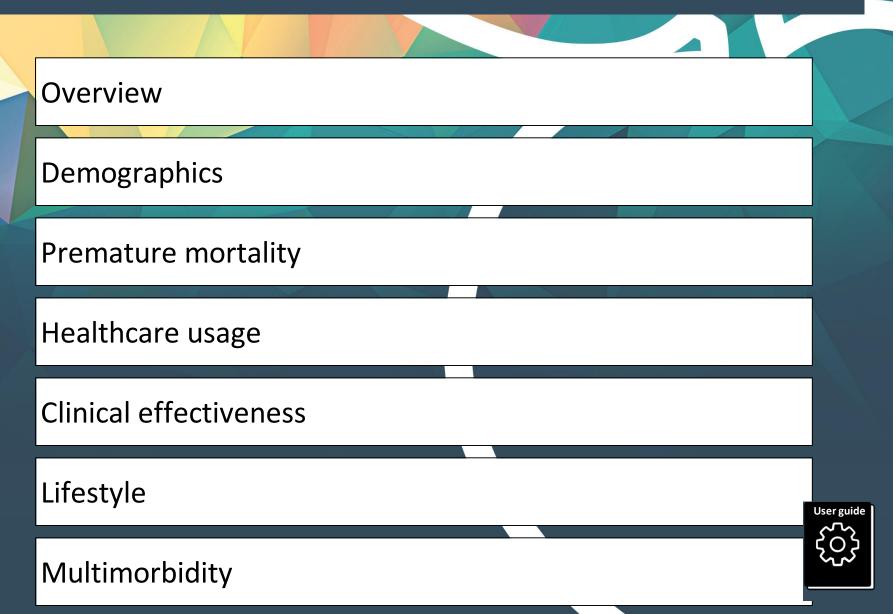
# OBSERVATORY

# Living Well: Overview

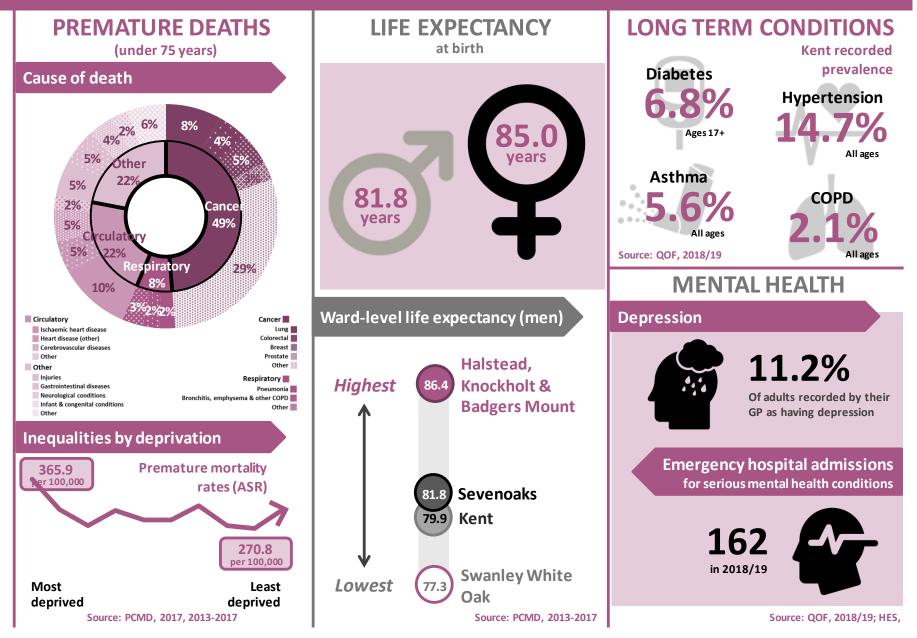
Living well in Sevenoaks

### Contents



### Living Well: Sevenoaks

Heath and Social Care Maps



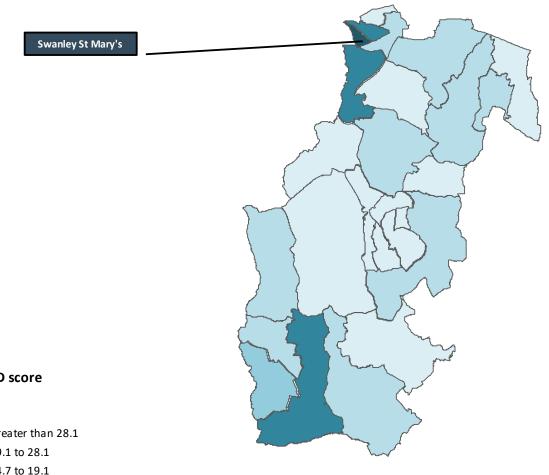
# Demographics

### Index of Multiple Deprivation (IMD)



#### Index of Multiple Deprivation (IMD): by electoral ward

Overall IMD score, population weighted quintile, 2019



#### **Overall IMD score**



Source: DCLG, prepared by KPHO (MP), Oct-19

### Premature mortality

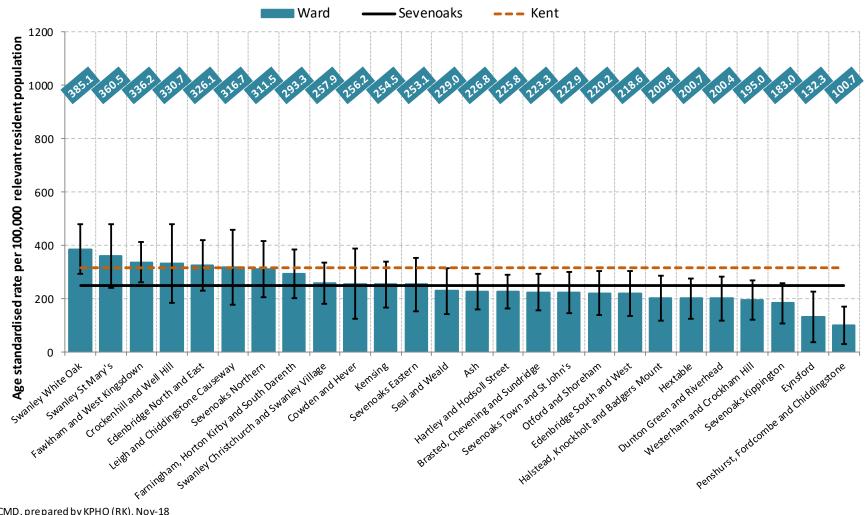
Premature mortalty from all causes

Causes of premature death



#### Premature mortality from all causes: by electoral ward

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: A00-Y99), 2015-2017

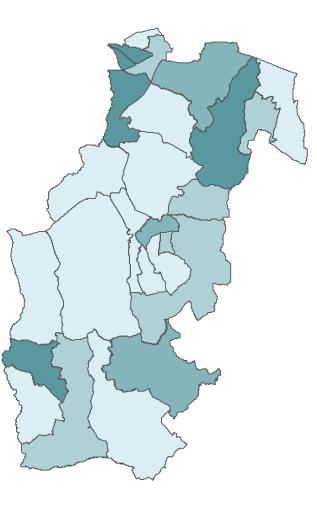




#### Premature mortality from all causes: by electoral ward

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: A00-Y99), 2015-

2017



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

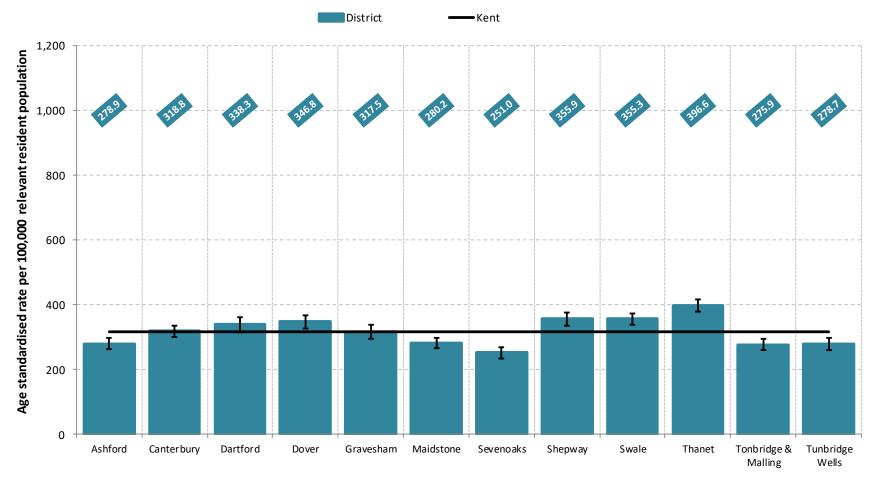


Greater than 391.6 324.9 to 391.6 286.9 to 324.9 225.8 to 286.9 Less than 225.8

#### Premature mortality from all causes: by district

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: A00-Y99),

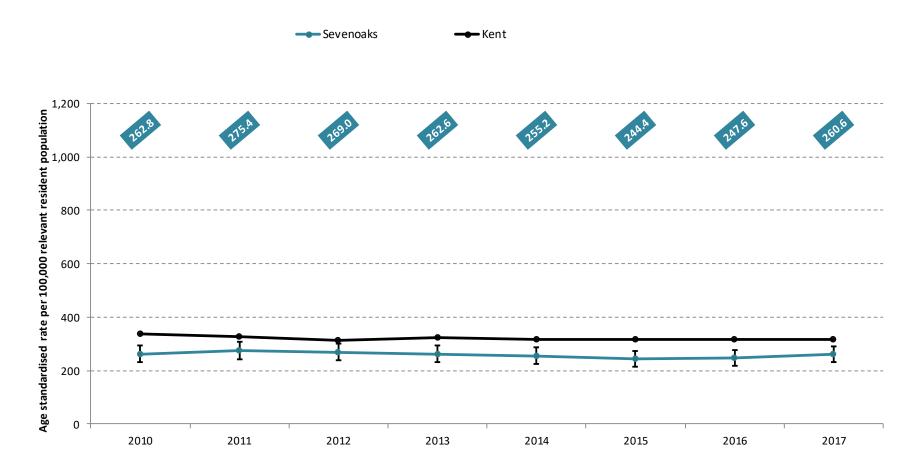
2015-2017





#### Premature mortality from all causes: trend

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10:A00-Y99), 2010 to 2017

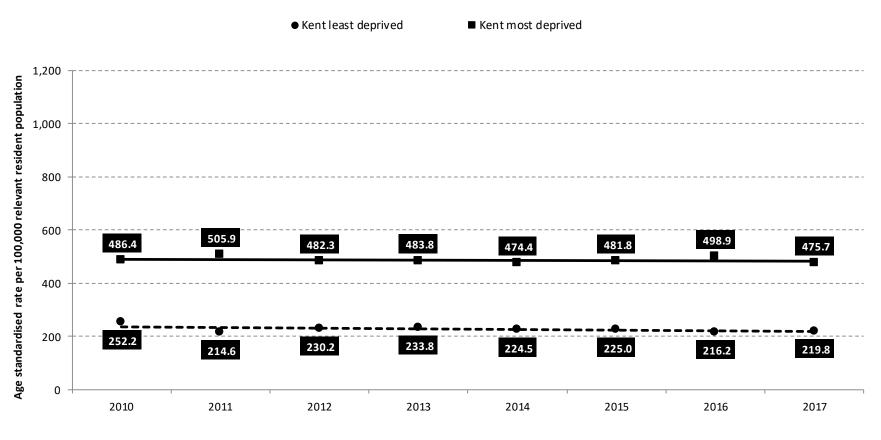


No significant change compared with a decreasing trend for Kent



#### Premature mortality from all causes: by deprivation

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: A00-Y99), 2010 to 2017

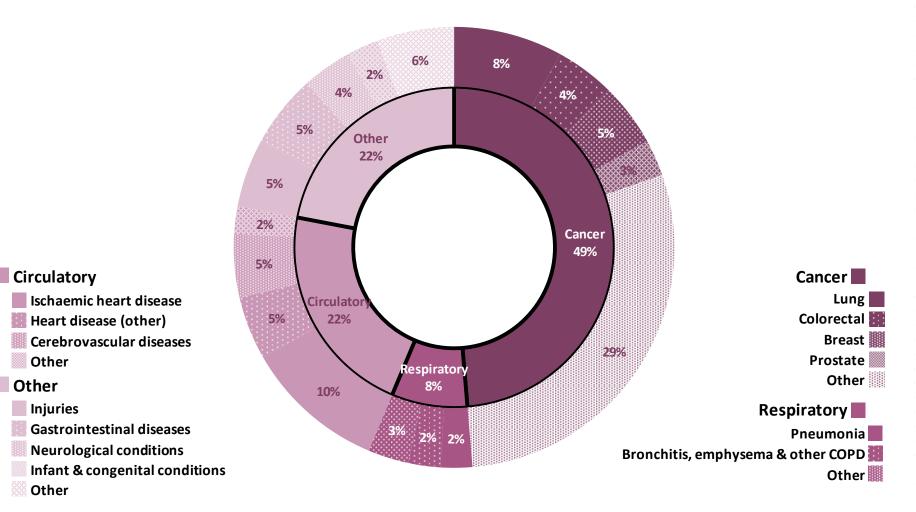


Least deprived trend - stable Most deprived trend - stable



#### **Causes of premature mortality**

Underlying cause of death for persons aged under 75 years, 2017





# Healthcare usage

A&E attendances

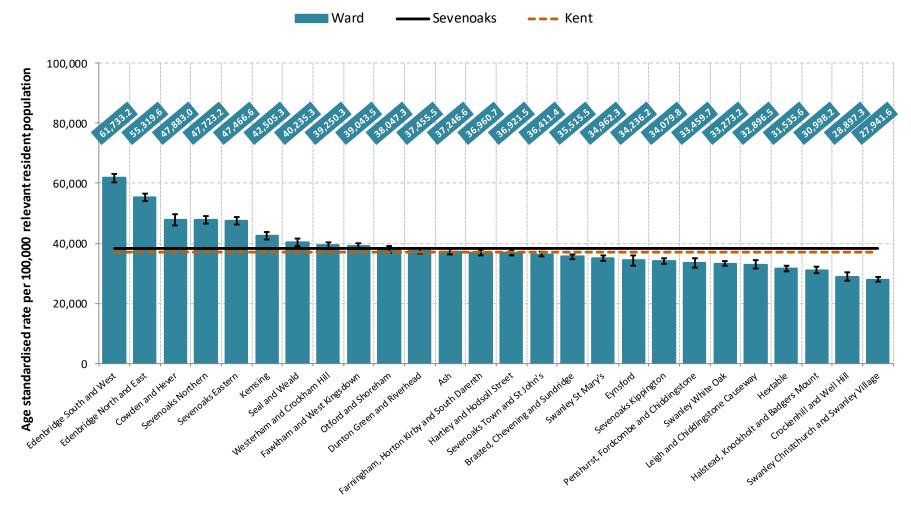
Elective hospital admissions

**Emergency hospital admissions** 



#### Accident & Emergency attendances: by electoral ward

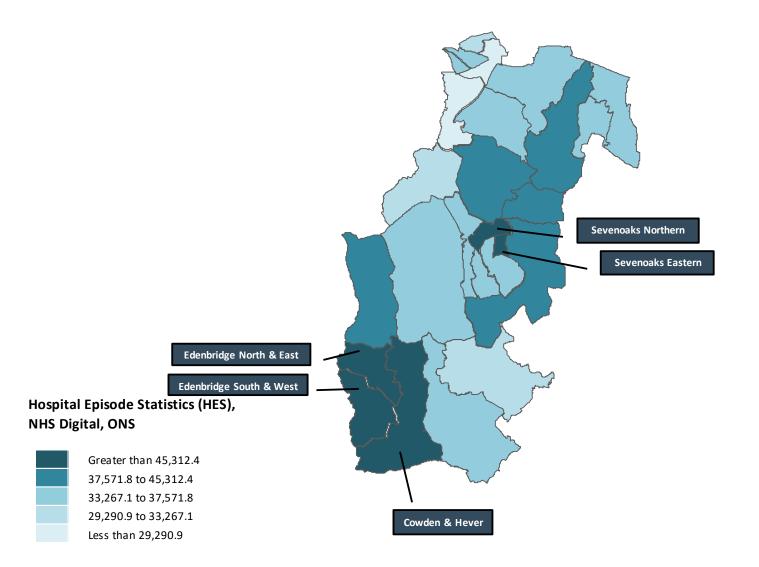
Age standardised rate per 100,000 resident population, , 2016/17-2018/19





#### Accident & Emergency attendances: by electoral ward

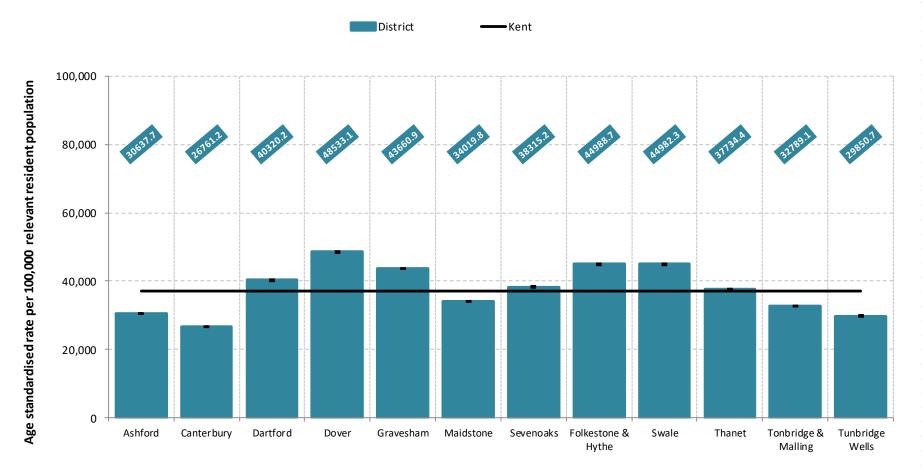
Age standardised rate per 100,000 resident population, 2016/17-2018/19





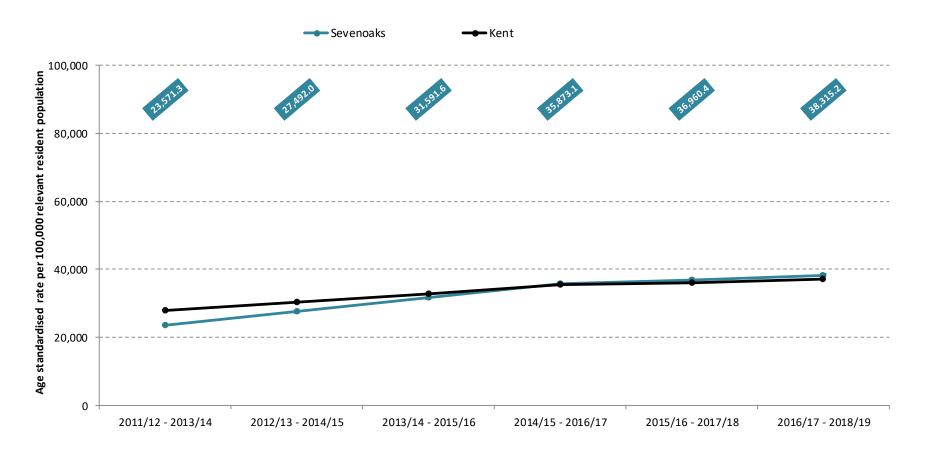
#### Accident & Emergency attendances: by district

Age standardised rate per 100,000 resident population, , 2016/17-2018/19



#### Accident & Emergency attendances: trend

Age standardised rate per 100,000 resident population, 2010/11 - 2012/13 to 2016/17 - 2018/19

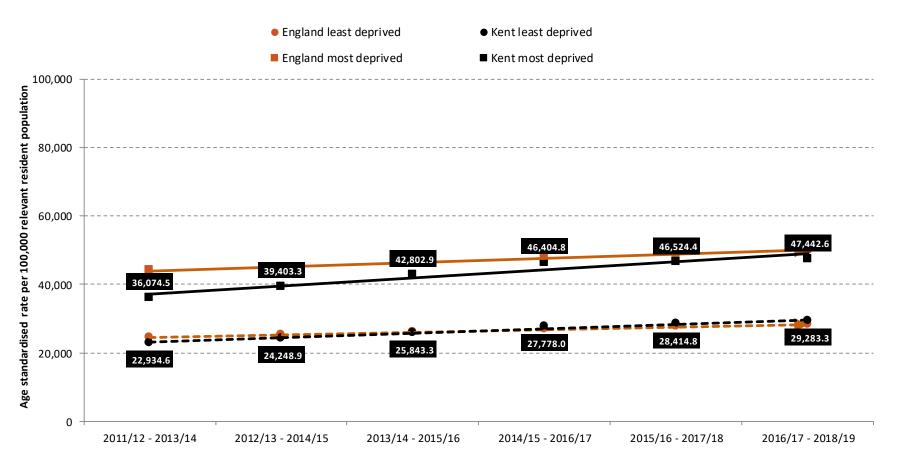


Increasing with a similar pace of change to Kent



#### Accident & Emergency attendances: by deprivation

Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2016/17 - 2018/19

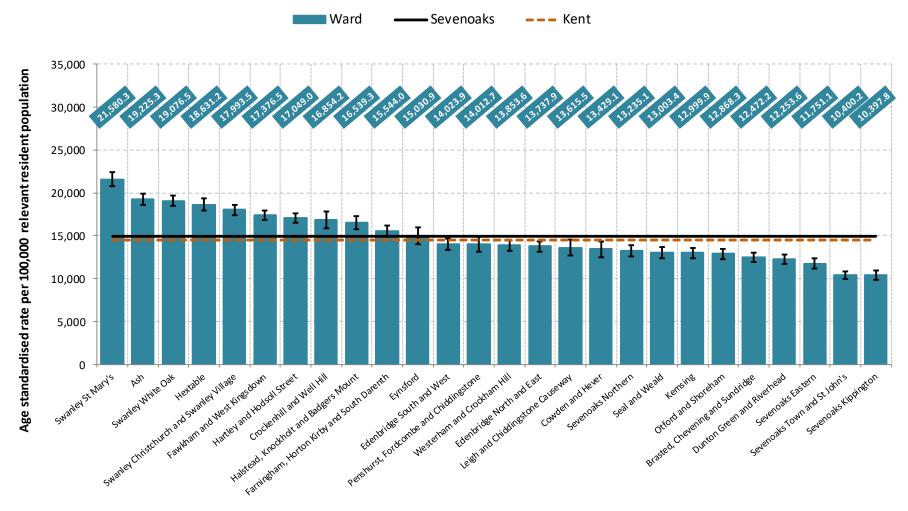


Least deprived trend - increasing with a faster pace of change than England Most deprived trend - increasing with a similar pace of change to England



#### Elective hospital admissions: by electoral ward

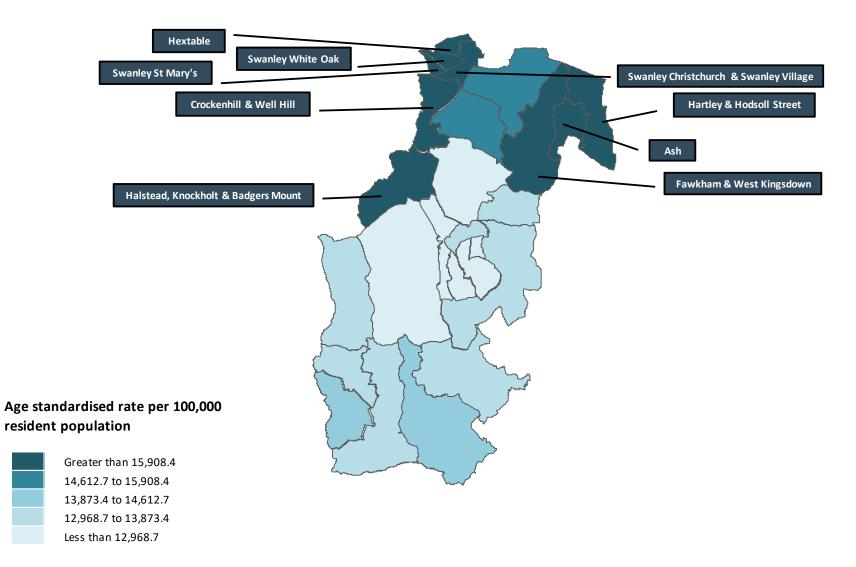
Age standardised rate per 100,000 resident population, 2016/17-2018/19





#### Elective hospital admissions: by electoral ward

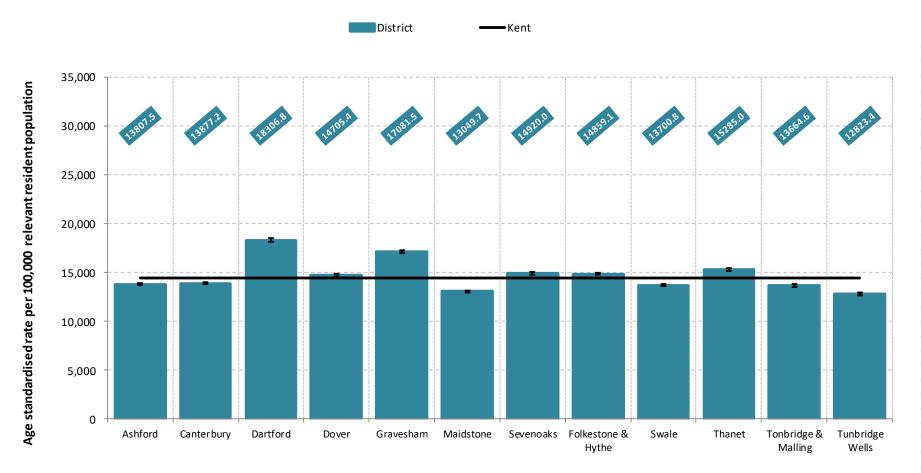
Age standardised rate per 100,000 resident population, 2016/17-2018/19





#### Elective hospital admissions: by district

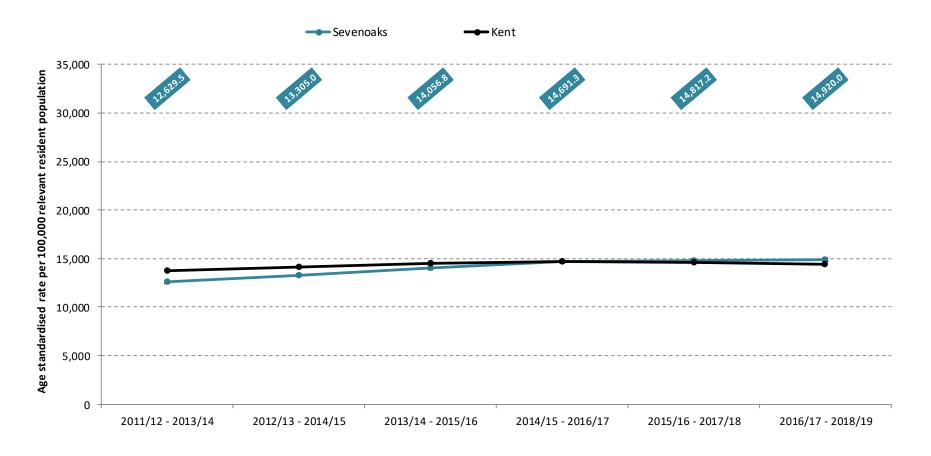
Age standardised rate per 100,000 resident population, 2016/17-2018/19





#### Elective hospital admissions: trend

Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2016/17 - 2018/19

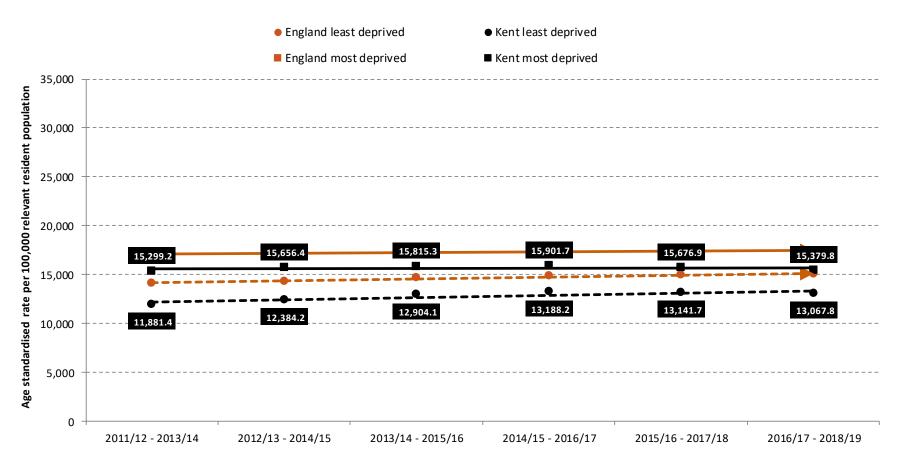


Increasing compared with a stable trend for Kent



#### Elective hospital admissions: by deprivation

Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2016/17 - 2018/19

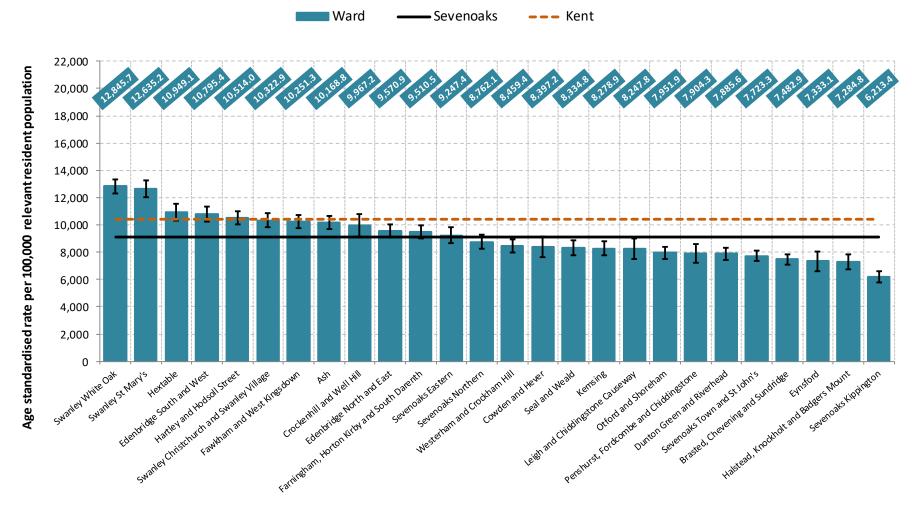


Least deprived trend - increasing with a similar pace of change to England Most deprived trend - stable with a similar pace of change to England



#### **Emergency hospital admissions: by electoral ward**

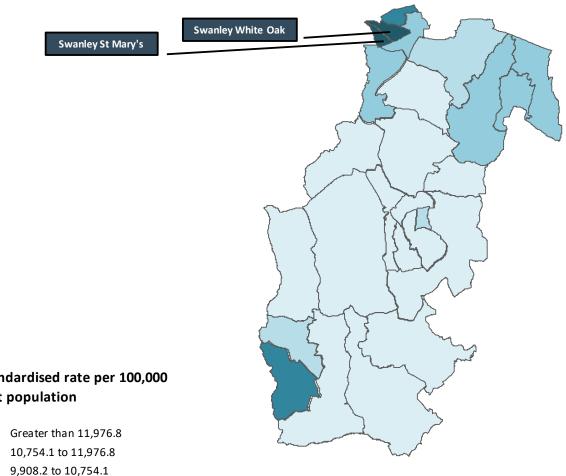
Age standardised rate per 100,000 resident population, 2016/17-2018/19





#### **Emergency hospital admissions: by electoral ward**

Age standardised rate per 100,000 resident population, 2016/17-2018/19



#### Age standardised rate per 100,000 resident population

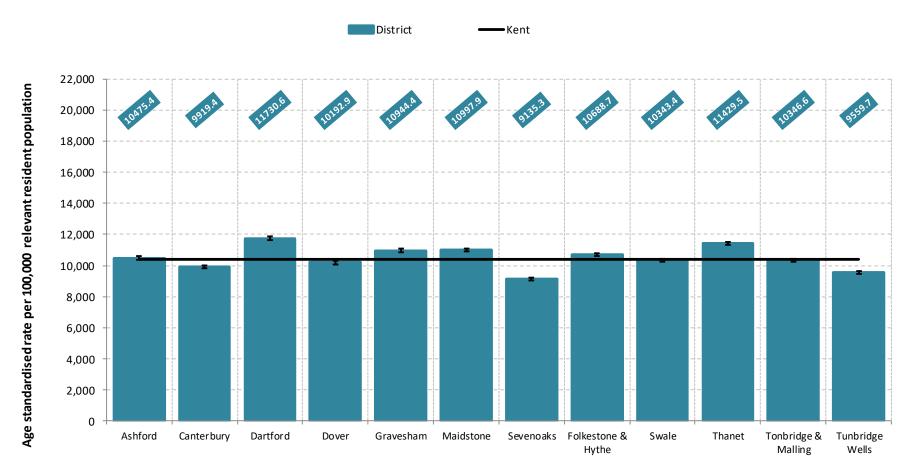


9,908.2 to 10,754.1 8,901.0 to 9,908.2 Less than 8,901.0



#### **Emergency hospital admissions: by district**

Age standardised rate per 100,000 resident population, 2016/17-2018/19





#### **Emergency hospital admissions: trend**

Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2016/17 - 2018/19

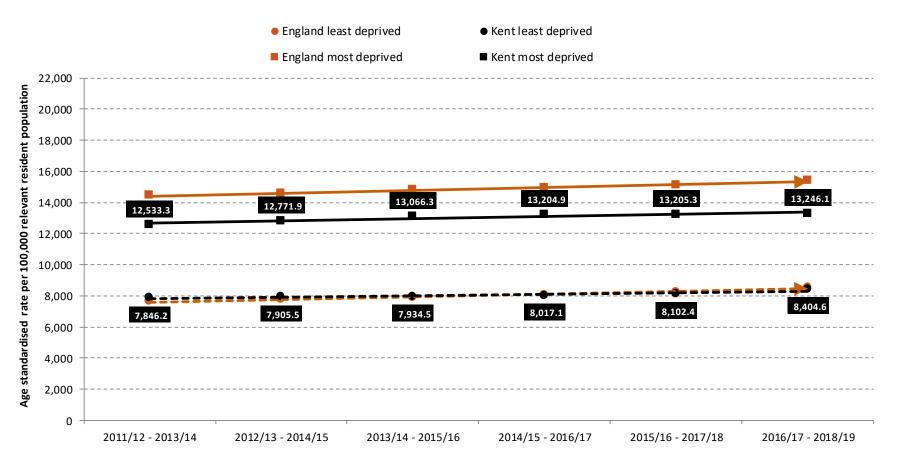


No significant change compared with an increasing trend for Kent



#### **Emergency hospital admissions: by deprivation**

Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2016/17 - 2018/19



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



# Clinical effectiveness

Mortality from causes considered avoidable

Mortality from causes considered amenable

Mortality from causes considered preventable

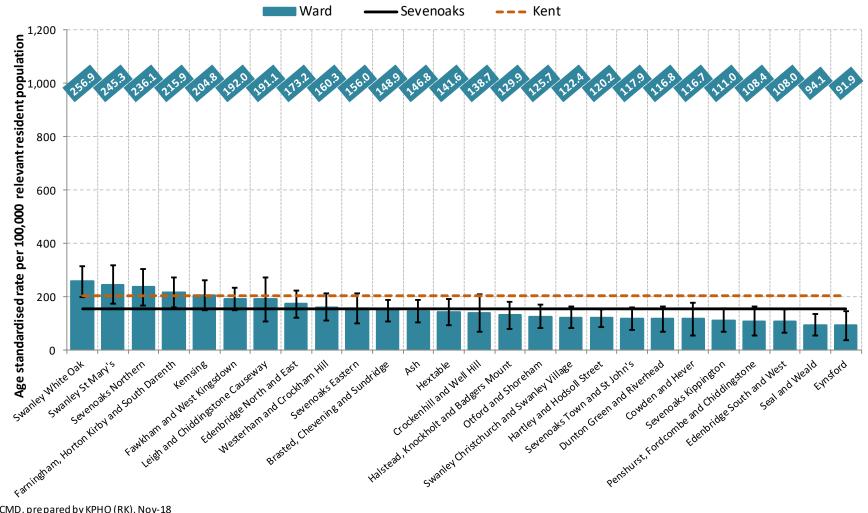
Avoidable admissions for chronic conditions

Avoidable admissions for acute conditions



#### Avoidable mortality: by electoral ward

Age standardised rate per 100,000 resident population, for potentially avoidable deaths identified by using underlying cause and age group, 2013-2017



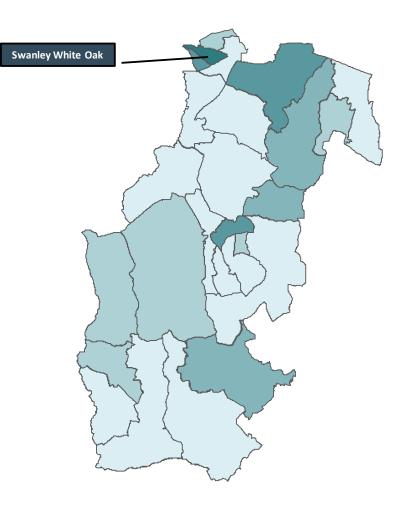
Source: PCMD, prepared by KPHO (RK), Nov-18



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#### Avoidable mortality: by electoral ward

Age standardised rate per 100,000 resident population, for potentially avoidable deaths identified by using underlying cause and age group, 2013-2017



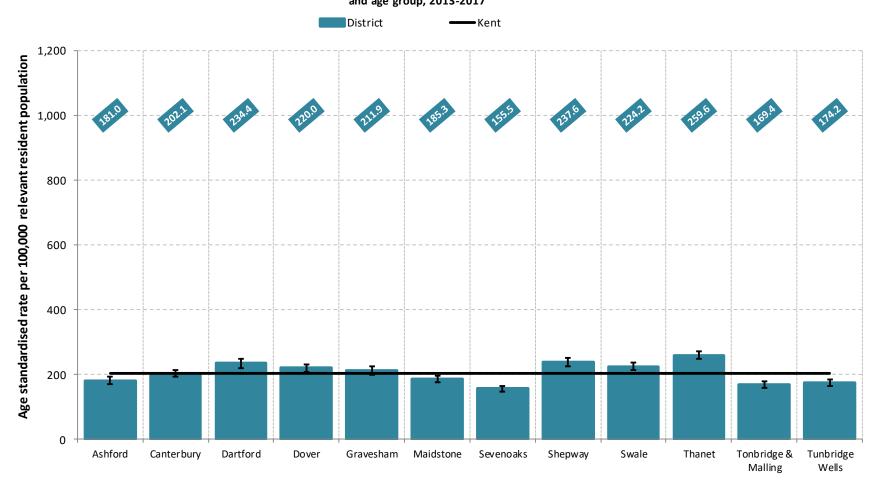
### Age standardised rate per 100,000 resident population



Greater than 251.8 209.8 to 251.8 180.0 to 209.8 140.7 to 180.0 Less than 140.7

#### Avoidable mortality: by district

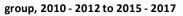
Age standardised rate per 100,000 resident population, for potentially avoidable deaths identified by using underlying cause and age group, 2013-2017

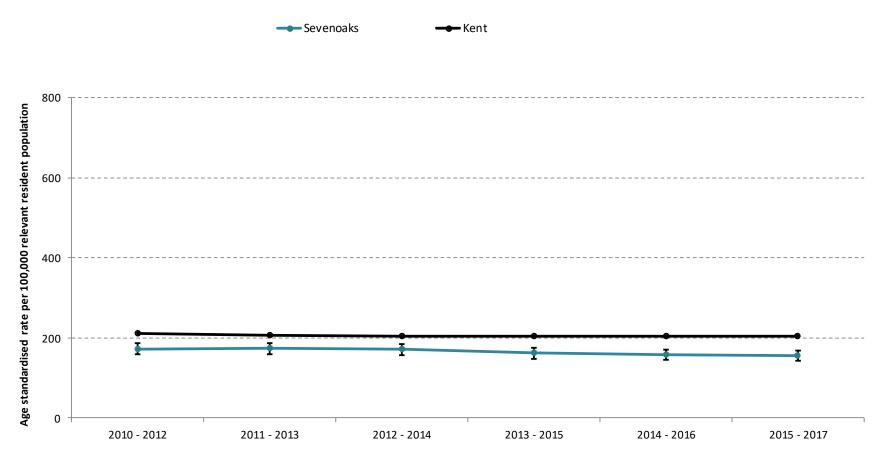




#### Avoidable mortality: trend

Age standardised rate per 100,000 resident population, for potentially avoidable deaths identified by using underlying cause and age





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

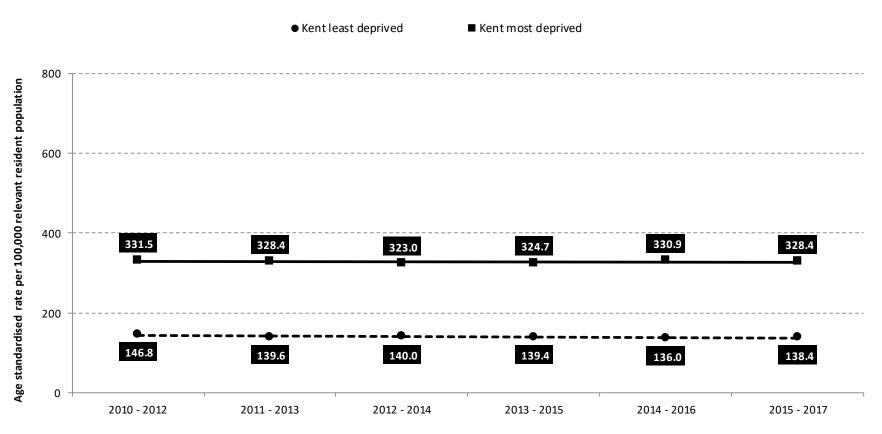
Decreasing compared with a stable trend for Kent



#### Avoidable mortality: by deprivation

Age standardised rate per 100,000 resident population, for potentially avoidable deaths identified by using underlying cause and age group,

2010 - 2012 to 2015 - 2017

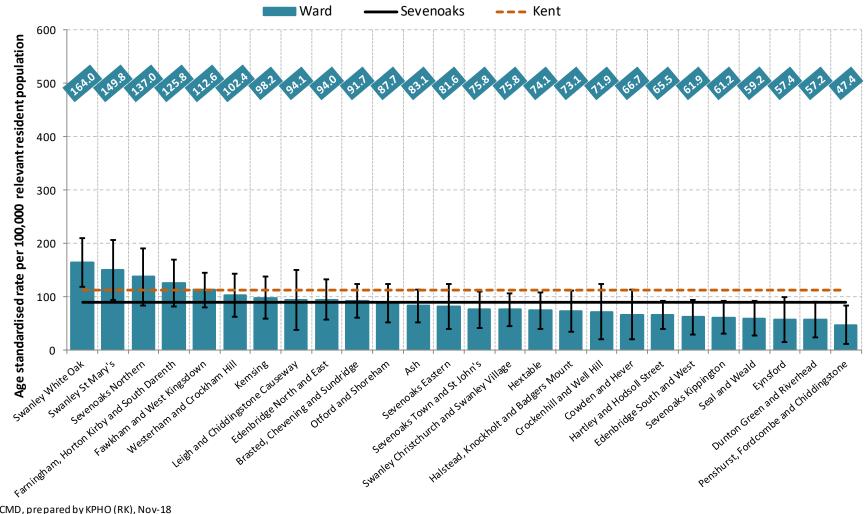


Least deprived trend - stable compared with a increasing trend for England Most deprived trend - stable compared with a decreasing trend for England



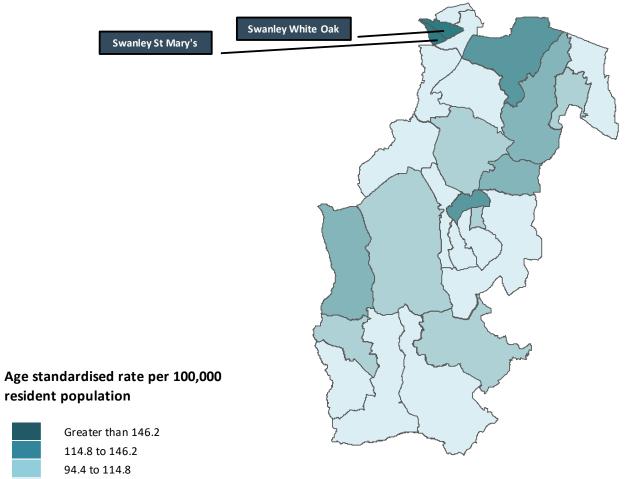
#### Amenable mortality: by electoral ward

Age standardised rate per 100,000 resident population, for deaths amenable to healthcare identified by using underlying cause and age group, 2013-2017



#### Amenable mortality: by electoral ward

Age standardised rate per 100,000 resident population, for deaths amenable to healthcare identified by using underlying cause and age group, 2013-2017



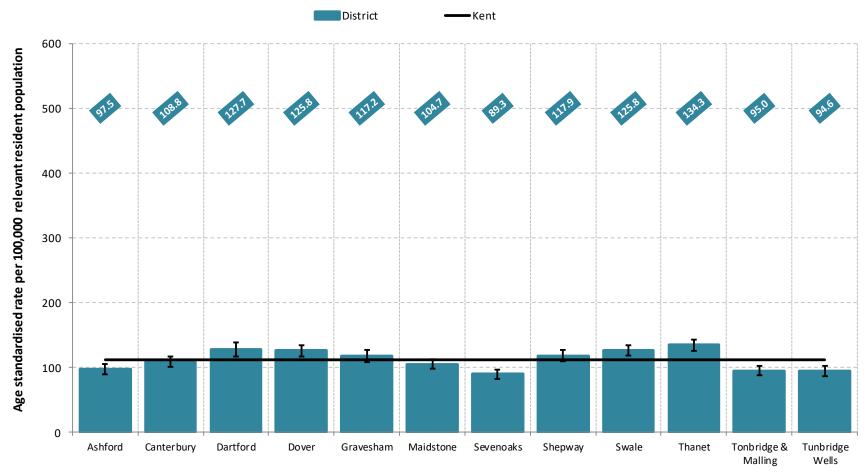
75.8 to 94.4 Less than 75.8



# Amenable mortality: by district

Age standardised rate per 100,000 resident population, for deaths amenable to healthcare identified by using underlying

cause and age group, 2013-2017

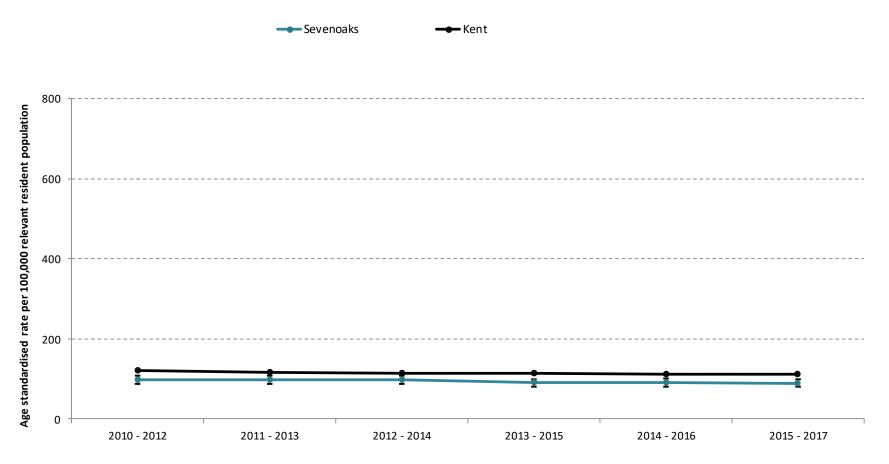




## Amenable mortality: trend

Age standardised rate per 100,000 resident population, for deaths amenable to healthcare identified by using underlying cause and age

group, 2010 - 2012 to 2015 - 2017



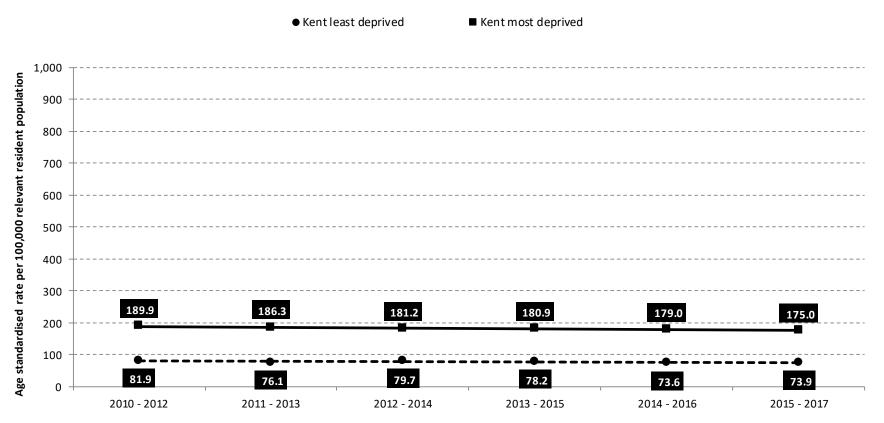
Source: PCMD, prepared by KPHO (RK), Nov-18

Decreasing with a similar pace of change to Kent



## Amenable mortality: by deprivation

Age standardised rate per 100,000 resident population, for deaths amenable to healthcare identified by using underlying cause and age group, 2010 - 2012 to 2015 - 2017



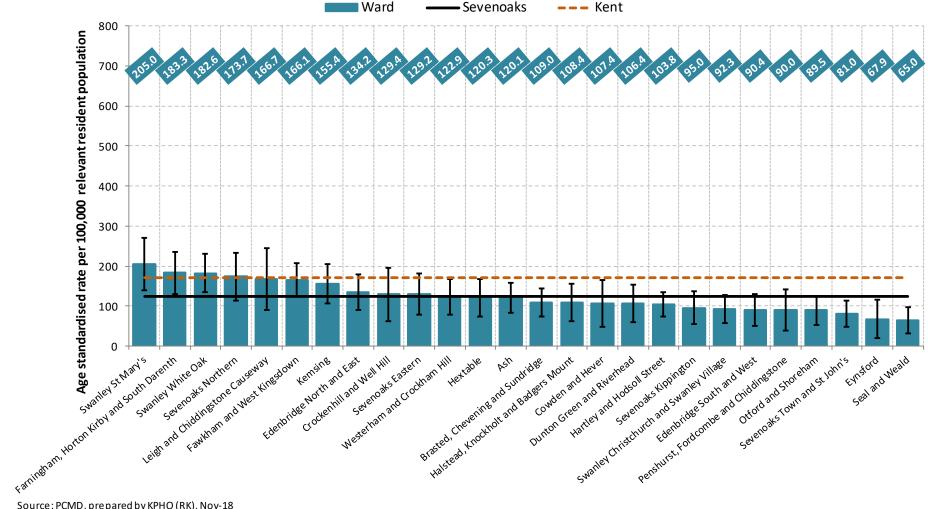
Least deprived trend - stable compared with a increasing trend for England

Most deprived trend - decreasing compared with a decreasing trend for England



## Preventable mortality: by electoral ward

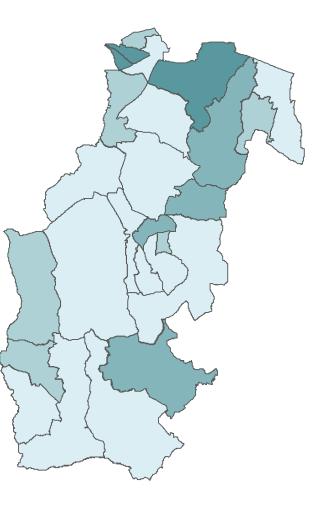
Age standardised rate per 100,000 resident population, for deaths that could be prevented by health intervention identified by using underlying cause and age group, 2013-2017





# Preventable mortality: by electoral ward

Age standardised rate per 100,000 resident population, for deaths that could be prevented by health intervention identified by using underlying cause and age group, 2013-2017



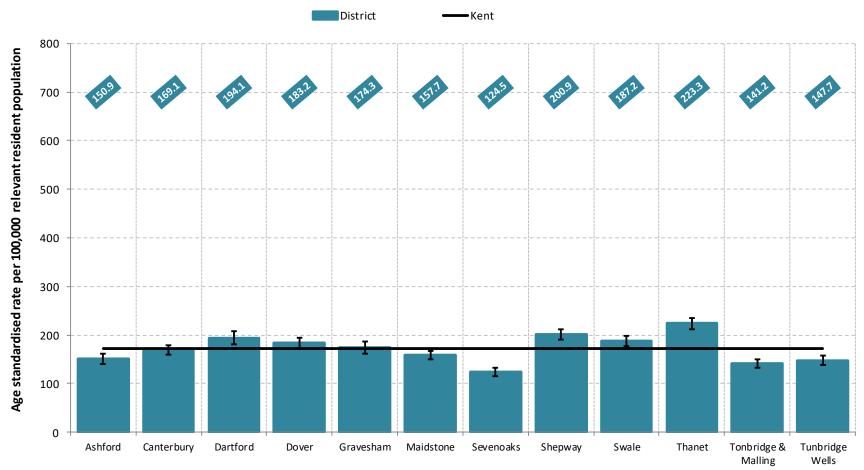
#### Age standardised rate per 100,000 resident population



Greater than 210.9 174.3 to 210.9 144.7 to 174.3 118.4 to 144.7 Less than 118.4

# Preventable mortality: by district

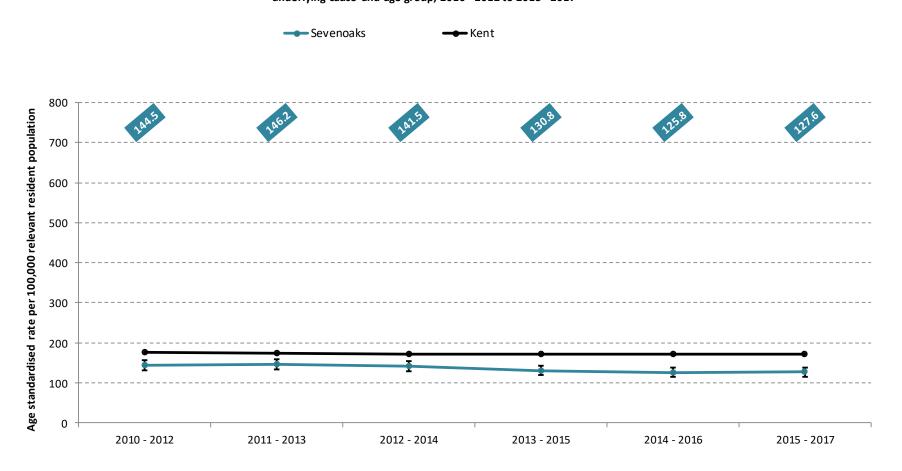
Age standardised rate per 100,000 resident population, for deaths that could be prevented by health intervention identified by using underlying cause and age group, 2013-2017





## Preventable mortality: trend

Age standardised rate per 100,000 resident population, for deaths that could be prevented by health intervention identified by using underlying cause and age group, 2010 - 2012 to 2015 - 2017



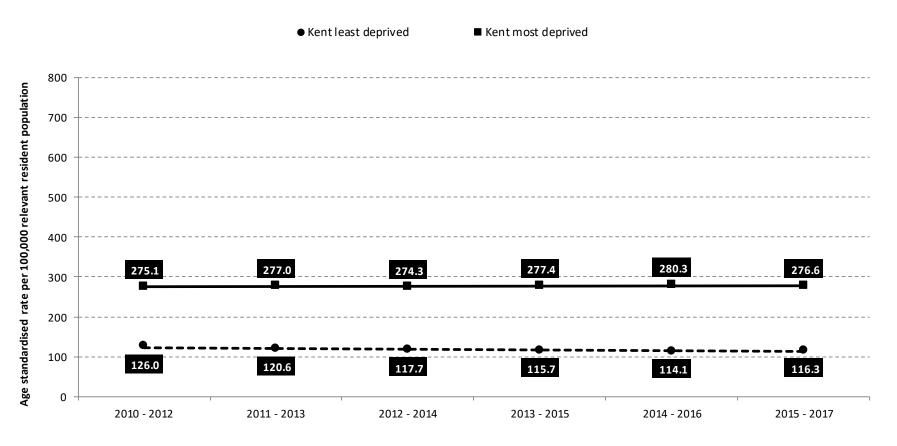
Source: PCMD, prepared by KPHO (RK), Nov-18

Decreasing compared with a stable trend for Kent



## Preventable mortality: by deprivation

Age standardised rate per 100,000 resident population, for deaths that could be prevented by health intervention identified by using underlying cause and age group, 2010 - 2012 to 2015 - 2017

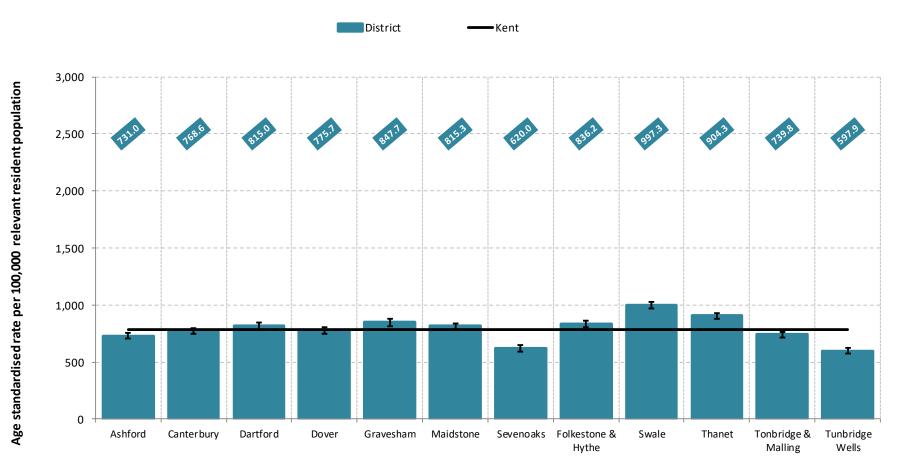


Least deprived trend - decreasing

Most deprived trend - stable



#### Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: by district



Age standardised rate per 100,000 resident population, persons, 2016/17-2018/19

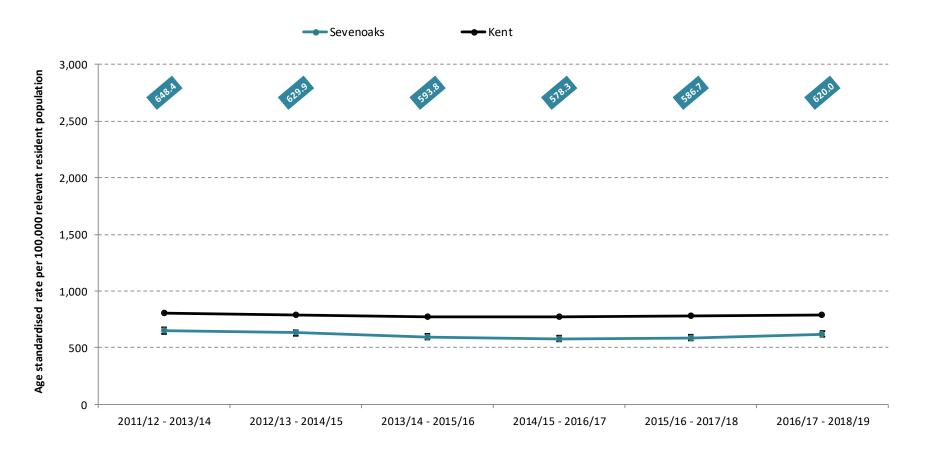
Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan -20



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#### Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: trend

Age standardised rate per 100,000 resident population, persons, 2011/12 - 2013/14 to 2016/17 - 2018/19



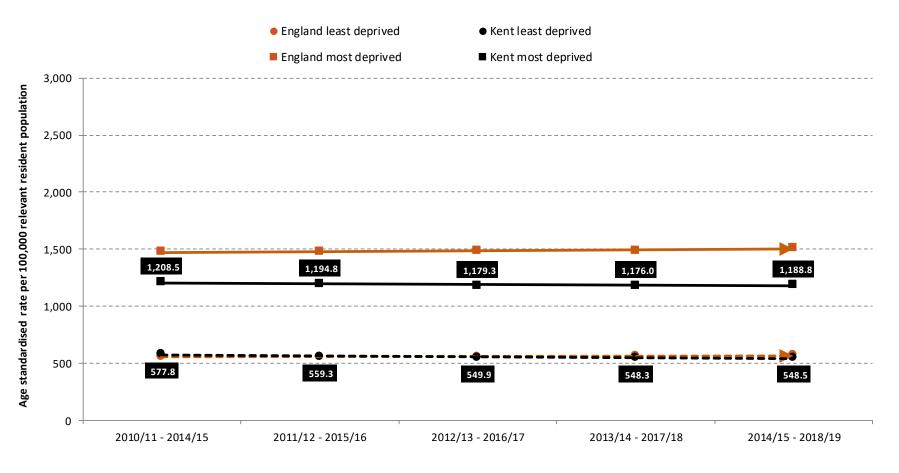
No significant change compared with a stable trend for Kent

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan-20



#### Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: by deprivation

Age standardised rate per 100,000 resident population, persons, 2010/11 - 2014/15 to 2014/15 - 2018/19

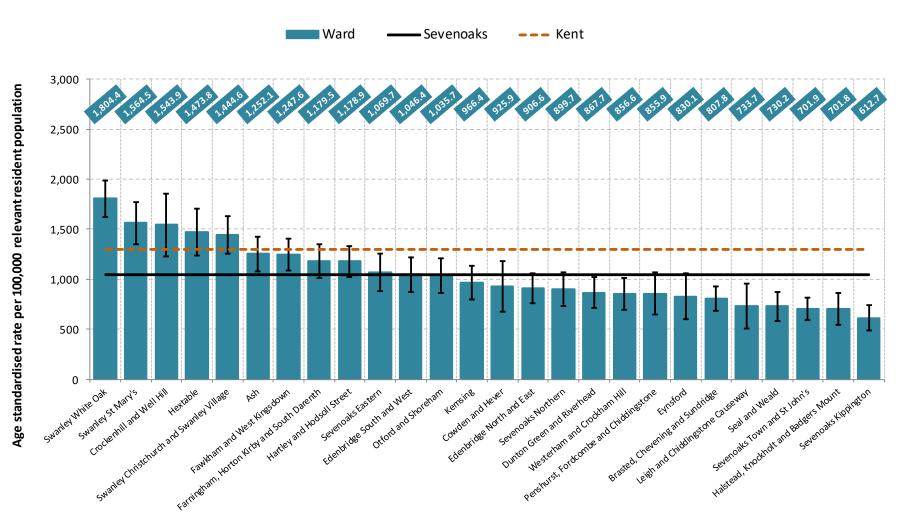


Least deprived trend - stable compared with a increasing trend for England Most deprived trend - stable compared with a increasing trend for England

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan -20



#### Avoidable emergency hospital admissions for acute conditions: by electoral ward Age standardised rate per 100,000 resident population, persons, 2016/17-2018/19



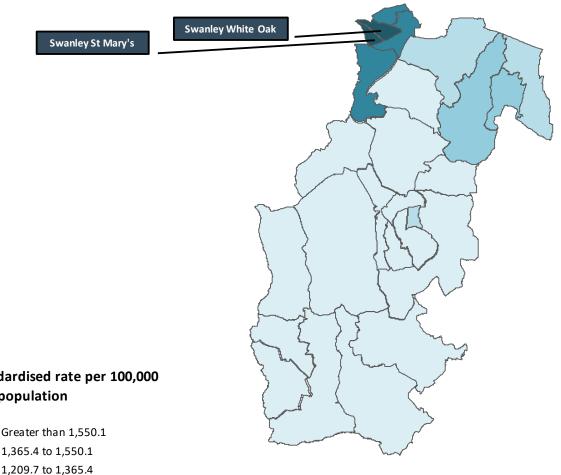
Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan-20

Wards with no data have been subject to supression rules



## Avoidable emergency hospital admissions for acute conditions: by electoral ward

Age standardised rate per 100,000 resident population, persons, 2016/17-2018/19



#### Age standardised rate per 100,000 resident population

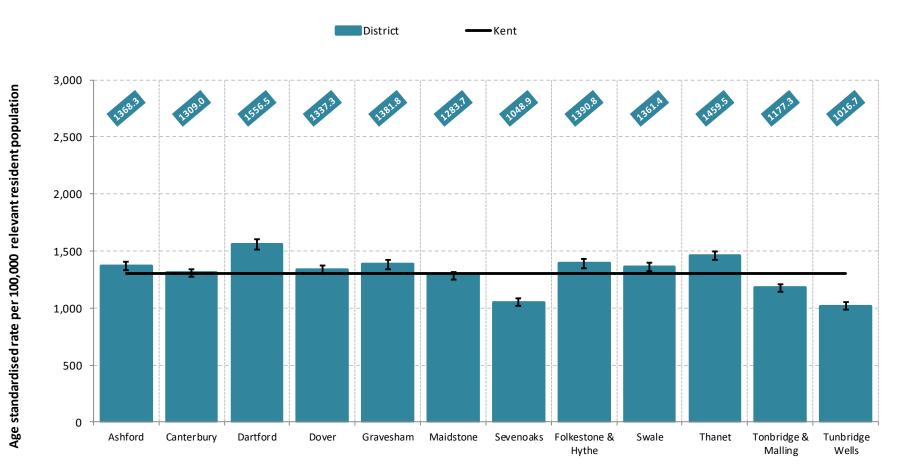
Greater than 1,550
1,365.4 to 1,550.1
1,209.7 to 1,365.4
1,049.2 to 1,209.7
Less than 1,049.2

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan-20



# Avoidable emergency hospital admissions for acute conditions: by district

Age standardised rate per 100,000 resident population, persons, 2016/17-2018/19



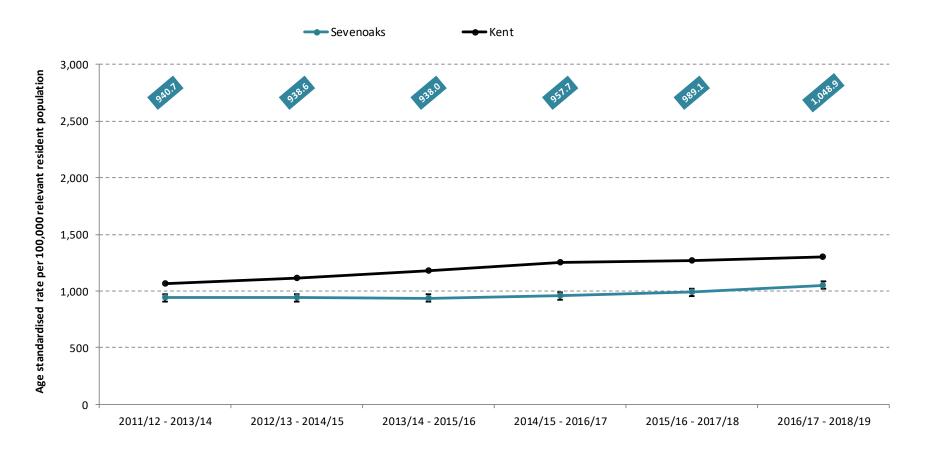
Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan -20



Living Well in Sevenoaks

## Avoidable emergency hospital admissions for acute conditions: trend

Age standardised rate per 100,000 resident population, persons, 2011/12 - 2013/14 to 2016/17 - 2018/19



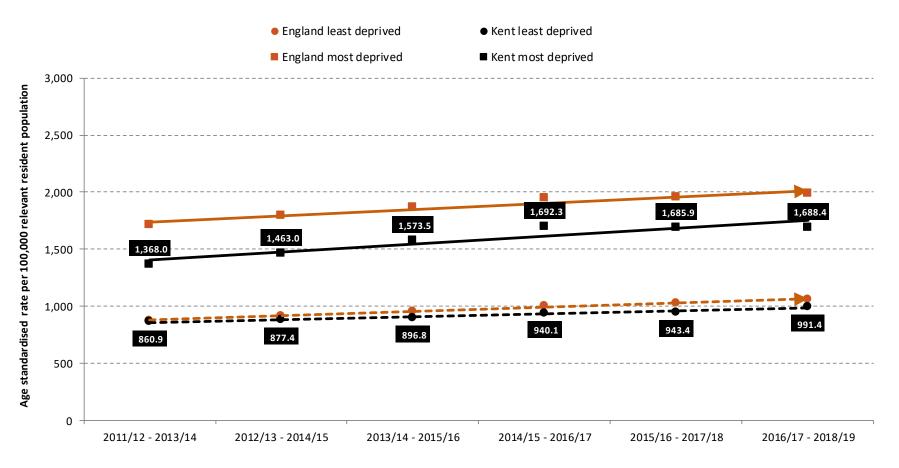
Increasing with a similar pace of change to Kent

Source : Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Jan-20



## Avoidable emergency hospital admissions for acute conditions: by deprivation

Age standardised rate per 100,000 resident population, persons, 2011/12 - 2013/14 to 2016/17 - 2018/19



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

Source: <Select>, prepared by KPHO (ZC), Jan-20



# Lifestyle

Excess weight

Physical activity

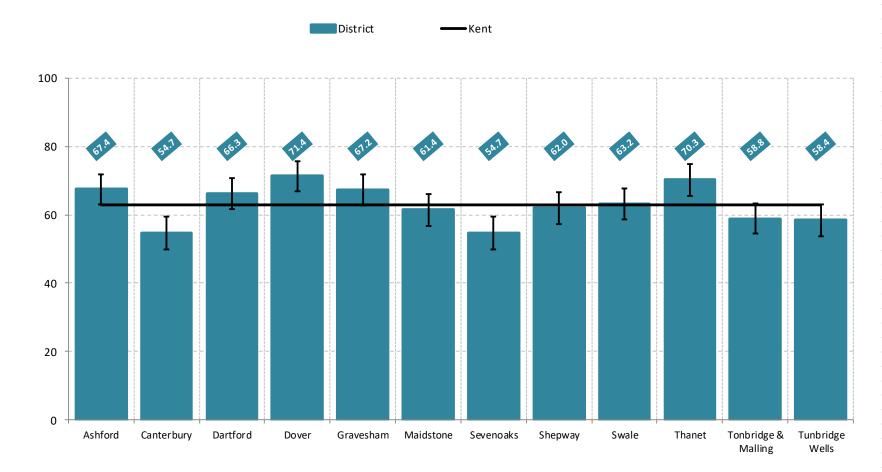
Smoking

Fruit and vegetable consumption



# Adults classified as overweight or obese: by district

Percentage of adults (aged 18+) classified as overweight or obese, 2017/18

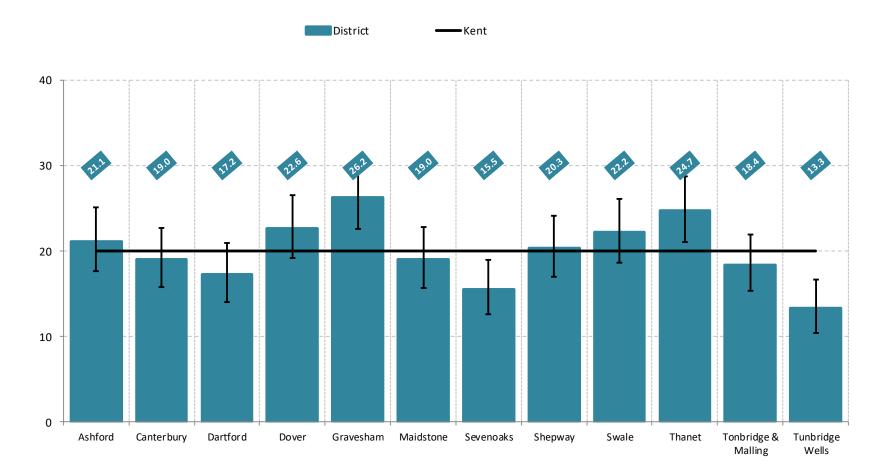


Source : Public Health England (based on Active Lives survey, Sport England), prepared by KPHO (LLY), May-19

Percentage

# Physical inactivity in adults: by district

Percentage of adults (aged 19+) that are physically inactive (<30 moderate intensity equivalent minutes per week), 2017/18

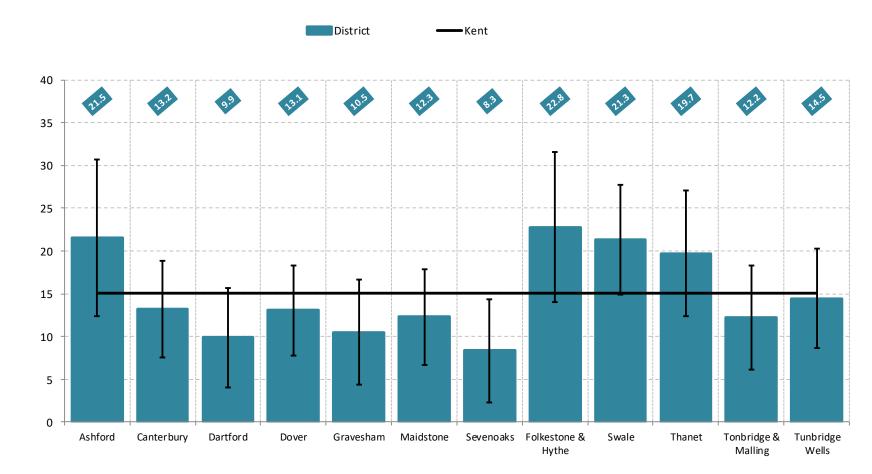


Source: Public Health England (based on Active Lives, Sport England), prepared by KPHO (SR), Jun -19

Percentage

# Smoking prevalence in adults: by district

Percentage of adults (aged 18+) who are self-reported smokers, 2018



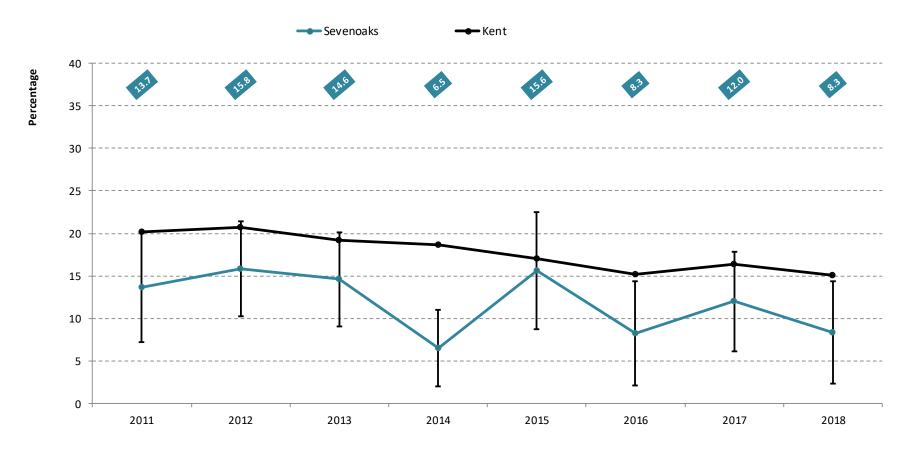
Percentage

Source: Annual Population Survey (APS), prepared by KPHO (MP), Nov-19



# Smoking prevalence in adults: trend

Percentage of adults (aged 18+) who are self-reported smokers, 2011 to 2018



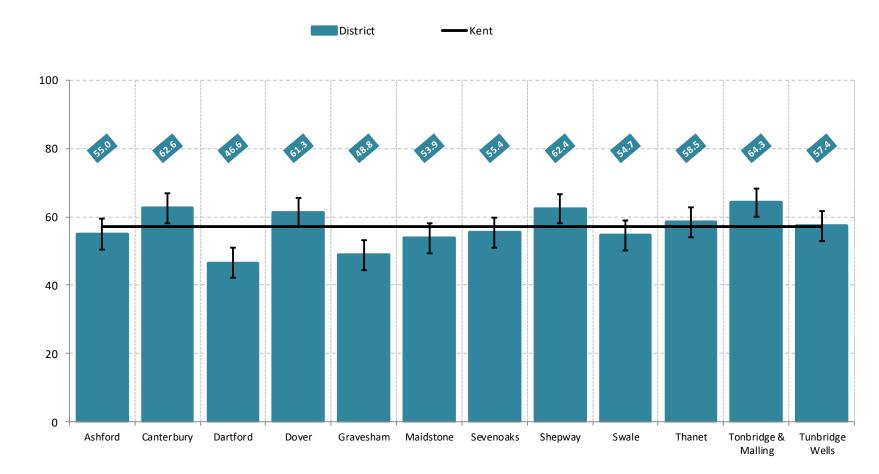
No significant change compared with a decreasing trend for Kent

Source: Annual Population Survey (APS), prepared by KPHO (MP), Nov-19



# Fruit and vegetable consumption in adults: by district

Percentage of adults (aged 16+) meeting the recommended '5-a-day' on a 'usual day', 2017/18



Source : Public Health England (based on Active Lives, Sport England), prepared by KPHO (SR), Jun -19



Percentage

# Multimorbidity

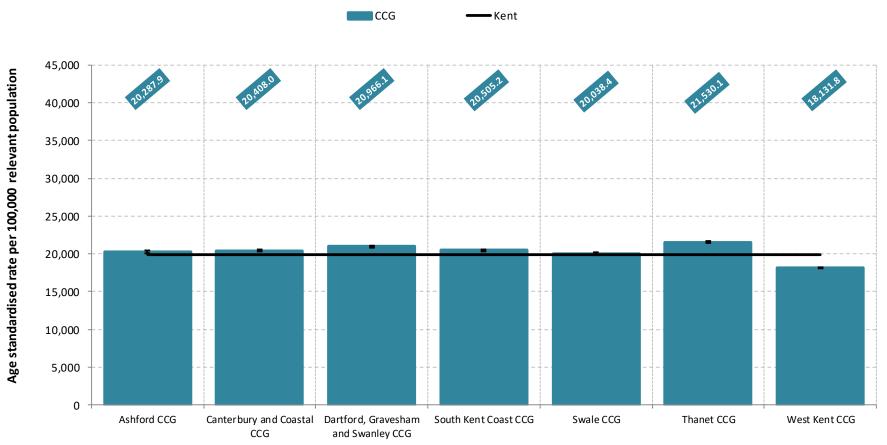
Multimorbidity prevalence

Prevalence of long term condition combinations



# Multimorbidity (developmental statistics): by CCG

Patients (aged 25 years and over) recorded by their GP as having 2 or more long-term conditions, analysis is restricted to GP practices flowing data into the KID at time of the analysis, 2019

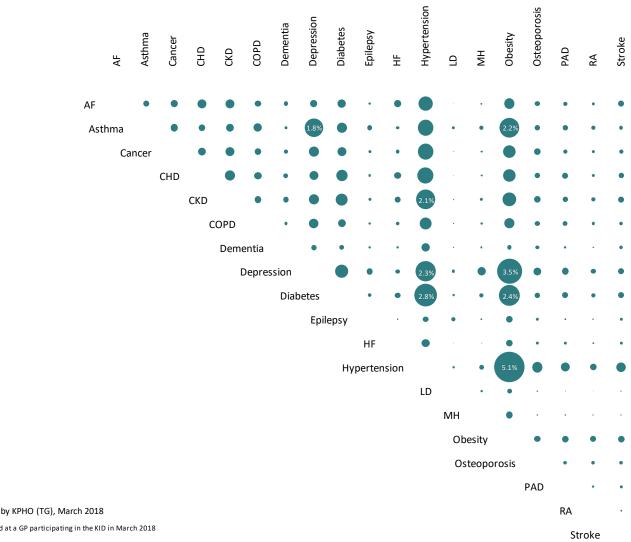


Source: Kent Integrated Dataset (KID), prepared by KPHO (LLY), Aug-19



#### Multimorbidity (developmental statistics): Prevalence of long term condition combinations

Patients recorded by their GP as having specific combinations of long term conditions, Kent, March 2018



Source: Kent Integrated Dataset (KID), prepared by KPHO (TG), March 2018

\* Figures relate to persons resident in Kent and registered at a GP participating in the KID in March 2018

