

Pharmaceutical Needs Assessment

Appendix E
JSNA Key Dataset Graphics

Indicator	Croydon	London	England	England Range	1 Year Trend	3 Year Trend
1 Deaths from causes considered preventable by public health interventions (rate per 100,000 population)	179	178	188		◀	◀
2 Early deaths from cancer (rate per 100,000 population aged under 75)	138.7	139.1	146.5		◀	◀
3 Early deaths from cancer considered preventable (rate per 100,000 population aged under 75)	79.6	81.5	84.9		◀	◀
4 Early deaths from cardiovascular diseases (rate per 100,000 population aged under 75)	84.1	83.1	81.1		—	◀
5 Early deaths from cardiovascular diseases considered preventable (rate per 100,000 population age<75)	55.2	52.0	53.5		◀	◀
6 Early deaths from respiratory diseases (rate per 100,000 population aged under 75)	36.8	32.6	33.5		◀	◀
7 Early deaths from respiratory diseases considered preventable (rate per 100,000 population aged under 75)	17.9	17.1	17.6		◀	▶
8 Early deaths from liver disease (rate per 100,000 population)	15.4	18.9	18.0		▶	▶
9 Early deaths from liver disease considered preventable (rate per 100,000 population)	14.0	16.6	15.8		▶	▶
10 GP recorded diabetes prevalence (% of adults aged over 17)	6.4%	5.8%	6.0%		—	◀
11 Smoking attributable hospital admissions (rate per 100,000 population aged over 35)	1,216	1,331	1,420		◀	no data
12 Alcohol attributable hospital admissions (narrow definition) (rate per 100,000 population)	526	554	637		—	◀
13 Alcohol attributable hospital admissions (broad definition) (rate per 100,000 population)	2109	2148	2032		◀	◀

The chart shows how Croydon compares with the rest of England. Croydon's result for each indicator is shown as a circle. The average rate for England is shown by the black line at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that Croydon is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem. The 1 and 3 year trend columns show the change in Croydon's position on the spine.

- Significantly worse/higher need than England average
- Not significantly different from England average
- Significantly better/lower need than England average
- No significance can be calculated



- ◀ Deteriorating relative to other local authorities in England
- Remaining similar to other local authorities in England
- ▶ Improving relative to other local authorities in England



Indicator notes

- 1** Age-standardised mortality rate from causes considered preventable per 100,000 population. A death is considered preventable if, in the light of understanding of the determinants of health at the time of death, all or most deaths from that cause (subject to age limits if appropriate) could be avoided by public health interventions in the broadest sense, 2010 - 12.
- 2** Age standardised rate of mortality from all cancers in people aged under 75 years per 100,000 population, 2010 - 12.
- 3** Age standardised rate of mortality that is considered preventable from all cancers in people aged under 75 years per 100,000 population. The basic concept of preventable mortality is that deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could potentially be avoided by public health interventions in the broadest sense, 2010 - 12.
- 4** Age standardised rate of mortality from all cardiovascular diseases (including heart disease and stroke) in people aged under 75 years per 100,000 population, 2010 - 12.
- 5** Age standardised rate of mortality that is considered preventable from all cardiovascular diseases (including heart disease and stroke) in people aged under 75 years per 100,000 population. The basic concept of preventable mortality is that deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could potentially be avoided by public health interventions in the broadest sense, 2010 - 12.
- 6** Age standardised rate of mortality from respiratory disease in people aged under 75 years per 100,000 population, 2010 - 12.
- 7** Age standardised rate of mortality that is considered preventable from respiratory disease in people aged under 75 years per 100,000 population. The basic concept of preventable mortality is that deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could potentially be avoided by public health interventions in the broadest sense, 2010 - 12.
- 8** Age standardised rate of mortality from liver disease in people aged under 75 years per 100,000 population, 2010 - 12.
- 9** Age standardised rate of mortality that is considered preventable from liver disease in people aged under 75 years per 100,000 population. The basic concept of preventable mortality is that deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could potentially be avoided by public health interventions in the broadest sense, 2010 - 12.
- 10** Percentage of patients on GP registers aged 17 and over diagnosed with diabetes, 2012/13.
- 11** Hospital admissions for diseases that are wholly or partially attributed to smoking in persons aged 35 and over, age standardised rate per 100,000 population, 2010/11.
- 12** Hospital admission episodes with an alcohol attributable condition as a primary diagnosis or an alcohol attributable external cause as a secondary diagnosis, age standardised rate per 100,000 population. Does not include attendance at Accident and Emergency departments. Alcohol-related hospital admissions are used as a way of understanding the impact of alcohol on the health of a population. The narrow definition is less sensitive to coding practices but also understates the part alcohol plays in the admission, 2012/13.
- 13** Hospital admission episodes with an alcohol attributable condition under any primary or secondary diagnosis, age standardised rate per 100,000 population. Does not include attendance at Accident and Emergency departments. Alcohol-related hospital admissions are used as a way of understanding the impact of alcohol on the health of a population. The broad definition provides evidence of the scale of the problem but is sensitive to changes in coding practice over time, 2012/13.