

Rother District

Based on the LA view of the

JSNAA Scorecards 2017

East Sussex Public Health



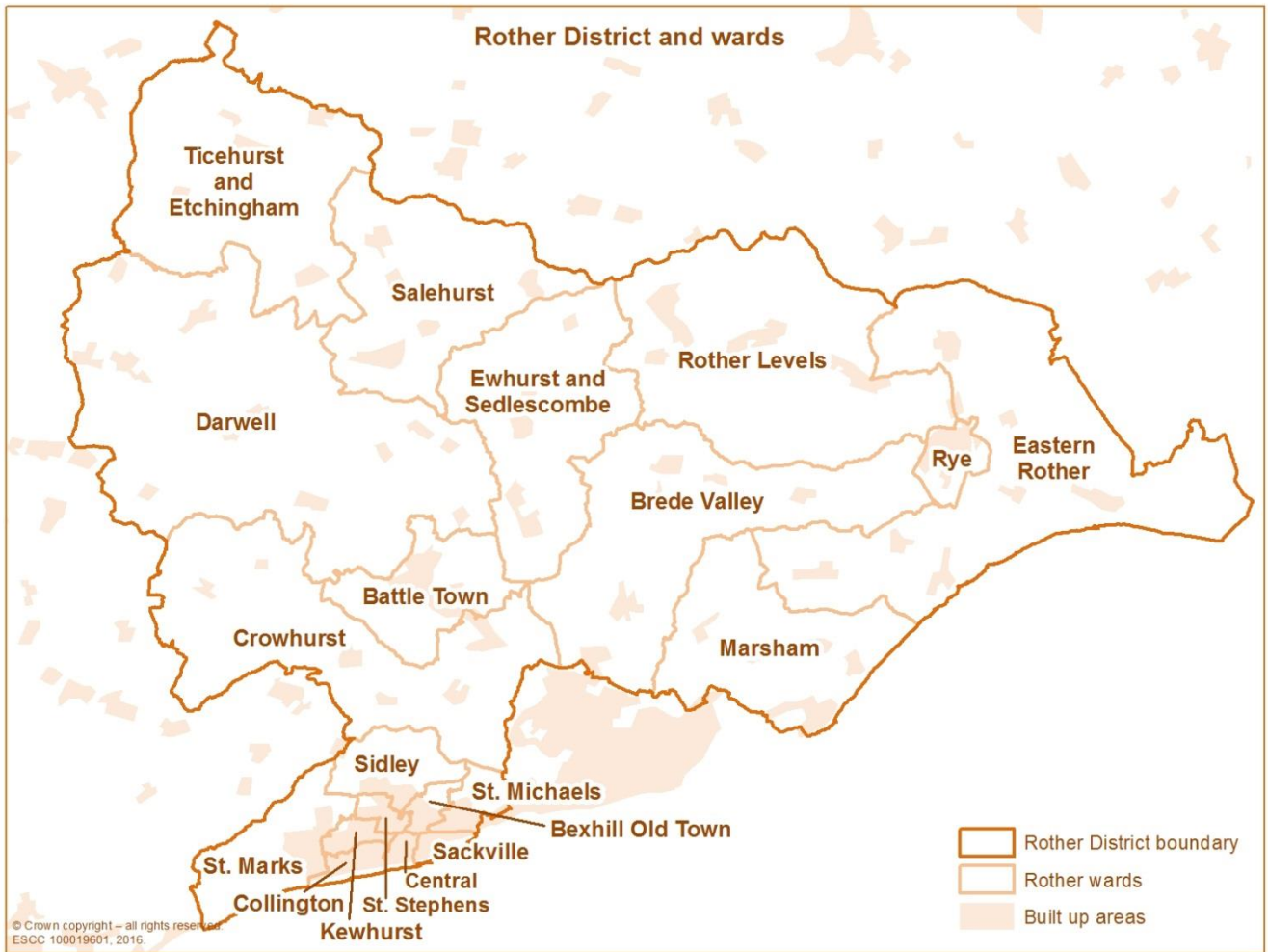


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Key statistics

Key Statistics for Rother			
Ref	Indicator	Number per year	Value
1.01	Population (count), Jun 2014	92,130	
1.02	Population aged 0-19 yrs (%), Jun 2014	18,013	20
1.03	Population aged 20-64 yrs (%), Jun 2014	45,716	50
1.04	Population aged 65+ yrs (%), Jun 2014	28,401	31
1.18	Live births per 1,000 women aged 15-44 yrs, 2014-15	691	56
2.02	Income Deprivation (as a percentage), from ID 2015	11,624	13
2.04	Children in low-income families (%), Aug 2014	2,530	19
3.06	Excess weight in 10-11 year olds (%), 2012/13-2014/15	213	33
3.09	GP reported prevalence of smoking at age 15+ (%), 2015/16 (M)	13,368	16
4.04	Life expectancy at birth (yrs), 2013-15		81.8
4.05	Life expectancy at age 75 (yrs), 2013-15		12.8
4.06	All-cause mortality (SMR), 2013-15	1,381	102
4.08	Mortality from causes considered preventable (SMR), 2014-15	198	106
4.15	GP reported prevalence of dementia (%), 2015/16 (M)	1,169	1.2
4.23	GP reported prevalence of hypertension (%), 2015/16 (M)	18,979	19.9
4.26	GP reported prevalence of CHD (%), 2015/16 (M)	4,377	4.6
4.29	GP reported prevalence of stroke or TIA (%), 2015/16 (M)	2,661	2.8
4.32	GP reported prevalence of atrial fibrillation (%), 2015/16 (M)	3,130	3.3
4.34	GP reported prevalence of heart failure (%), 2015/16 (M)	1,052	1.1
4.49	GP reported prevalence of asthma (%), 2015/16 (M)	6,036	6.3
4.52	GP reported prevalence of COPD (%), 2015/16 (M)	2,224	2.3
4.57	GP reported prevalence of diabetes aged 17+ (%), 2015/16 (M)	5,669	7.1
4.60	GP reported prevalence of epilepsy aged 18+ (%), 2015/16 (M)	649	0.8
4.62	GP reported prevalence of CKD aged 18+ (%), 2015/16 (M)	3,753	4.8
4.65	GP reported prevalence of learning disabilities aged 18+ (%), 2015/16 (M)	502	0.5
4.72	First outpatient attendances (SAR), 2015/16	37,611	98
4.74	All MIU and A&E attendances (SAR), 2015/16	22,462	83
4.78	All elective admissions (SAR), 2014/15 to 2015/16	31,238	95
4.80	All emergency admissions (SAR), 2014/15 to 2015/16	19,806	98
6.01	People providing one hour or more of unpaid care per week (%), 2011	11,261	12.4

Significantly worse than East Sussex	Significantly better than East Sussex
Significantly higher than East Sussex	Significantly lower than East Sussex
Not significantly different to East Sussex	Significance not tested

Introduction

This narrative describes Rother District in the East Sussex context. It is based on 2017 JSNAA scorecard data, presented in the form of indicator tables (Appendix 1) in which East Sussex districts and boroughs are RAG-rated against East Sussex. Further tables and charts summarise key statistics and specific topics (such as hospital admission and attendance rates) for this district.

The RAG-rated tables highlight statistically significant differences between Rother District and East Sussex. Individual JSNAA scorecards are referenced alongside the indicator titles; if data has been modelled from NHS to LA geographies indicator titles are flagged with (M).

Here 'significance' refers to statistical significance at the 95% confidence level.

In the tables (Appendix 1) statistically significant differences between this district and East Sussex are flagged in red/green and dark blue/light blue and the indicator values are given. But note that, for values based on large numbers, even small, possibly unimportant, differences can be statistically significant. Conversely, values based on small numbers can be substantially, but not (in statistical terms) significantly different to East Sussex.

Some rates are age and/or sex standardised. For those that are not, such as the GP-reported prevalence of diabetes and other chronic diseases, it is important to take into account the age profile of the population, as they are likely to be higher in areas with older age profiles.

For more in-depth information on how wards, as well as districts/boroughs, compare to East Sussex, this report should be read alongside the LA view JSNAA indicator scorecards.

LA and NHS view JSNAA scorecards and area summaries can be downloaded from www.eastsussexjsna.org.uk/scorecards.

The following products can also be downloaded from the East Sussex JSNAA website:

GP Practice Profiles and Locality/Community of Practice Profiles

Spine charts are used to compare the GP practice or locality/community of practice to East Sussex for all available JSNAA indicators.

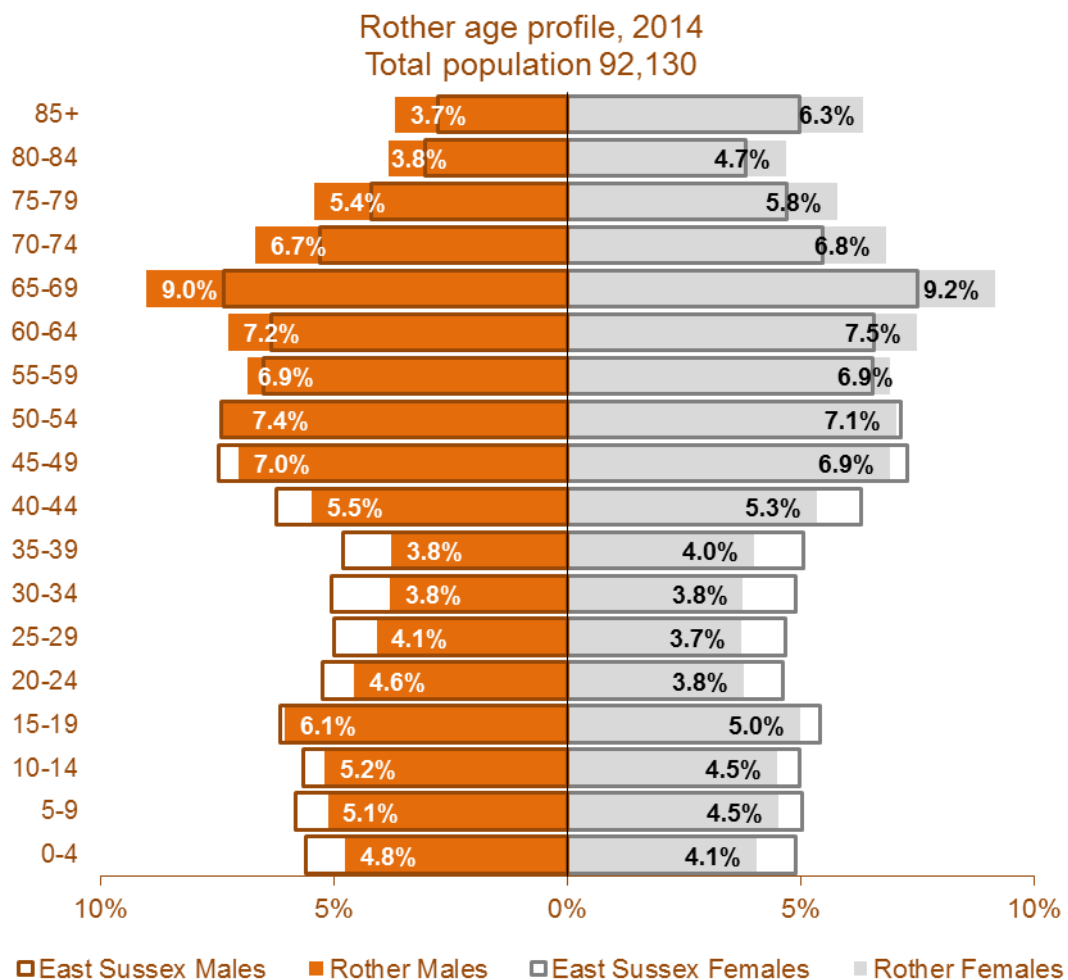
See <http://www.eastsussexjsna.org.uk/PracticeProfiles2017>

Local Needs and Assets Profiles

East Sussex, its districts/boroughs and CCGs are compared to England. RAG-rated tables similar to those in Appendix 1 (but with England as the benchmark) are included.

See <http://www.eastsussexjsna.org.uk/overviews/localneedsprofile.aspx>

Population



Rother has one of the smallest populations of all East Sussex districts/boroughs. It has the smallest percentage of under 65 year olds and the highest percentage of people aged 65 year olds and over, of all East Sussex districts/boroughs.

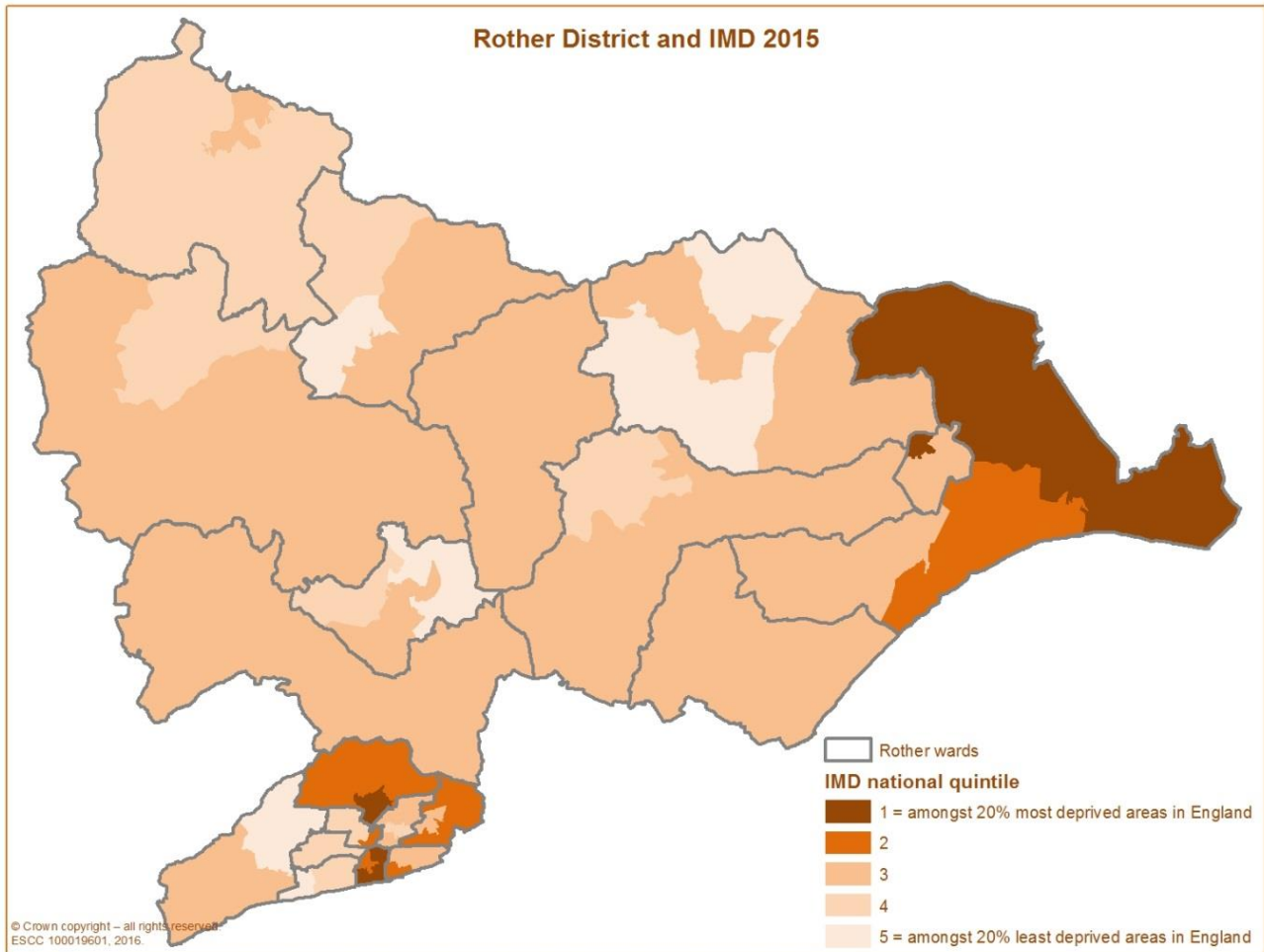
Table 1 shows the estimated population changes between 2015 and 2021 for specific age groups as well as all ages. Using projections modelled from East Sussex districts and boroughs, the table shows that over the next 6 years some age groups are projected to increase in size whilst others will decrease in size. The net effect is that the population of Rother is estimated to increase, with the largest estimated increase in those aged 85 years and over.

Table 1: Population projections for all persons (number and percentage change) showing the increase (positive) or decrease (negative) from 2015 to 2021 (modelled)

Population projections from 2015 to 2021				
Indicator	East Sussex		Rother	
	Number	%	Number	%
0-19 years	900	0.8%	-50	-0.1%
20-64 years	-1,950	-0.7%	-450	-0.9%
65+ years	14,950	11.0%	2,800	9.7%
85+ years	3,450	16.0%	550	11.2%
All Ages	14,000	2.6%	2,400	2.6%

The dependency ratio (of non-working age people compared to working age people) is the highest of all East Sussex districts/boroughs. This district is significantly higher than East Sussex for lone older person households and significantly lower for lone parent households. It is significantly lower than East Sussex for non-white British people and children who speak English as an additional language. Birth rates in the district are similar to East Sussex.

Wider determinants



Rother has significantly lower income deprivation than East Sussex, including income deprivation affecting older people. It is similar for employment deprivation and working age people claiming ESA, children in low income families and children receiving the pupil premium, and for fuel poverty. It is significantly lower for working age people claiming JSA and UC.

Compared to East Sussex a significantly lower percentage of households have no cars or vans and a significantly higher percentage are able to access a GP practice in 15 minutes by public transport or walking.

Rother has similar levels of educational achievement to East Sussex for pupils at age 5, 11 and 16, but a significantly higher percentage of working age people with no or low qualifications.

The district has significantly higher levels of owner-occupation and significantly lower levels of privately rented households than East Sussex and a lower percentage of households are overcrowded. A significantly higher percentage of people live in care homes, the highest of all the East Sussex districts/boroughs.

Rother is significantly lower than East Sussex for recorded crimes, recorded incidents of anti-social behaviour and A&E attendances due to assaults.

Overall health status

This district has the highest levels of self-reported LLTI or disability of all the districts/boroughs. It has similar life expectancy at birth and at age 75, and premature and preventable mortality, to East Sussex.

Healthy lifestyles

Pregnancy and infancy

This district has a significantly lower percentage of mothers initiating breastfeeding than in East Sussex, but a similar rate of breastfeeding at 6-8 weeks.

Physical activity and excess weight

In Rother similar levels of adults achieve 150 minutes physical activity per week to East Sussex, but it has the highest percentage of overweight or obese adults of all districts/boroughs. Levels of overweight or obese reception year children are similar to East Sussex but levels for year 6 children are higher.

Smoking

Values for smoking indicators are similar to East Sussex.

Alcohol and drug misuse

Rother district has low rates of young people and adults in drug/alcohol treatment. Adult rates are significantly lower than for East Sussex. Alcohol-related hospital admissions and alcohol-related mortality are similar to East Sussex.

Sexual health

In Rother District the under 18s conception rate and chlamydia detection rates are not significantly different to the East Sussex rates. This district has the lowest gonorrhoea detection rate.

Accidents and injuries

A&E attendances for accidents and injuries in 0-4 year olds and emergency admissions for accidents and injuries in children and young people and falls injuries in older people are all similar to the East Sussex rates. Rother has a significantly higher rate of people killed or seriously injured on the roads than East Sussex and the highest rate of all the districts/boroughs.

Health protection

Rother District is significantly better than East Sussex for eligible people receiving an NHS health check and the uptake of cervical and bowel cancer screening. Uptake of child immunisations is similar to East Sussex and uptake of immunisations by persons aged 65 years or over is significantly better.

Disease and poor health

Mental health and wellbeing

Rother has a significantly lower incidence of depression than East Sussex. Emergency admissions due to mental health, the CAMHS caseload and suicide rate are all similar to East Sussex. The prevalence of dementia (not age-standardised) is significantly higher but emergency admissions for persons with dementia are significantly lower than for East Sussex.

Circulatory

Across different circulatory conditions the prevalences (not age-standardised) are significantly higher than for East Sussex. Emergency admissions and mortality for circulatory diseases are similar to East Sussex.

Cancer

Rother has a similar incidence and mortality to East Sussex for lung, colorectal, breast and prostate cancers. Premature mortality from cancer is also similar.

Respiratory

Asthma prevalence (not age-standardised) and emergency admissions due to asthma are similar to East Sussex. The prevalence of COPD (not age-standardised) is significantly higher but COPD emergency admissions and mortality are similar. Premature mortality from respiratory diseases is similar to East Sussex.

Diabetes

Rother has a significantly higher prevalence (not age-standardised) of diabetes compared to East Sussex, but similar emergency admissions for diabetes.

Other chronic conditions

Rother has a significantly lower prevalence of CKD than East Sussex.

Avoidable admissions

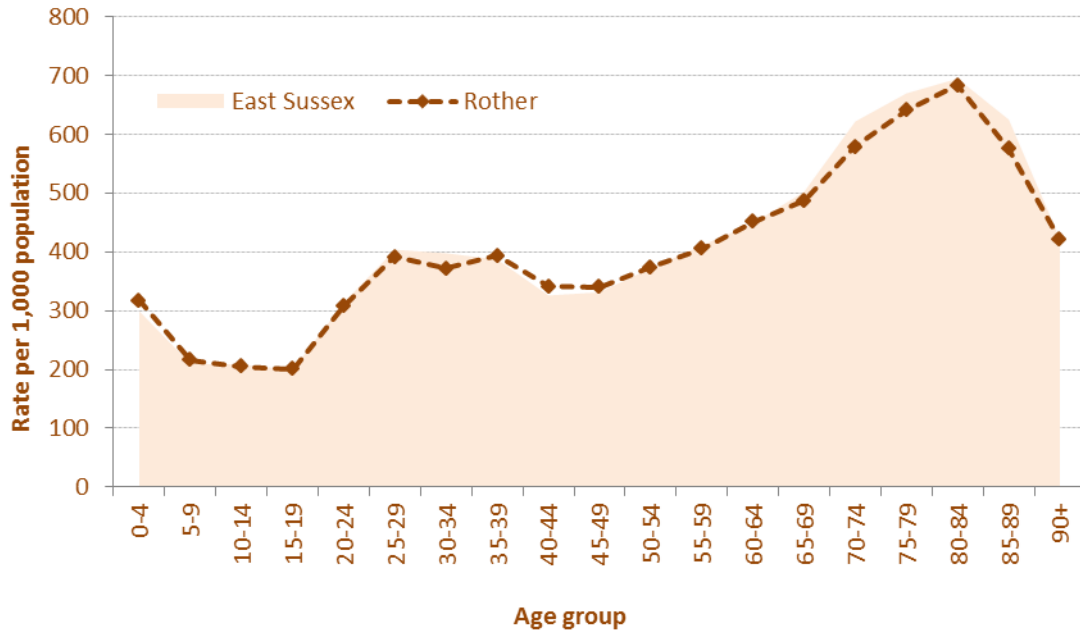
Rother has significantly lower emergency admissions than East Sussex for both acute and other/vaccine preventable ACS conditions.

Hospital admissions and attendances

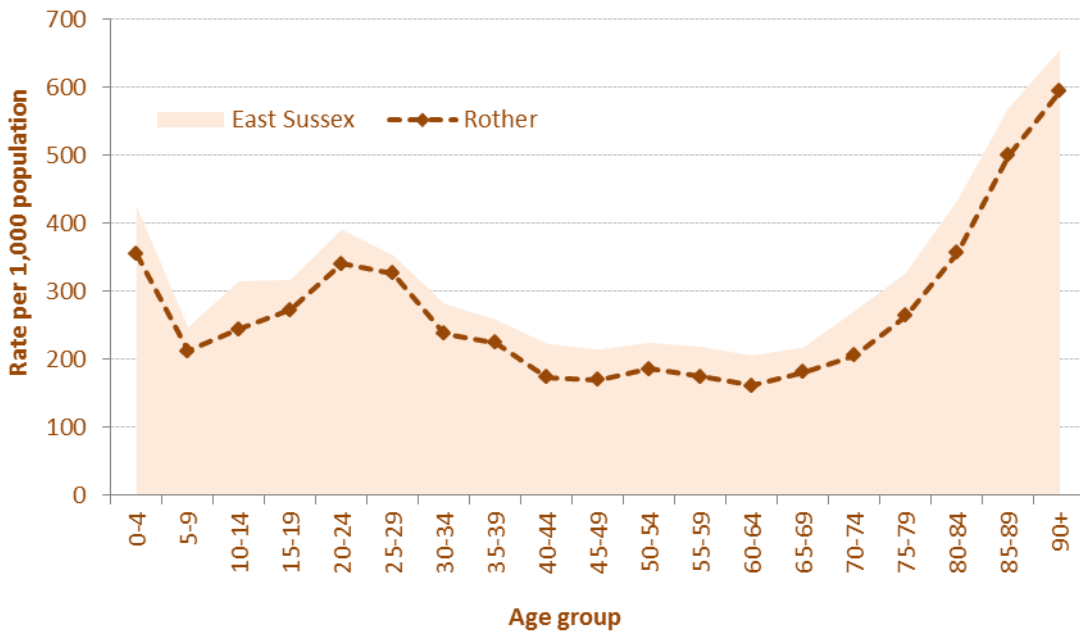
Rother is significantly lower than East Sussex for: outpatient attendances, MIU/A&E attendances (all ages, 0-4s, 15-29s and 70+), elective admissions (all ages & 65+) and emergency admissions for 70-84s.

The following graphs present the age-specific overall attendance and admission rates for the district compared to East Sussex.

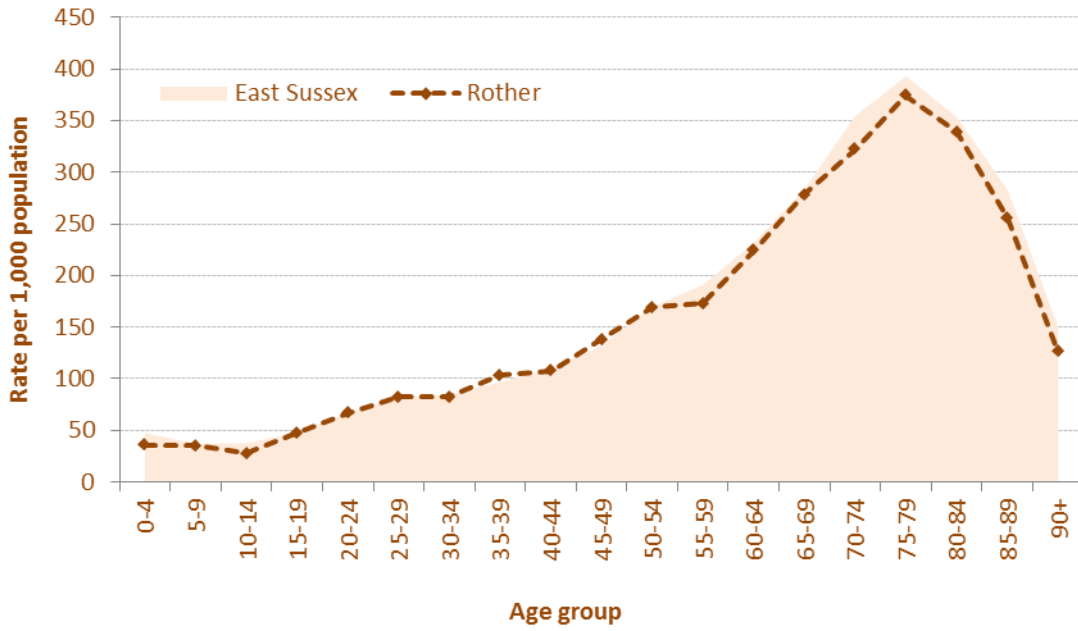
Age-specific outpatient attendance rates



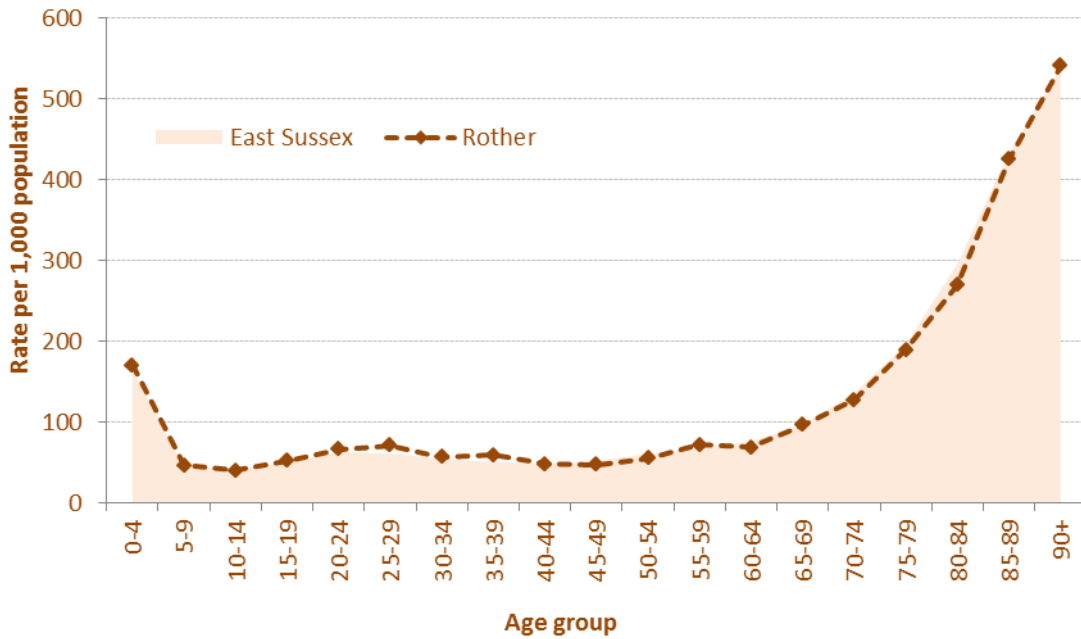
Age-specific A&E/MIU attendance rates



Age-specific elective admission rates



Age-specific emergency admission rates



Social care

Children's services

Rother has significantly lower referrals to children's social care and significantly lower looked after children than East Sussex.

Carers

Compared to East Sussex Rother is significantly higher for unpaid carers, working age people claiming Carers Allowance, carers known to adult social care (highest of all localities) and carers receiving self-directed support.

Adult social care

Compared to East Sussex Rother is significantly higher for requests for ASC support and adults in council supported residential or nursing care, and slightly higher for adults receiving community equipment and ASC funded lifeline or telecare. It is significantly lower for older people receiving long term support and slightly lower for older people discharged from hospital to intermediate care.

NHS dental services

Compared to East Sussex, a slightly lower percentages of children, slightly higher percentage of working age people and significantly higher percentage of older people, access East Sussex NHS general dental services.

GP patient survey

The percentage of patients responding to the GP Patient Survey, reporting a good experience of their surgery, of making appointments and satisfaction with opening hours are significantly better than for East Sussex.

Appendix 1: Scorecard Summary Tables

Significantly worse than East Sussex	Significantly better than East Sussex	Significantly higher than East Sussex	Significantly lower than East Sussex	Not significantly different to East Sussex	Significance not tested
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Ref	Indicator	Population					
		East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
1.11	Dependency ratio, Jun 2014	0.72	0.70	0.60	0.72	0.85	0.73
1.12	Lone older person (aged 65+) households (%), 2011	16	17	13	16	20	15
1.13	Lone parent households (%), 2011	6	7	8	6	5	5
1.14	Non-White British population (%), 2011	8	13	11	7	6	6
1.15	Non-White British pupils (%), 2016	12	19	15	11	9	9
1.16	Pupils with English as an additional language (per 1,000), 2016	56	117	69	37	35	27
1.18	Live births per 1,000 women aged 15-44 yrs, 2014-15	59	61	65	56	56	56
1.19	Live births per 1,000 women aged 15-19 yrs, 2014-15	13	19	22	8	11	8
1.20	Live births per 1,000 women aged 35-44 yrs, 2014-15	34	35	32	36	34	34

Wider determinants - Economy, income and transport

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
2.02	Income Deprivation (as a percentage), from ID 2015	13	15	22	11	13	8
2.04	Children in low-income families (%), Aug 2014	19	21	29	16	19	11
2.05	Income Deprivation Affecting Older People Index (IDAOPI) (as a percentage), from ID 2015	13	15	22	11	12	10
2.06	Households in fuel poverty (%), 2014	9	9	12	8	9	8
2.07	Pupils receiving the pupil premium (%), Jan 2016	21	23	31	18	21	13
2.08	Households with dependent children and no adults in employment (%), 2011	13	14	21	11	13	8
2.09	Employment Deprivation (as a percentage), from ID 2015	12	13	19	10	12	7
2.10	Working age people claiming JSA and Universal Credit (%), Aug 2016	1.3	1.8	2.3	1.1	1.2	0.6
2.11	Working age people claiming ESA (%), Aug 2016	6.1	7.3	10.0	5.0	6.0	3.7
2.12	Households with no cars or vans (%), 2011	22	29	33	20	19	12
2.13	Households able to access a GP practice in 15 min by public transport/walking (%), 2014	78	82	90	72	79	69

Wider determinants - Education

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
2.16	Pupils (age 5) reaching a good level of development in the EYFS (%), Jun 2016	75	74	76	75	74	77
2.17	Pupils (at age 11) achieving the expected standard at Key Stage 2, Jun 2016	50	51	50	52	46	50
2.18	Average GCSE Attainment 8 score for pupils (at age 16) at Key Stage 4, Jun 2016	49	49	46	50	48	51
2.19	Working age population with no or low qualifications (%), 2011	30	30	36	29	31	27
2.20	Pupils with special educational needs (SEN) on SEN Support (per 100,000), Jan 2016	90	86	104	99	93	75
2.21	Pupils with a statement of SEN or an EHCP (per 100,000), Jan 2016	36	34	41	35	38	32
2.22	Young people aged 16-18 yrs NEET (monthly rate per 1,000), Nov 2015 to Jan 2016	31	42	44	29	26	22

Wider determinants - Housing

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
2.25	Households that are overcrowded (%), 2011	7	10	9	6	5	4
2.26	Households with no central heating (%), 2011	2.8	2.9	4.5	2.3	2.8	2.0
2.27	Households owned outright or with a mortgage/loan (%), 2011	69	62	55	73	74	79
2.28	Socially rented households (%), 2011	11	13	15	11	10	8
2.29	Privately rented households (%), 2011	18	23	29	14	14	11
2.30	Persons living in care homes with nursing (%), 2011	0.5	0.5	0.5	0.3	0.7	0.4
2.31	Persons living in care homes without nursing (%), 2011	0.8	0.9	1.0	0.6	1.0	0.7

Wider determinants - Crime

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
2.33	Recorded crimes (per 1,000 population), 2015/16	50	64	85	42	43	31
2.34	Recorded incidents of Anti-Social Behaviour (per 1,000 population), 2015/16	24	32	41	21	19	13
2.35	A&E attendances by 15-59 yr olds for assaults, 8pm-4am (per 1,000), 2013/14 to 2015/16	1.6	2.4	2.2	1.3	1.1	0.9
2.36	Emergency admissions for violence (SAR), 2013/14 to 2015/16	100	102	181	103	77	54

Overall health status

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.01	People reporting that their health is bad or very bad (%), 2011	6	6	7	5	6	4
4.02	People reporting a limiting long-term health problem or disability (%), 2011	20	21	22	20	23	18
4.04	Life expectancy at birth (yrs), 2013-15	82.1	81.7	79.6	83.4	81.8	83.2
4.05	Life expectancy at age 75 (yrs), 2013-15	13.0	12.9	11.9	13.8	12.8	13.1
4.07	Premature all-cause mortality (SMR), 2013-15	100	108	138	89	99	83
4.08	Mortality from causes considered preventable (SMR), 2014-15	100	105	137	90	106	81

Healthy Lifestyles - Pregnancy and infancy

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.01	Low birth weight (%), 2014-15	6	7	7	6	6	5
3.02	Breastfeeding initiation (%), 2014/15	79	79	71	85	74	84
3.03	Breastfeeding prevalence at 6-8 weeks after birth (%), 2015/16	52	50	42	60	52	58
4.09	Infant mortality (per 1,000 live births), 2014-15	3.5	6.0	4.1			2.2

Healthy Lifestyles - Physical activity and excess weight

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.04	Adults achieving 150+ minutes physical activity per week (%), 2015	59	56	55	58	60	63
3.05	Excess weight in 4-5 year olds (%), 2012/13-2014/15	21	22	24	20	20	19
3.06	Excess weight in 10-11 year olds (%), 2012/13-2014/15	30	33	33	27	33	27
3.07	Excess weight in Adults (%), 2012/13-2014/15	64.5	64.5	64.2	64.6	65.8	63.8

Healthy Lifestyles - Smoking

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.09	GP reported prevalence of smoking at age 15+ (%), 2015/16 (M)	17	18	25	16	16	14
3.10	Smoking quitters at 4 weeks (per 100,000 aged 16+ yrs), 2015/16	410	445	619	477	405	226
3.11	Mothers known to be smokers at the time of delivery (%), 2014/15	14	15	24	7	16	7
3.12	Smoking-attributable deaths in persons aged 35+ yrs (DSR per 100,000), 2012-2014	246	260	335	228	244	212

Healthy Lifestyles - Alcohol and drug misuse

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.13	Young people in drug or alcohol treatment (per 10,000 aged 0-18 yrs), Sep 14 to Aug 16	16	22	25	15	11	10
3.14	Adults aged 19+ in alcohol treatment (per 100,000), 2015/16	20	24	35	15	15	14
3.15	Alcohol-related admissions (DSR per 100,000), 2014/15	571	663	776	512	569	436
3.16	Alcohol-related mortality (DSR per 100,000), 2014	42	40	54	35	46	39
3.17	Adults aged 19+ in drug treatment (per 100,000), 2015/16	37	58	86	25	21	13

Healthy Lifestyles - Sexual health

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.30	Under 18s conceptions (per 1,000 females aged 15-17), 2014	20	21	32	17	19	14
3.31	Chlamydia detection rate in persons aged 15-24 (per 100,000), 2015	1,616	1,826	1,974	1,389	1,584	1,369
3.32	Chlamydia detection rate in persons aged 25+ (per 100,000), 2015	89	120	148	84	73	49
3.33	Gonorrhoea diagnostic rate (per 100,000), 2015	30	35	29	51	18	21

Healthy Lifestyles - Accidents and injuries

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.34	A&E attendances for accidents & injuries in 0-4 yr olds (per 10,000), 2015/16	1,291	1,523	1,683	1,061	1,406	910
3.35	Emergency admissions for accidents & injuries in 0-4 yr olds (per 10,000), 2013/14 to 2015/16	124	132	174	86	149	93
3.36	Emergency admissions for accidents & injuries in 5-14 yr olds (per 10,000), 2013/14 to 2015/16	96	87	111	101	102	86
3.37	Emergency admissions for accidents and injuries in 15-24 yr olds (per 10,000), 2013/14 to 15/16	140	126	162	147	150	127
3.38	Emergency admissions for falls injuries for people aged 65+ (SAR), 2014/15 to 2015/16	100	107	103	93	93	104
3.39	People killed or seriously injured on East Sussex roads (per 100,000), 2012 to 2014	64	48	50	54	84	80

Health protection - Health checks and screening

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.18	Eligible people aged 40-74 who received an NHS Health Check (%), Apr 2013 to Mar 2016 (M)	33	37	36	27	38	30
3.19	Eligible women aged 25-64 screened for cervical cancer (%), at Mar 2015 (M)	76	73	73	77	77	76
3.20	Eligible women aged 50-70 screened for breast cancer (%), at Mar 2015 (M)	74	71	70	77	74	75
3.21	Eligible people aged 60-69 screened for bowel cancer (%), at Mar 2016 (M)	60	58	55	62	63	62

Health protection - Immunisation

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.22	Children immunised for DTaP/IPV/Hib by age 1 (%), 2015/16 (M)	94	96	92	94	93	94
3.23	Children immunised for pneumococcal infection by age 2 (%), Apr 2015 to Dec 2016 (M)	92	94	92	93	90	91
3.24	Children immunised for Hib/MenC by age 2 (%), 2015/16 (M)	92	95	92	93	93	91
3.25	Children immunised for measles, mumps and rubella (MMR) by age 2 (%), 2015/16 (M)	92	93	95	93	93	90
3.26	Children immunised for DTaP/IPV/Hib by age 5 (%), 2015/16 (M)	89	89	86	90	90	91
3.27	Children immunised for measles, mumps and rubella (MMR) by age 5 (%), 2015/16 (M)	89	90	86	90	90	90
3.28	People aged 65+ receiving seasonal flu vaccination (%), Sep 2015 to Jan 2016 (M)	70	72	66	69	73	67
3.29	People aged 65+ ever receiving a pneumococcal vaccination (%), at 31 Mar 2016 (M)	69	67	69	68	75	65

Disease and poor health - Mental health

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.10	GP reported incidence of depression in persons aged 18+ (%), 2015/16 (M)	10.3	12.0	11.4	9.3	9.5	9.8
4.11	GP reported prevalence of severe mental illness (%), 2015/16 (M)	1.1	1.2	1.5	1.0	1.0	0.8
4.12	Emergency admissions for mental and behavioural disorders (SAR), 2014/15 to 2015/16	100	118	148	96	94	67
4.13	Emergency admissions, people with severe mental illness (SAR), 2014/15 & 2015/16	100	107	169	101	87	63
4.14	Emergency admissions relating to self-harm (SAR), 2014/15 to 2015/16	100	103	145	110	97	64
4.15	GP reported prevalence of dementia (%), 2015/16 (M)	1.1	1.3	0.8	1.0	1.2	1.0
4.16	GP reported versus expected prevalence of dementia at age 65+ (ratio), 2014/15 (M)	61					
4.18	Emergency admissions, people with dementia (SAR), 2014/15 & 2015/16	100	105	128	99	90	93
4.19	CAMHS caseload (per 1,000 aged 0-18 yrs), Mar 2016	19	18	23	18	20	15
4.20	Working age people claiming ESA for mental health problems (per 1,000), Feb 2016	29	36	50	23	27	16
4.22	Mortality from suicide (SMR), 2012-15	100	107	123	88	80	102

Disease and poor health - Circulatory

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.23	GP reported prevalence of hypertension (%), 2015/16 (M)	16.6	15.9	14.8	16.0	19.9	16.7
4.24	GP reported versus expected prevalence of hypertension (ratio), 2014/15 (M)	61	60	59	60	63	61
4.25	GP reported prevalence of high blood pressure without established CVD (%), 2015/16 (M)	1.3	1.3	1.2	1.0	1.4	1.4
4.26	GP reported prevalence of CHD (%), 2015/16 (M)	3.8	3.7	3.4	3.7	4.6	3.5
4.27	Emergency admissions for CHD (SAR), 2014/15 to 2015/16	100	105	121	112	100	80
4.28	Emergency admissions for CHD per 1,000 on GP CHD registers, 2015/16 (M)	56	46	67	69	56	49
4.29	GP reported prevalence of stroke or TIA (%), 2015/16 (M)	2.3	2.3	2.1	2.2	2.8	2.2
4.30	Emergency admissions for stroke (SAR), 2014/15 to 2015/16	100	98	111	106	90	99
4.31	Mortality from stroke (SMR), 2012-15	100	99	110	98	103	95
4.32	GP reported prevalence of atrial fibrillation (%), 2015/16 (M)	2.6	2.7	1.9	2.6	3.3	2.7
4.33	GP reported versus expected prevalence of atrial fibrillation (ratio), 2014/15 (M)	72	76	64	71	73	73
4.34	GP reported prevalence of heart failure (%), 2015/16 (M)	1.0	1.0	0.9	0.9	1.1	0.9
4.36	Premature mortality from circulatory diseases (SMR), 2012-15	100	112	148	94	98	75

Disease and poor health - Cancer

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.38	Incidence of all cancers (DSR per 100,000), 2012-2014	584	586	602	595	590	568
4.39	Incidence of lung cancer (DSR 100,000), 2012-2014	64	63	83	61	65	57
4.40	Mortality from lung cancer (DSR per 100,000), 2012-14	51	51	66	48	52	45
4.41	Incidence of colorectal cancer (DSR 100,000), 2012-2014	71	72	72	70	74	69
4.42	Mortality from colorectal cancer (DSR per 100,000), 2012-14	28	26	32	26	28	30
4.43	Incidence of breast cancer (DSR per 100,000 women), 2012-2014	172	156	179	167	169	187
4.44	Mortality from breast cancer (DSR per 100,000 women), 2012-14	40	38	43	34	41	42
4.45	Incidence of prostate cancer (DSR per 100,000 men), 2012-2014	178	174	151	187	184	182
4.46	Mortality from prostate cancer (DSR per 100,000 men), 2012-14	46	43	38	52	49	43
4.47	Mortality from all cancers (DSR per 100,000), 2012-14	271	281	296	261	269	262
4.48	Premature mortality from cancer (SMR), 2012-15	100	108	120	94	99	90

Disease and poor health - Respiratory

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.49	GP reported prevalence of asthma (%), 2015/16 (M)	6.2	6.4	5.6	6.4	6.3	6.1
4.50	Emergency admissions for asthma (SAR), 2014/15 to 2015/16	100	119	146	72	102	77
4.51	Emergency admissions for asthma per 1,000 on GP asthma registers, 2015/16 (M)	15	17	27	11	13	10
4.52	GP reported prevalence of COPD (%), 2015/16 (M)	2.1	2.1	2.5	1.9	2.3	1.9
4.53	Emergency admissions for COPD (SAR), 2014/15 to 2015/16	100	99	175	87	99	75
4.54	Emergency admissions for COPD per 1,000 on GP COPD registers, 2015/16 (M)	78	67	97	86	79	65
4.55	Mortality from COPD (SMR), 2012-15	100	96	151	91	103	83
4.56	Premature mortality from respiratory diseases (SMR), 2012-15	100	111	180	81	98	68

Disease and poor health - Diabetes

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.57	GP reported prevalence of diabetes aged 17+ (%), 2015/16 (M)	6.3	6.0	6.6	6.1	7.1	5.8
4.58	Emergency admissions for diabetes (SAR), 2014/15 to 2015/16	100	123	124	116	83	71
4.59	Emergency admissions for diabetes per 1,000 on GP diabetes registers, 2015/16 (M)	13	17	15	18	8	10

Disease and poor health - Other conditions

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.60	GP reported prevalence of epilepsy aged 18+ (%), 2015/16 (M)	0.8	0.8	1.0	0.7	0.8	0.8
4.61	Premature mortality from liver disease (SMR), 2012-15	100	85	188	83	95	76
4.62	GP reported prevalence of CKD aged 18+ (%), 2015/16 (M)	5.1	5.8	3.6	5.5	4.8	5.3
4.65	GP reported prevalence of learning disabilities aged 18+ (%), 2015/16 (M)	0.5	0.5	0.7	0.4	0.5	0.5

Disease and poor health - Avoidable admissions

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.67	Emergency admissions for LRTIs in under 20s (SAR), 2014/15 to 2015/16	100	103	102	142	80	79
4.68	Emergency admissions for diabetes, epilepsy, asthma in under 20s (SAR), 2014/15 to 2015/16	100	134	130	72	103	74
4.69	Emergency admissions for chronic ACS conditions (SAR), 2014/15 to 2015/16	100	106	145	94	98	78
4.70	Emergency admissions for acute ACS conditions (SAR), 2014/15 to 2015/16	100	121	121	87	91	88
4.71	Emergency admissions for other & vaccine preventable ACS conditions (SAR), 2014/15 to 2015/16	100	100	128	115	86	86

Disease and poor health - Hospital attendances and admissions

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
4.72	First outpatient attendances (SAR), 2015/16	100	96	110	102	98	97
4.73	Outpatient appointments where the patient did not attend (%), 2015/16	7	8	10	7	7	6
4.74	All MIU and A&E attendances (SAR), 2015/16	100	99	108	109	83	100
4.75	MIU and A&E attendances for 0-4 yr olds (per 1,000), 2015/16	425	399	432	535	355	403
4.76	MIU and A&E attendances for persons aged 15-29 (per 1,000), 2015/16	352	353	368	361	309	356
4.77	MIU and A&E attendances for persons aged 70+ (per 1,000), 2015/16	394	387	423	444	328	402
4.78	All elective admissions (SAR), 2014/15 to 2015/16	100	108	102	99	95	98
4.79	Elective admissions for persons aged 65+ (SAR), 2014/15 to 2015/16	320	351	309	319	302	319
4.80	All emergency admissions (SAR), 2014/15 to 2015/16	100	105	127	93	98	88
4.81	Emergency admissions for persons aged 70-84 yrs (SAR), 2014/15 to 2015/16	198	206	249	194	185	182
4.82	Emergency admissions for persons aged 85+ (SAR), 2014/15 to 2015/16	475	471	482	478	472	477

Children's services

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
6.07	Referrals to children's social care (per 1,000 aged under 18 yrs), Feb 2015 to Jan 2016	30	34	45	29	25	19
6.08	Children on a child protection plan (per 1,000 aged under 18 yrs), 31 March 2016	4	5	9	2	4	2
6.09	Looked after children (per 1,000 aged under 18 yrs), 31 March 2016	5	7	10	3	3	3

Carers

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
6.01	People providing one hour or more of unpaid care per week (%), 2011	11.3	10.6	10.5	11.8	12.4	11.2
6.02	Unpaid carers providing 20 hours or more care per week (%), 2011	33	37	40	30	35	29
6.03	Working age people claiming Carers Allowance (%), Feb 2016	1.5	1.7	2.1	1.3	1.7	1.1
6.04	Carers known to adult social care (per 1,000 population), Dec 2014 to Nov 2015	17	17	21	15	20	14
6.05	Carers (known to adult social care) receiving a service (%), Dec 2014 to Nov 2015	84	85	84	85	85	82
6.06	Carers receiving self-directed support (per 1,000 aged 18+), Dec 2014 to Nov 2015	8	8	11	7	10	7

Adult social care

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
6.10	Requests for adult social care support (per 1,000 aged 18+), Dec 2014 to Nov 2015	25	27	28	24	30	21
6.11	Adults receiving direct payments (per 1,000), at 30 Jun 2016	4	3	5	3	4	3
6.12	Adults receiving self-directed support (per 1,000), at 30 Jun 2016	11	12	14	9	11	8
6.13	Working age people receiving Long Term Support (per 1,000), Jul 2015 to Jun 2016	8	9	12	5	9	5
6.14	People aged 65+ receiving Long Term Support (per 1,000), Jul 2015 to Jun 2016	30	35	39	30	27	26
6.15	Learning disabled adults aged 18-64 in settled accommodation (%), Jul 2015 to Jun 2016	72	74	74	82	62	71
6.16	Adults receiving community equipment (per 1,000), 2015/16	10	11	11	11	12	8
6.17	Adults receiving adult social care funded lifeline or telecare (per 1,000), 2015/16	12	14	12	11	13	10
6.18	People 65+ discharged from hosp to intermed care (per 1,000), Sep 2014 to Aug 2015	7	9	5	9	6	7
6.19	Adults in council supported residential or nursing care (per 100,000), at 30 June 2016	575	609	793	320	686	499
6.20	New ASC clients receiving services, not asking for more ongoing (%), Dec 14 to Nov 15	90	86	94	90	94	89

NHS dental services

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
3.40	Residents aged 0-17 accessing East Sussex NHS general dental services (%), 2015/16	76	76	75	81	73	75
3.41	Residents aged 18-64 accessing East Sussex NHS general dental services (%), 2015/16	53	50	61	51	55	49
3.42	Residents aged 65+ accessing East Sussex NHS general dental services (%), 2015/16	53	47	62	50	58	50

GP patient survey

Ref	Indicator	East Sussex	Eastbourne	Hastings	Lewes	Rother	Wealden
5.01	Patients responding to the GP Patient Survey (%), 2015/16 (M)	48	46	39	50	54	54
5.02	Patients whose experience of their GP surgery was good (%), 2015/16 (M)	88	90	83	89	91	88
5.03	Patients whose experience of making appointments was good (%), 2015/16 (M)	77	78	72	77	88	73
5.04	Patients satisfied with GP surgery's opening hours (%), 2015/16 (M)	78	81	78	75	82	74
5.05	Patients who said the GP was good at involving them in decisions on care (%), 2015/16 (M)	77	79	71	79	78	78
5.06	Patients who said the nurse was good at involving them in decisions on care (%), 2015/16 (M)	65	65	69	62	65	66

Appendix 2: Acronyms and abbreviations

A&E	Accident and Emergency
ACS	Ambulatory Care Sensitive
AF	Atrial Fibrillation
ASC	Adult Social Care
BP	Blood Pressure
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
CHD	Coronary Heart Disease
CKD	Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease
CV	Cardiovascular
CVD	Cardiovascular Disease
DM	Diabetes Mellitus (used for diabetes QOF clinical domain)
DNA	Did Not Attend
DSR	Directly Standardised Rate
DTaP/IPV/Hib	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (also known as the 5 in 1 vaccine)
EHCP	Education, Health and Care Plan
EHS	Eastbourne, Hailsham and Seaford
ESA	Employment and Support Allowance
EYFS	Early Years Foundation Stage
Hib	Haemophilus influenzae type b
HIV	Human Immunodeficiency Virus
HR	Hastings and Rother
HWLH	High Weald Lewes Havens
ID	Income Deprivation
ID 2015	Indices of Deprivation, 2015
IDACI	Income Deprivation Affecting Children Index
IDAOPi	Income Deprivation Affecting Older People Index
IMD	Index of Multiple Deprivation
JSA	Job Seekers Allowance
LD	Learning Disability
LRTI	Lower Respiratory Tract Infection
LSOA	Lower Super Output Area
MenC	Meningococcal C conjugate
MH	Mental Health
MIU	Minor Injury Unit
MMR	Measles, mumps and rubella
MRC	Medical Research Council
NEET	Not in Education, Employment or Training
PAD	Peripheral Arterial Disease
PCV	Pneumococcal conjugate vaccine
PHOF	Public Health Outcomes Framework

PPV	Pneumococcal polysaccharide vaccine
QOF	Quality and Outcomes Framework
RAG	Red Amber Green
RCP	Royal College of Physicians
SAR	Standardised Attendance Ratio/ Standardised Admissions Ratio
SEN	Special Educational Needs
SMR	Standardised Mortality Ratio
STIs	Sexually Transmitted Infections
UC	Universal Credit