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Living Well: Maidstone

**PREMATURE DEATHS**
(under 75 years)

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<th>Cause of death</th>
<th>Percentage</th>
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<tr>
<td>Cancer</td>
<td>43%</td>
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<td>Circulatory</td>
<td>9%</td>
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<td>Respiratory</td>
<td>9%</td>
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<td>Other</td>
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<td>Ischaemic heart disease</td>
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<td>Heart disease (other)</td>
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<td>Cerebrovascular diseases</td>
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<td>Injuries</td>
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<td>Gastrointestinal diseases</td>
<td>5%</td>
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<td>Neurological conditions</td>
<td>3%</td>
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<td>Infant &amp; congenital conditions</td>
<td>3%</td>
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**LIFE EXPECTANCY**
at birth

- Male: 80.3 years
- Female: 83.7 years

**LONG TERM CONDITIONS**
recorded prevalence

- **Diabetes**: 6.4% (Ages 17+)
- **Hypertension**: 14.5%
- **Asthma**: 5.6% (All ages)
- **COPD**: 1.8% (All ages)

**MENTAL HEALTH**

- **Depression**: 10.3%

  Of adults recorded by their GP as having depression

**Emergency hospital admissions**
for serious mental health conditions

- **385** in 2017/18

**DEATHS**

- **Premature mortality rates (ASR)**
  - Most deprived: 519.5 per 100,000
  - Least deprived: 197.4 per 100,000

**INEQUALITIES BY DEPRIVATION**

Source:
- PCMD, 2013-2017
- NCMP, 2014/15-2015/16 combined
- QOF, 2017/18
- HES, 2017/18

Source:
- QOF, 2017/18

Source:

Source:
- QOF, 2017/18; HES,
<table>
<thead>
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<th>Cardiovascular disease</th>
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<td>Premature mortality &amp; hospital admissions</td>
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<td>Coronary heart disease (CHD)</td>
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<td>Diabetes</td>
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<td>Chronic Kidney disease (CKD)</td>
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<tr>
<td>Hypertension</td>
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</table>
Premature mortality from cardiovascular disease: by electoral ward

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: I00-I99), 2013-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cardiovascular disease: by electoral ward
Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: I00-I99), 2013-2017

Wards in grey have been subject to suppression rules.

Source: PCMD, prepared by KPHO (MP), Nov-18
### Premature mortality from cardiovascular disease: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: I00-I99), 2013-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cardiovascular disease: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: I00-I99), 2010 to 2017

Decreasing with a similar pace of change to Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cardiovascular disease: by deprivation
Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: I00-I99), 2010 - 2014 to 2013 - 2017

- Kent least deprived
- Maidstone least deprived
- Kent most deprived
- Maidstone most deprived

Least deprived trend - decreasing compared with stable trend for Kent
Most deprived trend - no significant change compared with decreasing trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for cardiovascular disease: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2015/16-2017/18

Source: <Smallprint>, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for cardiovascular disease: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for cardiovascular disease: by district

Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2015/16-2017/18

Source: <Smallprint>, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for cardiovascular disease: trend
Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2010/11 to 2017/18

No significant change compared with a decreasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for cardiovascular disease: by deprivation

Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2010/11 - 2015/16 - 2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - decreasing compared with an increasing trend for England
Most deprived trend - decreasing compared with an increasing trend for England

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Recorded atrial fibrillation prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having atrial fibrillation, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Living Well in Maidstone
Recorded atrial fibrillation prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having atrial fibrillation, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Percentage

- Greater than 2.6
- 2.2 to 2.6
- 2.0 to 2.2
- 1.8 to 2.0
- Less than 1.8

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded atrial fibrillation prevalence: by district

Percentage of patients recorded on GP QOF registers as having atrial fibrillation, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded atrial fibrillation prevalence: trend
Percentage of patients recorded on GP QOF registers as having atrial fibrillation, modelled ward-level estimates, 2013/14-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Increasing with a similar pace of change to Kent
Recorded atrial fibrillation prevalence: by deprivation

Percentage of patients recorded on GP QOF registers as having atrial fibrillation, modelled ward-level estimates, 2013/14-2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a slower pace of change than England

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded CHD prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having coronary heart disease, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded CHD prevalence: by electoral ward
Percentage of patients recorded on GP QOF registers as having coronary heart disease, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded CHD prevalence: by district

Percentage of patients recorded on GP QOF registers as having coronary heart disease, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded CHD prevalence: trend
Percentage of patients recorded on GP QOF registers as having coronary heart disease, modelled ward-level estimates, 2013/14-2017/18

Decreasing with a similar pace of change to Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded CHD prevalence: by deprivation
Percentage of patients recorded on GP QOF registers as having coronary heart disease, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - decreasing with a similar pace of change to England
Most deprived trend - stable compared with a decreasing trend for England

Source: QOF, prepared by KPHO (MP), Nov-18
Hospital admissions for Coronary Heart Disease (CHD): by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Hospital admissions for Coronary Heart Disease (CHD): by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18

Living Well in Maidstone
Hospital admissions for Coronary Heart Disease (CHD): by district

Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Hospital admissions for Coronary Heart Disease (CHD): trend
Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Hospital admissions for Coronary Heart Disease (CHD): by deprivation
Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

Least deprived trend - decreasing with a similar pace of change to England

Most deprived trend - decreasing with a similar pace of change to England

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Recorded prevalence of heart failure: by electoral ward

Percentage of patients recorded on GP QOF registers as having heart failure, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of heart failure: by electoral ward

Percentage of patients recorded on GP QOF registers as having heart failure, modelled ward-level estimates, 2015/16-2017/18

Percentage

- Greater than 0.8
- 0.7 to 0.8
- 0.6 to 0.7
- 0.6 to 0.6
- Less than 0.6

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of heart failure: by district

Percentage of patients recorded on GP QOF registers as having heart failure, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of heart failure: trend

Percentage of patients recorded on GP QOF registers as having heart failure, modelled ward-level estimates, 2013/14-2017/18

Increasing with a similar pace of change to Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of heart failure: by deprivation

Percentage of patients recorded on GP QOF registers as having heart failure, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for acute myocardial infarction: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: by district

Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: trend
Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2010/11 to 2017/18

No significant change compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: by deprivation

Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

Least deprived trend - no significant change compared with an stable trend for Kent

Most deprived trend - no significant change compared with an stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Hospital episodes for revascularisation procedures: by electoral ward

Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital episodes for revascularisation procedures: by electoral ward
Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital episodes for revascularisation procedures: by district

Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital episodes for revascularisation procedures: trend
Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2011/12 to 2017/18

No significant change compared with a decreasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital episodes for revascularisation procedures: by deprivation
Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2010/11 - 2014/15 to 2013/14 - 2017/18

Least deprived trend - no significant change compared with a stable trend for Kent
Most deprived trend - no significant change compared with a decreasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Recorded stroke and TIA prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having Stroke or TIA, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded stroke and TIA prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having Stroke or TIA, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded stroke and TIA prevalence: by district

Percentage of patients recorded on GP QOF registers as having Stroke or TIA, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded stroke and TIA prevalence: trend
Percentage of patients recorded on GP QOF registers as having Stroke or TIA, modelled ward-level estimates, 2013/14-2017/18

No significant change compared with an increasing trend for Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded stroke and TIA prevalence: by deprivation
Percentage of patients recorded on GP QOF registers as having Stroke or TIA, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - stable compared with a increasing trend for England
Most deprived trend - increasing with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Hospital admissions for stroke: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for stroke: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for stroke: by district

Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for stroke: trend
Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2011/12 to 2017/18

No significant change compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for stroke: by deprivation
Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2011/12 - 2015/16 to 2013/14 - 2017/18

Least deprived trend - no significant change compared with a stable trend for Kent
Most deprived trend - no significant change compared with a decreasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Recorded diabetes prevalence: by electoral ward

Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

[Bar chart showing diabetes prevalence by electoral ward with specific percentages and wards listed.]
Recorded diabetes prevalence: by electoral ward

Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded diabetes prevalence: by district

Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded diabetes prevalence: trend
Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2013/14-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded diabetes prevalence: by deprivation
Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2013/14 to 2017/18

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for diabetes: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis), 2013/14-2017/18

Wards with no data have been subject to suppression rules.

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for diabetes: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis) 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for diabetes: by district

Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for diabetes: trend

Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

No significant change compared with an increasing trend for Kent.

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for diabetes: by deprivation
Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

Least deprived trend - no significant change compared with a stable trend for Kent
Most deprived trend - no significant change compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Recorded chronic kidney disease (CKD) prevalence: by electoral ward

Percentage of patients aged 18+ recorded on GP QOF registers as having CKD, modelled ward-level estimates, 2015/16 - 2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Living Well in Maidstone
Recorded chronic kidney disease (CKD) prevalence: by electoral ward

Percentage of patients aged 18+ recorded on GP QOF registers as having CKD, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded chronic kidney disease (CKD) prevalence: by district

Percentage of patients aged 18+ recorded on GP QOF registers as having CKD, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded chronic kidney disease (CKD) prevalence: trend

Percentage of patients aged 18+ recorded on GP QOF registers as having CKD, modelled ward-level estimates, 2013/14-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Decreasing with a similar pace of change to Kent
Recorded chronic kidney disease (CKD) prevalence: by deprivation
Percentage of patients aged 18+ recorded on GP QOF registers as having CKD, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - decreasing
Most deprived trend - decreasing

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded hypertension prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having hypertension, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded hypertension prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having hypertension, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded hypertension prevalence: by district

Percentage of patients recorded on GP QOF registers as having hypertension, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded hypertension prevalence: trend

Percentage of patients recorded on GP QOF registers as having hypertension, modelled ward-level estimates, 2013/14-2017/18

Increasing with a similar pace of change to Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded hypertension prevalence: by deprivation
Percentage of patients recorded on GP QOF registers as having hypertension, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - stable compared with a stable trend for England

Source: QOF, prepared by KPHO (MP), Nov-18
Undiagnosed hypertension (estimated): by electoral ward

Modelled estimates of the prevalence of undiagnosed hypertension amongst those aged 16+, modelled ward-level estimates, 2015

Source: Imperial College London, prepared by KPHO (RK), Apr-18
Undiagnosed hypertension (estimated): by electoral ward

Modelled estimates of the prevalence of undiagnosed hypertension amongst those aged 16+, modelled ward-level estimates, 2015

Source: Imperial College London, prepared by KPHO (RK), Apr-18
Undiagnosed hypertension (estimated): by district

Modelled estimates of the prevalence of undiagnosed hypertension amongst those aged 16+, modelled ward-level estimates, 2015

Source: Imperial College London, prepared by KPHO (RK), Apr-18
Cancer

- Premature mortality from cancers
- Cancers considered amenable to early detection
- Cancers considered preventable
- Cancer registrations
- Cancer prevalence
- Hospital admissions with cancer
- Cancer screening: Bowel
- Cancer screening: Breast
- Cancer screening: Cervical
Premature mortality from cancer: by electoral ward

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C97), 2013-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancer: by electoral ward

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C97), 2013-2017

Source: PCMD, prepared by KPHO (RK), Nov-18

Age standardised rate per 100,000 people aged under 75 years

- Greater than 166.2
- 140.8 to 166.2
- 123.2 to 140.8
- 104.8 to 123.2
- Less than 104.8

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancer: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C97), 2013-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancer: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C97), 2010 to 2017

Decreasing compared with a stable trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancer: by deprivation

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C97), 2010 - 2014 to 2013 - 2017

- Kent least deprived
- Kent most deprived
- Maidstone least deprived
- Maidstone most deprived

Least deprived trend - no significant change compared with decreasing trend for Kent
Most deprived trend - no significant change compared with stable trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered amenable to early detection: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C17-C21, C43, C50, C53, C61), 2015-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered amenable to early detection: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C17-C21, C43, C50, C53, C61), 2010 - 2012 to 2015 - 2017

No significant change compared with a stable trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered amenable to early detection: by deprivation

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C17-C21, C43, C50, C53, C61), 2010 - 2012 to 2015 - 2017

Least deprived trend - decreasing
Most deprived trend - increasing

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered preventable: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C16, C18-C22, C33-C34, C43, C45, C50, C53), 2015-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered preventable: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C16, C18-C22, C33-C34, C43, C45, C50, C53), 2010 to 2017

No significant change compared with a decreasing trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from cancers considered preventable: by deprivation
Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: C00-C16, C18-C22, C33-C34, C43, C45, C50, C53), 2010 - 2012 to 2015 - 2017

Least deprived trend - decreasing
Most deprived trend - stable

Source: PCMD, prepared by KPHO (RK), Nov-18
Cancer registrations - all ages: by electoral ward

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - all ages: by electoral ward
All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - all ages: by district

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - all ages: trend

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2008-2012 - 2011-2015

No significant change compared with a stable trend for Kent

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - under 75's: by electoral ward

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - under 75's: by electoral ward

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - under 75's: by district

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2011-2015

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Cancer registrations - under 75's: trend

All malignant cancers (ICD10 C00-C97) excluding Basal Cell Carcinoma of the skin (ICD10 C44, M8090 - M8098), crude rate per 10,000 population, 2008-2012 - 2011-2015

No significant change compared with a stable trend for Kent

Source: The National Cancer Registration Service (NCRS), prepared by KPHO (MP), Apr-18
Recorded cancer prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having cancer, excluding non-melanoma skin cancer, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Living Well in Maidstone

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded cancer prevalence: by electoral ward
Percentage of patients recorded on GP QOF registers as having cancer, excluding non-melanoma skin cancer, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded cancer prevalence: by district

Percentage of patients recorded on GP QOF registers as having cancer, excluding non-melanoma skin cancer, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded cancer prevalence: trend

Percentage of patients recorded on GP QOF registers as having cancer, excluding non-melanoma skin cancer, modelled ward-level estimates, 2013/14-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Increasing with a similar pace of change to Kent
Recorded cancer prevalence: by deprivation

Percentage of patients recorded on GP QOF registers as having cancer, excluding non-melanoma skin cancer, modelled ward-level estimates, 2013/14-2017/18

- **England least deprived**
- **Kent least deprived**
- **England most deprived**
- **Kent most deprived**

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a slower pace of change than England

Source: QOF, prepared by KPHO (MP), Nov-18
Emergency hospital admissions with cancer: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: C00-C97, D00-D09, D33, D37-D48, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions with cancer: by electoral ward

Age standardised rate per 100,000 resident population, ICD-10: C00-C97, D00-D09, D33, D37-D48, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions with cancer: by district

Age standardised rate per 100,000 resident population, ICD-10: C00-C97, D00-D09, D33, D37-D48, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions with cancer: trend
Age standardised rate per 100,000 resident population, ICD-10: C00-C97, D00-D09, D33, D37-D48, 2010/11 to 2017/18

No significant change compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions with cancer: by deprivation

Age standardised rate per 100,000 resident population, ICD-10: C00-C97, D00-D09, D33, D37-D48, 2010/11 to 2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - stable with a similar pace of change to England
Most deprived trend - stable with a similar pace of change to England

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Bowel cancer screening rate (60-74): by electoral ward

Percentage of persons aged 60-74 screened for bowel cancer in the last 30 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Bowel cancer screening rate (60-74): by electoral ward

Percentage of persons aged 60-74 screened for bowel cancer in the last 30 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Bowel cancer screening rate (60-74): by district

Percentage of persons aged 60-74 screened for bowel cancer in the last 30 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Bowel cancer screening rate (60-74): trend

Percentage of persons aged 60-74 screened for bowel cancer in the last 30 months, modelled ward-level estimates, 2009/10 to 2016/17

Increasing with a similar pace of change to Kent

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Bowel cancer screening rate (60-74): by deprivation
Percentage of persons aged 60-74 screened for bowel cancer in the last 30 months, modelled ward-level estimates, 2009/10 to 2016/17

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a similar pace of change to England

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Breast cancer screening rate: by electoral ward

Percentage of women aged 50-70 screened for breast cancer in the last 36 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Breast cancer screening rate: by electoral ward

Percentage of women aged 50-70 screened for breast cancer in the last 36 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Breast cancer screening rate: by district

Percentage of women aged 50-70 screened for breast cancer in the last 36 months, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Breast cancer screening rate: trend

Percentage of women aged 50-70 screened for breast cancer in the last 36 months, modelled ward-level estimates, 2009/10 to 2016/17

No significant change compared with a stable trend for Kent

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Breast cancer screening rate: by deprivation
Percentage of women aged 50-70 screened for breast cancer in the last 36 months, modelled ward-level estimates, 2009/10 to 2016/17

Least deprived trend - stable with a similar pace of change to England
Most deprived trend - stable with a similar pace of change to England

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Cervical cancer screening rate: by electoral ward

Percentage of women aged 25-64 screened for cervical cancer within the target period, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Cervical cancer screening rate: by electoral ward

Percentage of women aged 25-64 screened for cervical cancer within the target period, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Cervical cancer screening rate: by district

Percentage of women aged 25-64 screened for cervical cancer within the target period, modelled ward-level estimates, 2014/15-2016/17

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Cervical cancer screening rate: trend

Percentage of women aged 25-64 screened for cervical cancer within the target period, modelled ward-level estimates, 2009/10 to 2016/17

Decreasing with a similar pace of change to Kent

Source: Open Exeter, prepared by KPHO (RK), Apr-18
Cervical cancer screening rate: by deprivation
Percentage of women aged 25-64 screened for cervical cancer within the target period, modelled ward-level estimates, 2009/10 to 2016/17

Least deprived trend - decreasing with a similar pace of change to England
Most deprived trend - decreasing with a similar pace of change to England

Source: Open Exeter, prepared by KPHO (RK), Apr-18
## Respiratory disease

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Premature mortality from respiratory disease: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: J00-J99), 2015-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from respiratory disease: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: J00-J99), 2009 - 2011 to 2015 - 2017

Decreasing compared with a stable trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from respiratory disease: by deprivation
Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: J00-J99), 2010 - 2014 to 2013 - 2017

- Kent least deprived
- Maidstone least deprived
- Kent most deprived
- Maidstone most deprived

Least deprived trend - no significant change compared with stable trend for Kent
Most deprived trend - no significant change compared with increasing trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: by electoral ward

Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: by electoral ward

Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: by district

Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: trend

Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2011/12 - 2013/14 to 2015/16 - 2017/18

Increasing with a similar pace of change to Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: by deprivation

Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2011/12 - 2013/14 to 2015/16 - 2017/18

- Kent least deprived
- Maidstone least deprived
- Kent most deprived
- Maidstone most deprived

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18

Least deprived trend - increasing with a similar pace of change to Kent
Most deprived trend - increasing with a similar pace of change to Kent
Recorded COPD prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having COPD. Percentage of patients recorded on GP QOF registers as having COPD, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Living Well in Maidstone
Recorded COPD prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having COPD, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded COPD prevalence: by district

Percentage of patients recorded on GP QOF registers as having COPD, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded COPD prevalence: trend

Percentage of patients recorded on GP QOF registers as having COPD, modelled ward-level estimates, 2013/14-2017/18

Increasing with a similar pace of change to Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded COPD prevalence: by deprivation

Percentage of patients recorded on GP QOF registers as having COPD, modelled ward-level estimates, 2013/14-2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Undiagnosed COPD (estimated): by electoral ward

Modelled estimates of the prevalence of undiagnosed COPD, modelled ward-level estimates, 2014/15-2016/17

Source: Imperial College London/QOF, prepared by KPHO (RK), Apr-18
Undiagnosed COPD (estimated): by electoral ward

Modelled estimates of the prevalence of undiagnosed COPD, modelled ward-level estimates, 2014/15-2016/17

Percentage

- Greater than 1.1
- 0.9 to 1.1
- 0.6 to 0.9
- 0.4 to 0.6
- Less than 0.4

Source: Imperial College London/QOF, prepared by KPHO (RK), Apr-18
Undiagnosed COPD (estimated): by district

Modelled estimates of the prevalence of undiagnosed COPD, modelled ward-level estimates, 2014/15-2016/17

Source: Imperial College London/QOF, prepared by KPHO (RK), Apr-18
Emergency hospital admissions for COPD: by electoral ward

Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for COPD: by electoral ward

Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18

Living Well in Maidstone

Greater than 486.1
367.8 to 486.1
287.3 to 367.8
197.5 to 287.3
Less than 197.5

Age standardised rate per 100,000 adults aged 35+

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for COPD: by district

Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for COPD: trend

Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2010/11 to 2017/18

No significant change compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for COPD: by deprivation
Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

Least deprived trend - no significant change compared with a stable trend for Kent
Most deprived trend - increasing compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Recorded asthma prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded asthma prevalence: by electoral ward

Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18

Percentage

- Greater than 6.0
- 5.7 to 6.0
- 5.4 to 5.7
- 5.2 to 5.4
- Less than 5.2

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded asthma prevalence: by district

Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded asthma prevalence: trend

Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2013/14-2017/18

No significant change compared with a stable trend for Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded asthma prevalence: by deprivation
Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2013/14-2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - stable with a similar pace of change to England
Most deprived trend - stable with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Mental health

- Prevalence of serious mental health conditions
- Hospital admissions for mental health conditions
- Prevalence of learning disabilities
- Suicides
- Hospital admissions for self harm
Recorded prevalence of serious mental health conditions: by electoral ward

The percentage of patients recorded on GP QOF registers as having schizophrenia, bipolar affective disorder, other psychoses or on lithium therapy, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of serious mental health conditions: by electoral ward

The percentage of patients recorded on GP QOF registers as having schizophrenia, bipolar affective disorder, other psychoses or on lithium therapy, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of serious mental health conditions: by district

The percentage of patients recorded on GP QOF registers as having schizophrenia, bipolar affective disorder, other psychoses or on lithium therapy, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of serious mental health conditions: trend

The percentage of patients recorded on GP QOF registers as having schizophrenia, bipolar affective disorder, other psychoses or on lithium therapy, modelled ward-level estimates, 2013/14-2017/18

Increasing with a similar pace of change to Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of serious mental health conditions: by deprivation

The percentage of patients recorded on GP QOF registers as having schizophrenia, bipolar affective disorder, other psychoses or on lithium therapy, modelled ward-level estimates, 2013/14-2017/18

- England least deprived
- Kent least deprived
- England most deprived
- Kent most deprived

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - increasing with a similar pace of change to England

Source: QOF, prepared by KPHO (MP), Nov-18
Hospital admissions for mental health conditions: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: F (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for mental health conditions: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: F (primary diagnosis), 2013/14 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18

Age standardised rate per 100,000 resident population

Greater than 268.8
215.9 to 268.8
178.9 to 215.9
139.0 to 178.9
Less than 139.0

Living Well in Maidstone
Hospital admissions for mental health conditions: by district

Age standardised rate per 100,000 resident population, ICD 10: F (primary diagnosis), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for mental health conditions: trend
Age standardised rate per 100,000 resident population, ICD 10: F (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Hospital admissions for mental health conditions: by deprivation

Age standardised rate per 100,000 resident population, ICD 10: F (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Recorded prevalence of learning disabilities: by electoral ward

Percentage of patients recorded on GP QOF registers as having a learning disability, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of learning disabilities: by electoral ward

Percentage of patients recorded on GP QOF registers as having a learning disability, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of learning disabilities: by district

Percentage of patients recorded on GP QOF registers as having a learning disability, modelled ward-level estimates, 2015/16-2017/18

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of learning disabilities: trend
Percentage of patients recorded on GP QOF registers as having a learning disability, modelled ward-level estimates, 2013/14-2017/18

No significant change compared with a stable trend for Kent

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded prevalence of learning disabilities: by deprivation
Percentage of patients recorded on GP QOF registers as having a learning disability, modelled ward-level estimates, 2013/14-2017/18

Least deprived trend - increasing compared with a stable trend for England
Most deprived trend - increasing compared with a stable trend for England

Source: QOF, prepared by KPHO (MP), Nov-18
Suicide rate: by district
Age standardised rate per 100,000 people aged 10+, classified by underlying cause of death (ICD-10: X60-X84 (ages 10+ only), Y10-Y34 (ages 15+ only)), 2015-2017

Source: PCMD, prepared by KPHO (RK), Nov-18
Suicide rate: trend

Age standardised rate per 100,000 people aged 10+, classified by underlying cause of death (ICD-10: X60-X84 (ages 10+ only), Y10-Y34 (ages 15+ only)), 2010 - 2012 to 2015 - 2017

No significant change compared with a stable trend for Kent

Source: PCMD, prepared by KPHO (RK), Nov-18
Suicide rate: by deprivation

Age standardised rate per 100,000 people aged 10+, classified by underlying cause of death (ICD-10: X60-X84 (ages 10+ only), Y10-Y34 (ages 15+ only)), 2010 - 2014 to 2013 - 2017

- Kent least deprived
- Kent most deprived

Source: PCMD, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for self-harm: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: X60-X84 (main recorded cause), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for self-harm: by electoral ward

Age standardised rate per 100,000 resident population, ICD 10: X60-X84 (main recorded cause), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Age standardised rate per 100,000 resident population

- Greater than 243.3
- 188.1 to 243.3
- 145.4 to 188.1
- 107.5 to 145.4
- Less than 107.5

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for self-harm: by district

Age standardised rate per 100,000 relevant resident population, ICD 10: X60-X84 (main recorded cause), 2013/14-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for self-harm: trend

Age standardised rate per 100,000 resident population, ICD 10: X60-X84 (main recorded cause), 2010/11 to 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18

Increasing compared with a stable trend for Kent
Emergency hospital admissions for self-harm: by deprivation

Age standardised rate per 100,000 resident population, ICD 10: X60-X84 (main recorded cause), 2010/11-2012/13 to 2015/16-2017/18

Least deprived trend - increasing with a similar pace of change to England
Most deprived trend - decreasing compared with a decreasing trend for England

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18