KENT PUBLIC HEALTH OBSERVATORY

South Kent Coast CCG hub Profile
Deal

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Key Findings

Demographic overview

- Approximately 21,900 persons are registered to the four GP practices located within the Deal hub. Deal has predominantly an older population than that of South Kent Coast generally; more than 55% of the population are aged over 45.

Primary care context

- Manor Road Surgery and the Cedars Surgery have consistent levels of general practitioner headcounts and full between 2012 and 2014.
- Manor Road Surgery has the lowest FTE of general practitioner provider headcount at 0.5 in 2014. This has remained consistent from 2012.

GP Survey

- The GP survey shows a decline for the number of persons who rated their GP survey as 'very good' between 2012 and 2014, and the percentage of experiencing a 'fairly good' GP surgery has increased for 2014.

Long term conditions prevalence

- In 2013/14, the general practice recorded prevalence was significantly higher than the CCG for the long term conditions; atrial fibrillation, coronary heart disease, dementia, epilepsy, hypertension, hypothyroidism and stroke.
- Hypertension recorded prevalence has increased by 0.36% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Primary care performance

- General practices have been explored for significantly lower clinical achievement for the percentage of patients receiving the intervention for the range of long term conditions. Also, practices with exception rates that are outliers, greater than two standard deviations from the Kent mean have been highlighted.

Health Checks

- Performance describes the numbers of health checks delivered (within all settings) in comparison to the eligible population (one fifth of the five year eligible population).
- Practice G82696 had performance that was significantly lower than the 95% or 99.8% control limits within Kent.

Cancer

- Across Kent it is known that there has been an increasing trend in cancer incidence. General practices have been explored for their prevalence, as well as, screening for breast, cervical and bowel cancer.

Lifestyles

- Modelled estimates for obesity and smoking prevalence have been presented for South Kent Coast CCG.

Accident and emergency activity

- The rate of increase for Deal patients is in line with the increase for all Kent patients (about 8%) but higher than the 5% for South Kent Coast.
- The greatest difference in the age profile for Deal patients compared to South Kent Coast CCG is for the over 65s, 35% of all the attendances are from this age group, this is much higher than the 28% across South Kent Coast generally.

Outpatient activity

- The proportion of appointments whereby the patient did not attend were similar within Deal, South Kent Coast CCG and Kent. In 2014/15, within Deal, patient not attending appointment amounted to 3,665 appointments.
- First appointments accounted for 11,763 attendances within Deal general practices, after first attendance, 34.2% or 4,020 were discharged from care.
- Within Kent, in 2014/15 there was a ratio of 2.25 follow-up appointments for each first appointment. A higher ratio can be seen for South Kent Coast CCG (2.49) and for Deal (2.54). The G82111 – Cedars Surgery showed the highest ratio (2.73) across Deal practices.

Mortality and life expectancy

- With the exception of the Cedars Surgery, the Deal practices and hub as a whole have significantly higher all age, all cause mortality rates than Kent for 2006 to 2014 (pooled). Whilst the hub rate has been steadily decreasing between 2006 and 2014, the rate of change has been slower than comparator areas.
- There is little variation in under 75 cancer mortality rates between practices and between comparator areas.
- The under 75 circulatory disease mortality rate for Deal hub is similar to the South Kent Coast CCG rate, but greater than the Kent rate.
- There are no significant differences between under 75 respiratory rates for practices within the Deal hub or the comparator areas. There is a large amount of fluctuation between rates when looking at the trend over the past nine years.
- The life expectancy for Deal hub is significantly lower than the life expectancy for east Kent and Kent.

Demographics Overview

Approximately 21,900 persons are registered to the four GP practices located within the Deal hub. The population structure can be seen in the chart below, predominantly an older population than that of South Kent Coast generally, more than 55% of the population are aged over 45. There are slightly more females than males in the area (52.1% to 47.9% males).

Figure 1

Deal locality population compared to South Kent Coast
Registerd population March 2015
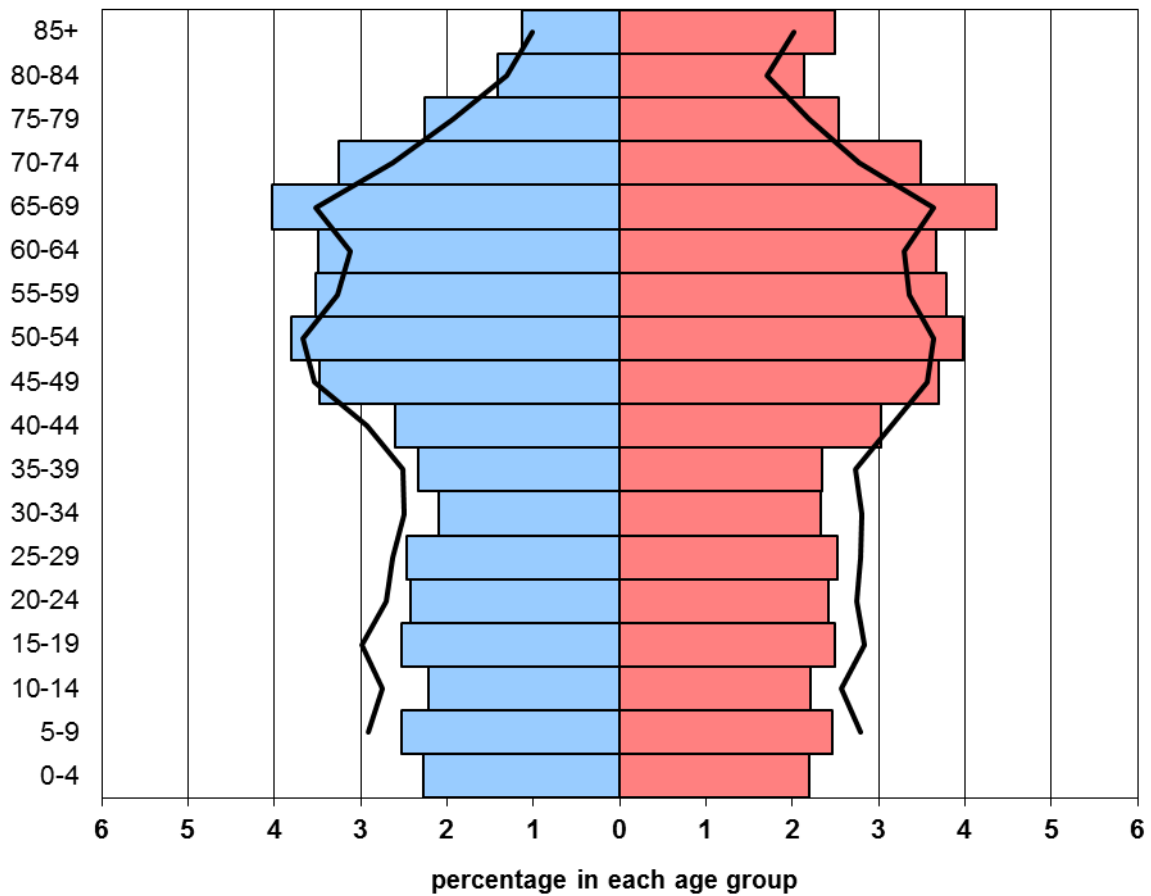
The overall population of South Kent Coast CCG is set to increase by 15% by the year 2025 from the current registered of 205,000 rising to around 215,000, with the greatest growth in the over 65 population (24%) up from 47,000 to 58,200.

Table 1

Deal locality registered population - March 2015

Age band	Male	Female	Total
0-4	496	479	975
5-9	553	539	1,092
10-14	485	483	968
15-19	551	547	1,098
20-24	530	529	1,059
25-29	541	552	1,093
30-34	458	510	968
35-39	510	512	1,022
40-44	570	662	1,232
45-49	760	808	1,568
50-54	833	869	1,702
55-59	770	827	1,597
60-64	764	801	1,565
65-69	882	956	1,838
70-74	712	764	1,476
75-79	493	555	1,048
80-84	308	468	776
85+	246	544	790
Total	10,462	11,405	21,867

Figure 2

Indices of multiple deprivation in South Kent Coast CCG,
with general practices overlayed, 2015
Source: IMD (2015), PCIS
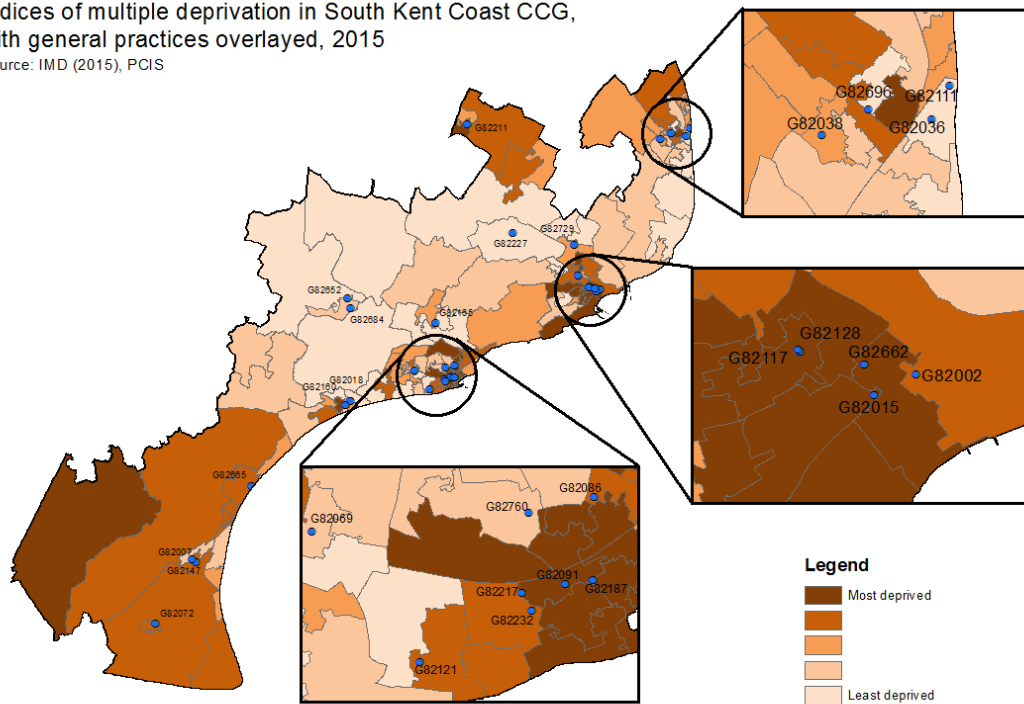
The most deprived fifth of LSOAs tend to centre around the towns; Dover and Folkestone.
The Romney Marsh area is also relatively deprived.

Primary care context

General Practitioners

The general practitioner providers represent the practitioners who have entered into contracts to provide services. This indicator has been used as it enables comparison over time. But this does not represent the salaried GPs who work within general practices.

The general practice context: provider headcount and provider full time equivalent (FTE) have been detailed below.

- Manor Road Surgery and the Cedars Surgery have consistent levels of general practitioner provider headcounts and FTE between 2012 and 2014.

Figure 3
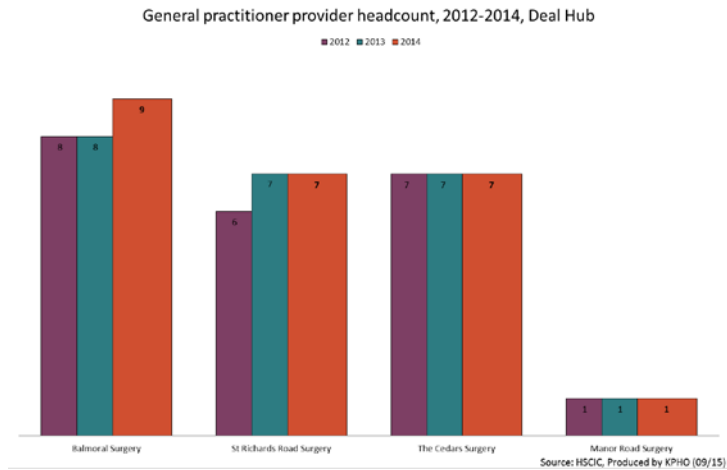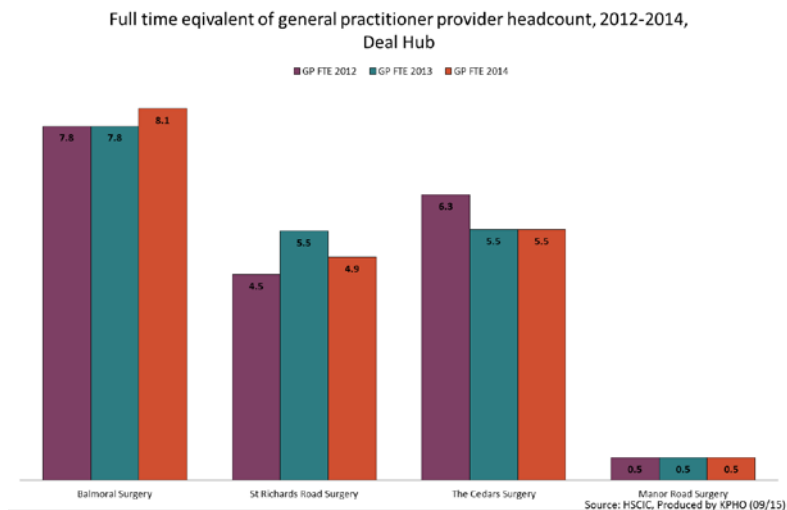

General practitioner provider headcount, 2012-2014, Deal Hub

Source: HSCIC, Produced by KPHO (09/15)

Figure 4

Full time eqivalent of general practitioner provider headcount, 2012-2014, Deal Hub

Source: HSCIC, Produced by KPHO (09/15)

Total Nurses

The total headcount nurses definition refers to advanced nurses, extended role nurses and practice nurses. The total headcount of nurses for each general practice has been detailed below.

The total headcount of nurses at St. Richards Road Surgery decreased between 2013 and 2014. Manor Road Surgery shows an increase between 2013 and 2014.

Figure 5

Total headcount of nurses, 2013-2014, Deal Hub

Source: HSCIC. Produced by KPHO (09/15)
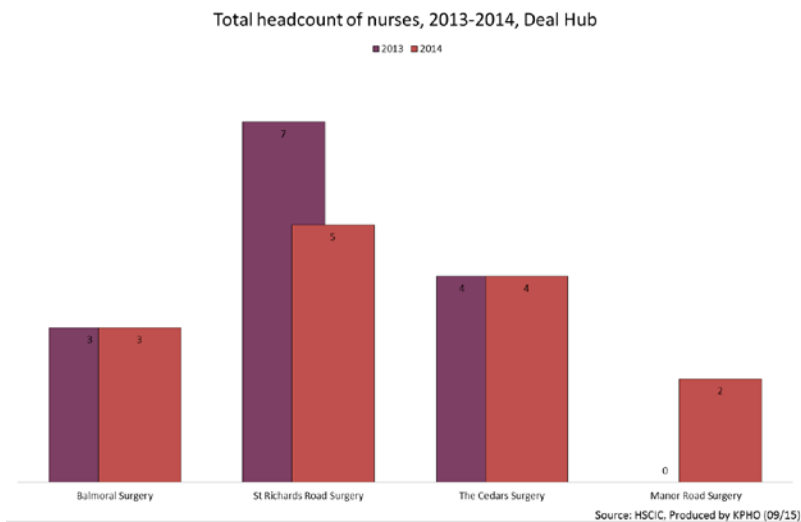
Practice Staff

The total practice staff indicator can be defined to exclude general practitioners, but includes; nurses, those involved within direct patient care or administration and other paid members of practice staff.

The total practice staff headcount for each general practice has been detailed below.

Figure 6

Total headcount of practice staff, 2013-2014, Deal Hub

Source: HSCIC, Produced by KPHO (09/15)

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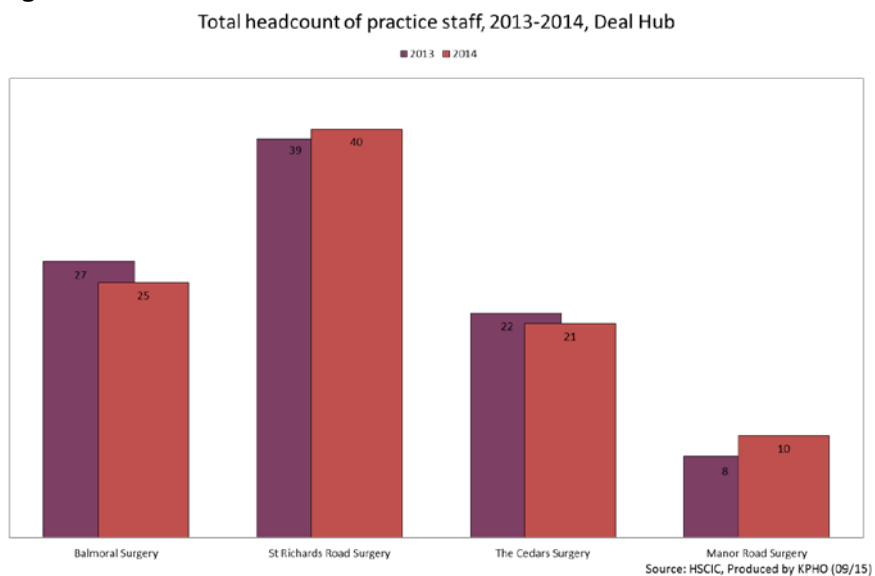
General Practitioner to Population Ratio

The general practitioner providers represent the practitioners who have entered into contracts to provide services. This indicator has been used as it enables comparison over time. But this does not represent the salaried GPs who work within general practices.

The general practitioner provider to population ratio has been presented below.

Figure 7

The number of general practitioners (using provider headcount) per 10,000 population (using total patients per general practice), from 2013-2014, Deal Hub

Source: HSCIC, Produced by KPHO [09/15]
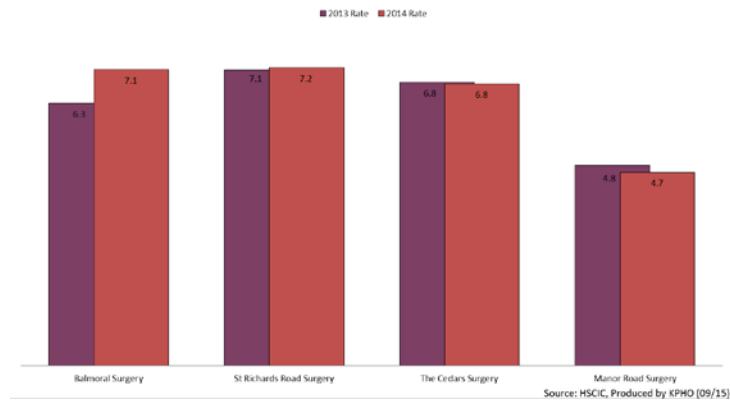
GP Survey

From the GP Survey, conducted for each year, the overall experience at a GP survey has been analysed from 2012 to 2014.

The GP survey shows a decline for the number of persons who rated their GP survey as 'very good'. For example, 61% agreed in 2012 that their GP surgery, Balmoral Surgery, was 'very good' compared to 58% in 2014. Whilst the rate of 'very good' per GP survey has decreased, the rate of experiencing a 'fairly good' GP surgery has increased for 2014 e.g. 28% of the persons agree that GP surgery, Balmoral Surgery, is 'fairly good' which is an increase from 20% in 2013 but not has high as recorded in 2012 at 32%.

Tables 2

Overall Response 2012	Balmoral Surgery	St. Rchards Road Surgery	The Cedars Surgery	Manor Road Surgery
Overall experience of GP surgery	Percentage of answers (%)			
Very good	61	53	62	73
Fairly good	32	42	33	22
Neither good nor poor	5	5	4	4
Fairly poor	1	1	1	1
Very poor	0	0	0	0

Source: GP Patient Survey, January-September 2012

Overall Response 2013	Balmoral Surgery	St. Rchards Road Surgery	The Cedars Surgery	Manor Road Surgery
Overall experience of GP surgery	Percentage of answers (%)			
Very good	65	42	61	83
Fairly good	20	45	30	13
Neither good nor poor	8	11	8	4
Fairly poor	6	0	1	0
Very poor	2	2	0	0

Source: Practice Report (GP Patient Survey), January-March 2013 and July-September 2013

Overall Response 2014	Balmoral Surgery	St. Rchards Road Surgery	The Cedars Surgery	Manor Road Surgery
Overall experience of GP surgery	Percentage of answers (%)			
Very good	58	42	53	86
Fairly good	28	53	40	10
Neither good nor poor	8	3	7	4
Fairly poor	4	0	0	1
Very poor	2	1	0	0

Source: Practice Report (GP Patient Survey), July-September 2013 and January-March 2014

Long term conditions prevalence

Recorded Prevalence

Spine charts have been produced to compare the general practice recorded prevalence of long term conditions with the NHS South Kent Coast CCG recorded prevalence in 2013/14.

Key:
- Significantly much lower than CCG average
- Significantly lower than CCG average
- Not significantly different from CCG average
- Significantly higher than CCG average
- Significantly much higher than CCG average
- No significance can be calculated
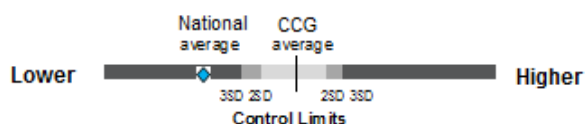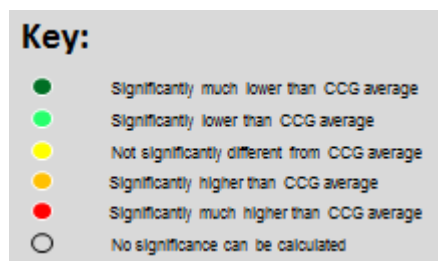
Trend analysis has been carried out to explore the general practice rate of change for long term condition recorded prevalence between 2006/07 to 2013/14. This has been compared with the National rate of change, as the most reliable estimate.

The QOF uses an extract of practice list sizes as of 1st January 2014 and disease registers as at 31st March 2014. Analysis has been based on practices open as at time of report publication.

Recorded prevalence for the most of long term conditions uses the total practice population. However, this differs for obesity (16 years and over), diabetes (17 years and over), as well as, learning disabilities, epilepsy and chronic kidney disease (18 years and over).

Limitations

A limitation of the QOF recorded prevalence is that analysis cannot differentiate between true prevalence and the effectiveness of case finding strategies between practices.

The projected recorded prevalence has not been adjusted for any other factors known to influence the risk of long term conditions, such as changes in deprivation and in the demographic patterns of at risk population groups (such as, age). It is likely therefore, that the prevalence projections shown in this section are likely to be conservative estimates.

*It should be noted that limitations have been identified with the QOF recorded prevalence of Chronic Kidney Disease. Coding issues have been reported that may lead to under reporting.

G82036 - Balmoral Surgery

In 2013/14, the general practice recorded prevalence was not significantly higher than the CCG for any of the long term conditions.

Table 3

Indicator	Practice		CCG			
	Number	Prevalence	Average	Low	Range	High
Asthma (%)	575	4.5	5.7	4.1		10.3
Atrial fibrillation (%)	286	2.3	2.2	1.2		3.6
Cancer (%)	288	2.3	2.5	0.8		4.0
Chronic Kidney Disease (%)	98	4.3	5.5	3.8		8.2
Chronic Obstructive Pulmonary Disease	236	1.9	2.3	1.1		4.3
Coronary Heart Disease (%)	514	4.1	3.8	2.7		5.7
Dementia (%)	86	0.7	0.6	0.1		1.0
Diabetes (%)	749	7.1	7.0	5.7		9.3
Epilepsy (%)	114	1.1	1.0	0.3		1.5
Heart Failure (%)	82	0.7	0.7	0.4		1.1
Hypertension (%)	1784	14.1	16.2	12.0		20.5
Hypothyroidism (%)	458	3.6	3.4	2.0		5.2
Learning Disabilities (%)	82	0.8	0.8	0.2		2.4
Mental Health (%)	97	0.8	0.8	0.3		1.5
Obesity (%)	930	8.8	10.4	3.8		20.2
Palliative Care (%)	12	0.1	0.2	0.0		0.4
Stroke (%)	243	1.9	2.0	1.2		3.3

Diabetes recorded prevalence has increased by 0.32% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Figure 8:

Rate of change in long term condition recorded prevalence: practice G82036, 2006/07 to 2013/14

* significance in comparison to national rate of change

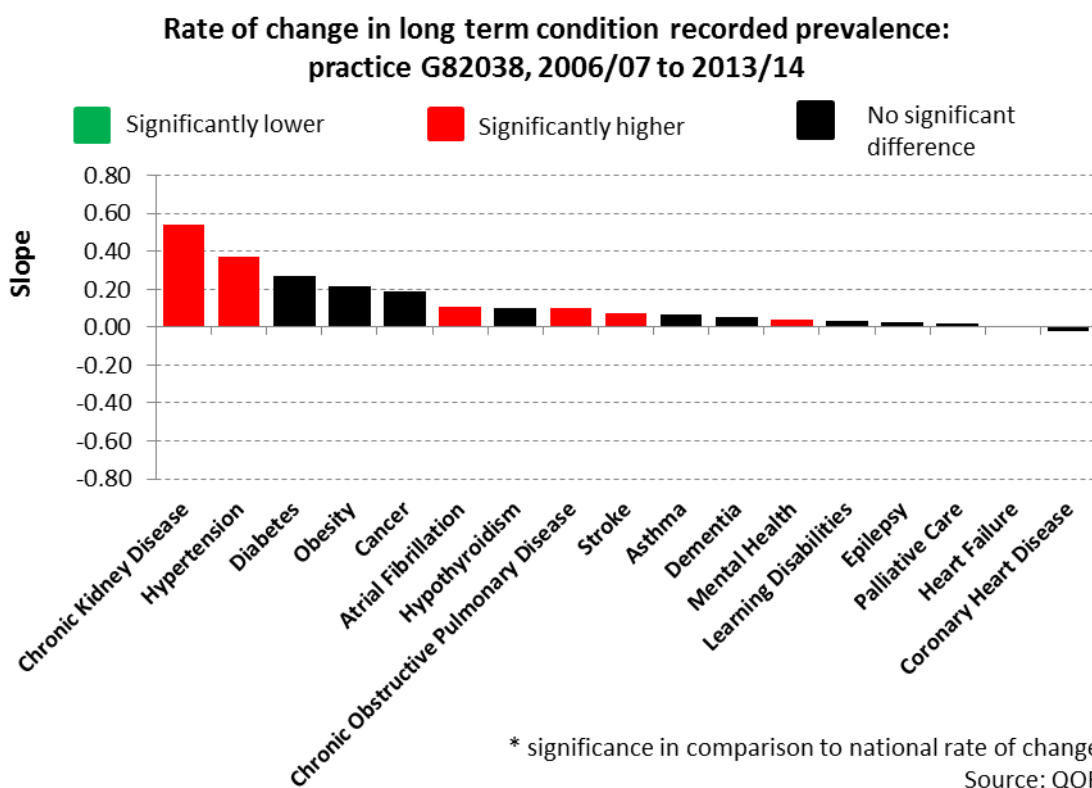Source: QOF
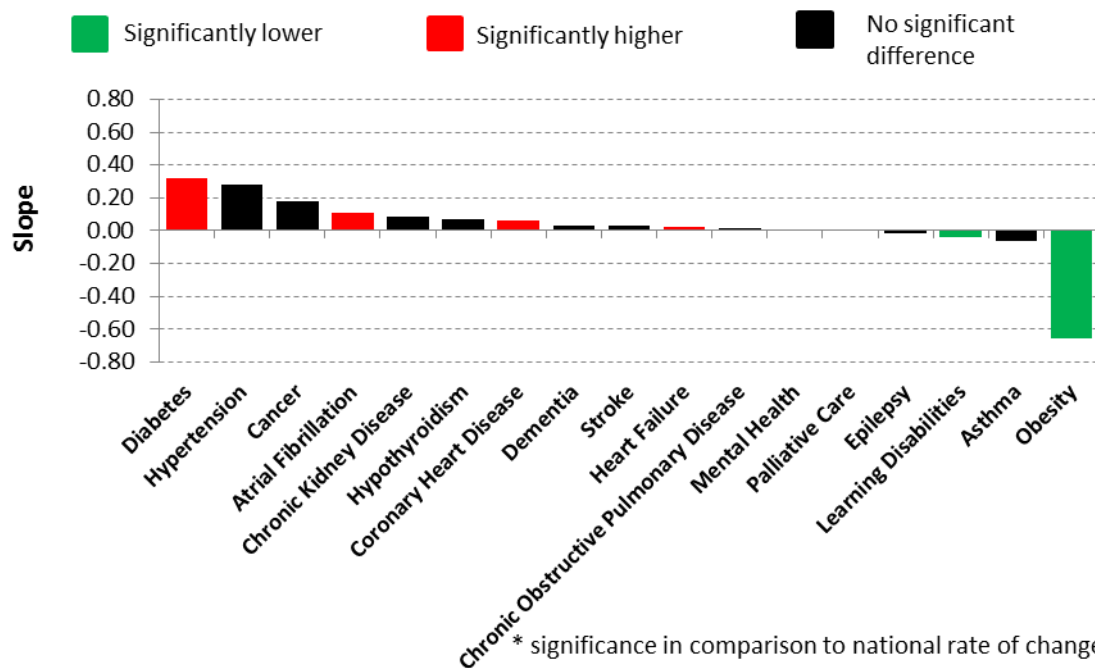
G82038 - St Richards Road Surgery

In 2013/14, the general practice recorded prevalence was significantly higher than the CCG for the long term conditions; asthma, chronic obstructive pulmonary disease, coronary heart disease, epilepsy, hypertension, hypothyroidism and stroke.

Table 4

Indicator	Practice		CCG			
	Number	Prevalence	Average	Low	Range	High
Asthma (%)	644	6.6	5.7	4.1		10.3
Atrial fibrillation (%)	249	2.5	2.2	1.2		3.6
Cancer (%)	257	2.6	2.5	0.8		4.0
Chronic Kidney Disease (%)	463	5.7	5.5	3.8		8.2
Chronic Obstructive Pulmonary Disease	324	3.3	2.3	1.1		4.3
Coronary Heart Disease (%)	446	4.5	3.8	2.7		5.7
Dementia (%)	88	0.9	0.6	0.1		1.0
Diabetes (%)	592	7.2	7.0	5.7		9.3
Epilepsy (%)	120	1.5	1.0	0.3		1.5
Heart Failure (%)	81	0.8	0.7	0.4		1.1
Hypertension (%)	1892	19.2	16.2	12.0		20.5
Hypothyroidism (%)	394	4.0	3.4	2.0		5.2
Learning Disabilities (%)	86	1.1	0.8	0.2		2.4
Mental Health (%)	97	1.0	0.8	0.3		1.5
Obesity (%)	951	11.3	10.4	3.8		20.2
Palliative Care (%)	20	0.2	0.2	0.0		0.4
Stroke (%)	279	2.8	2.0	1.2		3.3

Chronic kidney disease recorded prevalence has increased by 0.54% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Figure 9

Rate of change in long term condition recorded prevalence: practice G82038, 2006/07 to 2013/14

* significance in comparison to national rate of change

Source: QOF

G82111 - The Cedars Surgery

In 2013/14, the general practice recorded prevalence was significantly higher than the CCG for the long term conditions; atrial fibrillation, cancer, dementia and hypertension.
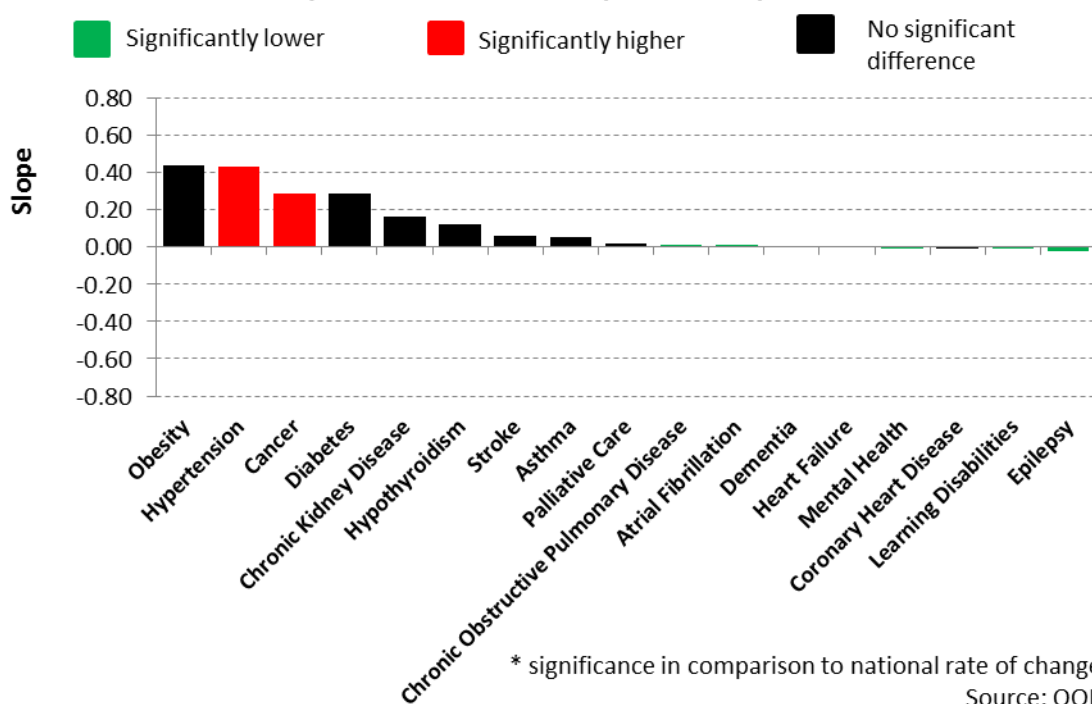
Table 5

Indicator	Practice		CCG			
	Number	Prevalence	Average	Low	Range	High
Asthma (%)	576	5.6	5.7	4.1		10.3
Atrial fibrillation (%)	285	2.8	2.2	1.2		3.6
Cancer (%)	326	3.2	2.5	0.8		4.0
Chronic Kidney Disease (%)	354	4.1	5.5	3.8		8.2
Chronic Obstructive Pulmonary Disease	189	1.8	2.3	1.1		4.3
Coronary Heart Disease (%)	401	3.9	3.8	2.7		5.7
Dementia (%)	99	1.0	0.6	0.1		1.0
Diabetes (%)	587	6.8	7.0	5.7		9.3
Epilepsy (%)	71	0.8	1.0	0.3		1.5
Heart Failure (%)	62	0.6	0.7	0.4		1.1
Hypertension (%)	1876	18.3	16.2	12.0		20.5
Hypothyroidism (%)	367	3.6	3.4	2.0		5.2
Learning Disabilities (%)	41	0.5	0.8	0.2		2.4
Mental Health (%)	83	0.8	0.8	0.3		1.5
Obesity (%)	946	10.8	10.4	3.8		20.2
Palliative Care (%)	16	0.2	0.2	0.0		0.4
Stroke (%)	234	2.3	2.0	1.2		3.3

Hypertension recorded prevalence has increased by 0.44% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Figure 10

Rate of change in long term condition recorded prevalence: practice G82111, 2006/07 to 2013/14

Significantly lower | Significantly higher | No significant difference

* significance in comparison to national rate of change
Source: QOF

G82696 - Manor Road Surgery

In 2013/14, the general practice recorded prevalence was significantly higher than the CCG for the long term conditions; asthma, chronic kidney disease, diabetes and obesity.
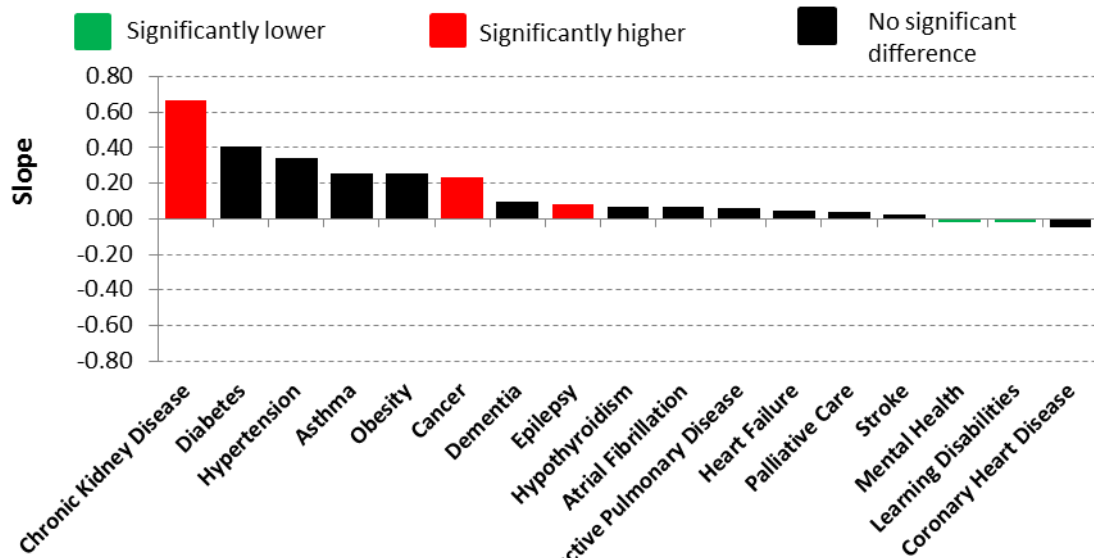
Table 6

| Indicator | Practice | | CCG | | | |
	Number	Prevalence	Average	Low	Range	High
Asthma (%)	219	10.3	5.7	4.1		10.3
Atrial fibrillation (%)	51	2.4	2.2	1.2		3.6
Cancer (%)	63	3.0	2.5	0.8		4.0
Chronic Kidney Disease (%)	138	7.9	5.5	3.8		8.2
Chronic Obstructive Pulmonary Disease	50	2.4	2.3	1.1		4.3
Coronary Heart Disease (%)	95	4.5	3.8	2.7		5.7
Dementia (%)	18	0.9	0.6	0.1		1.0
Diabetes (%)	152	8.5	7.0	5.7		9.3
Epilepsy (%)	26	1.5	1.0	0.3		1.5
Heart Failure (%)	16	0.8	0.7	0.4		1.1
Hypertension (%)	366	17.3	16.2	12.0		20.5
Hypothyroidism (%)	87	4.1	3.4	2.0		5.2
Mental Health (%)	11	0.5	0.8	0.3		1.5
Obesity (%)	227	12.5	10.4	3.8		20.2
Palliative Care (%)	8	0.4	0.2	0.0		0.4
Stroke (%)	51	2.4	2.0	1.2		3.3

Chronic kidney disease recorded prevalence has increased by 0.67% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Figure 11

Rate of change in long term condition recorded prevalence: practice G82696, 2006/07 to 2013/14

* significance in comparison to national rate of change
Source: QOF

Deal

In 2013/14, the general practice recorded prevalence was significantly higher than the CCG for the long term conditions; atrial fibrillation, coronary heart disease, dementia, epilepsy, hypertension, hypothyroidism and stroke.

Table 7

	Practice		CCG			
Indicator	Number	Prevalence	Average	Low	Range	High
Asthma (%)	2014	5.8	5.7	4.1		10.3
Atrial fibrillation (%)	871	2.5	2.2	1.2		3.6
Cancer (%)	934	2.7	2.5	0.8		4.0
Chronic Kidney Disease (%)	1396	4.8	5.5	3.8		8.2
Chronic Obstructive Pulmonary Disease	799	2.3	2.3	1.1		4.3
Coronary Heart Disease (%)	1456	4.2	3.8	2.7		5.7
Dementia (%)	291	0.8	0.6	0.1		1.0
Diabetes (%)	2080	7.1	7.0	5.7		9.3
Epilepsy (%)	331	1.1	1.0	0.3		1.5
Heart Failure (%)	241	0.7	0.7	0.3		1.1
Hypertension (%)	5918	17.0	16.2	12.0		20.5
Hypothyroidism (%)	1306	3.7	3.4	2.0		5.2
Learning Disabilities (%)	214	0.7	0.8	0.2		2.4
Mental Health (%)	288	0.8	0.7	0.3		1.5
Obesity (%)	3054	10.3	10.4	3.8		20.2
Palliative Care (%)	56	0.2	0.2	0.0		0.4
Stroke (%)	807	2.3	2.0	1.2		3.3

Hypertension recorded prevalence has increased by 0.36% per year between 2006/07 and 2013/14. This was a significantly higher increase in comparison to the national trend.

Figure 12

Rate of change in long term condition recorded prevalence: Deal, 2006/07 to 2013/14

* significance in comparison to national rate of change
Source: QOF
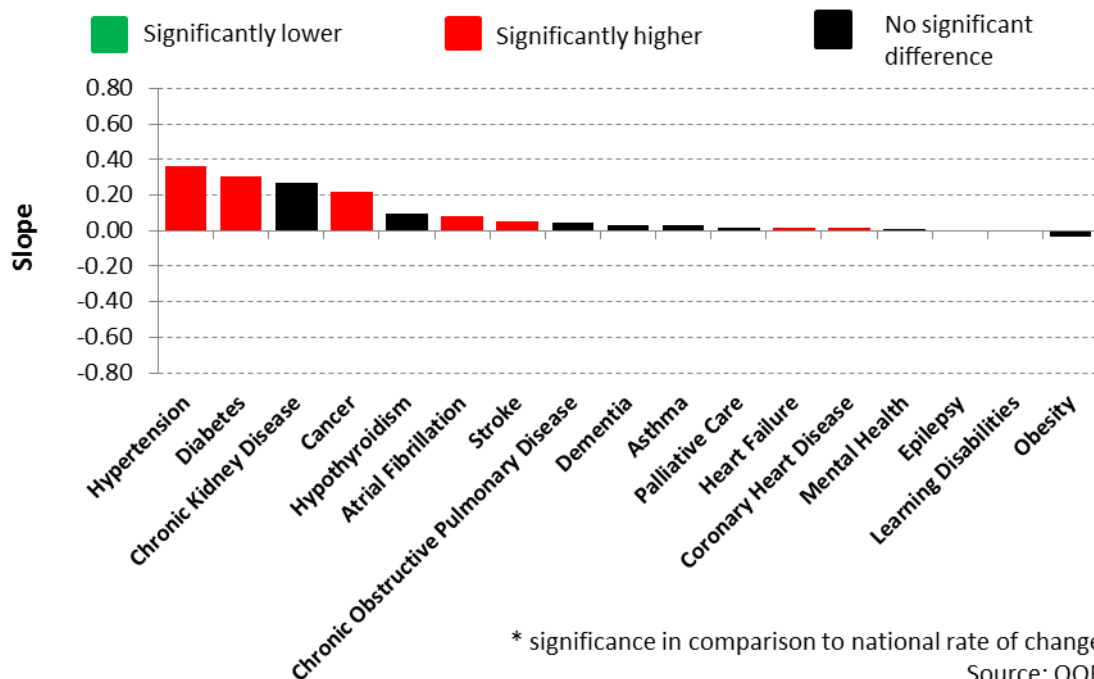
Cardiovascular disease

The Deal locality recorded prevalence has been projected to increase:

- Atrial fibrillation has been projected to increase to 3.05% in 2020: representing a 22.02% increase from 2013/14.

- Coronary heart disease has been projected to increase to 4.26% in 2020; representing a 2.13% decrease from 2013/14.

- Heart failure has been projected to increase to 0.78% in 2020; representing a 13.09% decrease from 2013/14.

- Hypertension has been projected to increase to 19.48% in 2020; this represents a 14.85% increase from 2013/14.

- Stroke & TIA has been projected to increase to 2.68% in 2020; this represents a 15.70% increase from 2013/14.

- Obesity has been projected to increase to 10.05% in 2020; this represents a 2.59% decrease from 2013/14.

Figure 13

Cardiovascular disease group: recorded prevalence projections, 2020
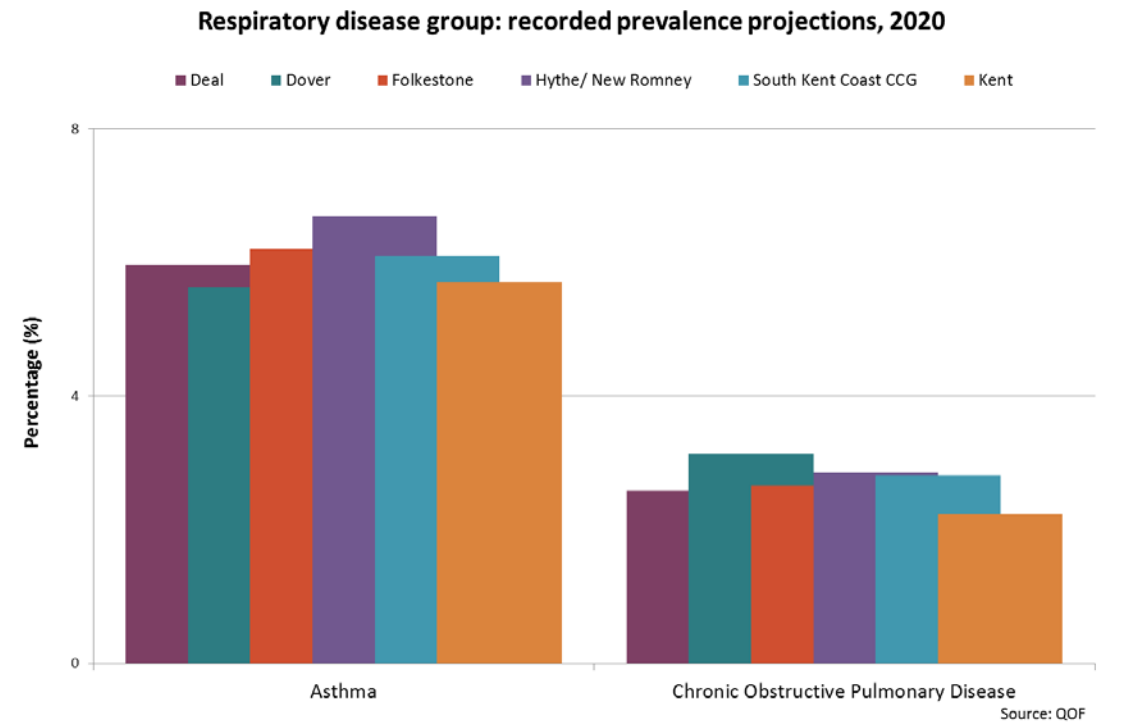
Source: QOF
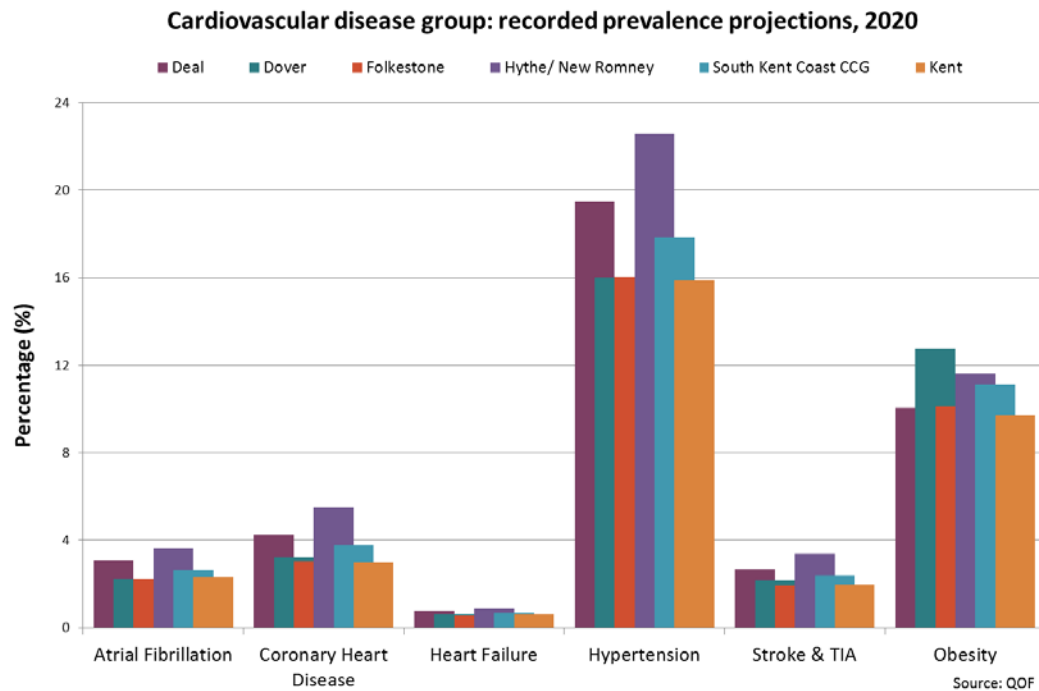
Respiratory disease

The Deal locality recorded prevalence has been projected to increase:

- Asthma has been projected to increase to 5.97% in 2020; this represents a 3.43% increase from 2013/14.

- COPD has been projected to increase to 2.58% in 2020; this represents a 12.72% increase from 2013/14.

Figure 14

Respiratory disease group: recorded prevalence projections, 2020
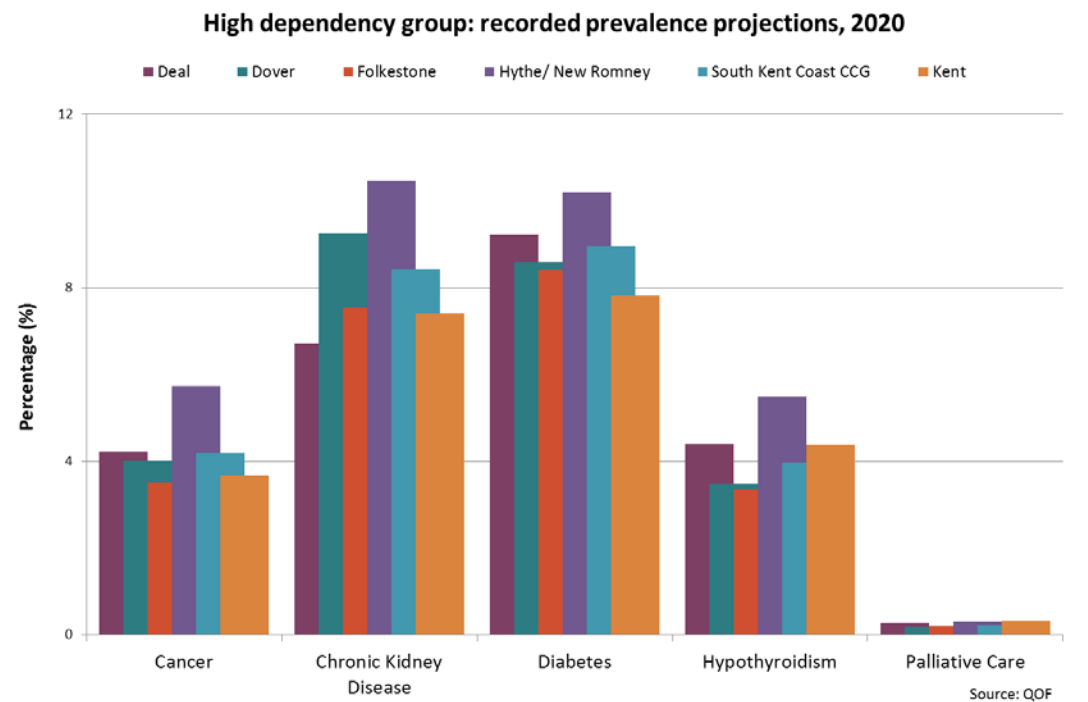

Source: QOF

High Dependency

The Deal locality recorded prevalence has been projected to increase:

- Cancer has been projected to increase to 4.21% in 2020; this represents a 57.25% increase from 2013/14.

- Chronic kidney disease has been projected to increase to 6.72% in 2020; this represents a 38.77% increase from 2013/14.

- Diabetes has been projected to increase to 9.22% in 2020; this represents a 29.62% increase from 2013/14.

- Hypothyroidism has been projected to increase to 4.39% in 2020; this represents a 17.39% increase from 2013/14.

- Palliative care has been projected to increase to 0.27% in 2020; this represents a 68.9% increase from 2013/14.

Figure 15

High dependency group: recorded prevalence projections, 2020

Source: QOF

Mental Health & Neurology

The Deal locality recorded prevalence has been projected to increase:

- Dementia has been projected to increase to 1.06% in 2020; this represents a 27.25% increase from 2013/14.

- Learning disabilities have been projected to increase to 0.68% in 2020; this represents an 8.75% decrease from 2013/14.

- Mental health has been projected to increase to 0.90% in 2020; this represents a 8.84% increase from 2013/14.

Figure 16

Mental Health & Neurology group: reported prevalence projections, 2020

Source: QOF
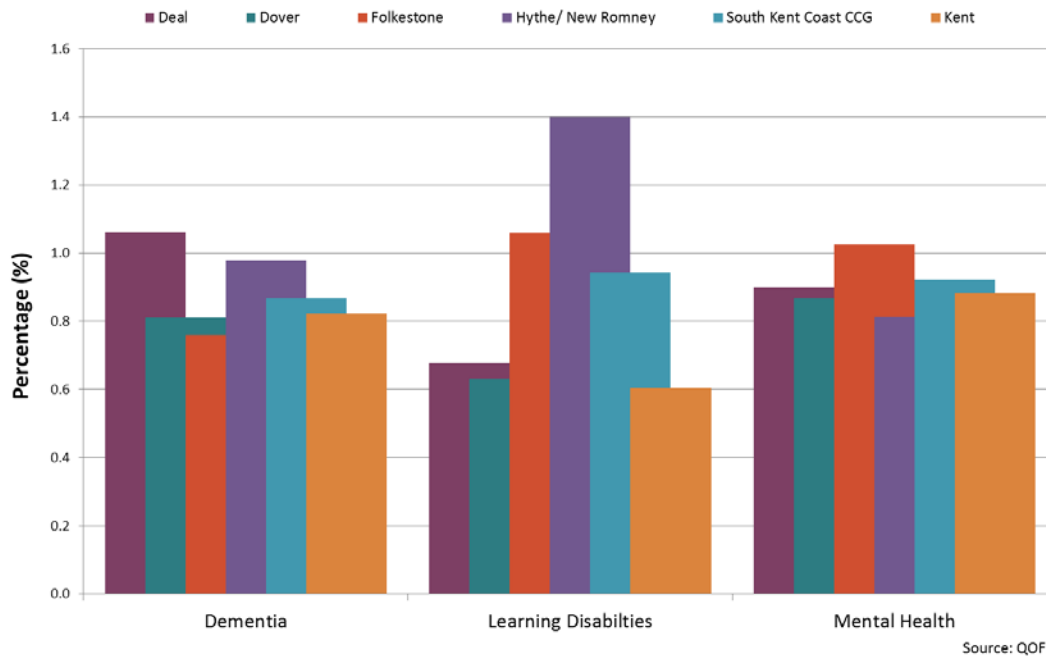
Primary care performance in the management of chronic conditions

Spine charts have been produced to compare the general practice percentage of patients receiving interventions for long term conditions with the NHS South Kent Coast CCG in 2013/14.

The indicator definitions have been included at the end of the chapter.
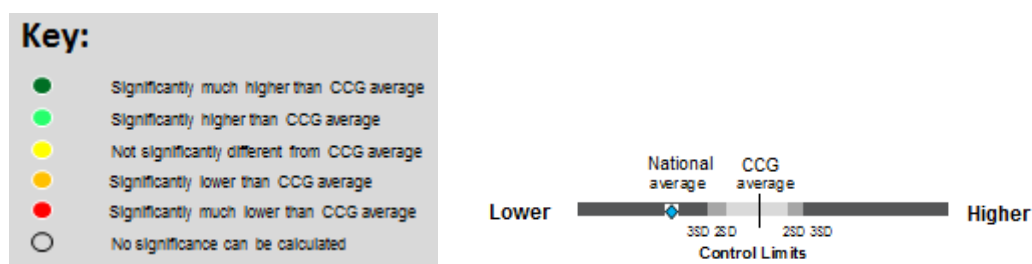
Confidence intervals for each indicator are calculated using the Wilson score method. Statistical significance is calculated relative to the mean for NHS South Kent Coast CCG at the 95% level. A practice is identified as significantly different from the CCG mean if the 95% confidence interval for the practice value does not overlap with the 95% confidence interval for the CCG mean.

The QOF uses an extract of practice list sizes as of 1st January 2014 and disease registers as at 31st March 2014. The NHS South Kent Coast CCG general practice percentage of patients receiving interventions for long term conditions for 2013/14 has been based on the combined data of open practices as at October, 2015.

General practice exceptions have been included within denominators to ensure performance is representative of the prevalent practice population for each of the long term conditions.

Exception rates represent the percentage of patients not receiving the intervention for each of the long term condition clinical achievement indicators. The criteria for exception reporting has been detailed below (see Notes).
The Kent 2013/14, general practice exception rates for the long term condition clinical achievement indicators were transformed to normalise the distribution for the better identification of outliers. Z-scores were then calculated using the Kent mean and standard deviation. The Z-score indicates how far away from the Kent average the general practice exception rates were. A Z-score greater than 2 was the cut-off used to identify outliers.

Exception rates for the indicators within Kent will be presented by practice. This will only be presented for the indicators with numbers of exceptions at 7 or greater. Outliers, greater than two standard deviations from the Kent mean have been highlighted.

G82036 - Balmoral Surgery had significantly lower clinical achievement for the percentage of patients receiving the intervention;

- The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions.

- The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 12 months.

- The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less.

- The percentage of patients with hypertension in whom the last blood pressure reading (measured in the preceding 9 months) is 150/90 mmHg or less.

Figure 17

Indicator	Practice		CCG			
	Number	Performance	Average	Low	Range	High
Asthma 02	67	74.4	85.3	68.9		100.0
Asthma 03	327	56.9	70.7	47.0		93.3
Atrial Fibrillation 03	70	86.4	92.6	83.3		100.0
Atrial Fibrillation 04	118	77.6	72.8	60.3		93.3
Cancer 02	53	80.3	80.4	40.0		100.0
Chronic Kidney Disease 02	309	70.1	75.3	59.0		88.8
Chronic Kidney Disease 03	23	63.9	76.8	56.1		92.9
Chronic Obstructive Pulmonary Disease 03	167	70.8	81.3	63.8		95.0
Chronic Obstructive Pulmonary Disease 04	166	70.3	76.2	56.3		92.9
Dementia 02	64	74.4	78.3	44.4		100.0
Depression 02	20	76.9	63.0	36.6		93.3
Diabetes 03	494	66.0	73.8	40.8		89.5
Diabetes 07	488	65.2	64.6	52.5		76.0
Diabetes 09	602	80.4	82.6	72.9		90.1
Diabetes 14	35	97.2	75.7	20.0		100.0
Epilepsy 02	59	51.8	61.5	26.7		84.2
Hypertension 02	1372	76.9	80.5	66.2		88.7
Mental Health 02	67	79.8	74.4	29.2		100.0
Osteoporosis 03	20	69.0	76.9	41.7		100.0
Peripheral Artery Disease 02	83	91.2	86.3	73.6		100.0
Rheumatoid Arthritis 02	55	63.2	78.4	6.2		100.0
Coronary Heart Disease 02	438	85.2	89.4	76.1		96.3
Coronary Heart Disease 06	10	76.9	71.4	33.3		100.0
Stroke & TIA 03	205	84.4	85.4	73.4		95.2
Blood Pressure 01	6747	90.6	89.9	80.9		95.9
Smoking 02	2889	93.1	94.4	88.9		99.2
Smoking 05	518	99.2	94.3	77.9		99.8
Cervical Screening 02	2242	78.0	77.8	71.1		85.5

Table 8

	Exceptions	Exception rate
Asthma 02	16	17.78
Asthma 03	203	35.30
Atrial Fibrillation 03	10	12.35
Atrial Fibrillation 04	26	17.11
Cancer 02	8	12.12
Chronic Kidney Disease 02	99	22.45
Chronic Kidney Disease 03	12	33.33
COPD 03	62	26.27
COPD 04	60	25.42
Dementia 02	7	8.14
Diabetes 03	189	25.23
Diabetes 07	203	27.10
Diabetes 09	118	15.75
Epilepsy 02	46	40.35
Hypertension 02	261	14.63
Mental Health 02	13	15.48
Peripheral Artery Disease 02	7	7.69
Rheumatoid Arthritis 02	29	33.33
Coronary Heart Disease 02	67	13.04
Stroke & TIA 03	27	11.11
Blood Pressure 01	24	0.32
Smoking 02	12	0.39
Cervical Screening 02	345	12.00

G82038 - St Richards Road Surgery had significantly lower clinical achievement for the percentage of patients receiving the intervention;
The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions.

- The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less.

- The percentage of patients aged 18 or over on drug treatment for epilepsy who have been seizure free for the last 12 months recorded in the preceding 12 months.

- The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive care plan documented in the record, in the preceding 12 months, agreed between individuals, their family and/or carers as appropriate.

- The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 12 months.

Figure 18

Indicator	Practice		CCG			
	Number	Performance	Average	Low	Range	High
Asthma 02	103	75.7	85.3	68.9		100.0
Asthma 03	377	58.5	70.7	47.0		93.3
Atrial Fibrillation 03	58	84.1	92.6	83.3		100.0
Atrial Fibrillation 04	98	68.1	72.8	60.3		93.3
Cancer 02	42	91.3	80.4	40.0		100.0
Chronic Kidney Disease 02	329	71.1	75.3	59.0		88.8
Chronic Kidney Disease 03	32	88.9	76.8	56.1		92.9
Chronic Obstructive Pulmonary Disease 03	250	77.2	81.3	63.8		95.0
Chronic Obstructive Pulmonary Disease 04	247	76.2	76.2	56.3		92.9
Dementia 02	71	80.7	78.3	44.4		100.0
Depression 02	63	71.6	63.0	36.6		93.3
Diabetes 03	383	64.7	73.8	40.8		89.5
Diabetes 07	386	65.2	64.6	52.5		76.0
Diabetes 09	481	81.3	82.6	72.9		90.1
Diabetes 14	13	65.0	75.7	20.0		100.0
Epilepsy 02	56	46.7	61.5	26.7		84.2
Heart Failure 03	12	100.0	89.5	50.0		100.0
Hypertension 02	1508	79.7	80.5	66.2		88.7
Mental Health 02	42	51.2	74.4	29.2		100.0
Osteoporosis 03	16	72.7	76.9	41.7		100.0
Peripheral Artery Disease 02	63	85.1	86.3	73.6		100.0
Rheumatoid Arthritis 02	49	68.1	78.4	6.2		100.0
Coronary Heart Disease 02	391	87.7	89.4	76.1		96.3
Coronary Heart Disease 06	7	58.3	71.4	33.3		100.0
Stroke & TIA 03	219	78.5	85.4	73.4		95.2
Blood Pressure 01	5475	91.1	89.9	80.9		95.9
Smoking 02	2623	91.2	94.4	88.9		99.2
Smoking 05	474	99.0	94.3	77.9		99.8
Cervical Screening 02	1749	81.3	77.8	71.1		85.5

Table 9

Exceptions		Exception rate
Asthma 02	10	7.35
Asthma 03	111	17.24
Atrial Fibrillation 04	11	7.64
Chronic Kidney Disease 02	41	8.86
COPD 03	54	16.67
COPD 04	61	18.83
Dementia 02	10	11.36
Depression 02	15	17.05
Diabetes 03	56	9.46
Diabetes 07	58	9.80
Diabetes 09	48	8.11
Epilepsy 02	55	45.83
Hypertension 02	90	4.76
Mental Health 02	25	30.49
Rheumatoid Arthritis 02	13	18.06
Coronary Heart Disease 02	17	3.81
Stroke & TIA 03	26	9.32
Blood Pressure 01	31	0.52
Smoking 02	13	0.45
Cervical Screening 02	49	2.28

G82111 - The Cedars Surgery had significantly lower clinical achievement for the percentage of patients receiving the intervention;

- The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions.

- In those patients with atrial fibrillation whose latest record of a CHADS2 score is greater than 1, the percentage of patients who are currently treated with anti-coagulation therapy.

- The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 12 months.

- The percentage of patients with COPD with a record of FEV1 in the preceding 12 months.

- The percentage of patients aged 75 or over with a fragility fracture on or after 1 April 2012, who are currently treated with an appropriate bone-sparing agent.

- The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 12 months.

Figure 19

Indicator	Practice		CCG			
	Number	Performance	Average	Low	Range	High
Asthma 02	83	91.2	85.3	68.9		100.0
Asthma 03	376	65.3	70.7	47.0		93.3
Atrial Fibrillation 03	81	91.0	92.6	83.3		100.0
Atrial Fibrillation 04	88	61.1	72.8	60.3		93.3
Cancer 02	49	83.1	80.4	40.0		100.0
Chronic Kidney Disease 02	286	80.8	75.3	59.0		88.8
Chronic Kidney Disease 03	17	81.0	76.8	56.1		92.9
Chronic Obstructive Pulmonary Disease 03	139	73.5	81.3	63.8		95.0
Chronic Obstructive Pulmonary Disease 04	128	67.7	76.2	56.3		92.9
Dementia 02	69	69.7	78.3	44.4		100.0
Depression 02	50	53.2	63.0	36.6		93.3
Diabetes 03	458	78.0	73.8	40.8		89.5
Diabetes 07	395	67.3	64.6	52.5		76.0
Diabetes 09	511	87.1	82.6	72.9		90.1
Diabetes 14	23	95.8	75.7	20.0		100.0
Epilepsy 02	50	70.4	61.5	26.7		84.2
Hypertension 02	1551	82.7	80.5	66.2		88.7
Mental Health 02	54	67.5	74.4	29.2		100.0
Osteoporosis 03	10	52.6	76.9	41.7		100.0
Peripheral Artery Disease 02	52	81.3	86.3	73.6		100.0
Rheumatoid Arthritis 02	73	86.9	78.4	6.2		100.0
Coronary Heart Disease 02	358	89.3	89.4	76.1		96.3
Coronary Heart Disease 06	31	73.8	71.4	33.3		100.0
Stroke & TIA 03	189	80.8	85.4	73.4		95.2
Blood Pressure 01	5685	89.2	89.9	80.9		95.9
Smoking 02	2639	93.2	94.4	88.9		99.2
Smoking 05	392	96.1	94.3	77.9		99.8
Cervical Screening 02	1888	81.9	77.8	71.1		85.5

Table 10

	Exceptions	Exception rate
Asthma 02	7	7.69
Asthma 03	96	16.67
Atrial Fibrillation 03	7	7.87
Atrial Fibrillation 04	21	14.58
Cancer 02	10	16.95
Chronic Kidney Disease 02	26	7.34
COPD 03	42	22.22
COPD 04	46	24.34
Depression 02	34	36.17
Diabetes 03	54	9.20
Diabetes 07	66	11.24
Diabetes 09	40	6.81
Epilepsy 02	11	15.49
Hypertension 02	120	6.40
Mental Health 02	24	30.00
Osteoporosis 03	7	36.84
Peripheral Artery Disease 02	8	12.50
Rheumatoid Arthritis 02	8	9.52
Coronary Heart Disease 02	19	4.74
Coronary Heart Disease 06	11	26.19
Stroke & TIA 03	15	6.41
Blood Pressure 01	42	0.66
Smoking 02	18	0.64
Cervical Screening 02	80	3.47

G82696 - Manor Road Surgery had significantly lower clinical achievement for the percentage of patients receiving the intervention;

- The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less.

Figure 20

Indicator	Practice		CCG			
	Number	Performance	Average	Low	Range	High
Asthma 02	56	91.8	85.3	68.9		100.0
Asthma 03	151	68.9	70.7	47.0		93.3
Atrial Fibrillation 03	13	100.0	92.6	83.3		100.0
Atrial Fibrillation 04	21	80.8	72.8	60.3		93.3
Cancer 02	13	100.0	80.4	40.0		100.0
Chronic Kidney Disease 02	109	79.0	75.3	59.0		88.8
Chronic Kidney Disease 03	16	84.2	76.8	56.1		92.9
Chronic Obstructive Pulmonary Disease 03	35	70.0	81.3	63.8		95.0
Chronic Obstructive Pulmonary Disease 04	34	68.0	76.2	56.3		92.9
Dementia 02	16	88.9	78.3	44.4		100.0
Diabetes 03	84	55.3	73.8	40.8		89.5
Diabetes 07	100	65.8	64.6	52.5		76.0
Diabetes 09	131	86.2	82.6	72.9		90.1
Epilepsy 02	13	50.0	61.5	26.7		84.2
Heart Failure 03	9	90.0	89.5	50.0		100.0
Hypertension 02	305	83.3	80.5	66.2		88.7
Mental Health 02	8	80.0	74.4	29.2		100.0
Peripheral Artery Disease 02	13	92.9	86.3	73.6		100.0
Rheumatoid Arthritis 02	17	81.0	78.4	6.2		100.0
Coronary Heart Disease 02	91	95.8	89.4	76.1		96.3
Stroke & TIA 03	45	88.2	85.4	73.4		95.2
Blood Pressure 01	1179	89.9	89.9	80.9		95.9
Smoking 02	622	95.5	94.4	88.9		99.2
Smoking 05	96	97.0	94.3	77.9		99.8
Cervical Screening 02	381	82.8	77.8	71.1		85.5

Table 11

	Exceptions	Exception rate
Chronic Kidney Disease 02	8	5.80
Diabetes 03	9	5.92
Epilepsy 02	9	34.62
Blood Pressure 01	10	0.76
Cervical Screening 02	17	3.70

Breastfeeding

The following chart shows coverage and breastfeeding prevalence, which is recorded at the 6-8 week check.

Figure 21

South Kent Coast CCG, Deal Practices:
6-8 week breastfeeding (Q2-Q3 2014/15 pooled)

Source: Child Health Information System
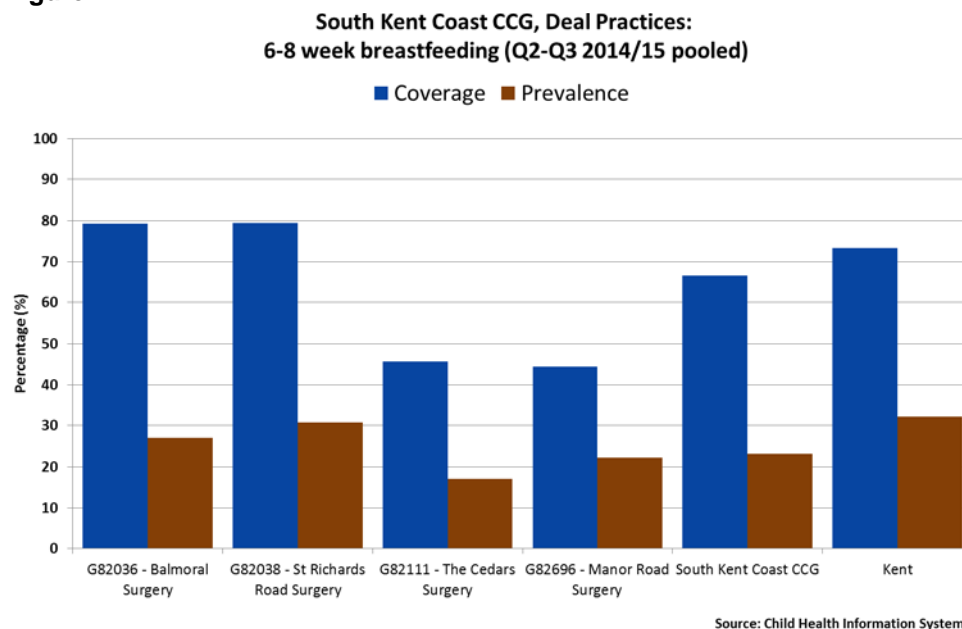
Coverage levels of 95% and greater have been recommended for the accurate assessment of breastfeeding prevalence.

The South Kent Coast coverage was 66.6% and within Deal practices ranged between 44.4 and 79.5% during the mid-part of 2014/15. None of the practices had coverage higher than recommended levels.

Coverage rates below the recommended levels suggest that the prevalence indicators are less reliable and mask the true population prevalence with regard to breastfeeding continuation.

Health Checks

Data is available on the NHS Health Checks.[1] NHS Health Checks are available for adults aged 40-74 without a previous diagnosis of heart disease, stroke, diabetes, kidney disease or certain types of dementia. Eligible individuals are invited once every five years with the aim to assess risk and prevent disease.

Eligible Population

Within South Kent Coast CCG, the annual eligible population has been estimated to be 10,408 persons in 2014/15. A total of 1,889 persons have been estimated to be eligible within Deal practices:

Figure 22

G82036 - Balmoral Surgery	**624**
G82038 - St Richards Road Surgery	483
G82111 - The Cedars Surgery	574
G82696 - Manor Road Surgery	208

Performance

Performance describes the numbers of health checks delivered (within all settings) in comparison to the eligible population (one fifth of the five year eligible population).

A local analysis of health checks performance, practice level deprivation and list size has been completed.[2] This identified a weak and non-significant finding that practices with smaller list sizes had lower health check completion rates, as well as, lower patient satisfaction scores.

Practices G82696 had performance that was significantly lower than the 95% or 99.8% control limits within Kent.

Figure 23

Health check performance, Deal, 2014/15

Source: KCHFT

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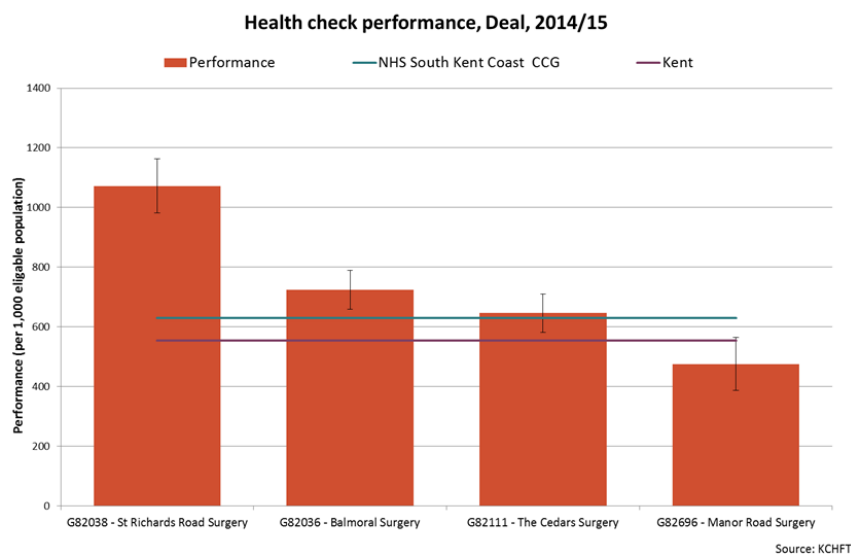
[1] BMJ Informatica (2015) Health checks.
[2] KMPHO (2015) Health checks performance, practice level deprivation and list size.

Cancer

Data is available on cancer care via the National Cancer Intelligence Network. [3] A local Cancer Equity Audit is also available for Kent. [4]

Incidence

Across Kent it is known that there has been an increasing trend in cancer incidence. [4] The crude incidence rate of cancer in 2014 (new cancer cases per 100,000 population) has been shown below. None of the practices can be identified to have crude cancer incidence rates different to South Kent Coast CCG.
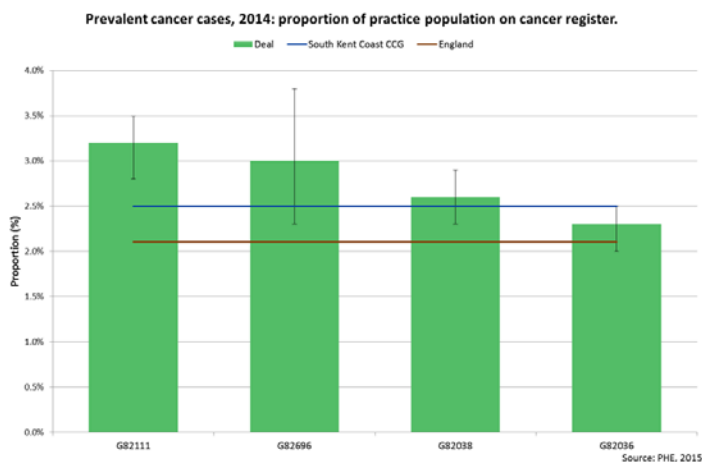
Figure 24
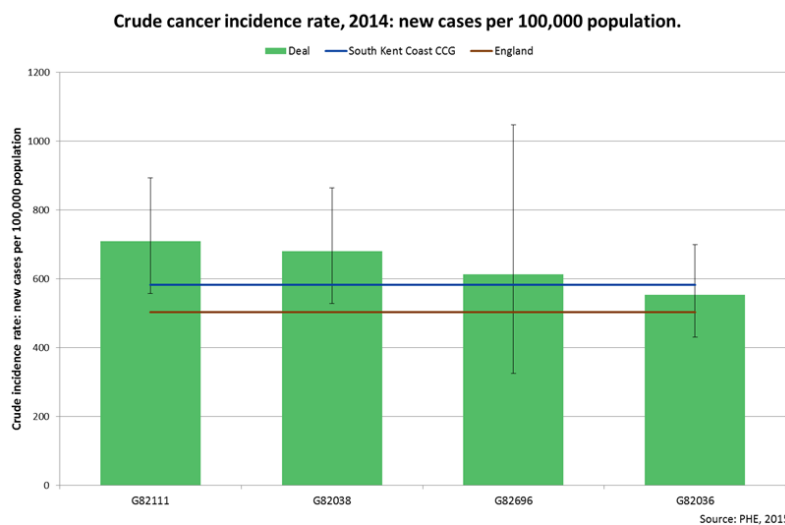
Prevalence

In 2014, the prevalence of cancer (% of practice population on practice cancer register) has been shown below. Practice G82000 can be identified to have cancer prevalence higher than South Kent Coast CCG. Practice G82111 can be identified to have prevalent cancer cases higher than South Kent Coast CCG.

Figure 25

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[3] Public Health England (2015) National Cancer Intelligence Network: Cancer Commissioning Toolkit.
https://www.cancertoolkit.co.uk/Login
[4] Kent Public Health Observatory (2015) Cancer in Kent: equity review.

Breast Cancer

In 2014, the proportion of females screened for breast cancer (ages 50-70, in last 36 months) can be seen below:

Figure 26

Females, 50-70 years, screened for breast cancer within last 36 months.

Source: PHE, 2015
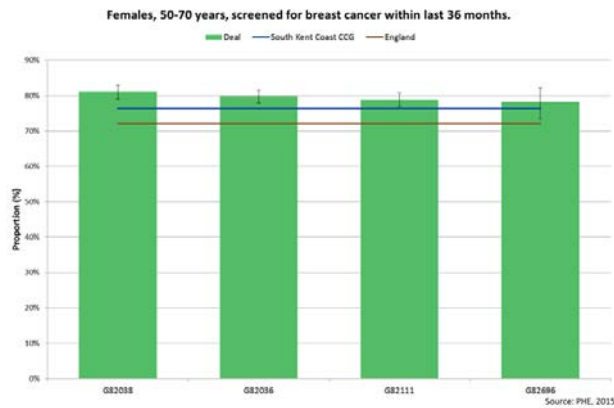
- Screening rates in G82036, G82038 and G82111 were significantly higher than South Kent Coast CCG.

Cervical Cancer

In 2014, the proportion of females attending cervical screening (ages 25-64, within target period) has been presented below:

Figure 27

Females, 25-64 years, attending cervical screening within target period.

Source: PHE, 2015
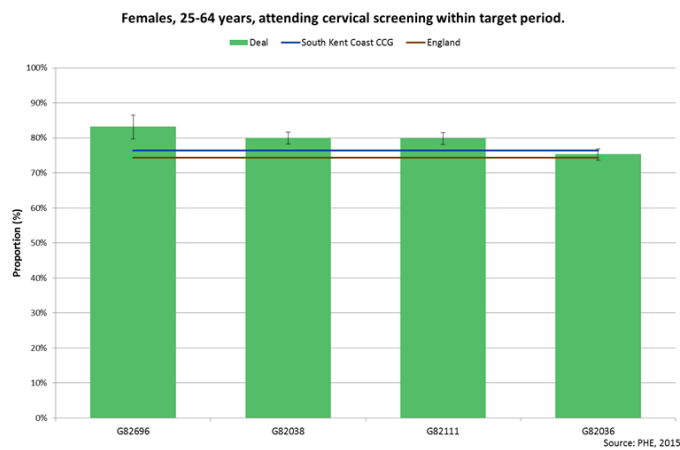
- Screening rates in G82038, G82111 and G82696 were significantly higher than South Kent Coast CCG.

Bowel Cancer

In 2014, the proportion of persons screened for bowel cancer (ages 60-69, within last 30 months) has been presented below:

Figure 28

Persons, 60-69 years, screened for bowel cancer in last 30 months.

Deal — South Kent Coast CCG — England

Source: PHE, 2015
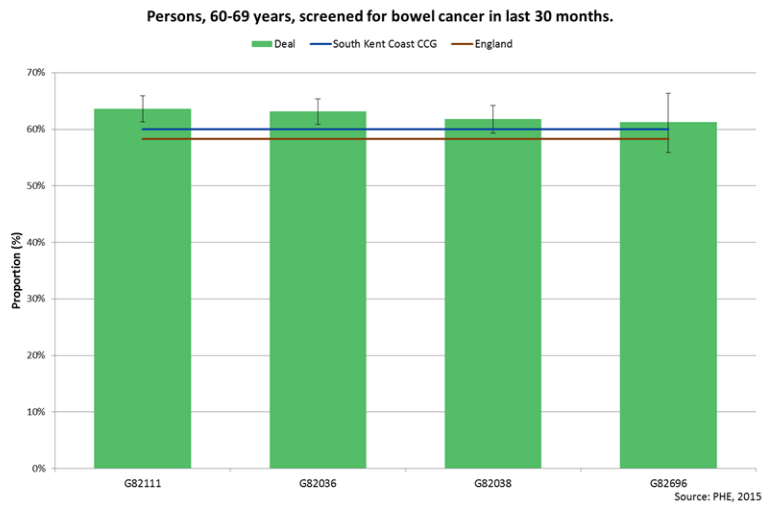
Screening rates in G82036 and G82111 were significantly lower than South Kent Coast CCG

Lifestyles

The measuring of lifestyle factors is very difficult, we do not routinely weigh and measure adults for obesity prevalence, we do not regularly check on everyone's smoking status for population smoking prevalence.   Estimates of population prevalence for these lifestyle factors are modelled from national surveys such as The Health Survey for England.

The following maps show modelled adult smoking and obesity prevalence estimates applied locally at a Mid Super Output Area[5] (MSOA) level with electoral wards overlaid for all of South Kent Coast CCG.

Figure 29

Modelled adult obesity prevalence estimates
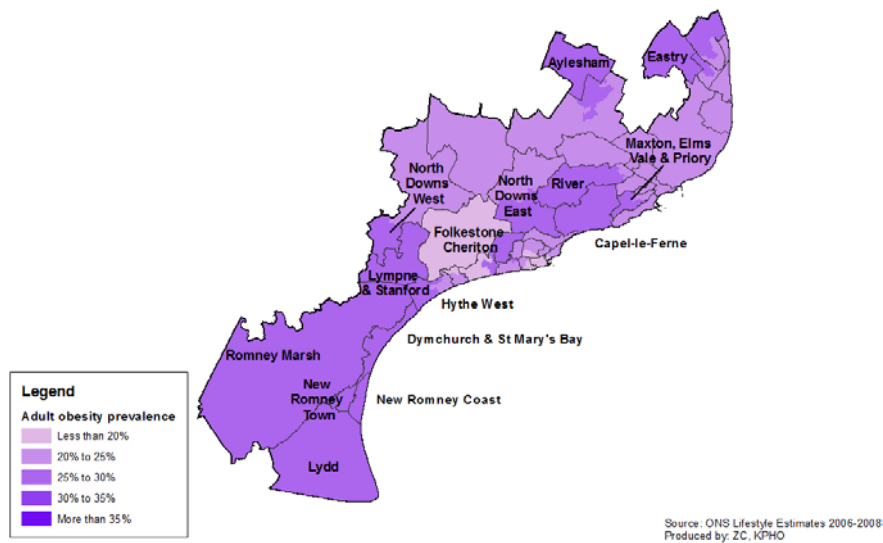
Figure 30

Modelled smoking prevalence estimates

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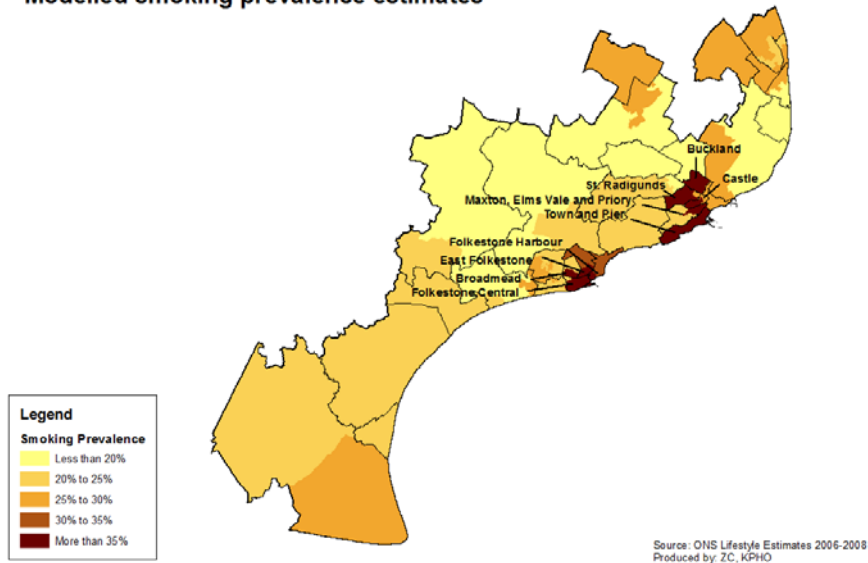
[5] MSOAs cover between 5,000 and 20,000 populations

Accident and emergency activity

Accident & Emergency attendances across Kent have been slowly increasing in recent years. This is also reflected in the attendance rates for South Kent Coast and each of its constituent hubs. Age standardised rates are lower for patients registered with the Deal hub practices.

The rate of increase for Deal patients is in line with the increase for all Kent patients (about 8%) but higher than the 5% for South Kent Coast.

Age standardised Accident & Emergency attendance rates 2012/13 to 2014/15
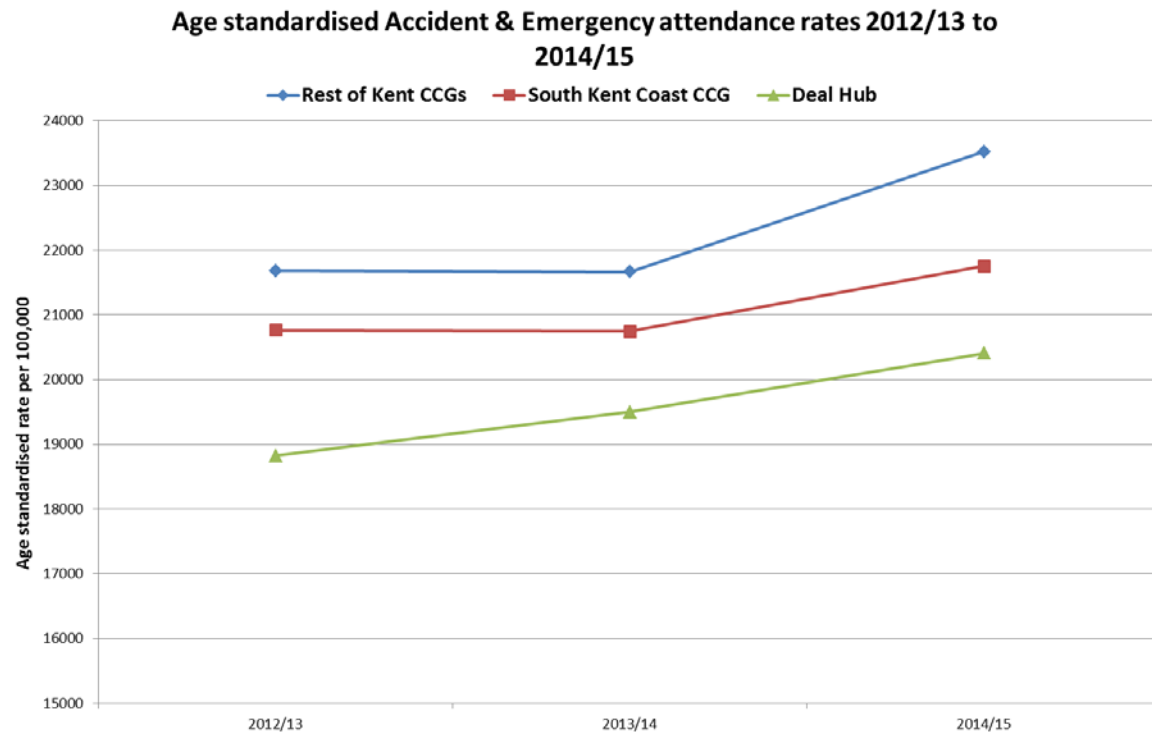
The age profile of accident & emergency attendances over the three year period shows that young people aged 15-24 years are the most frequent of all attendances. This pattern is reflected across South Kent Coast (14.5%) although the ratio is a little lower for patients registered with practices in Deal (14%).

The greatest difference in the age profile for Deal patients is for the over 65s, 35% of all the attendances are from this age group, this is much higher than the 28% across South Kent Coast generally and indeed the 24% for all other CCGs in Kent. This can be explained by the fact that the Deal patient population is generally older than the populations of the wider areas.

Age profile for Accident & Emergency attendances for Deal GPs Hub patients, 2012/13 to 2014/15 pooled data
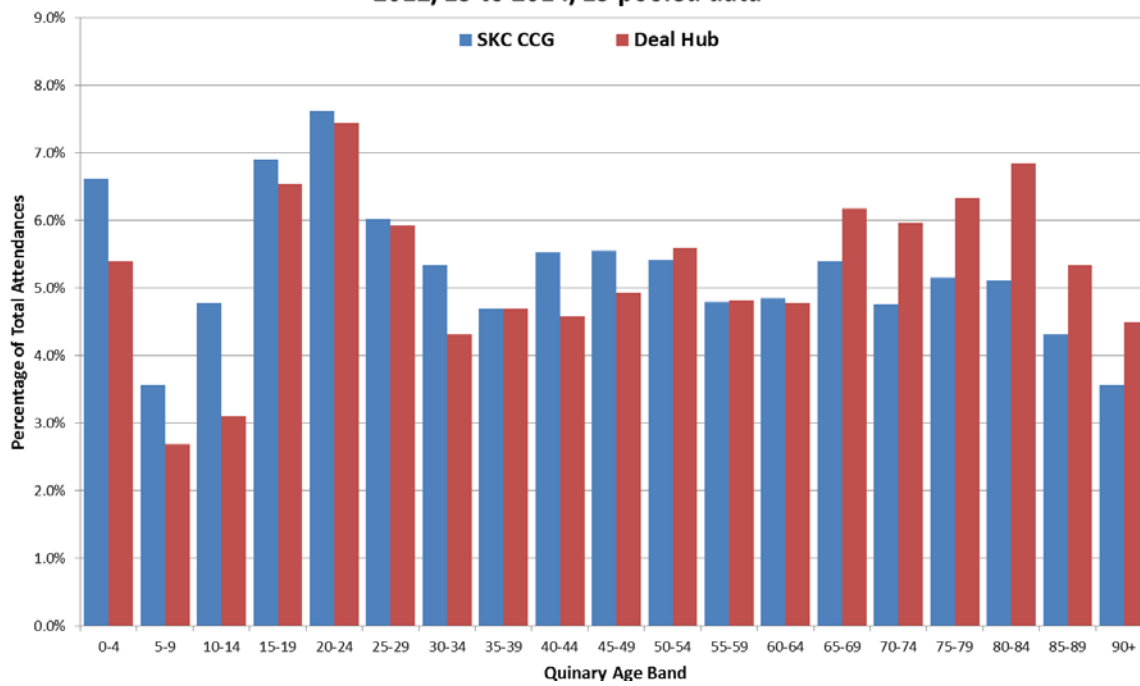
Outpatient activity

In 2014/15, there were 2,605,087 outpatient appointments for the Kent registered population. Of these, 372,280 outpatient appointments were for the South Kent Coast CCG registered population.

For patients registered to Deal practices there were 60,472 outpatient appointments in 2014/15.

Table 12: Outpatient appointment by type, 2014/15.

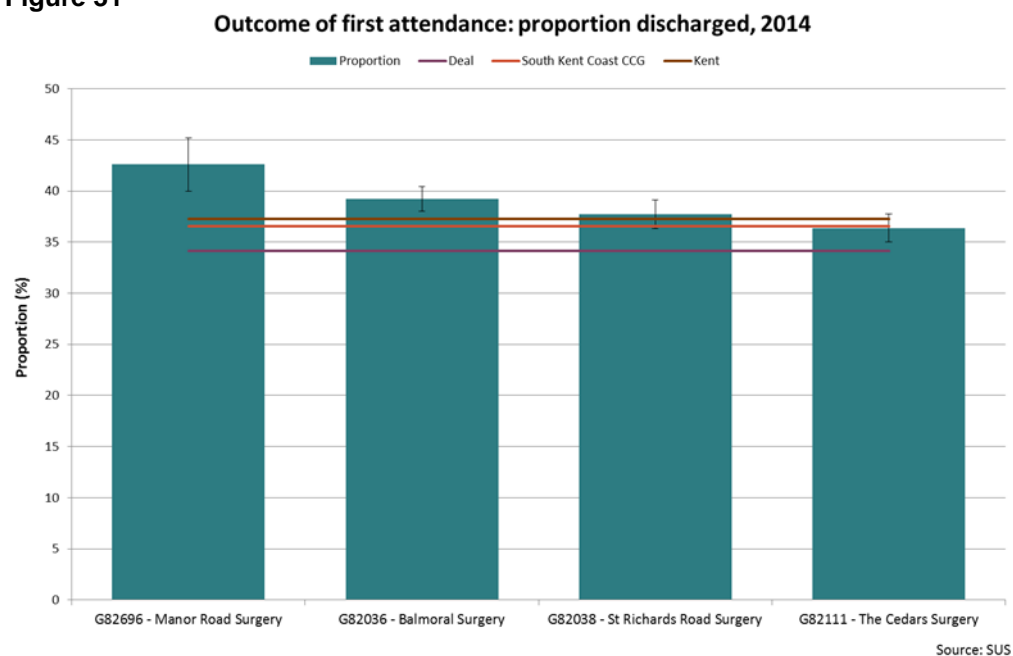|	Deal *n* (%)	South Kent Coast CCG *n* (%)	Kent *n* (%)
Not applicable	0 (0.0)	8 (0.0)	627 (0.0)
Cancelled by patient	1,173 (1.9)	6,547 (1.8)	97,978 (3.8)
Patient did not attend	3,653 (6.0)	23,915 (6.4)	161,681 (6.2)
Appointment cancelled or postponed by Provider	673 (1.1)	4,106 (1.1)	86,567 (3.3)
Seen	54,665 (90.4)	336,266 (90.3)	2,241,532 (86.0)
Arrived late and seen	105 (0.2)	853 (0.2)	3,233 (0.1)
Patient did not attend - arrived late and not seen	12 (0.0)	86 (0.0)	637 (0.0)
Not known	0 (0.0)	0 (0.0)	0 (0.0)
Not coded	191 (0.3)	499 (0.1)	12,832 (0.5)

Proportions of appointments cancelled by patient and provider were similar between Deal and South Kent Coast CCG. Cancelled appointments amounted to 1,846 appointments within Deal in 2014/15.

The proportion of appointments whereby the patient did not attend were similar within Deal, South Kent Coast CCG and Kent. In 2014/15, within Deal, patient not attending appointment amounted to 3,665 appointments.

First appointments accounted for 11,763 attendances within Deal general practices, after first attendance, 34.2% or 4,020 were discharged from care.

This was significantly greater for G82696 - Manor Road Surgery (42.6% or 589) were discharged from care. Also this was significantly greater for G82036 - Balmoral Surgery (39.3% or 2,415) were discharged from care.

Figure 31

Outcome of first attendance: proportion discharged, 2014

Source: SUS

Within Kent, in 2014/15 there was a ratio of 2.25 follow-up appointments for each first appointment. A higher ratio can be seen for South Kent Coast CCG (2.49) and for Deal (2.54). The G82111 – Cedars Surgery showed the highest ratio (2.73) across Deal practices.

Table 13

	First appointments	Follow-up appointments	Ratio
G82111 - The Cedars Surgery	4782	13060	2.73
G82038 - St Richards Road Surgery	4574	11495	2.51
G82036 - Balmoral Surgery	6155	15466	2.51
G82696 - Manor Road Surgery	1382	2862	2.07
Deal	16893	42883	2.54
South Kent Coast CCG	105367	262361	2.49
Kent	793543	1789342	2.25

The rate of change in the ratio of follow-up appointments for each first appointment has been presented below. Only G82111 – The Cedars Surgery has a significantly greater rate of change between 2010/11 and 2014/15 in comparison to Kent.
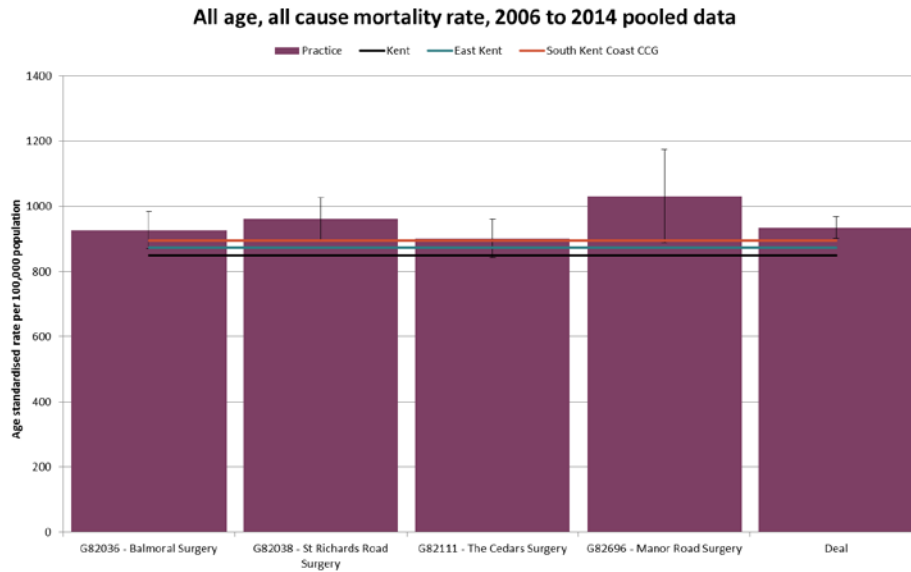
Figure 32

Rate of change in the ratio of follow-up appointments for each first appointment, between 2010/11 to 2014/15: Deal
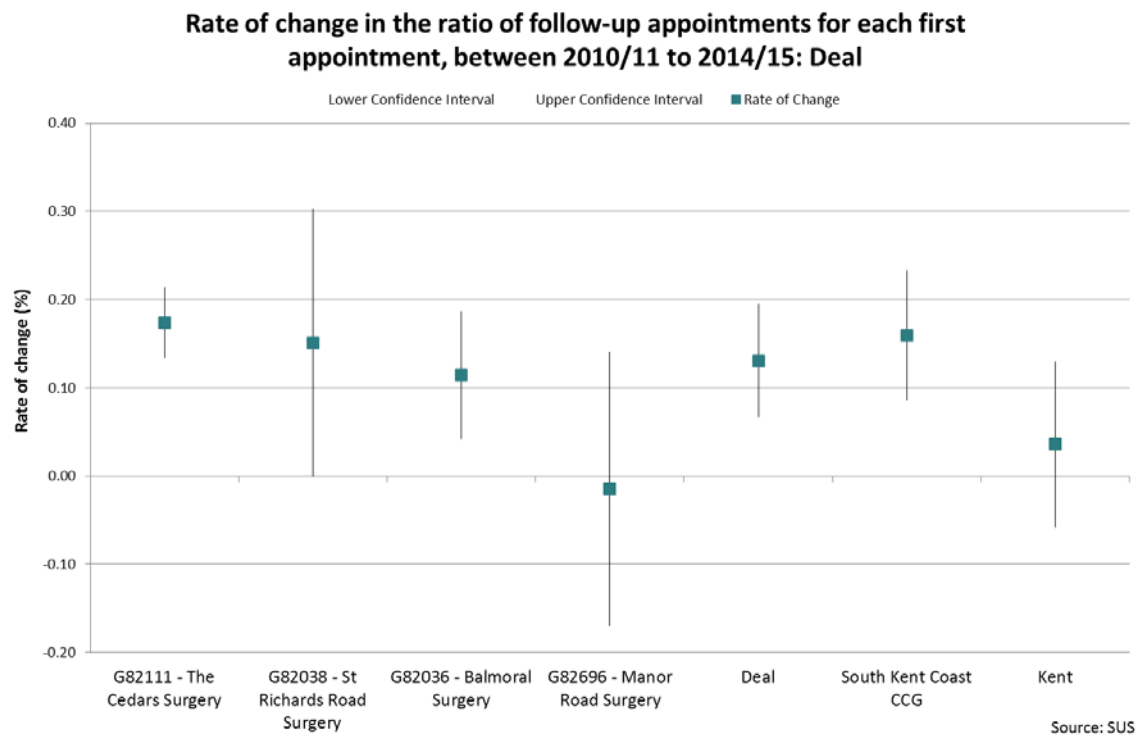
Mortality

All age, all cause mortality

The all age, all cause mortality rate in Deal ranges from 927.5 deaths per 100,000 population in The Cedars Surgery to 1032.1 Manor Road Surgery whilst the Deal hub rate is 935.0 per 100,000. With the exception of the Cedars Surgery, the Deal practices and hub as a whole have significantly higher rates than Kent. South Kent CCG has a higher rate than both east Kent and Kent.
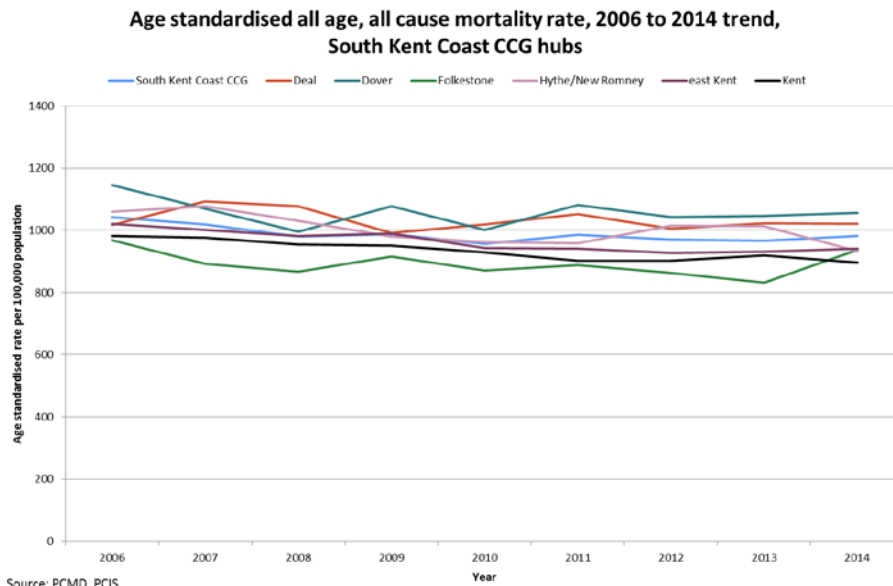
Figure 33

All age, all cause mortality rate, 2006 to 2014 pooled data

Source: PCMD, PCIS

In the Deal hub, the rate of decrease has been 4.5 deaths per 100,000 population annually, slower than the Kent (11.1) and South Kent Coast CCG (7.0) rate of decrease.

Figure 34

Age standardised all age, all cause mortality rate, 2006 to 2014 trend, South Kent Coast CCG hubs

Source: PCMD, PCIS

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Cancer

The cancer mortality rate in Deal hub ranges from 133.9 deaths per 100,000 population in Balmoral surgery to 192.3 in Manor Road Surgery; however there are no significant differences between the practices. The Deal hub rate (144.3) is similar to the South Kent Coast CCG rate (144.5), the east Kent rate (142.7) and the Kent rate (137.6).

Figure 35

Cancer mortality rate, under 75 population, 2006 to 2014 pooled data
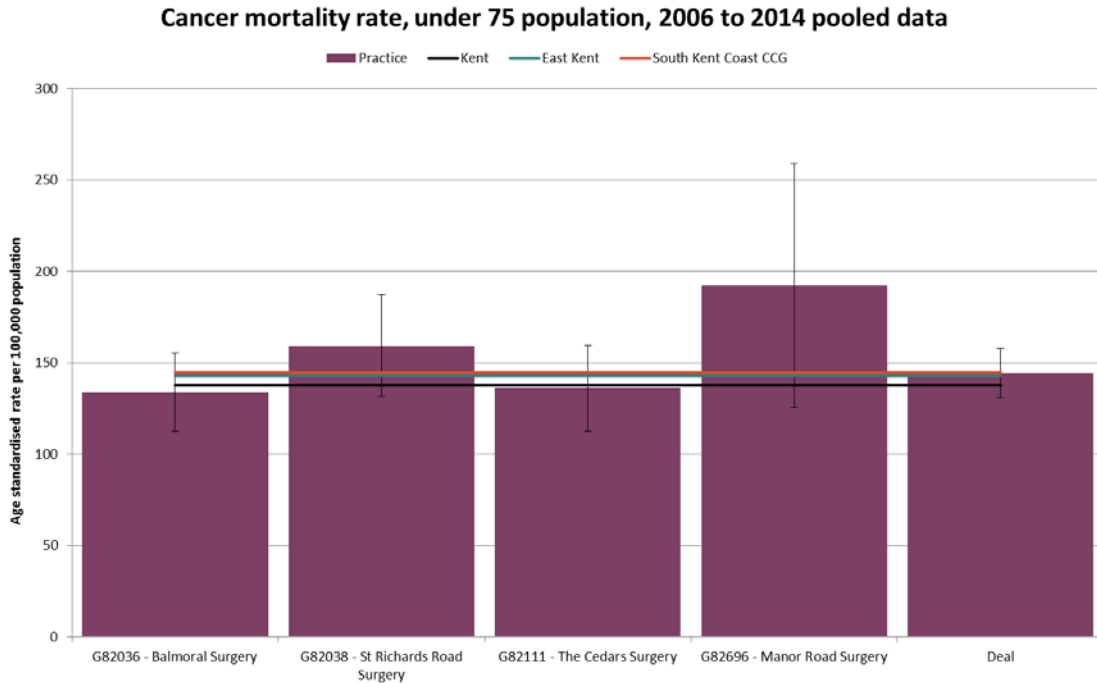
Source: PCMD, PCIS

Across Kent, the under 75 mortality rate for cancer has reduced by 2.0 deaths per 100,000 population annually. In the Deal hub, there have been large fluctuations, with a peak at 176.8 deaths per 100,000 population in 2008. In 2014, the rate was 159.4, higher than the Kent rate of 130.5, but not significant.

Figure 36

Age standardised cancer mortality rate, under 75s, 2006 to 2014 trend, South Kent Coast CCG hubs

Source: PCMD, PCIS

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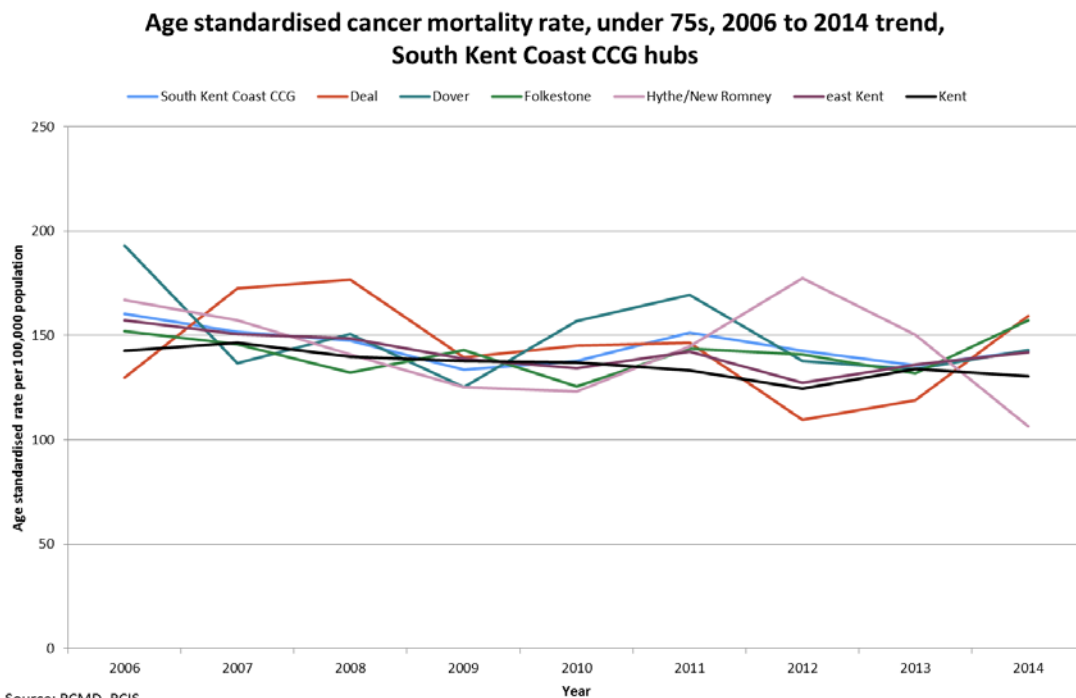
Circulatory Disease

There were no significant differences in mortality rates from circulatory disease observed between practices in Deal hub. Manor Road Surgery had the lowest rate of 71.9 deaths per 100,000 population whilst Balmoral Surgery has the highest rate at 99.6. The Deal rate was 86.5, very similar to the South Kent Coast rate (86.3).

Deal does not have a significantly different rate to Kent (77.9); however, both east Kent (82.8) and South Kent Coast CCG (86.3) have significantly higher rates than Kent.
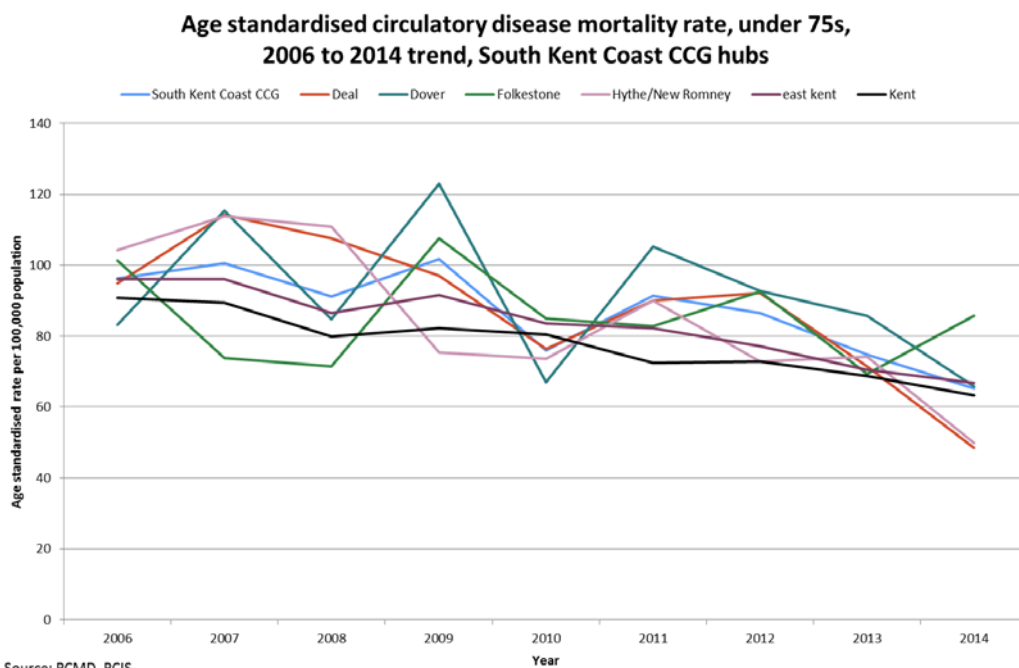
Figure 37

Circulatory disease mortality rate, under 75 population, 2006 to 2014 pooled data
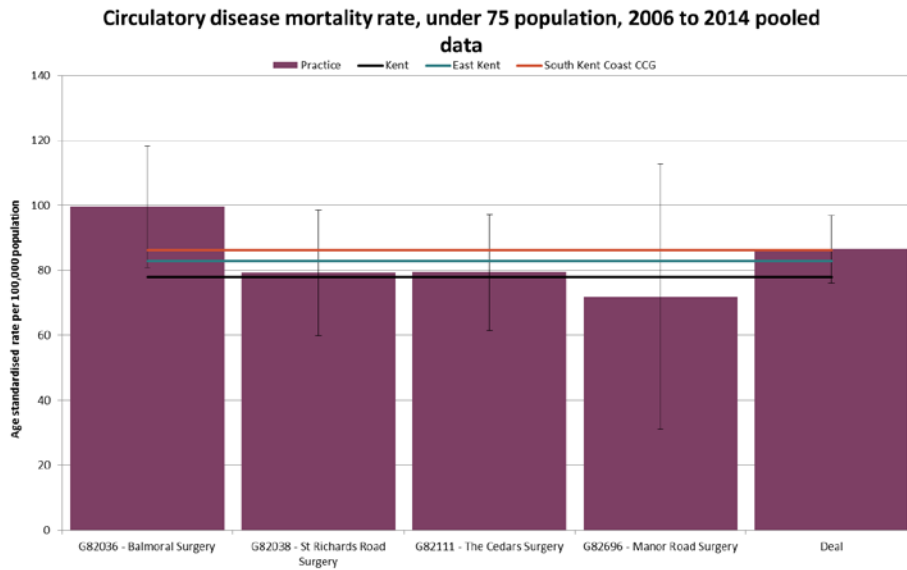
Source: PCMD, PCIS

The rate of decrease has been faster in the Deal hub (5.9 deaths per 100,000) than in Kent (3.3); however, this difference is not significant. The rate has fluctuated substantially within the hub, peaking in 2007 at 114.2. The lowest recorded rate occurred in 2014 at 48.5; lower than the Kent (63.3), east Kent (66.8) and South Kent Coast CCG (65.3) rates.

Figure 38

Age standardised circulatory disease mortality rate, under 75s, 2006 to 2014 trend, South Kent Coast CCG hubs

Source: PCMD, PCIS

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Respiratory Disease

There is little variation in mortality rate for respiratory disease between the Deal practices. The Cedars Surgery has the lowest rate (30.4) and St Richards Road Surgery has the highest rate (36.4), whilst the Deal rate is 32.3 deaths per 100,000 population.

There are no significant differences observed between Deal, South Kent Coast CCG (34.8), east Kent (32.4) or Kent (30.0).

Figure 39

Respiratory disease mortality rate, under 75 population, 2006 to 2014 pooled data
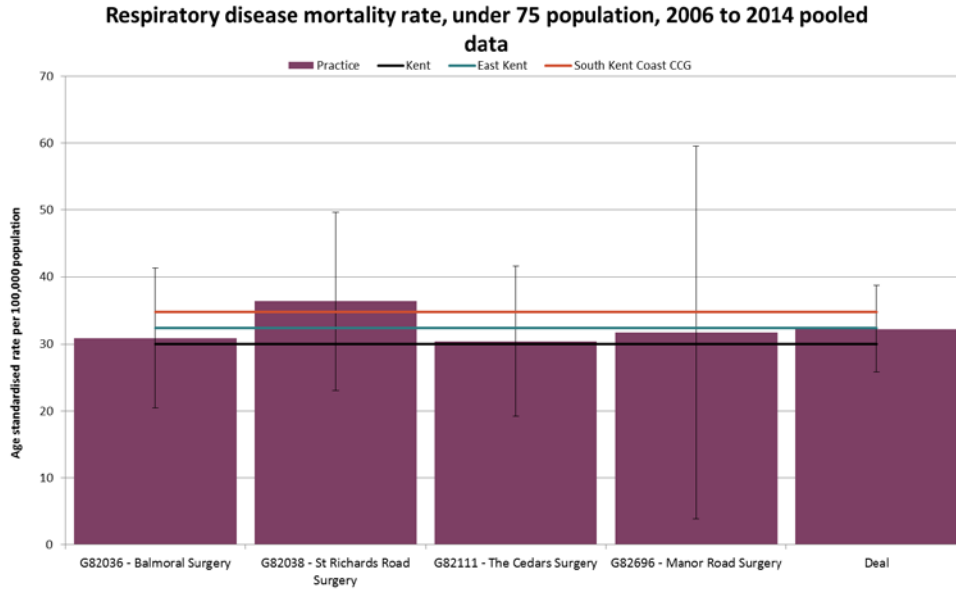
Source: PCMD, PCIS

There has been little change in under 75 mortality rates for respiratory disease across Kent, the rate of change has been 0.3 deaths per 100,000 population. Very large fluctuations are observed in mortality rate due to the small numbers of deaths involved. The rate of decrease in the Deal hub is 1.3 with the lowest rate occurring in 2009 (21.8), with a peak of 46.3 in 2006.
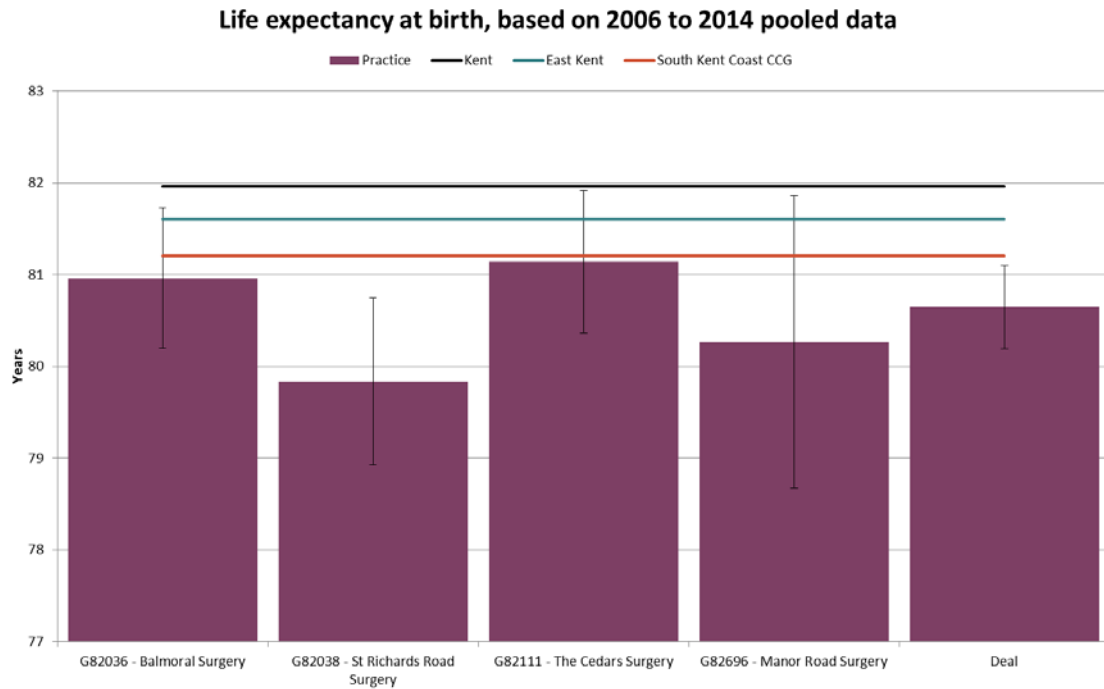
Figure 40

Age standardised respiratory disease mortality rate, under 75s, 2006 to 2014 trend, South Kent Coast CCG hubs

Source: PCMD, PCIS

44
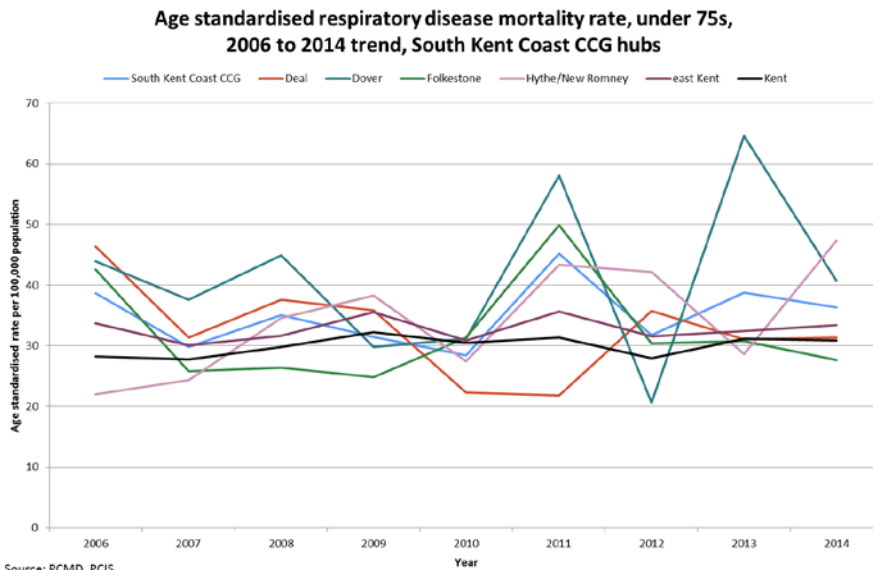
Life Expectancy

Life expectancy is defined by the South East Public Health Observatory as the 'average number of years a baby born in a particular area or population can be expected to live if it experiences the current age-specific mortality rates of that particular area or population throughout its life'. The life expectancy in the Deal hub ranges between 79.8 years in G82038 - St Richards Road Surgery and 81.1 years in G82111 - The Cedars Surgery. None of the practices have significantly different life expectancies in comparison to Deal (80.6 years).

Based on 2006 to 2014 data, the life expectancy in Deal (80.6 years) is slightly lower than the South Kent Coast CCG life expectancy of 81.2 years, but significantly lower than both east Kent (81.6 years) and Kent (82.0 years).
Figure 41

Life expectancy at birth, based on 2006 to 2014 pooled data

Source: PCMD, PCIS

Appendix

Indicator	Definition
Asthma 02	The percentage of patients aged 8 or over with asthma (diagnosed on or after 1 April 2006), on the register, with measures of variability or reversibility recorded between 3 months before or any time after diagnosis
Asthma 03	The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions, NICE 2011 menu ID: NM23
Atrial fibrillation 03	In those patients with atrial fibrillation in whom there is a record of a CHADS2 score of 1 (latest in the preceding 12 months), the percentage of patients who are currently treated with anti-coagulation drug therapy or anti-platelet therapy, NICE 2011 menu ID: NM45
Atrial fibrillation 04	In those patients with atrial fibrillation whose latest record of a CHADS2 score is greater than 1, the percentage of patients who are currently treated with anti-coagulation therapy, NICE 2011 menu ID: NM46
Cancer 02	The percentage of patients with cancer, diagnosed within the preceding 15 months, who have a patient review recorded as occurring within 3 months of the contractor receiving confirmation of the diagnosis, NICE 2012 menu ID: NM62
Chronic Kidney Disease 02	The percentage of patients on the CKD register in whom the last blood pressure reading (measured in the preceding 12 months) is 140/85 mmHg or less
Chronic Kidney Disease 03	The percentage of patients on the CKD register with hypertension and proteinuria who are currently treated with an ACE-I or ARB
COPD 03	The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 12 months
COPD 04	The percentage of patients with COPD with a record of FEV1 in the preceding 12 months
Dementia 02	The percentage of patients diagnosed with dementia whose care has been reviewed in a face-to-face review in the preceding 12 months
Depression 02	The percentage of patients aged 18 or over with a new diagnosis of depression in the preceding 1 April to 31 March, who have been reviewed not earlier than 10 days after and not later than 35 days after the date of diagnosis, NICE 2012 menu ID: NM50
Diabetes 03	The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less, NICE 2010 menu ID: NM02
Diabetes 07	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 59 mmol/mol or less in the preceding 12 months, NICE 2010 menu ID: NM14
Diabetes 09	The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 75 mmol/mol or less in the preceding 12 months
Diabetes 14	The percentage of patients newly diagnosed with diabetes, on the register, in the preceding 1 April to 31 March who have a record of being referred to a structured education programme within 9 months after entry on to the diabetes register, NICE 2011 menu ID: NM27
Epilepsy 02	The percentage of patients aged 18 or over on drug treatment for epilepsy who have been seizure free for the last 12 months recorded in the preceding 12 months
Heart Failure 03	In those patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction, the percentage of patients who are currently treated with an ACE-I or ARB

Indicator	Definition
Hypertension 02	The percentage of patients with hypertension in whom the last blood pressure reading (measured in the preceding 9 months) is 150/90 mmHg or less
Mental Health 02	The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive care plan documented in the record, in the preceding 12 months, agreed between individuals, their family and/or carers as appropriate
Osteoporosis 03	The percentage of patients aged 75 or over with a fragility fracture on or after 1 April 2012, who are currently treated with an appropriate bone-sparing agent, NICE 2011 menu ID: NM31
Peripheral Artery Disease 02	The percentage of patients with peripheral arterial disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less, NICE 2011 menu ID: NM34
Rheumatoid Arthritis 02	The percentage of patients with rheumatoid arthritis, on the register, who have had a face-to-face review in the preceding 12 months, NICE 2012 menu ID: NM58
Coronary Heart Disease 02	The percentage of patients with coronary heart disease in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less
Coronary Heart Disease 06	The percentage of patients with a history of myocardial infarction (on or after 1 April 2011) currently treated with an ACE-I (or ARB if ACE-I intolerant), aspirin or an alternative anti-platelet therapy, beta-blocker and statin, NICE 2010 menu ID: NM07
Stroke & TIA 03	The percentage of patients with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less
Blood Pressure 01	The percentage of patients aged 40 or over who have a record of blood pressure in the preceding 5 years, NICE 2012 menu ID: NM61
Smoking 02	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 12 months, NICE 2011 menu ID: NM38
Smoking 05	The percentage of patients with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses who are recorded as current smokers who have a record of an offer of support and treatment within the preceding 12 months, NICE 2011 menu ID: NM39
Cervical Screening 02	The percentage of women aged 25 or over and who have not attained the age of 65 whose notes record that a cervical screening test has been performed in the preceding 5 years