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Living Well: Tunbridge Wells

**PREMATURE DEATHS (under 75 years)**

- **Cause of death**
  - Cancer: 41%
  - Circulatory: 25%
  - Respiratory: 10%
  - Other: 23%
  - Other: 8%

**LIFE EXPECTANCY at birth**

- Male: 81.7 years
- Female: 84.4 years

**LONG TERM CONDITIONS**

- Diabetes: 6.0% (Ages 17+)
- Hypertension: 13.6%
- Asthma: 5.6%
- COPD: 1.7%

**MENTAL HEALTH**

- Depression: 10.5%
  - Of adults recorded by their GP as having depression

**Inequalities by deprivation**

- Premature mortality rates (ASR)
  - Most deprived: 325.8 per 100,000
  - Least deprived: 204.4 per 100,000

- **Emergency hospital admissions for serious mental health conditions**
  - Tunbridge Wells: 84.4 in 2017/18
  - Kent: 81.7
  - St John’s: 77.7

Source: NCMP, 2014/15 - 2015/16 combined
Source: QOF, 2017/18; HES, 2017/18
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Premature mortality from cardiovascular disease: by electoral ward

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

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

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

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

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

No significant change compared with a decreasing trend for Kent

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

Least deprived trend - stable
Most deprived trend - decreasing

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

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

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

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

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

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

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

No significant change compared with a decreasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (ZC), Nov-18
Emergency hospital admissions for cardiovascular disease: by deprivation
Age standardised rate per 100,000 resident population, ICD-10: I00-I99 in primary, 2010/11 - 2012/13 to 2015/16 - 2017/18

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

No significant change compared with a decreasing trend for Kent

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

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

Least deprived trend - decreasing with a similar pace of change to England
Most deprived trend - stable compared with a decreasing trend for England
Hospital admissions for Coronary Heart Disease (CHD): by electoral ward

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

Ward
Tunbridge Wells
Kent

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

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

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

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

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

Age standardised rate per 100,000 resident population, ICD-10: I20-I25 (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

No significant change compared with a decreasing trend for Kent

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

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

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

Least deprived trend - decreasing with a similar pace of change to England
Most deprived trend - decreasing with a similar pace of change to England
Recorded prevalence of heart failure: by electoral ward

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

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

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

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

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

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

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

Increasing with a similar pace of change to Kent

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

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

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

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

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: by electoral ward
Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2013/14-2017/18

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

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

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

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

Increasing compared with a stable trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for acute myocardial infarction: by deprivation
Age standardised rate per 100,000 resident population, ICD 10: I21 (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

Least deprived trend - 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 (RK), Nov-18
Hospital episodes for revascularisation procedures: by electoral ward

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

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

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

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

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

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

Age standardised rate per 100,000 resident population, OPCS4: K40-K46, K49-K50, K75 (primary procedure), 2011/12 to 2017/18

No significant change compared with a decreasing trend for Kent

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

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

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

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

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

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

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

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

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

Decreasing compared with an increasing trend for Kent

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

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

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

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

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

Age standardised rate per 100,000 resident population

- Greater than 173.1
- 157.6 to 173.1
- 141.5 to 157.6
- 121.0 to 141.5
- Less than 121.0

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

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

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

Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2011/12 to 2017/18

No significant change compared with a stable trend for Kent

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

Age standardised rate per 100,000 resident population, ICD-10: I61-I64 (primary diagnosis), 2011/12 - 2015/16 to 2013/14 - 2017/18

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

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

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

Source: QOF, prepared by KPHO (MP), Nov-18
Recorded diabetes prevalence: by electoral ward
Percentage of patients aged 17+ recorded on GP QOF registers as having diabetes mellitus, modelled ward-level estimates, 2015/16-2017/18

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

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

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

Increasing with a similar pace of change to Kent

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

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

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

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

Wards with no data have been subject to suppression rules

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

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

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

Wards in grey have been subject to suppression rules

Age standardised rate per 100,000 resident population

- Greater than 108.4
- 82.2 to 108.4
- 63.8 to 82.2
- 47.3 to 63.8
- Less than 47.3
Emergency hospital admissions for diabetes: by district

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

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (RK), Nov-18
Emergency hospital admissions for diabetes: trend
Age standardised rate per 100,000 resident population, ICD 10: E10-14 (primary diagnosis), 2010/11 - 2012/13 to 2015/16 - 2017/18

No significant change compared with an increasing trend for Kent

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

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

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

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

Percentage

Greater than 5.7
4.9 to 5.7
4.4 to 4.9
4.1 to 4.4
Less than 4.1

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

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

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

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

No significant change compared with a decreasing trend for Kent

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

Least deprived trend - decreasing
Most deprived trend - decreasing

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

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

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

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

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

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

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

No significant change compared with an increasing trend for Kent

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Source: PCMD, prepared by KPHO (RK), Nov-18
Living Well in Tunbridge Wells

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

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

No significant change compared with a stable trend for Kent
Premature mortality from cancer: by deprivation

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

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

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

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

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

No significant change compared with a stable trend for Kent

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

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

- Kent least deprived
- Kent most deprived

Least deprived trend - decreasing
Most deprived trend - increasing

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

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

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

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

No significant change compared with a decreasing trend for Kent

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

- Kent least deprived
- Kent most deprived

Least deprived trend - decreasing
Most deprived trend - stable

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

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

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

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

Crude rate per 10,000 population

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

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

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

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

No significant change compared with a stable trend for Kent

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

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

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

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

Cancer registrations - under 75's: by electoral ward

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

Crude rate per 10,000 population

Greater than 51.9
44.4 to 51.9
38.8 to 44.4
33.5 to 38.8
Less than 33.5

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

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

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

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

No significant change compared with a stable trend for Kent

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

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

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

Living Well in Tunbridge Wells

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

No significant change compared with a stable trend for Kent

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

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

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

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

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

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

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

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

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

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

Increasing with a similar pace of change to Kent

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

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

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

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

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

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

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

Screening rate (%)

- Less than 71.9
- 71.9 to 73.6
- 73.6 to 74.9
- 74.9 to 76.3
- Greater than than 76.3

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

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

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

No significant change compared with a stable trend for Kent

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

Least deprived trend - stable with a similar pace of change to England
Most deprived trend - stable with a similar pace of change to England
Cervical cancer screening rate: by electoral ward

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

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

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

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

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

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

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

Tunbridge Wells
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Source: Open Exeter, prepared by KPHO (RK), Apr-18

Decreasing with a similar pace of change to Kent
Cervical cancer screening rate: by deprivation

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

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

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

- Premature mortality from respiratory disease
- Hospital admissions for respiratory disease
- COPD prevalence
- Undiagnosed COPD (estimated)
- Hospital admissions for COPD
- Asthma prevalence
Premature mortality from respiratory disease: by district
Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: J00-J99), 2015-2017

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

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

![Graph showing trend of premature mortality from respiratory disease in Tunbridge Wells and Kent. The graph indicates no significant change compared with a stable trend for Kent.](image)

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

Age standardised rate per 100,000 people aged under 75 years, classified by underlying cause of death (ICD-10: J00-J99), 2010 - 2014 to 2013 - 2017

- Kent least deprived
- Kent most deprived

Least deprived trend - stable
Most deprived trend - increasing

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

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

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

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

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

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

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

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

No significant change compared with an increasing trend for Kent

Source: Hospital Episode Statistics (HES), NHS Digital, ONS, prepared by KPHO (MP), Nov-18
Emergency hospital admissions for all respiratory disease for persons aged 20 to 64 years: by deprivation
Age standardised rate per 100,000 people aged 20-64, ICD-10: J00-J99 in primary, 2011/12 - 2013/14 to 2015/16 - 2017/18

- 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 (MP), Nov-18
Recorded COPD prevalence: by electoral ward

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

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

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

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

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

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

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

Increasing with a similar pace of change to Kent

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

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

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

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

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

Source: Imperial College London/QOF, prepared by KPHO (RK), Apr-18
Undiagnosed COPD (estimated): by electoral ward
Modelled estimates of the prevalence of undiagnosed COPD, modelled ward-level estimates, 2014/15-2016/17

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

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

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

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

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

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

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

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

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

No significant change compared with a stable trend for Kent
Emergency hospital admissions for COPD: by deprivation
Age standardised rate per 100,000 adults aged 35+, ICD 10: J40-44 (primary diagnosis), 2010/11 - 2014/15 to 2013/14 - 2017/18

- 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 (ZC), Nov-18
Recorded asthma prevalence: by electoral ward
Percentage of patients recorded on GP QOF registers as having Asthma, modelled ward-level estimates, 2015/16-2017/18

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

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

Greater than 6.0
5.7 to 6.0
5.4 to 5.7
5.2 to 5.4
Less than 5.2
Recorded asthma prevalence: by district

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

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

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

Decreasing compared with a stable trend for Kent

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

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

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

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Recorded prevalence of serious mental health conditions: by electoral ward

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

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

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

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

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

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

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

No significant change compared with an increasing trend for Kent

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

No significant change compared with a stable trend for Kent

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

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

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

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

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

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

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

Increasing compared with a stable trend for Kent
Suicide rate: by deprivation

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

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

Least deprived trend - stable
Most deprived trend - stable
Emergency hospital admissions for self-harm: by electoral ward

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

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

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

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

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

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

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

Tunbridge Wells
Kent

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

No significant change compared with a stable trend for Kent
Emergency hospital admissions for self-harm: by deprivation
Age standardised rate per 100,000 resident population, ICD 10: X60-X84 (main recorded cause), 2010/11-2012/13 to 2015/16-2017/18

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

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