



# Southampton Better Care Locality Profiles 2019

## West Locality



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**Directly age standardised rate (DSR)** – a rate that takes into account the underlying population’s age structure. DSRs can be used to calculate prevalence, incidence, admission and mortality rates.

**Crude rate** – a calculated rate that does not take into account the underlying population’s age structure, but is often restricted to certain age groups e.g. children aged 0-4 years.

**Lower Super Output Area (LSOA)/neighbourhood** – a small geographical area that approximately contains 1,500 people; within Southampton there are 148 LSOA’s.

**Index of Multiple Deprivation (IMD)** - The Index of Multiple Deprivation (IMD) measures deprivation in each neighbourhood (LSOA) in the country, across a number of domains including income, employment, education, health, crime, barriers to housing and services and living environments.

**Multi-morbidity** – a term used to describe individuals living with multiple long-term conditions, typically 3 or more conditions.

**General Fertility Rate (GFR)** – the live birth rate per 1,000 females aged 15 to 44 years.

**Healthy life expectancy** – a measure of the average number of years a person would expect to live in good health based on contemporary mortality rates and prevalence of self-reported good health within an area.



# Scope and Caveats



These packs have been developed to provide a summary of the population health of Localities, which will help inform the setting of priorities. GP practice and locality profiles in the form of a spine chart have also been developed alongside packs, which summarise 65 indicators across 9 themes.

Within the packs, both registered and resident populations have been used. The decision to look at both registered and resident populations was taken as this enables us to look at a wider range of data sources, allowing us to take a more holistic approach in looking at population health.

- For registered population metrics, locality values have been calculated by aggregating information at GP practice level for practices that belong to a locality.
- For resident population metrics, locality values have been calculated by aggregating resident information by electoral wards that belong to a locality. Practice values for resident populations have been calculated using GP catchments, which are defined by grouping LSOAs (Lower Super Output Area) which have 100 or more registered patients resident within them as of January 2019. One hundred was selected as it provided optimum coverage (%) of registered patients for practices, without significantly diluting the analysis.

This pack contains information on disease prevalence taken from annual QoF returns. As this data is not available by age group, it has not been possible to standardise rates for age, and so differences between localities could be a result of different population age structures (with older populations at increased risk of disease). In addition, although we would expect diagnostic rates to be uniform across practices in Southampton, it is possible that differences between localities/practices may partly reflect differences in diagnosis and recording rates at practice level.

It should also be stressed that examining information at locality level may mask inequality, which is why it is important to consider the variation across practices within a locality in addition to looking at the headline figure.

This pack contains information on adult social care, however, it should be noted that any changes in support provided over time is unlikely to be reflective of need, as adult social care need is increasing and is likely to continue to do so with a forecasted ageing population. In reality, changes in adult social care support is more likely to be reflective of changes in resource and eligibility criteria. There are also some data caveats associated with adult social care data:

- Service users may be double counted if they move address during the year, on average this affects <5% of records
- Some service users have unmatched postcodes, on average this affects <2% of records in relation to reablement support
- Adult social care referrals: it should be noted that this is a measure of all referrals, therefore the same person can be referred more than once

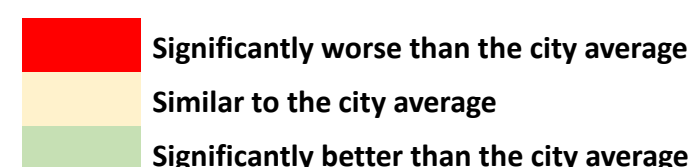


Within these packs there are two legends associated with the infographics and charts produced for most indicators. As it has not always been possible to put the legends directly next to the corresponding infographic/chart, this slide illustrates which legends are associated with the infographics/charts shown throughout the packs.

The legend on right is associated with the infographics below it and the legend on the left is associated with the chart below it.

The infographics on the left illustrate whether the locality value is significantly different to the city average and colour coded accordingly. The best and worst locality GP Practice values are also shown, which have been identified by their practice codes underneath. It is important to note that the terms 'best' and 'worst' are the standard terminology used in Population Health Intelligence and are widely used by Public Health England.

The purpose of the chart on the right is to show where the locality value and locality GP Practices sit amongst other localities, GP Practices and the city average to highlight the variation across GP Practices in the locality. This is important because undertaking analysis at locality level can sometimes mask inequalities among practices within that locality.



## Breastfeeding initiation

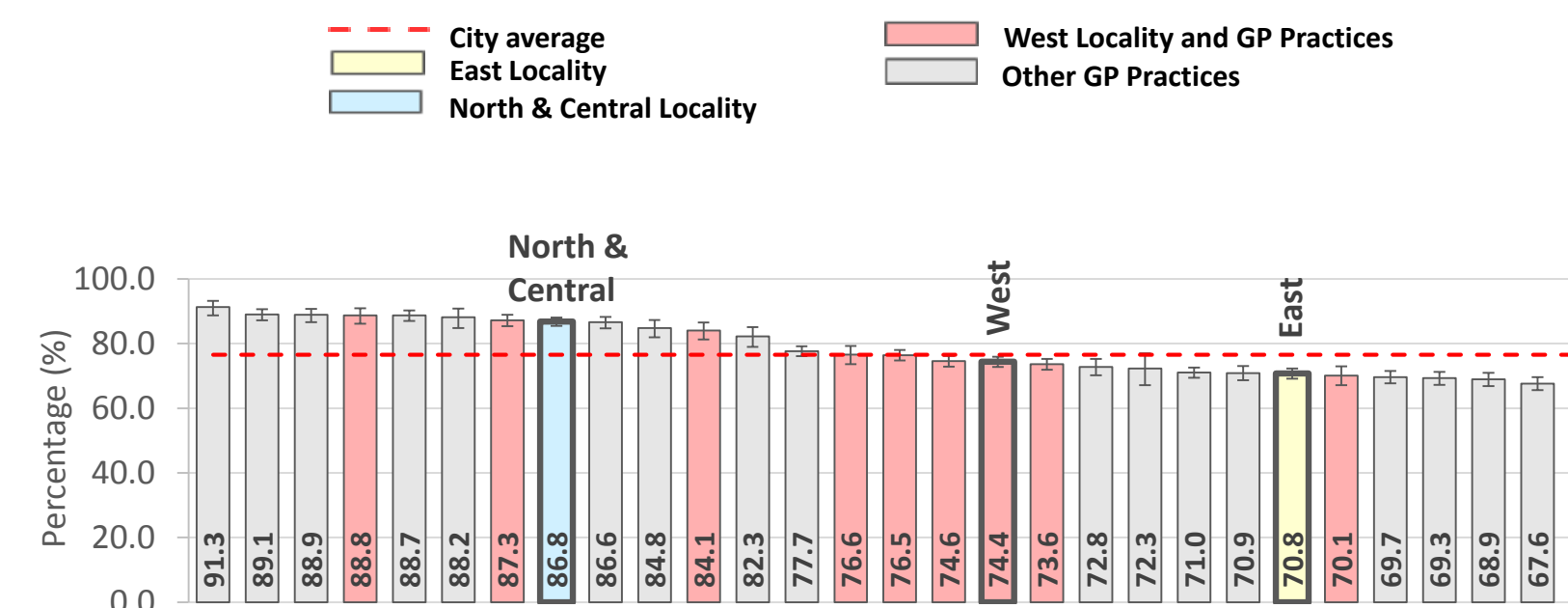
**74.4%**  
City average 76.6%



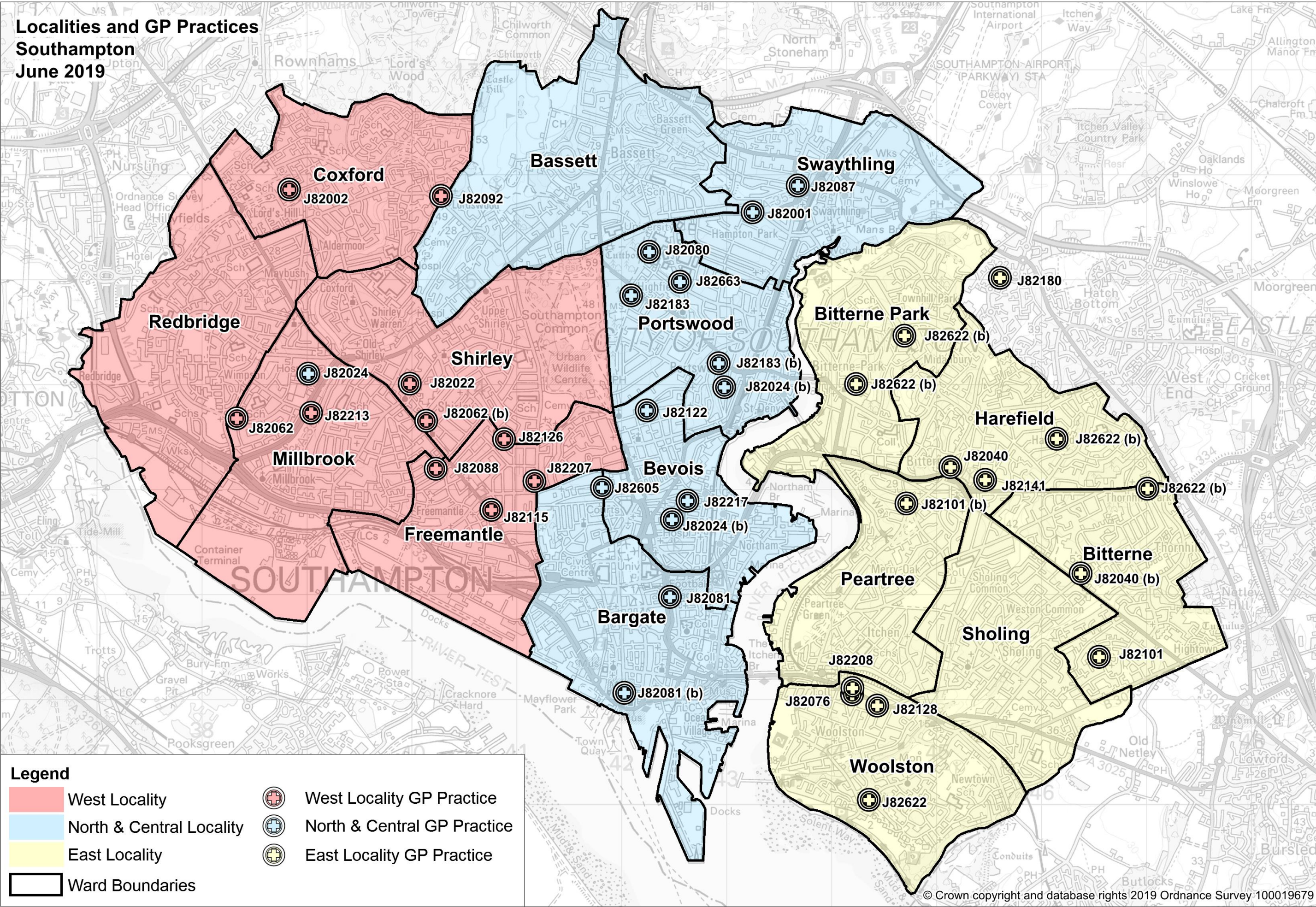
2016-18

## Locality Practice Best/Worst

**Best 88.8%**  
(J82126)  
**Worst 66.2%**  
(J82213)







## West Locality

### GP Practices

J82002	Lordshill Health Centre
J82022	Victor Street Surgery
J82062	Cheviot Road Surgery
J82088	The Shirley Health Partnership
J82092	Aldermoor Surgery
J82115	Atherley House Surgery
J82126	Raymond Road Surgery
J82207	Hill Lane Surgery
J82213	Brook House Surgery

### Electoral Wards

Coxford
Freemantle
Millbrook
Redbridge
Shirley

## North & Central Locality

### GP Practices

J82001	Burgess Road Surgery
J82024	Solent GP Surgery
J82080	University Health Service
J82081	St. Mary's Surgery
J82087	Stoneham Lane Surgery
J82122	Alma Medical Centre
J82183	Mulberry Surgery
J82217	Homeless Healthcare Team
J82605	Walnut Tree Surgery
J82663	Highfield Health

### Electoral Wards

Bargate
Bassett
Bevois
Portswood
Swaythling

## East Locality

### GP Practices

J82040	West End Road Surgery
J82076	Woolston Lodge Surgery
J82101	Chessel Practice
J82128	Old Fire Station Surgery
J82141	Bath Lodge Practice
J82180	Townhill Surgery
J82208	St. Peter's Surgery
J82622	Living Well Partnership

### Electoral Wards






Bitterne
Bitterne Park
Harefield
Peartree
Sholing
Woolston



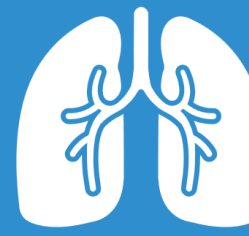



# West Locality Headlines





## Population & Demography

-  27.1% of the GP registered population live within the **20%** most deprived neighbourhoods nationally
-  The locality has a **higher proportion** of GP registered population that are **children (20.9%)** and **elderly (15.0%)** than the city average
-  **Resident population** in the locality is expected to **grow** by **4.8%** between 2018-2025. Forecasts also show an **increasing ageing population**
-  **79.6%** of residents living in West Locality are white British and **89.3%** of residents have English as their first language
-  West Locality has the **second highest** number of **live births** and **General Fertility Rate** compared to other localities



## Chronic conditions

-  The locality is **significantly worse** than the city average for the **prevalence of respiratory diseases: 2,105 (2.4%)** registered patients have **COPD** **5,789 (6.7%)** registered patients have **asthma**
-  West Locality has a **significantly worse diabetes prevalence** than the city average: **4,467 (6.5%)** registered patients have **diabetes**
-  The locality is **significantly worse** than the city average for the **prevalence of circulatory diseases: 10,552 (12.2%)** registered patients have **hypertension** **2,268 (2.6%)** registered patients have **Coronary Heart Disease**
-  West Locality has a **significantly worse prevalence of multiple chronic conditions** than the city average: **13,418 (16.2%)** registered patients have **3 or more** chronic conditions

## Children and young people

-  **Smoking during pregnancy (16.3%)** is **significantly worse** than the city average
-  **Admissions for unintentional /deliberate injuries (15-24 years)** are **significantly worse** than the city average


## Mental health

-  **Depression prevalence (12.3%)** is **significantly worse** than the city average
-  **Dementia prevalence (0.65%)** is **significantly worse** than the city average

## Health behaviours

-  **Obesity prevalence (10.4%)** is **significantly worse** than the city average
-  **Smoking prevalence (21.4%)** is **significantly worse** than the city average
-  **Alcohol specific admissions** are **significantly better** than the city average

## Wider determinants

-  The locality has a **significantly higher** proportion of **lone parent households (8.0%)** compared to the city average
-  **3.1%** of residents are **unemployed**



# Population and Demographics

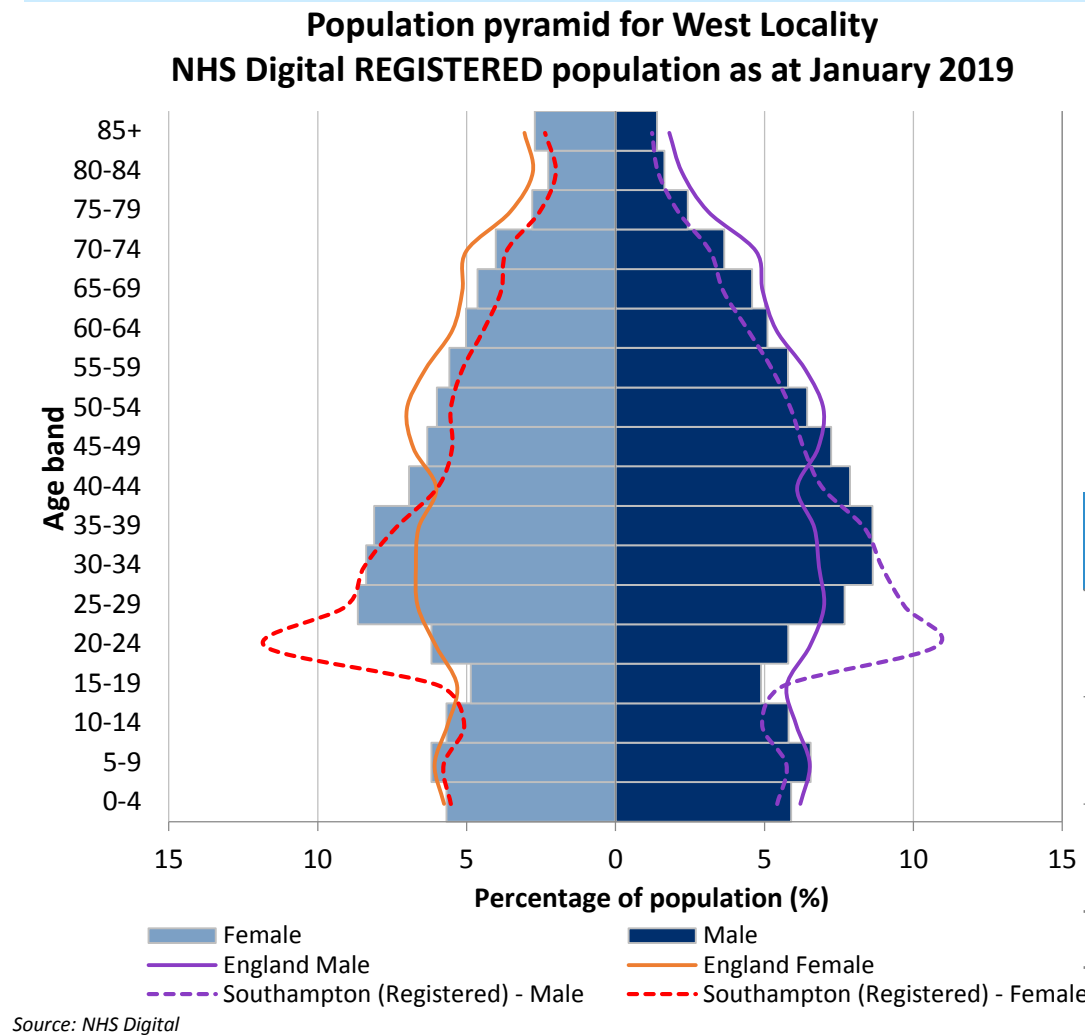




# Population and Demographics



## Registered Population

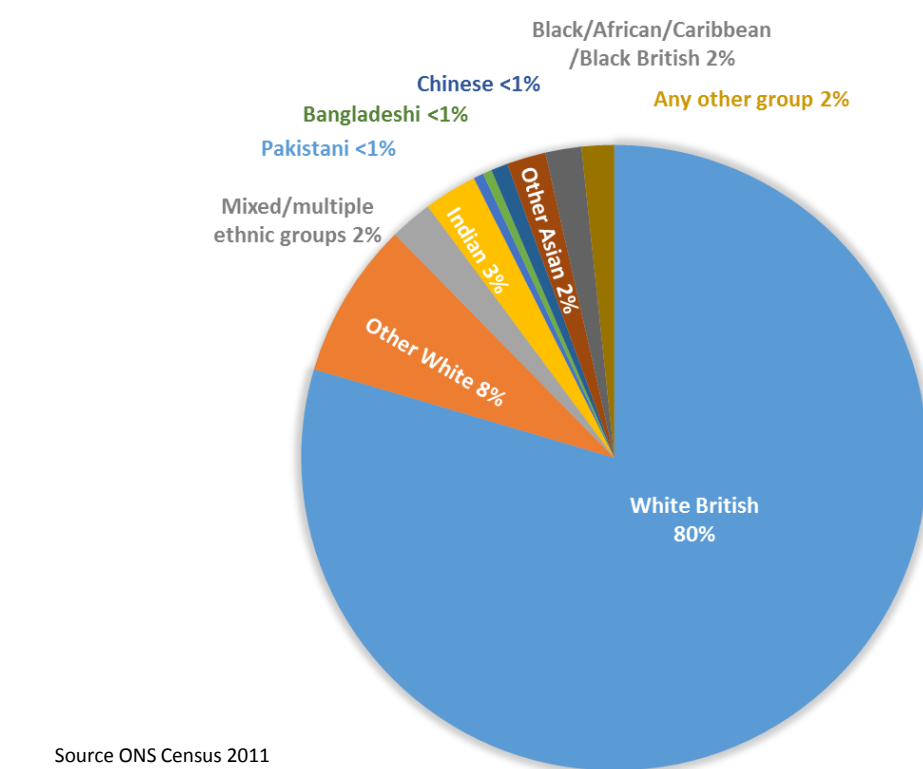


West Locality has a slightly higher proportion of children and older people than the city average. However, it has a lower proportion of working age adults than average. This is likely as a result of fewer students living in the West, compared to North & Central for example.

West Locality	Male	Female	Total	%	City Average
Children & Young People (0-17yrs)	9,318	8,782	18,100	20.9%	18.8%
Working Age Adults (18-64yrs)	28,517	26,973	55,490	64.1%	68.3%
Older People (65 yrs and over)	6,001	7,029	13,030	15.0%	12.9%
<b>Total</b>	<b>43,836</b>	<b>42,784</b>	<b>86,620</b>	<b>100%</b>	<b>100%</b>

Source: NHS Digital REGISTERED population as at January 2019

## Ethnicity

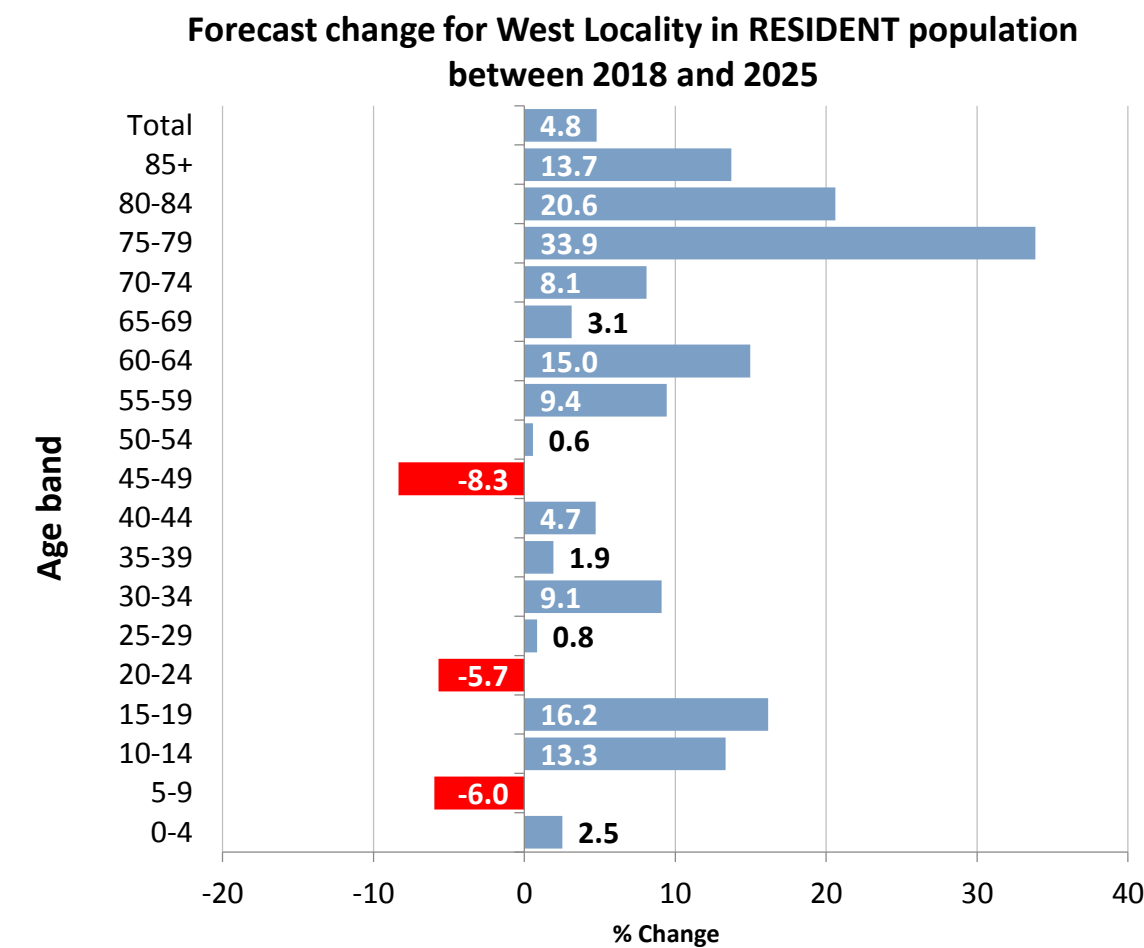


The majority of people living in West Locality are White British (79.6%), which is slightly higher than the city average (77.7%).

White British	79.6%	Black/African/Caribbean/Black British	1.9%
Other White	8.1%	Any other group	1.7%
Indian	2.8%	Chinese	0.9%
Mixed/multiple ethnic groups	2.2%	Pakistani	0.5%
Other Asian	2.0%	Bangladeshi	0.5%

Note – values are based on **RESIDENT** populations  
Pie chart uses values rounded to the nearest percent

## Population Forecasts



Data Source: Hampshire County Council 2018-Based Southampton Small Area Population Forecasts

Between 2018 and 2025 West Locality's **resident** population is expected to increase by 4.8% (3,749 people), with the city's resident population expected to increase by 6.5% (16,599 residents) over the same period.

The chart to the left shows the forecast percentage change in resident population for West Locality between 2018 and 2025, by five year age bands.

Forecasts for West Locality show an increasing ageing resident population, with the greatest proportional increases projected to be among those aged 75-79 (33.9%) and 80-84 (20.6%) years.

Note - forecasts are based on **RESIDENT** populations

## Language

West Locality has the second largest percentage of people who have English (89.3%) as their first language, which is slightly higher than the city average (88.2%).

Language	East Locality Number, %	North & Central Locality Number, %	West Locality Number, %
English	76,549, 95.4%	60,413, 79.4%	63,390, 89.3%
Other European Language (EU)	2,037, 2.5%	5,425, 7.1%	4,271, 6.0%
South Asian Language	318, 0.4%	2,952, 3.9%	1,058, 1.5%
East Asian Language	312, 0.4%	2,492, 3.3%	940, 1.3%
West/Central Asian Language	269, 0.3%	1,568, 2.1%	273, 0.4%
Arabic	98, 0.1%	807, 1.1%	114, 0.2%
African Language	140, 0.2%	684, 0.9%	185, 0.3%
Other	489, 0.6%	1,746, 2.3%	751, 1.1%


Note – values are based on **RESIDENT** populations

Source: ONS Census 2011

Live births and fertility rates



1,052 live births in 2017



63.9 births per 1,000 females (15-44 years) in 2017

West Locality has consistently had the second highest fertility rate and number of live births among the three city localities. The number of live births fluctuated between 2013 and 2015. However, since 2015 the number of live births in West Locality has declined. Overall, the number of live births declined by 9% between 2013 and 2017, which is similar to the city wide average of 9%.

West Locality has the second highest GFR across all localities, with the GFR remaining significantly higher than the city average throughout the 2013 to 2017 period.

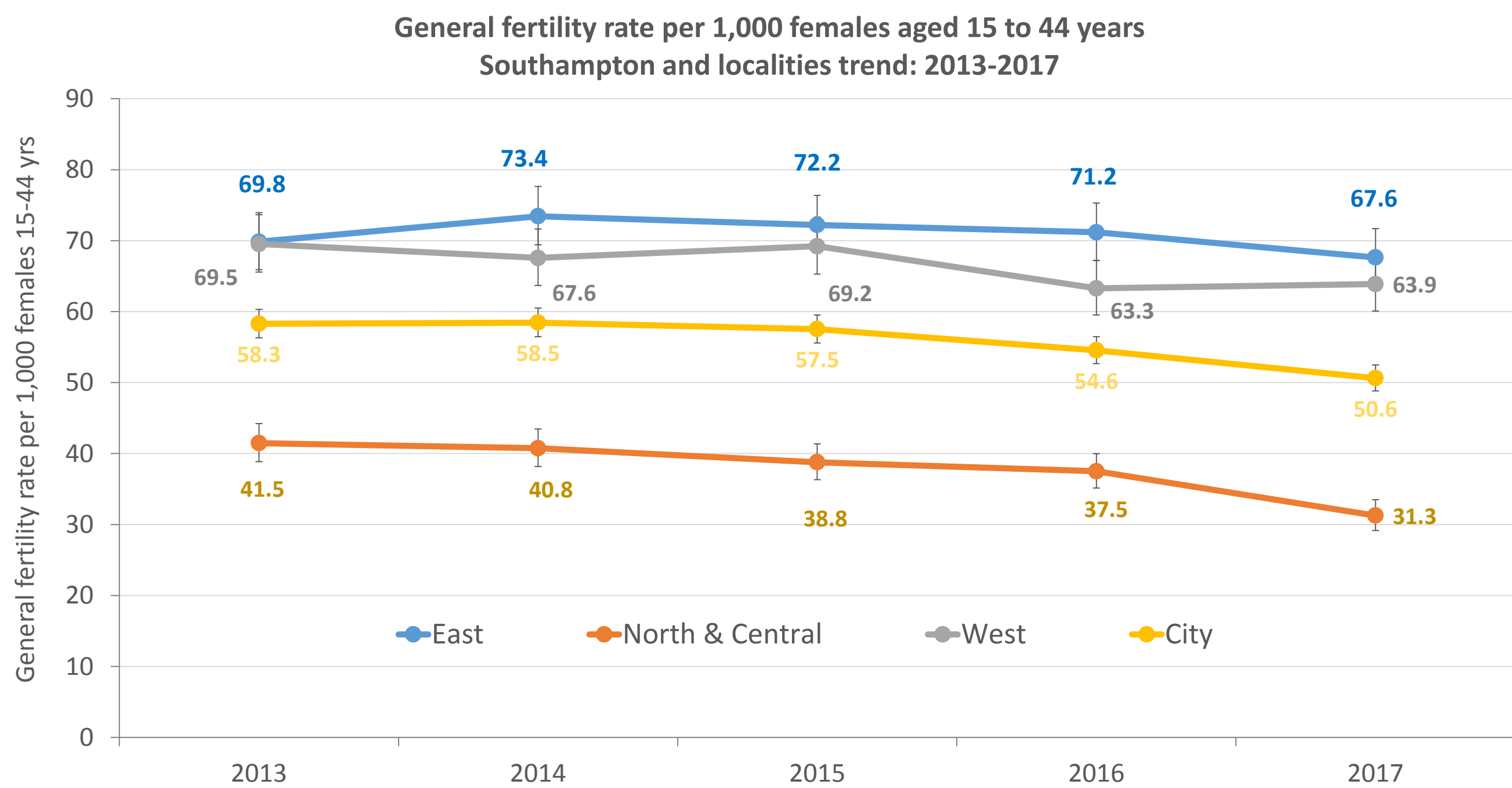


Table showing number of live births over a five year period and annual percentage change

Area	2013	2014 Number, % change	2015 Number, % change	2016 Number, % change	2017 Number, % change
East	1,178	1,245, 5.7%	1,229, -1.3%	1,201, -2.3%	1,125, -6.3%
North & Central	940	934, -0.6%	920, -1.5%	938, 2.0%	809, -13.8%
West	1,152	1,124, -2.4%	1,155, 2.8%	1,055, -8.7%	1,052, -0.3%
Southampton	3,270	3,303, 1.0%	3,304, 0.0%	3,194, -3.3%	2,986, -6.5%





# Life Expectancy & Healthy Life Expectancy



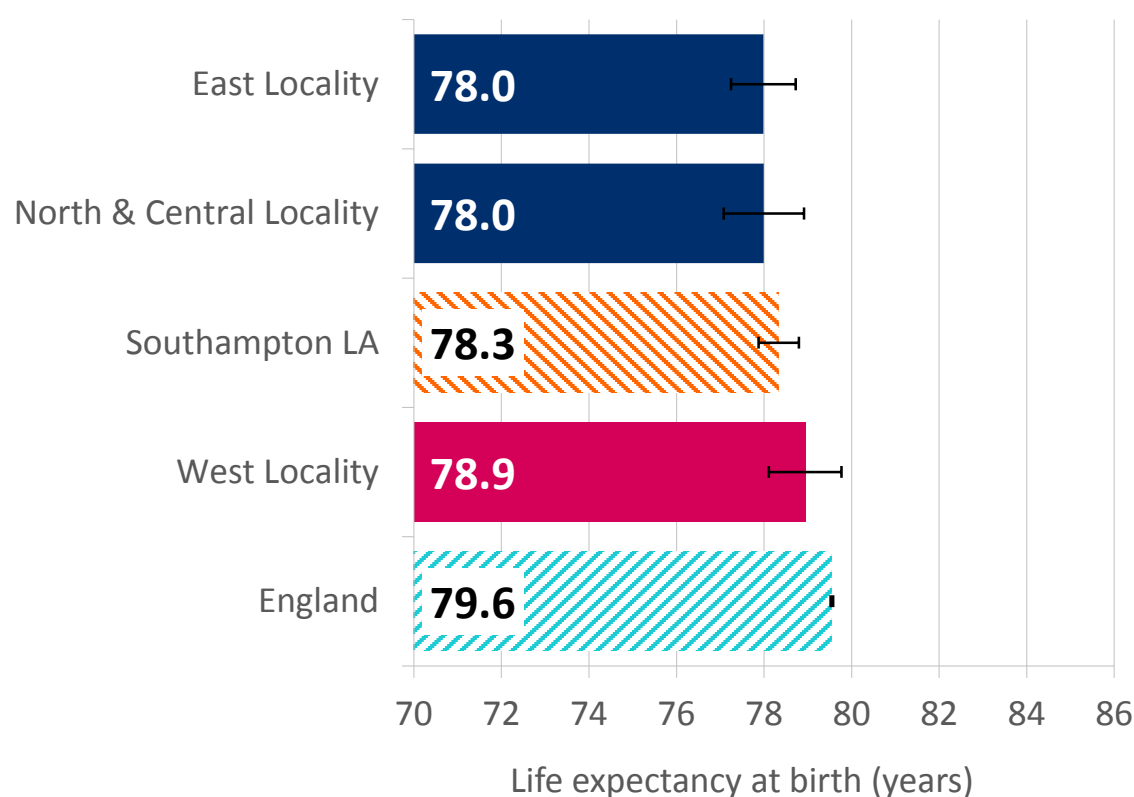
## Life expectancy

Males in West Locality will on average live 4.0 years less than females, which is in line with the national gap (3.5 years) and Southampton average (4.1 years).

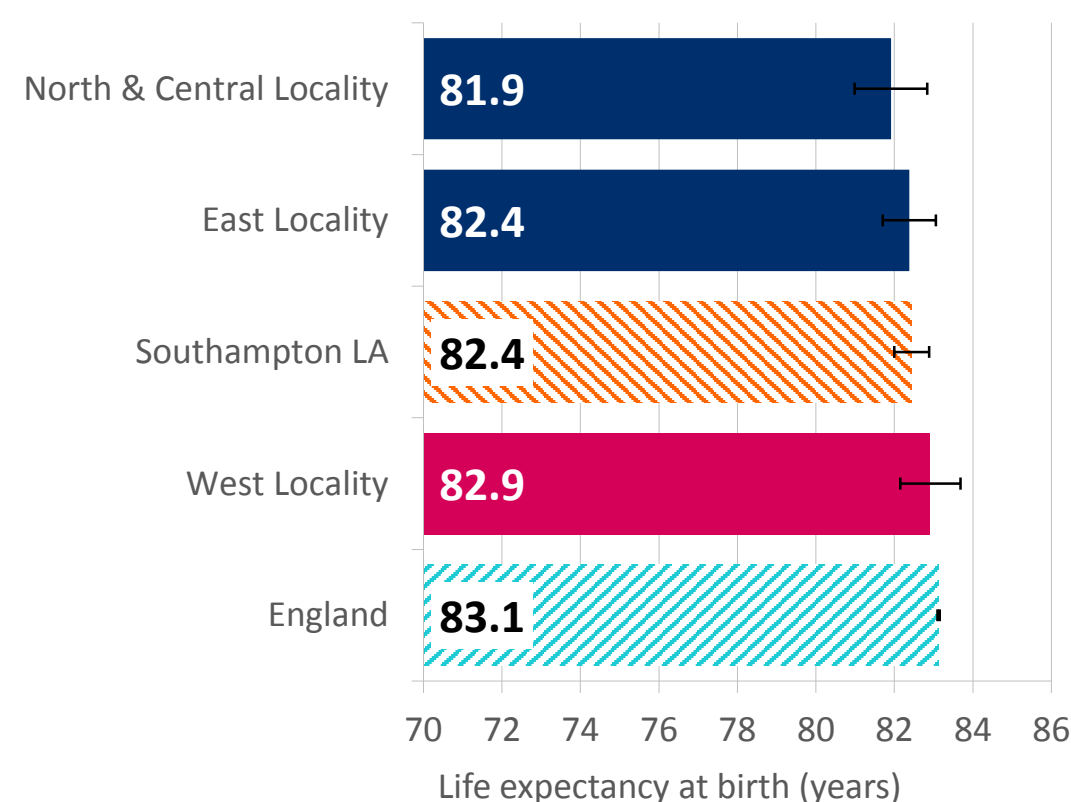
Both male and female life expectancy at birth for West Locality is lower, but not significantly than the England average, with a gap of -0.7 years for males and -0.2 years for females compared to England. The gap between West Locality resident's life expectancy and England is smaller than the gap between life expectancy for all Southampton resident's and England, in which Southampton is significantly lower than the England average (-1.3 year gap for males and -0.7 year gap for females compared to England).

The charts below show that West Locality has the highest life expectancy for both males and females in Southampton. However, it should be noted that some of the differences between areas are not statistically significant, so the confidence intervals should be taken into account when interpreting the charts below.

Life expectancy at birth (Males): England, Southampton LA and Localities 2015-17



Life expectancy at birth (Females): England, Southampton LA and Localities 2015-17



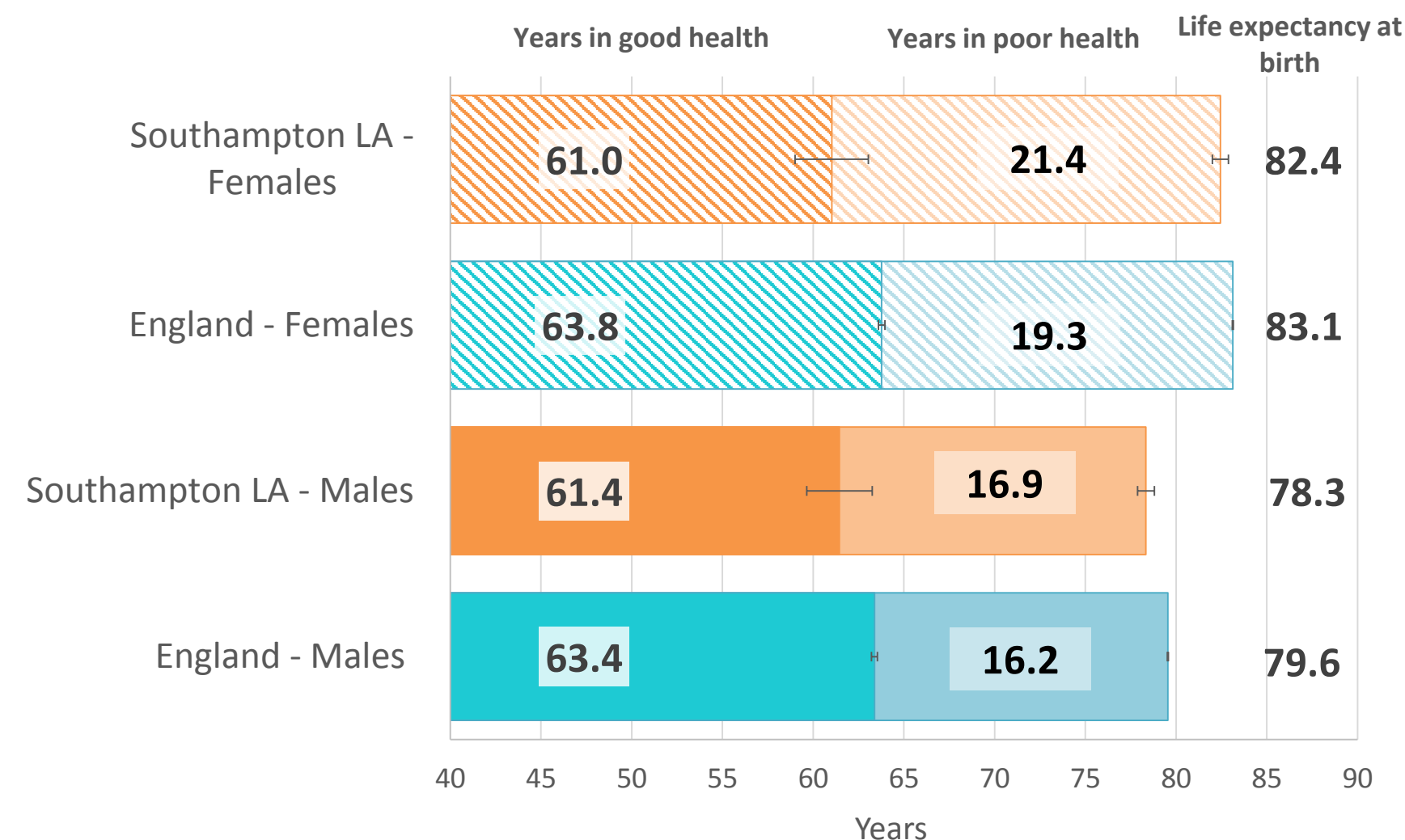
## Healthy life expectancy

Healthy life expectancy describes the number of years a person can expect to live in good health.

The chart below shows the number of years males and females in Southampton are expected to live in good health compared to England. The chart shows that not only do people living in Southampton live shorter lives compared to England, they also live in poorer health for longer.

Previously, females in Southampton lived in better health for longer than males. However, data from the most recent period shows that across Southampton females are now living longer in poorer health than males. Data for this indicator is not available at locality level.


Years expected to live in "good" and "poor" health for males and females - England and Southampton: 2015-17




## Causes of death

In 2017 there were **1,898 resident** deaths in Southampton. The top 3 causes were:

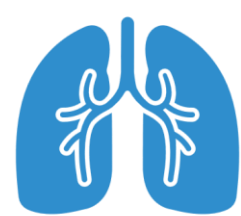
1.



**Cancer**  
28.0%
2.



**Circulatory disease**  
22.9%
3.



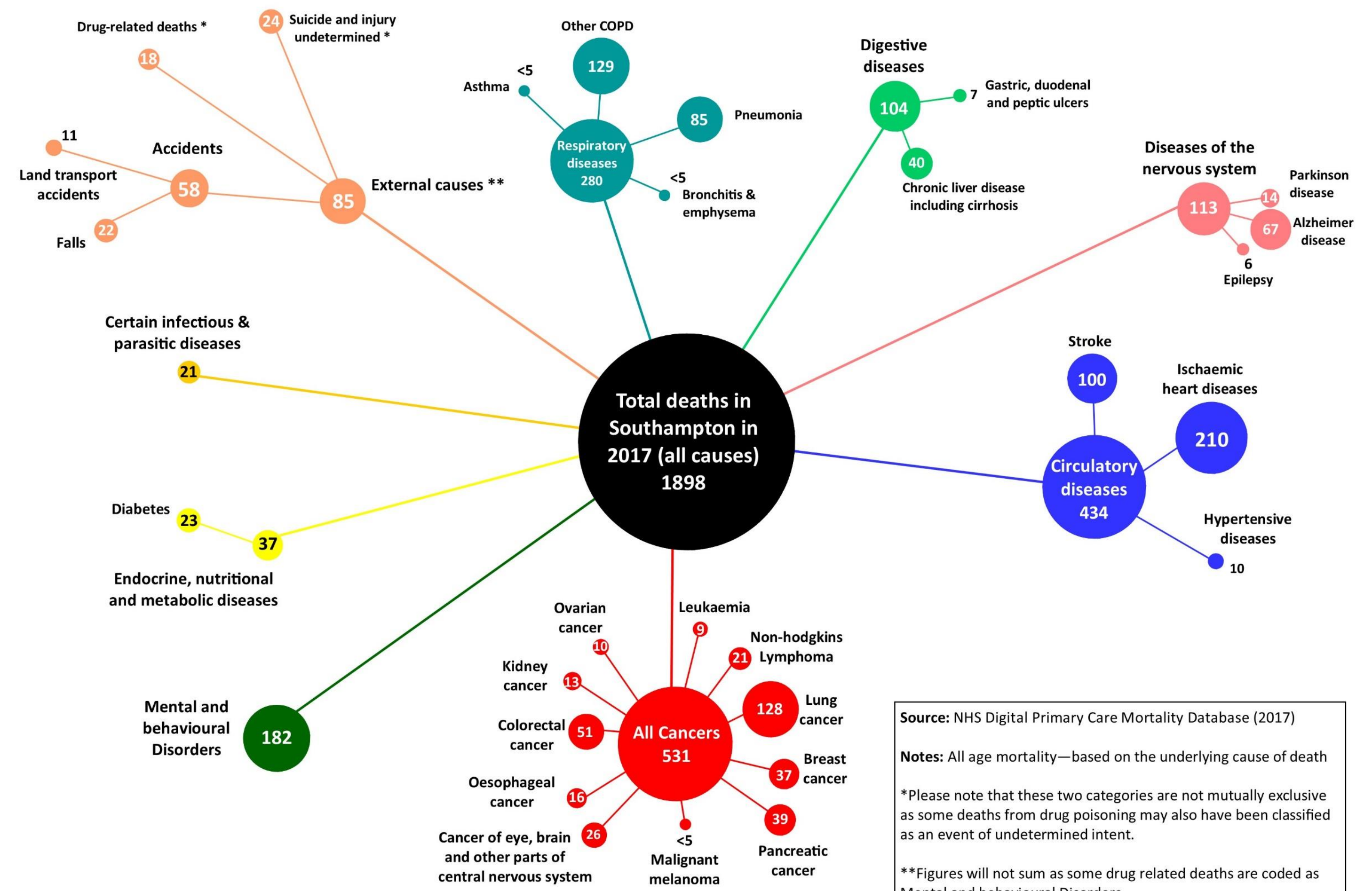
**Respiratory disease**  
14.8%

These were the top three causes of death for all three Southampton localities, although the proportions vary slightly (see table below)

Table showing the top 3 causes of deaths (%) in 2017 by Locality

Locality	Cancer (%)	Circulatory disease (%)	Respiratory disease (%)
East	26.3	22.7	13.6
North & Central	26.2	23.5	14.8
West	32.3	22.4	16.5

Bubble chart showing main causes of death in Southampton



Source: NHS Digital Primary Care Mortality Database (2017)

Notes: All age mortality—based on the underlying cause of death

\*Please note that these two categories are not mutually exclusive as some deaths from drug poisoning may also have been classified as an event of undetermined intent.

\*\*Figures will not sum as some drug related deaths are coded as Mental and behavioural Disorders





# Mortality



## Premature mortality



2015-17

DSR per 100,000 population

**346 per 100k**

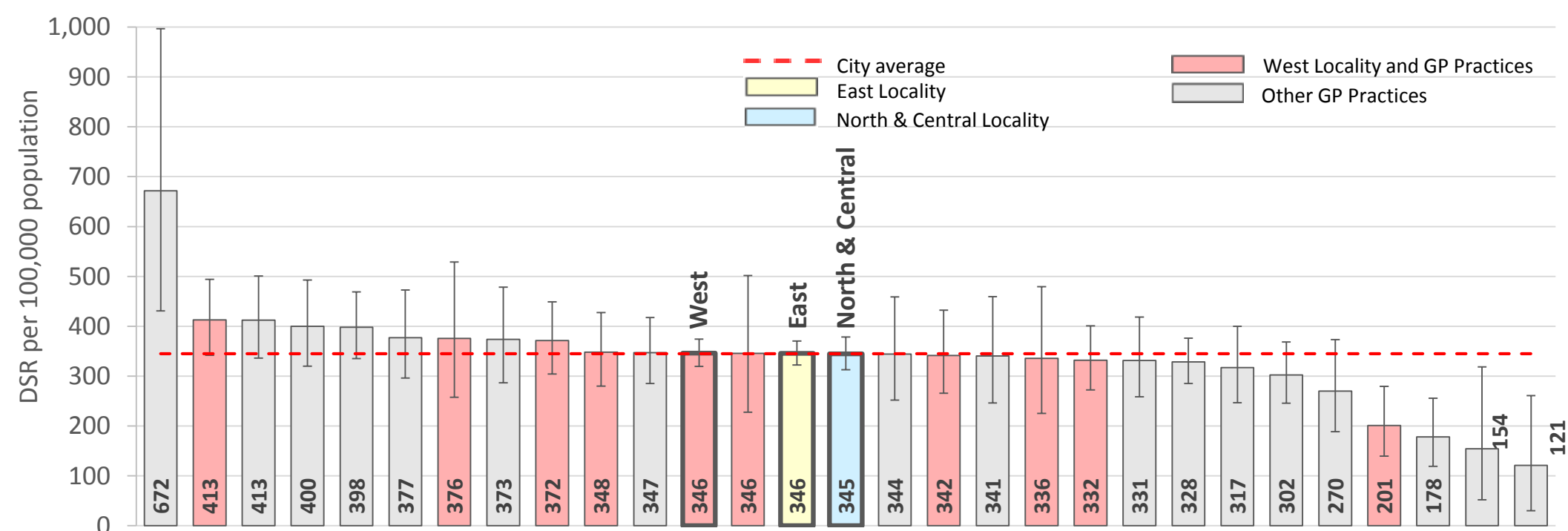
City average 345 per 100k

Locality Practice Best/Worst

**Best 201**  
per 100k  
(J82207)

**Worst 413**  
per 100k  
(J82002)

Chart showing variation in **premature mortality** rates across GP Practices and Localities in Southampton



Premature mortality measures deaths occurring in the under 75 age group. West Locality has a similar premature mortality rate compared to the city average and other localities. However, the chart above illustrates how there is some variation across practices within West Locality. Nonetheless, eight of the nine West Locality GP practices have a similar premature mortality rate compared to the city average (one practice is significantly better).

## Preventable mortality



2015-17

DSR per 100,000 population

**211 per 100k**

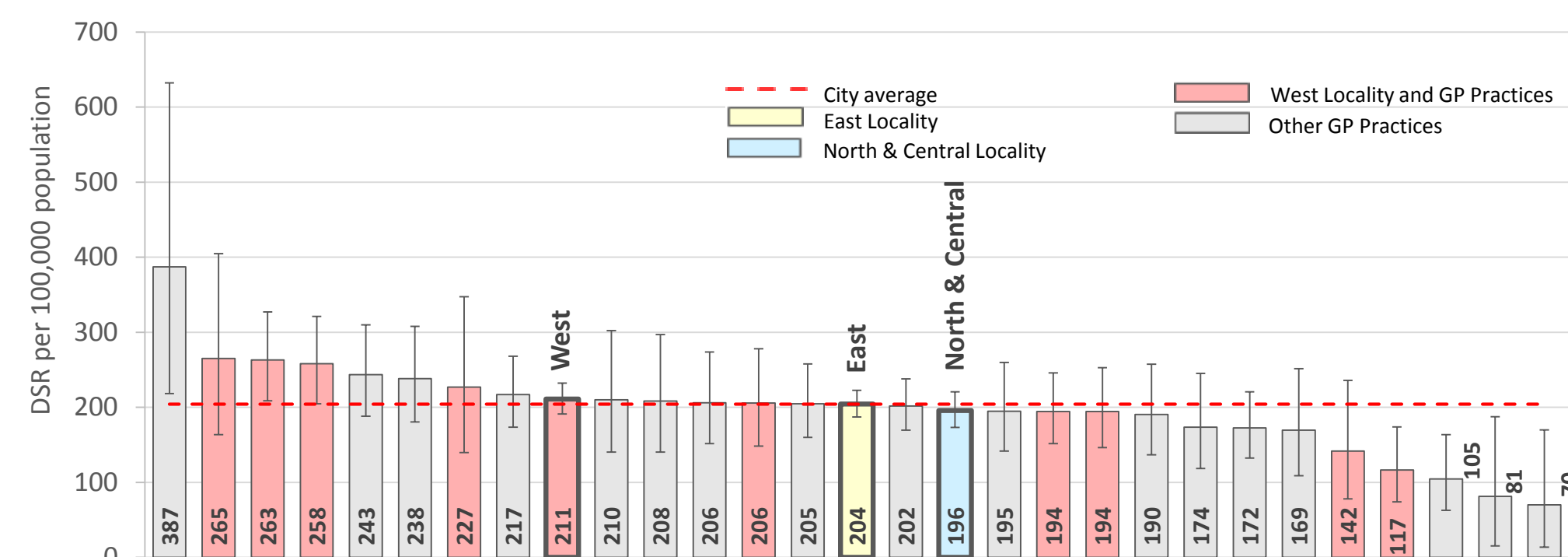
City average 204 per 100k

Locality Practice Best/Worst

**Best 117**  
per 100k  
(J82207)

**Worst 265**  
per 100k  
(J82115)

Chart showing variation in **preventable mortality** rates across GP Practices and Localities in Southampton



Preventable mortality measures deaths from causes that are considered preventable. West Locality has a similar preventable mortality rate compared to the city average and other localities. There is some variation across practices within West Locality (see chart above), although eight of the nine West Locality GP practices have a similar premature mortality rate compared to the city average (one practice is significantly better).

- Significantly worse than the city average
- Similar to the city average
- Significantly better than the city average



# Population health



# Children and Young People



## Healthy Start

### Breastfeeding initiation

**74.4%**

City average 76.6%



2016-18

#### Locality Practice Best/Worst

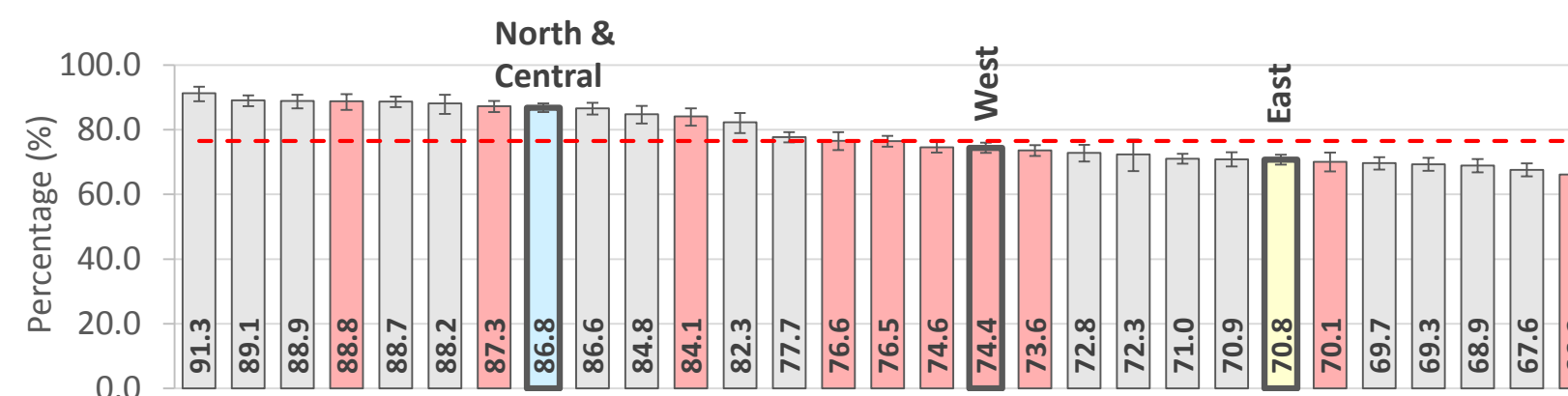
**Best 88.8%**

(J82126)

**Worst 66.2%**

(J82213)

Chart showing variation in **breastfeeding initiation** across GP Practices and Localities in the city.



West Locality has a similar breastfeeding initiation rate compared to the city average. However, breastfeeding initiation rates among locality practice catchments ranges from 66.2% to 88.8%.

### Smoking during pregnancy

(at discharge)

**16.3%**

City average 14.0%



2016-18

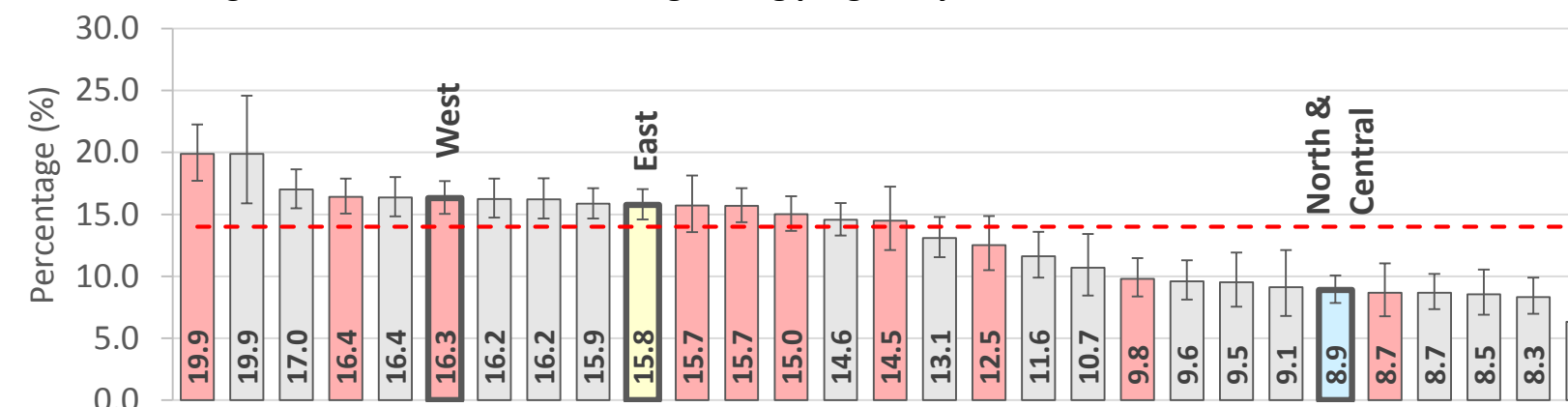
**Best 8.7%**

(J82126)

**Worst 19.9%**

(J82213)

Chart showing variation in **mothers smoking during pregnancy** across GP Practices and Localities in the city.



The locality is significantly worse than the city average for smoking during pregnancy. However, there is variation among locality practice catchments, which ranges from 8.7% and 19.9%. Two locality practice catchments are significantly worse than the city average for smoking during pregnancy, two significantly better and five similar to the city average.

### Teenage maternities

(U20 years)

**4.8%**

City average 4.6%



2016-18

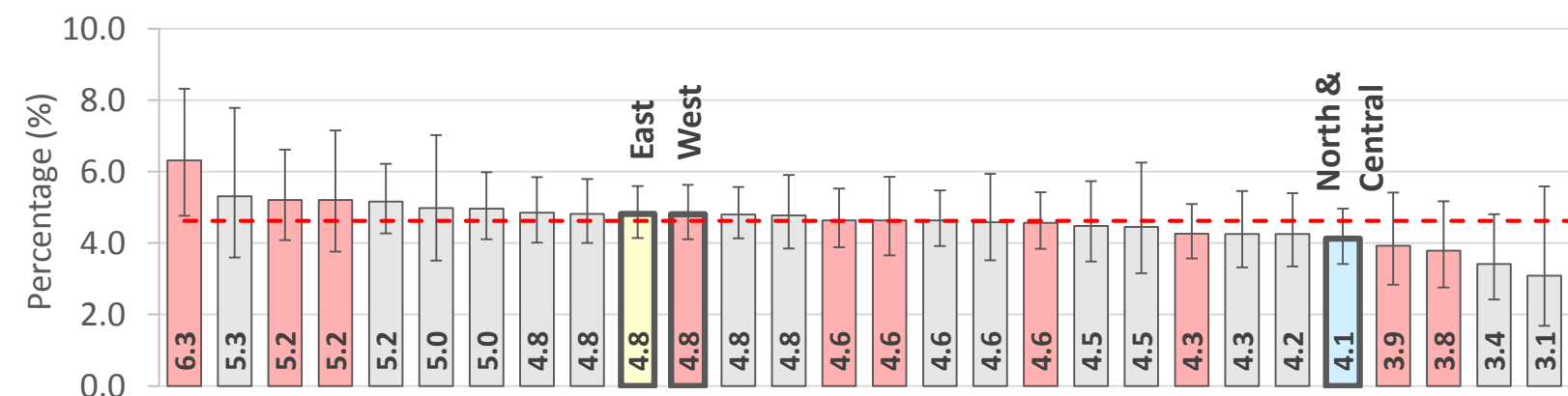
**Best 3.8%**

(J82002)

**Worst 6.3%**

(J82115)

Chart showing variation in **teenage maternities (U20 years)** across GP Practices and Localities in the city.



West Locality is similar to the city average for teenage maternities (U20 years). There is some variation between practice catchments in the locality, although all locality practice catchments are similar to the city average.

More information on Children and Young People's health can be found on the [Southampton Data Observatory](https://southamptondataobservatory.org/).

Significantly worse than the city average  
Similar to the city average  
Significantly better than the city average

City average  
East Locality  
North & Central Locality  
West Locality and GP Practices  
Other GP Practices





# Children and Young People



## Hospital Activity

### 0-4 years emergency admissions

Crude rate per 1,000 population

**169 per 1k**

City average 165 per 1k

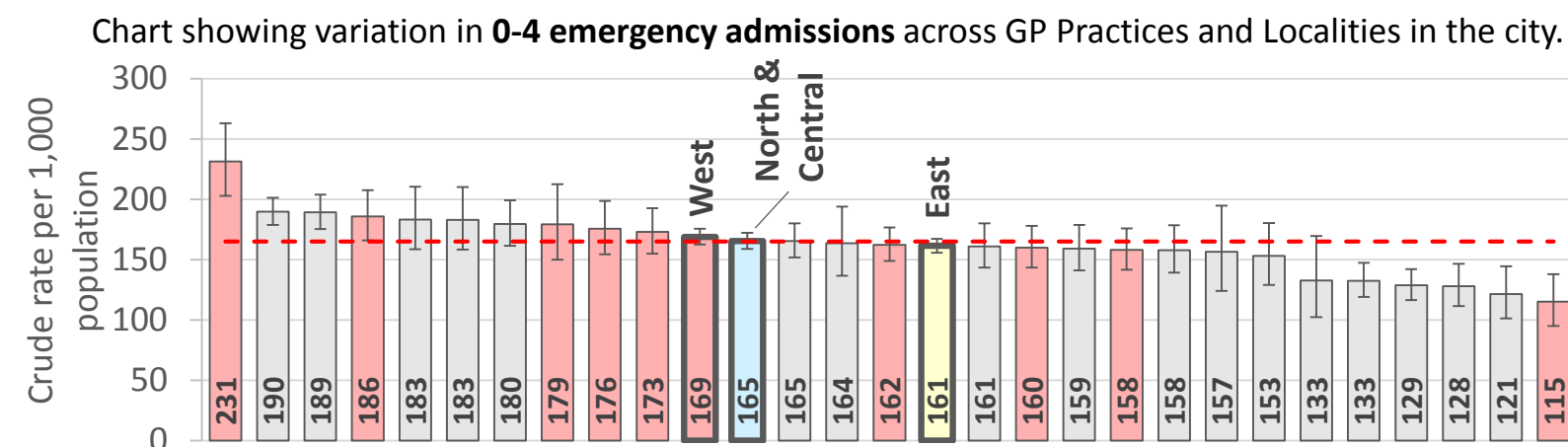


2015/16-2017/18

Locality Practice Best/Worst

Best 115  
per 1k  
(J82115)

Worst 231  
per 1k  
(J82213)



West Locality has a similar emergency admission rate for 0-4 year olds compared to the city average. Seven of the practices in the locality also have a similar admission rate to the city average, with one practice significantly worse and one significantly better than the city average. Locality practice admission rates range from 115 to 231 per 1k children (0-4 years).

### Admissions for unintentional/deliberate injuries (0-14 years)

Crude rate per 10,000 population

**113 per 10k**

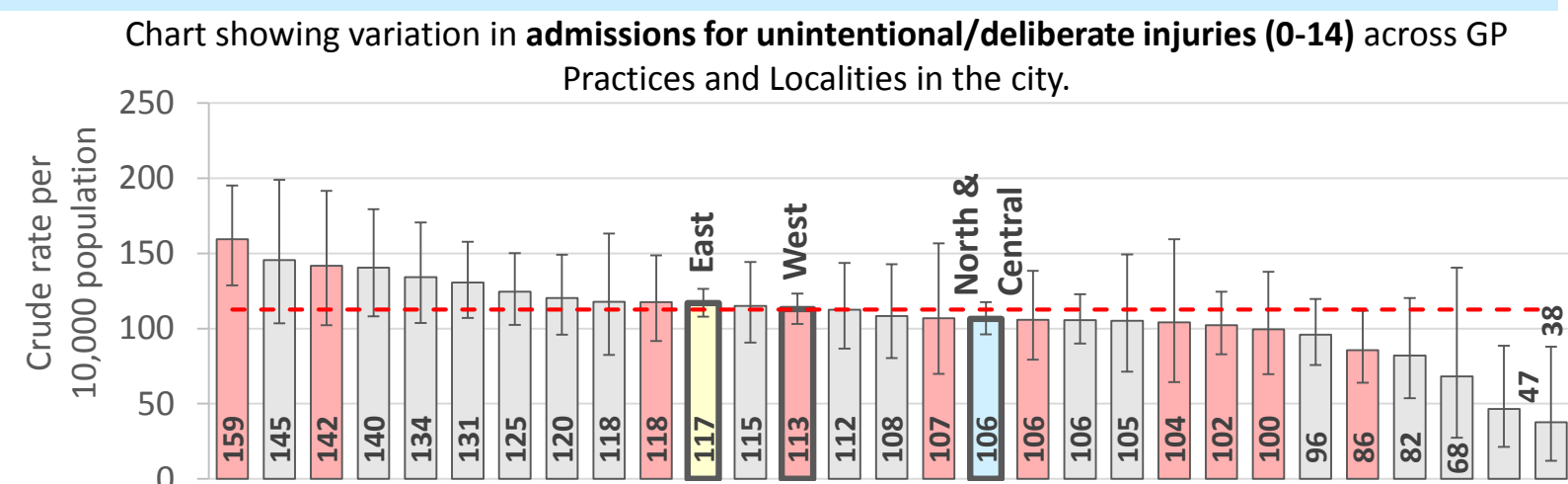
City average 113 per 10k



2015/16-2017/18

Best 86  
per 10k  
(J82088)

Worst 159  
per 10k  
(J82002)



For admissions due to unintentional/deliberate injuries in those aged 0-14 years, West Locality is similar to the city average. Eight of the locality practices also have a similar admission rate to the city average, with only one practice significantly worse than the city average.

### Admissions for unintentional/deliberate injuries (15-24 years)

Crude rate per 10,000 population

**210 per 10k**

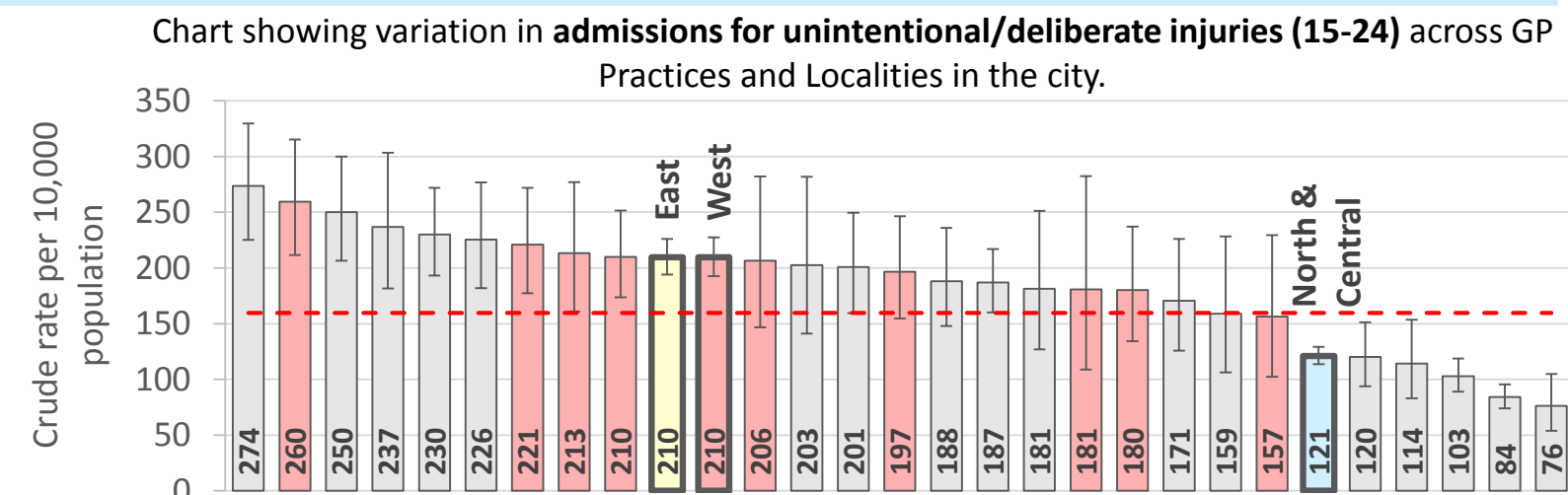
City average 160 per 10k



2015/16-2017/18

Best 157  
per 10k  
(J82115)

Worst 260  
per 10k  
(J82088)



However, for admissions due to unintentional/deliberate injuries among those aged 15-24 years, West Locality is significantly worse than the city average. Three of the eight practices in the locality also have a significantly worse admission rate than the city average. Practice admission rates range from 157 to 260 per 10k population.

### Self-harm admissions (10-24 years)

Crude rate per 10,000 population

**66 per 10k**

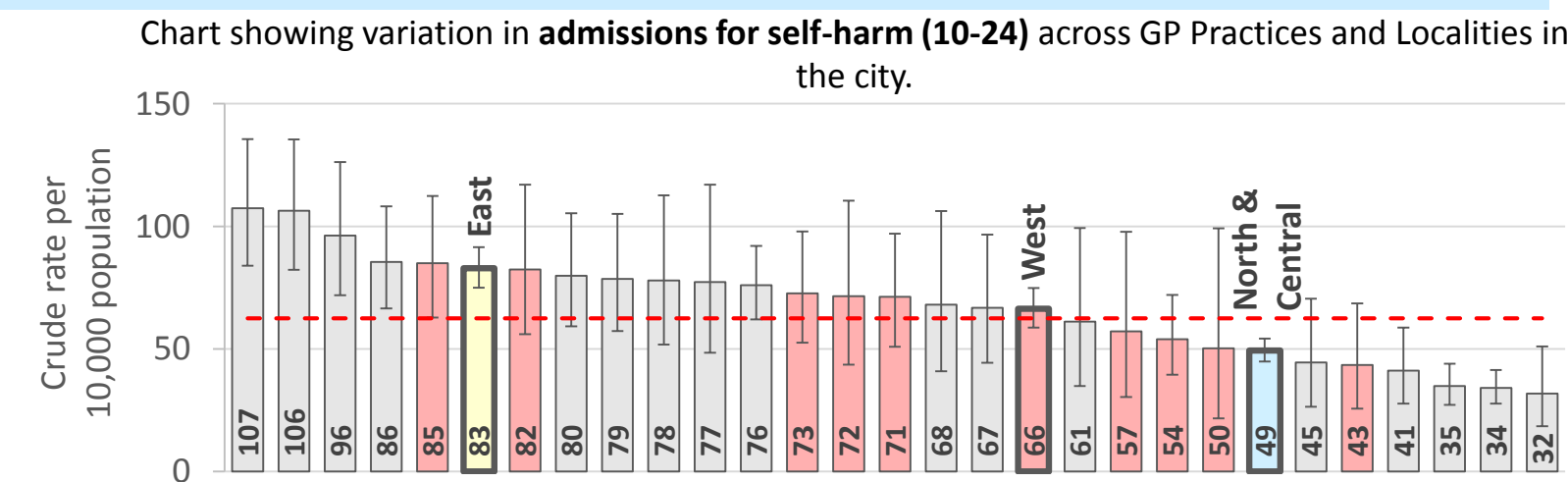
City average 63 per 10k



2015/16-2017/18

Best 43  
per 10k  
(J82092)

Worst 85  
per 10k  
(J82088)



West Locality is similar to the city average for self-harm admissions (10-24 years), with all locality practices also statistically similar to the city average.



# Children and Young People



## Childhood Obesity

### Year R obesity prevalence

**11.4%**

City average 10.4%



2015/16-2017/18

### Locality Practice Best/Worst

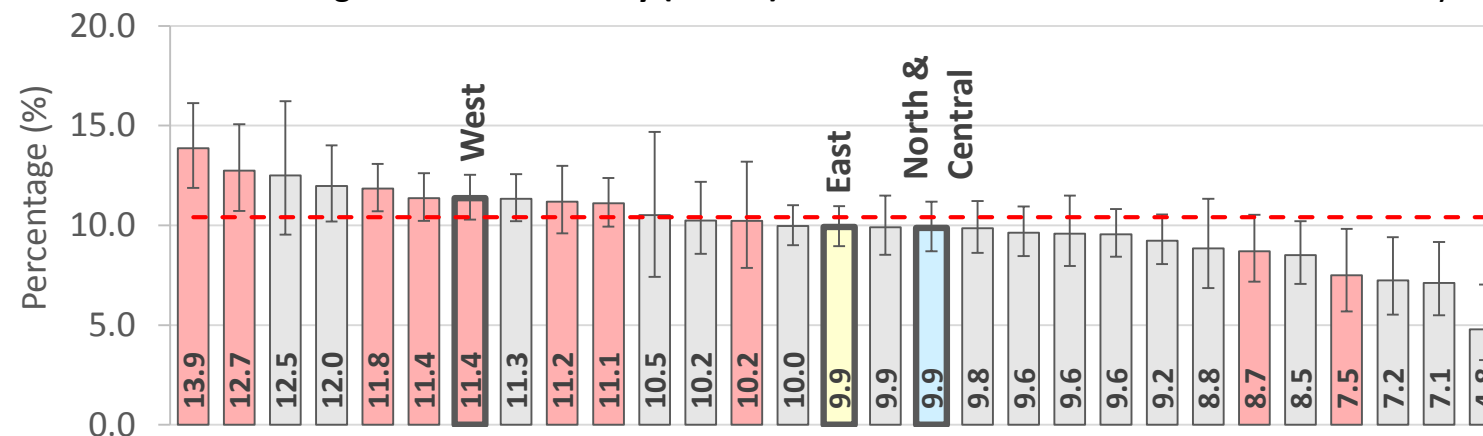
**Best 7.5%**

(J82126)

**Worst 13.9%**

(J82002)

Chart showing variation in **obesity (Year R)** across GP Practices and Localities in the city.



West Locality has a similar childhood obesity prevalence among year R and 6 children compared to the city average.

### Year 6 obesity prevalence

**23.2%**

City average 22.2%



2015/16-2017/18

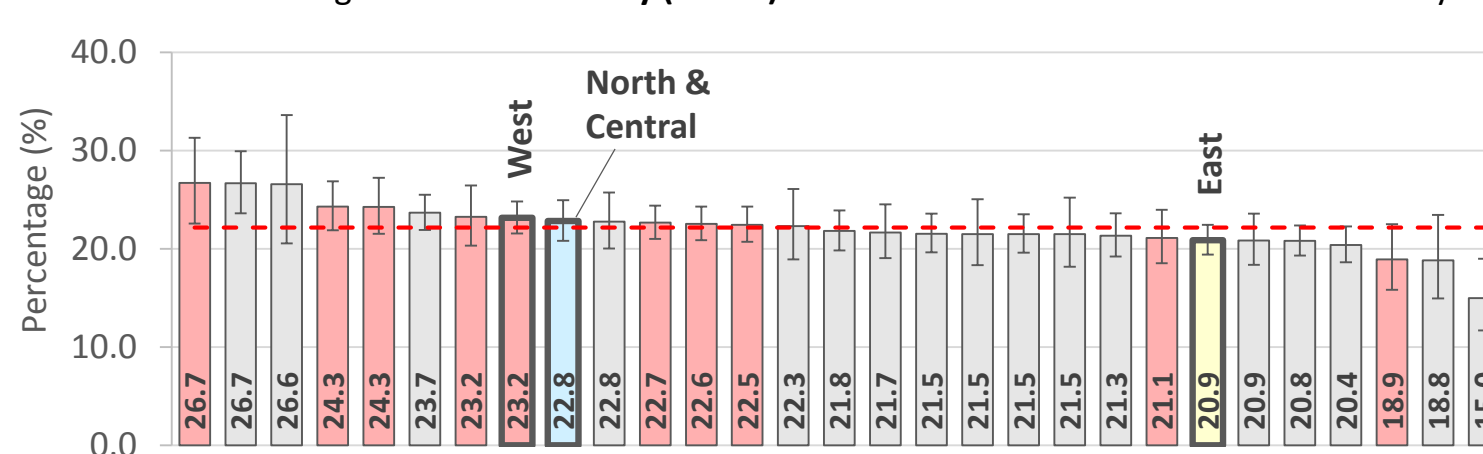
**Best 18.9%**

(J82126)

**Worst 26.7%**

(J82115)

Chart showing variation in **obesity (Year 6)** across GP Practices and Localities in the city.



There is some variation among practice catchments within the locality, with year R obesity ranging from 7.5% to 13.9% and obesity among year 6 children ranging from 18.9% to 26.7%. Eight of the locality practice catchments are similar to the city average for year R obesity (one practice catchment is significantly worse) and all nine locality practice catchments are similar to the city average for obesity among year 6 children.

## Wider Determinants

### Looked after children

Crude rate per 10,000 children (0-17 years)

**86 per 10k**

City average 90 per 10k



2019

**Best 31**

per 10k

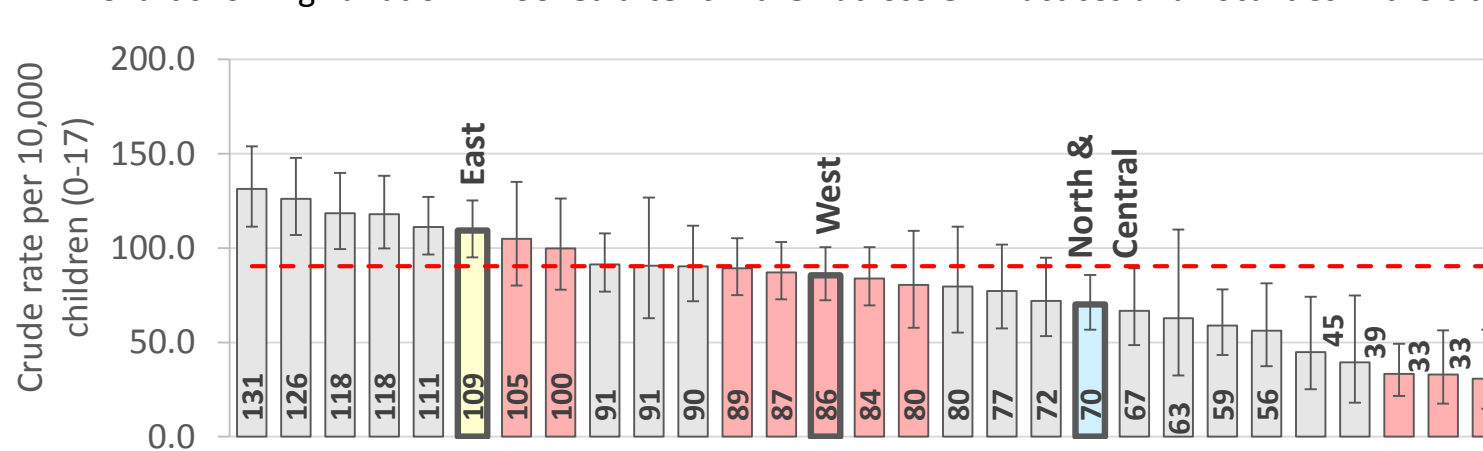
(J82115)

**Worst 105**

per 10k

(J82002)

Chart showing variation in **looked after children** across GP Practices and Localities in the city.



The looked after children rate for the locality is similar to the city average. There is variation within the locality with rates of looked after children ranging from 31 to 105 per 10k children among locality practice catchments, however, locality practice catchments are either significantly better than (3 practices) or similar to (6 practices) the city average.

### Child poverty (under 16 years)

**19.6%**

City average 20.1%



2015

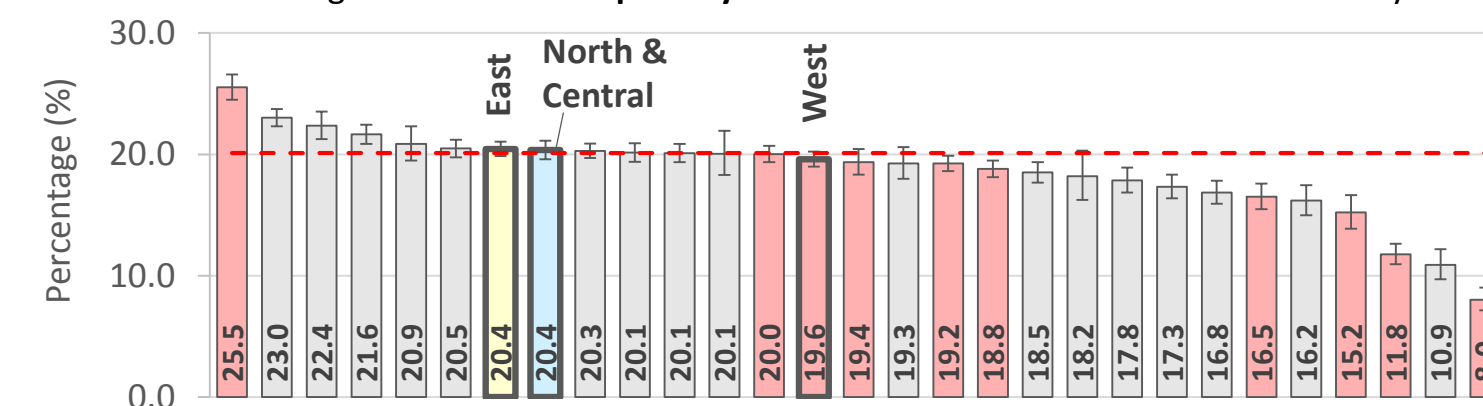
**Best 8.0%**

(J82126)

**Worst 25.5%**

(J82213)

Chart showing variation in **child poverty** across GP Practices and Localities in the city.



West Locality has a similar percentage of children in poverty compared to the city average. There is large variation among locality practice catchments, with child poverty ranging from 8.0% to 25.5%. However, most locality practice catchments are significantly better (5 practices) than or similar (3 practices) to the city average, with only one practice catchment significantly worse.





# Long Term Conditions



## Disease Prevalence

The table below shows locality prevalence (%) for various long-term conditions in 2017/18 (source: QOF via Public Health England)

Condition	West	North & Central	East	City average
Diabetes prevalence (17+)	6.5%	4.0%	7.0%	5.7%
Asthma prevalence	6.7%	4.8%	6.1%	5.8%
COPD	2.4%	1.3%	2.5%	2.0%
Coronary Heart Disease	2.6%	1.4%	2.8%	2.3%
Hypertension	12.2%	6.9%	12.8%	10.5%
Osteoporosis (50+)	0.3%	0.5%	0.6%	0.5%
Rheumatoid Arthritis (16+)	0.7%	0.4%	0.8%	0.6%

Prevalence is based on **REGISTERED** populations

	Significantly worse than the city average
	Similar to the city average
	Significantly better than the city average

West Locality is significantly worse than the city average for 5 out of the 7 long term conditions highlighted in the table above. The rates are not standardised for age, so the differences could be reflective of the age structure of West Locality's registered population; prevalence increases with age and 15.0% of the registered population are aged 65 and over (NHS Digital 2019) compared to the city average of 12.9%.

Differences may also be linked to [health inequalities](#).

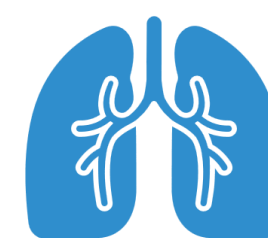
However, it should be noted that examining disease prevalence at locality level will mask variation between practices within the locality, so it is important to examine locality prevalence alongside practice prevalence, which can be done using the GP Practice and Locality profile tool.

Maps at neighbourhood level for some of these diseases can be found in the [maps section](#).

## Forecasts

The population of Southampton and the West locality is projected to grow and age over the next few years which is likely to impact on the number of people with chronic conditions.

### By 2025 West Locality could have...



**235 (11.8%)** more people with **COPD**



**1,016 (11.0%)** more people with **Hypertension**

**197 (4.4%)** more people with **Asthma**

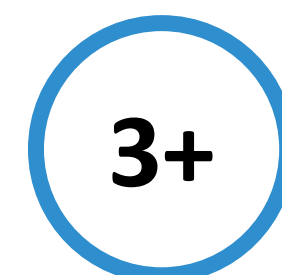
**261 (13.6%)** more people with **Ischemic Heart Disease**



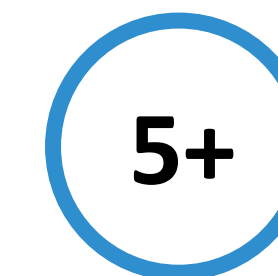
**372 (9.0%)** more people with **Diabetes**



**208 (11.8%)** more people with **Frailty**



**1,062 (9.3%)** more people with **3 or more chronic conditions**



**546 (11.9%)** more people with **5 or more chronic conditions**



**284 (2.3%)** more people **smoking**



**228 (14.2%)** more people needing help with **5 or more activities of daily living** (e.g. bathing, getting dressed, cooking)

All forecasts are based on Southampton **RESIDENT** population due to data availability. Existing prevalence (taken from Sollis tool 2017) has been combined with Hampshire County Council Small Area Population Forecasts (SAPF) (2017) to project forward, assuming current prevalence remains the same. Further information on this modelling work can be found on the [Southampton Data Observatory](#).



# Multi-morbidity



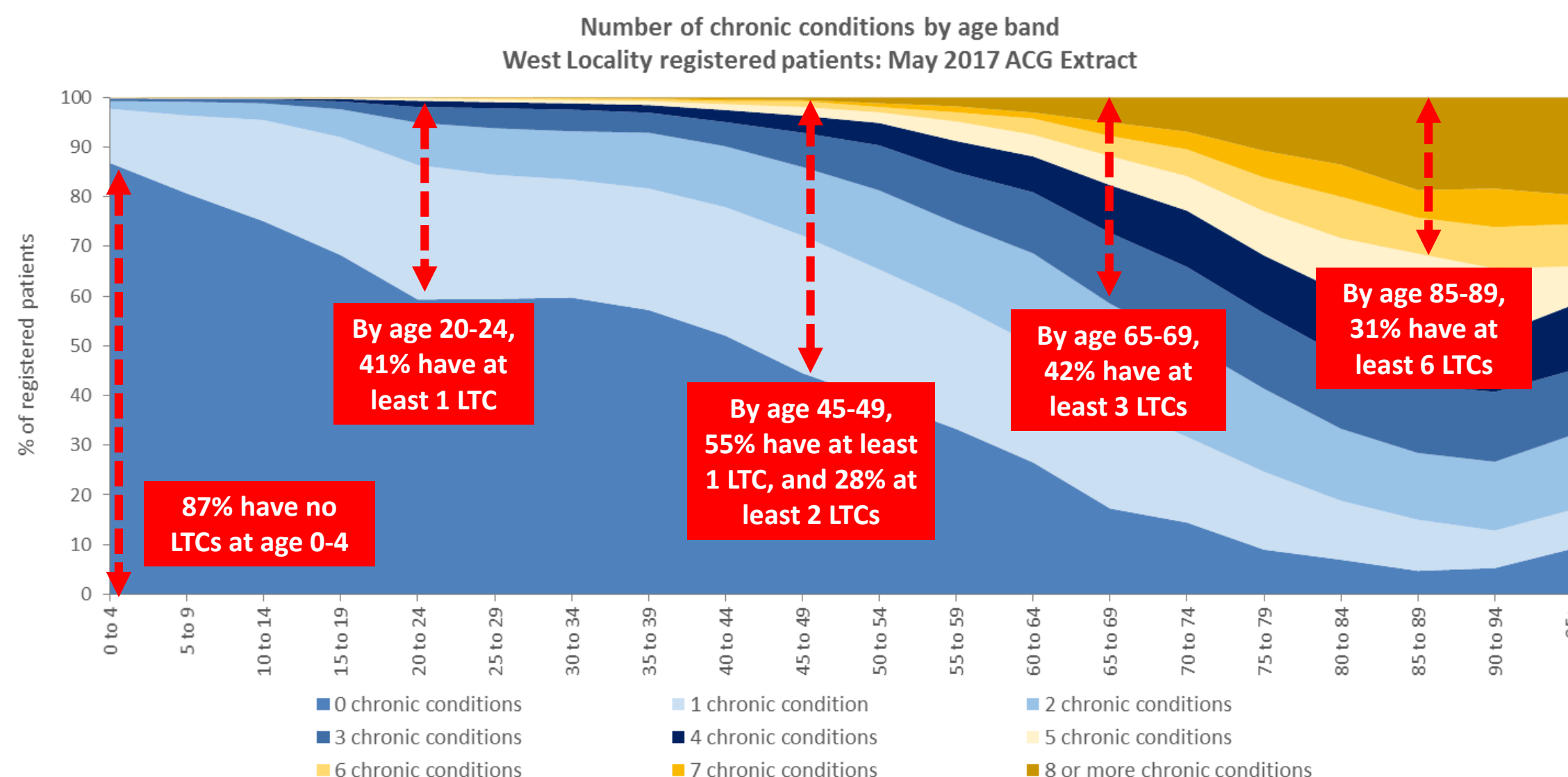
## Multi-morbidity in West Locality

### Within West Locality...

Figures are based on **REGISTERED** populations

- 0** 41,750 (50.5%) registered patients have no chronic conditions
- 3+** 13,418 (16.2%) registered patients have 3 or more chronic conditions
- 5+** 5,318 (6.4%) registered patients have 5 or more chronic conditions
- 6+** 3,484 (4.2%) registered patients have 6 or more chronic conditions

The chart below shows the percentage of patients with chronic conditions by age band.



Source: Adjusted Clinical Groups Database (ACG) May 2017

Data source: Adjusted Clinical Groups Database- 2017

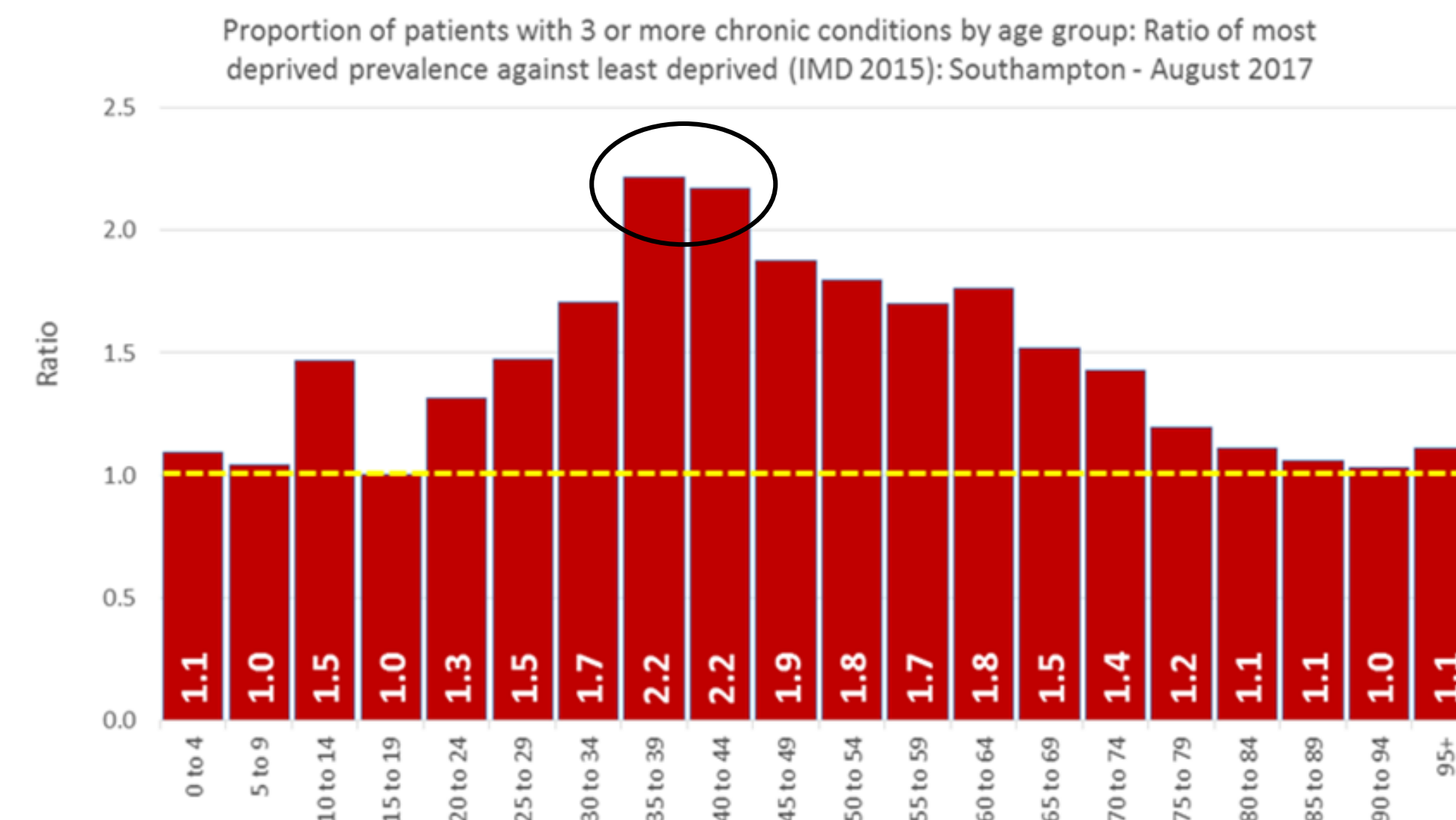
## Inequality in multi-morbidity

The number of people experiencing multi-morbidities increases steadily with age. However, there are inequalities in the prevalence of multi-morbidities.

In Southampton we know that people living in the 20% most deprived neighbourhoods start developing multi-morbidities (3 or more chronic conditions) at an earlier age compared to those living in the 20% least deprived neighbourhoods, as illustrated by the chart below.

Differences appear at an early age and gradually narrow (relatively) as the population ages. Differences begin to appear in the early 20's and peak between the mid-30's and mid-40's, where prevalence is more than double (2.2x) in the most deprived areas.

The [deprivation section](#) shows the range of inequality within West Locality.







# Cancer



## Incidence (all cancers)

### Incidence (persons)

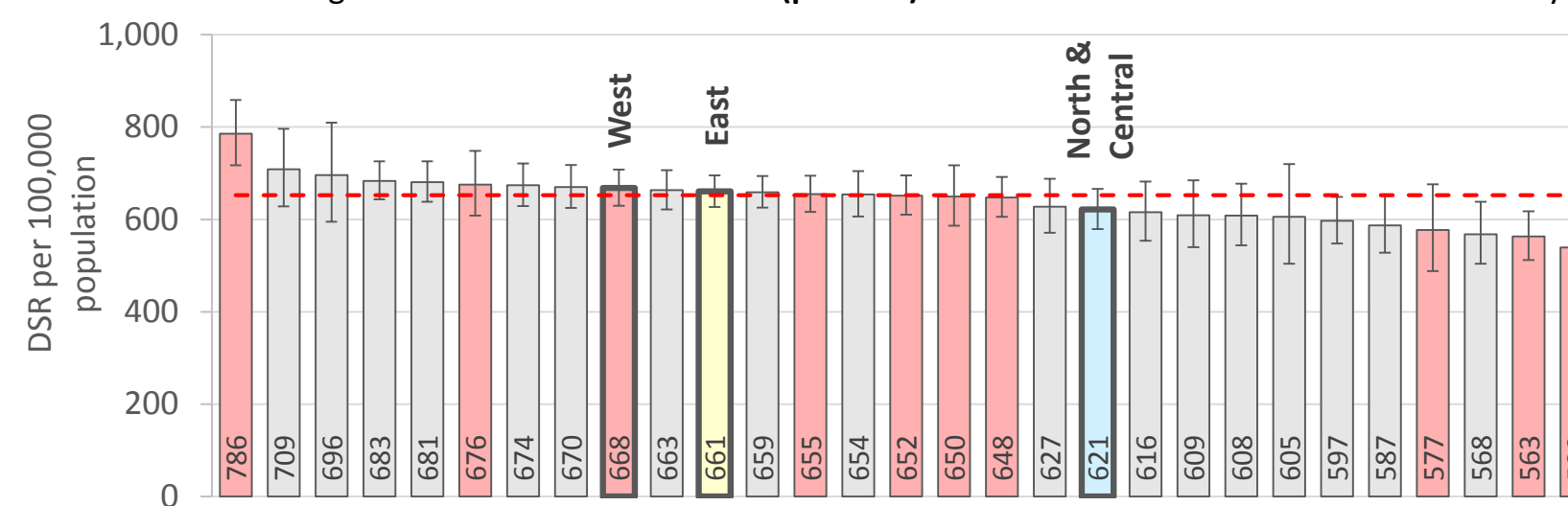
DSR per 100,000 population

**668 per 100k**

City average 652 per 100k



Chart showing variation in **cancer incidence (persons)** across GP Practices and Localities in the city.



West Locality is similar to the city average for cancer incidence among persons, males and females.

Six locality practice catchments are also similar to the city average for cancer incidence among persons (one practice catchment is significantly worse and two are significantly better). Eight locality practice catchments have a similar male cancer incidence compared to the city average (one practice catchment is significantly better). One locality practice catchment has a significantly worse female cancer incidence than the city average (remaining eight locality practice catchments are similar).

### Incidence (males)

DSR per 100,000 population

**760 per 100k**

City average 743 per 100k

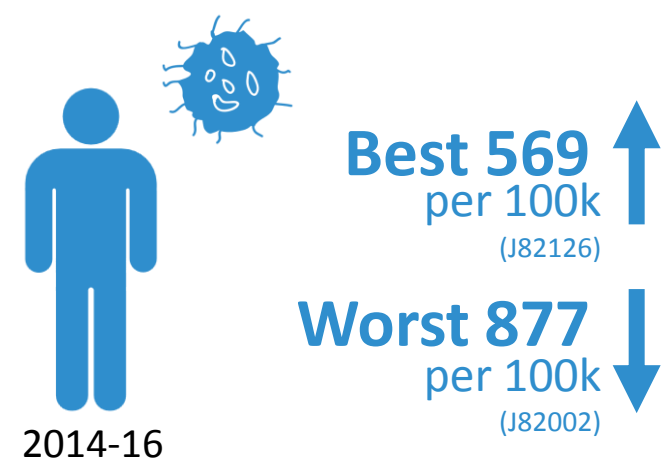
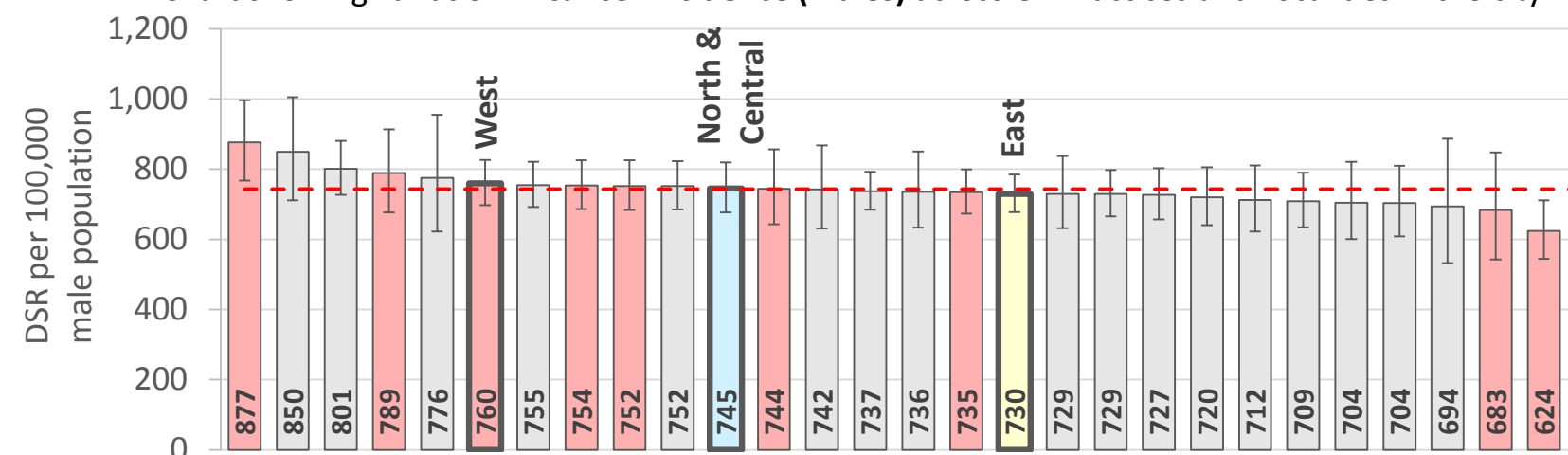


Chart showing variation in **cancer incidence (males)** across GP Practices and Localities in the city.



Differences among practices could be due to health inequalities and reflect varying levels of deprivation within the West locality. [Inequalities analysis](#) across the city shows that there is a very strong relationship between deprivation and the incidence of all cancers, lung cancer and premature mortality from all cancers (see next slide).

### Incidence (females)

DSR per 100,000 population

**604 per 100k**

City average 587 per 100k

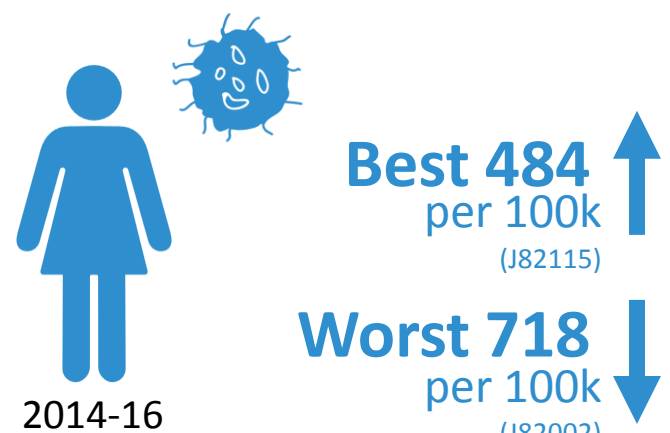
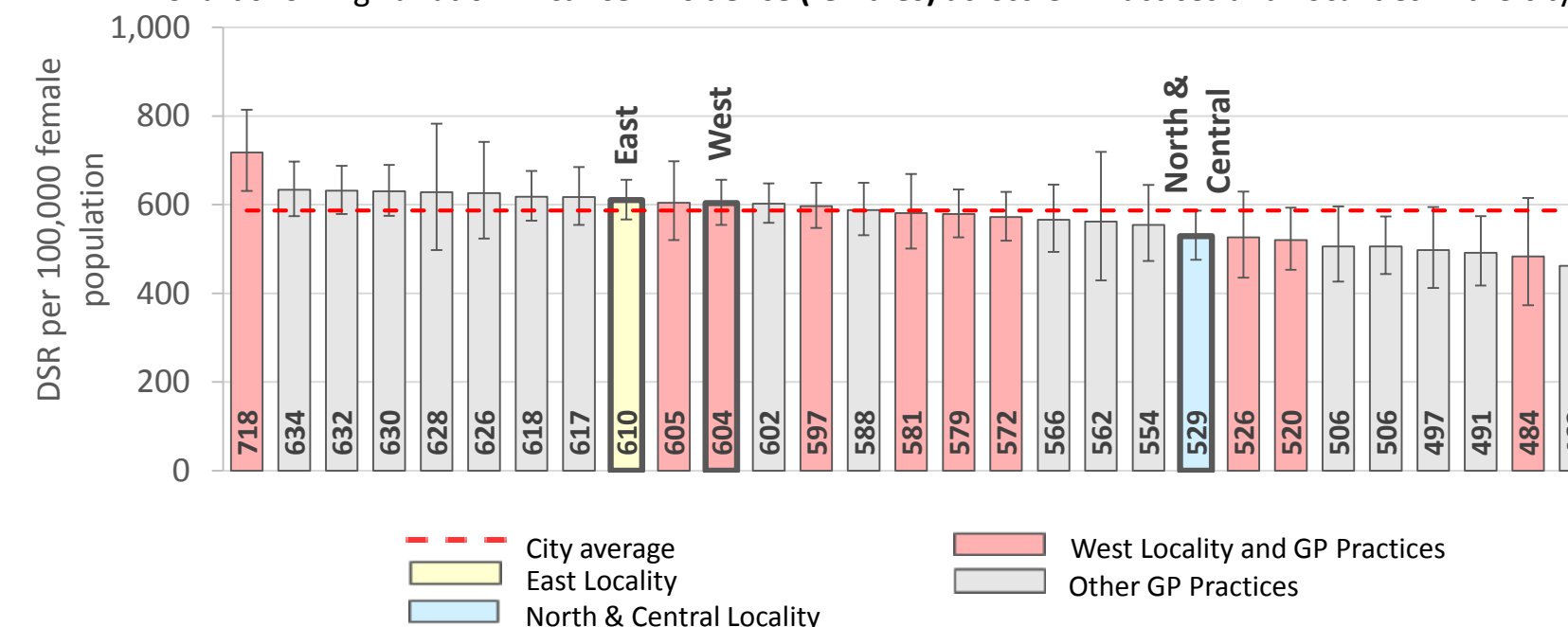


Chart showing variation in **cancer incidence (females)** across GP Practices and Localities in the city.



Significantly worse than the city average

Similar to the city average

Significantly better than the city average



# Cancer



## Incidence (site specific)

### Colorectal cancer

DSR per 100,000 population

**67 per 100k**

City average 73 per 100k

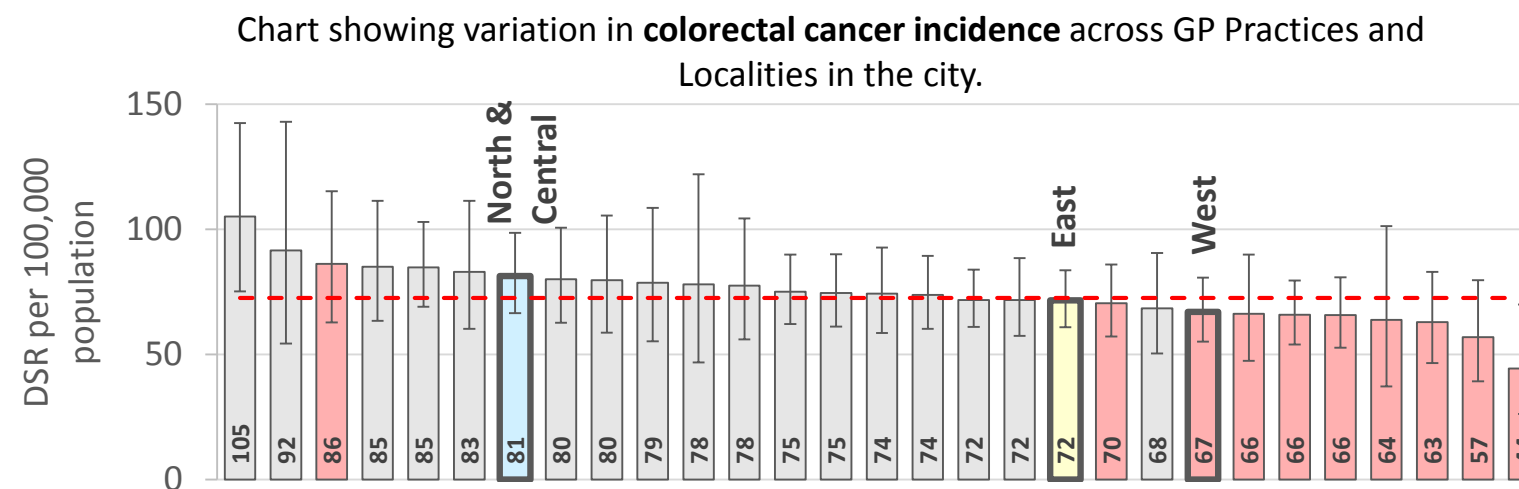


2014-16

#### Locality Practice Best/Worst

**Best 44**  
per 100k  
(J82126)

**Worst 86**  
per 100k  
(J82213)

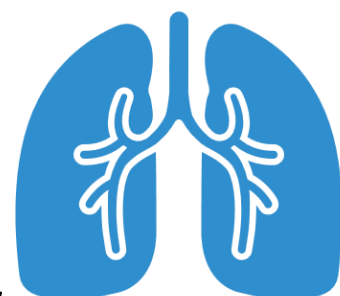


### Lung cancer

DSR 100,000 population

**119 per 100k**

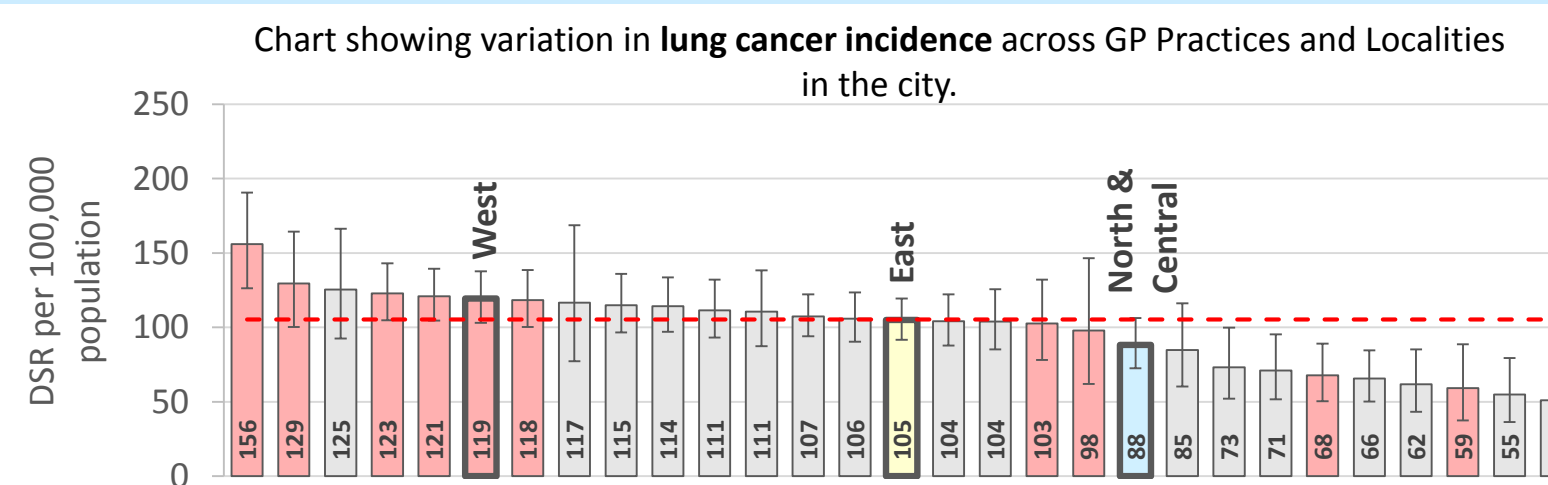
City average 105 per 100k



2014-16

**Best 59**  
per 100k  
(J82126)

**Worst 156**  
per 100k  
(J82002)



### Breast cancer (female)

DSR per 100,000 population

**180 per 100k**

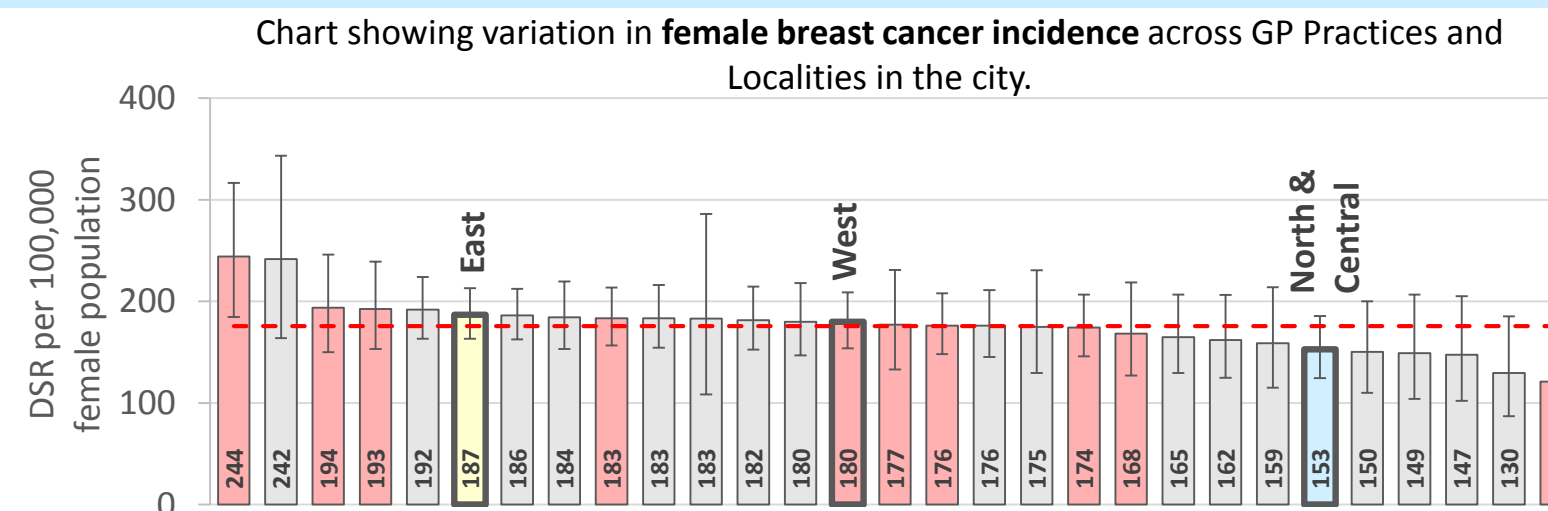
City average 176 per 100k



2014-16

**Best 121**  
per 100k  
(J82115)

**Worst 244**  
per 100k  
(J82126)



## Mortality

### Premature mortality

(all cancers) DSR per 100,000 population

**144 per 100k**

City average 138 per 100k

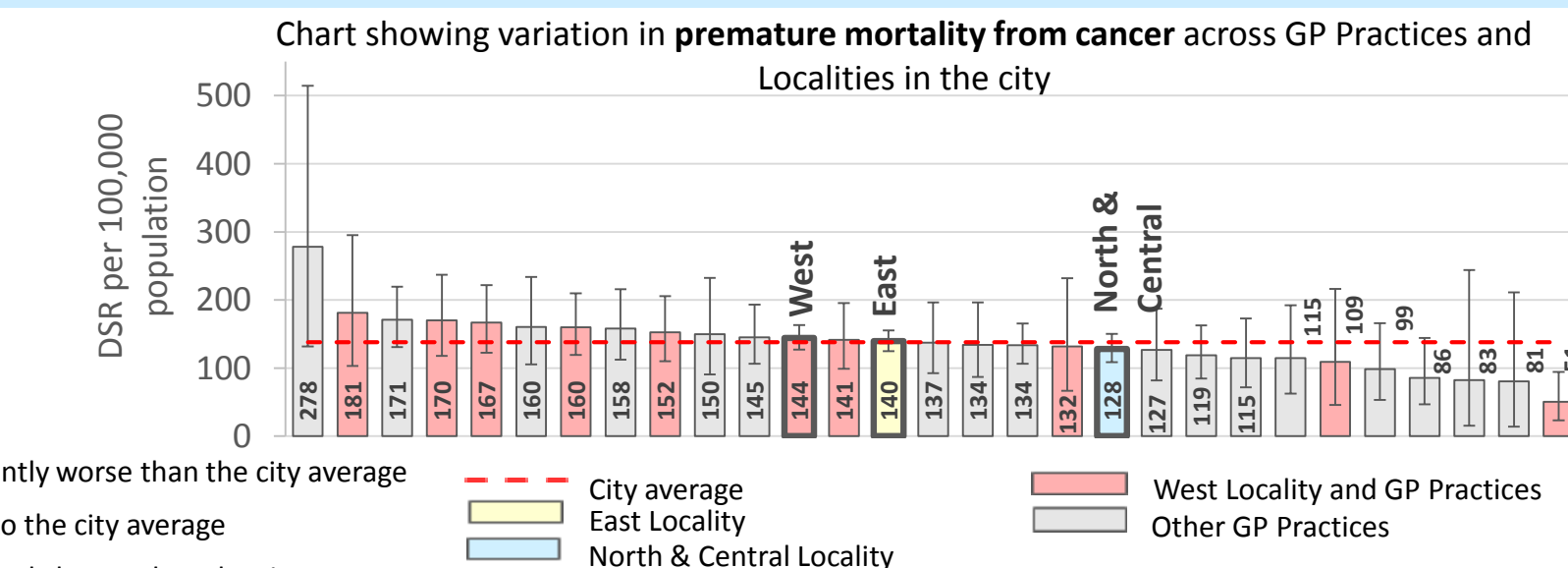
Indicator above is based on REGISTERED populations



2015-17

**Best 51**  
per 100k  
(J82207)

**Worst 181**  
per 100k  
(J82126)



West Locality is similar to the city average for colorectal, lung and female breast cancer incidence. All locality practice catchments also have a similar colorectal and breast cancer incidence compared to the city average. One locality practice catchment has a significantly worse incidence of lung cancer than the city average and two practice catchments are significantly better than the city average (remaining six practices are similar).

However, it should be noted that indicators on this and the previous slide have large confidence intervals, and therefore differences between practices need to be interpreted with some caution.

The premature mortality rate from cancer for West Locality is similar to the city average. Premature mortality within the locality ranges from 51 to 181 deaths per 100k population (DSR). One locality practice is significantly better than the city average, with all other practices similar.





# Circulatory disease



## Hypertension

### Prevalence

**12.2%**

City average 10.5%



2017/18

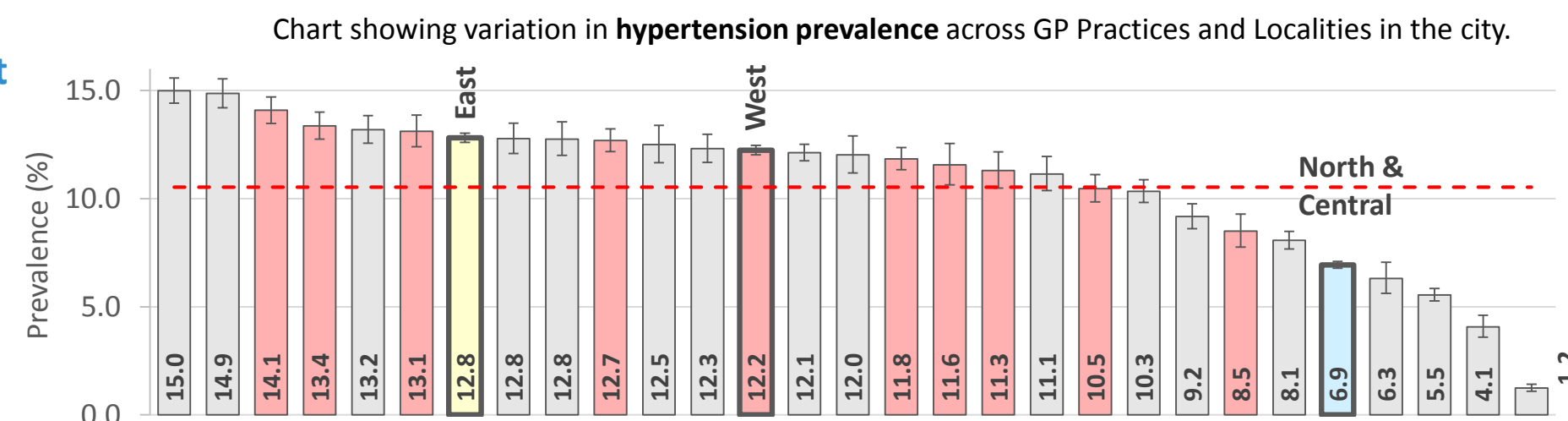
### Locality Practice Best/Worst

**Best 8.5%**

(J82115)

**Worst 14.1%**

(J82022)



West Locality has a significantly worse prevalence of hypertension compared to the city average. Six locality practices also have a significantly worse prevalence of hypertension than the city average. Prevalence of hypertension among practices within West Locality range from 8.5% to 14.1%.

## Coronary Heart Disease

### Prevalence

**2.6%**

City average 2.3%



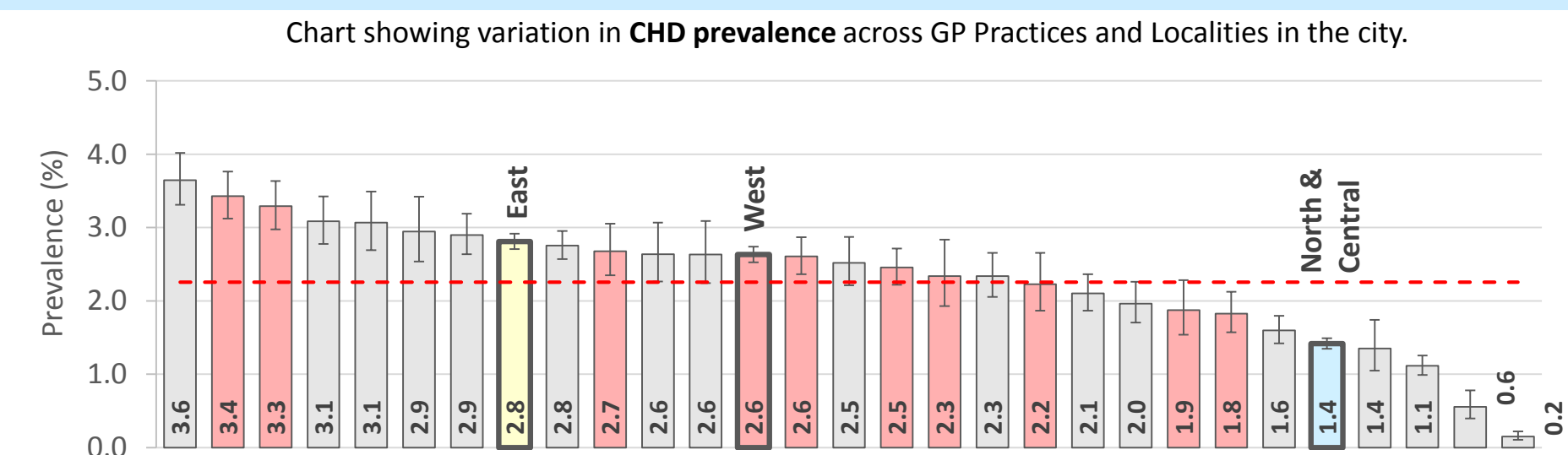
2017/18

**Best 1.8%**

(J82207)

**Worst 3.4%**

(J82022)



The locality has a significantly worse prevalence of coronary heart disease (CHD) compared to the city average. Four locality practices also have a significantly worse prevalence of CHD than the city average. Prevalence of CHD among practices within the locality range from 1.8% to 3.4%.

## Premature mortality

### Premature mortality from circulatory disease

DSR per 100,000 population

**73 per 100k**

City average 75 per 100k



2015-17

**Best 58**

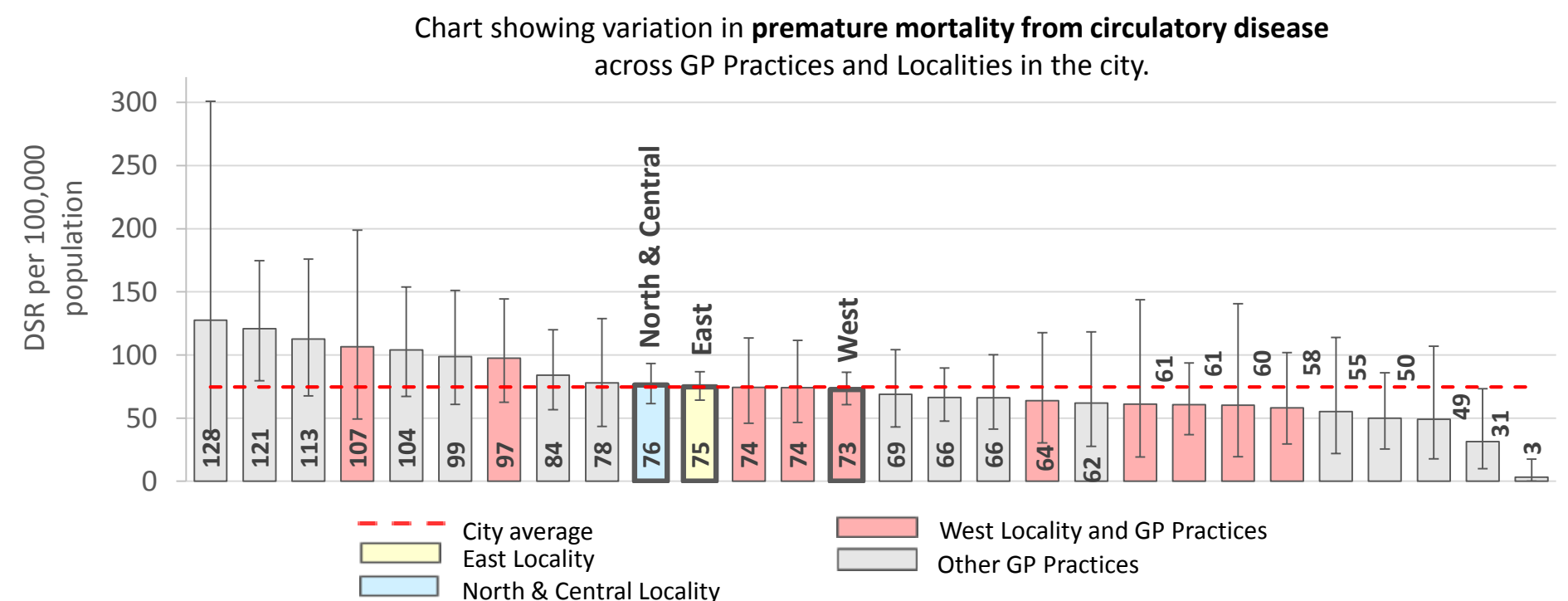
per 100k

(J82092)

**Worst 107**

per 100k

(J82213)



West Locality has a similar premature mortality rate from circulatory disease compared to the city average. There is some variation within the locality, but differences between practices within the locality are not significantly different to the city average.

Significantly worse than the city average  
Similar to the city average  
Significantly better than the city average



# Respiratory disease



## Asthma

### Prevalence

**6.7%**

City average 5.8%



(2017/18)

### Locality Practice Best/Worst

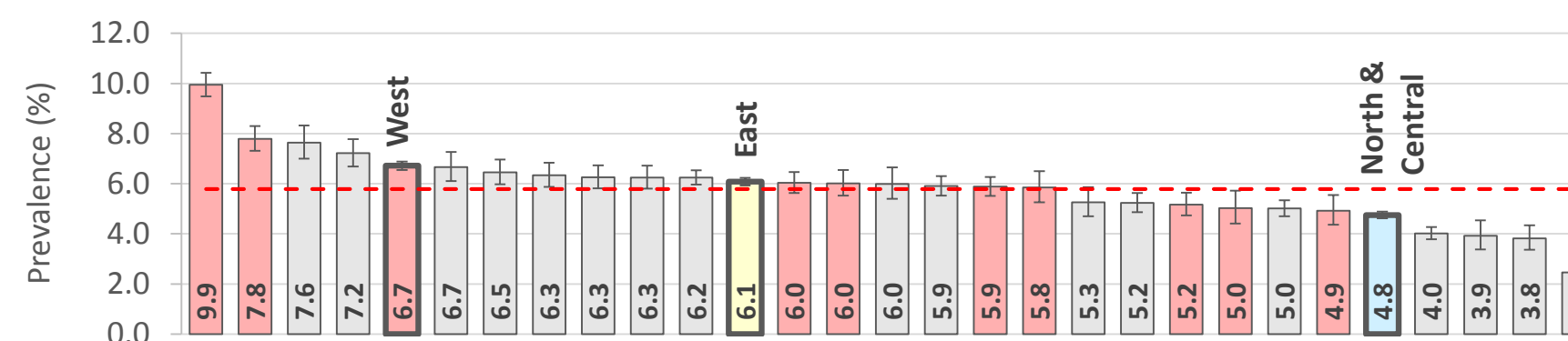
**Best 4.9%**

(J82115)

**Worst 9.9%**

(J82062)

Chart showing variation in **asthma prevalence** across GP Practices and Localities in the city.



West Locality has a significantly worse prevalence of asthma compared to the city average. Asthma prevalence across practices within the locality ranges from 4.9% to 9.9%.

### Emergency admissions

DSR per 100,000 population

**142 per 100k**

City average 132 per 100k



(2015/16-2017/18)

**Best 112**

per 100k

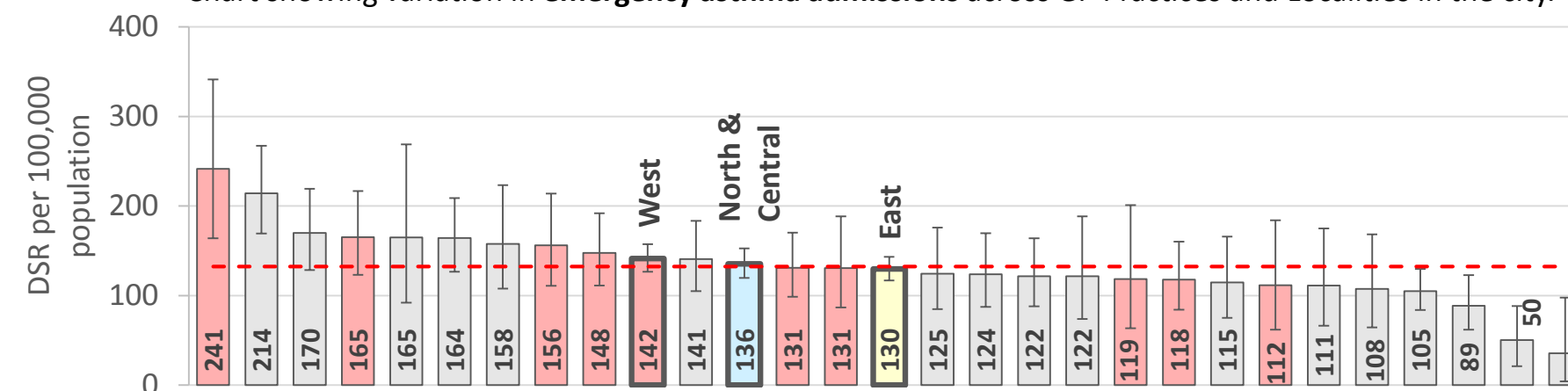
(J82115)

**Worst 241**

per 100k

(J82213)

Chart showing variation in **emergency asthma admissions** across GP Practices and Localities in the city.



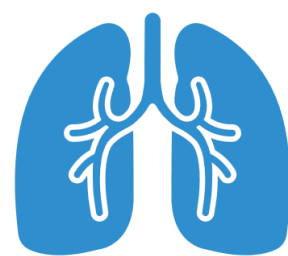
The emergency asthma admission rate for West Locality is similar to the city average. However, there is variation across practices in the locality, with one practice significantly worse than the city average; admission rates range from 112 to 241 per 100k population (DSR)

## Chronic Obstructive Pulmonary Disease (COPD)

### Prevalence

**2.4%**

City average 2.0%



(2017/18)

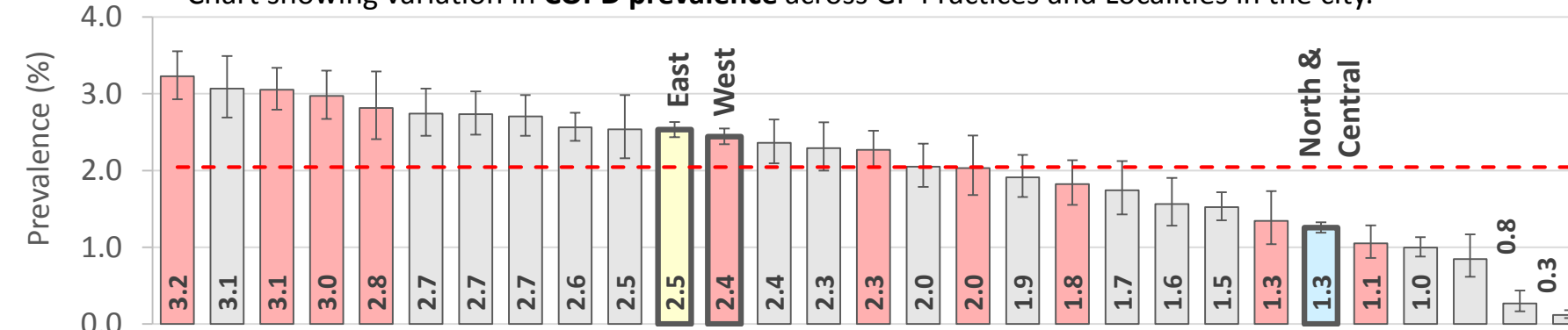
**Best 1.1%**

(J82207)

**Worst 3.2%**

(J82022)

Chart showing variation in **COPD prevalence** across GP Practices and Localities in the city.



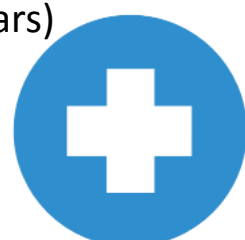
West Locality has a significantly worse prevalence of COPD compared to the city average. Four locality practices also have a significantly worse prevalence of COPD than the city average. COPD prevalence among practices in the locality ranges from 1.1% to 3.2%. COPD maps at neighbourhood level can be found [here](#).

### Emergency admissions

DSR per 100,000 population (35+ years)

**650 per 100k**

City average 578 per 100k



(2015/16-2017/18)

**Best 208**

per 100k

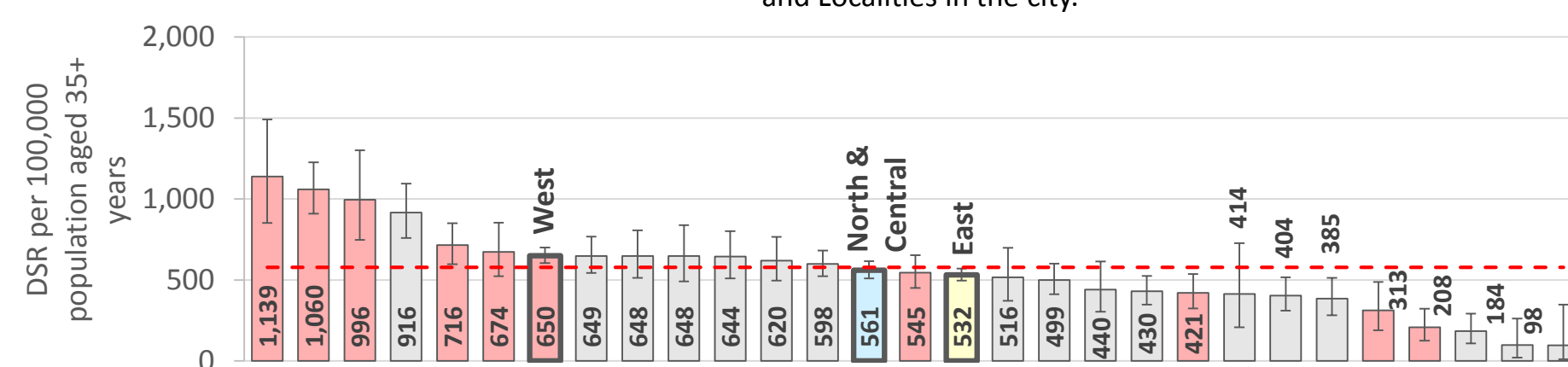
(J82207)

**Worst 1,139**

per 100k

(J82115)

Chart showing variation in **emergency COPD admissions (aged 35+ years)** across GP Practices and Localities in the city.



The emergency COPD admission rate for West Locality is similar to the city average. However, there is variation across practices within the locality, with three locality practices significantly worse than the city average. Admission rates among locality practices range from 208 to 1,139 per 100k population aged 35+ years (DSR).





# Mental Health



## Mental Health Prevalence

### Depression

**12.3%**

City average 10.1%



2017/18

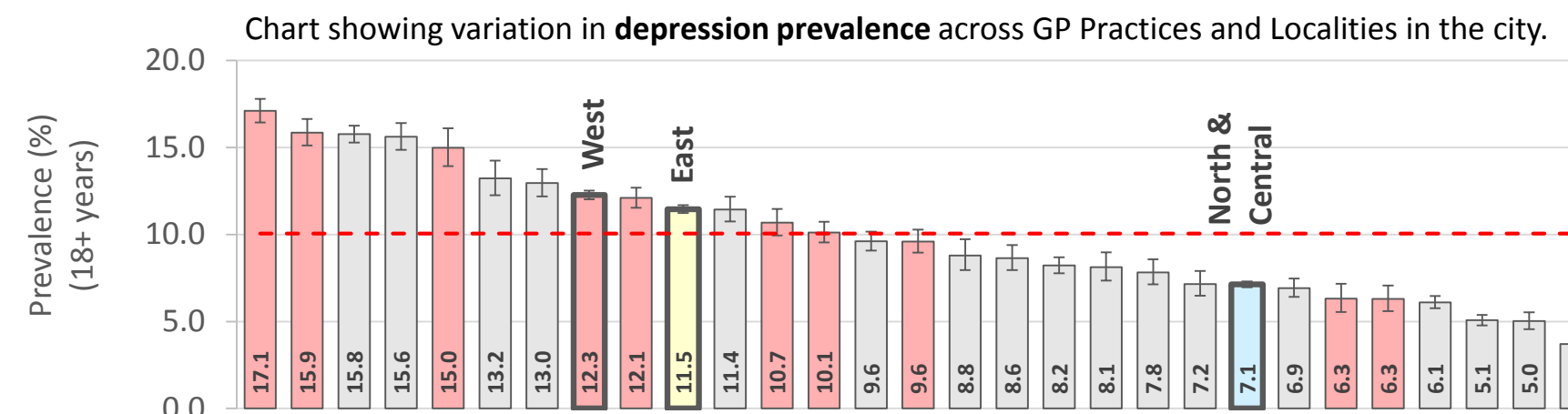
Locality Practice Best/Worst

**Best 6.3%**

(J82115)

**Worst 17.1%**

(J82062)



### Mental health

(schizophrenia, bipolar disorder and other psychoses)

**1.10%**

City average 1.13%



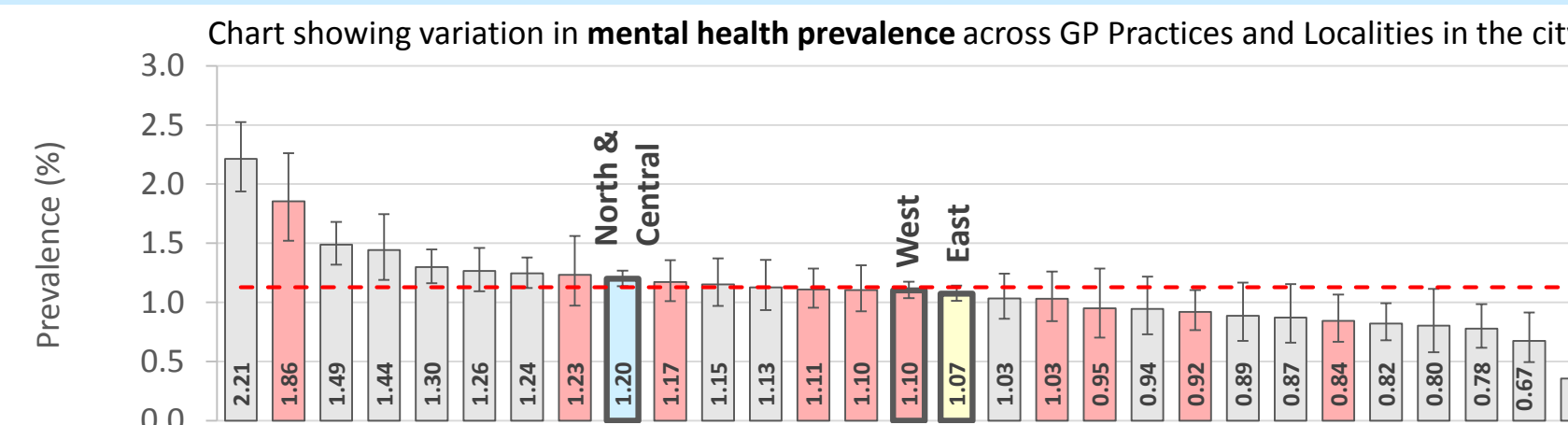
2017/18

**Best 0.84%**

(J82092)

**Worst 1.86%**

(J82115)



### Learning disability

**0.53%**

City average 0.46%



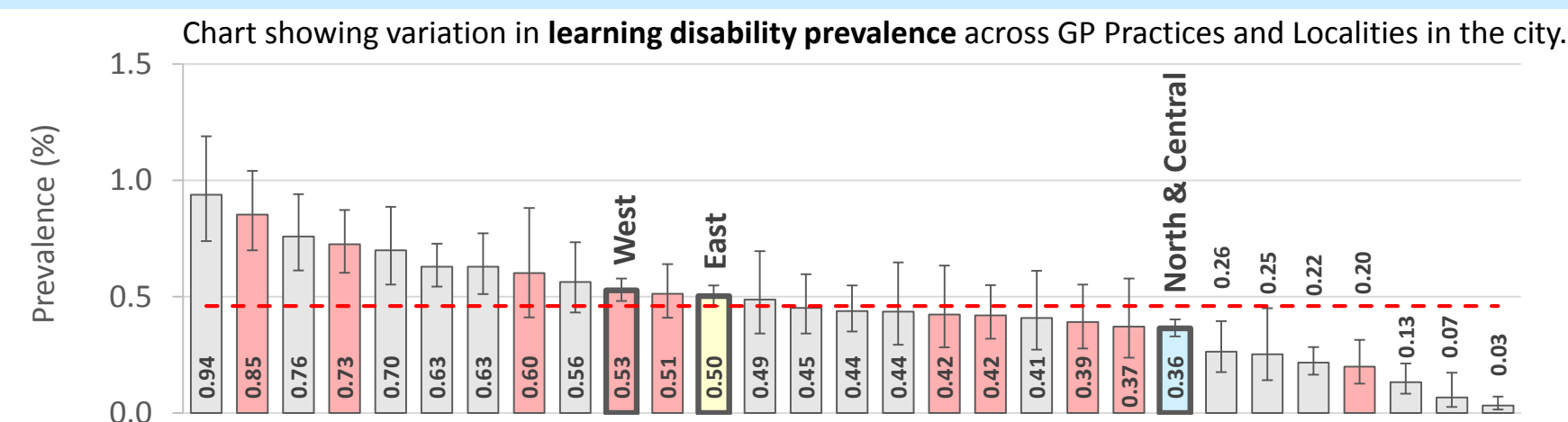
2017/18

**Best 0.20%**

(J82207)

**Worst 0.85%**

(J82002)



### Dementia

**0.65%**

City average 0.56%



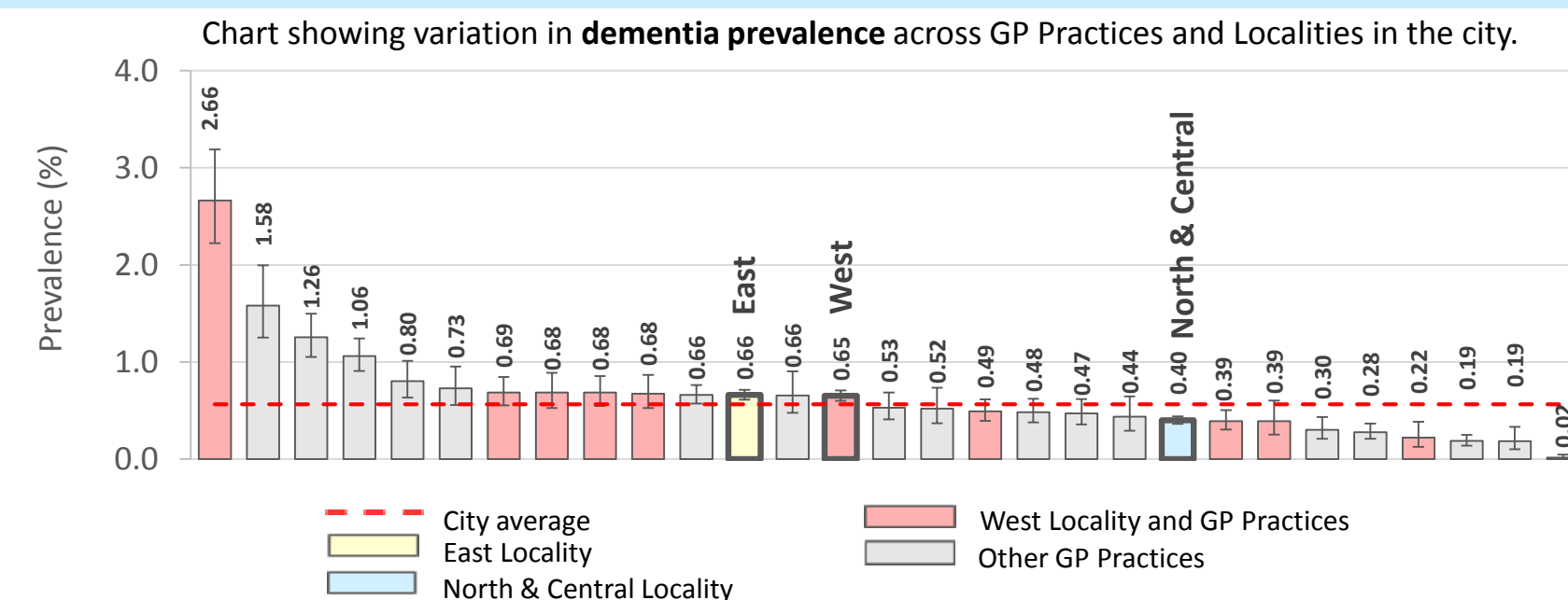
2017/18

**Best 0.22%**

(J82213)

**Worst 2.66%**

(J82126)



West Locality has a significantly worse prevalence of depression compared to the city average. There are also large variations in the prevalence of depression between practices within the locality, with prevalence ranging from 6.3% to 17.1%. Four practices have a significantly worse prevalence of depression compared to the city average.

The locality has a similar prevalence of mental health conditions compared to the city average. Locality practice prevalence ranges from 0.84% to 1.86%. One locality practice is significantly worse than the city average, one is significantly better and the remaining practices are similar to the city average.

Learning disability prevalence for the locality is similar to the city average. Practice prevalence within the locality ranges from 0.20% to 0.85%. Two practices have a significantly worse prevalence compared to the city average, one practice is significantly better than and six are similar to the city average.

Compared to the city average, West Locality has a significantly worse prevalence of dementia. Prevalence between practices within the locality ranges from 0.22% to 2.66%. However, only one locality practice has a significantly worse prevalence of dementia than the city average; such a high practice prevalence is likely skewing the locality value, as three quarters of locality practices have a similar dementia prevalence compared to the city average.

More information on mental health can be found on the [Southampton Data Observatory](https://southamptondataobservatory.org/).



# Mental Health



## Hospital Activity

### Emergency admissions for self-harm

DSR per 100,000 population

**279 per 100k**

City average 290 per 100k



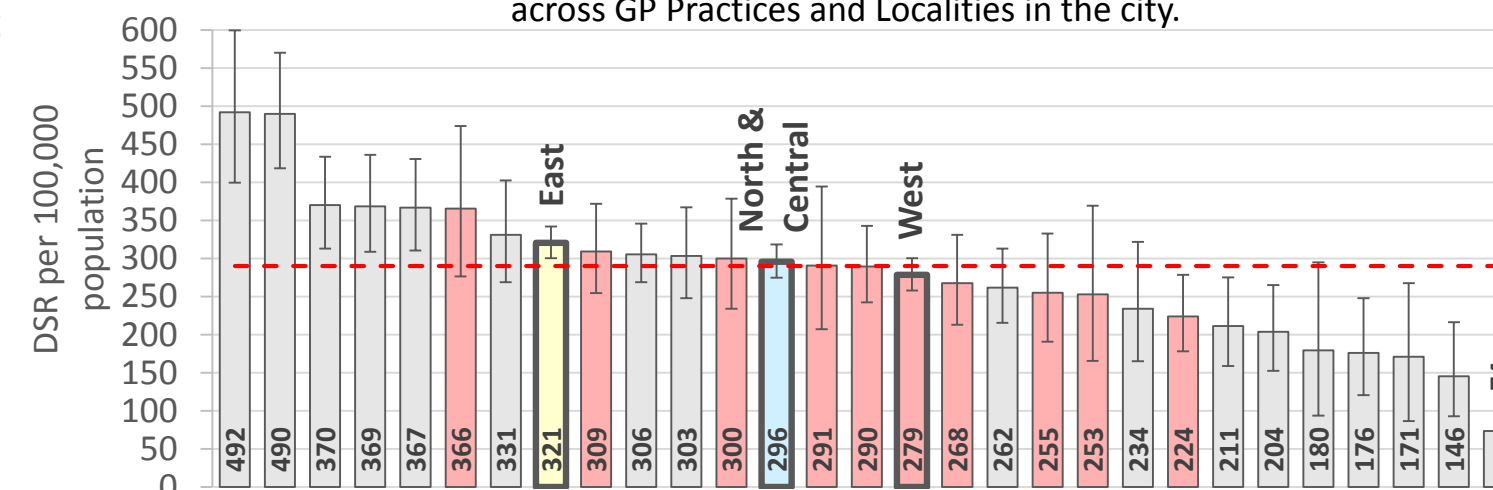
2015/16-2017/18

Locality Practice Best/Worst

Best 224  
per 100k  
(J82022)

Worst 366  
per 100k  
(J82213)

Chart showing variation in **emergency admissions for self-harm** across GP Practices and Localities in the city.



West Locality has a similar emergency admission rate for self-harm compared to the city average. Locality practice admission rates range from 224 to 366 per 100k population (DSR); however, practices are either similar to (eight practices) or significantly better than (one practice) the city average.

### Drug related mental health & behavioural admissions

DSR per 100,000 population

**183 per 100k**

City average 190 per 100k

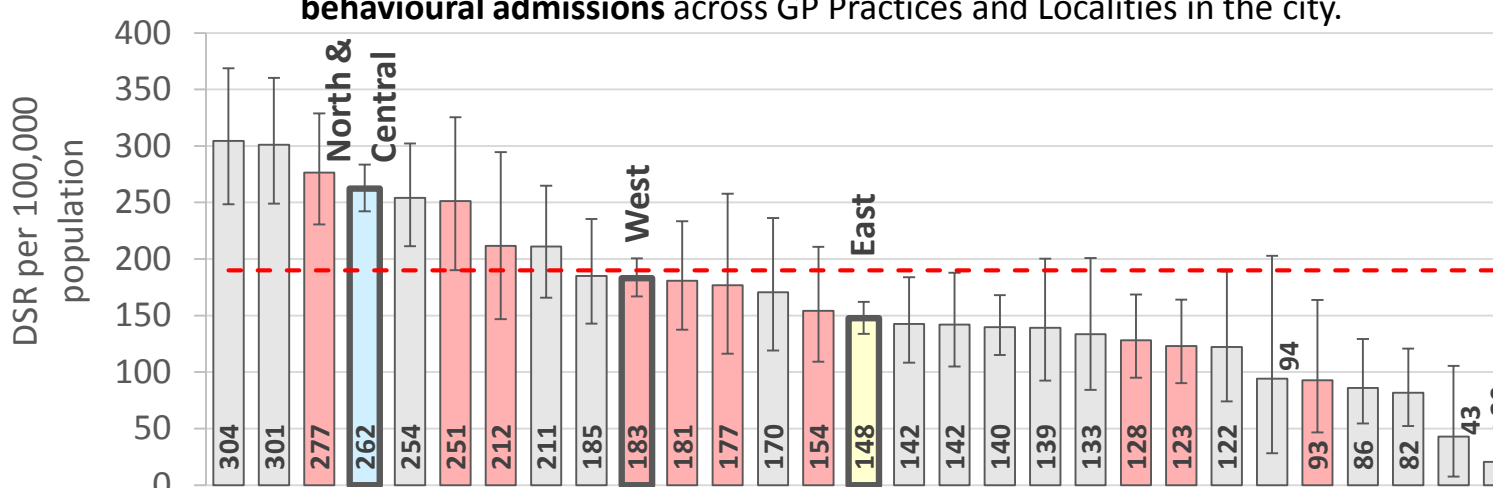


2015/16-2017/18

Best 93  
per 100k  
(J82126)

Worst 277  
per 100k  
(J82062)

Chart showing variation in **drug related mental health & behavioural admissions** across GP Practices and Localities in the city.



The locality is similar to the city average for drug related mental health & behavioural admissions. There are some variations between practices in the locality (93 to 277 admissions per 100k – DSR); however, only one practice is significantly worse than the city average (four practices are similar and three practices are significantly better).

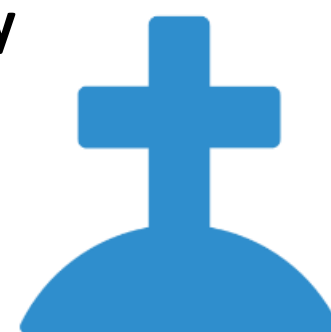
## Mortality

### Mortality from suicide & injury undetermined

DSR per 100,000 population

**12.8 per 100k**

City average 10.1 per 100k

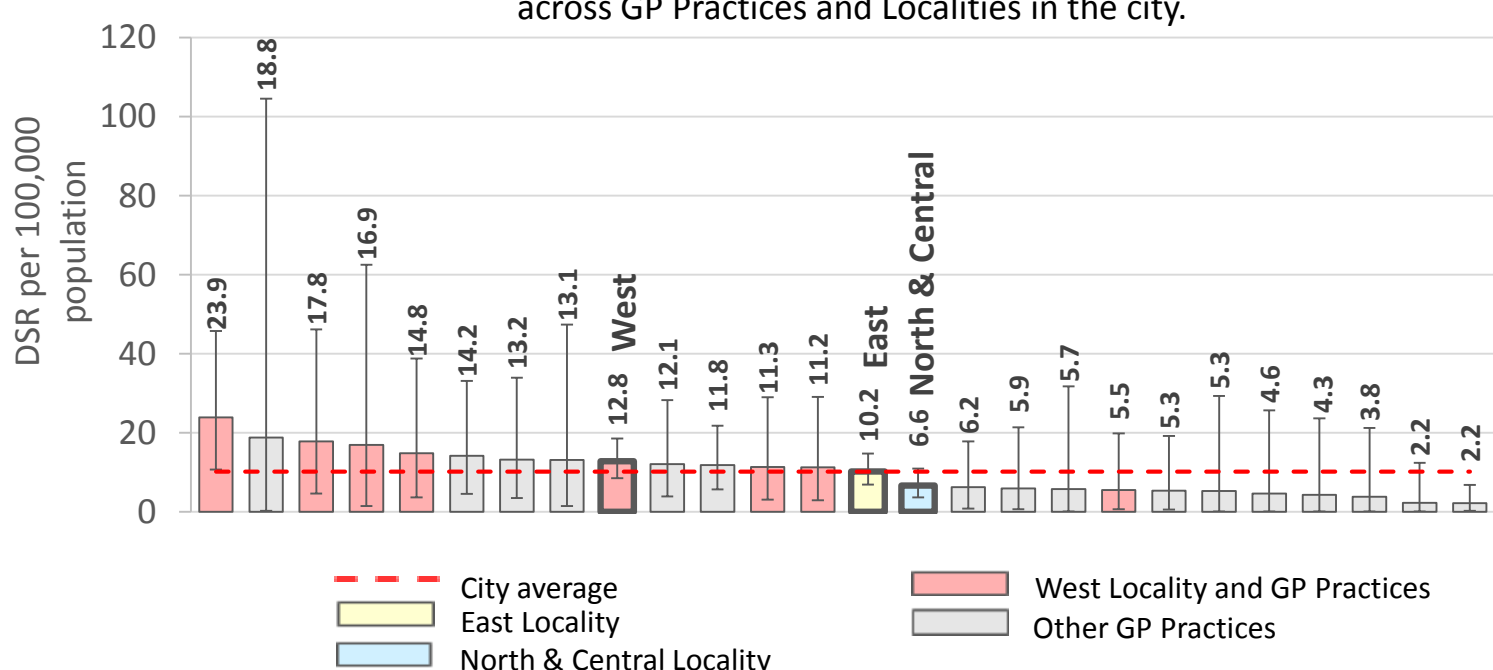


2015-17

Best 5.5  
per 100k  
(J82002)

Worst 23.9  
per 100k  
(J82062)

Chart showing variation in **mortality from suicide & injury undetermined** across GP Practices and Localities in the city.



The mortality rate from suicide & injury undetermined for the locality is similar to the city average. All of the practices within the locality where a rate was calculated are also similar to the city average. There is some variation between practices within the locality with deaths ranging from 5.5 to 23.9 per 100k population (DSR). However, differences should be interpreted with caution as numbers are small and confidence intervals are very large for this indicator.

Significantly worse than the city average  
Similar to the city average  
Significantly better than the city average





# Ageing well



## Social care support

### Social care support (65+ years)

Crude rate per 1,000 population

**40 per 1k**

City average 38 per 1k



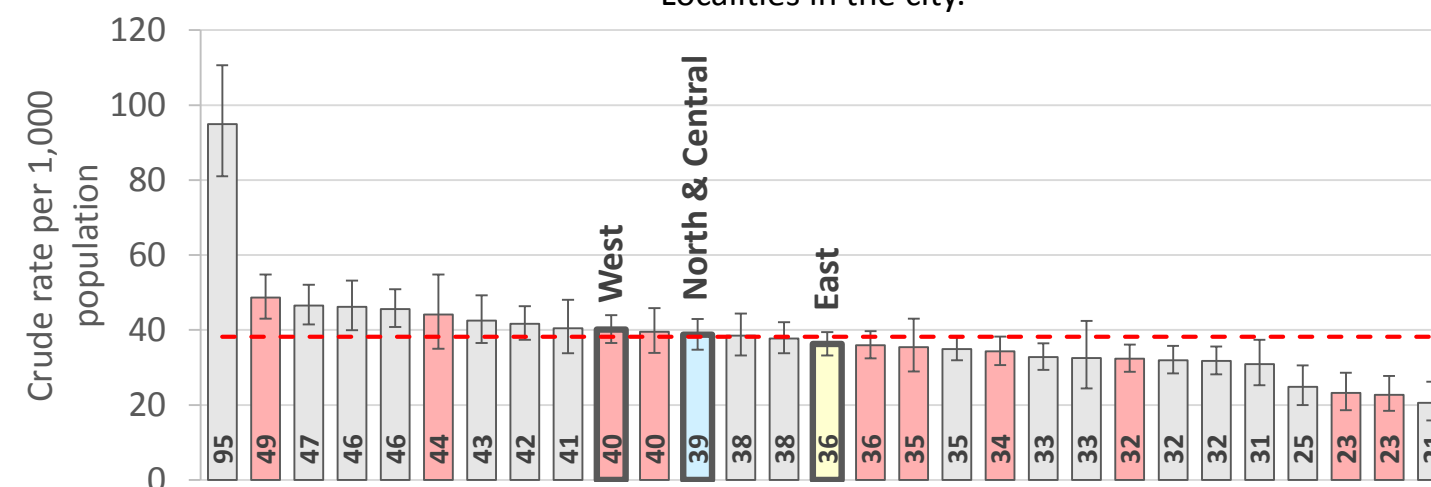
2018

#### Locality Practice Highest/Lowest

**Highest 49**  
per 1k  
(J82207)

**Lowest 23**  
per 1k  
(J82092)

Chart showing variation in **social care support** across GP Practices and Localities in the city.



The locality is similar to the city average for social care support among those aged 65+ years. Five locality practice catchments are also similar to the city average; three practice catchments are significantly lower and one is significantly higher than the city average.

## Emergency care

### Emergency admissions for falls (aged 65+ years)

DSR per 100,000 population

**3,184 per 100k**

City average 3,072 per 100k



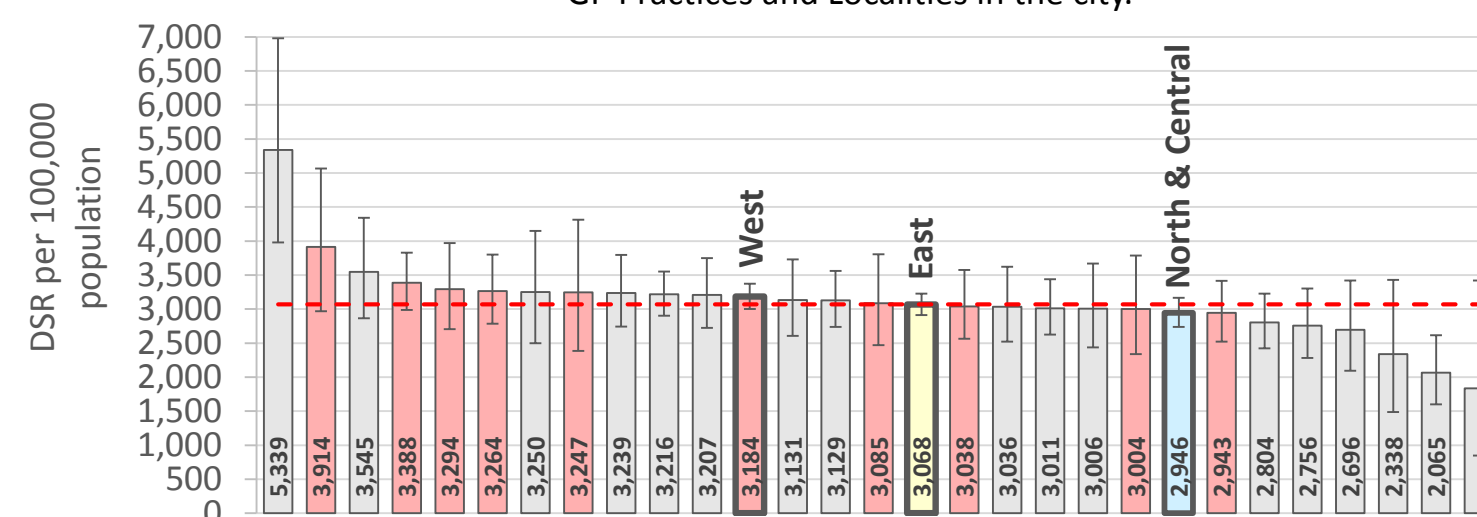
2015/16-2017/18

#### Locality Practice Best/Worst

**Best 2,943**  
per 100k  
(J82062)

**Worst 3,914**  
per 100k  
(J82115)

Chart showing variation in **emergency admissions for falls (65+ years)** across GP Practices and Localities in the city.



West Locality has a similar emergency admission rate for falls in those aged 65+ years compared to the city average. There is some variation between practices, with admissions ranging from 2,943 to 3,914 per 100k population (DSR). However, variations between practices within the locality are not significantly different to the city average.

### Emergency admissions due to hip fractures (aged 65+ years)

DSR per 100,000 population

**622 per 100k**

City average 613 per 100k

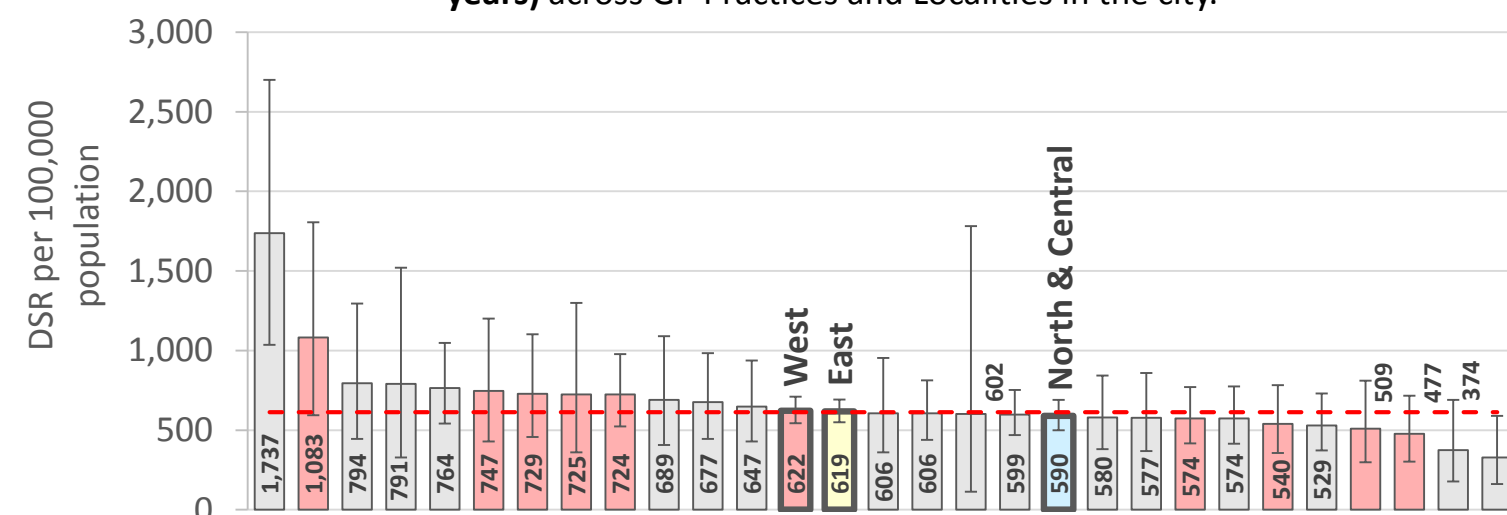


2015/16-2017/18

**Best 477**  
per 100k  
(J82088)

**Worst 1,083**  
per 100k  
(J82213)

Chart showing variation in **emergency admissions due to hip fractures (65+ years)** across GP Practices and Localities in the city.



The locality has a similar emergency admission rate for hip fractures in those aged 65+ years compared to the city average, with practices that form the locality also similar to the city average. Among practices in the locality emergency admissions for hip fractures range from 477 to 1,083 per 100k population (DSR).



# Ageing well



## Flu vaccination

Flu vaccination coverage  
(65+ years)

**72.3%**

City average 73.2%



2018-19

Locality Practice Best/Worst

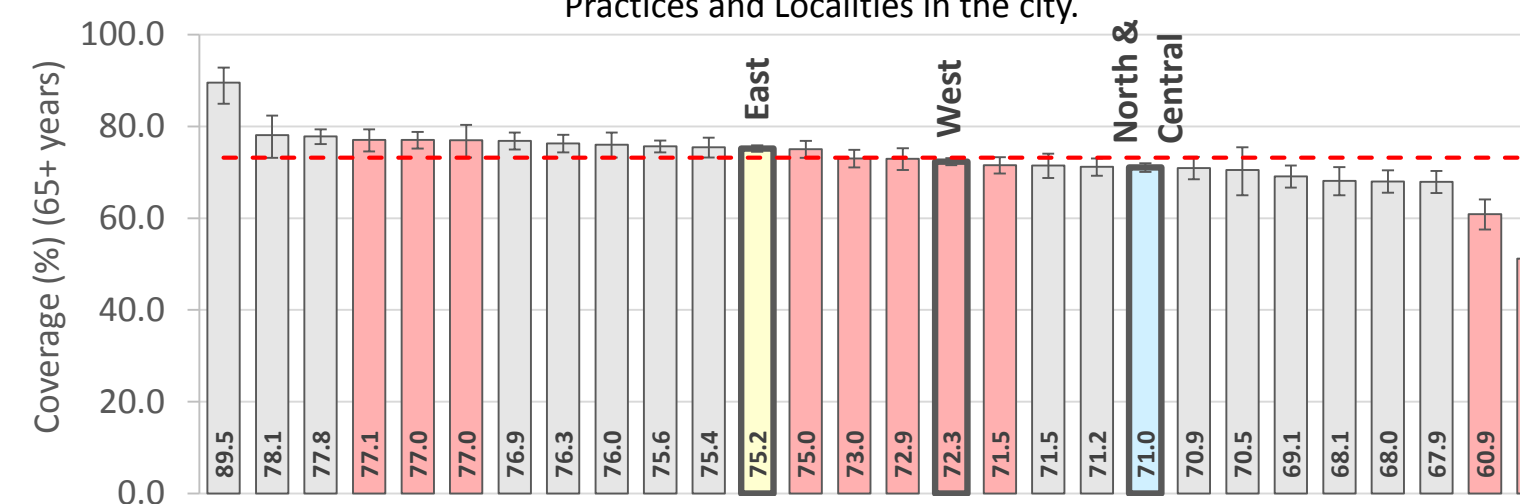
**Best 77.1%**

(J82207)

**Worst 51.2%**

(J82213)

Chart showing variation in **flu vaccination coverage (65+ years)** across GP Practices and Localities in the city.



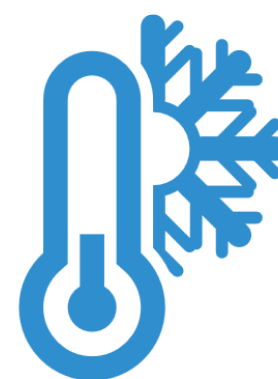
West Locality has a similar flu vaccination coverage in those aged 65+ years compared to the city average. However, there are large variations in coverage across locality practices, with coverage ranging from 51.2% to 77.1%. Two locality practices also have a significantly worse coverage than the city average (two are significantly better and five are similar).

## Mortality

Excess winter deaths  
(all ages)

**20.4%**

City average 22.0%



Aug 2014-July 2017

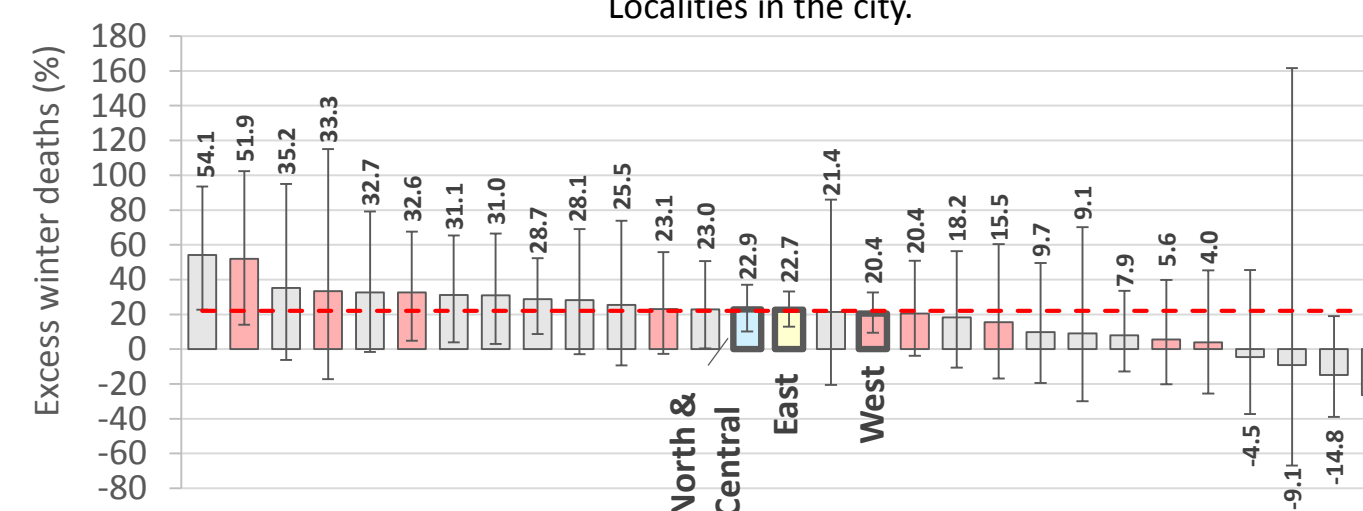
**Best -26.5%**

(J82213)

**Worst 51.9%**

(J82126)

Chart showing variation in **excess winter deaths** across GP Practices and Localities in the city.



The locality is similar to the city average for excess winter deaths, with all practices in the locality also similar to the city average. There is some variation between practices in the locality, with excess winter deaths ranging from -26.5% to 51.9%; however, differences are not significantly different to the city average and should be treated with some caution due to large confidence intervals.

Deaths occurring at home

**28.2%**

City average 25.3%



2015-17

Locality Practice Highest/Lowest

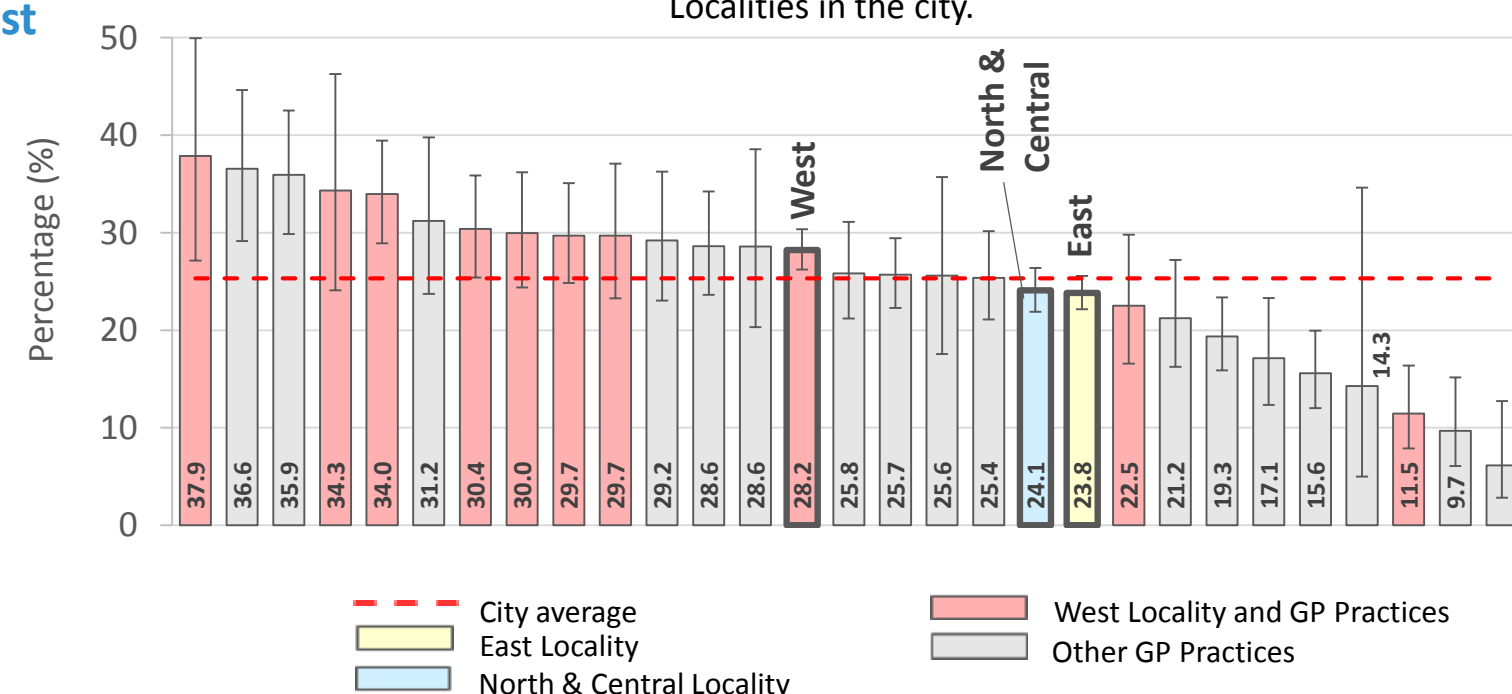
**Highest 37.9%**

(J82115)

**Lowest 11.5%**

(J82126)

Chart showing variation in **deaths occurring at home** across GP Practices and Localities in the city.



West locality has a similar percentage of deaths occurring at home compared to the city average. There is some variation between practices in the locality, with the percentage of deaths occurring at home ranging from 11.5% to 37.9%. One locality practice has a significantly lower percentage of deaths occurring at home compared to the city average, two practices are significantly higher than and five are similar to the city average.

Significantly worse than the city average  
Similar to the city average  
Significantly better than the city average





# Health behaviors



## Smoking prevalence

(aged 15+ years)

**21.4%**

City average 20.5%



2017/18

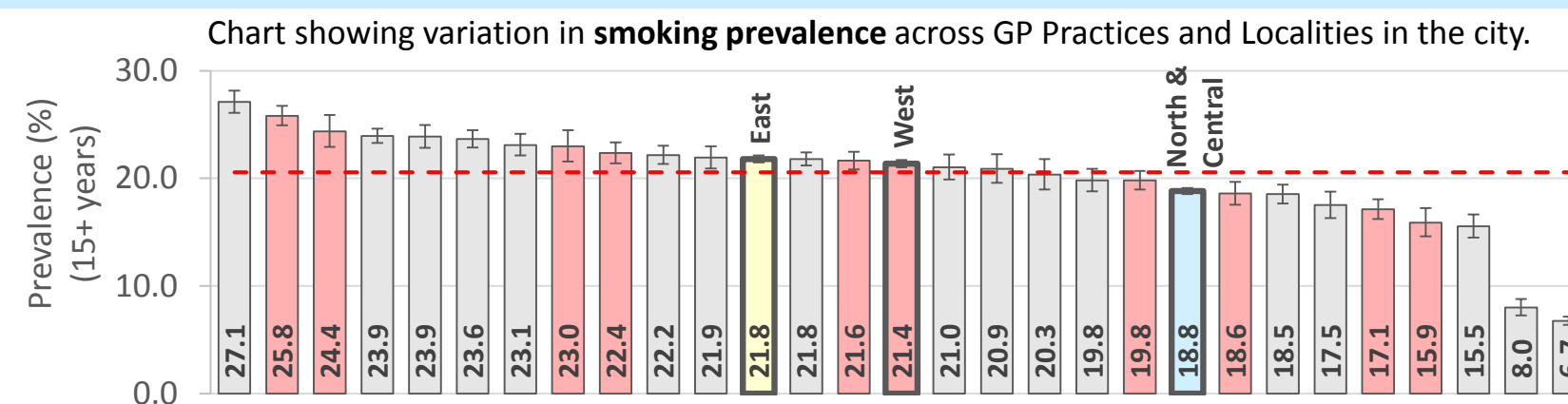
Locality Practice Best/Worst

Best 15.9%

(J82126)

Worst 25.8%

(J82062)



## Obesity prevalence

(aged 18+ years)

**10.4%**

City average 8.7%



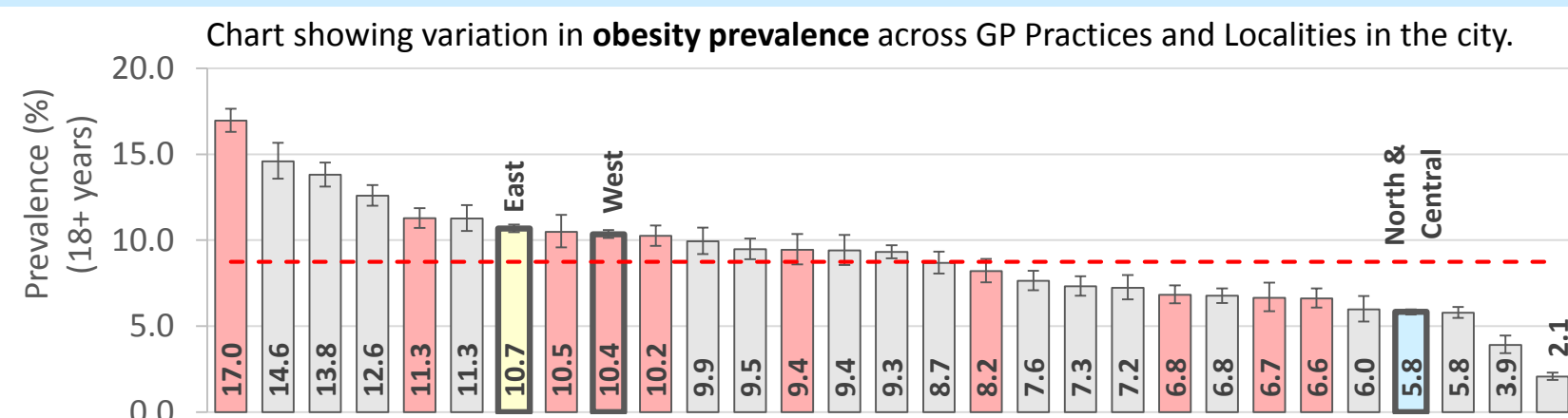
2017/18

Best 6.6%

(J82207)

Worst 17.0%

(J82088)



## Alcohol specific admissions

(DSR per 100,000 population)

**864 per 100k**

City average 938 per 100k



2015/16-2017/18

Best 498

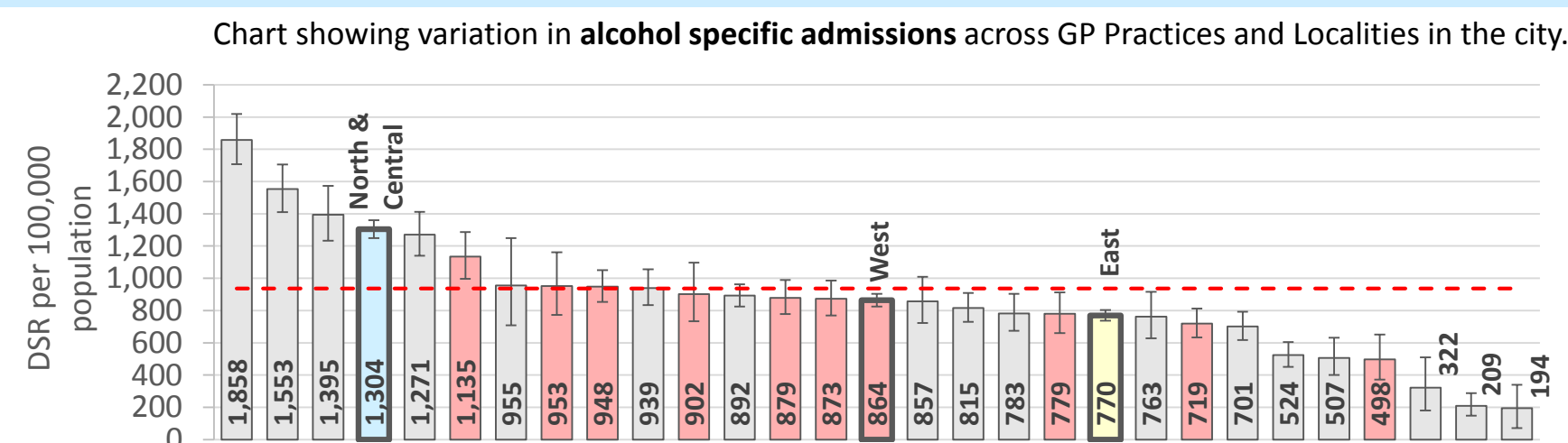
per 100k

(J82126)

Worst 1,135

per 100k

(J82092)



## Illicit drug poisoning admissions

(DSR per 100,000 population)

**54 per 100k**

City average 49 per 100k



2015/16-2017/18

Best 28

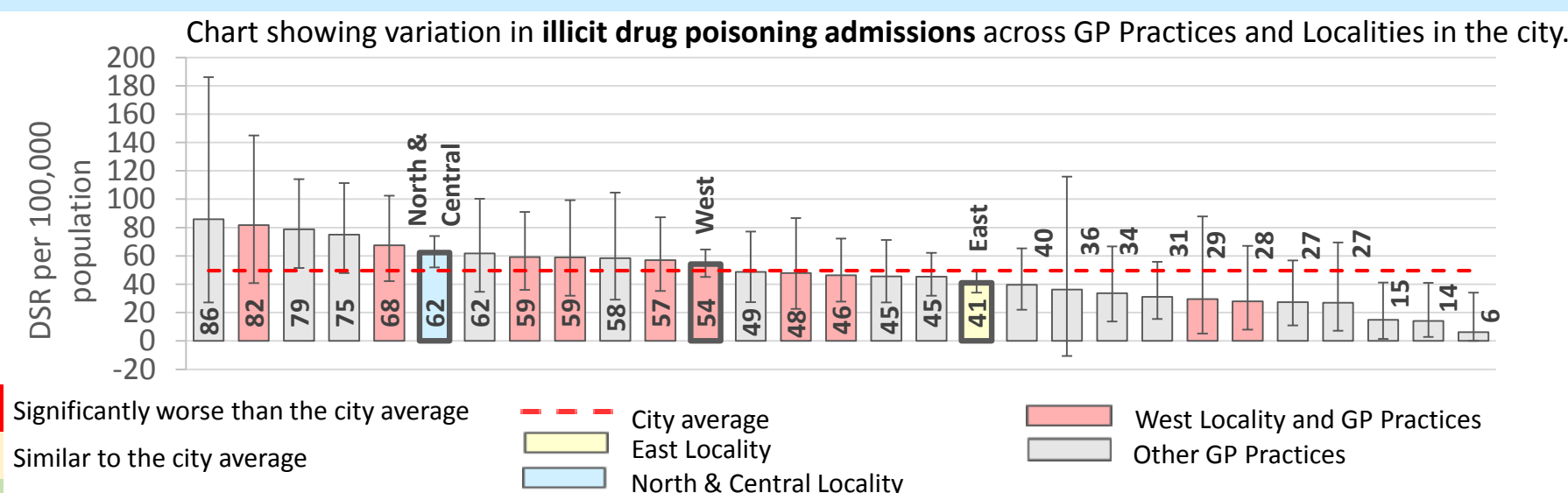
per 100k

(J82115)

Worst 82

per 100k

(J82213)



Unhealthy behaviours such as smoking, drinking, lack of exercise, poor diet and drug misuse increase an individuals risk of developing ill health and dying prematurely.

In Southampton, there is a very strong link between health behaviours and deprivation. More information on this work can be found in the [Health Inequalities section](#) or on [Southampton Data Observatory](#).

West Locality has a significantly worse prevalence of smoking among registered patients compared to the city average. Five locality practices also have a significantly worse smoking prevalence than the city average (three practices are significantly better and one is similar). Smoking prevalence across locality practices ranges from 15.9% to 25.8%.

The locality also has a significantly worse prevalence of obesity compared to the city average, with four locality practices also significantly worse (three practices are significantly better and two are similar).

West Locality has a significantly better rate of alcohol specific admissions than the city average, with three locality practices also significantly better (one practice is significantly worse and five are similar).

For admissions due to poisoning by illicit drugs, West Locality has a similar admission rate to the city average. There is some variation within the locality, but the size of the confidence intervals are large and therefore need to be considered when interpreting differences between practices.

[Smoking prevalence](#) and [alcohol specific admissions](#) maps at neighbourhood level can be found here.

Indicators are based on **REGISTERED** populations

Sources: QoF via Public Health England and Hospital Episode Statistics



# Wider Determinants of Health and Inequalities





# Wider Determinants



## Unemployment

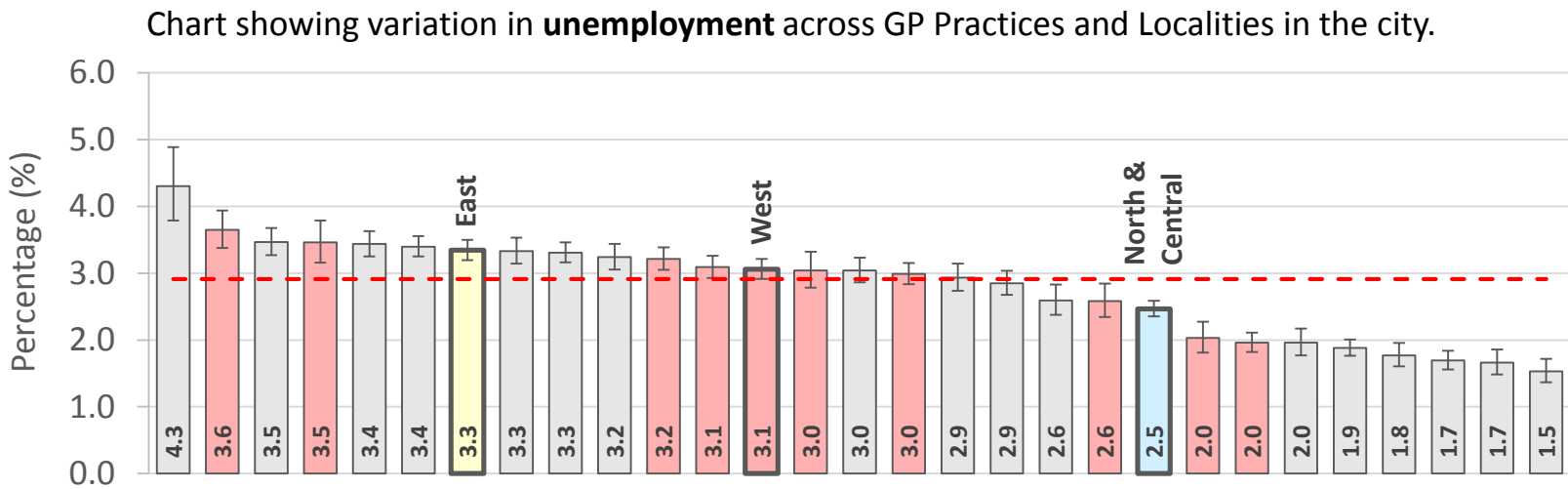
Claimant count (16-64 years)

**3.1%**  
City average 2.9%



Locality Practice Best/Worst

Best 2.0%  
(J82207)  
Worst 3.6%  
(J82213)



Wider determinants describe a diverse range of social, economic and environmental factors which impact on peoples health and daily living.

Variation in the experience of wider determinants is considered to be a fundamental cause of health outcomes. Therefore, addressing the wider determinants of health is important in reducing health inequalities and improving population health.

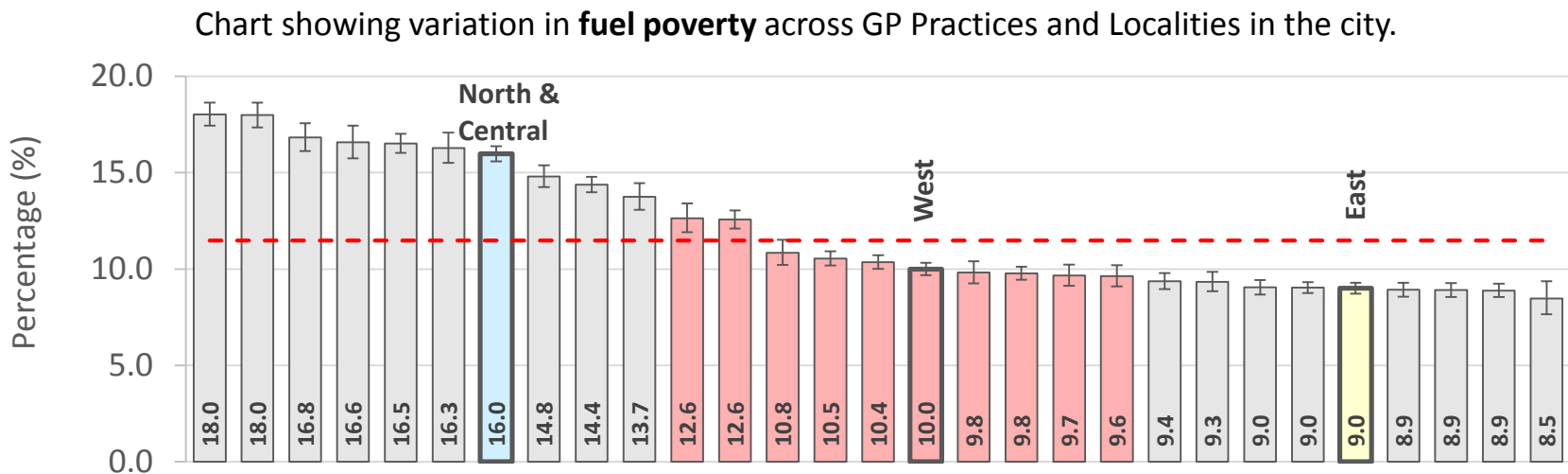
## Fuel poverty

(Low income high cost measure)

**10.0%**  
City average 11.5%



Best 9.6%  
(J82002)  
Worst 12.6%  
(J82115)



West Locality has a similar unemployment rate (claimant count) compared to the city average. There is some variation among locality practice catchments, with unemployment ranging from 2.0% to 3.6%; three locality practice catchments are significantly worse than the city average (two are significantly better and four are similar).

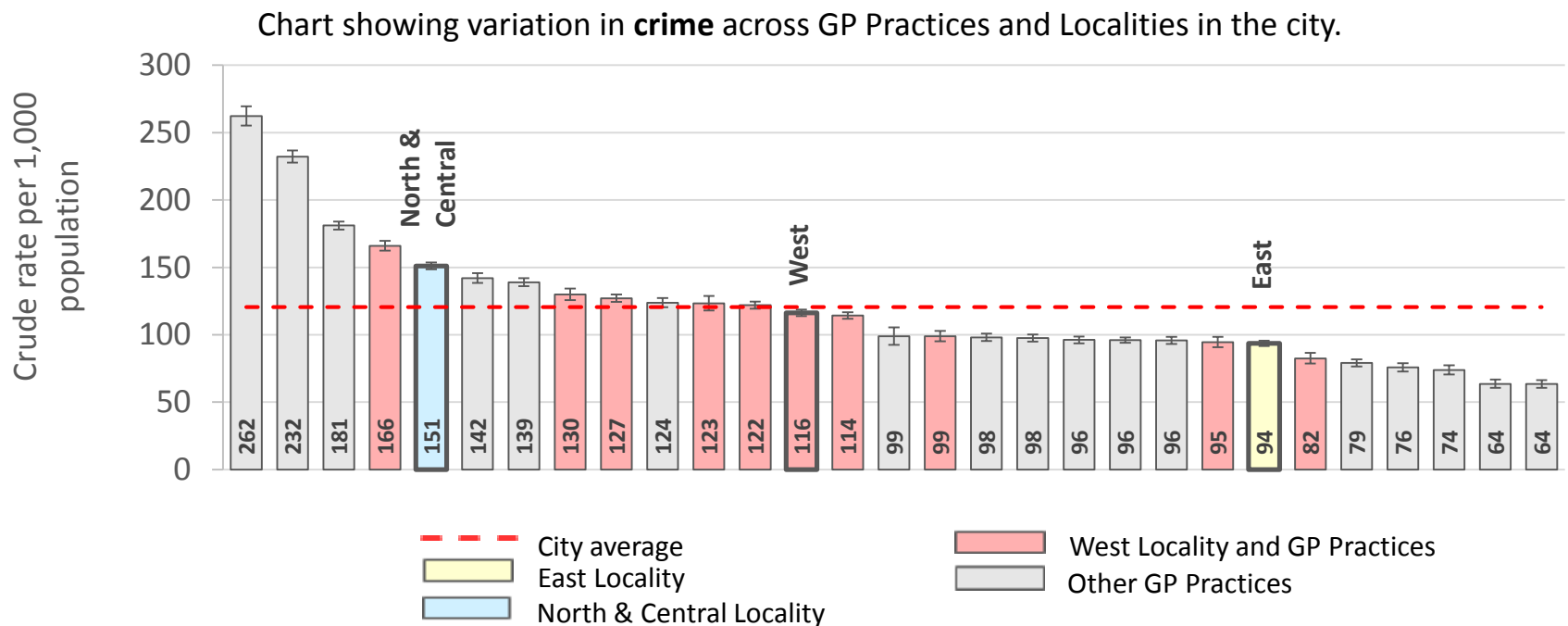
## Police recorded crime

(Crude rate per 1,000 population)

**116 per 1k**  
City average 121 per 1k



Best 82  
per 1k  
(J82126)  
Worst 166  
per 1k  
(J82207)



The locality is significantly better for fuel poverty compared to the city average, with six locality practice catchments also significantly better than the city average (two practice catchments are significantly worse and one is similar).

The police recorded crime rate is significantly better for West Locality compared to the city average. However, there is variation within the locality, with three practice catchments significantly worse than the city average (four practice catchments are significantly better and two are similar).

Significantly worse than the city average  
Similar to the city average  
Significantly better than the city average

Indicators are based on **RESIDENT** populations  
Data sources: Department for Work and Pensions via Nomis, The Department for Business, Energy and Industrial Strategy and Hampshire Constabulary



# Wider Determinants



## Economic activity

(16-64 years)

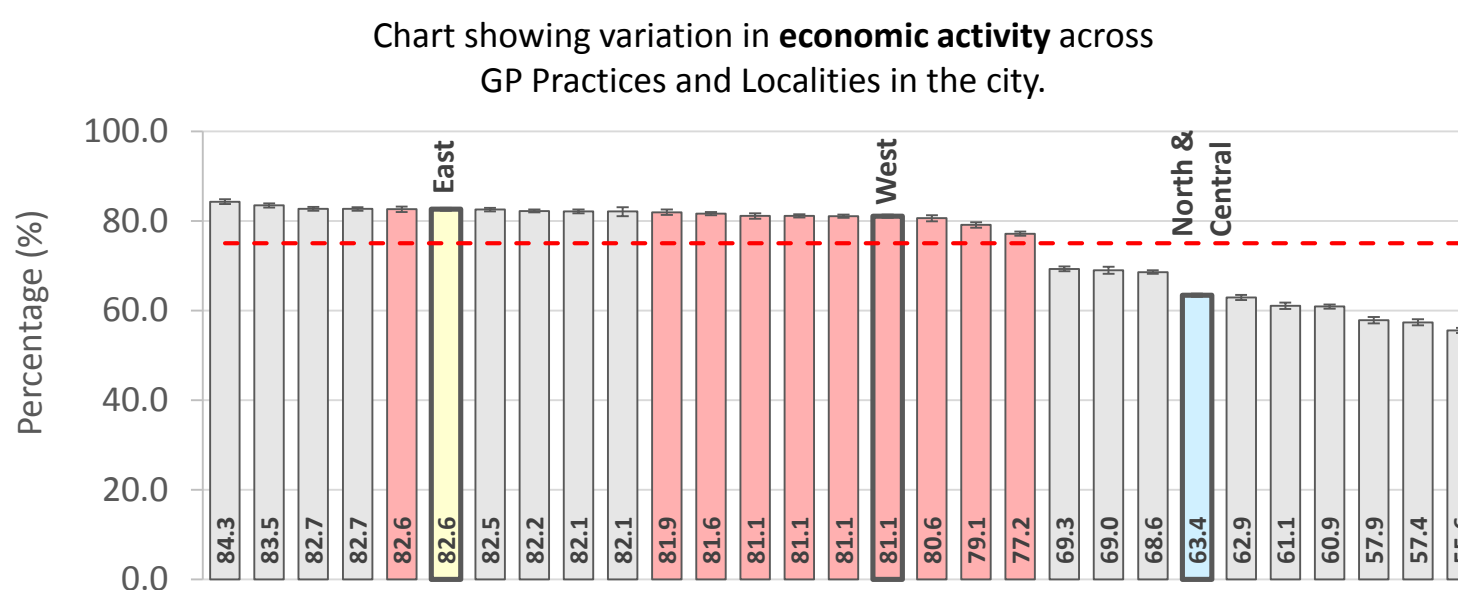
**81.1%**  
City average 75.0%



2011

Locality Practice highest/lowest

**Highest 82.6%**  
(J82126)  
**Lowest 77.2%**  
(J82207)

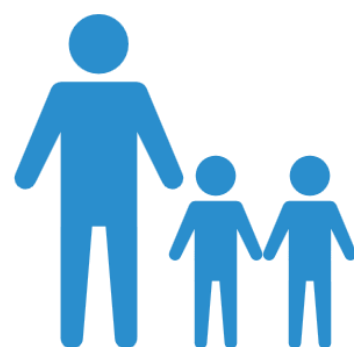


West Locality has a significantly higher economic activity rate than the city average, with all of the locality practice catchments also significantly higher than the city average. There is very little variation between practice catchment values for economic activity, which ranges from 77.2% to 82.6%.

## Lone parent households

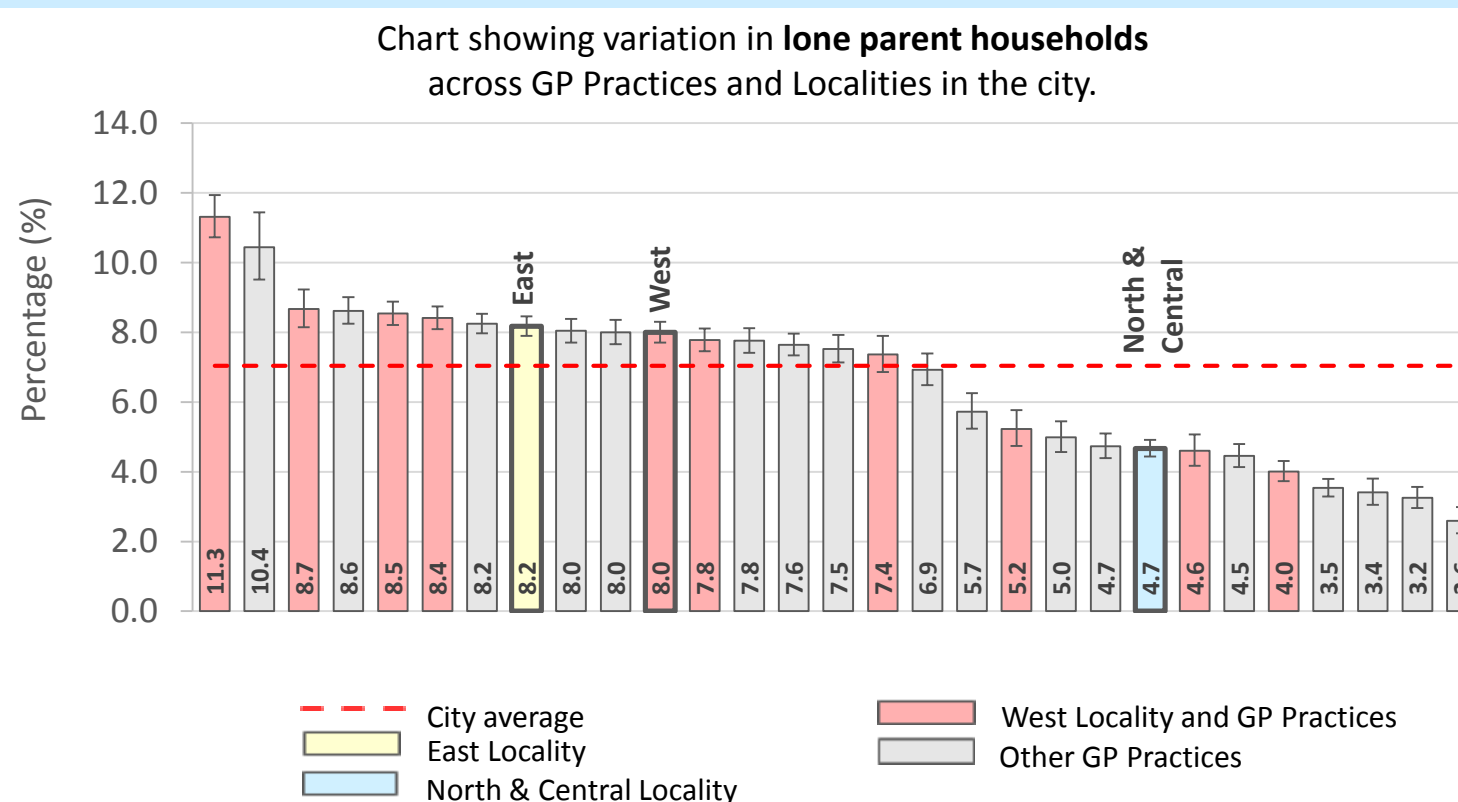
(with dependent children)

**8.0%**  
City average 7.0%



2011

**Highest 11.3%**  
(J82213)  
**Lowest 4.0%**  
(J82207)



Compared to the city average, West Locality has a significantly higher proportion of lone parent households, with five locality practice catchments also significantly higher than the city average (three practice catchments are significantly lower and one is similar). Practice catchment values range from 4.0% to 11.3%.

More information on inequalities and the wider determinants of health can be found on the [Southampton Data Observatory](http://southamptondataobservatory.org).

Significantly higher than the city average  
Similar to the city average  
Significantly lower than the city average

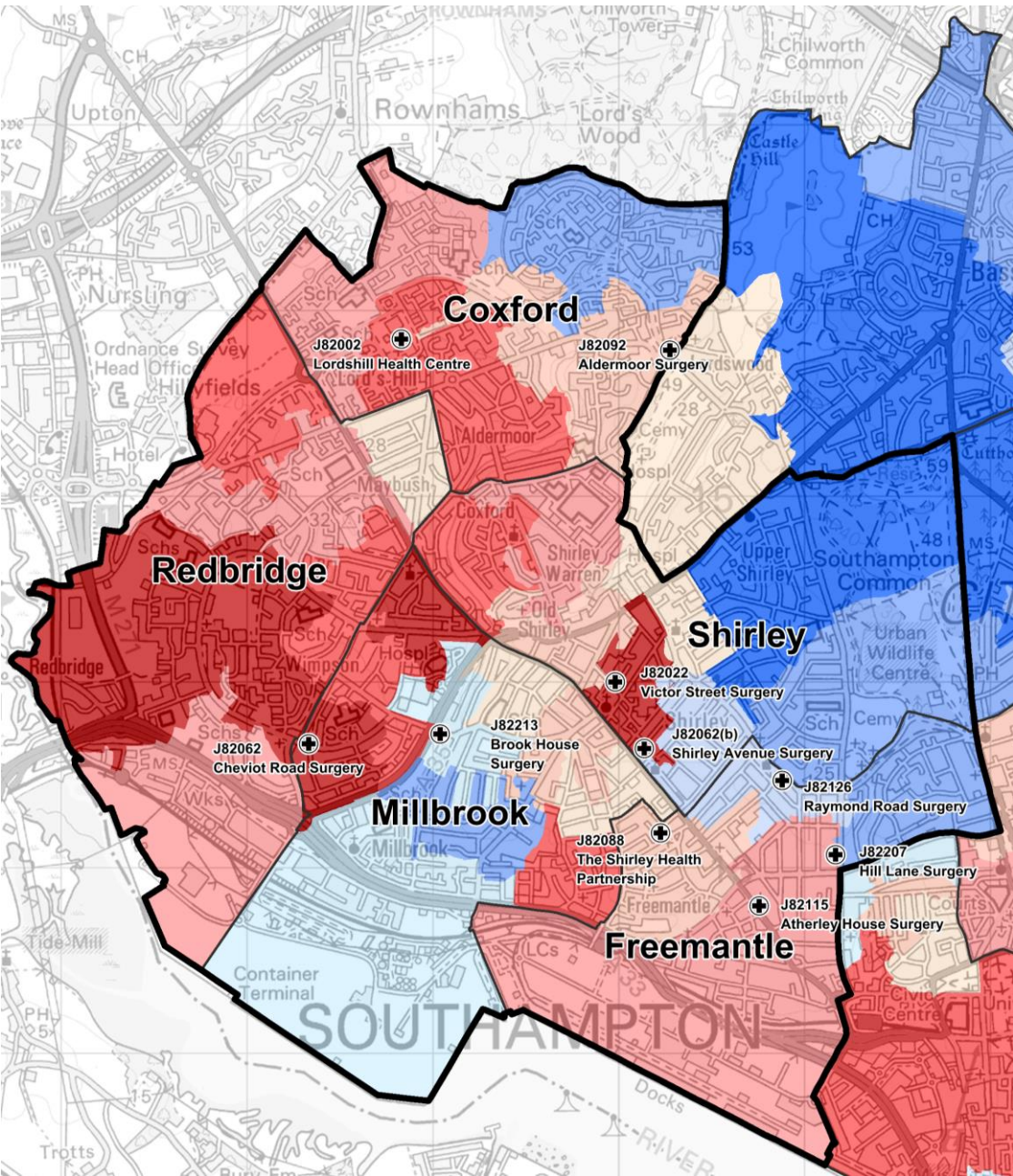




# Deprivation



## Deprivation map and GP practices



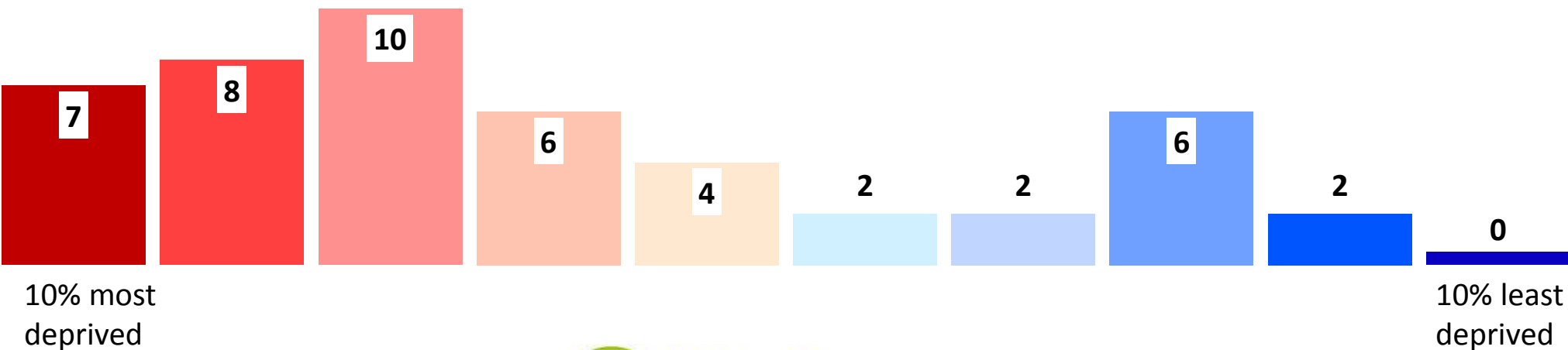
**Deprivation is closely linked to health experiences and outcomes.** A range of deprivation scores across neighbourhoods within the locality will likely reflect different health experiences and outcomes for residents. This means there will be a range of health outcomes across the locality and health inequalities. It is important to consider this, as considering only locality level data can mask a range of health inequalities within the locality.

Within West Locality, the largest concentrations of deprived neighbourhoods are found in Redbridge and Coxford Wards. More affluent neighbourhoods are concentrated in Shirley. More information on deprivation can be found on the [Southampton Data Observatory](#).

Source Indices of Multiple Deprivation (2015) - Department for Communities & Local Government  
© Crown copyright and database rights 2019 Ordnance Survey 100019679

## Neighbourhood deprivation ranking

The chart below shows the number of **neighbourhoods** in West Locality which fall into each deprivation decile.

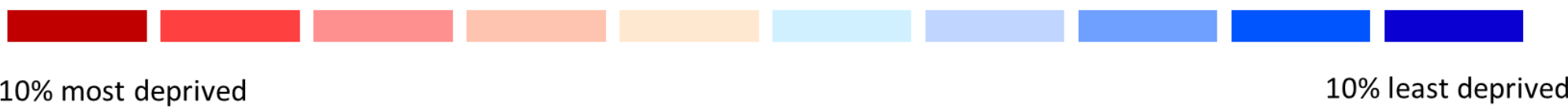


## Deprivation explained

The country is divided up into small geographical neighbourhoods known as Lower Super Output Areas (LSOAs). In Southampton, there are 148 LSOAs, of which 47 are in the West Locality.

The Index of Multiple Deprivation (IMD) measures deprivation in each neighbourhood in the country, across a number of domains including income, employment, education, health, crime, barriers to housing and services and living environments. The IMD ranks each neighbourhood in the country by their level of deprivation and splits them into 10 equal groups, known as deciles.

The map of West Locality on the left is colour-coded in terms of neighbourhood deprivation deciles.



## GP Practices

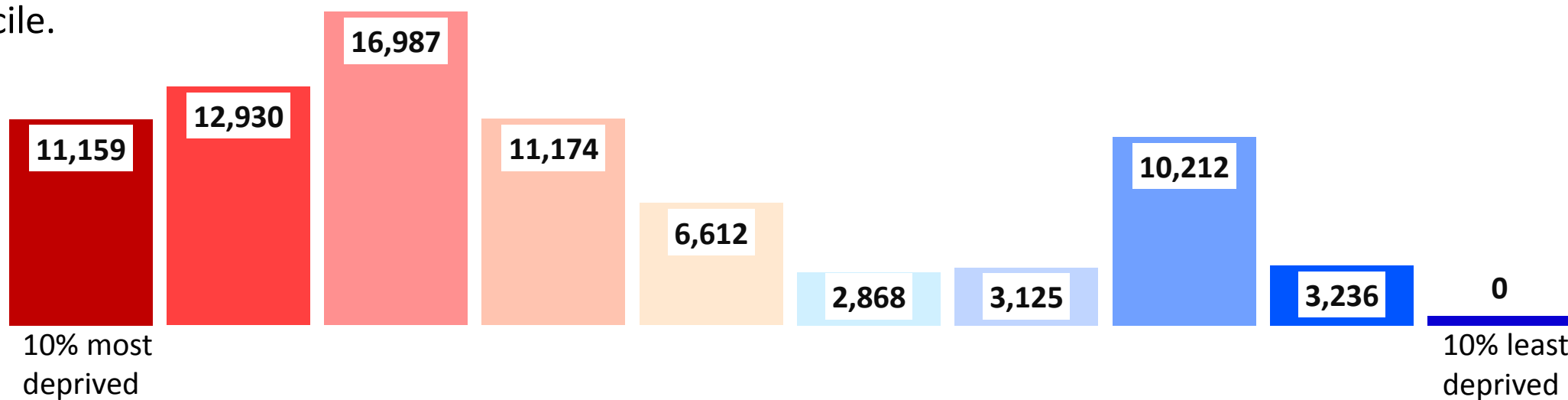
Practice code	Practice name	GP Registered population (Jan 2019)	% registered patients living in 20% most deprived neighbourhoods	Practice IMD score
J82062	Cheviot Road Surgery	15,508	47.9	33.9
J82213	Brook House Surgery	5,538	46.0	33.8
J82002	Lordshill Health Centre	11,546	35.2	26.9
J82022	Victor Street Surgery	12,307	29.5	25.9
J82088	The Shirley Health Partnership	14,556	20.1	25.0
J82092	Aldermoor Surgery	8,174	18.2	21.8
J82115	Atherley House Surgery	5,200	9.2	26.8
J82207	Hill Lane Surgery	9,330	6.9	18.4
J82126	Raymond Road Surgery	4,426	6.2	16.6

GP Registered populations are from NHS Digital

Practice IMD score are taken from Public Health England Fingertips (ID 91872)

## Residents per deprivation ranking

The chart below shows the number of **residents** in West Locality which fall into each deprivation decile.



Resident population figures are from 2018 based Hampshire Small Area Forecasts





# Health Inequalities



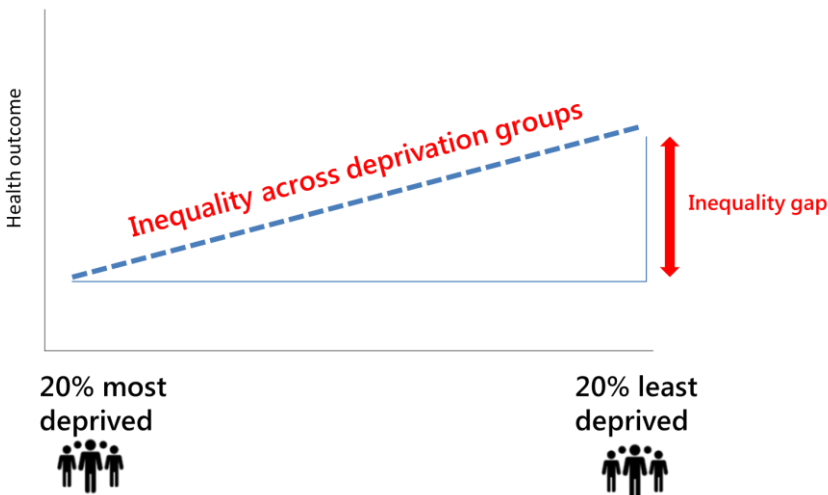
## Health Inequalities Explained

The health inequalities are measured by comparing health outcomes between those living in the 20% most deprived neighbourhoods in the city, with those living in the 20% least deprived neighbourhoods. The difference between the two groups is known as the inequality gap and is expressed as a *factor difference*. In an ideal world (and with all other things being equal) outcomes would be the same between groups; however we know that there are significant inequalities within the city, which are summarised over the next few slides. More information on health inequalities can be found on the [Southampton Data Observatory](#).

In an ideal world...



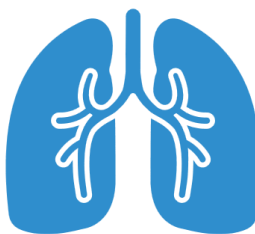
In Southampton...



## Physical health

In the most deprived local deprivation quintile compared to the least...

### COPD



#### Prevalence

**2.88** times higher  
(2017)

#### Emergency admissions

**3.46** times higher  
(2015/16-2017/18)

### Asthma



#### Prevalence

**1.46** times higher  
(2017)

#### Emergency admissions

**1.92** times higher  
(2015/16-2017/18)

## Ischaemic Heart Disease



#### Prevalence

**1.51** times higher  
(2017)

## Diabetes



#### Prevalence

**1.64** times higher  
(2017)

## 3 or more chronic conditions



#### Prevalence

**1.42** times higher  
(2017)

## Hypertension



#### Prevalence

**1.20** times higher  
(2017)

## Life Expectancy and Mortality

In the most deprived local deprivation quintile compared to the least...



Males and females on average live shorter lives  
(2015-17)



### Premature mortality

**1.99** times higher  
(2015-17)



### Preventable mortality

**2.27** times higher  
(2015-17)



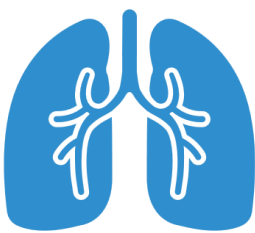
### Premature Cancer mortality

**1.54** times higher  
(2015-17)



### Premature Circulatory disease mortality

**1.89** times higher  
(2015-17)



### COPD mortality

**2.85** times higher  
(2015-17)





# Health Inequalities



## Mental health

In the most deprived local deprivation quintile compared to the least...



Depression prevalence

**1.78** times higher  
(2017)



Schizophrenia prevalence

**2.77** times higher  
(2017)



Bipolar disorder prevalence

**1.70** times higher  
(2017)



Emergency admissions for intentional self-harm

**3.49** times higher  
(2015/16 – 2017/18)

## Healthy start and children

In the most deprived local deprivation quintile compared to the least...



Breastfeeding initiation

**1.38** times lower  
(2015/16 – 2017/18)



Teenage maternities (U20 yrs)

**3.05** times higher  
(2015/16 – 2017/18)



Mothers smoking at booking

**4.32** times higher  
(2015/16 – 2017/18)



Prevalence of obesity

Year R children **1.72** times higher

Year 6 children **1.76** times higher  
(2015/16 – 2017/18)

## Healthy behaviours

In the most deprived local deprivation quintile compared to the least...



Smoking prevalence

**1.93** times higher  
(2017)



Drug related mental health and behavioural admissions

**4.78** times higher  
(2015/16 – 2017/18)



Alcohol-specific admissions

**3.39** times higher  
(2015/16 – 2017/18)



Admissions due to poisoning by illicit drugs

**4.11** times higher  
(2015/16 – 2017/18)

## Wider determinants

In the most deprived local deprivation quintile compared to the least...



Looked after children

**3.95** times higher  
(2018)



Child poverty

**4.84** times higher  
(2015)



Claimant count (unemployment)

**5.06** times higher  
(2019)



Crime

**3.02** times higher  
(2017/18)



## Healthcare Activity



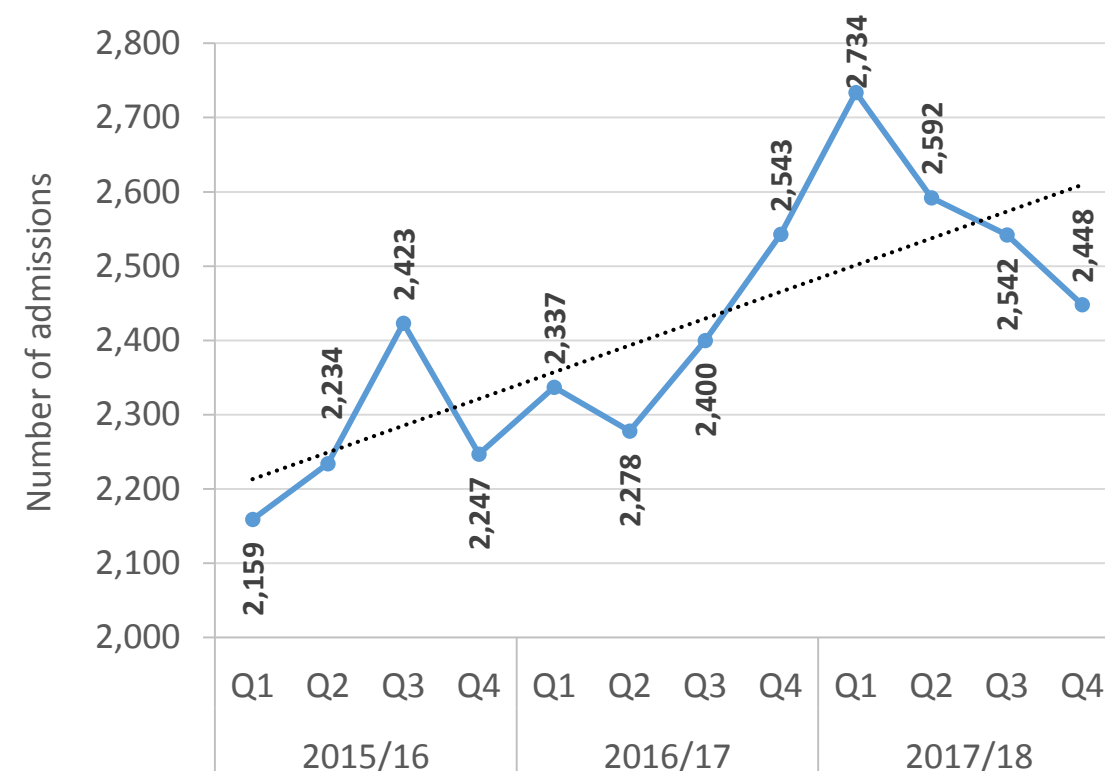


# Hospital Activity – Urgent Care



## Emergency admissions

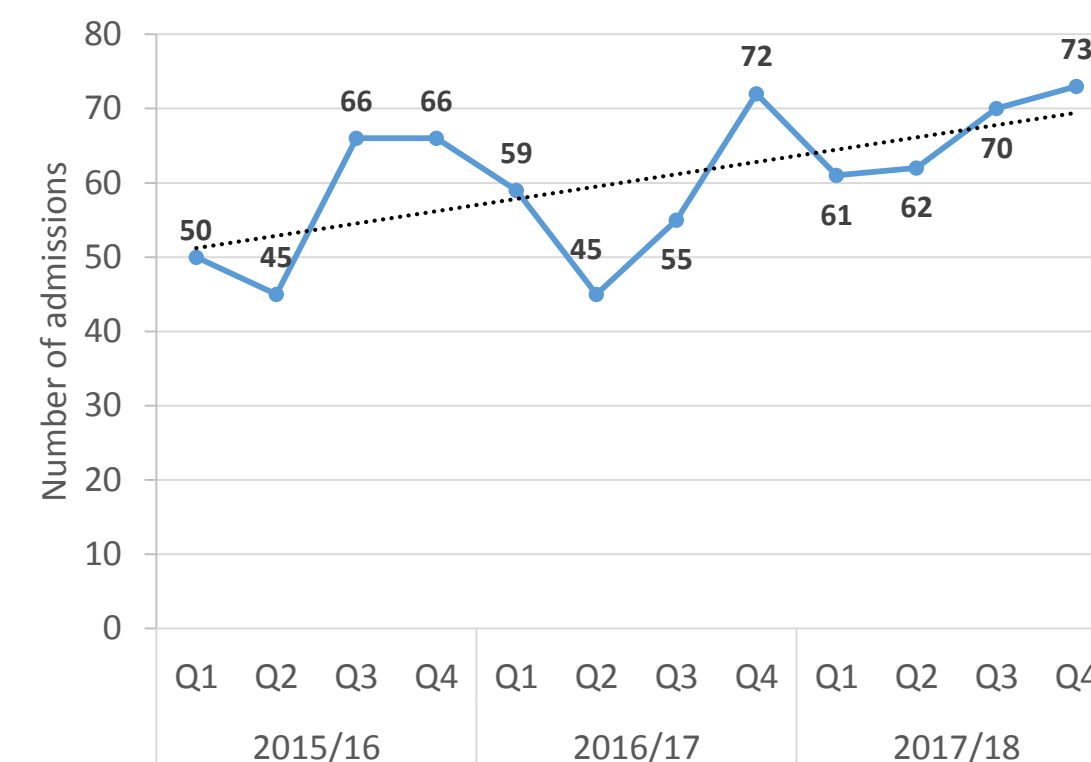
Emergency admissions show an increasing trend ▲



The number of emergency admissions for all causes over the last 3 years has fluctuated for West Locality, but there does appear to be an overall increasing trend. However, there are signs that the number of admissions may be reducing, with continual falls recorded over the last 3 quarters, having peaked in Q1 of 2017/18.

## COPD (35+ years)

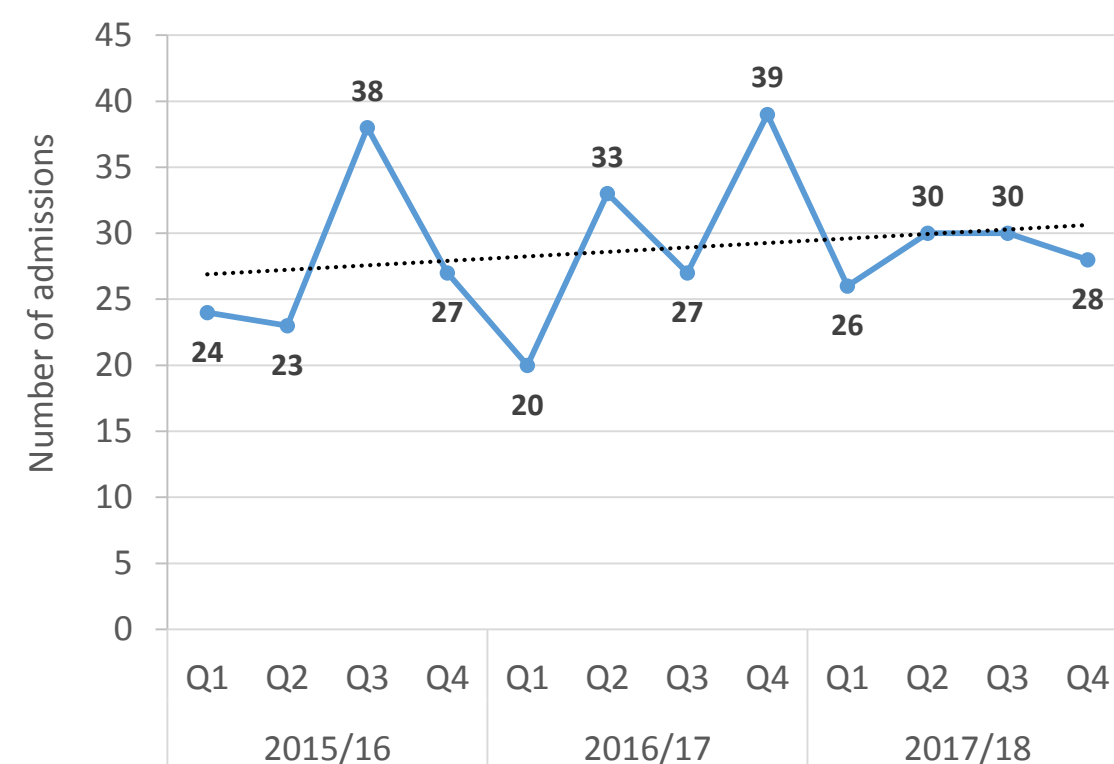
Emergency admissions for COPD shows seasonal variation ↗↘



Emergency admissions for COPD in those aged 35+ years shows seasonal variations in admissions, with higher admissions in the winter months (financial quarters 3 and 4 – October to March). There also appears to be an overall increase in the number of admissions over the last 3 years.

## Asthma

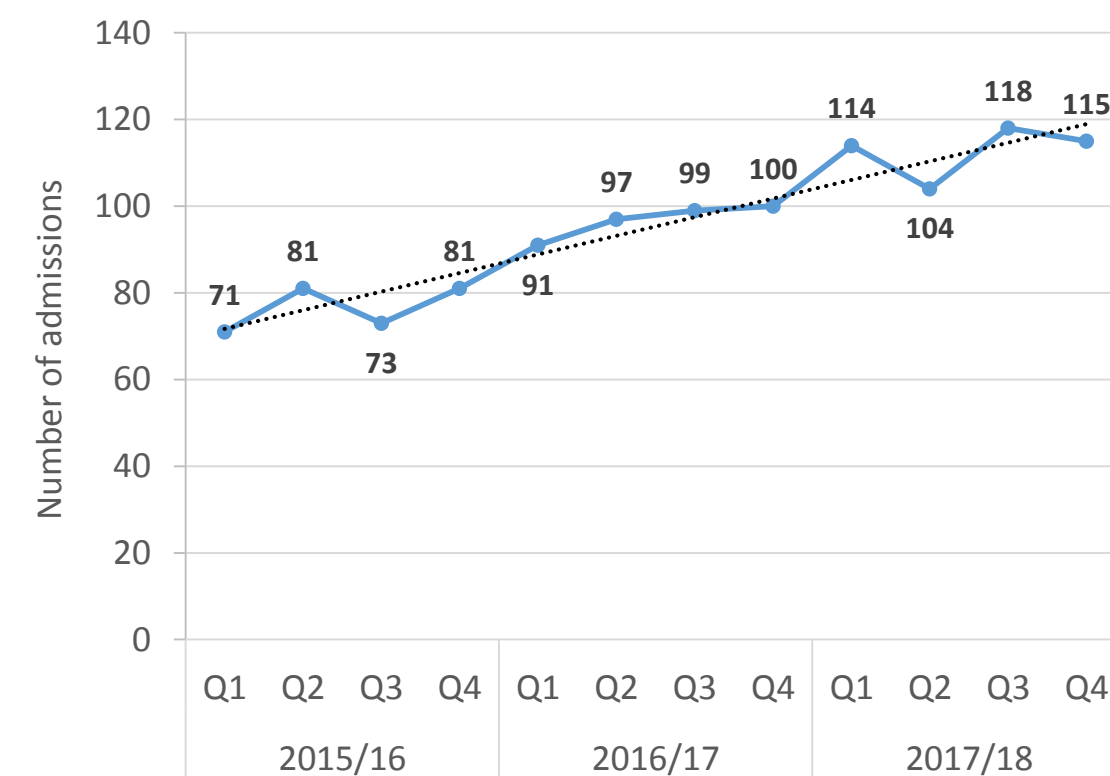
Emergency admissions for Asthma has remained flat ➡



Although the number of emergency admissions for asthma has remained relatively flat, there does appear to be some seasonal variation with peaks in admissions in Q3 of 2015/16 and Q4 of 2016/17.

## Falls (65+ years)

Emergency admissions for falls show an increasing trend ▲



Emergency admissions for falls in those aged 65+ years shows an overall increase over the 3 year period.

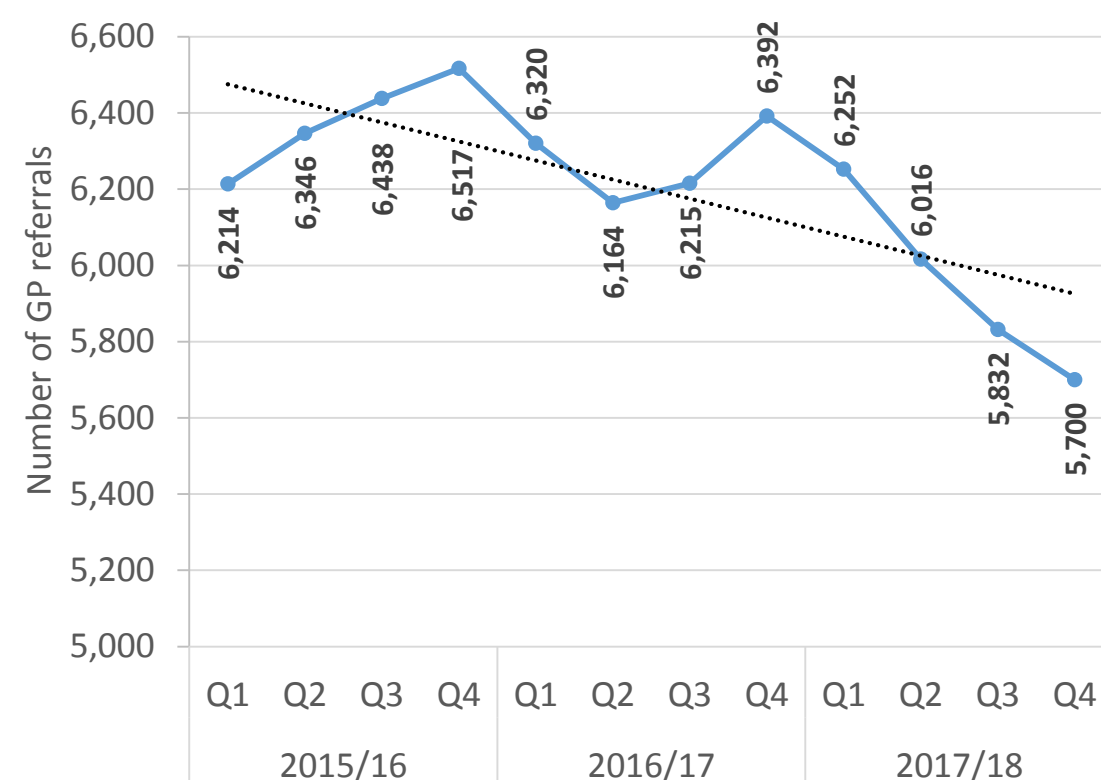


# Hospital Activity – Planned Care



## GP referrals

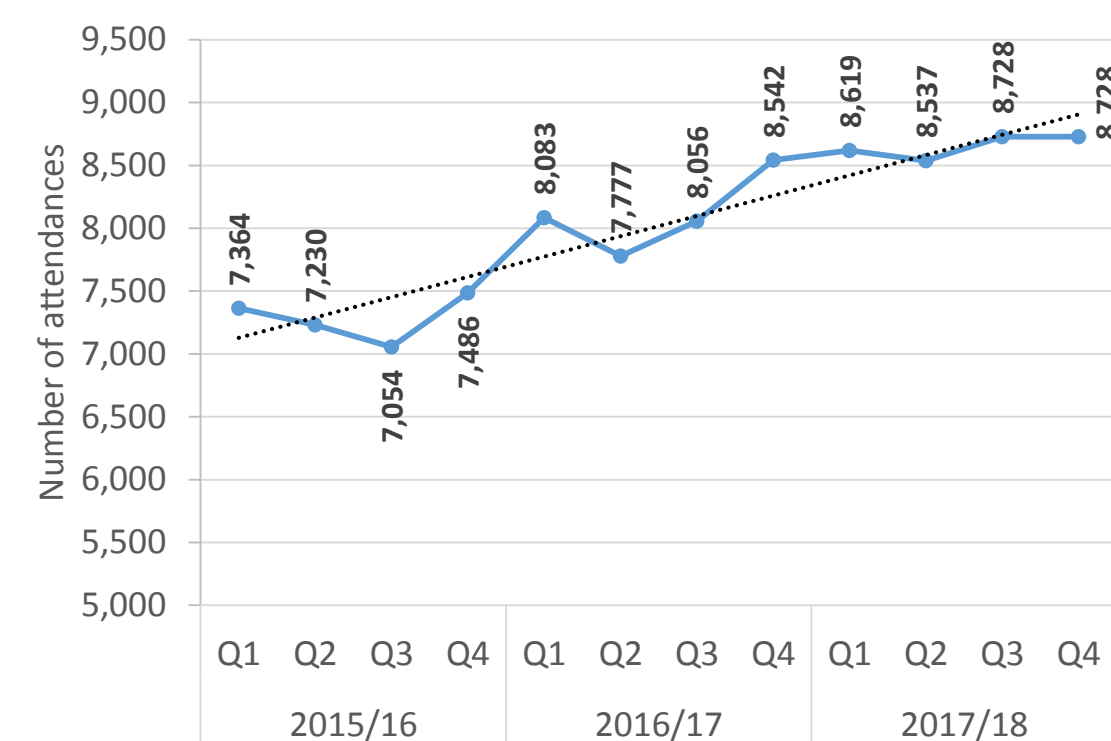
GP referrals show a downward trend ↓



Overall the number of GP referrals appears to be reducing in the West Locality. Despite fluctuations over the three year period, there has been a steep downward trend since Q4 of 2016/17.

## Outpatient First Attendances

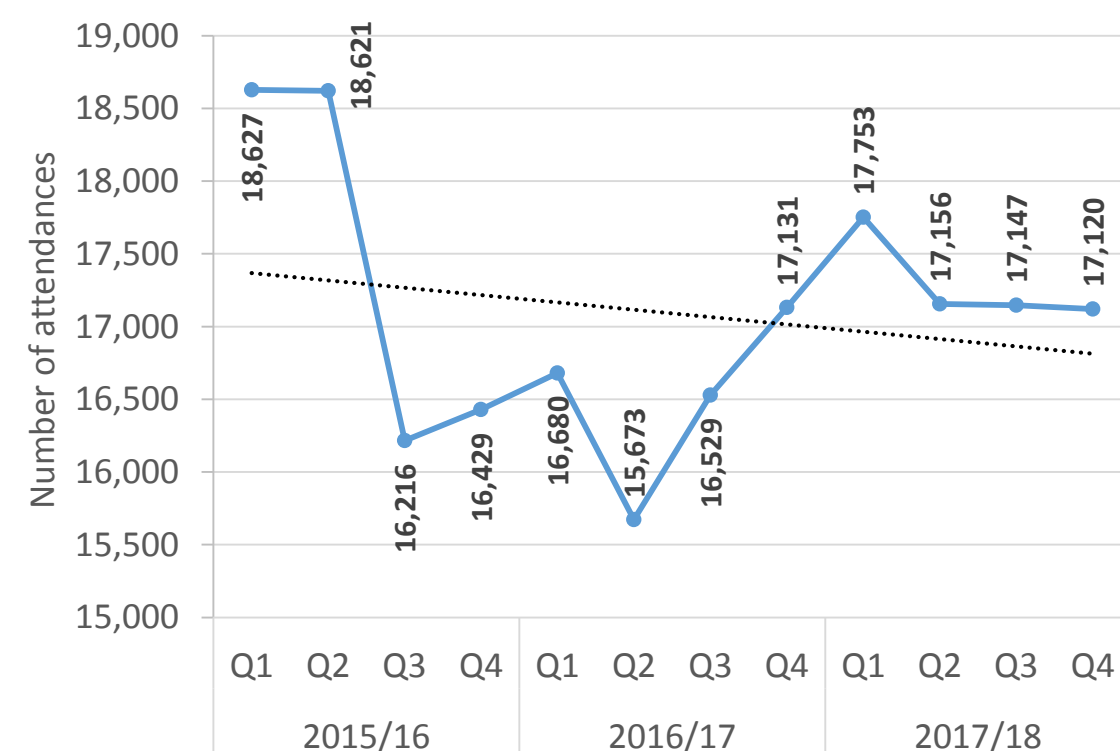
Outpatient first attendances are increasing ↑



The number of outpatient first attendances show an overall increasing trend, with an increase of 18.5% between Q1 of 2015/16 and Q4 of 2017/18.

## Outpatient follow ups

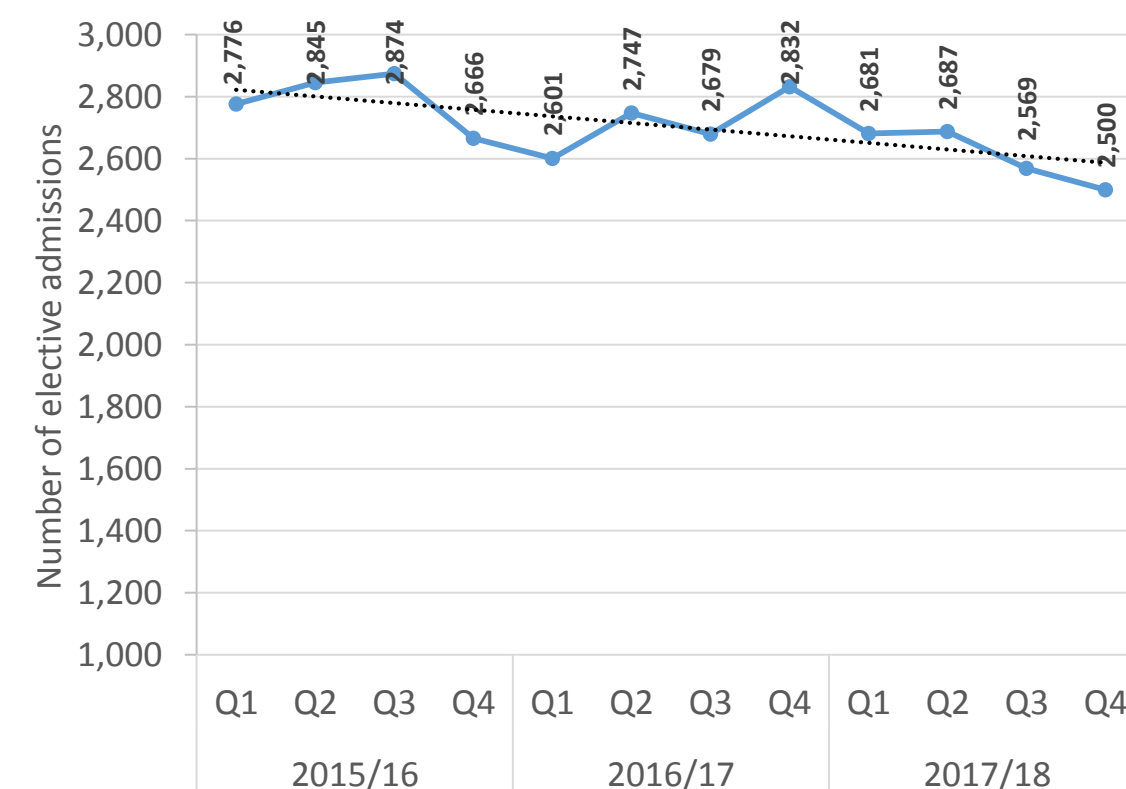
Outpatient follow up attendances are flat ➡



The number of outpatient follow up attendances show large fluctuations over the three year period. However, the overall trend remains relatively flat across Q2,Q3 and Q4 of 2017/18.

## Elective admissions

Number of elective admissions are flat ➡



The number of elective admissions has fluctuated over the period, however the overall trend has remained relatively stable over the last 3 years, with signs that admissions are falling since Q4 of 2016/17.



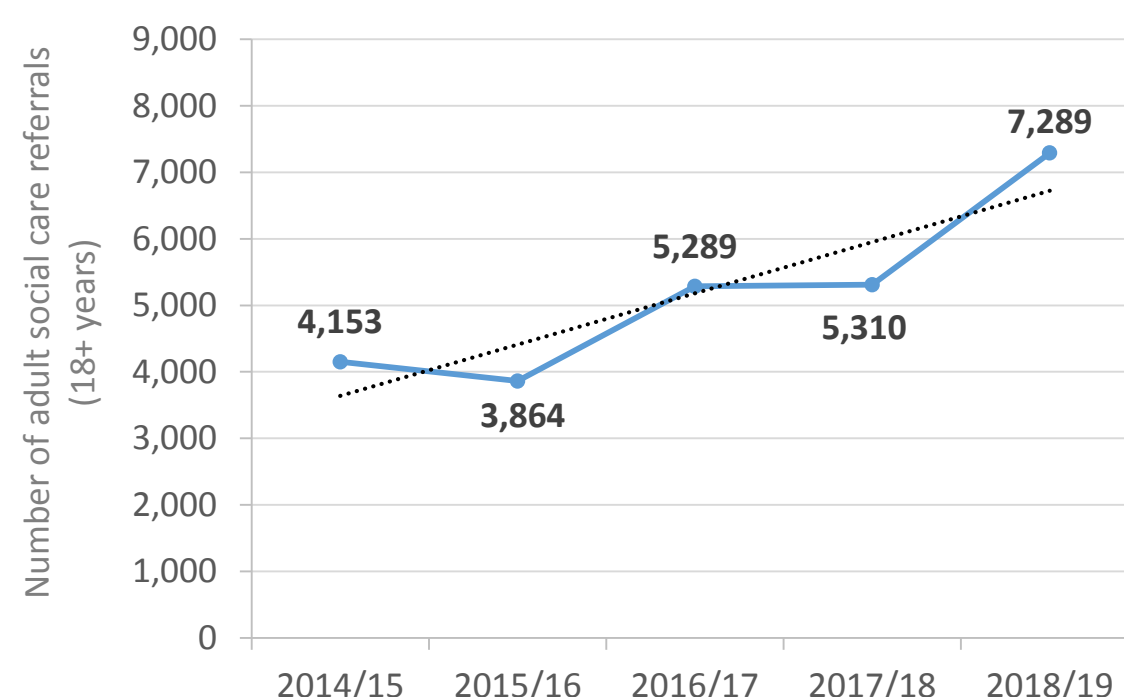


# Social Care Activity



## Adult Referrals

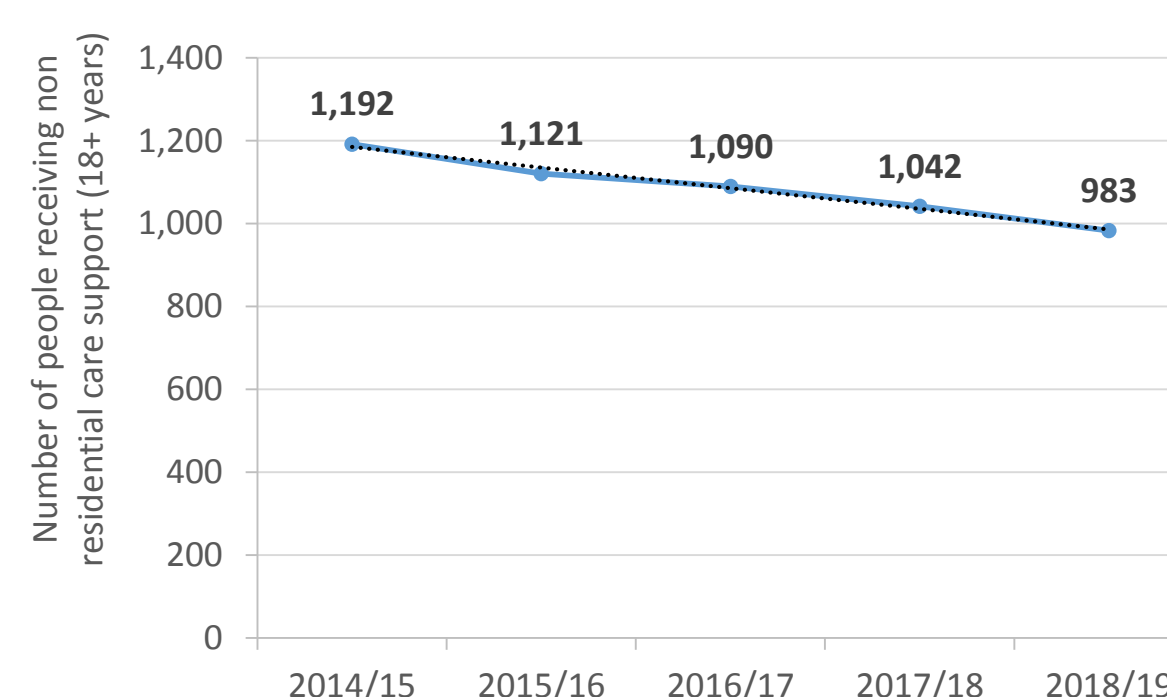
Number of adult social care referrals has increased



The number of adult social care referrals has seen an overall increase, with West Locality experiencing a 75.5% increase between 2014/15 to 2018/19. Wards that form the Locality have also experienced increases, ranging from 55.7% in Coxford to 101.3% in Redbridge. It should be noted that people can be referred more than once.

## Non Residential Care Support

Number of people receiving non residential care has declined

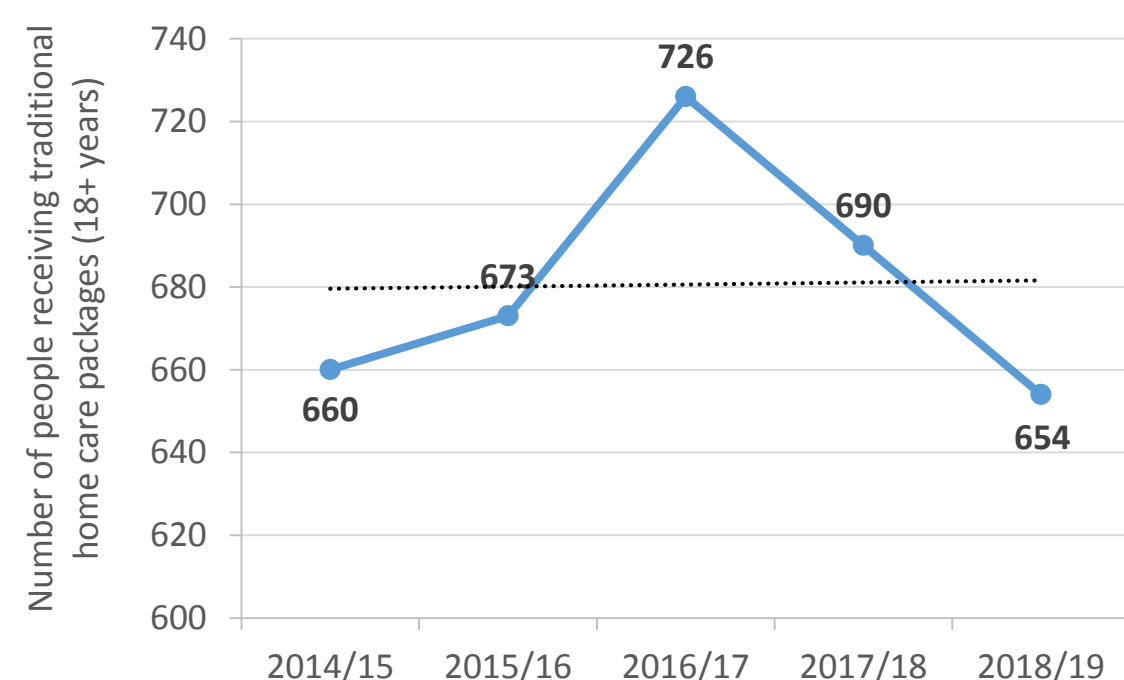


Non residential care support includes traditional home care, day care, direct payments, short stay residential, short stay nursing and respite care.

The number of people receiving support has seen an overall decline for West Locality (-17.5%) between 2014/15 and 2018/19, Wards that form the Locality have also seen declines, which range from 4.9% in Coxford to 26.4% in Shirley.

## Traditional Home Care Support

Number of people receiving home support has declined

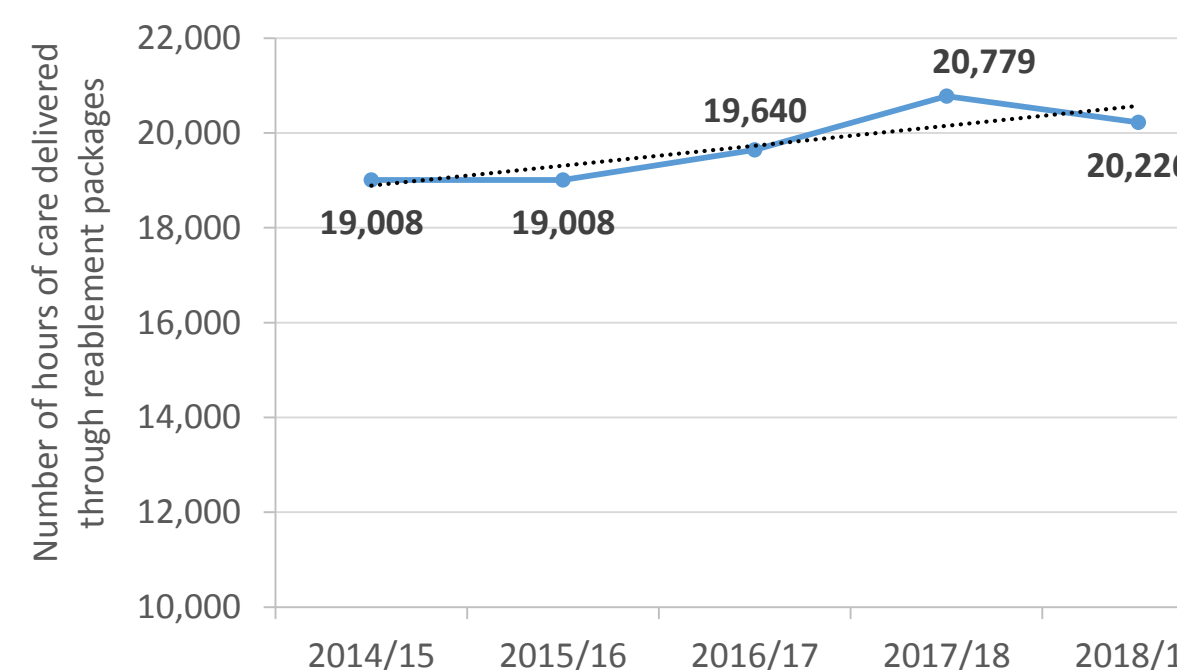


Traditional home care packages refer to individuals that are receiving long-term support at home.

There has been fluctuations in the number of people receiving traditional home care packages across West Locality, with an increase in the number of packages seen until 2016/17 and then a subsequent decline. Wards that form the Locality have experienced changes ranging from -12.6% in Millbrook +16.3% in Coxford.

## Reablement Packages

Number of hours of care delivered through reablement packages has remained flat



Reablement packages is short term care, which is usually delivered in the home to help someone recovering from an illness or injury. Reablement packages typically last around 6 weeks, but can be longer or shorter.

For West Locality the number of hours of care delivered through reablement packages has remained relatively flat. Some of the Wards that form the Locality have experienced changes between 2014/15 and 2018/19 ranging from -17.1% (Millbrook) and +33.0% (Redbridge).



Maps





This section contains a series of maps that show a number of indicators by small geographical neighbourhoods (Lower Super Output Areas), with Ward and Locality boundaries overlaid onto the map.

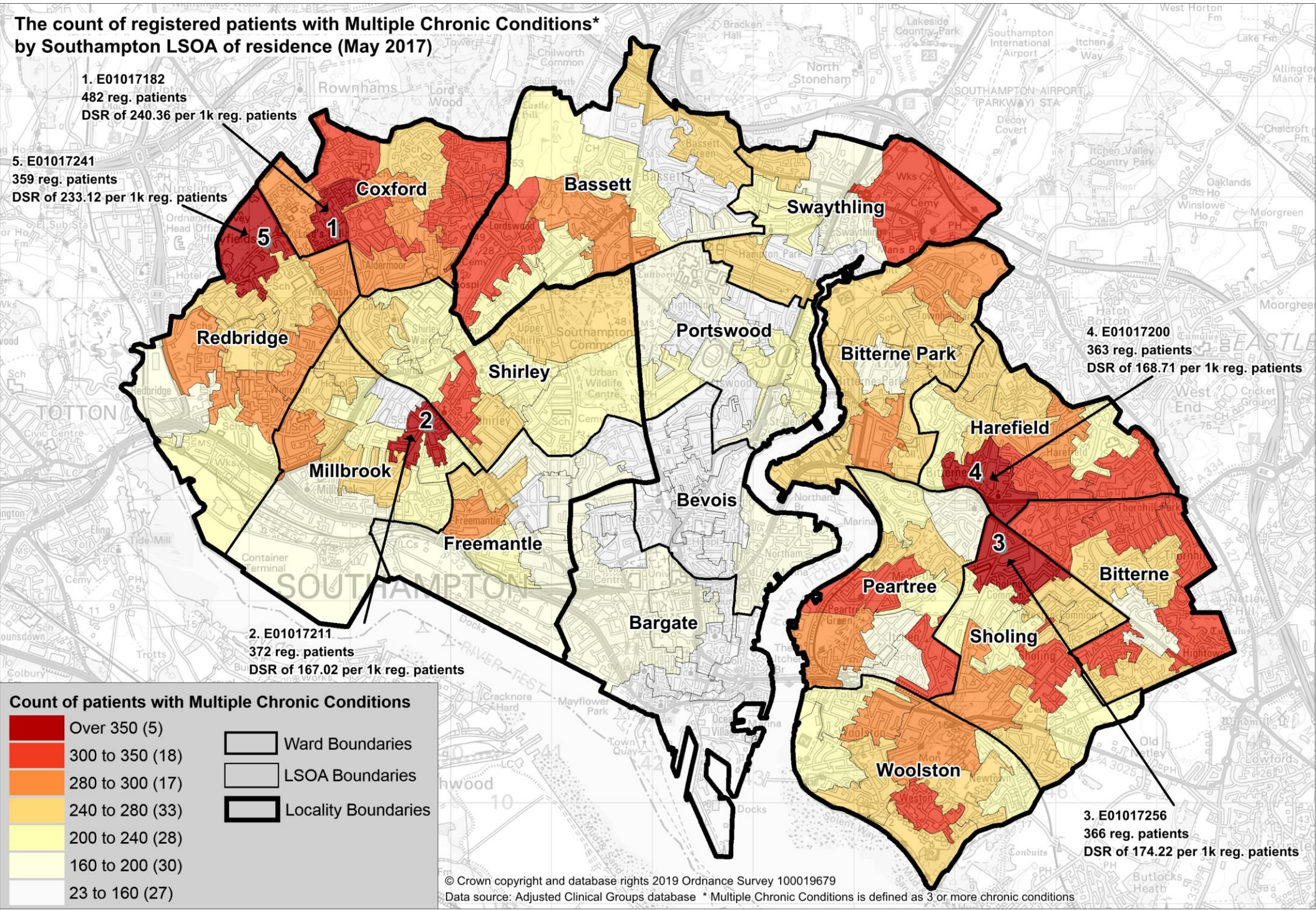
Each indicator contains two maps, one shows the **count** and the other shows the **significant difference** compared to the city average. For example, there is a count map for COPD which shows which neighbourhoods have the greatest number of people with the condition. It should be noted that just because a neighbourhood has a high count – does not necessarily mean prevalence is greatest there, it could just be because the area has a larger population. The significant difference map will show where the prevalence of COPD is significantly different to the city average.

On each map the highest five neighbourhoods have been pulled out, for the count map this will be the neighbourhoods with the greatest number of people with the condition and for the significant difference map it is the five neighbourhoods with the greatest prevalence, which will either be a crude rate, Directly age standardised rate (DSR) or proportion.

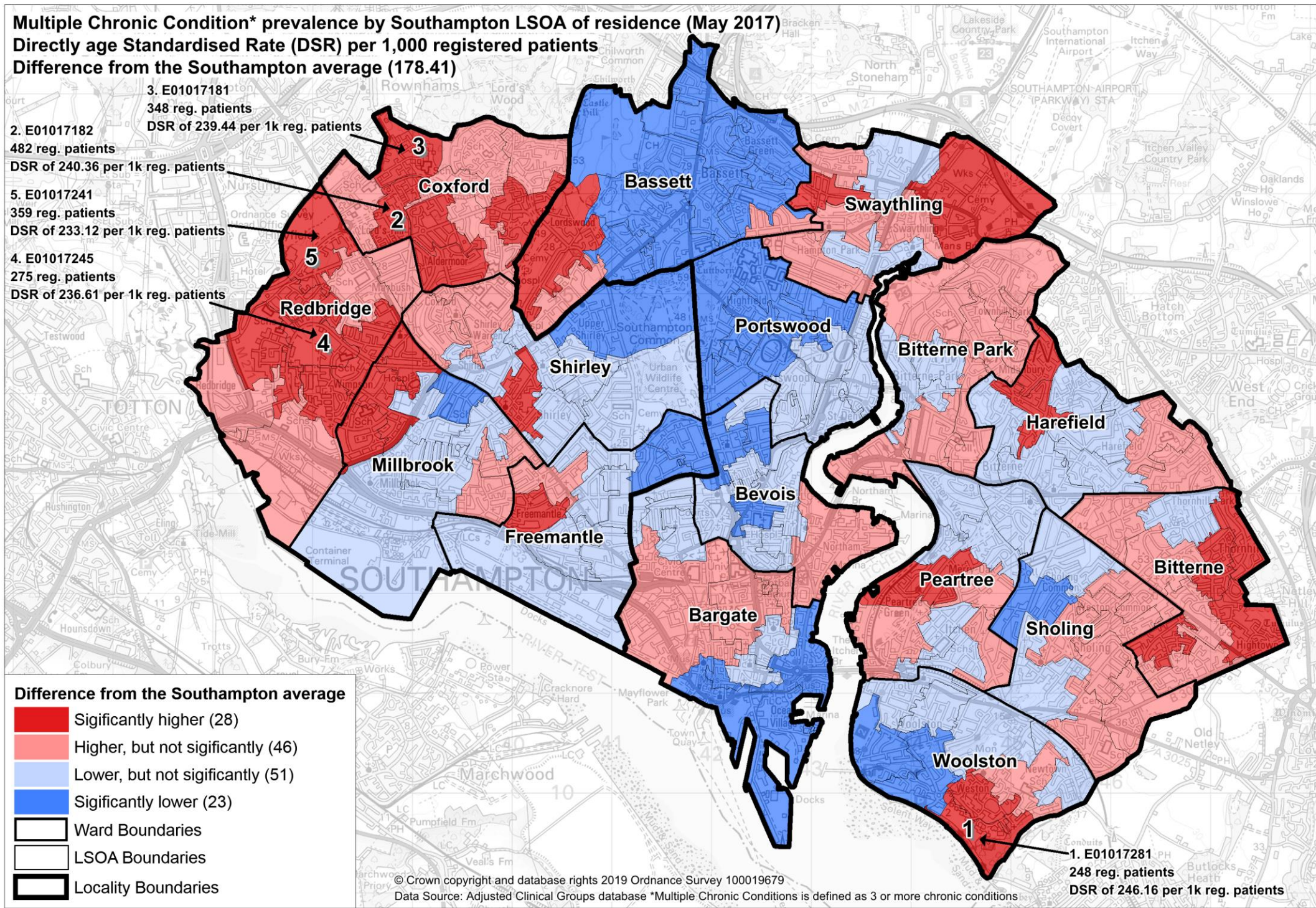
It should be noted that most of the data sources used to produce these maps are different to sources used in the previous slides, as QoF prevalence data does not allow analysis at a small geography (neighbourhood level).



Count map

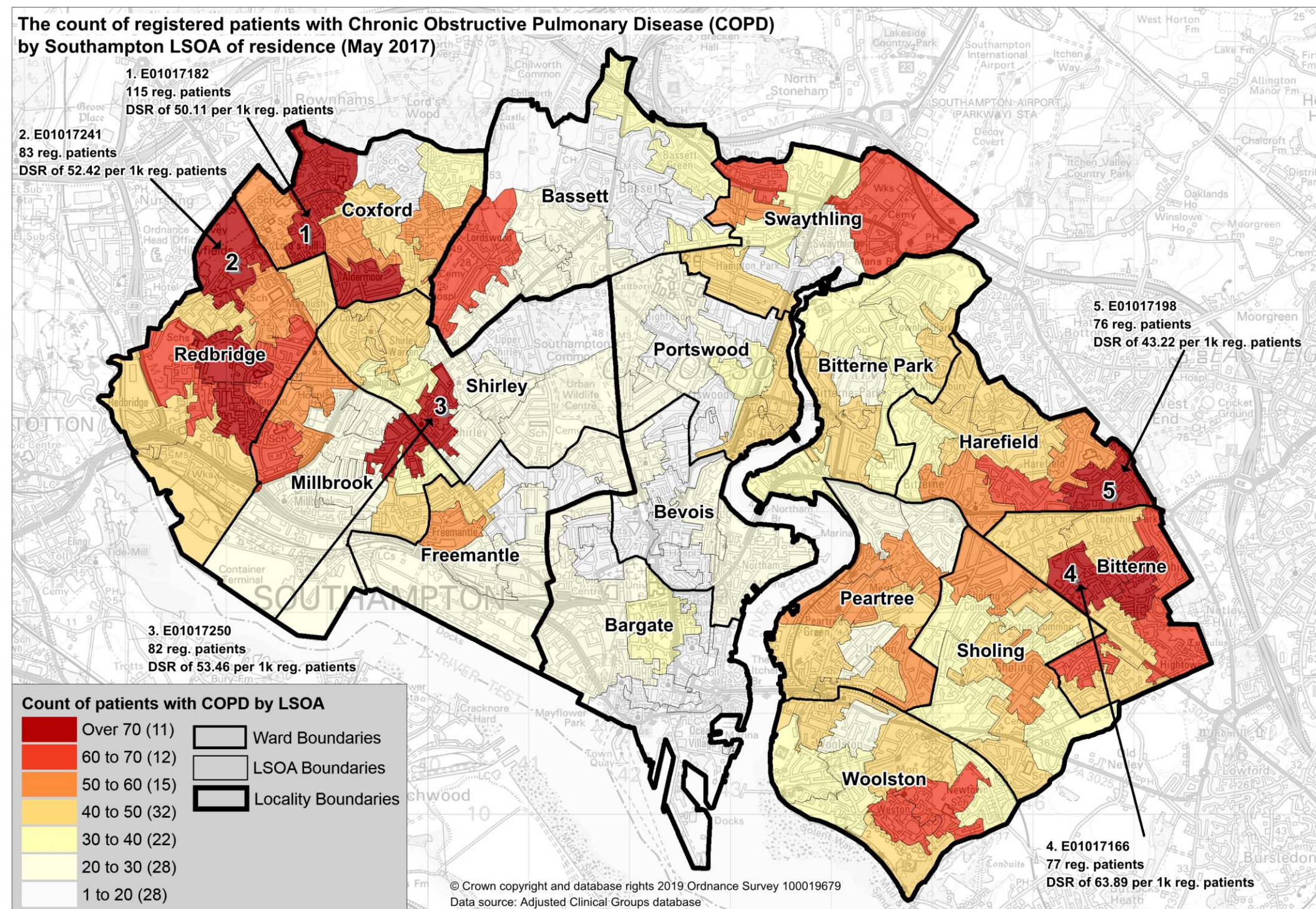


Significant difference map

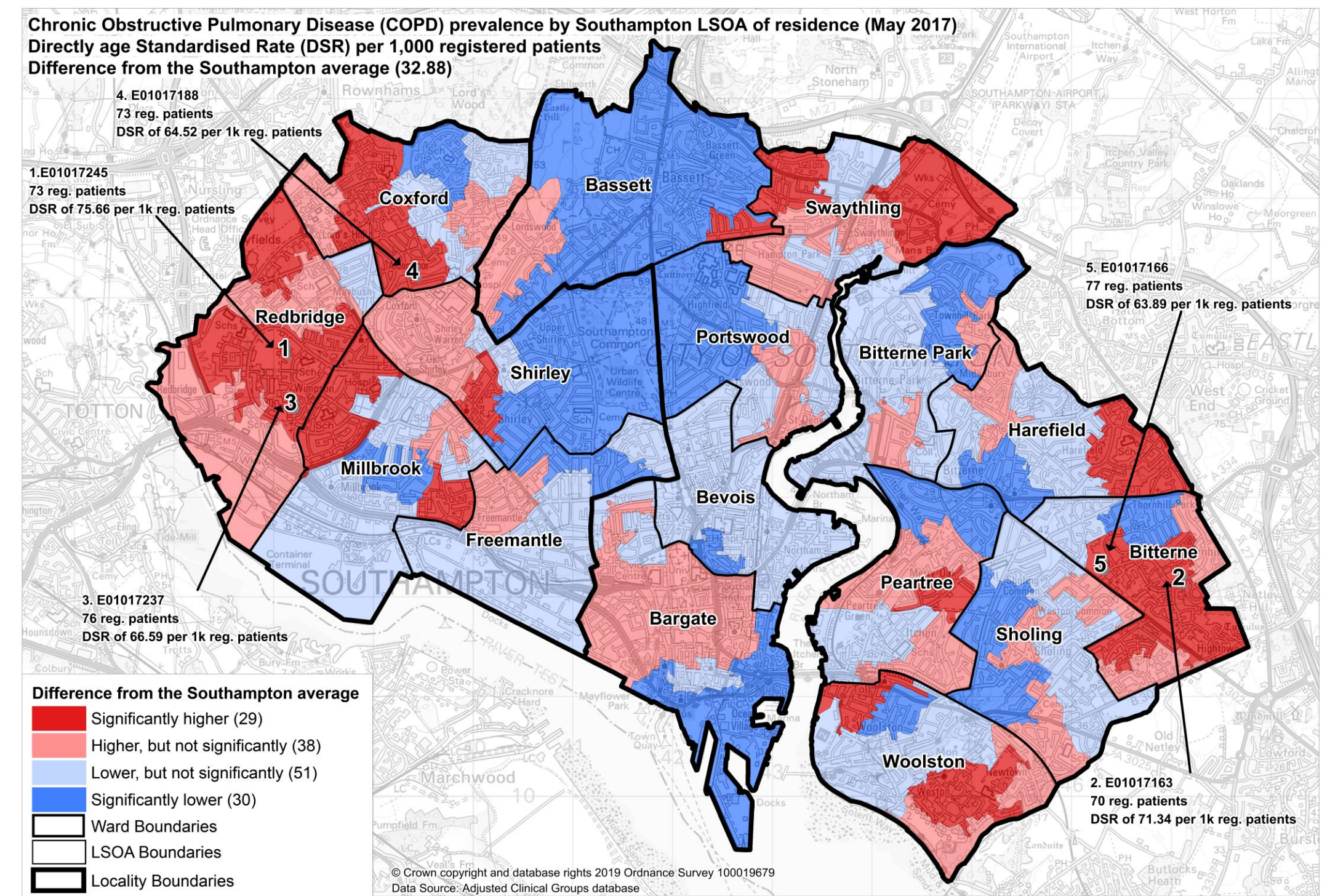




## Count map



## Significant difference map



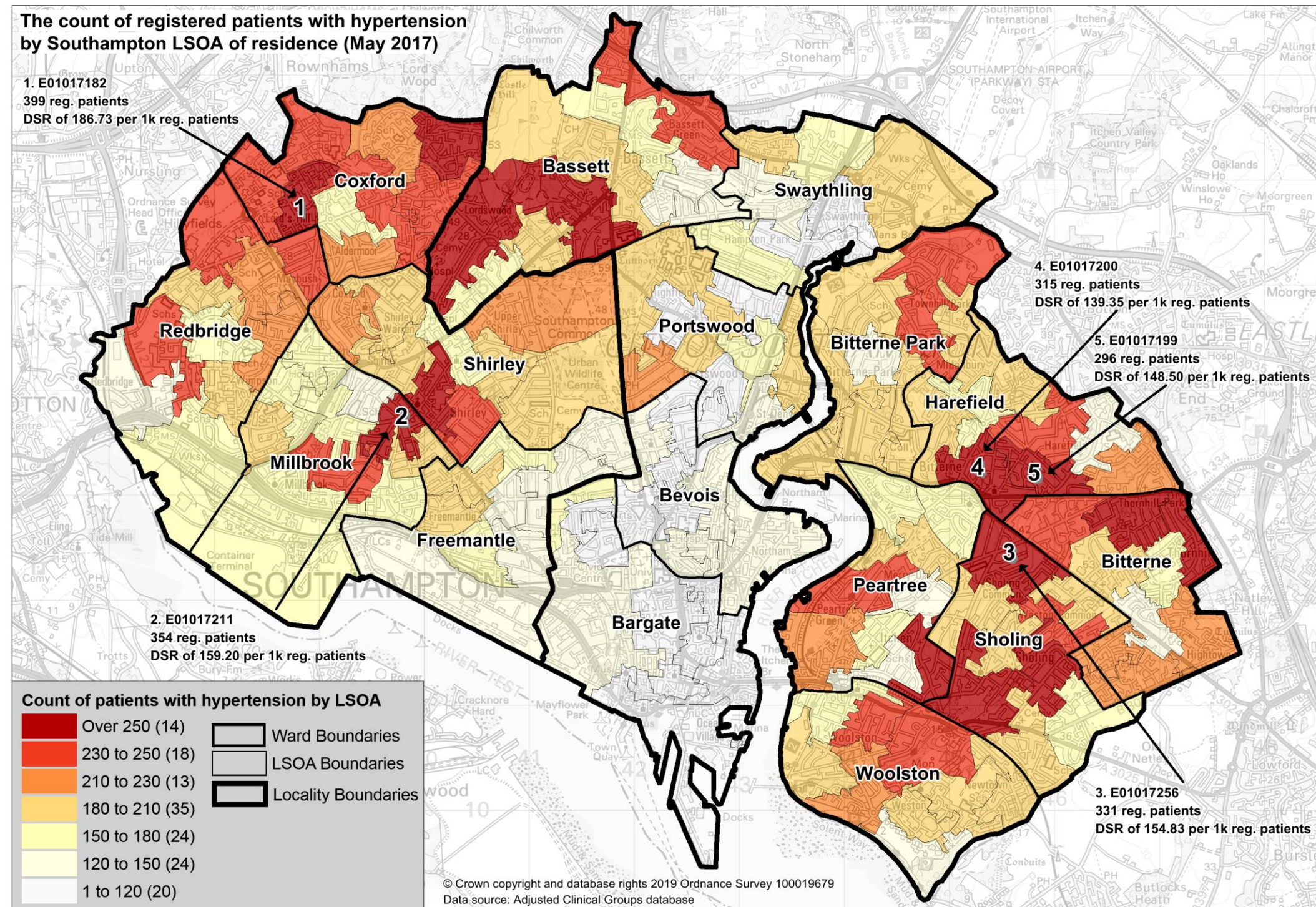




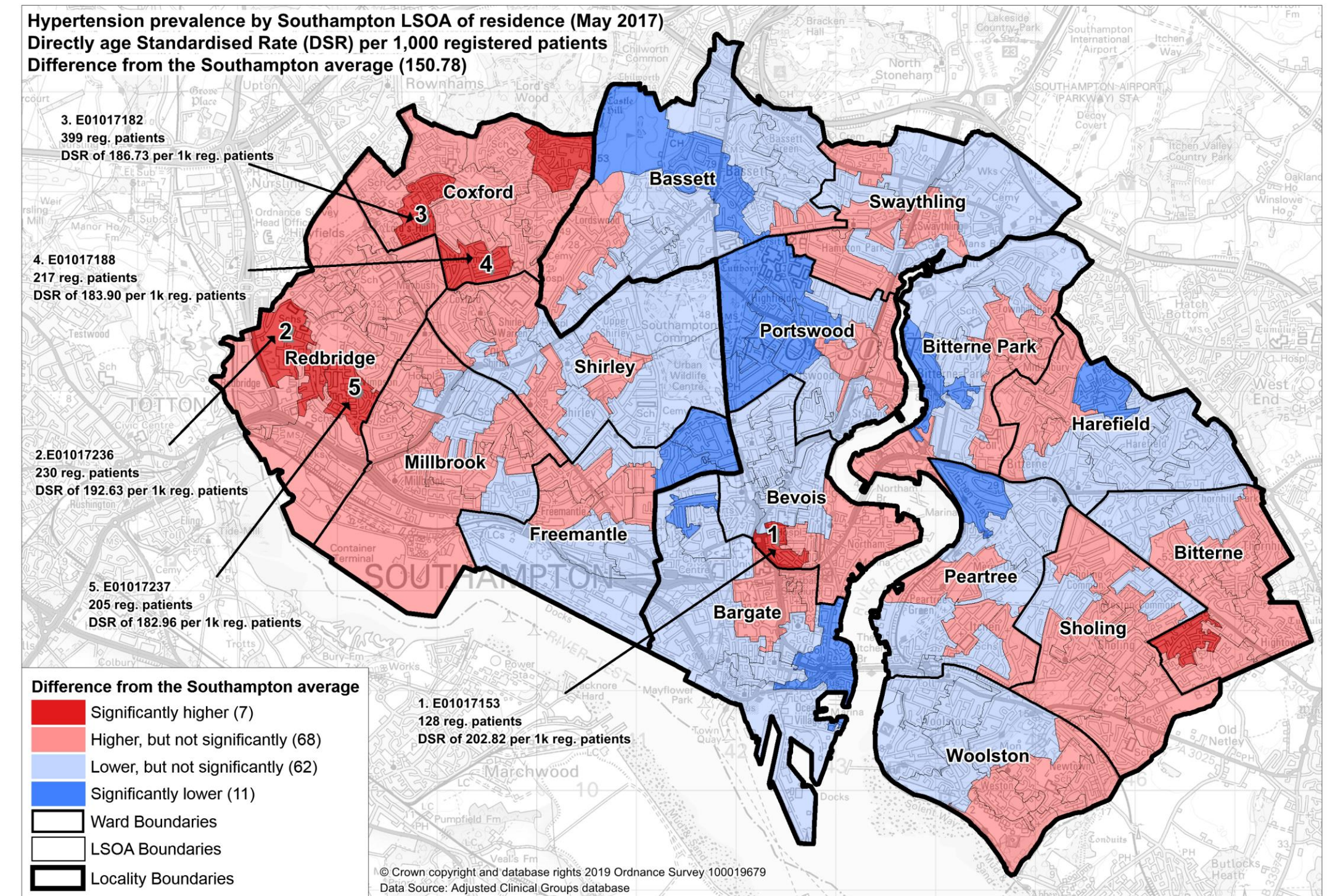
# Hypertension



## Count map



## Significant difference map



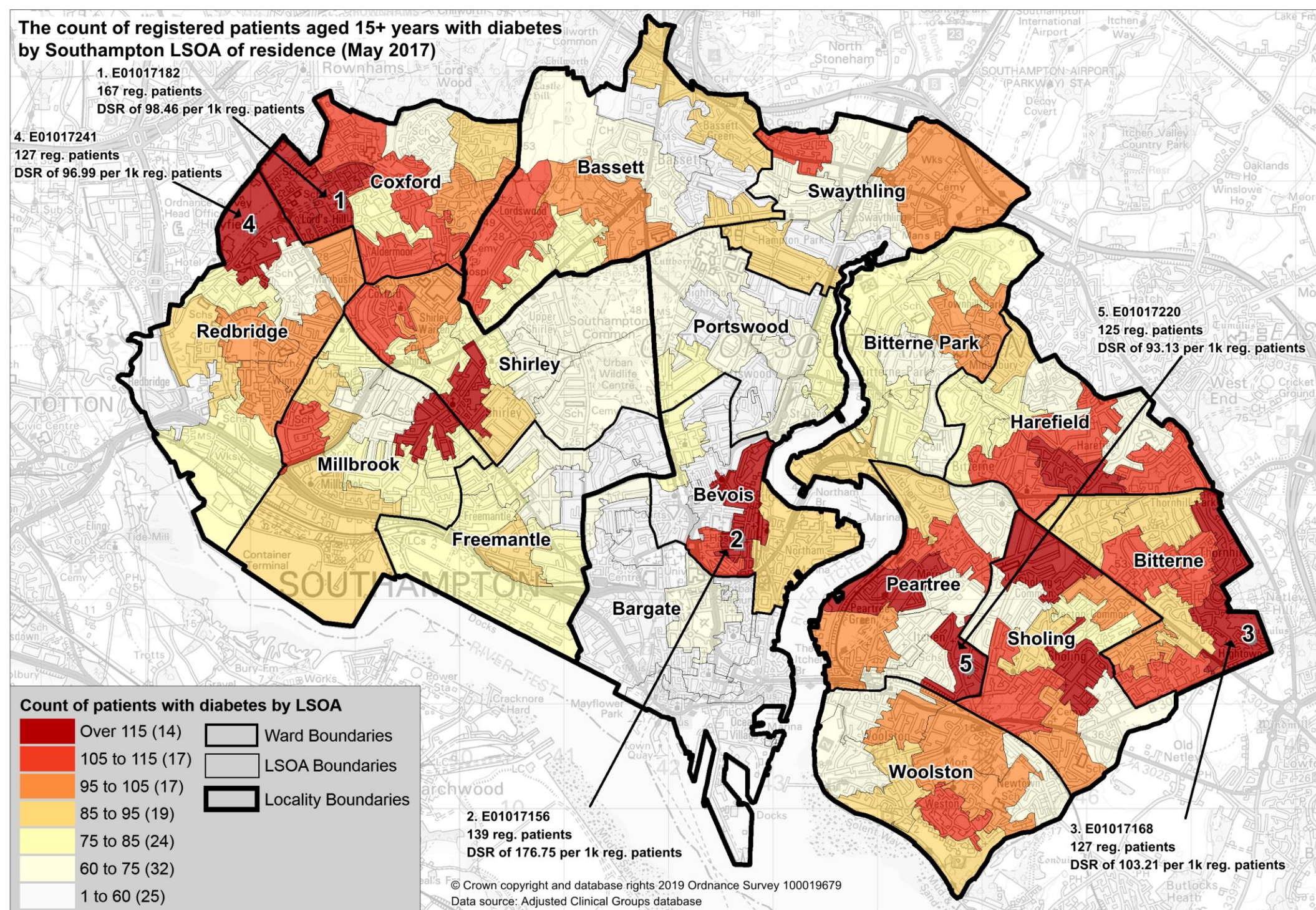




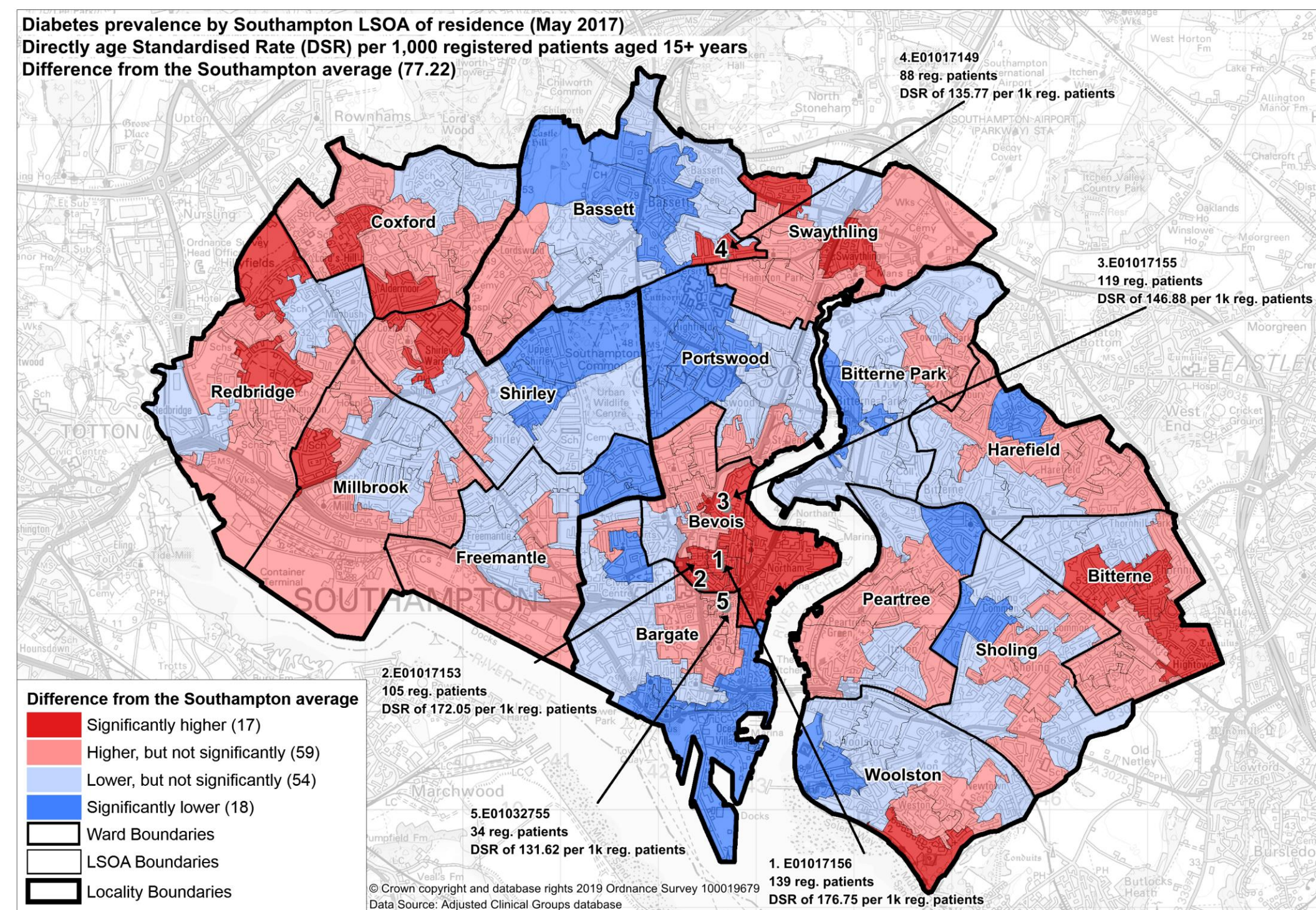
# Diabetes



## Count map



## Significant difference map



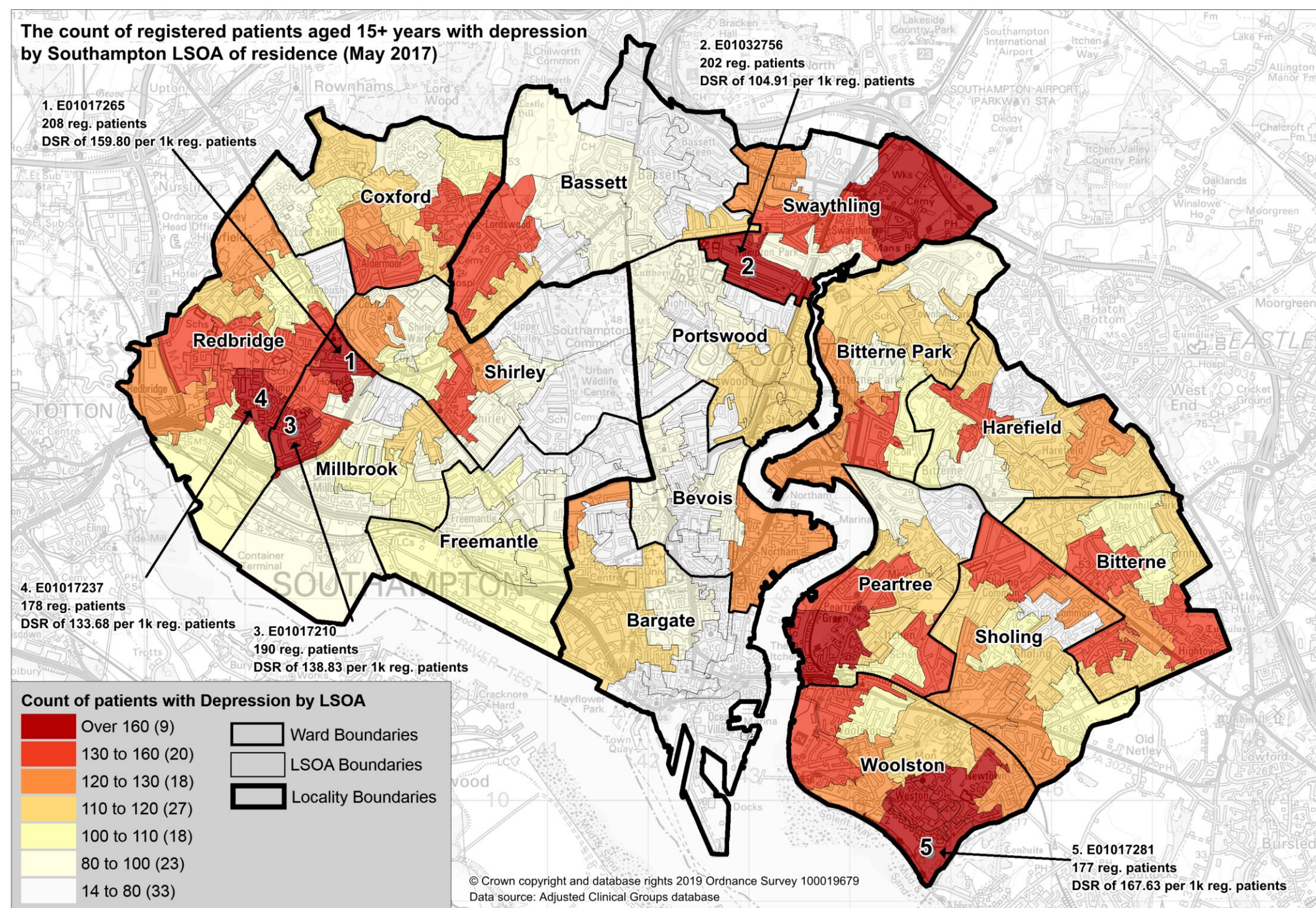




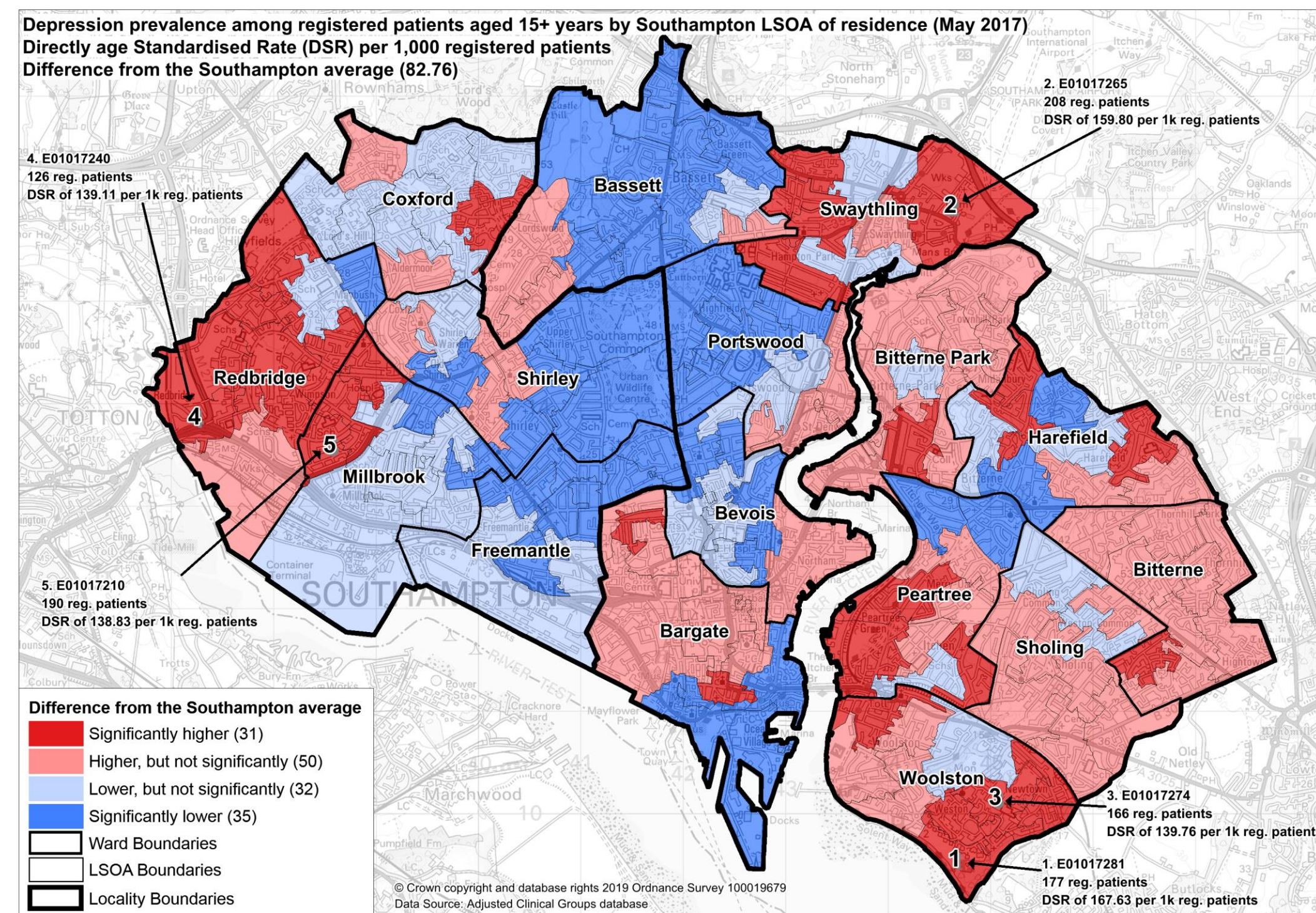
# Depression



## Count map



## Significant difference map



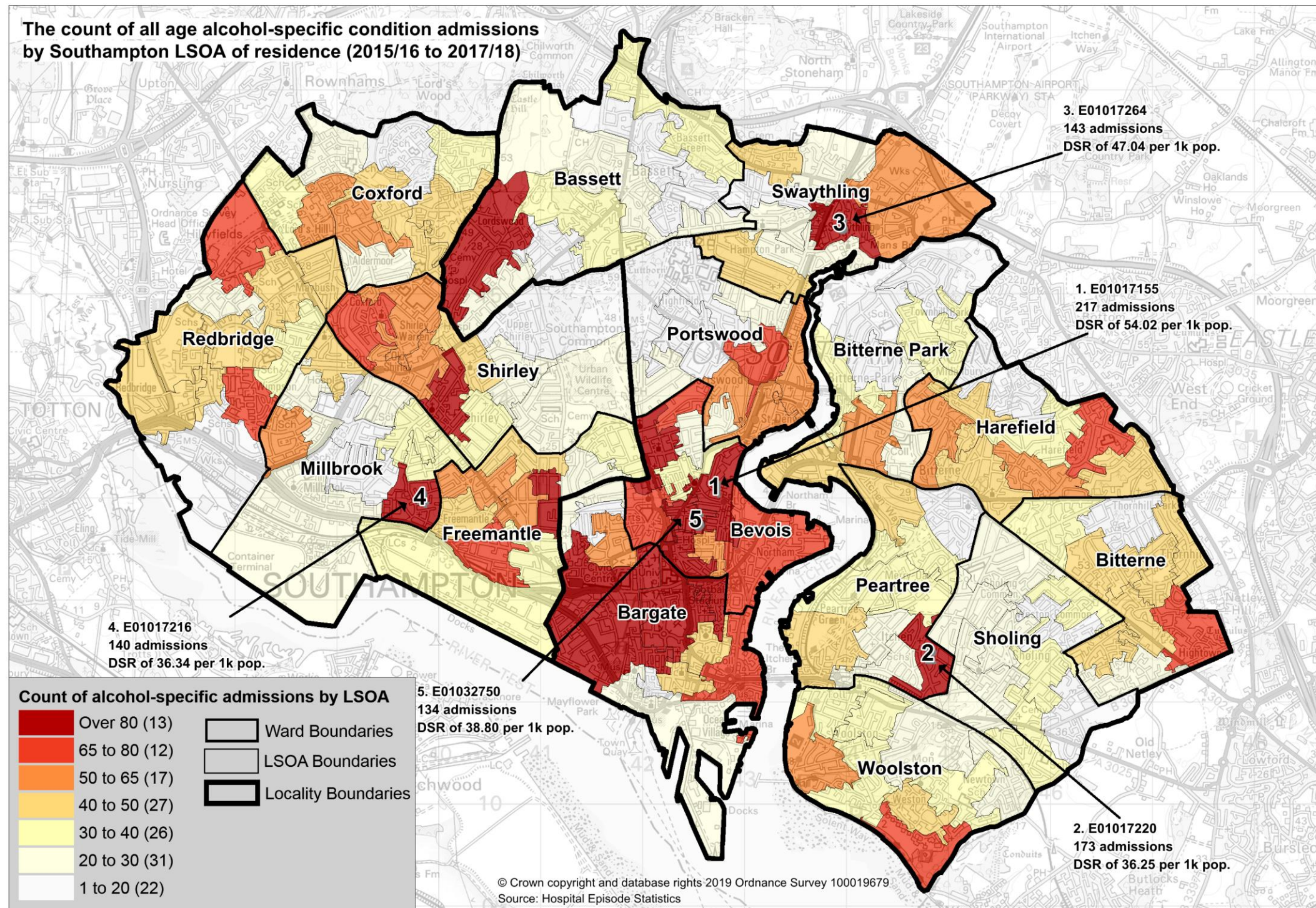




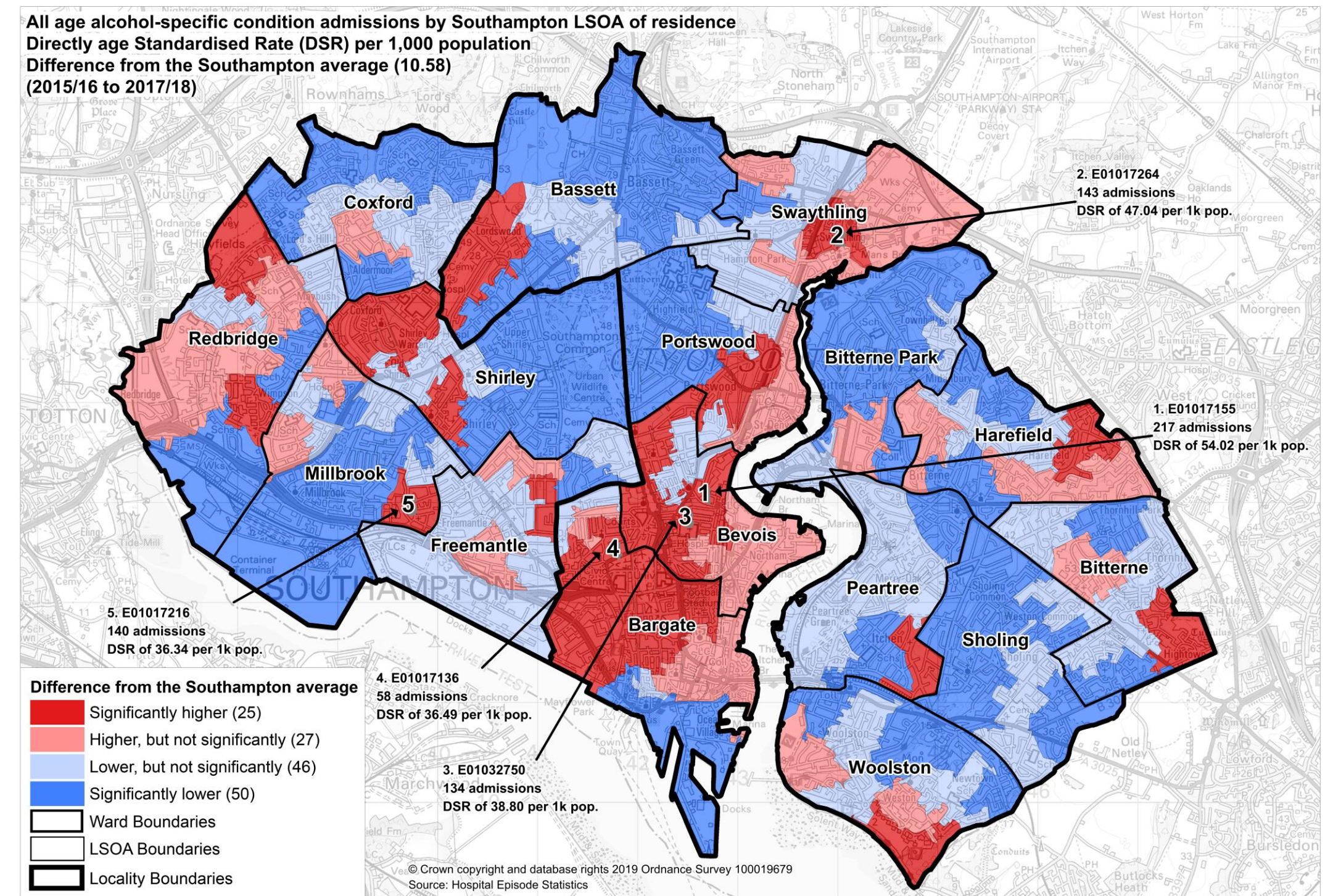
# Alcohol specific admissions



## Count map

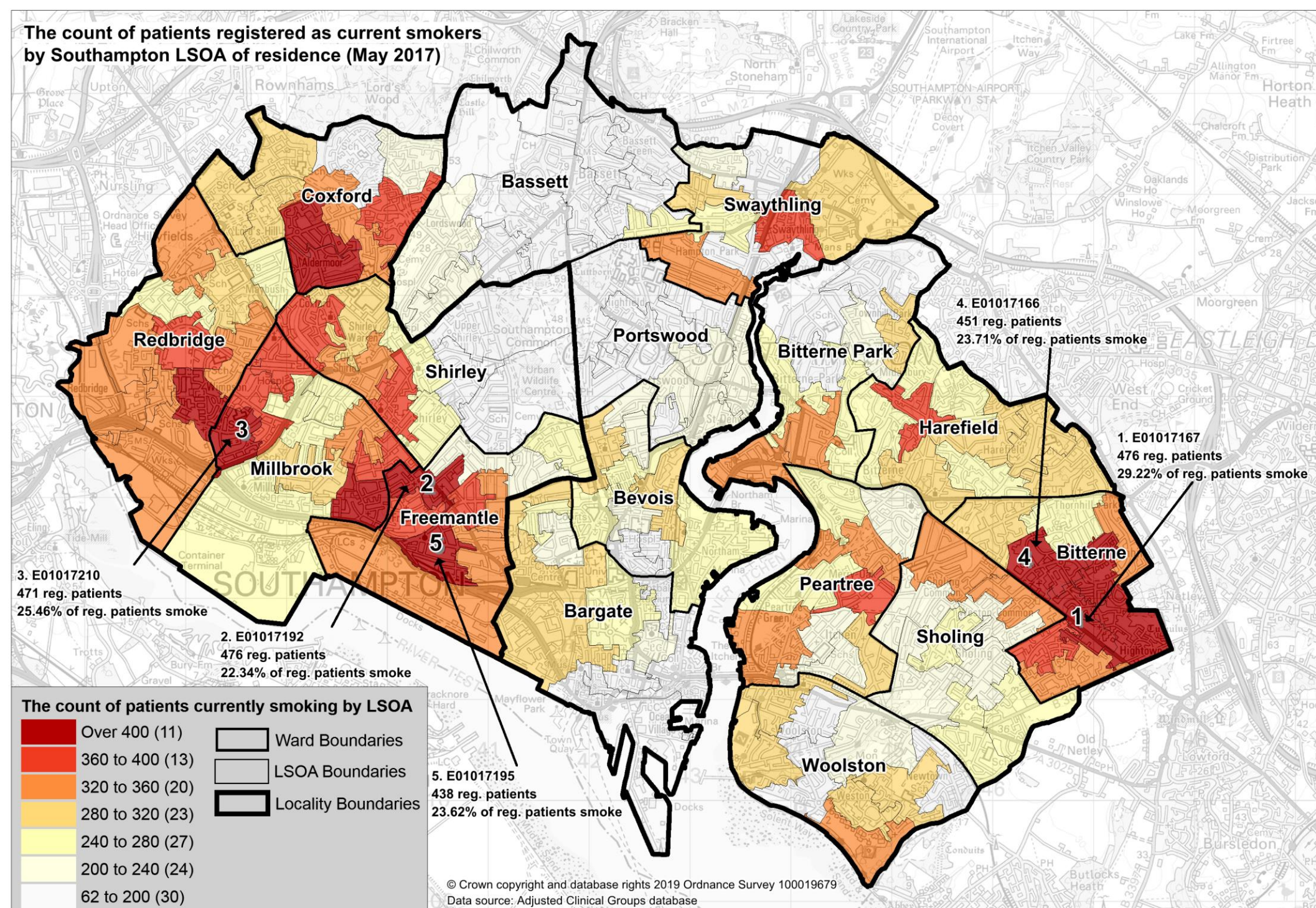


## Significant difference map

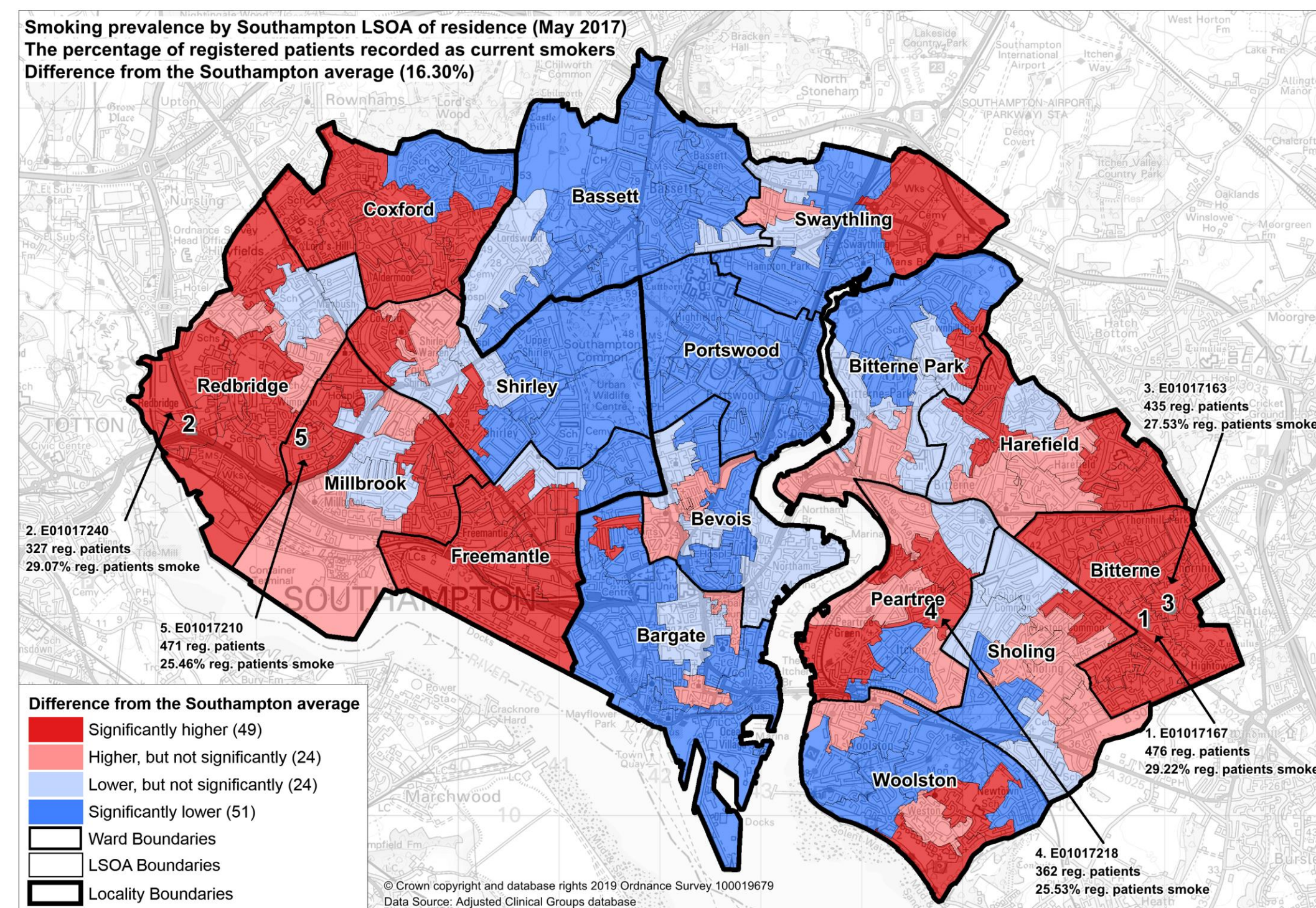




## Count map



## Significant difference map







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