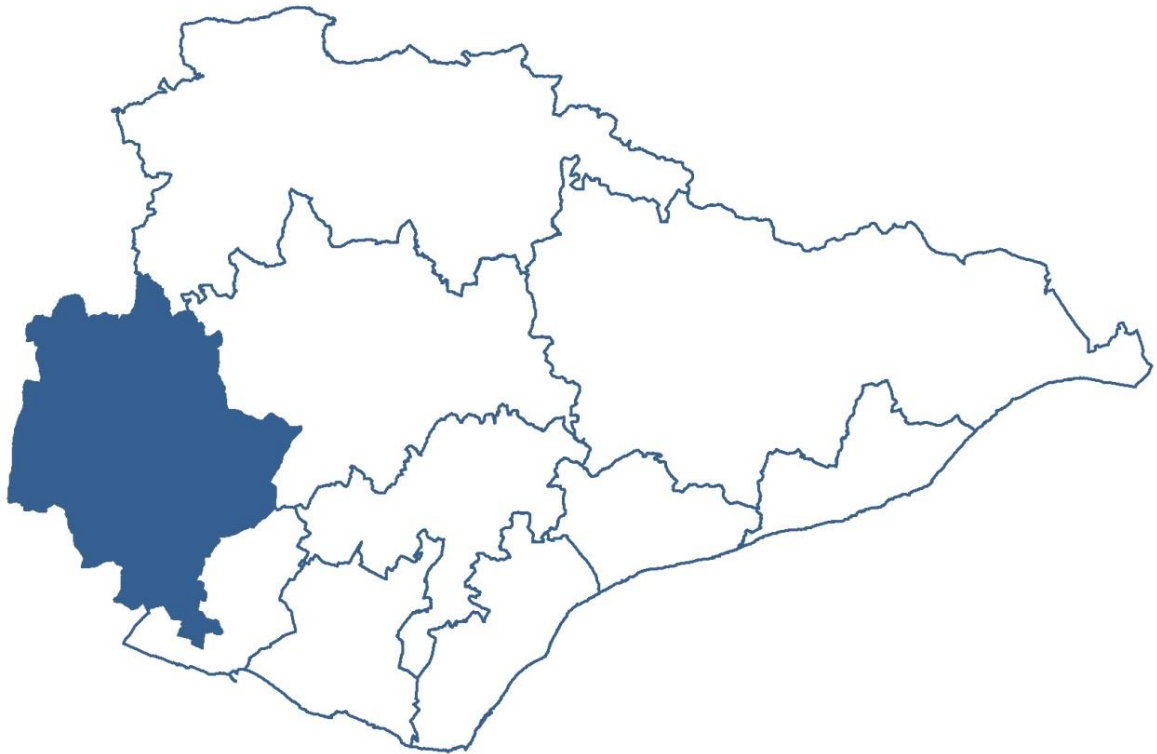
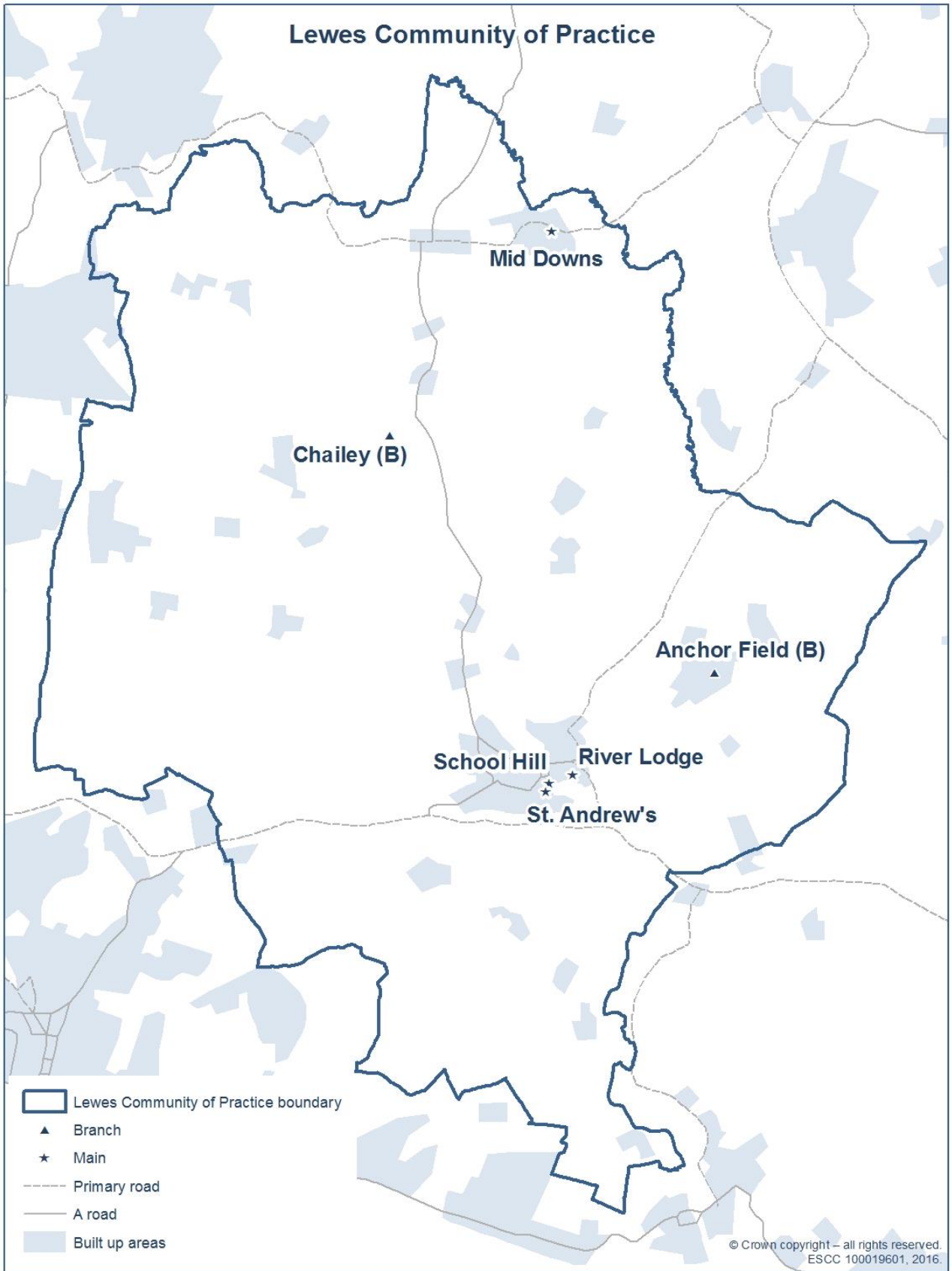


# Lewes Community of Practice Area Summary



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

# Lewes Community of Practice



# Table of Contents

<b>Key statistics .....</b>	<b>5</b>
<b>Introduction .....</b>	<b>6</b>
<b>Population.....</b>	<b>7</b>
<b>Wider determinants.....</b>	<b>9</b>
<b>Overall health status.....</b>	<b>10</b>
<b>Healthy lifestyles .....</b>	<b>10</b>
Pregnancy and infancy.....	10
Physical activity and excess weight.....	11
Smoking.....	11
Alcohol and drug misuse .....	11
Sexual health .....	11
Accidents and injuries .....	11
<b>Health protection.....</b>	<b>12</b>
<b>Disease and poor health.....</b>	<b>12</b>
Mental health and wellbeing.....	12
Circulatory.....	12
Cancer .....	13
Respiratory.....	13
Diabetes.....	13
Other chronic conditions.....	13
Avoidable admissions .....	13
Hospital admissions and attendances .....	13
<b>Social care .....</b>	<b>15</b>
Children's services .....	15

Carers.....	16
Adult social care.....	16
<b>NHS dental services.....</b>	<b>16</b>
<b>GP patient survey.....</b>	<b>16</b>
<b>Appendix 1: Scorecard summary tables.....</b>	<b>17</b>
<b>Appendix 2: Acronyms and abbreviations .....</b>	<b>28</b>

## Key statistics

Key Statistics for Lewes Community of Practice			
Ref	Indicator	Number per year	Value
1.01	GP registered population (count), April 2017	37,696	
1.02	GP registered population aged 0-19 yrs (%), April 2017	8,555	23
1.03	GP registered population aged 20-64 yrs (%), April 2017	21,069	56
1.04	GP registered population aged 65+ yrs (%), April 2017	8,072	21
1.18	Live births per 1,000 women aged 15-44 yrs, 2014-16	299	48
2.02	Income Deprivation (as a percentage), from ID 2015 (M)		9
2.04	Children in low-income families (%), Aug 2014 (M)	751	12
3.06	Excess weight in 10-11 year olds (%), 2013/14 to 2015/16 (M)	80	24
3.09	GP reported prevalence of smoking aged 15+ (%), 2016/17	4,387	14
4.04	Life expectancy at birth (yrs), 2014-16		84.9
4.05	Life expectancy at age 75 (yrs), 2014-16		14.6
4.06	All-cause mortality (SMR), 2014-16	274	76
4.08	Mortality from causes considered preventable (SMR), 2014-16	43	68
4.15	GP reported prevalence of dementia (%), 2016/17	293	0.8
4.22	GP reported prevalence of hypertension (%), 2016/17	5,010	13.3
4.25	GP reported prevalence of CHD (%), 2016/17	1,072	2.8
4.28	GP reported prevalence of stroke or TIA (%), 2016/17	689	1.8
4.31	GP reported prevalence of atrial fibrillation (%), 2016/17	910	2.4
4.33	GP reported prevalence of heart failure (%), 2016/17	267	0.7
4.48	GP reported prevalence of asthma (%), 2016/17	2,126	5.6
4.51	GP reported prevalence of COPD (%), 2016/17	521	1.4
4.56	GP reported prevalence of diabetes aged 17+ (%), 2016/17	1,388	4.6
4.59	GP reported prevalence of epilepsy aged 18+ (%), 2016/17	204	0.7
4.61	GP reported prevalence of CKD aged 18+ (%), 2016/17	1,293	4.3
4.64	GP reported prevalence of learning disabilities aged 18+ (%), 2016/17	133	0.4
4.65	GP reported prevalence of palliative care needs (%), 2016/17	114	0.3
4.71	First outpatient attendances (SAR), 2016/17	13,313	88
4.73	A&E (type 1) attendances (SAR), 2016/17	7,357	80
4.74	MIU attendances (per 1,000), 2016/17	4,225	112
4.78	All elective admissions (SAR), 2015/16 to 2016/17	5,371	92
4.80	All emergency admissions (SAR), 2015/16 to 2016/17	2,803	84
6.02	Unpaid carers providing 20 hours or more care per week (%), 2011 (M)	1,036	25
6.04	Carers known to adult social care (per 1,000 population) 2016/17 (M)	391	13
6.07	Referrals to children's social care (per 1,000 aged under 18 yrs), 2016/17 (M)	111	14
6.17	65+ admitted to perm council supported resid or nursing care (per 100K), 2016/17 (M)	27	344

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

Lewes Community of Practice is one of four in HWLH CCG. For ease of reference, throughout the rest of this area summary the term 'localities' is used to refer to the four communities of practice in HWLH CCG, as well as the six localities in the other two CCGs in East Sussex. This narrative, based on 2018 JSNAA scorecard data, describes Lewes 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 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 (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 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 locality (or CCG or GP practice) to East Sussex, NOT to other localities (or CCGs or GP practices). So even where a locality has the highest SMR (or SAR) of all localities, it does not necessarily follow that the mortality (or hospital admission/attendance) rate is higher than in the other localities.

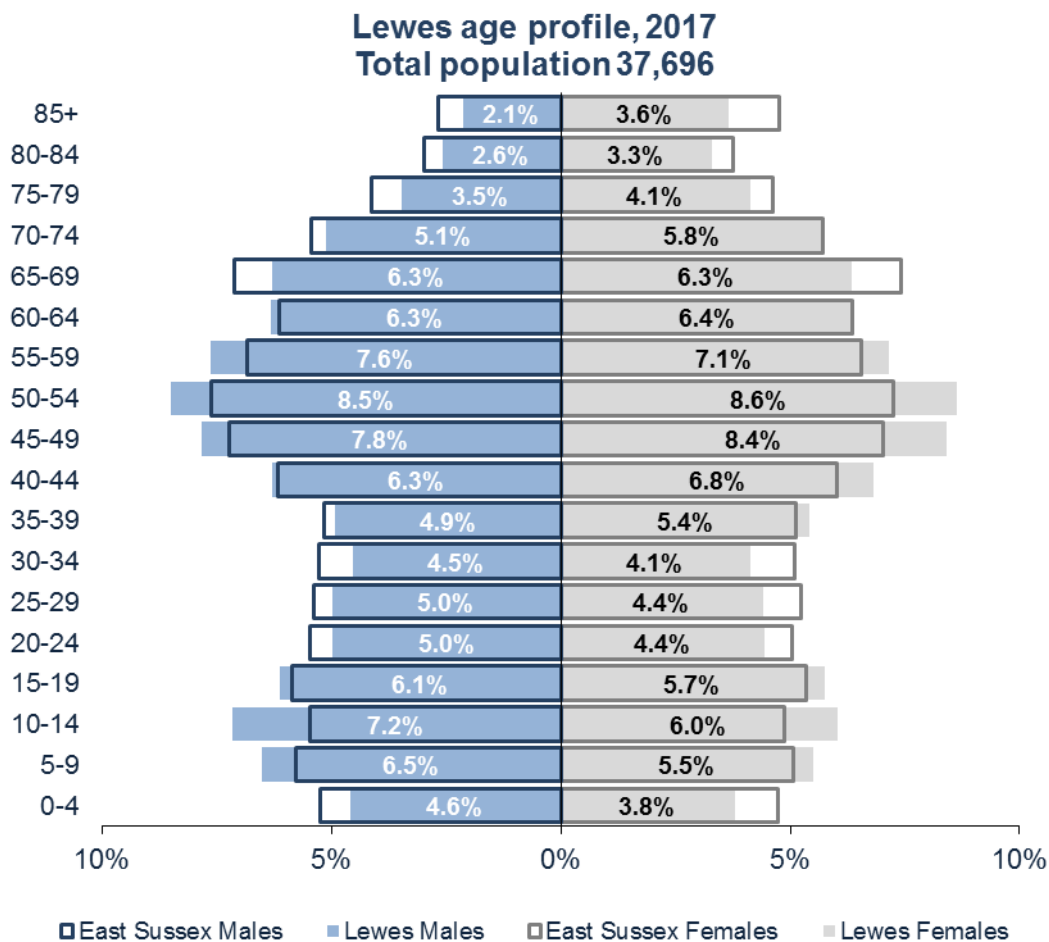
JSNAA scorecards and area summaries can be downloaded from

[www.eastsussexjsna.org.uk/](http://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



Lewes has a younger population than East Sussex, with the highest percentage of under 20 year olds and one of the lowest percentages of older people, of all East Sussex localities. It

has a higher percentage of older working age people and a lower percentage of younger working age people than East Sussex. The dependency ratio (of non-working age people compared to working age people) is amongst the lowest of all localities. The percentages of lone older person and lone parent households are similar to East Sussex. It has a significantly lower percentage of pupils with English as an additional language than East Sussex. It has the lowest overall birth rate and the lowest rate for teenage women and both are significantly lower than the East Sussex rates. It has one of the highest birth rates of all localities for older mothers (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 all age groups are projected to increase with the largest estimated percentage increase in those aged 85 years and over.

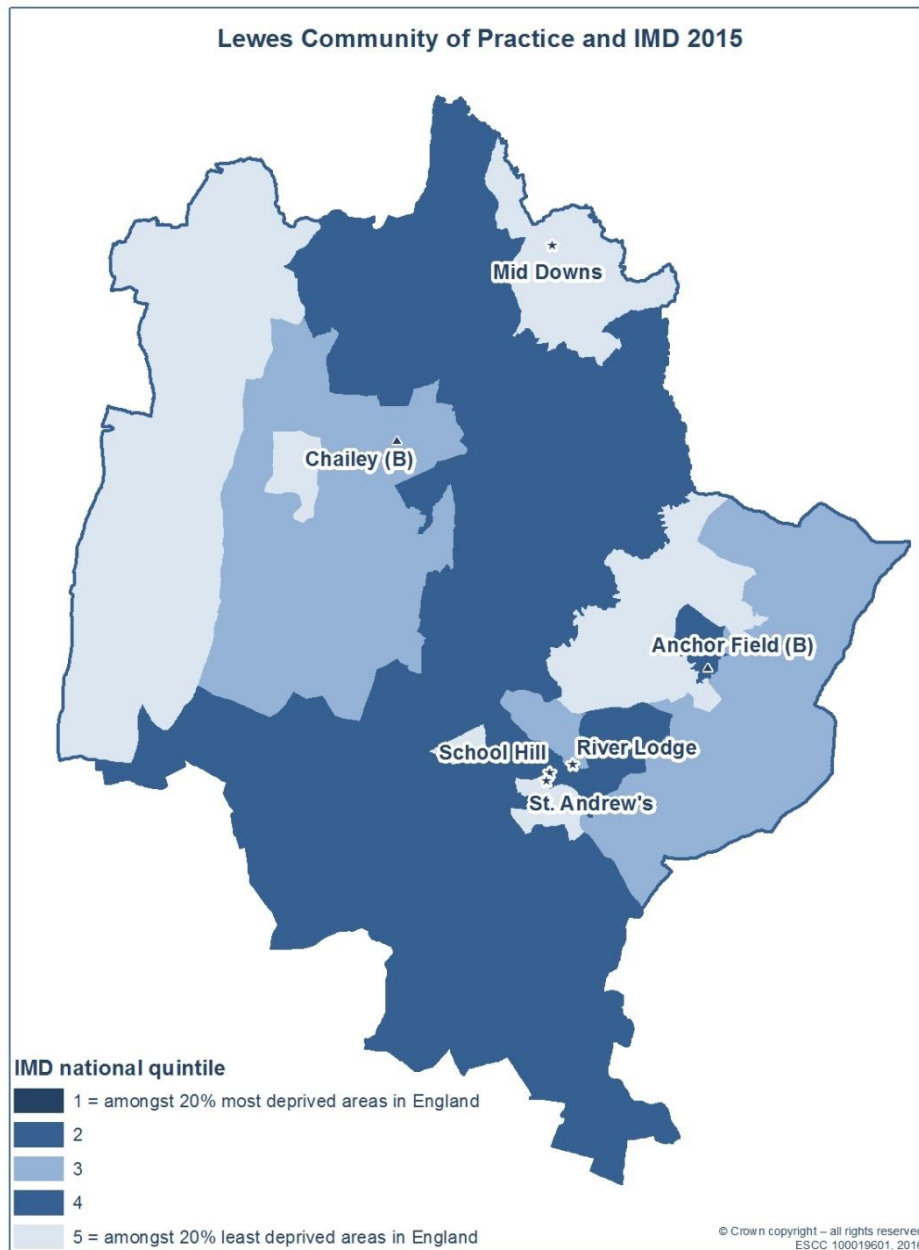
**Table 1: Population projections for all persons (number and percentage change) showing the increase (positive) or decrease (negative) from 2016 to 2022 (modelled)**

Population projections from 2016 to 2022						
Population Change	East Sussex		HWLH CCG		Lewes Community of Practice	
	Number	%	Number	%	Number	%
0-19 years	1,300	1.1	250	0.7	50	0.2
20-64 years	-2,800	-0.9	-400	-0.4	700	3.3
65+ years	17,500	12.8	6,300	16.3	1,400	16.9
85+ years	4,400	21.5	1,300	25.4	300	26.5
All Ages	16,600	3.0	6,300	3.7	2,150	5.7

Note: Numbers may not add up due to rounding



## Wider determinants



Lewes has significantly lower income and employment deprivation than East Sussex, including the percentage of older people affected by income deprivation, children in low income families and pupils receiving the pupil premium, rates of working age people claiming ESA, JSA and UC, and households with dependent children and no adults in employment (Census 2011). The percentage of households in fuel poverty is similar to East Sussex. A significantly lower percentage of households have no cars or vans (Census 2011), but a significantly lower percentage of households are able to access a GP within 15 mins by public transport or walking, than in East Sussex.

Pupil attainment is similar to East Sussex. Note that it is not possible to determine whether statistically significant differences exist between different areas' GCSE attainment scores (pupils at age 16). Lewes has a significantly higher rate (amongst the highest in East Sussex) of pupils with SEN on SEN support, but a similar rate with a statement of SEN or EHCP and a similar rate of young people who are NEET. It has a significantly lower rate than East Sussex of working age people with no or low qualifications (Census 2011), and amongst the lowest of all localities.

The percentages of households that are overcrowded, and that have no central heating (Census 2011), are similar to East Sussex. A similar proportion of households are owner-occupied and a significantly higher proportion socially rented (Census 2011). A significantly lower percentage of people live in care homes (amongst the lowest of all East Sussex localities).

It has significantly lower rates of recorded crimes and A&E attendances due to assaults than East Sussex. Emergency admissions due to violence are also lower (though not significantly).

## Overall health status

Life expectancy at birth and at age 75, levels of self-reported ill health and LLTI or disability, and overall, premature and preventable mortality, are significantly better than for East Sussex. Lewes ranks best/amongst the best of all East Sussex localities for most mortality and life expectancy indicators.

## Healthy lifestyles

### Pregnancy and infancy

Lewes has significantly higher levels than East Sussex of breastfeeding initiation and breastfeeding at 6-8 weeks (in this case, the highest of all localities). It has a similar percentage of low birth weight babies to East Sussex.

## Physical activity and excess weight

Compared to East Sussex a similar percentage of reception year children, but a significantly lower percentage of year 6 children (and the lowest of all localities), are overweight or obese. In Lewes District a similar percentage of adults achieve 150 minutes physical activity per week as in East Sussex, but the district has a significantly lower percentage of overweight or obese adults.

## Smoking

Lewes has a significantly lower smoking prevalence than East Sussex and significantly lower rates of smoking quitters and of mothers who are current smokers at the time of delivery (the lowest rate of all localities in the case of maternal smoking). Lewes District has similar smoking-attributable mortality to East Sussex.

## Alcohol and drug misuse

It has similar rates to East Sussex of young people in drug or alcohol treatment and adults in alcohol treatment, but a significantly lower rate of adults in drug treatment. Lewes District has a significantly lower rate of alcohol-related admissions than East Sussex (the lowest of all East Sussex districts/borough) but alcohol-related mortality is not significantly different.

## Sexual health

In Lewes District under 18s conceptions and chlamydia detection/diagnosis rates are similar to East Sussex. The gonorrhoea diagnostic rate is the highest of all district and boroughs (though not significantly different to East Sussex).

## Accidents and injuries

In Lewes MIU/A&E attendances and emergency admissions for accidents and injuries in 0-4 year olds are significantly lower than for East Sussex, but Lewes has the highest (though not significantly different) emergency admissions for 5-14 year olds of all East Sussex localities. The emergency admissions rate for falls injuries in older people is the lowest of all localities and significantly lower than for East Sussex. Lewes District has a similar rate of people killed or seriously injured on the roads to East Sussex.

## Health protection

Lewes has significantly worse uptake of NHS Health Checks than East Sussex and the lowest uptake of all East Sussex localities. Uptake of bowel, breast and cervical cancer screening is similar to East Sussex. Child immunisations by age 2 are significantly worse 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. Uptake of seasonal flu vaccination by persons aged 65 years or over is similar to East Sussex but this it has the lowest uptake of PPV vaccination of all East Sussex localities (and significantly lower than East Sussex).

## Disease and poor health

### Mental health and wellbeing

Lewes has a significantly lower incidence of depression than East Sussex (amongst the lowest of all localities) but a similar prevalence of severe mental illness. It has a significantly lower percentage of working age people claiming ESA for mental health problems but similar rates of emergency admissions for mental and behavioural disorders, self-harm and for people with severe mental illness. The dementia prevalence (not age-standardised) and elective and emergency admissions rates for persons with dementia are amongst the lowest in East Sussex and significantly lower than for East Sussex. The CAMHS caseload is similar to East Sussex. It has the lowest suicide rate of all localities (though not significantly different to East Sussex).

### Circulatory

For most circulatory conditions Lewes has amongst the lowest prevalences (not age-standardised) and significantly lower rates than East Sussex. However the reported versus expected prevalence of both hypertension and atrial fibrillation is significantly lower than in East Sussex, suggesting poorer identification of patients with these conditions in Lewes. The rate of emergency admissions for CHD is similar to East Sussex, but the rate of emergency admissions for stroke is significantly lower and the lowest of all East Sussex localities. It has one of the lowest mortality rates for stroke (though not significantly different to East Sussex). Premature mortality from circulatory diseases is significantly lower than in East Sussex.

## Cancer

Lewes has significantly lower premature mortality from cancer than East Sussex and amongst the lowest of all localities. Lewes District also has the lowest all-age mortality from cancers of all the districts/boroughs (though not significantly lower than East Sussex). For common cancers (lung, colorectal, breast and prostate cancers) incidence and mortality in Lewes District is not significantly different to East Sussex, though it has the lowest mortality from breast cancer, and highest from prostate cancer, of all districts and boroughs.

## Respiratory

For both asthma and COPD, the prevalences (not age-standardised) and emergency admissions rates are significantly lower than for East Sussex and amongst the lowest of all East Sussex localities. Mortality from COPD is also significantly lower than in East Sussex and amongst the lowest of all localities.

## Diabetes

Compared to East Sussex, Lewes has a significantly lower prevalence (not age-standardised) of diabetes (the lowest of all localities). The emergency admissions rate for diabetes is also somewhat lower, but not significantly different to East Sussex.

## Other chronic conditions

Lewes has significantly lower premature mortality from liver disease than East Sussex (the lowest of all East Sussex localities). The prevalences (not age-standardised) of other conditions are also significantly lower.

## Avoidable admissions

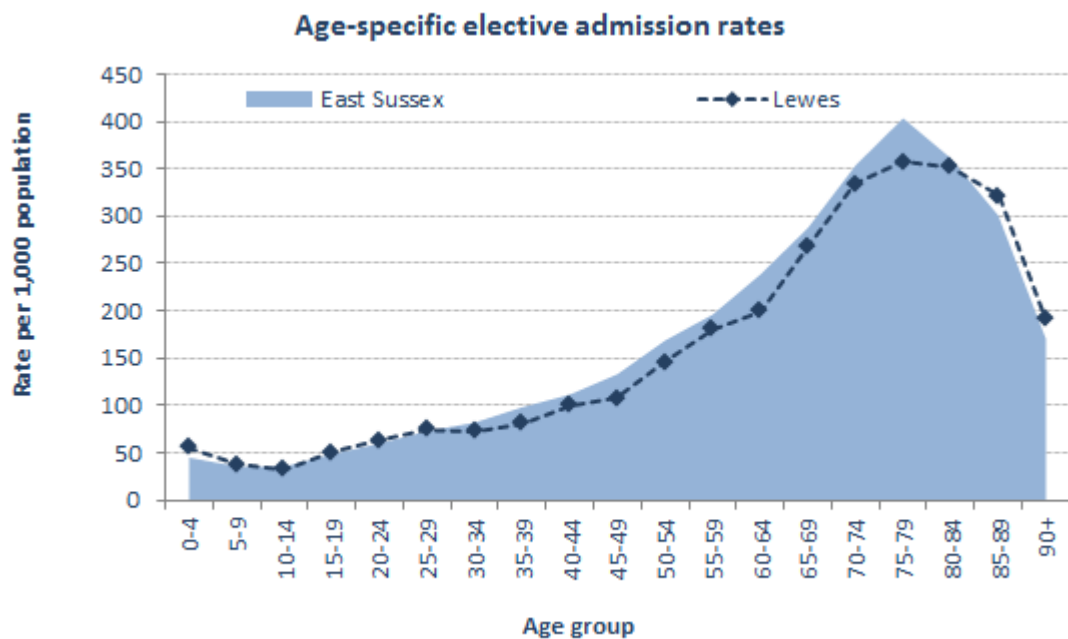
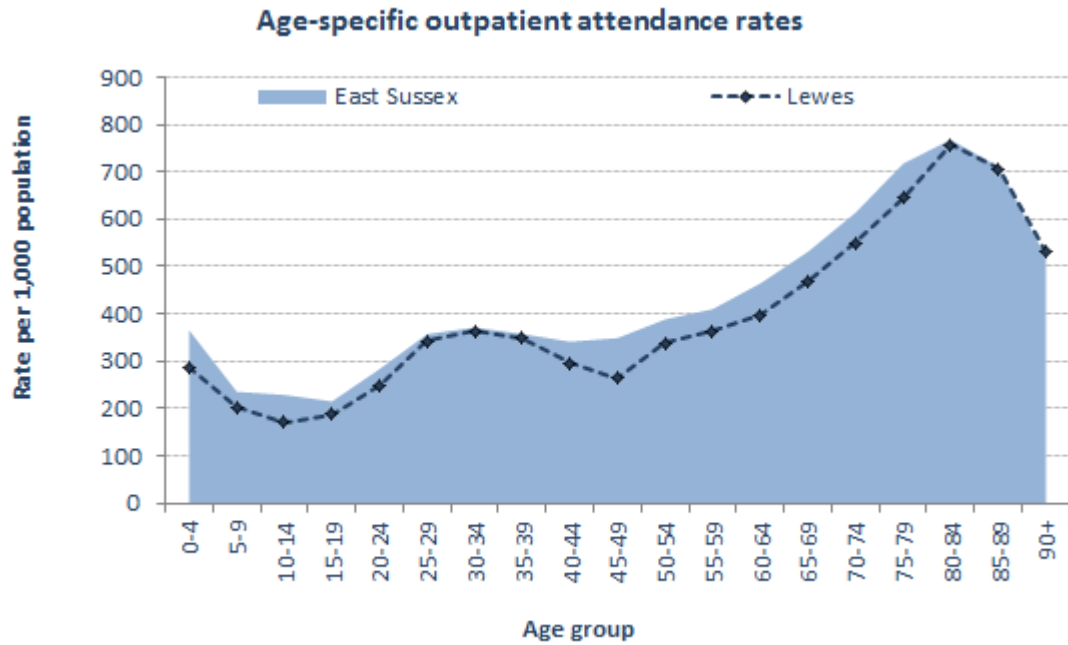
Emergency admissions for chronic and acute ACS conditions, and for diabetes/epilepsy/asthma in under 20s, are significantly lower than for East Sussex. The rates of other types of avoidable admissions are similar to East Sussex.

## Hospital admissions and attendances

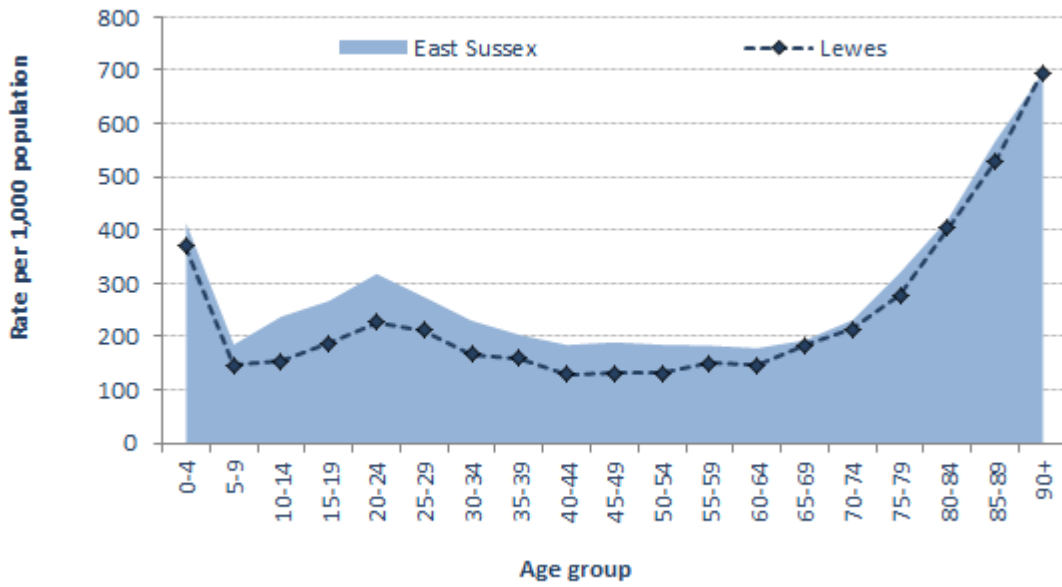
Lewes has a significantly lower rate of first outpatient attendances, but a similar DNA rate, to East Sussex. It has a significantly higher MIU attendance rate (the second highest of all

localities), but significantly lower rates of A&E attendances than East Sussex in people aged 0-4, 15-29 and 70+ years. Elective admissions, including for people aged 65+, are significantly lower than for East Sussex. Emergency admissions, including for people aged 70-84 years, are significantly lower.

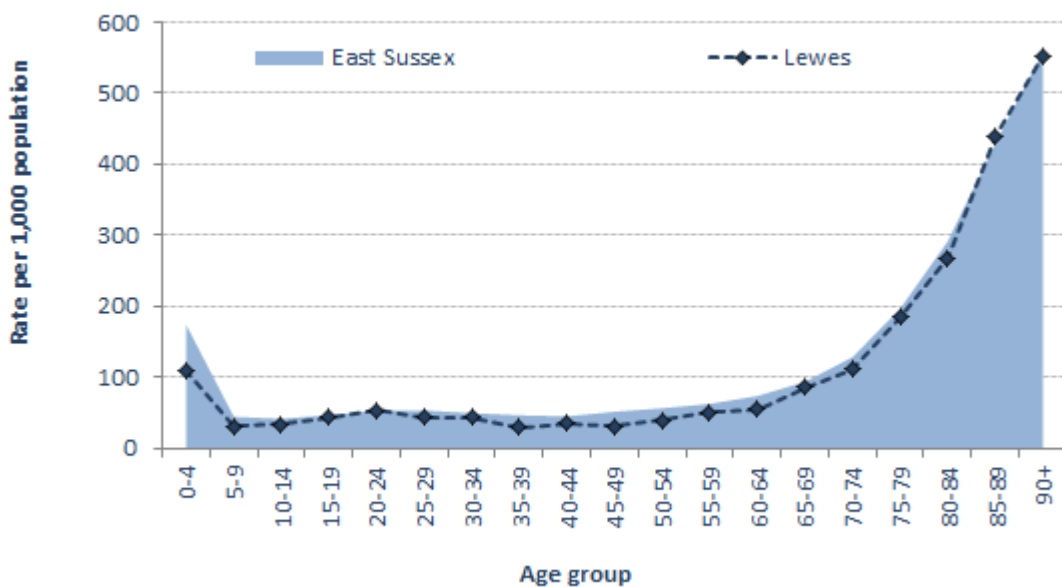
The following graphs present the age-specific overall attendance and admission rates for Lewes compared to East Sussex.



**Age-specific A&E attendance rates**



**Age-specific emergency admission rates**



## Social care

### Children’s services

Lewes has significantly lower rates of referrals to children’s social care, children on child protection plans and looked after children than East Sussex.

## **Carers**

Lewes has a significantly lower percentage of unpaid carers providing 20 hours or more care per week than East Sussex and one of the lowest percentages of all localities. It also has significantly lower percentages of working age people claiming Carers Allowance, carers known to adult social care and carers receiving self-direct support.

## **Adult social care**

Lewes has significantly lower rates than East Sussex of: adults receiving self-directed support, Long Term Support, community equipment and ASC funded lifeline or telecare and of new ASC clients receiving services but not asking for more ongoing support. Rates of working age learning disabled adults in settled accommodation and of adults admitted to permanent council supported residential or nursing care are not significantly different to East Sussex.

## **NHS dental services**

Compared to East Sussex significantly higher percentages of children, similar percentages of working age adults and significantly lower percentages of older adults access East Sussex NHS general dental services.

## **GP patient survey**

A similar percentage of patients responded to the GP Patient Survey as in East Sussex. Similar percentages of respondents reported good experiences of the various aspects of their GP surgeries/services as in 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
--------------------------------------	---------------------------------------	---------------------------------------	--------------------------------------	--	-------------------------

		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 (IDAOP) (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