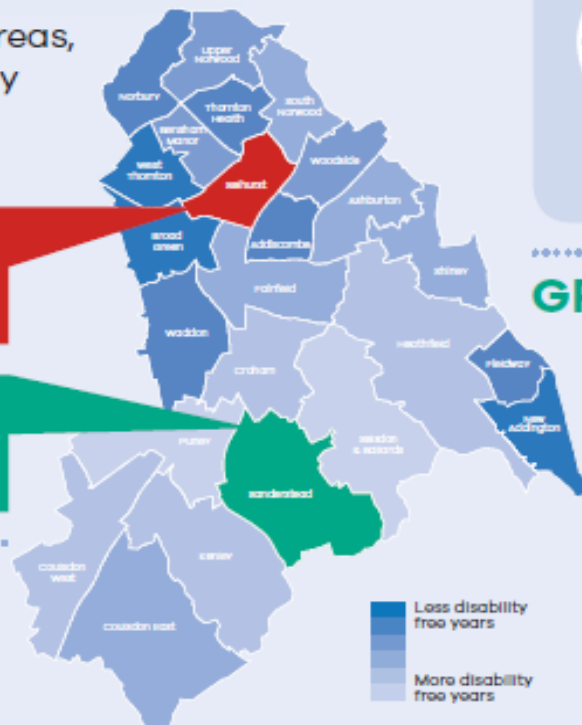
In Croydon, 1 in 8 people (47,500) are **OVER 65**



In Croydon's more prosperous areas, older people enjoy twice as many disability free years than in the poorer areas.

Selhurst is LOWEST
At age 65, people can expect to live **6.6 YEARS** free from disability

Sanderstead is HIGHEST
At age 65, people can expect to live **12.1 YEARS** free from disability



EACH YEAR, **200 OLDER PEOPLE**

are permanently admitted to care homes in Croydon, and

1 IN 10 receive **SOCIAL CARE**



PEOPLE OVER 65 ARE MORE LIKELY TO EXPERIENCE



1 in 2

Limited daily activities



1 in 5

Bladder problems



1 in 7

Bad or very bad health



1 in 8

Sight loss



1 in 8

Providing upaid care



1 in 10

2+ long-term health conditions



1 in 17

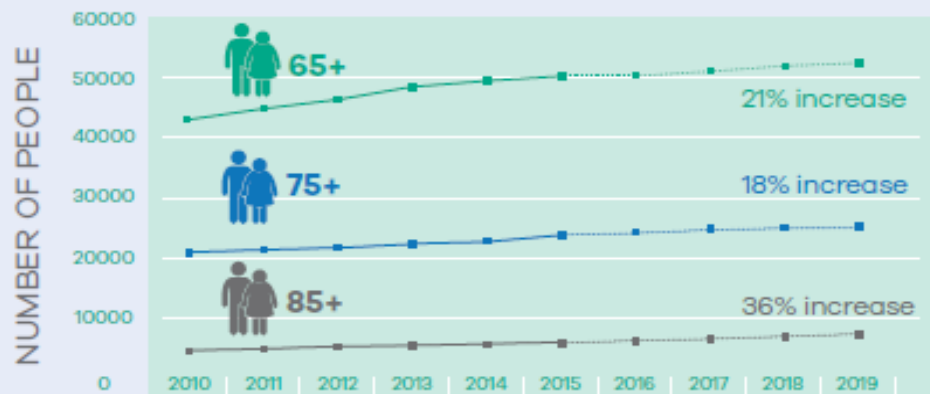
Loneliness always/often



1 in 50

Injury due to falls every year

GROWTH in the number of older adults in Croydon



The annual cost of social care for older people in Croydon is

£49.7 million

The annual cost to the NHS of healthcare to older adults is

£195 million

WHAT ARE CROYDON COUNCIL AND ITS PARTNERS DOING TO MAINTAIN

THE INDEPENDENCE OF OLDER ADULTS?

PROLONGING A HEALTH LATER LIFE



- Although people are generally living longer, more people are doing so with long term conditions or disabilities that limit their daily activities.
- Most long term conditions are preventable and people can work towards prolonging the number of years they can expect to remain healthy by adopting healthier lifestyles.
- Croydon Council commissions and provides a range of services to support people in staying healthy including NHS Health Checks, stop smoking support, weight management, leisure, sport and recreation.

SUPPORTING CARERS



- Older adults without a carer are more likely to be admitted to nursing or residential care. Helping older carers maintain their own health and wellbeing benefits both the carer and the person they care for.
- Support for carers is a priority in Croydon's joint health and wellbeing strategy.
- Croydon Carer Support Service is in contact with around 5000 carers in Croydon and provides much valued services including respite care, carer need assessments and sitting services.

INCREASING RESILIENCE AND INDEPENDENCE



- Croydon's joint health and wellbeing strategy aims to support people to be as resilient and independent as possible with a focus on prevention and early intervention.
- The NHS, council and voluntary sector have made a commitment to work together to improve outcomes for older people. This involves a significant shift towards increased care delivered in community settings.
- Croydon Council and Croydon Clinical Commissioning Group jointly commission a range of services to help older people maintain their independence including benefits advice, extra care and support such as home care, continence services, reablement and early supported discharge from hospital, equipment and adaptations services, and direct payments to enable people to take control of their own care.
- Croydon Clinical Commissioning Group's Prevention, Self-care, Self Management and Shared Decision Strategy recommends the use of Patient Decision Aids and assistive technology to support older adults and carers to maintain independence at home.

REDUCING SOCIAL ISOLATION AND LONELINESS



- Social isolation and loneliness are risk factors for poor health and wellbeing. Twice as many older adults than younger adults live alone and nearly 1 in 2 carers reported not having as much social contact as they wanted.
- Many organisations in Croydon provide services to help reduce social isolation and loneliness including befriending, lunch clubs, trips and activities, tea dances, exercise classes, guided walks, study groups.

Appendix 1: Community Health Profile spine chart

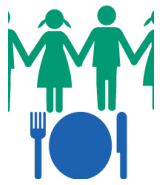
Domain	Indicator	Local No Per Year	Local value	Regional average ^a		England Average		England Best
				Eng value	Eng worst	25th Percentile	75th Percentile	
				England Worst	England Range		England Best	
Our communities	1 Deprivation	63,482	17.2	20.4	83.8			0.0
	2 Children in poverty (under 16s)	18,890	25.2	20.6	43.6			6.4
	3 Statutory homelessness	912	6.0	2.4	11.4			0.0
	4 GCSE achieved (5A*-C Inc. Eng & Maths)	2,424	64.4	60.8	38.1			81.9
	5 Violent crime (Violence offences)	5,659	15.5	10.6	27.1			3.3
	6 Long term unemployment	2,422	10.0	9.9	32.6			1.3
Children and young people's health	7 Smoking status at time of delivery	407	7.8	12.7	30.8			2.3
	8 Breastfeeding initiation	4,488	86.0	73.9	40.8			94.7
	9 Obese children (Year 6)	788	22.3	18.9	27.3			10.1
	10 Alcohol-specific hospital stays (under 18)	23	26.2	44.9	126.7			11.9
	11 Under 18 conceptions	206	28.6	27.7	52.0			8.8
Adults' health and lifestyle	12 Smoking prevalence	n/a	17.1	19.5	30.1			8.4
	13 Percentage of physically active adults	n/a	56.8	56.0	43.8			68.5
	14 Obese adults	n/a	24.3	23.0	35.2			11.2
	15 Excess weight in adults	533	62.1	63.8	75.9			45.9
	16 Incidence of malignant melanoma	42	12.6	14.8	31.8			3.6
Disease and poor health	17 Hospital stays for self-harm	486	124.8	188.0	596.0			50.4
	18 Hospital stays for alcohol related harm	1,726	526	637	1,121			365
	19 Drug misuse	1,676	6.9	8.6	26.3			0.8
	20 Recorded diabetes	19,219	6.4	6.0	8.7			3.5
	21 Incidence of TB	121	33.3	15.1	112.3			0.0
	22 Acute sexually transmitted infections	4,792	1,314	804	3,210			162
	23 Hip fractures in people aged 65 and over	278	564	568	828			403
Life expectancy and causes of death	24 Excess winter deaths (three year)	106	13.9	16.5	32.1			-3.0
	25 Life expectancy at birth (Male)	n/a	79.2	79.2	74.0			82.9
	26 Life expectancy at birth (Female)	n/a	83.2	83.0	79.5			86.6
	27 Infant mortality	22	3.9	4.1	7.5			0.7
	28 Smoking related deaths	398	270	292	480			172
	29 Suicide rate	22	6.2	8.5				
	30 Under 75 mortality rate: cardiovascular	200	84.1	81.1	144.7			37.4
	31 Under 75 mortality rate: cancer	333	139	146	213			106
	32 Killed and seriously injured on roads	101	27.7	40.5	116.3			11.3

Future health plans for Croydon

- Croydon's **Opportunity and Fairness Commission** will support public health plans to alleviate health inequalities
- Public health will continue to work with **residents** and **stakeholders**, to:
 - ✓ Turn behaviours and mind-sets around to improve health outcomes and attain fair treatment for all
 - ✓ Achieve long term savings in the economy by reversing preventable health problems

Future health plans continued....,

Accelerate progress already helping residents to make healthy lifestyle choices:



Food Flagship Borough programme



Croydon Heart Town



Stop smoking services. Aim for voluntary ban on smoking in playgrounds



Training businesses on regulations for young people, tobacco and alcohol sales

Future health plans continued...,



Walking and physical activity programmes



Improving housing standards and preventing homelessness



Helping people find jobs and remain in work



Tackling mental illness & social isolation i.e.

free swimming sessions for the over 65s