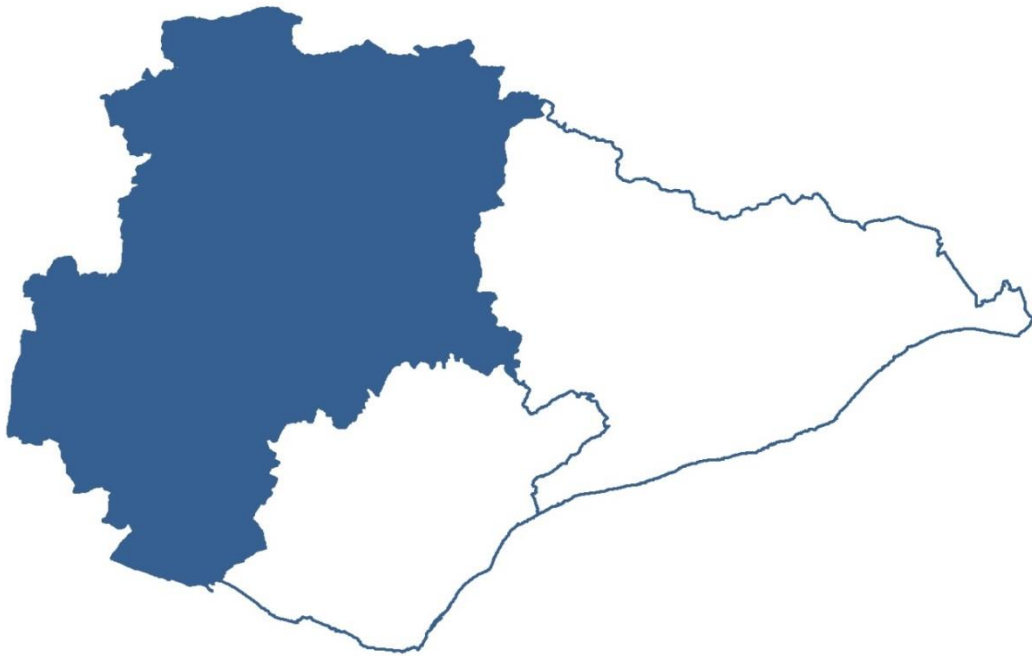


High Weald Lewes Havens Clinical Commissioning Group Area Summary



Based on the NHS view of the JSNAA Scorecards 2018
Produced by East Sussex Public Health

East Sussex CCGs, localities/communities of practice and GP practices

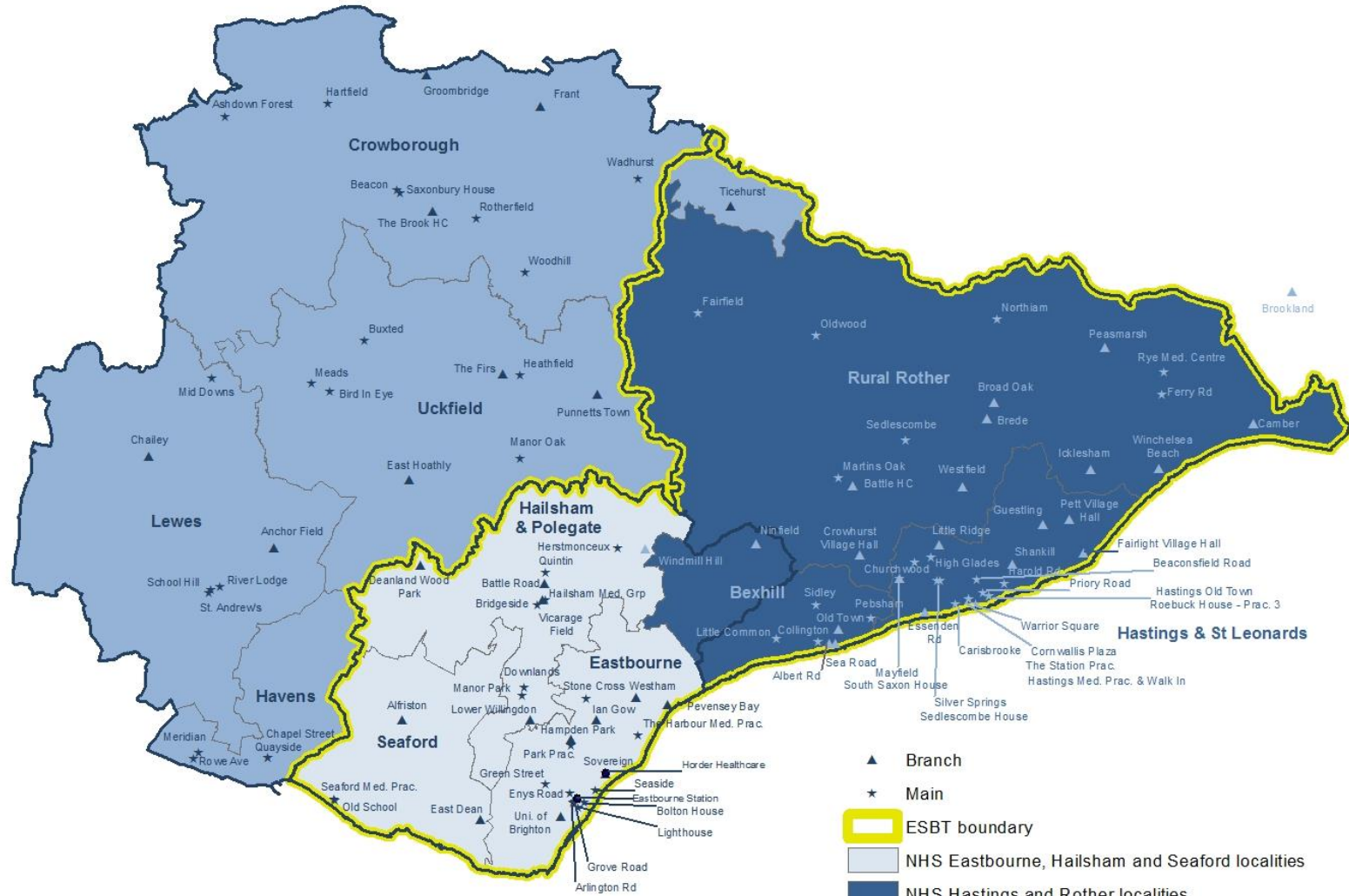


Table of Contents

Key statistics	5
Introduction	6
Population.....	7
Wider determinants.....	10
Overall health status	12
Healthy lifestyles	13
Pregnancy and infancy.....	13
Physical activity and excess weight.....	13
Smoking.....	13
Alcohol and drug misuse	14
Sexual health	14
Accidents and injuries	14
Health protection.....	14
Disease and poor health.....	15
Mental health and wellbeing.....	15
Circulatory.....	16
Cancer	16
Respiratory.....	16
Diabetes.....	17
Other chronic conditions.....	17
Avoidable admissions	17
Hospital admissions and attendances	17
Social care	19
Children's services	19

Carers	20
Adult social care.....	20
NHS dental services.....	20
GP patient survey.....	21
Appendix 1: Scorecard summary tables.....	22
Appendix 2: Acronyms and abbreviations	33

Key statistics

Key Statistics for High Weald Lewes Havens CCG			
Ref	Indicator	Number per year	Value
1.01	GP registered population (count), April 2017	169,816	
1.02	GP registered population aged 0-19 yrs (%), April 2017	37,204	22
1.03	GP registered population aged 20-64 yrs (%), April 2017	93,956	55
1.04	GP registered population aged 65+ yrs (%), April 2017	38,656	23
1.18	Live births per 1,000 women aged 15-44 yrs, 2014-16	1,495	55
2.02	Income Deprivation (as a percentage), from ID 2015 (M)		9
2.04	Children in low-income families (%), Aug 2014 (M)	3,300	12
3.06	Excess weight in 10-11 year olds (%), 2013/14 to 2015/16 (M)	372	28
3.09	GP reported prevalence of smoking aged 15+ (%), 2016/17	20,939	15
4.04	Life expectancy at birth (yrs), 2014-16		84.1
4.05	Life expectancy at age 75 (yrs), 2014-16		13.4
4.06	All-cause mortality (SMR), 2014-16	1,509	88
4.08	Mortality from causes considered preventable (SMR), 2014-16	230	79
4.15	GP reported prevalence of dementia (%), 2016/17	1,698	1.0
4.22	GP reported prevalence of hypertension (%), 2016/17	25,753	15.2
4.25	GP reported prevalence of CHD (%), 2016/17	5,307	3.1
4.28	GP reported prevalence of stroke or TIA (%), 2016/17	3,483	2.1
4.31	GP reported prevalence of atrial fibrillation (%), 2016/17	4,312	2.5
4.33	GP reported prevalence of heart failure (%), 2016/17	1,239	0.7
4.48	GP reported prevalence of asthma (%), 2016/17	10,163	6.0
4.51	GP reported prevalence of COPD (%), 2016/17	2,923	1.7
4.56	GP reported prevalence of diabetes aged 17+ (%), 2016/17	7,746	5.6
4.59	GP reported prevalence of epilepsy aged 18+ (%), 2016/17	993	0.7
4.61	GP reported prevalence of CKD aged 18+ (%), 2016/17	6,208	4.6
4.64	GP reported prevalence of learning disabilities aged 18+ (%), 2016/17	803	0.6
4.65	GP reported prevalence of palliative care needs (%), 2016/17	536	0.3
4.71	First outpatient attendances (SAR), 2016/17	67,043	97
4.73	A&E (type 1) attendances (SAR), 2016/17	36,001	86
4.74	MIU attendances (per 1,000), 2016/17	16,248	96
4.78	All elective admissions (SAR), 2015/16 to 2016/17	24,921	93
4.80	All emergency admissions (SAR), 2015/16 to 2016/17	13,762	89
6.02	Unpaid carers providing 20 hours or more care per week (%), 2011 (M)	4,833	28
6.04	Carers known to adult social care (per 1,000 population) 2016/17 (M)	1,660	13
6.07	Referrals to children's social care (per 1,000 aged under 18 yrs), 2016/17 (M)	692	21
6.17	65+ admitted to perm council supported resid or nursing care (per 100K), 2016/17 (M)	133	361

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

High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) is one of three CCGs in East Sussex. This narrative, based on 2018 JSNAA scorecard data, describes HWLH CCG in the East Sussex context. A tabulated summary of 187 JSNAA indicators of health and wellbeing, showing localities and CCGs RAG-rated against East Sussex, is included (Appendix 1). Individual JSNAA scorecards are referenced in the tables, and titles are flagged with (M) if indicator data has been modelled from LA to NHS geographies.

To best appreciate how communities of practice/localities and CCGs compare to East Sussex it is important to read this commentary alongside the JSNAA indicator scorecards. The scorecards also compare GP practices to East Sussex.

For indicators where locality or CCG data is not available, values for Lewes District and Wealden District (based on the LA view JSNAA scorecards) are discussed.

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

In Appendix 1 indicator values are given and statistically significant differences between community of practice/locality and CCG values and East Sussex are flagged in red/green or dark blue/light blue. But it is important to bear in mind that:

- where values are based on high counts, even small, possibly unimportant, differences may be statistically significant, and
- where values are based on low counts, even large, possibly important differences may not be statistically significant.

Some rates (for example, the GP-reported prevalence of diabetes) are not age-standardised. If crude rates are reported and the condition mainly affects older people it is important to also take into account the age profile of the population.

Standardised mortality ratios (SMRs) and hospital admission or attendance ratios (SARs) do take into account the age profile of the area. However, they can only be used to compare the area (community of practice/locality, CCG or GP practice) to East Sussex, NOT to other areas. So even where a CCG has the highest SMR (or SAR) of all CCGs, it does not necessarily follow that the mortality (or hospital admission/attendance) rate is higher than in the other CCGs.

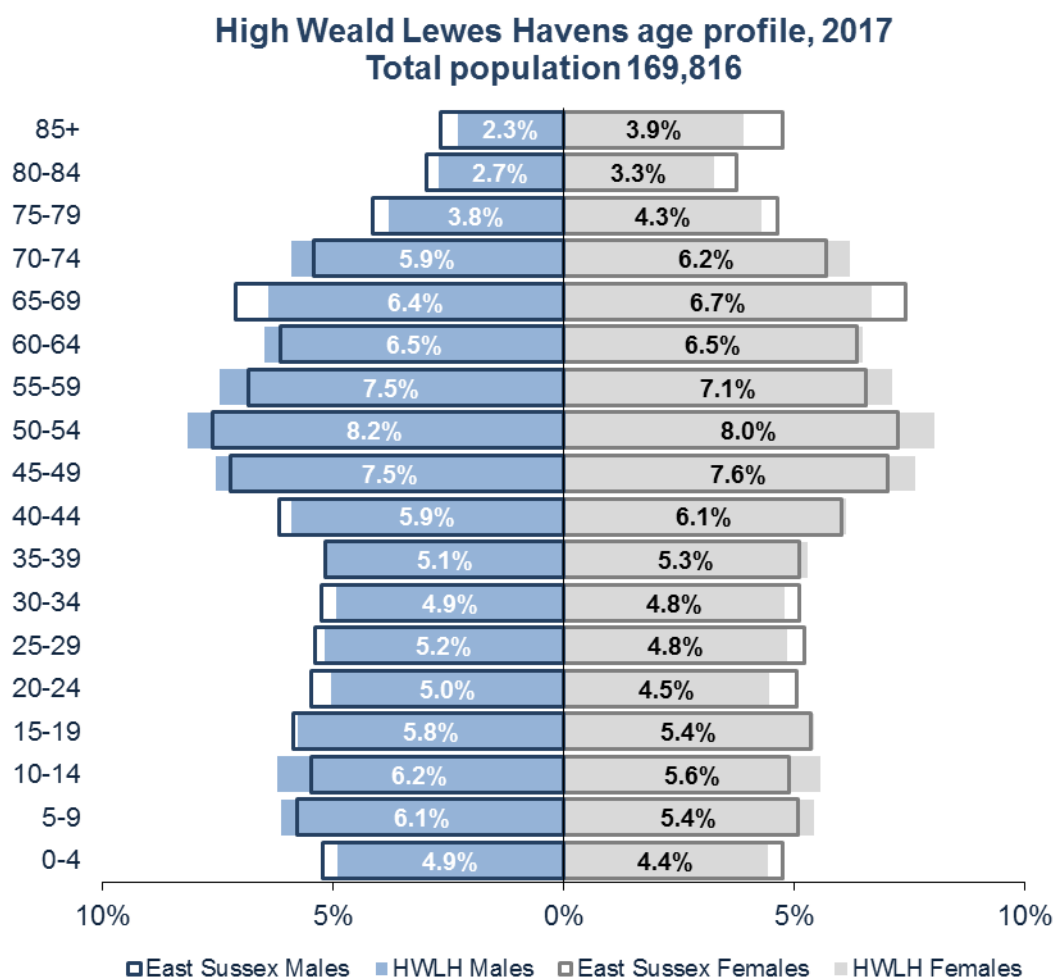
JSNAA scorecards and area summaries can be downloaded from

www.eastsussexjsna.org.uk/

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

- **GP Practice Profiles and Locality Profiles** - Spine charts are used to compare the GP practice or locality for all available JSNAA indicators.
- **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.

Population



HWLH CCG has the smallest population of the three East Sussex CCGs. It has a significantly lower percentage of over 65 year olds than in East Sussex and a higher

percentage of under 65 year olds. This is generally reflected across most communities of practice in the CCG.

The dependency ratio (of non-working age people compared to working age people) is significantly lower than for East Sussex in all its communities of practice except Crowborough and all its communities of practice have significantly lower percentages of lone older person households than East Sussex. Havens is the only locality in HWLH CCG with a higher percentage of lone parent households than East Sussex.

The CCG has a similar percentage of non-white British people to East Sussex, but Uckfield has the lowest percentage of all localities in East Sussex. All communities of practice except Havens have significantly lower percentages than East Sussex of non-white British pupils and pupils with English as an additional language.

HWLH CCG has a significantly lower overall birth rate than East Sussex, but, whereas Lewes and Crowborough have the lowest rates of all East Sussex localities, Havens has one of the highest rates (and significantly higher than East Sussex). The CCG (and all the communities of practice except Havens) has a significantly lower rate of births to teenage mothers than East Sussex; Lewes, Crowborough and Uckfield have the lowest rates of all localities in East Sussex. The birth rate for older women is similar to East Sussex, but Lewes has one of the highest rates of all East Sussex localities, though not significantly different to East Sussex.

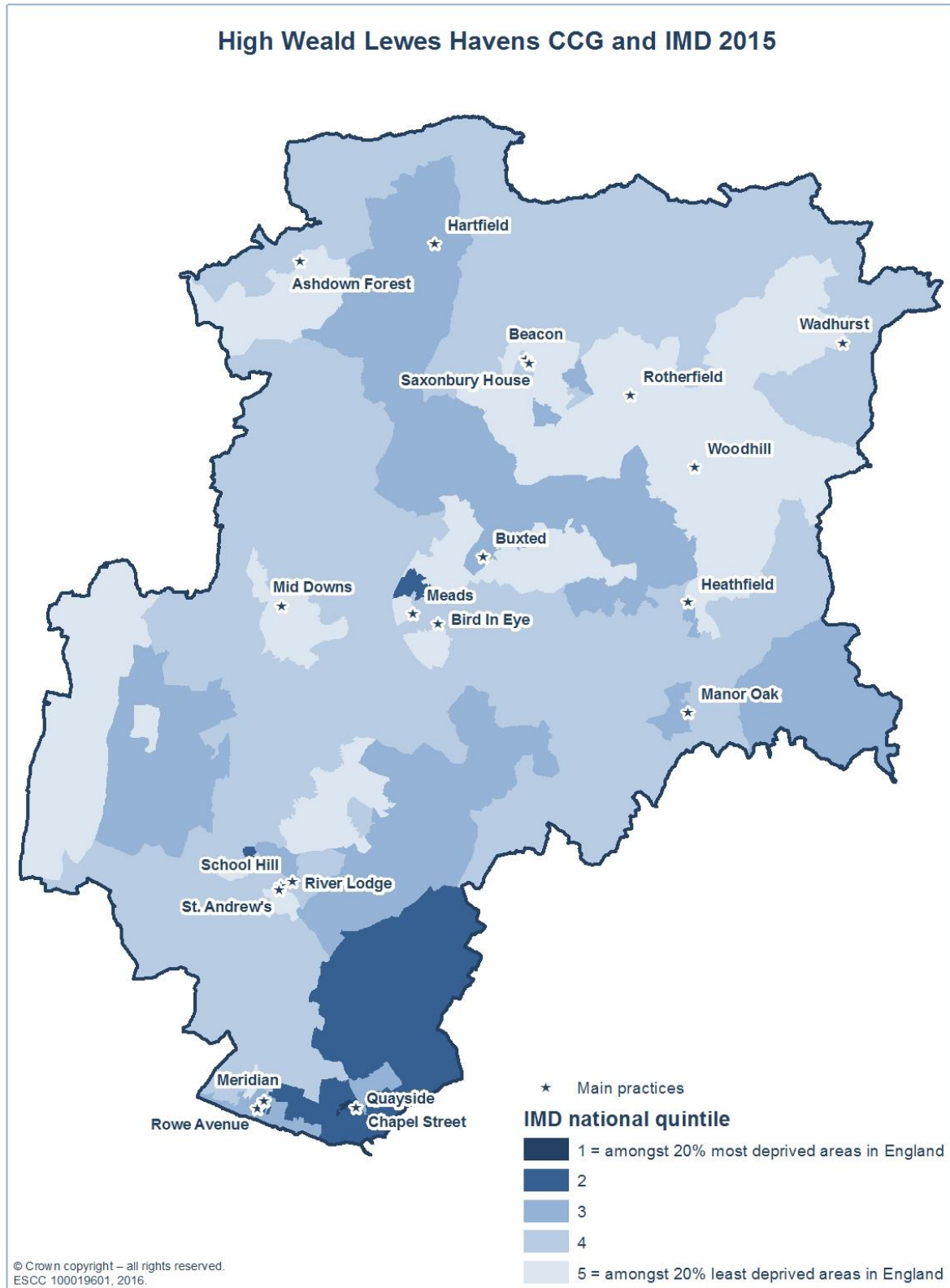
Table 1 shows the estimated population changes between 2016 and 2022 for children and young people, working age adults and older adults. Using projections produced by East Sussex County Council, the table shows that over the next 6 years some age groups are projected to increase in size whilst others will decrease in size. The net effect is that the population of the CCG 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 2016 to 2022 (modelled)

Population projections from 2016 to 2022				
Population Change	East Sussex		HWLH CCG	
	Number	%	Number	%
0-19 years	1,300	1.1	250	0.7
20-64 years	-2,800	-0.9	-400	-0.4
65+ years	17,500	12.8	6,300	16.3
85+ years	4,400	21.5	1,300	25.4
All Ages	16,600	3.0	6,300	3.7

Note: Numbers may not add up due to rounding

Wider determinants



HWLH CCG has significantly lower income and employment deprivation than East Sussex. For the entire range of economy and income indicators shown this CCG has the lowest rates of all East Sussex CCGs. Within the CCG Havens generally has significantly worse rates than East Sussex, however the other three communities of practice generally have significantly better rates, and Crowborough and Uckfield usually have the lowest rates of all East Sussex localities.

This CCG has the lowest the percentage of households with no cars or vans and significantly lower than East Sussex (Census 2011). All communities of practice except Havens have significantly lower percentages than East Sussex, and Crowborough and Uckfield have the lowest percentages in the county. However, these two communities of practice also have the lowest percentages of households able to access a GP practice in 15 minutes using public transport or walking (and, along with Lewes, significantly lower than East Sussex), and only Havens community of practice has a significantly higher percentage than East Sussex.

HWLH CCG has a similar level of educational achievement to East Sussex for pupils at age 5, but within the CCG Havens has a significantly lower level (the lowest of all East Sussex localities) and Uckfield significantly higher (the highest of all). At age 11 Uckfield is the only community of practice with a significantly higher percentage of pupils achieving the expected standard (also the highest of all East Sussex localities) and Havens has the lowest in the CCG (though not significantly different to East Sussex). HWLH CCG has the highest attainment at age 16 of the three CCGs. But whereas Crowborough, Lewes and Uckfield have the highest levels of all East Sussex localities, Havens has the lowest. Note that it is not possible to determine whether statistically significant differences exist between different areas' GCSE attainment scores (pupils at age 16).

HWLH CCG has similar rates to East Sussex of pupils with SEN on SEN Support, and with a statement of SEN or an EHCP. However, Havens and Lewes have the highest rates of pupils with SEN on SEN Support of all East Sussex localities (significantly higher than East Sussex) whereas Crowborough and Uckfield have the lowest (significantly lower than East Sussex). Crowborough also has the lowest rate of pupils with a statement of SEN or an EHCP in East Sussex. This CCG has the lowest rate of young people who are NEET (significantly lower than East Sussex), and Crowborough and Uckfield have the lowest rates of all East Sussex localities (significantly lower than East Sussex) whereas Havens has amongst the highest (though not significantly higher than East Sussex).

HWLH CCG has a significantly lower percentage than East Sussex of households that are rented (the lowest of the three CCGs) and a significantly higher percentage that are owned-occupied (the highest of the three) (Census 2011). All its communities of practice except Lewes have significantly higher levels of owner-occupied and lower levels of socially rented households. The CCG also has significantly lower levels of overcrowded households and households with no central heating (Census 2011) and the lowest levels of the three CCGs. It also has the lowest proportion of people living in care homes (significantly lower than East Sussex), with Havens and Lewes having the lowest proportions of all East Sussex localities (significantly lower than East Sussex).

This CCG has the lowest rates of recorded crimes, incidents of anti-social behaviour and A&E attendances due to assaults of all the three CCGs. Uckfield and Crowborough (and Lewes in the case of A&E attendances due to assaults) rank lowest of all East Sussex localities. However, Havens has the highest rates of A&E attendances due to assaults, and emergency admissions for violence, of all East Sussex localities (both significantly higher than East Sussex).

Overall health status

Self-reported ill-health and LLTI or disability, life expectancy, and premature and preventable mortality, are all significantly better than for East Sussex and the best of the three CCGs. All communities of practice except Havens have significantly lower levels of self-reported ill-health and LLTI or disability than East Sussex, and the lowest of all East Sussex localities. Lewes and Crowborough have the highest life expectancy and the lowest overall, premature and preventable mortality of all East Sussex localities (significantly better than East Sussex). Uckfield has significantly better premature and preventable mortality than East Sussex, but overall mortality is significantly higher than in East Sussex. Whereas life expectancy at birth in Uckfield Community of Practice is similar to East Sussex, life expectancy at age 75 is significantly lower and amongst the lowest of all East Sussex localities.

Healthy lifestyles

Pregnancy and infancy

HWLH CCG has a similar percentage of low birth weight babies to East Sussex. It has significantly higher rates of mothers initiating breastfeeding and breastfeeding at 6-8 weeks than East Sussex and the highest rates of the three CCGs. Crowborough, Lewes and Uckfield have the highest rates of all East Sussex localities (significantly better than East Sussex) whereas Havens has lower rates than East Sussex (though not significantly lower). This CCG has the lowest infant mortality rate of the three CCGs (though not significantly lower than East Sussex).

Physical activity and excess weight

HWLH CCG has the lowest percentage of overweight or obese reception year and year 6 children of the three CCGs in East Sussex (in year 6 significantly lower than East Sussex). But whereas rates for year 6 children are significantly lower in Crowborough and Lewes, and the lowest of all East Sussex localities, Havens has a significantly higher rate and the highest in East Sussex. Wealden District has the highest levels of adults achieving 150 minutes physical activity per week (though not significantly different to East Sussex), and Lewes District has the lowest levels of excess weight in adults (significantly lower than East Sussex).

Smoking

HWLH CCG has the lowest rates of smoking prevalence, smoking quitters, and mothers known to be smokers at time of delivery of the three CCGs, and significantly lower than East Sussex. However, in contrast to the other communities of practice, Havens has a significantly higher smoking prevalence and quit rate than East Sussex (and the highest rate of smoking quitters of all East Sussex localities). Lewes and Uckfield have significantly lower rates of mothers known to be smokers at time of delivery than East Sussex and the lowest of all East Sussex localities. Lewes District has somewhat lower, and Wealden District has the lowest, smoking-attributable mortality (significantly lower than East Sussex) of all the districts/boroughs.

Alcohol and drug misuse

HWLH CCG has significantly lower rates than East Sussex of young people and adults in drug/alcohol treatment and Crowborough has the lowest rates of all East Sussex localities. This CCG also has significantly lower alcohol-related hospital admissions than East Sussex. For all these indicators HWLH CCG has lower rates than the other two East Sussex CCGs. Alcohol-related mortality is lower in Lewes and Wealden districts than in the other districts/boroughs of East Sussex (though not significantly lower than East Sussex).

Sexual health

It has a similar rate of chlamydia detection in 15-24 year olds to East Sussex. Rates of chlamydia diagnosis in people aged 25+ and gonorrhoea diagnosis are lower than in the other two CCGs, but not significantly different to East Sussex. Wealden District has the lowest rate of teenage pregnancies of all the districts/boroughs and a significantly lower rate than East Sussex.

Accidents and injuries

MIU/A&E attendances and emergency admissions for accidents and injuries in 0-4 year olds are significantly lower in HWLH CCG than in East Sussex and lower than in the other two East Sussex CCGs. Admissions rates in Lewes, Havens and Uckfield are significantly lower than in East Sussex and the lowest of all East Sussex localities. Rates of emergency admissions for accidents and injuries in 5-14 and 15-24 year olds are similar to East Sussex, but Havens has one of the highest rates of admissions for 15-24 year olds in East Sussex (and substantially and significantly higher than East Sussex). Emergency admissions for falls injuries in older people are similar to East Sussex, but, although rates are not significantly different to East Sussex in Crowborough, Havens and Uckfield, Lewes has a significantly lower rate and the lowest of all East Sussex localities. Wealden District has a significantly higher rate of people killed or seriously injured on the roads than East Sussex whereas Lewes District has a similar rate.

Health protection

The rates of eligible people receiving an NHS health check are significantly worse in HWLH CCG and all its communities of practice than in East Sussex; Lewes and Havens have the

lowest/amongst the lowest rates of all East Sussex localities. This CCG has higher uptake of cervical, breast and bowel cancer screening than the other East Sussex CCGs. However, uptake of screening for cervical cancer in Crowborough, and bowel cancer in Havens, is significantly worse than in East Sussex.

Uptake of childhood immunisations in HWLH CCG is at similar levels to East Sussex. But within the CCG uptake of immunisations by age 2 is significantly worse in Lewes than in East Sussex and the worst of all East Sussex localities. Uptake of most childhood immunisations is also relatively low in Crowborough (significantly lower for immunisation against pneumococcal infection by age 2 and immunisations by age 5). Uckfield and Havens generally have better uptake than East Sussex. A 95% target for vaccination coverage is required nationally to ensure control of vaccine preventable diseases (herd immunity) within the UK routine childhood vaccination programmes. The uptake of vaccinations by people aged 65+ is significantly worse in HWLH CCG than in East Sussex. Crowborough, Lewes and Uckfield have significantly worse uptake than East Sussex and the lowest of all East Sussex localities, and Havens is the only community of practice with significantly higher uptake than East Sussex.

Disease and poor health

Mental health and wellbeing

This CCG has lower rates than the other two CCGs for almost all mental health and wellbeing indicators, and often significantly lower than East Sussex. However, in contrast to the other communities of practice, Havens has a significantly higher incidence of depression than East Sussex. It is also the only community of practice not to have a significantly lower percentage of working age people claiming ESA for mental health problems than East Sussex and the only one of all East Sussex localities with a significantly higher CAMHS caseload rate. It also has amongst the highest rates of emergency admissions for mental and behavioural disorders, self-harm and for people with severe mental illness, of all East Sussex localities (significantly higher than East Sussex for the latter two indicators). Lewes has the lowest prevalence of dementia (not age-standardised) of all East Sussex localities. In all communities of practice except Havens emergency admissions for persons with dementia are significantly lower than in East Sussex, and elective admissions are significantly lower in Crowborough and Lewes.

Circulatory

Generally the prevalence of circulatory conditions including hypertension and stroke (not age-standardised) is similar or lower in this CCG than in East Sussex, and Lewes has the lowest prevalences of all East Sussex localities and significantly lower than East Sussex. But the reported versus expected prevalences of hypertension and atrial fibrillation are significantly lower for Lewes than for East Sussex, suggesting poorer identification of patients with these conditions in this community of practice. Havens has the highest prevalence of CHD of all East Sussex localities (though not significantly different to East Sussex) whereas the other communities of practice have the lowest. It also has the highest rate in East Sussex of emergency admissions for CHD (and significantly and substantially higher than East Sussex), whereas Crowborough and Uckfield have the lowest. Premature mortality from circulatory diseases is significantly lower in HWLH CCG than East Sussex and substantially and significantly lower in Crowborough and Uckfield.

Cancer

This CCG has significantly lower premature mortality from cancer than East Sussex. Premature mortality from cancer is similar to East Sussex in Havens and Uckfield but significantly better in Crowborough and Lewes communities of practice. HWLH CCG has similar incidence and mortality to East Sussex for colorectal, breast and prostate cancers while lung cancer incidence is significantly lower. Lewes District has among the highest incidence and mortality for prostate cancer but neither is significantly different to East Sussex. Wealden District has the highest incidence and mortality for breast cancer and incidence of prostate cancer of all districts and boroughs though these are not significantly different than East Sussex.

Respiratory

All communities of practice in HWLH CCG, except Havens, have significantly lower prevalences (not age-standardised) and emergency admissions for asthma and COPD than East Sussex. HWLH CCG also has significantly lower mortality from COPD and premature mortality due to respiratory diseases than East Sussex and the lowest rates of the three CCGs. But whilst rates are relatively low in Crowborough, Lewes and Uckfield, Havens has amongst the highest rates of mortality from COPD of all East Sussex localities (though not significantly different to East Sussex).

Diabetes

The prevalence of diabetes (not age-standardised) is lower in HWLH CCG than in the other two East Sussex CCGs. Whilst it is significantly lower in Crowborough, Lewes and Uckfield than in East Sussex, Havens has a significantly higher prevalence and amongst the highest of all East Sussex localities. Havens also has the highest rate of all localities for emergency admissions for diabetes and this is substantially and significantly higher than the East Sussex rate.

Other chronic conditions

HWLH CCG has significantly lower premature mortality from liver disease than East Sussex, reflecting the substantially and significantly lower rates in Lewes and Crowborough. Within HWLH CCG Havens is the only community of practice with a significantly higher prevalence of CKD (not age-standardised) than East Sussex, whereas the other three have significantly lower prevalence CKD rates.

Avoidable admissions

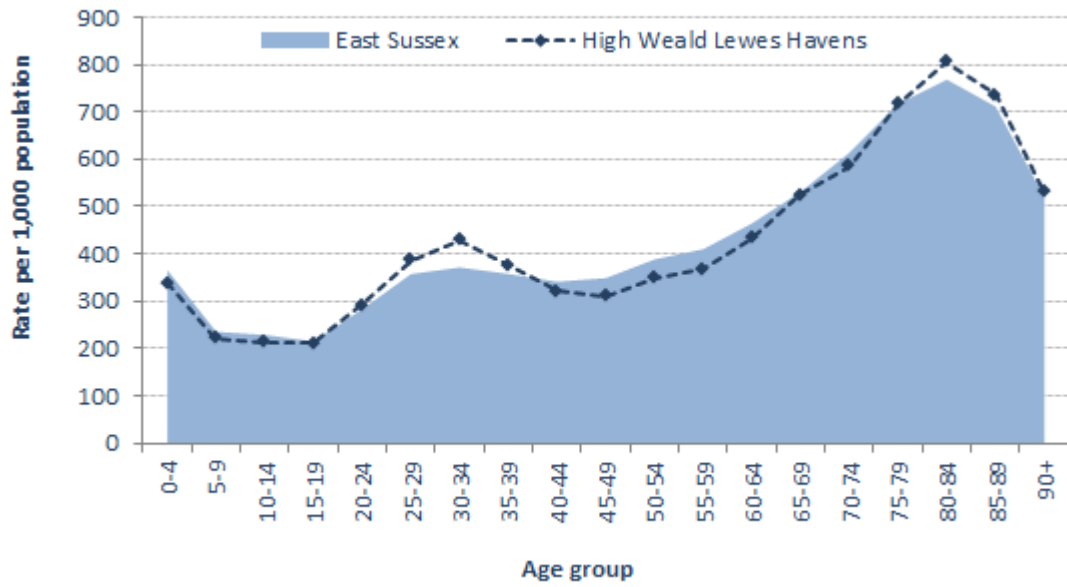
HWLH CCG has significantly lower emergency admissions for all types of avoidable admissions except LRTIs in under 20s. For most types of avoidable admissions Crowborough, Lewes and Uckfield have lower (usually significantly lower) rates than East Sussex. But Havens has the highest rate of emergency admissions for LRTIs in under 20s of all East Sussex localities, and a substantially and significantly higher rate than East Sussex. It is also the only community of practice in HWLH CCG with a higher rate than East Sussex of emergency admissions for other & vaccine preventable ACS conditions.

Hospital admissions and attendances

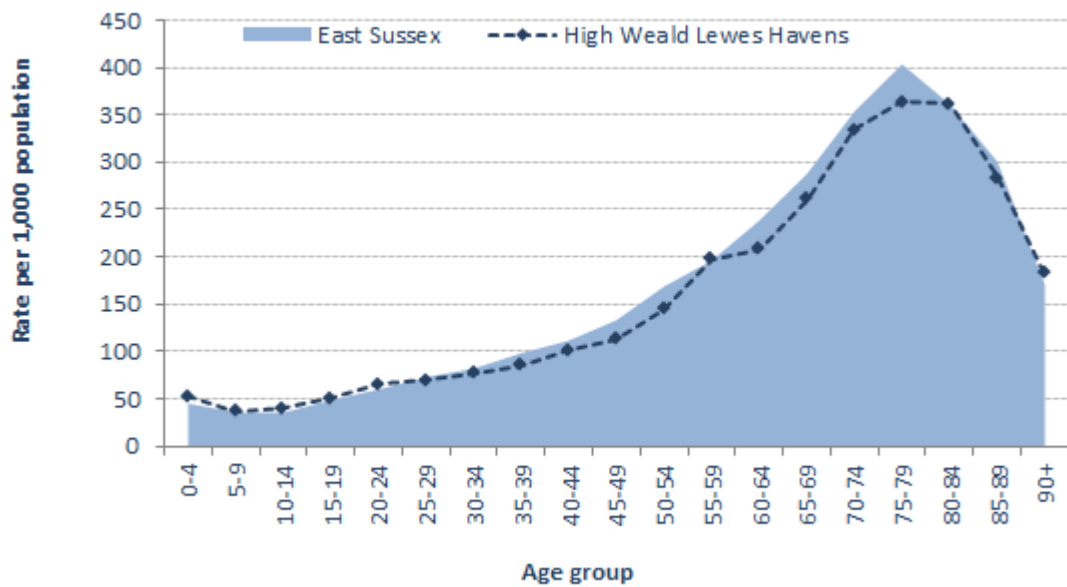
All localities in this CCG have significantly higher MIU attendance rates than East Sussex. For most other hospital attendances and admissions indicators HWLH CCG has the lowest rate of the three CCGs, and rates are significantly lower in Crowborough, Lewes and Uckfield, but significantly higher in Havens, than in East Sussex. Often the rates in Havens are the highest/amongst the highest of all East Sussex localities, whereas the rates in the other communities of practice are amongst the lowest.

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

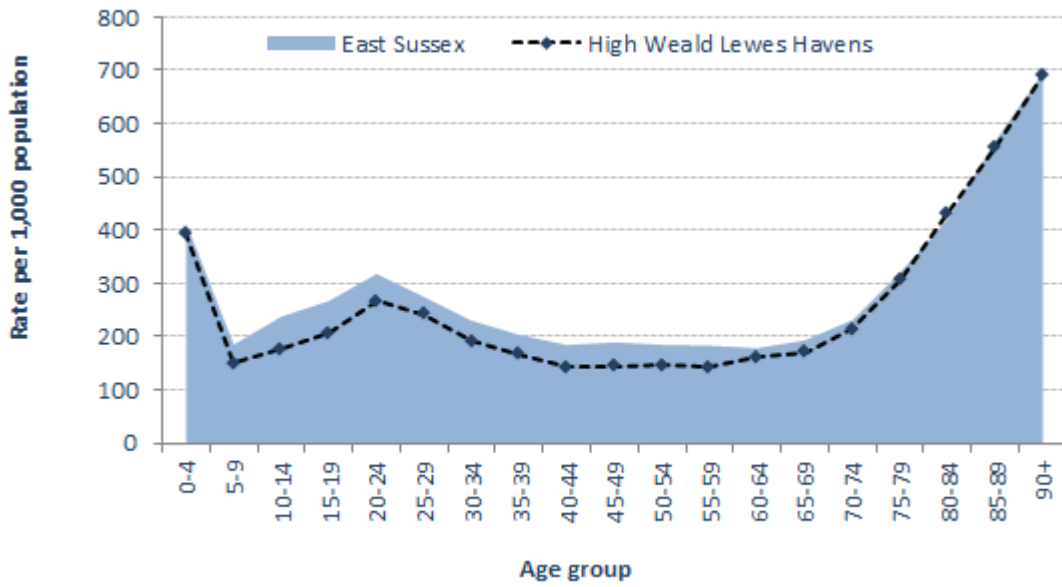
Age-specific outpatient attendance rates



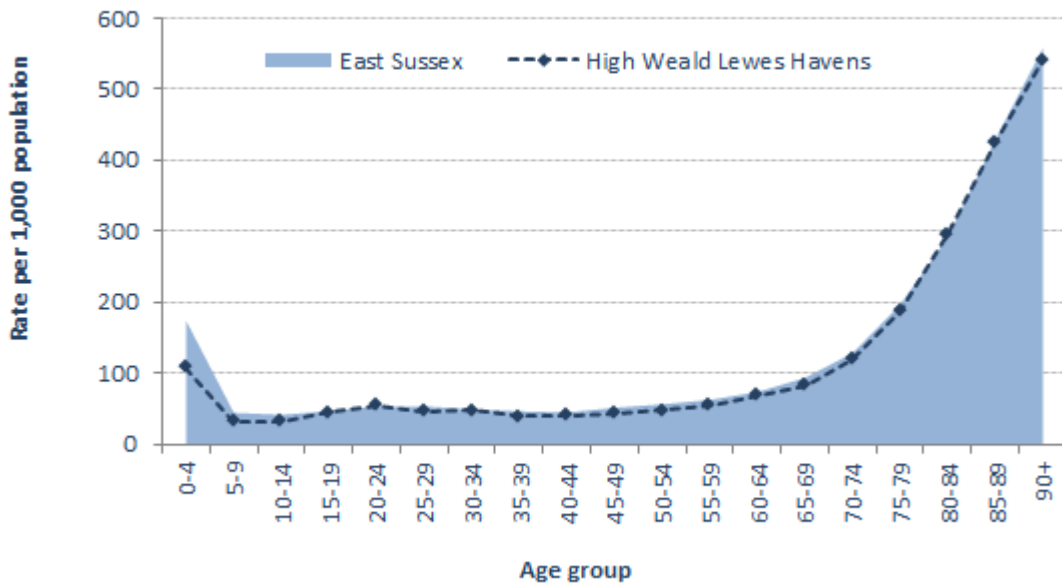
Age-specific elective admission rates



Age-specific A&E attendance rates



Age-specific emergency admission rates



Social care

Children’s services

HWLH CCG has significantly lower rates than East Sussex of referrals to children’s social care, children on child protection plans and looked after children. This pattern is reflected in

all communities of practice except Havens, which has a significantly higher rate than East Sussex of referrals to children's social care (and the second highest of all East Sussex localities), but similar rates of children on child protection plans and looked after children.

Carers

HWLH CCG has the lowest rates of the three CCGs of people providing one or more hours per week of unpaid care, and unpaid carers providing 20 hours or more care per week. But whereas the percentages of unpaid carers providing 20 hours or more care per week are significantly lower than in East Sussex in Crowborough, Lewes and Uckfield, and the lowest of all East Sussex localities, Havens has a significantly higher rate and one of the highest rates of all East Sussex localities. HWLH CCG also has the lowest rates of the three CCGs of working age people claiming Carers Allowance, carers known to adult social care and carers receiving self-directed support. But, whereas rates in Crowborough, Lewes and Uckfield are significantly lower than in East Sussex, and the lowest of all East Sussex localities, Havens has similar rates to East Sussex.

Adult social care

For most adult social care indicators HWLH CCG has the lowest rates of the three CCGs and rates are generally lowest in Crowborough Community of Practice and highest in Havens. For example, Havens has a similar rate to East Sussex of adults receiving self-directed support, Long Term Support, community equipment and ASC funded lifeline or telecare, whereas rates in the other communities of practice are significantly lower and lowest of all in Crowborough. This CCG has a similar percentage of working age learning disabled adults in settled accommodation to East Sussex, but Havens has the highest percentage of all East Sussex localities and significantly higher than East Sussex. Havens has the lowest percentage of all East Sussex localities of new ASC clients receiving services and not asking for more support, and Crowborough and Lewes rank second and third worst of all localities.

NHS dental services

Significantly lower percentages adults in HWLH CCG access NHS general dental services than in East Sussex. Within HWLH CCG the percentages of children and young people, working age and older adults accessing these services are lowest in Crowborough and

highest in Uckfield. All communities of practice except Uckfield have significantly lower levels of older people accessing NHS general dental services than East Sussex.

GP patient survey

The percentage of patients responding to the GP Patient Survey is similar to East Sussex in Havens and Lewes but significantly higher in Crowborough and Uckfield. Patients in HWLH CCG reported a similar level of satisfaction across most aspects of their experience of their GP surgeries/services as in East Sussex, but the percentage of patients reporting that the GP was good at involving them in decisions on care was significantly higher in Crowborough and Uckfield, and in Havens the percentage of people whose experience of making appointments was good, was significantly lower than in East Sussex and amongst the lowest of all East Sussex localities.

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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		Population													
		Significance compared to East Sussex													
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
1.01	GP registered population (count), April 2017	552,427	194,800	187,811	169,816	118,076	48,931	27,793	47,460	99,674	40,677	54,366	34,850	37,696	42,904
1.02	GP registered population aged 0-19 yrs (%), April 2017	21	21	21	22	21	21	17	17	23	20	22	22	23	21
1.03	GP registered population aged 20-64 yrs (%), April 2017	54	54	54	55	55	51	50	49	58	52	54	56	56	56
1.04	GP registered population aged 65+ yrs (%), April 2017	25	26	25	23	24	27	33	34	19	28	24	21	21	23
1.05	GP registered population aged 85+ yrs (%), April 2017	3.7	4.3	3.6	3.1	3.9	4.5	5.6	6.0	2.4	3.6	3.4	2.9	2.9	3.1
1.11	Dependency ratio, April 2017	0.70	0.73	0.70	0.67	0.67	0.79	0.88	0.90	0.60	0.77	0.71	0.65	0.65	0.67
1.12	Lone older person (aged 65+) households (%), 2011 (M)	16	18	16	14	17	17	20	22	13	17	14	15	15	14
1.13	Lone parent households (%), 2011 (M)	6	6	7	6	7	6	5	5	8	5	5	7	6	5
1.14	Non-White British population (%), 2011 (M)	8	9	8	7	12	6	6	6	10	5	8	8	8	5
1.15	Non-White British pupils (%), 2017 (M)	14	16	14	10	20	11	11	11	16	9	9	13	12	9
1.16	Pupils with English as an additional language (per 1,000), 2017 (M)	58	80	57	32	110	35	35	47	72	23	25	52	26	27
1.18	Live births per 1,000 women aged 15-44 yrs, 2014-16	60	61	62	55	60	69	54	58	65	58	51	65	48	57
1.19	Live births per 1,000 women aged 15-19 yrs, 2014-16	13	15	18	7	17	13	7	15	22	8	5	14	3	6
1.20	Live births per 1,000 women aged 35-44 yrs, 2014-16	35	34	35	37	34	33	35	30	35	40	38	35	40	33

Wider determinants - Economy, income and transport

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
2.02	Income Deprivation (as a percentage), from ID 2015 (M)	13	13	18	9	14	12	10	15	22	11	6	15	9	7
2.04	Children in low-income families (%), Aug 2014 (M)	19	19	25	12	20	19	14	23	28	16	9	21	12	9
2.05	Income Deprivation Affecting Older People Index (IDAOPI) (as a percentage), from ID 2015 (M)	15	15	18	10	16	13	10	15	23	12	8	16	10	9
2.06	Households in fuel poverty (%), 2015 (M)	9	9	10	9	9	9	8	9	11	10	9	9	9	8
2.07	Pupils receiving the pupil premium (%), Jan 2017 (M)	20	20	26	14	21	18	16	23	30	19	10	23	14	11
2.08	Households with dependent children and no adults in employment (%), 2011 (M)	13	12	17	9	13	11	10	16	20	10	6	14	9	7
2.09	Employment Deprivation (as a percentage), from ID 2015 (M)	11	12	15	7	13	10	9	14	18	9	5	12	7	6
2.10	Working age people claiming JSA and Universal Credit (%), Aug 2017 (M)	1.6	1.4	2.6	0.8	1.6	1.0	1.0	1.6	3.6	1.3	0.5	1.6	0.9	0.6
2.11	Working age people claiming ESA (%), Feb 2017 (M)	6	6	8	4	7	6	5	8	10	5	3	7	4	3
2.12	Households with no cars or vans (%), 2011 (M)	22	24	26	15	27	18	20	24	32	14	9	22	18	11
2.13	Households able to access a GP practice in 15 min by public transport/walking (%), 2014 (M)	78	81	86	65	84	84	66	91	90	69	60	83	67	53

Wider determinants - Education

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
2.15	Pupils (at age 5) reaching a good level of development in the EYFS (%), Jun 2017 (M)	76	77	76	77	77	77	77	80	73	78	77	67	81	83
2.16	Pupils (at age 11) achieving the expected standard at Key Stage 2, Jun 2017 (M)	57	51	58	62	50	52	57	61	54	66	61	54	60	70
2.17	Average GCSE Attainment 8 score for pupils (at age 16) at Key Stage 4, Jun 2017 (M)	45	45	43	48	44	46	46	43	42	46	52	39	50	50
2.18	Working age population with no or low qualifications (%), 2011 (M)	30	30	34	27	30	32	29	33	36	30	23	36	23	27
2.19	Pupils with special educational needs (SEN) on SEN Support (per 1,000), Jan 2017 (M)	92	86	99	92	85	91	79	97	105	84	67	121	114	74
2.20	Pupils with a statement of SEN or an EHCP (per 1,000), Jan 2017 (M)	34	34	38	31	33	34	39	38	38	35	27	35	29	33
2.21	Young people aged 16-18 yrs NEET (monthly rate per 1,000), Nov 2016 to Jan 2017 (M)	49	49	63	34	58	36	34	40	81	42	24	52	42	29

Wider determinants - Housing																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
2.25	Households that are overcrowded (%), 2011 (M)	7	8	7	5	9	5	5	6	9	4	4	7	6	4	
2.26	Households with no central heating (%), 2011 (M)	2.8	2.5	3.7	2.2	2.8	2.1	1.8	2.4	4.5	3.4	1.9	2.5	2.6	2.0	
2.27	Households owned outright or with a mortgage/loan (%), 2011 (M)	69	69	64	75	64	77	78	72	57	74	78	72	69	78	
2.28	Socially rented households (%), 2011 (M)	11	11	12	10	12	10	7	9	14	12	8	10	14	8	
2.29	Privately rented households (%), 2011 (M)	18	18	22	13	22	11	13	17	28	12	11	16	14	12	
2.30	Persons living in care homes with nursing (%), 2011 (M)	0.5	0.5	0.6	0.3	0.4	0.5	0.6	1.1	0.4	0.3	0.3	0.2	0.3	0.5	
2.31	Persons living in care homes without nursing (%), 2011 (M)	0.8	0.9	1.0	0.6	0.9	0.8	1.0	1.3	1.0	0.8	0.7	0.5	0.4	0.6	

Wider determinants - Crime																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
2.33	Recorded crimes (per 1,000 population), 2016/17 (M)	56	57	70	39	68	44	37	52	91	39	30	55	45	32	
2.34	Recorded incidents of Anti-Social Behaviour (per 1,000 population), 2016/17 (M)	23	25	29	15	30	17	18	24	38	15	10	23	20	12	
2.35	A&E attendances by 15-59 yr olds for assaults, 8pm-4am (per 1,000), 2014/15 to 2016/17	1.4	1.7	1.5	0.9	2.0	1.3	1.1	1.3	1.7	1.0	0.7	2.0	0.6	0.6	
2.36	Emergency admissions for violence (SAR), 2014/15 to 2016/17	100	79	129	91	89	58	69	84	167	72	90	169	64	54	

Overall health status																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.01	People reporting that their health is bad or very bad (%), 2011 (M)	6	6	7	4	6	6	6	8	7	5	4	7	4	4	
4.02	People reporting a limiting long-term health problem or disability (%), 2011 (M)	20	21	23	16	21	21	23	27	22	20	15	21	16	16	
4.04	Life expectancy at birth (yrs), 2014-16	82.4	82.3	81.1	84.1	82.3	81.8	83.4	81.4	79.7	83.5	85.4	83.5	84.9	82.6	
4.05	Life expectancy at age 75 (yrs), 2014-16	12.9	12.9	12.4	13.4	13.0	12.7	13.3	12.7	11.7	13.5	14.1	13.6	14.6	11.9	
4.06	All-cause mortality (SMR), 2014-16	100	100	110	88	100	104	94	105	126	89	78	91	76	108	
4.07	Premature all-cause mortality (SMR), 2014-16	100	104	116	77	106	113	84	107	138	82	65	97	68	85	
4.08	Mortality from causes considered preventable (SMR), 2014-16	100	102	116	79	102	117	80	106	140	82	66	107	68	83	

Healthy Lifestyles - Pregnancy and infancy

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
3.01	Low birth weight (%), 2014-16	6	6	7	6	7	4	5	7	7	5	5	6	6	5
3.02	Breastfeeding initiation (%), 2016/17	82	83	78	87	84	80	85	74	78	81	94	77	89	90
3.03	Breastfeeding prevalence at 6-8 weeks after birth (%), 2016/17 (M)	52	53	45	60	52	53	61	44	43	53	65	49	68	62
4.09	Infant mortality (per 1,000 live births), 2014-16	3.4	3.6	3.5	2.9	4.9				4.2				6.7	

Healthy Lifestyles - Physical activity and excess weight

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
3.04	Adults achieving 150+ minutes physical activity per week (%), 2015/16	68													
3.05	Excess weight in 4-5 year olds (%), 2013/14 to 2015/16 (M)	21	21	23	20	22	21	17	23	24	21	19	22	19	20
3.06	Excess weight in 10-11 year olds (%), 2013/14 to 2015/16 (M)	31	32	32	28	34	31	28	33	33	29	25	35	24	28
3.07	Excess weight in adults (%), 2013-2015	63.4													

Healthy Lifestyles - Smoking

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
3.09	GP reported prevalence of smoking aged 15+ (%), 2016/17	17	16	20	15	17	14	13	17	24	15	13	21	14	13
3.10	Smoking quitters at 4 weeks (per 100,000 aged 16+yrs), 2016/17 (M)	302	287	361	255	321	173	336	390	403	222	152	471	211	249
3.11	Mothers known to be smokers at the time of delivery (%), 2016/17	12	12	16	8	13	14	6	14	18	11	8	9	5	6
3.12	Smoking-attributable deaths in persons aged 35+ yrs (DSR per 100,000), 2012-2014	246													

Healthy Lifestyles - Alcohol and drug misuse

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
3.13	Young people in drug or alcohol treatment (per 10,000 aged 0-18 yrs), Sep 16 to Aug 17 (M)	18	18	23	12	19	16	21	20	27	16	6	23	16	5
3.14	Adults aged 19+ in alcohol treatment (per 10,000), 2016/17 (M)	17	18	20	13	20	12	15	14	28	10	7	21	14	13
3.15	Alcohol-related admissions (DSR per 100,000), 2015/16	587	634	665	454										
3.16	Alcohol-related mortality (DSR per 100,000), 2015	45													
3.17	Adults aged 19+ in drug treatment (per 10,000), 2016/17 (M)	37	42	49	16	55	23	24	24	75	16	7	33	19	11

Healthy Lifestyles - Sexual health																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
3.30	Under 18s conceptions (per 1,000 females aged 15-17), 2015	19														
3.31	Chlamydia detection rate in persons aged 15-24 (per 100,000), 2016	1,623	1,580	1,664	1,625											
3.32	Chlamydia diagnostic rate in persons aged 25+ (per 100,000), 2016	112	121	113	102											
3.33	Gonorrhoea diagnostic rate (per 100,000), 2016	24	27	24	22											

Healthy Lifestyles - Accidents and injuries																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
3.34	MIU and A&E attendances for accidents & injuries in 0-4 yr olds (per 10,000), 2016/17	1,505	1,605	1,628	1,244	1,656	1,596	1,348	1,704	1,688	1,326	1,029	1,321	1,179	1,468	
3.35	Emerg'y admitt'sns for accidents & injuries in 0-4 yr olds (per 10,000), 2014/15 to 2016/17	158	156	201	111	159	145	158	201	204	191	129	100	95	113	
3.36	Emerg'y admitt'sns for accidents & injuries in 5-14 yr olds (per 10,000), 2014/15 to 2016/17	91	81	100	92	84	81	68	99	102	94	85	101	107	80	
3.37	Emerg'y admitt'sns for accidents and injuries in 15-24 yr olds (per 10,000), 2014/15 to 2016/17	124	101	145	129	92	105	141	123	157	135	131	154	125	110	
3.38	Emergency admissions for falls injuries for people aged 65+ (SAR), 2015/16 to 2016/17	100	105	99	93	106	107	98	98	106	88	103	105	73	89	
3.39	People killed or seriously injured on East Sussex roads (per 100,000), 2013 to 2015	67														

Health protection - Health checks and screening																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
3.18	Eligible people aged 40-74 who received an NHS Health Check (%), Apr 2013 to Mar 2017	42	45	46	36	47	37	49	55	46	34	38	34	29	41	
3.19	Eligible women aged 25-64 screened for cervical cancer (%), at Mar 2016	75	75	74	76	74	78	77	75	73	78	73	77	77	77	
3.20	Eligible women aged 50-70 screened for breast cancer (%), at Mar 2016	74	73	72	76	70	76	77	76	68	75	75	75	75	80	
3.21	Eligible people aged 60-69 screened for bowel cancer (%), at Mar 2016	61	60	60	62	58	62	65	64	55	63	62	58	62	63	

Health protection - Immunisation																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
3.22	Children immunised for DTaP/IPV/Hib by age 1 (%), 2016/17	94	96	92	95	96	94	95	93	91	96	94	96	91	97	
3.23	Children immunised for pneumococcal infection by age 2 (%), 2016/17	94	96	94	94	96	94	97	93	95	93	91	96	89	97	
3.24	Children immunised for Hib/MenC by age 2 (%), 2016/17	94	95	93	93	95	93	97	93	93	94	91	95	88	97	
3.25	Children immunised for measles, mumps and rubella (MMR) by age 2 (%), 2016/17	92	94	92	91	94	90	96	91	92	91	89	95	86	94	
3.26	Children immunised for DTaP/IPV by age 5 (%), 2016/17	91	92	90	90	92	93	94	93	88	93	86	93	90	92	
3.27	Children immunised for measles, mumps and rubella (MMR) by age 5 (%), 2016/17	91	92	90	90	92	93	92	92	88	92	85	93	89	91	
3.28	People aged 65+ receiving seasonal flu vaccination (%), Sep 2016 to Jan 2017	70	71	71	67	72	68	75	75	68	69	65	72	68	66	
3.29	People aged 65+ ever receiving a pneumococcal vaccination (%), at 31 Mar 2017	68	68	71	65	68	65	69	76	68	69	63	75	62	64	

Disease and poor health - Mental health																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.10	GP reported incidence of depression in persons aged 18+ (%), 2016/17	11.6	13.1	11.6	10.0	13.1	14.1	11.5	11.8	12.7	8.8	9.4	12.9	9.1	9.2	
4.11	GP reported prevalence of severe mental illness (%), 2016/17	1.1	1.1	1.3	0.9	1.2	0.9	1.1	1.3	1.5	0.7	0.8	1.1	1.0	0.8	
4.12	Emergency admissions for mental and behavioural disorders (SAR), 2015/16 to 2016/17	100	97	121	80	110	75	83	99	152	78	46	125	103	70	
4.13	Emergency admissions, people with severe mental illness (SAR), 2015/16 to 2016/17	100	93	121	84	90	104	89	105	154	61	50	149	100	64	
4.14	Emergency admissions relating to self-harm (SAR), 2015/16 to 2016/17	100	93	114	92	89	91	120	103	136	68	55	170	90	78	
4.15	GP reported prevalence of dementia (%), 2016/17	1.1	1.3	1.1	1.0	1.2	1.2	1.5	1.7	0.9	0.9	1.1	1.0	0.8	1.1	
4.16	GP reported versus expected prevalence of dementia at age 65+ (ratio), 31 Jan 17	62	64	61	61											
4.17	Elective admissions, people 30+ with dementia (SAR), 2015/16 to 2016/17	100	119	91	84	111	153	95	92	105	65	68	97	65	111	
4.18	Emergency admissions, people 30+ with dementia (SAR), 2015/16 & 2016/17	100	106	100	90	105	114	100	97	121	70	86	112	81	88	
4.19	CAMHS caseload (per 1,000 aged 0-18 yrs), Mar 2017	23	25	22	21	24	26	26	23	23	18	14	28	21	21	
4.20	Working age people claiming ESA for mental health problems (per 1,000), Feb 2017 (M)	30	31	40	19	34	24	25	38	48	20	13	32	18	16	
4.21	Mortality from suicide (SMR), 2013-16	100	109	112	77	100	140	93	97	138	66	86	100	46	74	

Disease and poor health - Circulatory																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.22	GP reported prevalence of hypertension (%), 2016/17	16.9	17.5	17.7	15.2	16.1	18.8	21.3	22.4	15.1	18.7	15.9	16.3	13.3	15.0	
4.23	GP reported versus expected prevalence of hypertension (ratio), 2014/15	61	62	61	58	60	63	64	65	59	61	60	61	55	58	
4.24	GP reported prevalence of high blood pressure without established CVD (%), 2016/17	1.5	1.3	1.5	1.5	1.2	1.5	1.5	1.8	1.3	1.7	1.7	1.7	1.2	1.5	
4.25	GP reported prevalence of CHD (%), 2016/17	3.7	4.0	4.0	3.1	3.7	4.4	4.9	5.5	3.4	3.8	2.9	3.9	2.8	3.0	
4.26	Emergency admissions for CHD (SAR), 2015/16 to 2016/17	100	94	120	84	95	93	90	113	136	100	49	150	94	74	
4.27	Emergency admissions for CHD per 1,000 on GP CHD registers, 2016/17	57	50	66	52	55	46	41	58	75	62	33	65	71	47	
4.28	GP reported prevalence of stroke or TIA (%), 2016/17	2.3	2.5	2.4	2.1	2.3	2.6	3.2	3.3	2.1	2.3	2.2	2.3	1.8	1.9	
4.29	Emergency admissions for stroke (SAR), 2015/16 to 2016/17	100	106	102	89	99	115	116	95	113	93	78	117	75	95	
4.30	Mortality from stroke (SMR), 2013-16	100	101	102	95	92	117	108	98	112	93	83	103	84	116	
4.31	GP reported prevalence of atrial fibrillation (%), 2016/17	2.9	3.2	2.8	2.5	3.0	3.4	4.1	4.0	2.1	3.2	2.7	2.4	2.4	2.6	
4.32	GP reported versus expected prevalence of atrial fibrillation (ratio), 2014/15	72	78	70	68	77	78	80	74	64	72	71	68	66	67	
4.33	GP reported prevalence of heart failure (%), 2016/17	1.0	1.1	1.1	0.7	1.0	1.3	1.3	1.5	0.9	0.9	0.7	0.9	0.7	0.6	
4.34	GP reported prevalence of PAD (%), 2016/17	0.7	0.8	0.8	0.6	0.7	0.8	1.1	1.0	0.7	0.7	0.5	0.9	0.5	0.5	
4.35	Premature mortality from circulatory diseases (SMR), 2013-16	100	100	120	76	98	109	96	100	151	85	66	116	70	67	

Disease and poor health - Cancer																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.36	Incidence of lung cancer (DSR per 100,000), 2013-2015	64	67	71	52											
4.37	Mortality from lung cancer (DSR per 100,000), 2013-15	49	48	54	43											
4.38	Incidence of colorectal cancer (DSR per 100,000), 2013-2015	70	69	72	69											
4.39	Mortality from colorectal cancer (DSR per 100,000), 2013-15	28	25	31	28											
4.40	Incidence of breast cancer (DSR per 100,000 women), 2013-2015	174	163	176	185											
4.41	Mortality from breast cancer (DSR per 100,000 women), 2013-15	39	40	40	38											
4.42	Incidence of prostate cancer (DSR per 100,000 men), 2013-2015	190	181	187	205											
4.43	Mortality from prostate cancer (DSR per 100,000 men), 2013-15	48	47	45	54											
4.44	Incidence of all cancers (DSR per 100,000), 2013-2015	591	591	601	581											
4.46	Mortality from all cancers (DSR per 100,000), 2013-15	267	268	280	251											
4.47	Premature mortality from cancer (SMR), 2013-16	100	104	108	86	109	104	85	109	117	92	73	105	74	100	

Disease and poor health - Respiratory																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.48	GP reported prevalence of asthma (%), 2016/17	6.2	6.6	6.0	6.0	6.4	7.0	7.0	6.7	5.6	6.1	5.6	7.2	5.6	5.8	
4.49	Emergency admissions for asthma (SAR), 2015/16 to 2016/17	100	105	127	64	116	91	83	130	143	81	63	94	54	52	
4.50	Emergency admissions for asthma per 1,000 on GP asthma registers, 2016/17	14	13	17	10	15	12	10	17	19	13	10	12	7	9	
4.51	GP reported prevalence of COPD (%), 2016/17	2.2	2.3	2.5	1.7	2.1	2.5	2.4	2.8	2.6	1.9	1.8	2.4	1.4	1.5	
4.52	Emergency admissions for COPD (SAR), 2015/16 to 2016/17	100	96	125	75	92	109	90	113	170	59	76	124	60	50	
4.53	Emergency admissions for COPD per 1,000 on GP COPD registers, 2016/17	85	85	91	77	82	85	96	98	98	60	90	79	69	61	
4.54	Mortality from COPD (SMR), 2013-16	100	92	123	83	95	96	78	105	152	99	63	130	69	85	
4.55	Premature mortality from respiratory diseases (SMR), 2013-16	100	99	131	65	106	101	75	117	169	77	57	102	68	47	

Disease and poor health - Diabetes																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.56	GP reported prevalence of diabetes aged 17+ (%), 2016/17	6.5	6.7	7.1	5.6	6.4	7.1	7.0	8.2	6.8	6.7	5.3	7.5	4.6	5.4	
4.57	Emergency admissions for diabetes (SAR), 2015/16 to 2016/17	100	109	97	92	112	102	112	85	120	58	70	146	78	91	
4.58	Emergency admissions for diabetes per 1,000 on GP diabetes registers, 2016/17	16	17	15	18	18	15	16	13	18	10	17	20	12	22	

Disease and poor health - Other conditions																
Significance compared to East Sussex																
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield	
4.59	GP reported prevalence of epilepsy aged 18+ (%), 2016/17	0.8	0.8	0.9	0.7	0.8	0.8	0.7	1.0	1.0	0.6	0.7	0.8	0.7	0.8	
4.60	Premature mortality from liver disease (SMR), 2013-16	100	95	136	66	93	92	104	112	179	71	47	81	31	107	
4.61	GP reported prevalence of CKD aged 18+ (%), 2016/17	5.1	6.2	4.3	4.6	5.6	7.1	7.2	5.3	3.8	4.4	4.1	6.0	4.3	4.1	
4.64	GP reported prevalence of learning disabilities aged 18+ (%), 2016/17	0.6	0.6	0.8	0.6	0.6	0.5	0.4	0.7	0.8	0.6	0.5	0.6	0.4	0.8	
4.65	GP reported prevalence of palliative care needs (%), 2016/17	0.4	0.6	0.4	0.3	0.6	0.5	0.6	0.5	0.4	0.4	0.2	0.4	0.3	0.4	
2.24	Mortality attributable to manmade particulate air pollution (%) in adults aged 30+, 2015	4.3														

Disease and poor health - Avoidable admissions

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Hailsham & Polegate			Hastings & St Leonards			Rural Rother	Crowbr.	Havens	Lewes	Uckfield
						Eastbn.	Polegate	Seaford	Bexhill	Leonards						
4.66	Emergency admissions for LRTIs in under 20s (SAR), 2015/16 to 2016/17	100	108	96	94	109	106	111	89	106	73	54	146	105	86	
4.67	Emergency admissions for diabetes, epilepsy, asthma in under 20s (SAR), 2015/16 to 2016/17	100	110	131	56	130	72	87	141	144	80	51	60	66	50	
4.68	Emergency admissions for chronic ACS conditions (SAR), 2015/16 to 2016/17	100	98	123	76	100	97	95	112	149	82	63	108	74	70	
4.69	Emergency admissions for acute ACS conditions (SAR), 2015/16 to 2016/17	100	110	103	84	118	107	87	96	115	85	75	107	77	83	
4.70	Emergency admissions for other & vaccine preventable ACS conditions (SAR), 2015/16 to 2016/17	100	107	106	84	107	109	100	90	131	81	54	119	89	94	

Disease and poor health - Hospital attendances and admissions

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Hailsham & Polegate			Hastings & St Leonards			Rural Rother	Crowbr.	Havens	Lewes	Uckfield
						Eastbn.	Polegate	Seaford	Bexhill	Leonards						
4.71	First outpatient attendances (SAR), 2016/17	100	99	104	97	97	98	105	105	107	95	103	108	88	90	
4.72	Outpatient appointments where the patient did not attend (%), 2016/17	7.6	7.4	8.6	6.5	7.8	7.2	6.2	7.2	9.9	7.0	4.5	9.2	7.2	6.3	
4.73	A&E (type 1) attendances (SAR), 2016/17	100	106	106	86	110	104	94	101	118	84	78	119	80	74	
4.74	MIU attendances (per 1,000), 2016/17	34	10	3	96	4	14	31	3	3	6	120	41	112	95	
4.75	A&E (type 1) attendances for 0-4 yr olds (per 1,000), 2016/17	413	419	424	394	430	389	428	420	451	333	321	555	369	338	
4.76	A&E (type 1) attendances for persons aged 15-29 (per 1,000), 2016/17	286	306	308	236	310	299	296	296	335	240	209	318	207	223	
4.77	A&E (type 1) attendances for persons aged 70+ (per 1,000), 2016/17	373	398	358	356	406	412	357	367	392	287	341	481	343	292	
4.78	All elective admissions (SAR), 2015/16 to 2016/17	100	108	97	93	108	112	103	102	96	93	86	107	92	93	
4.79	Elective admissions for persons aged 65+ (per 1,000), 2015/16 to 2016/17	328	361	310	308	364	359	354	323	298	313	284	349	312	308	
4.80	All emergency admissions (SAR), 2015/16 to 2016/17	100	99	110	89	101	99	89	105	123	90	81	114	84	86	
4.81	Emergency admissions for persons aged 70-84 yrs (per 1,000), 2015/16 to 2016/17	191	191	197	184	196	193	175	191	228	155	166	234	174	177	
4.82	Emergency admissions for persons aged 85+ (per 1,000), 2015/16 to 2016/17	480	490	475	469	486	521	458	480	484	448	450	540	482	433	

Children's services

Significance compared to East Sussex

Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Hailsham & Polegate			Hastings & St Leonards			Rural Rother	Crowbr.	Havens	Lewes	Uckfield
						Eastbn.	Polegate	Seaford	Bexhill	Leonards						
6.07	Referrals to children's social care (per 1,000 aged under 18 yrs), 2016/17 (M)	34	35	47	21	37	32	29	41	57	25	14	44	14	17	
6.08	Children on a child protection plan (per 1,000 aged under 18 yrs), 31 March 2017 (M)	5	3	8	2	3	5	2	6	12	1	1	3	2	1	
6.09	Looked after children (per 1,000 aged under 18 yrs), 31 March 2017 (M)	4.9	5.3	6.9	2.2	4.9	5.7	6.1	6.8	7.8	4.8	1.3	4.1	1.1	2.9	

Carers															
Significance compared to East Sussex															
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
6.01	People providing one hour or more of unpaid care per week (%), 2011 (M)	11.3	11.3	11.5	11.0	10.9	11.6	12.5	12.7	10.7	12.0	10.5	11.6	11.7	10.7
6.02	Unpaid carers providing 20 hours or more care per week (%), 2011 (M)	34	35	37	28	36	35	29	38	39	32	25	38	25	27
6.03	Working age people claiming Carers Allowance (%), Feb 2017 (M)	1.6	1.7	2.0	1.1	1.7	1.7	1.3	2.0	2.1	1.7	0.8	1.8	1.0	1.0
6.04	Carers known to adult social care (per 1,000 population) 2016/17 (M)	18	18	21	13	18	20	17	24	21	18	10	18	13	12
6.05	Carers (known to adult social care) receiving a service (%), 2016/17 (M)	93	91	94	94	90	91	91	95	95	93	94	95	95	93
6.06	Carers receiving self-directed support (per 1,000 aged 18+), 2016/17 (M)	7	7	9	5	6	7	6	10	9	7	3	7	5	4

Adult social care															
Significance compared to East Sussex															
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
6.10	Adults receiving direct payments (per 1,000), at 31st July 2017 (M)	4	3	5	3	3	4	2	4	5	4	2	4	3	3
6.11	Adults receiving self-directed support (per 1,000), 31st July 2017 (M)	11	12	13	7	12	13	10	14	14	9	6	10	8	7
6.12	Working age people receiving Long Term Support (per 1,000), 2016/17 (M)	8	8	11	4	8	8	6	12	12	6	3	6	5	4
6.13	People aged 65+ receiving Long Term Support (per 1,000), 2016/17 (M)	27	30	30	21	30	34	24	27	35	25	16	31	20	20
6.14	Learning disabled aged 18-64 in settled accommodation (%), Aug 2016 to July 2017 (M)	74	78	71	73	74	84	82	80	74	46	64	90	81	66
6.15	Adults receiving community equipment (per 1,000), 2016/17 (M)	14	16	15	10	15	17	15	17	14	13	8	14	10	9
6.16	Adults receiving adult social care funded lifeline or telecare (per 1,000), 2016/17 (M)	18	21	19	13	20	23	21	23	17	16	10	20	14	12
6.17	65+ admitted to perm council supported resid or nursing care (per 100K), 2016/17 (M)	489	546	531	361	503	743	405	583	693	160	326	361	344	420
6.18	New ASC clients receiving services, not asking for more ongoing (%), 2016/17 (M)	98	100	99	90	100	100	100	99	99	99	90	88	90	92

NHS dental services															
Significance compared to East Sussex															
Ref	Indicator	East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
3.40	Residents aged 0-17 accessing East Sussex NHS general dental services (%), 2016/17 (M)	75	76	74	74	74	80	80	71	75	74	60	70	82	86
3.41	Residents aged 18-64 accessing East Sussex NHS general dental services (%), 2016/17 (M)	50	48	54	46	47	54	47	53	57	48	34	49	50	53
3.42	Residents aged 65+ accessing East Sussex NHS general dental services (%), 2016/17 (M)	52	50	58	46	47	57	48	58	62	54	38	48	47	54

GP patient survey

Significance compared to East Sussex

Ref	Indicator	Significance compared to East Sussex													
		East Sussex	EHS CCG	HR CCG	HWLH CCG	Eastbn.	Hailsham & Polegate	Seaford	Bexhill	Hastings & St Leonards	Rural Rother	Crowbr.	Havens	Lewes	Uckfield
5.01	Patients responding to the GP Patient Survey (%), 2016/17	47	47	45	49	43	54	56	51	40	56	51	44	50	52
5.02	Patients whose experience of their GP surgery was good (%), 2016/17	87	89	85	88	88	86	94	88	79	95	89	87	89	87
5.03	Patients whose experience of making appointments was good (%), 2016/17	75	77	76	73	77	72	83	76	69	92	73	70	77	71
5.04	Patients satisfied with GP surgery's opening hours (%), 2016/17	78	80	77	76	80	79	81	76	75	84	77	74	76	75
5.05	Patients who said the GP was good at involving them in decisions on care (%), 2016/17	77	77	73	80	76	76	83	77	68	81	81	78	78	81
5.06	Patients who said the nurse was good at involving them in decisions on care (%), 2016/17	67	68	67	67	69	65	69	66	67	67	68	68	67	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
ESBT	East Sussex Better Together
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
LLTI	Limiting Long-Term Illness
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