Southampton
Strategic Assessment
(JSNA)

Glossary of terms
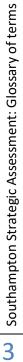
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Contents

1. Glossary of terms overview

This guide is designed to help the user understand terms and areas that might cause confusion on the Southampton Data Observatory. Including geographies used in our data and explains abbreviations.

2. Geographies

The Southampton Data Observatory uses several different sorts of geographies depending on the project type and audience.

Below are the main geographies used on the site.

2.1 Police and community safety data

When updating the Community safety strategy and police related data Southampton Data Observatory uses iQuanta most similar authorities. The most similar authorities for Southampton are listed below:

- Bristol
- Cardiff
- Derby
- Eastbourne
- England Community Safety Partnerships (CSP)
- Gloucester
- Hampshire
- Hounslow
- Leeds
- Luton
- Newcastle upon Tyne
- Northampton
- Plymouth
- Portsmouth
- Reading
- Slough
- Southampton

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2.2 Public health data and economic data

When looking at public health data and economic data, Southampton Data Observatory uses either the Chartered Institute of Public Finance and Accountancy (CIPFA) Nearest Neighbours or Office for National Statistics local comparators

CIPFA nearest neighbours
- Bolton
- Brighton and hove
- Bristol
- Coventry
- Derby
- Kingston upon Hull
- Liverpool
- Manchester
- Newcastle upon Tyne
- Nottingham
- Plymouth
- Portsmouth
- Salford
- Sheffield
- Stoke-on-Trent
- Southampton
- England

Economic comparators
- South East

Local neighbours
- Hampshire
- Isle of Wight

Office for National Statistics comparators

- Bath and North East Somerset
- Bournemouth, Christchurch and Poole
- Bristol
- Coventry
- England
- Leeds
- Liverpool
- Newcastle upon Tyne

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- Plymouth
- Portsmouth
- Sheffield
- Southampton
- York

Economic comparator

- South East

Local neighbours

- Hampshire
- Isle of Wight

2.3   Integrated Care System (ICS) Areas

An integrated care systems (ICS) are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. Part of the ICS are integrated care board (or ICB) which is a statutory NHS organisation which is responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in a geographical area. Southampton is part of the Hampshire and Isle of Wight ICB and also part of the sub-ICB of Hampshire and Isle Of Wight ICB - Hampshire, Southampton & Isle of Wight (D9Y0V). These ICB and Sub ICB areas also have comparators like the CIPFA neighbours, these are listed below.

Integrated Care Boards (ICB)

- NHS Derby and Derbyshire ICB
- NHS Devon ICB
- NHS Hampshire and Isle Of Wight ICB
- NHS Hertfordshire and West Essex ICB
- NHS Humber and North Yorkshire ICB
- NHS Kent and Medway ICB
- NHS Leicester, Leicestershire and Rutland ICB
- NHS Mid and South Essex ICB
- NHS Staffordshire and Stoke-on-Trent ICB
- NHS Suffolk and North East Essex ICB
- NHS Sussex ICB

Sub-ICB comparators:

- NHS Hampshire and Isle Of Wight ICB - Hampshire, Southampton & Isle of Wight
- NHS Kent and Medway ICB
- NHS Bath and North East Somerset, Swindon and Wiltshire ICB

- NHS Derby and Derbyshire ICB
- NHS Sussex ICB - West Sussex
- NHS Devon ICB
- NHS Cheshire and Merseyside ICB - Cheshire
- NHS Surrey Heartlands ICB
- NHS Gloucestershire ICB
- NHS Dorset ICB
- NHS Herefordshire and Worcestershire ICB
- NHS Norfolk and Waveney ICB
- NHS Coventry and Warwickshire ICB
- NHS Lincolnshire ICB
- NHS Hertfordshire and West Essex ICB - East and North Hertfordshire
- NHS Northamptonshire ICB
- NHS Cambridgeshire and Peterborough ICB
- NHS Bristol, North Somerset and South Gloucestershire ICB
- NHS Shropshire, Telford and Wrekin ICB
- NHS Mid and South Essex ICB - Mid Essex
- NHS Sussex ICB - East Sussex

2.4   Children's services: Children's statistical neighbours

Local neighbours for children's and education based data, created by the National Foundation for Educational Research (NFER) on behalf of the Department for Education to identify local authorities similar to each other based on socio-economic characteristics of their areas.

- Portsmouth
- Sheffield
- Peterborough
- Plymouth
- Derby
- Bristol
- Coventry
- Stoke-on-Trent
- Kingston Upon Hull
- Salford
- England
- Hampshire
- Isle of Wight
- Southampton

2.5   Sub-city and other areas

Sub-city areas used in our data on Southampton Data Observatory include:

- Electoral wards (17 wards each with three councillors)
- Middle Layer Super Output Areas (MSOA) – part of the Office for National Statistics geographical hierarchy for reporting small area statistics. MSOA are the highest level and have a minimum size of 5,000 residents and 2,000 households with an average population size of 7,800
- Lower Level Super Output Areas (LSOA) – part of the Office for National Statistics geographical hierarchy for reporting small area statistics. They comprise between 400 and 1,200 households and have a usually resident population between 1,000 and 3,000 persons. Mostly used for deprivation comparisons
- Output Areas (OA) – part of the Office for National Statistics geographical hierarchy for reporting small area statistics. OA are the smallest area and have an average population of about 310 residents
- Index of Multiple Deprivation. The Index of Multiple Deprivation (IMD) is a measure of relative deprivation for small areas (Lower Super Output Areas (LSOA). It is a combined measure of deprivation based on a total of 37 separate indicators that have been grouped into seven domains, each of which reflects a different aspect of deprivation experienced by individuals living in an area.
- GP surgeries – data is often recorded at GP surgery areas
- Primary Care Networks (PCN) - each of the 1,250 PCNs across England are based on GP registered patient lists, typically serving natural communities of between 30,000 to 50,000 people (with some flexibility). They are small enough to provide the personal care valued by both people and GPs, but large enough to have impact and economies of scale through better collaboration between GP practices and others in the local health and social care system. These areas are non- geographical areas.
    - Southampton Bitterne PCN
    - Southampton Central PCN
    - Southampton Living Well Partnership PCN
    - Southampton North PCN
    - Southampton Sea City PCN
    - Southampton West PCN
    - Southampton Woolston & Townhill PCN

More information is available on the NHS England website.

- Local Enterprise Partnerships (LEPs) - are voluntary partnerships between local authorities and businesses, straddling multiple local authorities to help determine local economic priorities

More information on sub-city is available in the Geographies dashboard on the maps page of the Southampton Data Observatory.

3. Terms used

List of terms and language used on Southampton Data Observatory.

3.1 Age-standardization

A statistical technique used to compare populations with different age structures, in which the characteristics of the populations are statistically transformed to match those of a reference population. Useful because relative over- or under-representation of different age groups can obscure comparisons of age-dependent diseases (e.g., ischemic heart disease or malaria) across populations.

3.2 Alcohol hospital admissions

Alcohol-related hospital admissions can be used as a measure to indicate the burden of excessive alcohol consumption on the health of a population. Three hospital admissions measures can be used: alcohol-specific, alcohol-related (narrow) and alcohol-related (broad):

3.3 Alcohol-related admissions

Alcohol-related admissions are those which can partly be attributed to alcohol

- **The broad definition** encompasses admissions where the primary or secondary diagnoses is an alcohol-related condition
- **The narrow definition** only includes admissions where the primary diagnosis is alcohol-related

3.4 Alcohol-specific hospital admissions

Alcohol-specific hospital admissions are where the primary or any of the secondary diagnoses are wholly attributable to alcohol

3.5 Anonymisation

The process of rendering data into a form which does not identify individuals and where there is little or no risk of identification (identification is not likely to take place).

3.6   Body mass index (BMI)

The body mass index (BMI) is a measure that uses your height and weight to work out if your weight is healthy. The BMI calculation divides an adult's weight in kilograms by their height in metres squared. For example, A BMI of 25 means 25kg/m2. More information on BMI is available on the NHS website (BMI).

3.7   Caldicott Guardian

A senior person responsible for protecting the confidentiality of patient and service user information and enabling appropriate information sharing.

3.8   Confidence intervals

A confidence interval is a range of values that is used to quantify the imprecision in the estimate of a particular indicator. Specifically, it quantifies the imprecision that results from random variation in the measurement of the indicator. A wider confidence interval shows that the indicator value presented is likely to be a less precise estimate of the true underlying value. More information is available in the APHO Technical Briefing 3: Commonly used public health statistics and their confidence intervals

3.9   Coronary heart disease (or Ischaemic heart disease)

This refers to the disease process, atherosclerosis, which causes narrowing of the blood vessels supplying the heart muscle. This results in impaired blood flow to the heart muscle causing symptoms including chest pain (angina) and shortness of breath. This disease process can ultimately result in a heart attack. Coronary heart disease (CHD) is a major cause of death in the UK and worldwide. CHD is sometimes called ischaemic heart disease or coronary artery disease.

3.10   Crude rate

Crude rates are the simplest types of rates dividing the number that something occurred for by the total population the event could have happened for. Unlike more complex age standardised rates which adjusts for the age structure of the population.

3.11   Crude birth rate

Crude birth rate is the number of live births per 1,000 population of all ages, not adjusted for age or sex

3.12   Directly standardised rate (DSR)

The direct method of standardisation requires that the age-specific rates for all populations being studied are available and that a standard population is defined.

3.13   Disability-adjusted life years (DALYs)

The sum of years lost due to premature death (Years of life lost) and years lived with disability (YLDs). DALYs are also defined as years of healthy life lost.

3.14   Disability free life expectancy

The number of years that a person is expected to continue to live in a healthy condition.

3.15   Drug use or misuse

Southampton City Council is using the term **use** rather than misuse because using stigmatising language reinforces negative stereotypes. Person-centred language focuses on the person, not their substance use.

3.16   General fertility rate (GFR)

general fertility rate is the number of live births per 1,000 female population aged 15 to 44 years, calculated using ONS mid- year population estimates.

3.17   Gross Domestic Product (GDP)

GDP is the total monetary or market value of all the finished goods and services produced within a country's borders in a specific time period. As a broad measure of overall domestic production, it functions as a comprehensive scorecard of a given country's economic health

3.18   Gross Value Added (GVA)

GVA is the value generated by any unit engaged in the production of goods and services. How much is produced.

3.19   Healthy life expectancy

Healthy life expectancy is the number of years that a person at a given age can expect to live in good health, taking into account mortality and disability. Also see life expectancy.

3.20 High blood pressure

Blood pressure is recorded with 2 numbers. The systolic pressure (higher number) is the force at which your heart pumps blood around your body. The diastolic pressure (lower number) is the resistance to the blood flow in the blood vessels between heartbeats. Measured in millimetres of mercury (mmHg). Generally high blood pressure is considered to be from 140/90mmHg (or an average of 135/85mmHg at home) – or 150/90mmHg (or an average of 145/85mmHg at home) if the person is aged over 80 years. For more information on blood pressure see the NHS (hypertension) website.

3.21 Incidence

The number of new cases of a given disease during a given period in a specified population. It also is used for the rate at which new events occur in a defined population. It is differentiated from prevalence, which refers to all cases, new or old, in the population at a given time. Also see prevalence.

3.22 Ischaemic heart disease (or Coronary heart disease)

This refers to the disease process, atherosclerosis, which causes narrowing of the blood vessels supplying the heart muscle. This results in impaired blood flow to the heart muscle causing symptoms including chest pain (angina) and shortness of breath. This disease process can ultimately result in a heart attack.

3.23 Life expectancy

Number of years a person is expected to live based on their present age. For example, life expectancy at birth. More information on life expectancy is available on the life expectancy page and from the Office for National Statistics - Life expectancy website.

3.24 Prevalence

Prevalence is the proportion of a population who have a specific characteristic in a given time period. In medicine, a measure of the total number of people in a specific group who have (or had) a certain disease, condition, or risk factor (such as smoking or obesity) at a specific point in time or during a given period of time.

3.25 Proportion

The number of people with a specific condition or attribute at a specified time divided by the total number of people in the population. The number or proportion of cases, events or conditions in a given population. The same as percent of.

3.26 Pseudonymisation

Pseudonymisation is a procedure by which identifying fields (that is, names, dates of birth and addresses) within a data record are replaced by one or more artificial identifiers to protect the privacy of individuals.

3.27 Quinary age groups

Five- year age groups, normally running from 0-4 to 90+

3.28 Quintiles

The first quintile represents the lowest 1/5 of values from 0-20% of the range. The second quintile includes the values from 20-40%, the third quintile includes 40-60%, the fourth quintile includes 60-80%, and the fifth quintile includes the highest 1/5 of values from 80-100%.

3.29 Replacement level fertility

Replacement level fertility is the average number of children born per woman at which a population exactly replaces itself from one generation to the next, without migration.

3.30 Standard deviation or standard error

Standard deviation or standard error is the statistical measure of the amount of variation around the mean of a distribution. It is defined as the square root of the variance. By convention, the term 'standard deviation' is used only when the distribution is describing variation in individual values within a population or sample. The standard deviation of a summary measure, such as the sample mean, is known as the 'standard error'.

3.31 Statistically significant

The Southampton Data Observatory uses 95% confidence intervals For example a 95% confidence interval of 47-53, means if researchers or analysts did the same study or analyses over and over and over again with samples of the whole population, they would get results between 47 and 53 exactly 95% of the time. More information is available in the APHO Technical Briefing 3: Commonly used public health statistics and their confidence intervals.

3.32 Total Fertility rate (TFR)

The total fertility rate is the average number of live children that a group of women would bear if they experienced the age-specific fertility rates of the calendar year throughout their childbearing lifespan. For more information see the World Health Organisation website.

3.33 Variance

Variance is the statistical measure of the amount of variation around the mean of a distribution. The greater the variance the more widely distributed are the observed values.

3.34 Years of life lost (YLL)

Years of life lost is a measure of premature mortality that takes into account both the frequency of deaths and the age at which it occurs. Based on number of deaths below the age of 75, and the potential number of years that the person could have lived.

3.35 Years lived with disability (YLD)

Years of life lived with any short-term or long-term health loss.

3.36 Z-score

Z-score is a statistical measurement that describes a value's relationship to the mean of a group of values. Z-score is measured in terms of standard deviations from the mean. If a Z-score is 0, it indicates that the data point's score is identical to the mean score.

4. Frequently used acronyms

ACE - Adverse Childhood Experience
APS – Annual Population Survey
ASH - Action on Smoking and Health
ASHE – Annual Survey of Hours and Earnings
BMJ – British Medical Journal
BRES – Business Register and Employment Survey
CCG – Clinical Commissioning Group (discontinued)
CIPFA - The Chartered Institute of Public Finance and Accountancy
CSP - Community Safety Partnerships
COPD - Chronic Obstructive Pulmonary Disease
DfE - Department for Education
DPH – Director of Public Health
DWP – Department for Work and Pensions
EHC - Education, Health and Care plan
ELG - Early Learning Goals
EPC - Energy Performance Certificate
EYFSP - Early Years Foundation Stage Profile
FPEER - Fuel poverty energy efficiency rating
GDP – Gross Domestic Product

GDPR - The General Data Protection Regulation

GRF – General fertility rate

GVA – Gross Value Added

HESA - Higher Education Statistics Agency

HIV - Human Immunodeficiency Virus

HMO – Houses in Multiple Occupation

HMRC - His Majesty's Revenue and Customs.

HRDA - High Risk Domestic Abuse

ICS – Integrated care system

ICB – Integrated care board

ICU - Integrated Commissioning Unit

IDACI - Income Deprivation Affecting Children, part of the IMD

IDAOPI - Income Deprivation Affecting Older People, part of the IMD

IMD - Index of Multiple Deprivation

IoD - Indices of Deprivation

JSA – Job Seekers Allowance

JSNA - Joint Strategic Needs Assessment

LA – Local Authority

LFS – Labour Force Survey

LILEE - Low Income Low Energy Efficiency

MSG – Most similar groups (iQuanta) for police data

MYE – Mid-year population estimate from Office for National Statistics

NEET – Not in Education, Employment or Training

NFER - National Foundation for Educational Research

NHS – National Health Service

NTE – Night Time Economy

OHID - Office for Health Improvement and Disparities

ONS – Office for National Statistics

PCN – Primary Care Network

PHAR – Public Health Annual Report

PNA – Pharmaceutical Needs Assessment

RTC – Road Traffic Collision

SAPF – Small Area Population Forecast from Hampshire County Council

SCC – Southampton City Council

SEND – Special Educational Needs and Disabilities

STIs - Sexually Transmitted Infections

STP - Sustainability and Transformation Plan. A planning framework for NHS services

Sub-ICB – sits under the Integrated Care Boards (ICB) which are within the ICS

SVS - Southampton Voluntary Services

TFR – Total fertility rate

TTWA - Travel to Work Area

UC – Universal Credit

UPRN – Unique Property Reference Number

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VAWG - Violence Against Women and Girls
WAP – Working Age Population (people aged 16 to 64)
WHO – World Health Organisation
YOS - Youth Offending Service

5.   Key data sources

5.1   Global Burden of Disease

The Global Burden of Disease (GBD) study provides a comprehensive picture of mortality and disability across countries, time, age, and sex. It quantifies health loss from hundreds of diseases, injuries, and risk factors, so that health systems can be improved and disparities eliminated. More information is available on the Global Burdon of Disease.

5.2   GOV.UK – Research and Statistics

A searchable directory of all data and statistical releases published (or due to be published) by all UK government departments. This data is produced impartially and free from political influence. More information is available on the research and statistics section of GOV.UK.
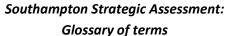
5.3   Home Office

The home office produces statistics and data on various subjects including crime, migration, policing and alcohol and drugs. More information is available on the statistics section of the Home Office website.

5.4   NHS England (formally NHS Digital)

NHS England manage a number of data collections covering many aspects of health and social care and collected from a wide variety of NHS trusts, local authorities, and independent-sector organisations. Including GP populations, Hospital Episode Statistics and NCMP (childhood weight management data). More information is available on the NHS England (formally NHS Digital) website.

5.5   NOMIS

NOMIS is a web-based database of labour market statistics run by the University of Durham on behalf of the Office for National Statistics. NOMIS houses a range of government statistical information on the UK labour market including Census data, population estimates and projections, employment, unemployment, earnings, benefits, the Annual Population Survey and life events including mortality statistics, marriages and divorces and live births data. More information is available on the NOMIS website.

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5.6   The Office for National Statistics

The UK's largest independent producer of official statistics and its recognised national statistical institute. Responsible for collecting and publishing statistics related to the economy, population and society at national, regional and local levels. Also conducting the census in England and Wales every 10 years. More information is available on the Office for National Statistics website.

5.7   Public Health Profiles (Fingertips)

The Public Health profiles set out a vision for public health, that is to improve and protect the nation's health, and improve the health of the poorest fastest. Based on a set of supporting indicators (grouped into domains) that help focus the understanding of how well each area is doing. More information is available in the Public Health profiles from the Office for Health Improvements and Disparities (OHID).

5.8   SHAPE Place Atlas

Supported by the Department of Health and Social Care, SHAPE is a web enabled, evidence based application that informs and supports the strategic planning of services and assets across the public sector. The primary aim of the application is to facilitate scenario planning and option appraisals in support of public services. Its analytical and presentation features can help service commissioners to determine the service configuration that provides the most affordable access to services. The demographic and service data, combined with the information on estates location and performance, is also used to support estates strategy and business case development. To use the site a user needs to register for SHAPE on the site. More information on SHAPE is available on the SHAPE Atlas website.

5.9   Southampton City Council

Southampton City Council's main website Southampton City Council

5.10   Stat-Xplore

Stat-Xplore provides a guided way to explore Department for Work and Pensions (DWP) benefit statistics, currently holding data relating to a range of different benefits/programmes. More information is available on the Stat-Xplore website.