Living well in Swale CCG

Living Well: Overview

Living well in Swale CCG
## Contents

- Overview
- Demographics
- Premature mortality
- Healthcare usage
- Clinical effectiveness
- Lifestyle
- Multimorbidity
Living Well: Swale CCG

PREMATURE DEATHS (under 75 years)

Cause of death

Cancer: 42%
Respiratory: 22%
Circulatory: 11%
Other: 28%

LONG TERM CONDITIONS

Diabetes: 7.8% (Ages 17+)
Hypertension: 15.9% (All ages)
Asthma: 5.6% (All ages)
COPD: 2.5% (All ages)

Mental Health

Depression: 11.4%
Of adults recorded by their GP as having depression

Emergency hospital admissions for serious mental health conditions

163 in 2017/18

Source: PCMD, 2013-2017
Source: QOF, 2017/18; HES,

LIFE EXPECTANCY at birth

78.5 years for men
82.5 years for women

Ward-level life expectancy (men)

Highest: Kemsley - 83.7 years
Kensley: 79.9 years
Kent: 78.5 years
Swale CCG: 78.5 years
Sheerness West: 71.4 years

Long term conditions recorded prevalence

Diabetes: 7.8% (Ages 17+)
Hypertension: 15.9% (All ages)
Asthma: 5.6% (All ages)
COPD: 2.5% (All ages)

Mental Health

Depression: 11.4%
Of adults recorded by their GP as having depression

Emergency hospital admissions for serious mental health conditions

163 in 2017/18

Source: QOF, 2017/18; HES,

Inequalities by deprivation

Premature mortality rates (ASR)

Most deprived: 628.0 per 100,000
Least deprived: 202.7 per 100,000


Source: PCMD, 2013-2017
Source: QOF, 2017/18; HES,
Premature mortality

Premature mortality 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

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

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

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

Source: PCMD, prepared by KPHO (RK), Nov-18
Premature mortality from all causes: by CCG

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

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

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

Source: PCMD, prepared by KPHO (RK), Nov-18
Causes of premature mortality
Underlying cause of death for persons aged under 75 years, 2017

- Cancer: 42%
- Respiratory: 11%
- Circulatory: 20%
- Other: 28%

Source: PCMD, prepared by KPHO (RK), Jul-18
# Healthcare usage

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<th>Category</th>
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<tbody>
<tr>
<td>A&amp;E attendances</td>
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<tr>
<td>Elective hospital admissions</td>
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<td>Emergency hospital admissions</td>
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Accident & Emergency attendances: by electoral ward

Age standardised rate per 100,000 resident population, 2015/16 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Accident & Emergency attendances: by electoral ward

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Accident & Emergency attendances: by CCG

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Accident & Emergency attendances: trend

Age standardised rate per 100,000 resident population, 2010/11 - 2012/13 to 2015/16 - 2017/18

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

Increasing with a faster pace of change than Kent
Accident & Emergency attendances: by deprivation
Age standardised rate per 100,000 resident population, 2011/12 - 2013/14 to 2015/16 - 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: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Elective hospital admissions: by electoral ward

Age standardised rate per 100,000 resident population, 2015/16 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Elective hospital admissions: by electoral ward
Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Elective hospital admissions: by CCG
Age standardised rate per 100,000 resident population, 2015/16-2017/18

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

*Age standardised rate per 100,000 resident population, 2010/11 - 2012/13 to 2015/16 - 2017/18*

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

- **Swale CCG**
- **Kent**

Increasing with a similar pace of change to Kent
Elective hospital admissions: by deprivation
Age standardised rate per 100,000 resident population, 2010/11 to 2015/16 to 2017/18

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

Age standardised rate per 100,000 relevant resident population, 2015/16 - 2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions: by electoral ward
Age standardised rate per 100,000 resident population, 2015/16-2017/18

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

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions: trend
Age standardised rate per 100,000 resident population, 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: by deprivation
Age standardised rate per 100,000 resident population

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

Living Well in Swale CCG

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

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
Avoidable mortality: trend

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

No significant change compared with a stable trend for Kent

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

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

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

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

Age standardised rate per 100,000 resident population:
- Greater than 146.2
- 114.8 to 146.2
- 94.4 to 114.8
- 75.8 to 94.4
- Less than 75.8

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

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

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

No significant change compared with a decreasing trend for 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

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

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

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

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

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

No significant change 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

- Kent least deprived
- Kent most deprived

Least deprived trend - decreasing
Most deprived trend - stable

Source: PCMD, prepared by KPHO (RK), Nov-18
Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: by CCG

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: trend

Age standardised rate per 100,000 resident population, 2010/11 to 2017/18

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

Increasing compared with a decreasing trend for Kent
Avoidable emergency hospital admissions for chronic ambulatory care sensitive conditions: by deprivation

Age standardised rate per 100,000 resident population

- 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 (RK), Nov-18
Avoidable emergency hospital admissions for acute conditions: by electoral ward

Age standardised rate per 100,000 resident population, 2015/16-2017/18

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

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Avoidable emergency hospital admissions for acute conditions: by CCG

Age standardised rate per 100,000 resident population, 2015/16-2017/18

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Avoidable emergency hospital admissions for acute conditions: trend
Age standardised rate per 100,000 resident population, 2010/11 to 2017/18

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

Increasing with a similar pace of change to Kent
Avoidable emergency hospital admissions for acute conditions: by deprivation
Age standardised rate per 100,000 resident population

- 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: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
<table>
<thead>
<tr>
<th>Lifestyle</th>
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<tbody>
<tr>
<td>Excess weight</td>
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<tr>
<td>Physical activity</td>
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<tr>
<td>Smoking</td>
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<td>Fruit and vegetable consumption</td>
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</table>
Adults classified as overweight or obese: by district

Percentage of adults (aged 18+) classified as overweight or obese, 2016/17

Source: Public Health England (based on Active Lives survey, Sport England), prepared by KPHO (LLY), May-18
Physical inactivity in adults: by district

Percentage of adults (aged 19+) that are physically inactive (<30 moderate intensity equivalent minutes per week), 2016/17

Source: Public Health England (based on Active Lives, Sport England), prepared by KPHO (LLY), May-18
Smoking prevalence in adults: by district

Percentage of adults (aged 18+) who are self-reported smokers, 2017

Source: Annual Population Survey (APS), prepared by KPHO (RK), Jul -18

Living Well in Swale CCG
Smoking prevalence in adults: trend
Percentage of adults (aged 18+) who are self-reported smokers, 2012 to 2017

Source: Annual Population Survey (APS), prepared by KPHO (RK), Jul-18
Fruit and vegetable consumption in adults: by district

Percentage of adults (aged 16+) meeting the recommended '5-a-day' on a 'usual day', 2016/17

Source: Public Health England (based on Active Lives, Sport England), prepared by KPHO (LLY), May-18
Multimorbidity

- Multimorbidity prevalence
- Prevalence of long term condition combinations
Multimorbidity (developmental statistics): by CCG

Patients recorded by their GP as having 2 or more long-term conditions, age standardised rate per 100,000 people, 2017

Source: Kent Integrated Dataset (KID), prepared by KPHO (TG), Apr-18
## 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

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<th>Condition</th>
<th>AF</th>
<th>Asthma</th>
<th>Cancer</th>
<th>CHD</th>
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<th>COPD</th>
<th>Dementia</th>
<th>Depression</th>
<th>Diabetes</th>
<th>Epilepsy</th>
<th>HF</th>
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<th>LD</th>
<th>MH</th>
<th>Obesity</th>
<th>Osteoporosis</th>
<th>PAD</th>
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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