

# Croydon joint strategic needs assessment

## 2010/11



## An overview of health and wellbeing

Authors: Sarah Crouch | David Osborne

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## Key findings

### Population

- Over the next ten years there is expected to be an increase in Croydon's child population and those in the 50 to 75 age groups.
- Forty one per cent of the population are from Black and minority ethnic groups, similar to the London average of 42%.
- The majority of young people aged 0 to 14 years in Croydon are from Black and minority ethnic groups, but those aged 55 and over are mostly of White ethnicity.
- In March 2010, 574 of the 1,008 looked after children in Croydon were unaccompanied asylum seeking children. This figure has more than doubled over recent years.

### Social and environmental context

- In Croydon 28.3% of children live in poverty. This is significantly above the England average of 22.4% but lower than the London average of 33.9%.
- With an index of multiple deprivation score of 21.3, Croydon as a whole is slightly less deprived than the national average (21.6) and considerably less deprived than the London average (26.1).
- There is wide variation in deprivation between areas within Croydon. 15% of the borough falls within the 20% most deprived areas in England but Croydon also has some of the most affluent areas in England.
- The more deprived areas of the borough are generally more densely populated than the more affluent areas.
- Levels of statutory homelessness and overcrowding are significantly above the England average but below the averages for London.

### The burden of ill health

- Male life expectancy (78.9 years) and female life expectancy (82.2 years) are above the England average. Healthy life expectancy at age 65 is significantly above the England average for both males and females.
- There is a wide difference in health outcomes for people living in the most deprived compared to the least deprived areas of Croydon.
- In 2008, men living in the most affluent fifth of areas of Croydon could expect to live an average of 8.0 years longer than men living in the most deprived fifth of areas. For women, this difference was 5.0 years.
- Death rates from all causes are falling at approximately the same pace across the borough. However, there has been little change in the gap in life expectancy between the most deprived areas and the least deprived areas between 1995 and 2008. The main causes of death which are helping to sustain this gap in life expectancy in Croydon are circulatory diseases, cancers and respiratory diseases.
- The early death rate from all cancers in those under 75 years old is below the London and England averages. However, those in the most deprived areas of Croydon have a much higher rate of death from all cancers than those living in the least deprived areas.
- Croydon has above average incidence of both prostate cancer and bladder cancer compared with London and England.
- The estimated prevalence of both coronary heart disease and stroke are below the England average and similar to the average for London as a whole.
- Hospital admissions for vascularisation and angiography in Croydon for those aged over 65 years are significantly above the London and England averages.
- There is a significant degree of inequality in death from circulatory diseases in Croydon. Croydon has the second highest levels of inequality in circulatory disease mortality of all London boroughs.

- In Croydon, GP recorded prevalence of chronic obstructive pulmonary disease is lower than expected, indicating we are not reaching some of those who could benefit from health services. The expected prevalence of chronic obstructive pulmonary disease in Croydon (4.0%) was significantly higher than that of London (3.9%) and England (3.7%).
- The slope index of inequality for respiratory diseases is very steep suggesting a wide difference in mortality between the most and least deprived parts of the population.<sup>1</sup>
- In Croydon, the infant mortality rate (5.4 deaths per 1,000 live births) is higher than both London (4.6) and England (4.8).
- In 2006, the estimated prevalence of mental health problems amongst adults aged between 16 and 74 in Croydon was 17.2%, below the average for London (18.2%) but above the England average (16.6%).
- The prevalence of severe mental illness in 2008/09 as recorded by GPs was slightly higher in Croydon (1.0%) than the London average (0.9%), but significantly higher than the England average (0.7%).

### **Lifestyle and risk factors**

- Estimated smoking prevalence indicates that 18.6% of people in Croydon smoke, compared with 20.8% in London and 22.2% in England. Local quit rates doubled from 242 per 100,000 in 2008/09 to 593 per 100,000 in 2009/10 but this is still below London (799 per 100,000) and England (895 per 100,000).
- GP records indicate that 14.6% of patients have hypertension compared with 13.4% in London and 16.1% in England. Croydon has 44,281 people on GP hypertension registers, which is much less than the expected number of 79,144, indicating that many patients have yet to be diagnosed.
- Teenage conception rates in Croydon are 55.4 per 1,000 young women under 18, above both the London and England averages.
- Access to NHS funded abortions before 10 weeks gestation is above average. However, 35.9% of abortions for women aged under 25 were repeat abortions compared with 32.2% in London and 24.7% in England.
- Thirty six per 1,000 women aged 15 to 44 in Croydon are using long acting reversible contraceptive methods, compared with 22 per 1,000 in London and 41 per 1,000 in England.
- In 2008, the prevalence of HIV in Croydon was 4.2 per 1,000, lower than the London average (5.0) but significantly higher than the England average of 1.7.
- In Croydon genitourinary medicine (GUM) clinics, rates of diagnoses of chlamydia (age 15 to 24) and gonorrhoea are above the averages for both London and England.
- The prevalence of childhood obesity in reception (age four to five) is 11.1% and in year 6 (age 10 to 11) is 21.3%, similar to London, but higher than the England averages (9.6 % and 18.3%).
- 36.4% of adults in Croydon eat five or more portions of fruit and vegetables each day. This is higher than the England average (28.7%) and similar to the average for London.
- Levels of physical activity show a general decline as we get older. Participation in sport and active recreation for adults is 7.4%, below the average for both London (10.2%) and England (11.25%).
- The estimated number of adults in Croydon who binge drink is 14%, similar to the London average but below the England average of 20%. In 2008/09 the rate of alcohol related hospital admissions in Croydon was 1,510 per 100,000 population, higher than London (1,490) but lower than England (1,582).

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<sup>1</sup> A measure of the degree of inequality in mortality rates between the best and worst off within an area.

## Health and social care services

- The percentage of new clients whose social care needs assessments were completed within four weeks of first contact is significantly better in Croydon (94%) than in London (87.9%) or England (81.3%).
- Only 5.9% of adults, older people and carers in Croydon are receiving social care through a direct payment, compared with 13.4% in London and 13.0% in England.
- 4,062 people per 100,000 population were supported through social services to live independently in Croydon in 2009/10, compared with 3,239 per 100,000 in London and 3,119 per 100,000 in England.
- In 2009/10, Croydon had a high proportion of adults with learning disabilities in employment (8.5%), compared with 8.3% in London and 6.4% in England.
- In 2009, there were 44,400 people over the age of 65 in Croydon, of whom 6,300 (approximately 14%) made use of social care services.
- The percentage of carers being supported with services, advice and information in Croydon is 12.7%, significantly below the London average (24.6%) and the England average (26.4%).
- In Croydon the uptake of the seasonal flu vaccination for those over 65 is 68.7%, compared with 72.5% for London and 74.1% for England.
- The percentage of children immunised against childhood diseases such as pneumococcal infection, meningitis and measles, mumps and rubella, is significantly below the average for England in each case.
- The percentage of women in Croydon aged 53 to 70 screened in the last three years for breast cancer is 71.5%, compared with 64.5% for London and 76.5% for England. The picture is similar for cervical cancer, with the percentage of women being screened significantly lower than the England average.
- The percentage of both adults and children in Croydon accessing NHS dental services in the past two years is significantly below the England average.
- In 2009/10, 75.2% of people were able to get an appointment with a GP quickly and 71.2% to see a preferred GP if they wanted, both significantly lower than the England averages of 80.0% and 75.0% respectively.
- Some health service areas, for example maternity, have high expenditure and poorer outcomes when compared with the national average. Other service areas such as diabetes (endocrine) have lower expenditure and poorer outcomes.

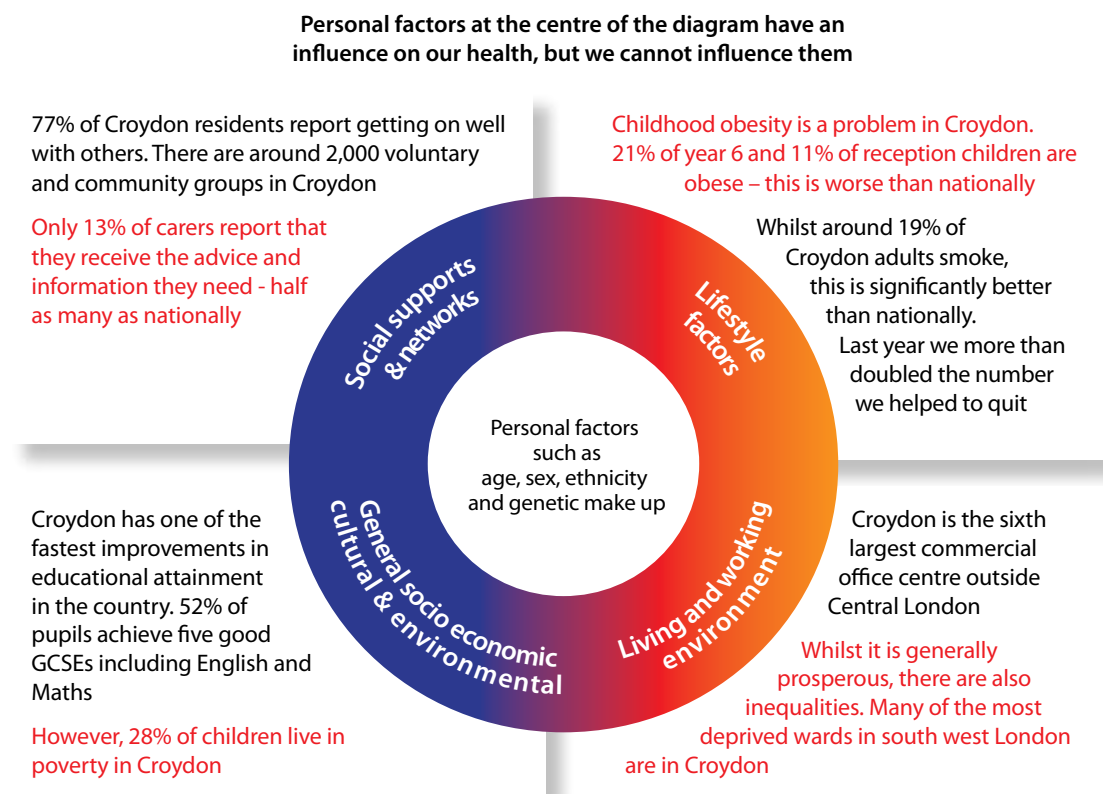
## Introduction

The aim of this chapter is to provide an overview of health and illness in the population of Croydon.

The core dataset 2010/11 at the end of this chapter shows how Croydon is performing in terms of various indicators associated with the health of the population. These are drawn from Croydon's core dataset and include social indicators such as poverty, indicators of lifestyle such as smoking, the burden of ill health from major diseases and indicators of the performance of health and social care services. Croydon's core dataset has been drawn together from data that is published nationally by various organisations. Croydon's rate for each indicator is compared with rates for London and England. This helps to identify where attention might need to be focused to improve health outcomes in Croydon. Key issues from the dataset are highlighted in this chapter.

Health is a major component of the quality and length of our lives and can be influenced at different levels, as shown in figure 1. The diagram, based on a model by Dahlgren and Whitehead, highlights some of the main factors determining the health of the people of Croydon.<sup>2</sup> Age, sex and genetic make up influence people's health potential but are fixed. Other factors in the surrounding layer of the model can potentially be modified to achieve a positive impact on population health. Individual lifestyle factors such as smoking, diet and physical activity have the potential to promote or damage health, as do interactions with friends, relatives and mutual support within a community. Wider influences on health include living and working conditions, such as the quality of housing and employment, food supplies, access to essential goods and services and the overall economic, cultural and environmental conditions in our society.

**Figure 1 | factors which influence the health of a population - The “causes of the causes” of ill health**



**The factors in the outer layer also have a strong influence on health and interact with each other. Lack of social support or poor housing make healthy lifestyles more challenging. We can influence these...**

Adapted from JH 77% of residents from different backgrounds say they get on well together which is a 2% increase since 2006.

2 Dahlgren G, Whitehead M. Policies and strategies to promote social equity in health. Stockholm: Institute for Future Studies; 1991.



## Population size and structure

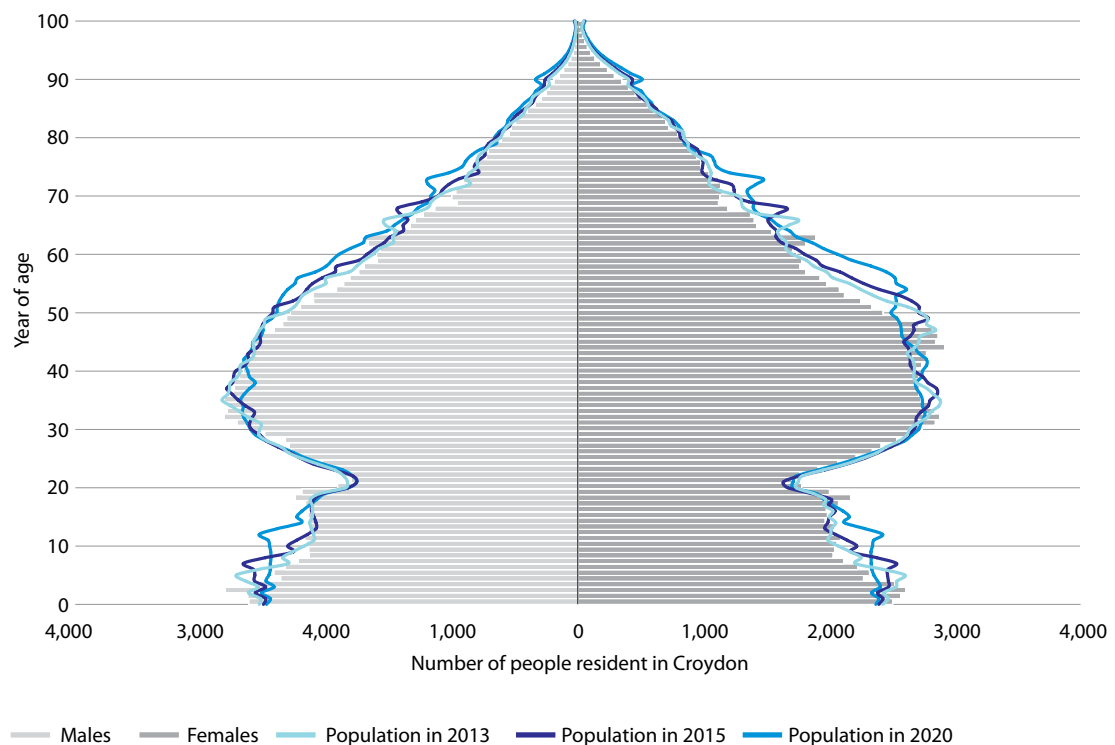
Croydon is an outer London borough which lies in the south of London. With a resident population of 342,800 Croydon is the second largest London borough in terms of population size.<sup>3</sup>

The population is typical of London in that there are more younger people and fewer older people as a proportion of the total population (figure 2).

As the population pyramid in figure 2 shows, the child population in Croydon is expected to grow. The birth rate in Croydon increased rapidly between 2002 and 2007. In the last two years, the birth rate has stabilised and in 2009 there were 5,270 births (compared with 4,400 in 2002). As these children grow older, and as the child population increases generally, there will be planning implications for providing services. These may include pressure on primary school places and later on secondary school places and services for young people, such as sexual health services.

There is also expected to be an increase in the 50 to 75 age groups. This means conditions related to aging such as circulatory and respiratory diseases and musculoskeletal disorders are likely to account for a larger proportion of the health burden. Furthermore as medical intervention improves, people will live longer with chronic conditions. This will increase the number of people requiring care for associated disabilities and end of life care. There will also be greater pressure on social care services to provide residential care.

**Figure 2 | projected population change, Croydon, 2010-2020**



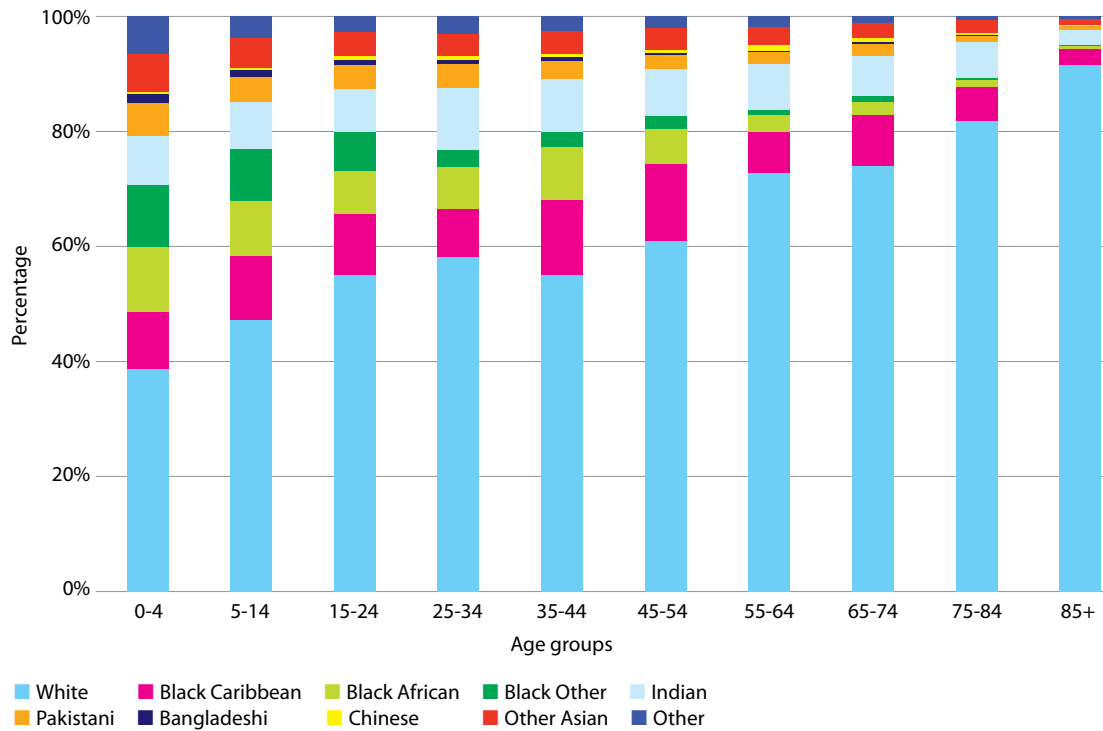
Source: Greater London Authority Population Projections: 2009 Round for London Plan

3 Office for National Statistics. Mid 2009 population estimates

## Ethnicity

At 41%, the proportion of the population from Black and minority ethnic groups is similar to the London average (42%).<sup>4</sup> Figure 3 illustrates that the majority of young people aged 0 to 14 years in Croydon are from Black and minority ethnic groups but those aged 55 and over are mostly of White ethnicity. However, older age groups are likely to see significant increases in the Black and minority ethnic population in the future.

**Figure 3 | Croydon population by ethnicity and age**



Source: Local estimates produced from data from Croydon general practices, March 2010 and 2001 census data

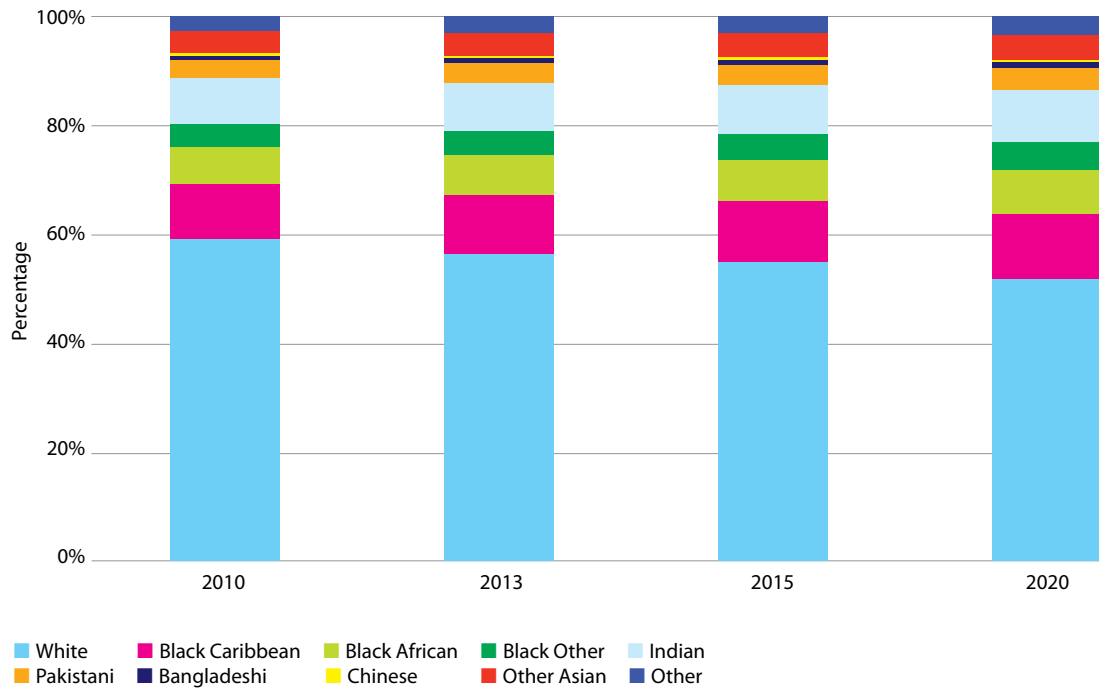
The Black and minority ethnic population is expected to increase from 41% in 2010, to 45% in 2015 and 48% by 2020 (figure 4). By 2026, there is expected to be a Black and minority ethnic majority of 51%. Some Black and minority ethnic groups are at increased risk of various conditions such as cardiovascular disease and diabetes and low birth weight births. This will change the pattern of future needs.

Black and minority ethnic communities in Croydon mostly reside in the north of Croydon with some pockets in the east and west but much less in the south of the borough.<sup>5</sup>

<sup>4</sup> Greater London Authority ethnic group population projections. 2008 Round for London Plan

<sup>5</sup> Local estimates produced from data from Croydon general practices, March 2010 and 2001 census data

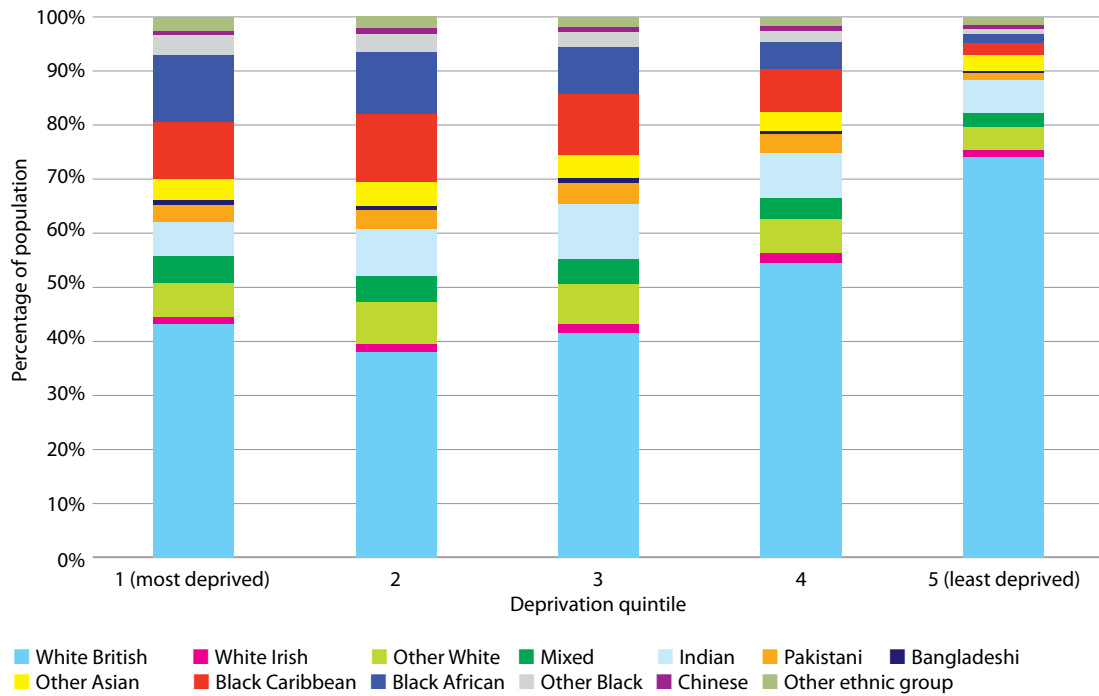
**Figure 4 | projected population change by ethnicity, Croydon, 2010-2020**



Source: Greater London Authority ethnic group population projections: 2008 Round for London Plan

Figure 5 shows that a higher proportion of Black and minority ethnic communities live in the more deprived areas of the borough.

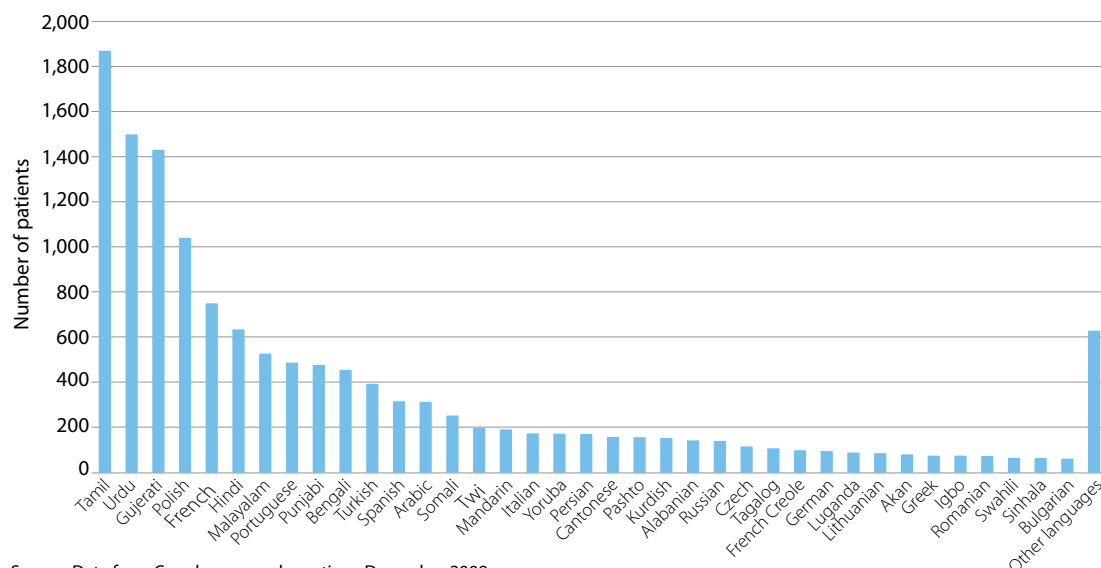
**Figure 5 | Croydon population by ethnicity and index of multiple deprivation quintile**



Source: Local estimates produced from data from Croydon general practices, March 2010 and 2001 census data

The primary languages spoken by those attending GP practices in Croydon are shown in figure 6. This indicates the languages in which there may be a high need for interpreting services.

**Figure 6 | primary language spoken by patients in Croydon general practices, 2009**



Source: Data from Croydon general practices, December 2009

### Refugees and asylum seekers

The presence of the Home Office in Croydon means that many asylum seekers and refugees are placed, if temporarily, in Croydon. Many have very specific health needs including mental health issues arising from trauma or stress as well as physical needs. They may also have poor language skills and a lack of understanding of the health system, leading to difficulties in accessing essential services. Latest Home Office statistics indicate that between July and September 2009, 160 asylum seekers were supported in Croydon (115 in receipt of subsistence only support and 45 in supported accommodation).<sup>6</sup>

In March 2010, 574 of the 1,008 looked after children in Croydon were unaccompanied asylum seeking children. The number of these children looked after by Croydon has more than doubled over recent years rising from 325 in 2005 to 696 in 2008.<sup>7</sup>

Unaccompanied refugee children have particular needs. They may speak little or no English and will often have witnessed and suffered events outside the experience of health professionals, social workers and teachers in this country (such as torture or trafficking). Unaccompanied refugee children are unlikely to have medical records from their country of origin and their immunisation status may be unknown.

### Socio economic classification

The population of Croydon is diverse in many respects. Another way of looking at the people of Croydon is to classify them using the *Mosaic* classification tool. This divides the UK population into 69 types and 15 groups. It uses 440 different pieces of information about people's lives from a range of public and private sector datasets to build a comprehensive picture of the common characteristics of people living in an area.

Figure 7 shows Croydon's population classified into 15 standardised socio economic groups.<sup>8</sup> It shows that the three largest groups in Croydon are:

- 21.7% lower income workers living in urban terraces in often diverse (multicultural) areas
- 17.8% middle income families living in moderate suburban semis, and
- 16.9% young, well educated city dwellers

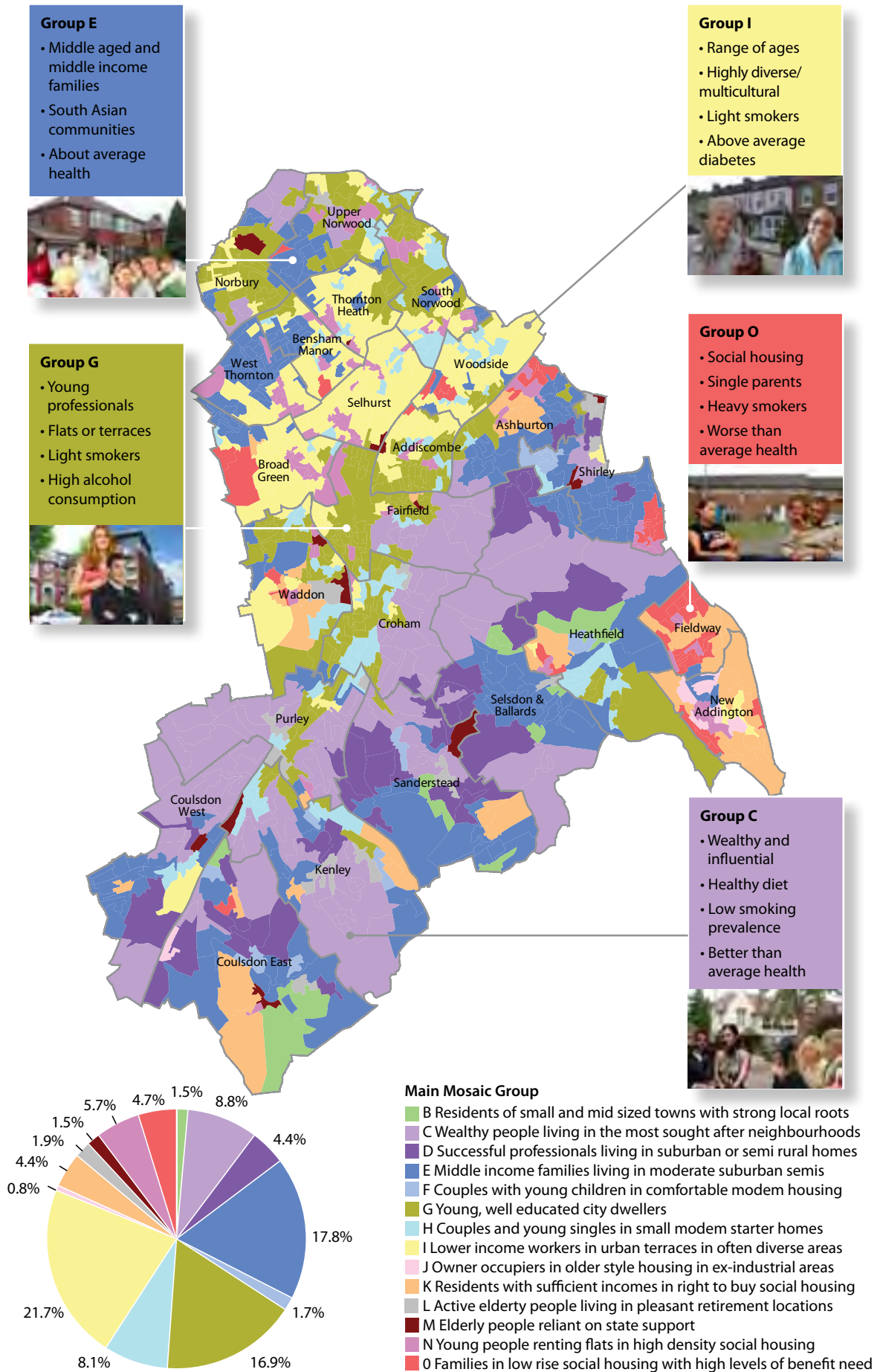
This classification describes Croydon residents in terms of their socio demographics, lifestyles, culture and behaviour. This can be used as one way of helping to identify needs, service requirements and changes to the population over time.

<sup>6</sup> Home Office Statistical Bulletin. *Control of immigration: statistics UK 2009*

<sup>7</sup> London borough of Croydon, department of young people and learners data; 2010

<sup>8</sup> According to the UK wide Mosaic 2009 classification

Figure 7 | profile of Croydon's population using the *Mosaic classification*



Source: Mosaic 2009 Classification, Experian

## Social and environmental context

### Poverty and deprivation

In Croydon, 28.3% of children live in poverty.<sup>9</sup> This is significantly above the England average of 22.4% but lower than the London average of 33.9%.

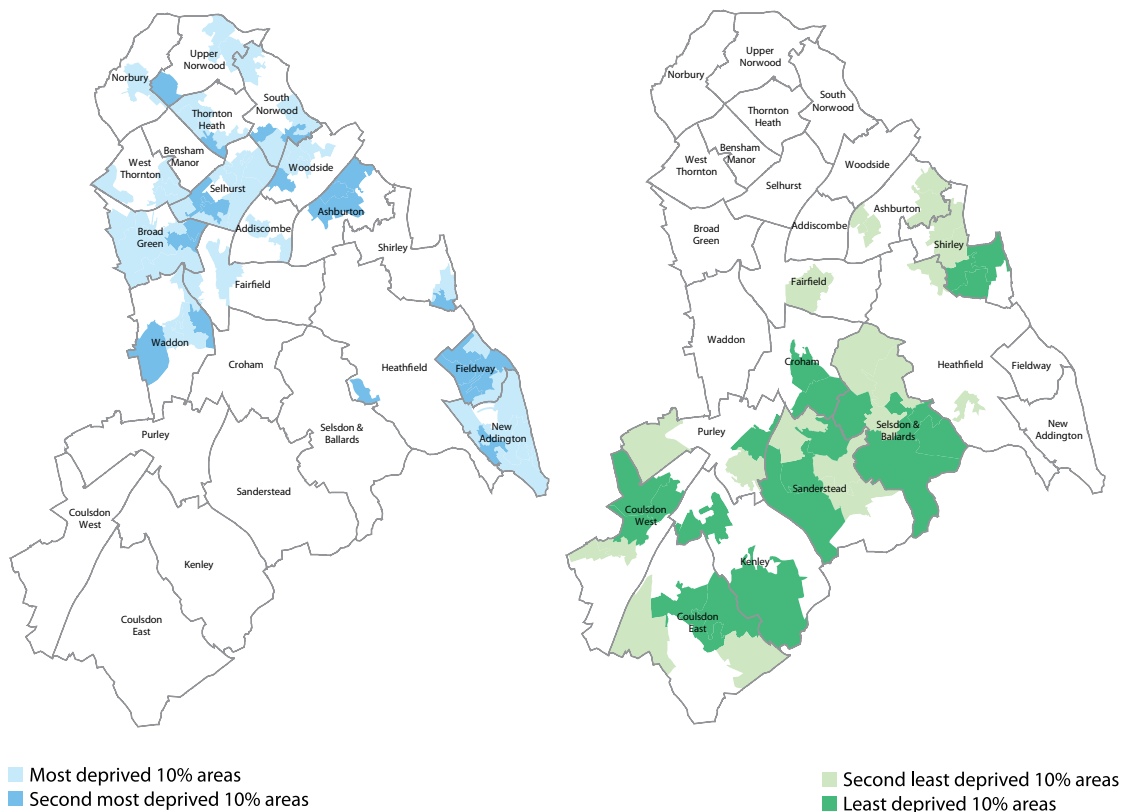
The index of multiple deprivation is a way of ranking areas according to their level of deprivation. It is calculated by combining scores on a range of indicators relating to income, employment, health, education, housing and access to services.

With an index of multiple deprivation score of 21.3, Croydon as a whole is slightly less deprived than the national average (21.6) and considerably less deprived than the London average (26.1). However, there is variation between different areas of Croydon with pockets of significant deprivation in the north and south east of the borough.<sup>10</sup>

In order to identify these areas of deprivation and enable interventions to be appropriately targeted, Croydon can be split into 220 small, geographically defined units called lower super output areas. These areas are helpful because their boundaries remain constant over time and the mean population is unlikely to deviate significantly from 1,500 people.

Analysing the borough by lower super output areas shows that 15% of the borough falls within the 20% most deprived areas in England. Alongside this, Croydon has some of the most affluent areas in England, often lying adjacent to the most deprived areas (figure 8).

**Figure 8 | the most and least deprived areas in Croydon**



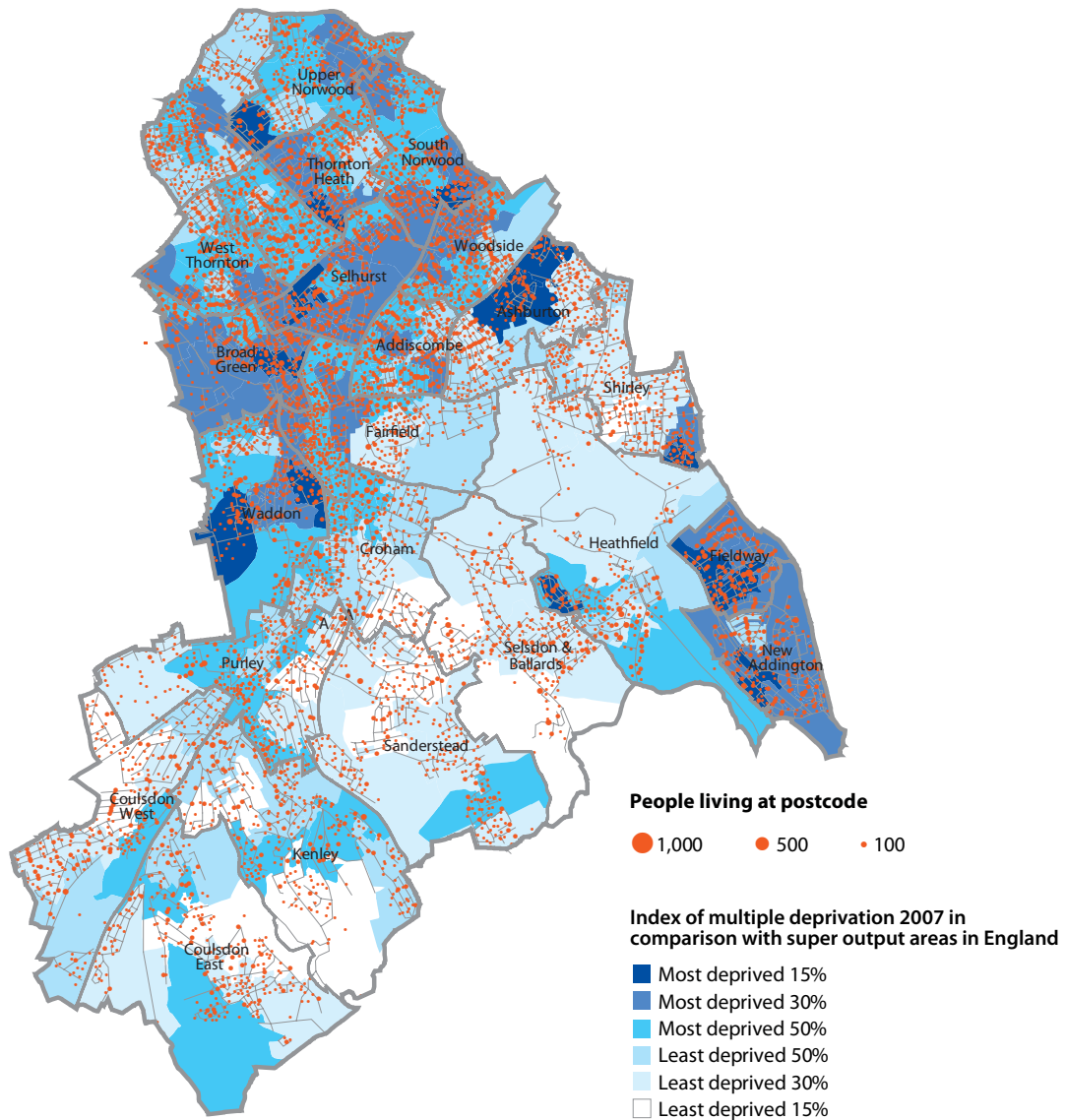
Source: Index of Multiple Deprivation 2007, Department of Communities and Local Government, Indices of Deprivation 2007

<sup>9</sup> Percentage of children in working age families receiving key benefits

<sup>10</sup> Department of Communities and Local Government. Indices of Deprivation 2007

Although there are large affluent areas towards the south of Croydon, these areas are much less densely populated than the more deprived areas of the borough (figure 9).

**Figure 9 | where people live in Croydon and areas of deprivation**



Source: Index of multiple deprivation 2007, Department of Communities and Local Government, Indices of deprivation 2007 and mid 2008 population estimates from Mosaic 2009 Postcode Directory, Experian

## Housing

The number of people who live in socially rented housing in Croydon is below both the London and England average. However, at 3.1 per 1,000 households, levels of statutory homelessness are significantly above the England average (2.5), but below that of London (4.0).<sup>11</sup> Household overcrowding (11.5%) is also significantly above the England average (7.1%), but below the London average (17.3%).<sup>12</sup>

Analysis of future housing need in Croydon indicates that the greatest needs between now and 2021 are for family sized homes and social rented properties. Croydon Council is required to make provisions for the development of 11,000 new homes over the next ten years. The majority of the development will be concentrated in central Croydon.<sup>13</sup>

<sup>11</sup> Statutory homeless households per 1,000 households, 2008/2009, *Health Profiles*, Association of Public Health Observatories

<sup>12</sup> Percentage of households with an occupancy rating of less than zero, 2001, 2001 census (KS19)

<sup>13</sup> Croydon Council 2009



## Employment

Average weekly household incomes (£829) are significantly above average for England (£674), but slightly below the London average (£840).<sup>14</sup> Similarly, the unemployment rate (8.6%) is significantly above the England average (7.9%), but below the London average (9.1%).

## Geographical access

Geographical access to key services in Croydon such as schools, food stores and GPs is significantly better than the England average. For example, the average distance to a food store in Croydon is 0.9 km, compared with 1.3km in England.<sup>15</sup>

# The burden of ill health

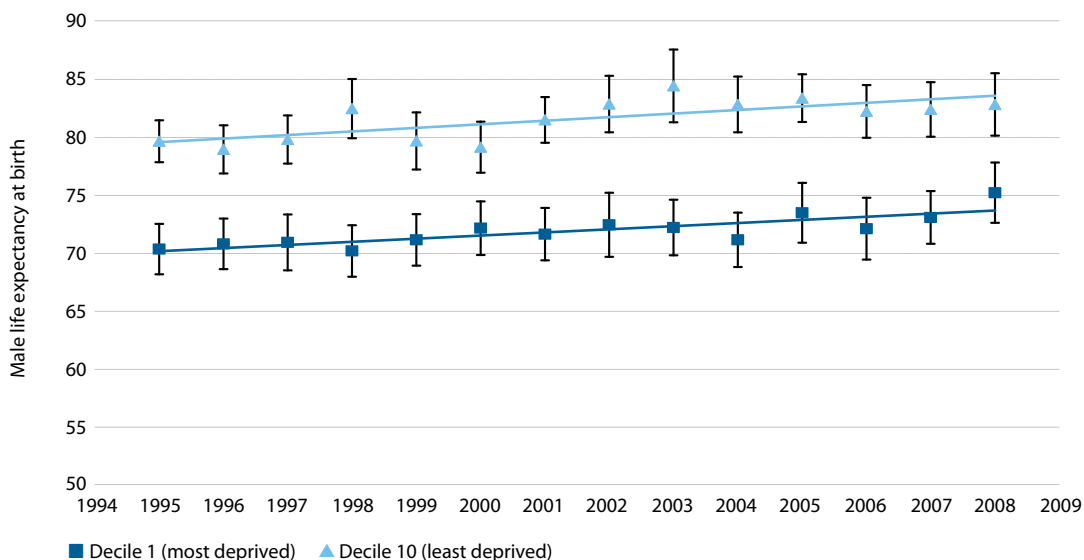
## Life expectancy

Croydon's male life expectancy (78.9 years) and female life expectancy (82.2 years) are above the England average, although closer to the England average for women (82.0 years) than men (77.9 years).<sup>16</sup> Healthy life expectancy at age 65 is significantly above the England average for both males and females.<sup>17</sup>

There is a strong association between deprivation and poor health outcomes in Croydon. In 2008, men living in the most affluent fifth of areas of Croydon (according to the index of multiple deprivation) could expect to live an average of 8.0 years longer than men living in the most deprived fifth of areas. For women, this difference was 5.0 years.<sup>18</sup>

Death rates from all causes are falling at approximately the same pace across the borough. However, there has been little, if any, significant change in the gap in life expectancy between the most deprived areas and the least deprived areas between 1995 and 2008 (figures 10 and 11). The main causes of death which are helping to sustain this gap in life expectancy in Croydon are circulatory diseases, cancers and respiratory diseases.<sup>19</sup>

**Figure 10 | gap in male life expectancy between most and least deprived deciles, Croydon lower super output areas, 1995-2008**



Source: Office for National Statistics death registration data

13 Croydon Council 2009

14 Model based estimates of average weekly household total income, 2007/2008, Neighbourhood Statistics

15 Population weighted average road distance to a food store (km), 2007, Neighbourhood Statistics

16 Life expectancy at birth, 2006-2008. Compendium of clinical and health indicators

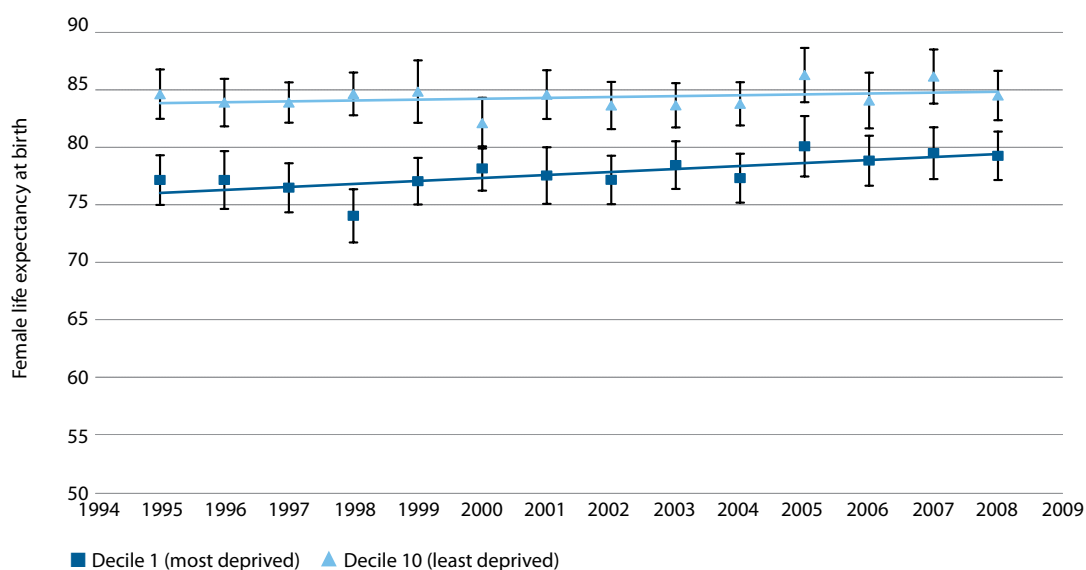
17 Healthy life expectancy at age 65 (males), 2001. Office for National Statistics

18 *Health Profile for Croydon 2010*. Association of Public Health Observatories

19 London Health Observatory health inequalities intervention toolkit. Available at [www.lho.org.uk/LHO\\_Topics/Analytic\\_Tools/](http://www.lho.org.uk/LHO_Topics/Analytic_Tools/)



**Figure 11 | gap in female life expectancy between most and least deprived deciles, Croydon lower super output areas, 1995-2008**



Source: Office for National Statistics death registration data

These differences in mortality rates between areas can be expressed as a single score called the slope index of inequality (SII), which represents the gap in the mortality rate between the best off and worst off within a local area. Mortality rates for a disease are plotted for each decile of deprivation in Croydon. The resulting graph shows a line which illustrates the degree of the inequality between most and least deprived areas. The steeper the line, the greater the inequality. The following sections illustrate the slope index of inequality for the three major causes of excess deaths in Croydon (figures 12, 14 and 16).

## Cancer

Incidence for all cancers in Croydon is 366 per 100,000 population. This is above the London average (347.2) but not significantly different from the England average (372.4).<sup>20</sup> However, Croydon has above average incidence of both prostate cancer (129.5 per 100,000 compared with 93.7 for London and 99.0 for England)<sup>21</sup> and bladder cancer (13.9 compared with 11.1 for London and 11.6 for England)<sup>22</sup>.

The early death rate from all cancers in those under 75 years old (99.4) is below the London and England averages (109.8 and 114.0).<sup>23</sup> However, those in the most deprived areas of Croydon, have a much higher rate of death from all cancers than those living in the least deprived areas<sup>24</sup> (figure 12). A slope index of inequality of 64.4 indicates Croydon has a relatively high level of inequality in cancer mortality compared with other London boroughs (figure 13), even though their death rates from cancers may be higher overall.

20 Age-standardised registration rate per 100,000 population for all cancers (ICD10 C00-C99 excluding C44), 2004-2006. Compendium of clinical and health indicators

21 Age-standardised registration rate per 100,000 male population for prostate cancer, 2004-2006. Compendium of clinical and health indicators

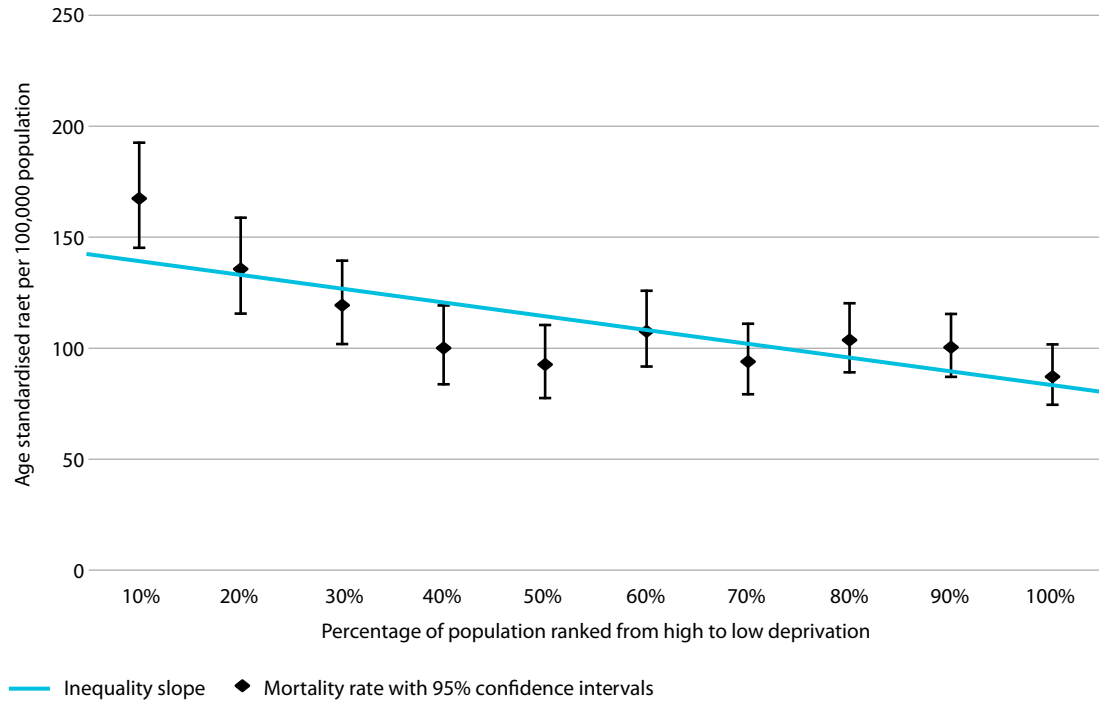
22 Age-standardised registration rate per 100,000 population for bladder cancer, 2004-2006. Compendium of clinical and health indicators

23 Age standardised mortality rate per 100,000 population (all cancers, ages under 75), 2006-2008. Compendium of clinical and health indicators

24 Lower super output areas divided into index of multiple deprivation deciles

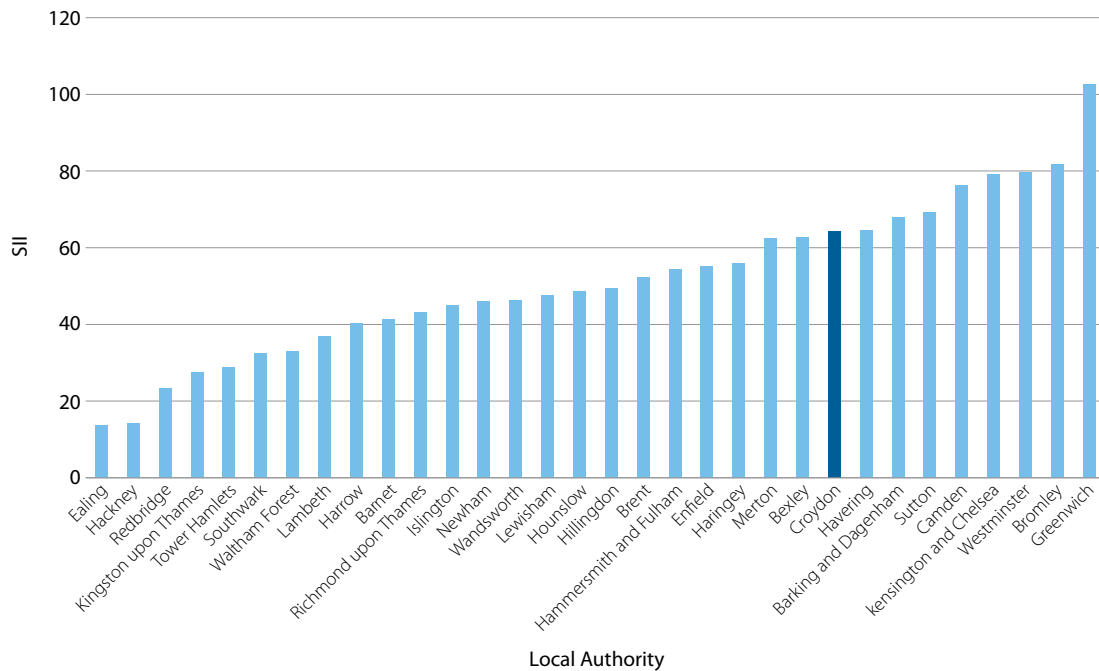
**Figure 12 | mortality from cancer in people aged under 75 by deprivation decile, showing the slope index of inequality, Croydon, 2004-2008**

Slope index of inequality = 64.1 (95% CI: 23.8 to 104.3)



Source: Office for National Statistics death registration data and mid year population estimates; Department of Communities and Local Government, Indices of Deprivation 2007

**Figure 13 | slope index of inequality for mortality from cancer in people aged under 75, London boroughs, 2004-2008**



Source: London Health Observatory 2004-2008

## Circulatory diseases

Circulatory disease is a major cause of death in Croydon as it is in London and across England. The early death rate from circulatory disease in Croydon is 75.8 per 100,000 population, above the England average of 74.8 but below the average for London (79.4).<sup>25</sup>

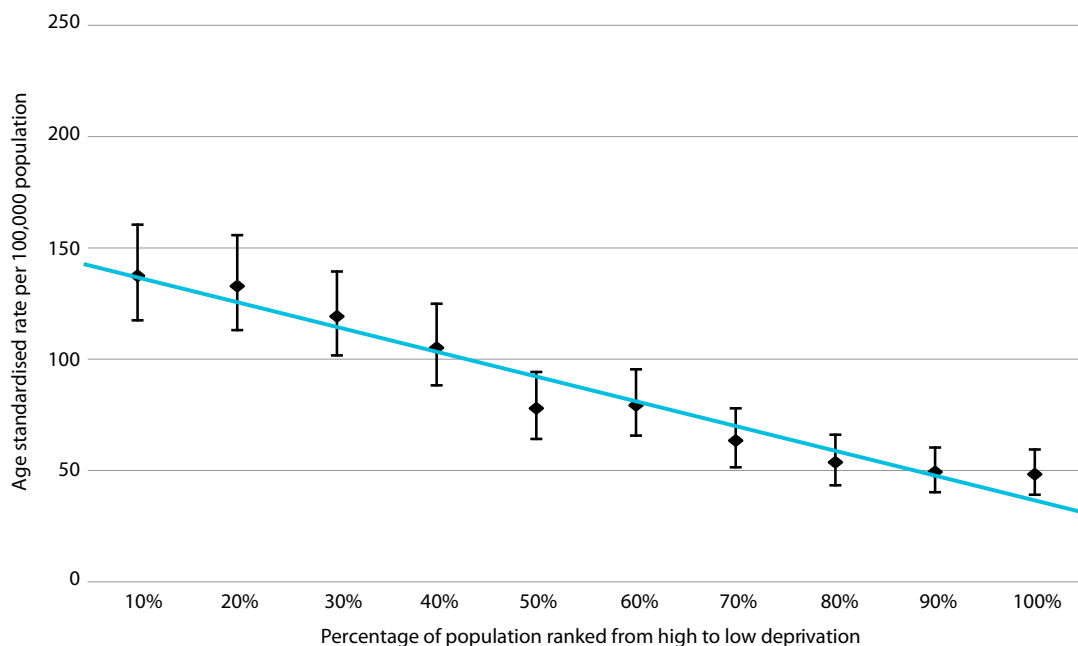
The estimated prevalence of both coronary heart disease and stroke are below the England average, and similar to the average for London as a whole. The mortality rate from stroke is 40.4 deaths per 100,000 population, compared with 41.8 in London and 47.3 for England.<sup>26</sup> For coronary heart disease, the mortality rate is 75.1, below that for London (85.4) and England (89.2).<sup>27</sup>

Hospital admissions for vascularisation<sup>28</sup> in Croydon for those aged over 65 years were 331.4 per 100,000 population, significantly above the London (287.5) and England (245.1) averages.<sup>29</sup> The picture is similar for hospital admissions for angiography<sup>30</sup> at 908.6 per 100,000 population compared with 702.3 for London and 559.7 for England.<sup>31</sup>

There is a significant degree of inequality in death from circulatory disease in Croydon, with a slope index of inequality of 111.2 (figure 14). Those living in the more deprived areas are more likely to die of the disease than those living in more affluent areas. Figure 15 shows Croydon has the second highest levels of inequality in circulatory disease mortality of all London boroughs.

**Figure 14 | mortality from circulatory diseases in people aged under 75 by deprivation decile, showing the slope index of inequality, Croydon, 2004-2008**

Slope index of inequality = 111.2 (95% CI: 92.3 to 130.0)



Source: Office for National Statistics death registration data and mid-year population estimates; Department of Communities and Local Government, Indices of Deprivation 2007

25 Age standardised mortality rate per 100,000 population (all circulatory diseases, ages under 75), 2006-2008. Compendium of clinical and health indicators

26 Age standardised mortality rate per 100,000 population (stroke, all ages), 2006-2008. Compendium of clinical and health indicators

27 Age standardised mortality rate per 100,000 population (coronary heart disease, all ages), 2006-2008. Compendium of clinical and health indicators

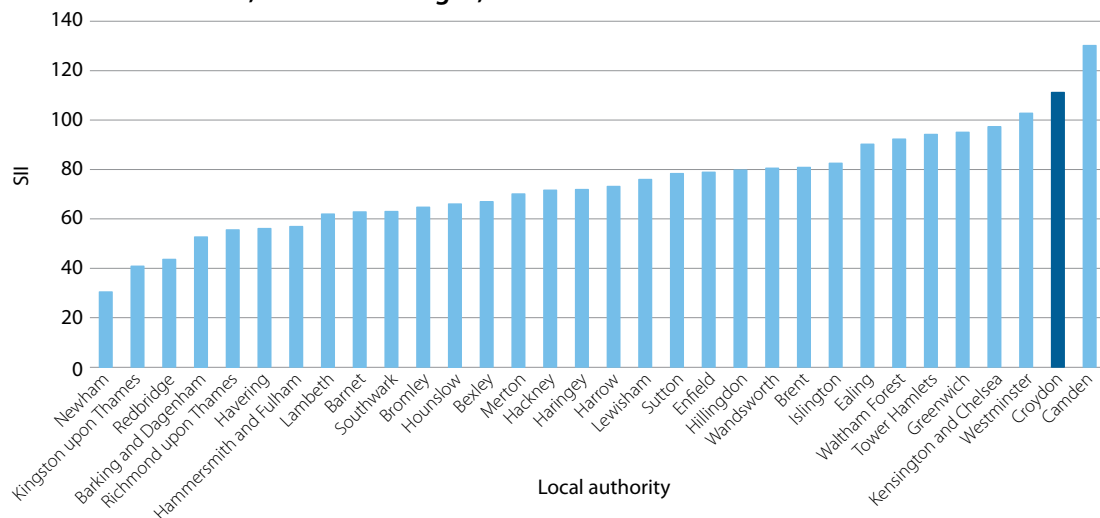
28 This term is used to describe procedures which improve the blood flow to the heart

29 Age standardised rate of hospital episodes for revascularisation per 100,000 population aged over 65, 2008/09. Local Basket of Indicators, London Health Observatory.

30 A specialised X-ray test which gives detailed information about the coronary arteries

31 Age standardised rate of hospital episodes for angiography per 100,000 population, 2008/2009 Local Basket of Indicators, London Health Observatory

**Figure 15 | slope index of inequality for mortality from circulatory diseases in people aged under 75, London boroughs, 2004-2008**



Source: Office for National Statistics death registration data and mid year population estimates; Department of Communities and Local Government, Indices of Deprivation 2007

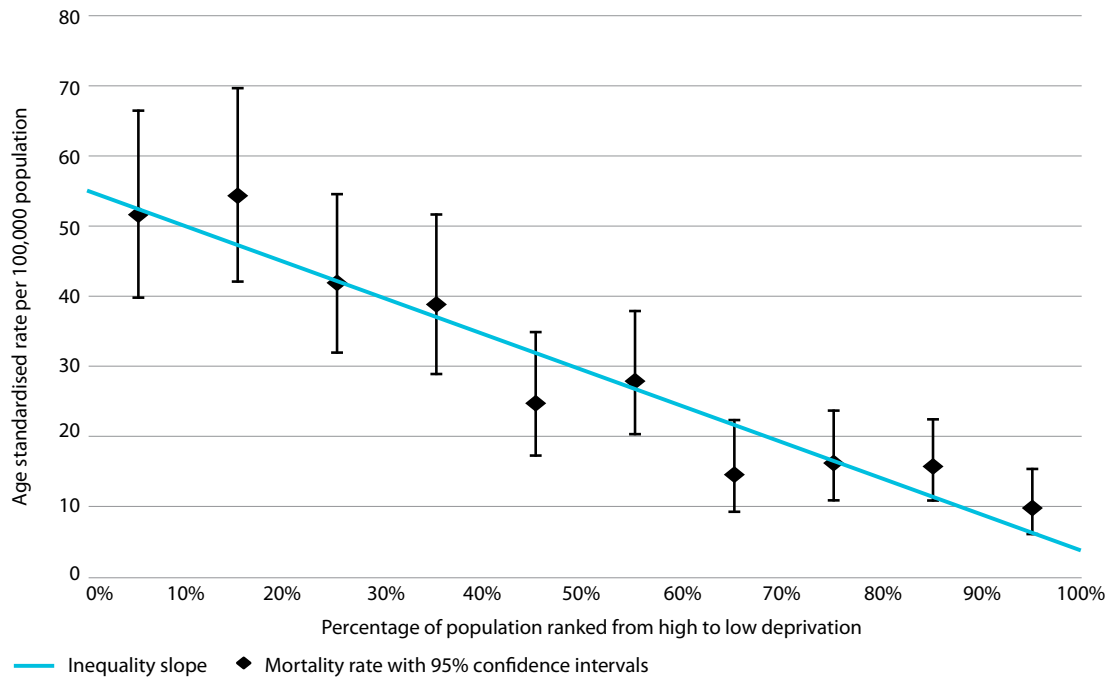
**Respiratory diseases**

In Croydon, GP recorded prevalence of chronic obstructive pulmonary disease was 1% in 2007/08.<sup>32</sup> This was lower than expected prevalence at 4.0%, indicating we are not reaching some of those who could benefit from health services.<sup>33</sup> This expected prevalence of chronic obstructive pulmonary disease in Croydon was significantly higher than that of London (3.9%) and England (3.7%).

The slope index of inequality is very steep suggesting a wide difference in mortality from respiratory diseases between the most and least deprived parts of the population (figure 16).

**Figure 16 | mortality from respiratory diseases in people aged under 75 by deprivation decile, showing the slope index of inequality, Croydon, 2004-2008**

Slope index of inequality = 51.2 (95% CI: 39.2 to 63.1)



Source: Office for National Statistics death registration data and mid year population estimates; Department of Communities and Local Government, Indices of Deprivation 2007

32 Percentage of patients on GP registers diagnosed with COPD (ages 16 and over), 2008/2009. Quality and Outcomes Framework

33 Estimated prevalence of COPD (diagnosed and undiagnosed) (aged 16 and over), 2010. Eastern Region Public Health Observatory

## Tuberculosis

Although the rate of tuberculosis cases in Croydon (32.3 per 100,000) is higher than the England average (15.4 per 100,000) it is lower than the rate for London (44.1 per 100,000).<sup>34</sup> Croydon's immunisation policy for tuberculosis is a targeted programme for individuals in high risk groups. It is primarily aimed at infants under the age of one so that those most at risk are vaccinated in early life. People at high risk of tuberculosis include those who were born, or have recently lived in, a country with a high incidence of tuberculosis, those with a parent or grandparent who was born in a country with a high incidence of tuberculosis or those who have been in close contact with tuberculosis within the past year.<sup>35</sup>

## Infant mortality

Infant mortality is the death of a live born baby in the first year of life. Infant mortality is the number of infant deaths per 1,000 live births. In Croydon, the infant mortality rate is 5.4, higher than both the London (4.6) and England (4.8) rates.<sup>36</sup>

Perinatal mortality includes deaths after 24 weeks gestation (stillbirths) and deaths of a baby during the first week of life. The perinatal mortality rate is the number of perinatal deaths per 1,000 total births. In Croydon, the perinatal mortality rate (9.4) is significantly higher than both London (8.4) and England (7.8).<sup>37</sup> The risk factors for infant mortality in Croydon are looked at in more detail in another chapter of this year's joint strategic needs assessment.

## Lifestyle and risk factors

A significant proportion of ill health in Croydon can be prevented or alleviated by encouraging and supporting people to modify their lifestyles. This section looks at the main risk factors for ill health in Croydon.

### Smoking

Estimated smoking prevalence indicates that 18.6% of people in Croydon smoke, compared with 20.8% in London and 22.2% in England.<sup>38</sup> However, local quit rates are below average at 593 per 100,000 compared with 799 for London and 895 for England.<sup>39</sup> Much work has been undertaken to target smokers in the most deprived areas of Croydon and this has resulted in a significant increase in the numbers quitting. The quit rate in Croydon doubled between 2008/09 and 2009/10 from 242 per 100,000 to 593 per 100,000 population. Figure 17 indicates where uptake of the NHS Stop Smoking Service is below that which would be expected based on the numbers of people smoking in those areas. The darker areas give an indication of where there are significant differences between need and service uptake and therefore where the service should be targeted in the future.

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34 Incidence of tuberculosis per 100,000 population, 2006/2008 Health Profiles, Association of Public Health Observatories

35 BCG Vaccination policy for Croydon, May 2010, NHS Croydon.

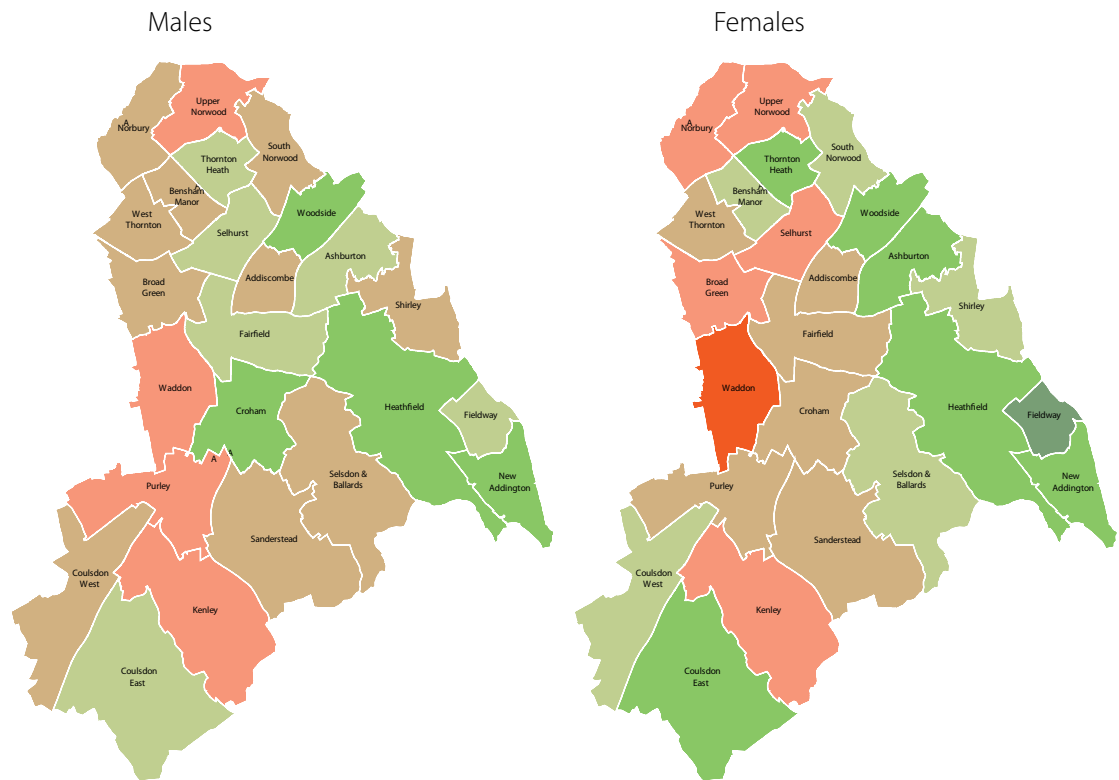
36 Infant deaths under one year of age per 1,000 live births, 2006-2008. Compendium of clinical and health indicators

37 Stillbirths and infant deaths under seven days of age per 1,000 live births, 2006-2008. Compendium of clinical and health indicators

38 Estimates of current smoking prevalence from Health Survey for England data, 2006-2008, Association of Public Health Observatories

39 Self reported four week smoking quitters per 100,000 adult population, 2009/2010. Information Centre for Health and Social Care

**Figure 17 | maps showing difference between actual and expected uptake for Croydon stop smoking service**



Source: Referrals to Croydon Stop Smoking Service age-sex standardised rate per 100,000 population aged 16 and over, Croydon Stop Smoking Service; smoking attributable mortality rate per 100,000 population calculated from Office for National Statistics Annual Death Extracts using methodology published in Statistics on Smoking: England, 2009, The Health and Social Care Information Centre

**Difference between actual and expected uptake per 100,000 population**

- 800 or more below expected
- 800 to -400 below expected
- 400 to 0 below expected
- 0 to 400 above expected
- 400 to 800 above expected
- 800 or more above expected

**Hypertension**

Hypertension (high blood pressure) increases the risk of stroke and heart disease so it is crucial that the condition is identified and managed early. Management of hypertension can involve lifestyle interventions such as smoking cessation, regular exercise and a healthy diet, as well as the prescription of appropriate antihypertensive medication. GP records indicate that 14.6% of patients have hypertension compared with 13.4% in London and 16.1% in England.<sup>40</sup> Croydon has 44,281 people on GP hypertension registers, which is much less than the expected number of 79,144, indicating that many patients have yet to be diagnosed.<sup>41</sup>

**Teenage pregnancy and sexual health**

Teenage conception rates in Croydon are 55.4 per 1,000 young women under 18, above both the London (44.5) and England (40.5) averages.<sup>42</sup>

Access to NHS funded abortions before 10 weeks gestation was above average in 2009.<sup>43</sup> However, 35.9% of abortions for women aged under 25 were repeat abortions (women who had previously had an abortion) compared with 32.2% in London and 24.7% in England.<sup>44</sup> This may indicate a lack of uptake of, or access to, contraception.

40 Quality and Outcomes Framework, 2008/09 Percentage of patients on GP registers diagnosed with established hypertension (ages 16 and over)

41 Estimated prevalence of hypertension (diagnosed and undiagnosed) (ages 16 and over), 2010, Association of Public Health Observatories

42 Under 18 conception rate per 1,000 girls aged 15-17, 2008, Teenage Pregnancy Unit

43 Percentage of NHS funded abortions under 10 weeks gestation, 2009, Department of Health

44 Percentage of abortions in women aged under 25 who have previously had an abortion, 2009, Department of Health

Thirty six per 1,000 women aged 15 to 44 in Croydon use long acting reversible contraceptive methods, compared with 22 per 1,000 in London and 41 per 1,000 in England.<sup>45</sup> There is considerable opportunity to encourage more women to use long acting reversible contraception. This is more cost effective and reliable than the contraceptive pill but should be used in addition to barrier methods to protect against sexually transmitted infection.

In 2008, the prevalence of HIV in Croydon was 4.2 per 1000, lower than the London average (5.0) but significantly higher than the England average of 1.7.<sup>46</sup> Forty per cent of HIV patients were diagnosed late in Croydon in 2008. Early diagnosis of HIV leads to improved health outcomes and is more cost effective. However, Croydon has made no improvement on the target for late diagnosis from the 2004/05 baseline and ranks 25th in performance among 31 London boroughs.<sup>47</sup>

In Croydon GUM clinics, rates of diagnoses of chlamydia (age 15 to 24) and gonorrhoea were above the averages for both London and England in 2009. The rate of diagnoses for chlamydia (age 15 to 24) was 2,944.2 per 100,000, compared with 2,428.5 for London and 2,212.8 for England. For syphilis, the Croydon rate of 6.1 was above that for England (5.3)<sup>48</sup> but much less than that for London (14.1).<sup>49</sup>

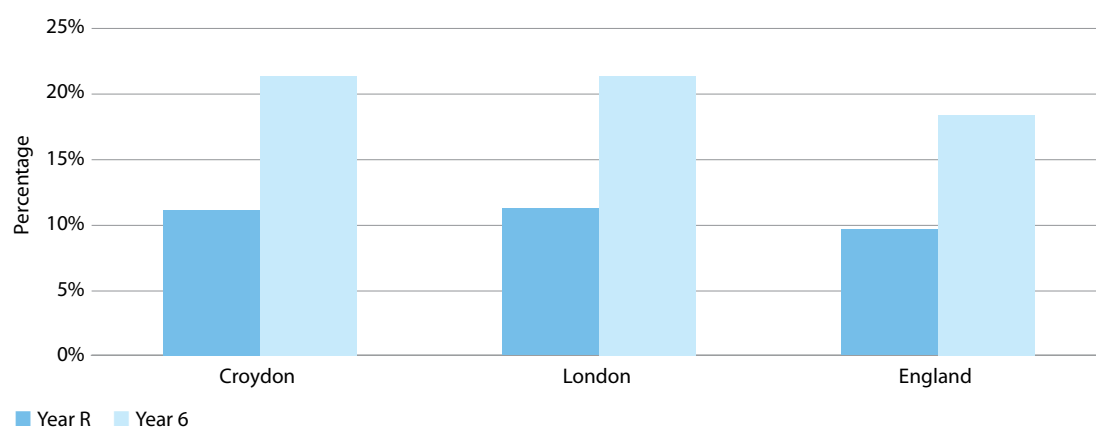
More detail about sexual health and teenage pregnancy in Croydon can be found in another chapter of this year's joint strategic needs assessment.

## Obesity

It is estimated that over 9,700 children aged two to 15 living in Croydon are obese.<sup>50</sup> The prevalence of childhood obesity in reception (age four to five) is 11.1% and in year 6 (age 10 to 11) is 21.3%, similar to London but higher than the England averages (9.6 % and 18.3%).<sup>51</sup>

The importance of early intervention in childhood is emphasised in figure 18, which indicates in 2008/09 obesity amongst year 6 children was twice that of the reception year children in Croydon. By the time adulthood is reached, only one in four are of a healthy weight and by the age of 40, more than 60% of adults in Croydon are overweight or obese.<sup>52</sup> Because obesity is a risk factor for a range of conditions, for example coronary heart disease and diabetes, this has a major impact on health and may significantly increase demand for health and social care services.

**Figure 18 | percentage of children who are obese, Croydon, London and England, Year R and Year 6, 2008/09**



Source: National childhood measurement programme

45 Rate per 1,000 registered female population aged 15-44, 2008/2009, Association of Public Health Observatories

46 Diagnosed HIV prevalence per 1,000 (aged 15-59), 2008, Sexual Health Balanced Scorecard, Association of Public Health Observatories

47 SOPHID 2008

48 Rate of chlamydia diagnoses for people aged 15-24 per 100,000 population, 2009, Health Protection Agency

49 Rate of syphilis diagnoses per 100,000 population, 2009, Health Protection Agency

50 Health Survey for England 2008 data applied to mid 2009 ONS population estimates

51 National childhood measurement programme, 2008/09

52 Data from Croydon general practices, 31 March 2010

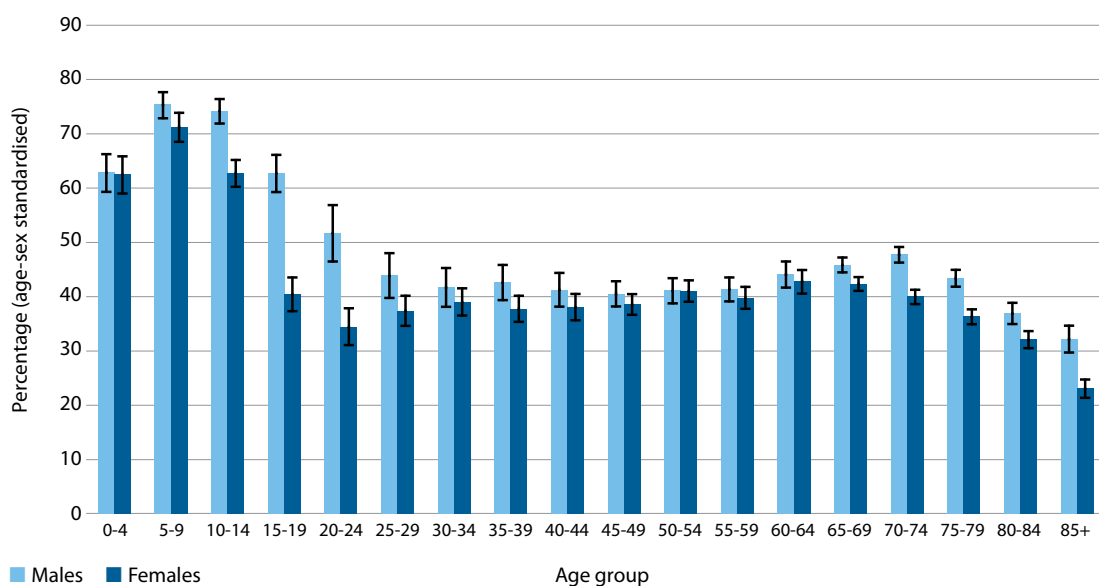
Having a healthy diet and being physically active helps to reduce obesity as well as being protective factors for many other conditions.

36.4% of adults in Croydon eat five or more portions of fruit and vegetables each day. This is higher than the England average (28.7%) and similar to the average for London.<sup>53</sup>

Participation rates in physical education and school sport for children in Croydon is 51.5, significantly higher than the London (49.3) and England (49.6) averages.<sup>54</sup> The main barriers for those children who do not participate in physical activity are time, cost, lack of facilities and friends not taking part.

Levels of physical activity show a general decline as we get older (figure 19). Participation in sport and active recreation for adults is 7.4%, below the average for both London (10.2%) and England (11.2%).<sup>56</sup> Barriers to participation in sport and active recreation for adults in Croydon are similar to those for children. The most commonly cited ones are lack of time, cost, and lack of access to facilities.<sup>58</sup>

**Figure 19 | percentage of people taking regular exercise 2002-2008, Croydon, by age and sex**



Source: Croydon patient survey, 2002-2008

## Alcohol

The estimated number of adults in Croydon who binge drink is 14%, similar to the London average but below the England average of 20%.<sup>59</sup> Binge drinking has a significant impact on both short and longer term health. In 2008/09, the rate of alcohol related hospital admissions in Croydon was 1,510 per 100,000 population, higher than London (1,490) but lower than England (1,582).<sup>60</sup>

53 Estimated percentage of adults who consume five or more portions of fruit and vegetables per day from Health Survey for England data, 2006-2008, Source: Health Profiles, Association of Public Health Observatories

54 Percentage of year 1-13 pupils who spend at least three hours per week on high quality PE and school sport, 2008/2009, Source: Health Profiles, Association of Public Health Observatories

55 Pro-active South London school sports survey, 2008

56 Participation in moderate intensity sport and active recreation on 20 or more days in the previous 4 weeks, 2007-2009. Health Profiles, Association of Public Health Observatories

57 However NI 8 which defines active recreation slightly differently as 'participation in moderate intensity sport and active recreation on 12 or more (rather than 20 or more) days', puts participation in sport and active recreation at 17.5%. National Indicator 8: Adult participation in sport and active recreation, April 2008-April 2010, Sport England's active people survey

58 Croydon Council: Talkabout Survey 2009

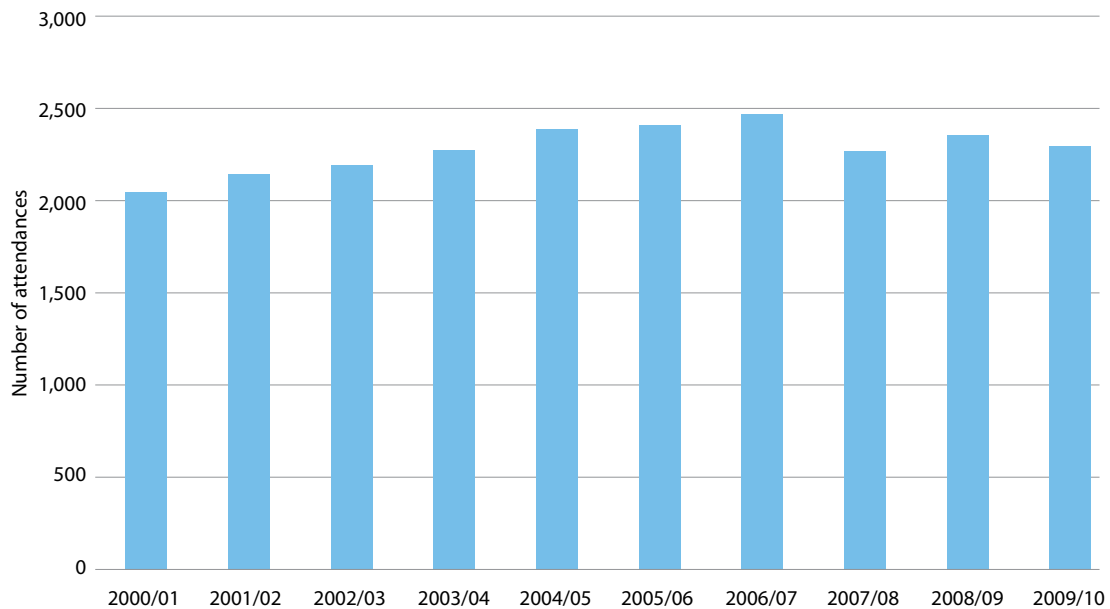
59 Binge drinking is defined as consumption of at least twice the daily recommended amount of alcohol in a single drinking session (that is, eight or more units for men and six or more units for women). Estimated percentage of adults who binge drink (>=8 units of alcohol on one day in the last week for men; >=6 units for women), 2007/2008, Health Profiles, Association of Public Health Observatories

60 Alcohol related harm admissions directly standardised rate per 100,000 population, 2008/2009, Health Profiles, Association of Public Health Observatories



Figure 20 indicates the impact of alcohol related presentations at accident and emergency services on a Friday and Saturday night amongst those aged 17 to 35. Reducing the impact of binge drinking would not only improve health but reduce the burden on accident and emergency services.

**Figure 20 | numbers of possible alcohol related accident and emergency attendances (Friday and Saturday night for people aged 17 to 35), Croydon University Hospital A&E Department, 2000/2001 to 2009/2010**



Source: A&E data from Croydon University Hospital

Note: possible alcohol related A&E attendances are defined as attendances for people aged 17-35 between 10pm Friday evening and 5am Saturday morning or between 10pm Saturday evening and 5am Sunday morning.

In 2009/10, the rate of alcohol related crime in Croydon was 11.4 per 1,000 population, and the alcohol related violent crime rate was 7.7. These were significantly higher than the England averages (8.06 and 5.83), but lower than the London averages of 12.2 and 8.3 respectively.<sup>61</sup>

## Health and social care services

The NHS provides healthcare for all Croydon residents. Services include general practice, dentistry, health visiting, district nursing and hospital care. Most NHS services are free at the point of access.

Croydon Council provides most social care services in Croydon. Social care is means tested, so that recipients often have to contribute towards the cost of their care. Social care is generally aimed at the most vulnerable members of the population.

In 2001, 14.7% of the population in Croydon (half of whom were aged between 16 and 65 years) described themselves as having a 'limiting long term illness, health problem or disability' and so may require health or social care services.<sup>62</sup>

<sup>61</sup> Local Alcohol Profiles for England, North West Public Health Observatory; Alcohol attributable recorded crimes, crude rate per 1,000 population. (from Home Office recorded crime statistics 2009/10).

<sup>62</sup> Self reported percentage of people with limiting long term illness (all ages), 2001 census (KS08)

## Social care services

The percentage of new clients whose social care needs assessments were completed within four weeks of first contact is significantly better in Croydon (94.0%) than in London (87.9%) or England (81.3%).<sup>63</sup> However only 5.9% of adults, older people and carers in Croydon are receiving social care through a direct payment, compared with 13.4% in London and 13.0% in England.<sup>64</sup> Direct payment is where recipients organise their own care services and are directly paid an agreed sum towards the cost of the care they purchase for themselves. This allows them to make informed choices about how best to meet their needs and more freedom to choose service providers.

Since 2008/09, there has been a shift in the provision of social care support away from residential care and nursing homes, towards providing more support for people in their own homes. Table 1 shows that in 2009/10, more people were supported at home than in residential care across all groups. Those people (4,062 per 100,000 population) were supported through social services to live independently in Croydon in 2009/10, compared with 3,239 per 100,000 in London and 3,119 per 100,000 in England.<sup>65</sup>

**Table 1 | estimated numbers of those receiving social care support, by location, 2009/10**

	Older people over 65 years	Physical disability 18-64 years	Learning disability 18-64 years	Mental health 18-64 years	Substance misuse 18-64 years	Other vulnerable people 18-64 years
Residential care	493	43	236	42	0	0
Nursing homes	406	18	3	8	1	0
Living at home	5884	1229	668	1334	68	106
<b>Total</b>	<b>6783</b>	<b>1290</b>	<b>907</b>	<b>1384</b>	<b>69</b>	<b>106</b>

Source: Information Centre for Health and Social Care

### Mental health

Over the course of a year, one in four people will have experienced mental health problems ranging from anxiety to more serious mental illnesses, and £1 in every £8 spent by NHS Croydon goes on mental health.

In 2006, the estimated prevalence of common mental health problems amongst adults aged between 16 and 74 in Croydon was 17.2%, below the average for London (18.2%) but above the England average (16.6%).<sup>66</sup>

Severe mental illness includes schizophrenia, bipolar disorder and other psychotic disorders. The prevalence of GP recorded severe mental illness in 2008/09 was slightly higher in Croydon (1.0%) than the London average (0.9%), but significantly higher than the England average (0.7%).<sup>67</sup>

### Learning disabilities

People with learning disabilities are, due to increasing awareness of health problems and better care, beginning to experience longer life expectancy. This raises the question of support for them as they age, perhaps having to care for their parents and living independently of the care system.

The GP recorded prevalence of learning disability in Croydon is 0.35%.<sup>68</sup> Figure 20 shows the GP recorded breakdown of those with learning disabilities by age and sex. The number of people with learning disabilities receiving social care support from social care services in 2009/10 was 907.<sup>69</sup>

<sup>63</sup> Percentage of new clients whose assessments were completed within four weeks of first contact (NI 132), 2009/2010, Information Centre for Health and Social Care

<sup>64</sup> Clients and carers receiving social care through self directed support as a percentage of the total number of clients and carers receiving services (NI 130), 2009/2010, Information Centre for Health and Social Care

<sup>65</sup> People supported to live independently through social services per 100,000 population (NI 136), 2009/2010, Source: Information Centre for Health and Social Care

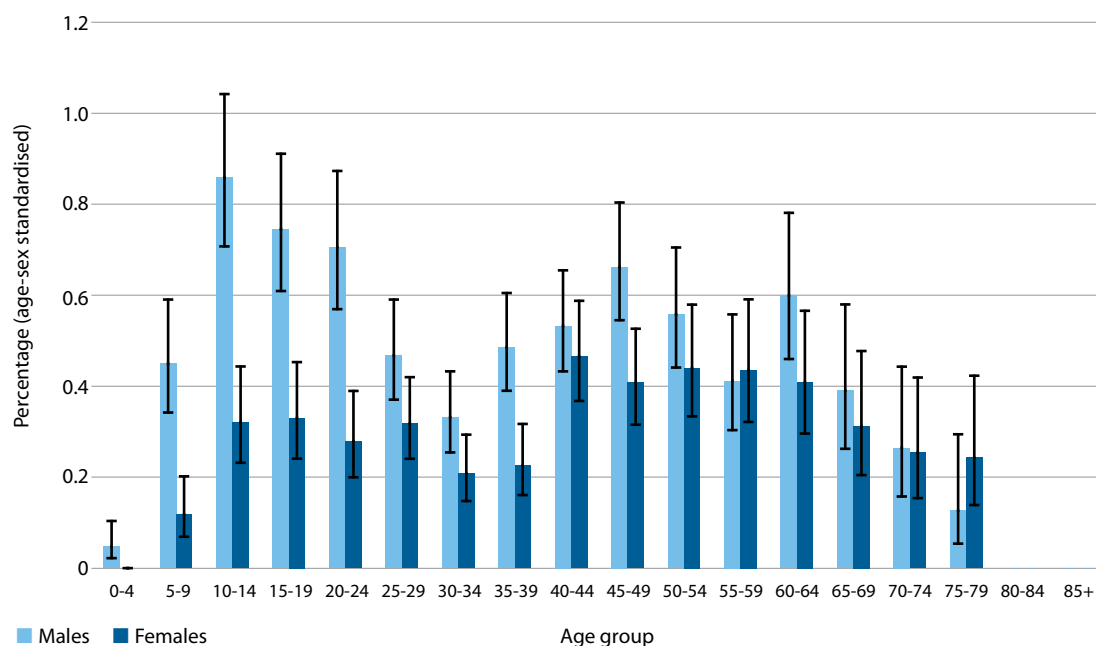
<sup>66</sup> Estimated percentage of people aged 16-74 with any neurotic disorder, 2006. Mental Health Observatory

<sup>67</sup> GP recorded prevalence of schizophrenia, bipolar disorder and other psychoses, 2008/2009. Quality and Outcomes Framework

<sup>68</sup> Percentage of patients aged over 18 on GP registers diagnosed with a learning disability, 2008/2009. Quality and Outcomes Framework

<sup>69</sup> Information Centre for Health and Social Care

**Figure 21 | GP recorded prevalence of learning disability by age and sex, Croydon 2009**



Source: Data from Croydon general practices, December 2009

In 2009/10, Croydon had a high proportion of adults with learning disabilities in employment (8.5%), compared with 8.3% in London and 6.4% in England.

### Older people

In 2009, there were 44,400 people over the age of 65 in Croydon, of whom 6,300 (approximately 14%) made use of social care services. Additionally, over 1,000 older people were supported through the voluntary sector.

Since 2008/09, more people were receiving support in their own homes rather than in residential care or nursing homes. However, only 23% of people in Croydon thought that older people in their local area got the help and support they needed to continue to live at home for as long as they wanted to, compared with 30% for England.<sup>70</sup>

The number of older people in Croydon is projected to grow by 9% between 2009 and 2015. Growth will be more pronounced in the over 85 age group, which will show a 16% increase.<sup>71</sup> This indicates that the pressure on services will mainly be from the over 85 age group and demand will increase for services such as support for people with memory loss.

### Carers

There are an estimated 30,000 carers in Croydon who look after, or help to look after, a family member, friend or neighbour who needs help due to illness, frailty or disability.<sup>72</sup> Adequate support and information for carers helps them to manage the impact of caring on their lives. The percentage of carers being supported with services, advice and information in Croydon is 12.7%, significantly below the London average (24.6%) and the England average (26.4%).<sup>73</sup>

<sup>70</sup> Percentage of people who think that older people in their local area get the help and support they need to continue to live at home for as long as they want to (NI 139). Place Survey; 2008

<sup>71</sup> Greater London Authority Population Projections – 2009 Round for London Plan

<sup>72</sup> Office for National Statistics, 2001 census, local Profile for Croydon.

<sup>73</sup> Percentage of carers receiving needs assessment or review and a specific carer's service, or advice and information (NI 135), 2009/2010. Information Centre for Health and Social Care

## Health services

### Immunisations

In Croydon, the uptake of the seasonal flu vaccination for those over 65 is 68.7%, compared with 72.5% for London and 74.1% for England.<sup>74</sup>

The percentage of children immunised against childhood diseases such as pneumococcal infection, meningitis and measles mumps and rubella, is significantly below the average for England in each case. For example, 65.3% of children aged two are immunised for pneumococcal infection in Croydon, compared with 67.5% in London and 81.5% in England.<sup>75</sup>

### Preventative screening

The percentage of women in Croydon aged 53 to 70 screened in the last three years for breast cancer is 71.5%, compared with 64.5% for London and 76.5% for England. The picture is similar for cervical cancer, with the percentage of women being screened significantly lower than the England average.

### Dentistry

The percentage of both adults (48.6%) and children (65.7%) in Croydon accessing NHS dental services in the past two years is significantly below the England averages (51.1% and 69.9% respectively).<sup>76</sup> This is despite the fact that practices are taking on new NHS patients. Reasons for not visiting a dentist may include fear or cost.

### Access to general practitioners

The percentage of people gaining easy telephone access to a general practice in Croydon was 69.7%, significantly better than the average for England (67.9%).<sup>77</sup> However, the percentage of people able to get an appointment with a GP quickly (75.2%) or to see a preferred GP if they wanted (71.2%), was significantly lower than the England averages of 80.0% and 75.0% respectively.<sup>78</sup>

## Health and social care spending and outcomes

Programme budgeting is a technique for assessing investments in health programmes rather than health services. By dividing the expenditure by programme budgeting areas, it is possible to analyse how Croydon performs relative to other primary care trusts. In some cases, variations in expenditure between primary care trusts may be due to the different needs and demands of their population or different configurations of services. However, they may also highlight areas where there is room for review and innovation in relation to the provision of services.

In 2008/09, NHS Croydon had a total spend of £485 million. Figure 22 shows NHS Croydon's spend per head of population and total spend for each programme budgeting area. This shows that mental health and GP services have the largest spend per head of population and account for nearly a quarter of total health service expenditure between them.

When assessing the relationship between expenditure and health outcomes for programme budgeting areas (2008/09), local data shows that there are some areas, for example maternity, where we have high expenditure and poorer outcomes when compared with the national average of 152 primary care trusts. For other areas such as diabetes (endocrine), we have lower expenditure and poorer outcomes.<sup>79</sup> The annual report of the Director of public health for 2010/11 gives a detailed assessment of NHS spending against outcomes.

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74 Percentage of people aged 65 and over immunised against influenza, 2008/2009. Information Centre for Health and Social Care

75 Immunisation rate for children age two who have received pneumococcal booster (PVC), 2008/2009. Information Centre for Health and Social Care

76 Percentage of adults/children accessing NHS dentistry in the last two years. March 2010, Source: Information Centre for Health and Social Care

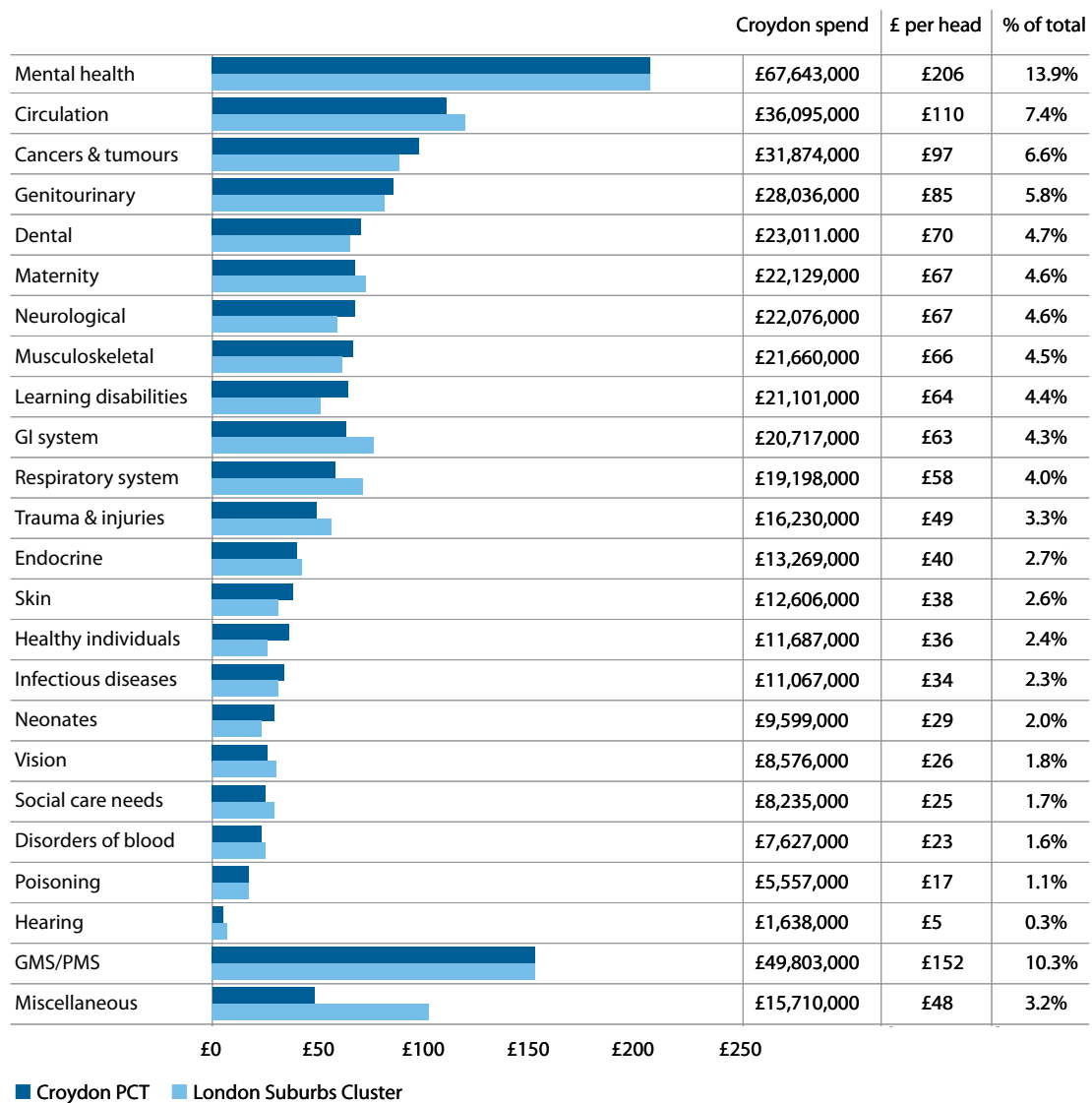
77 Percentage of people rating it easy to get through to the surgery on the phone (in the past six months), 2009/2010. GP Patient Survey

78 Percentage of people able to get an appointment with a GP fairly quickly (in the past six months), GP Patient Survey; 2009/2010.

Percentage of people able to see preferred doctor always or a lot of the time, GP Patient Survey 2009/2010

79 Spend and Outcomes Tool, Association of Public Health Observatories

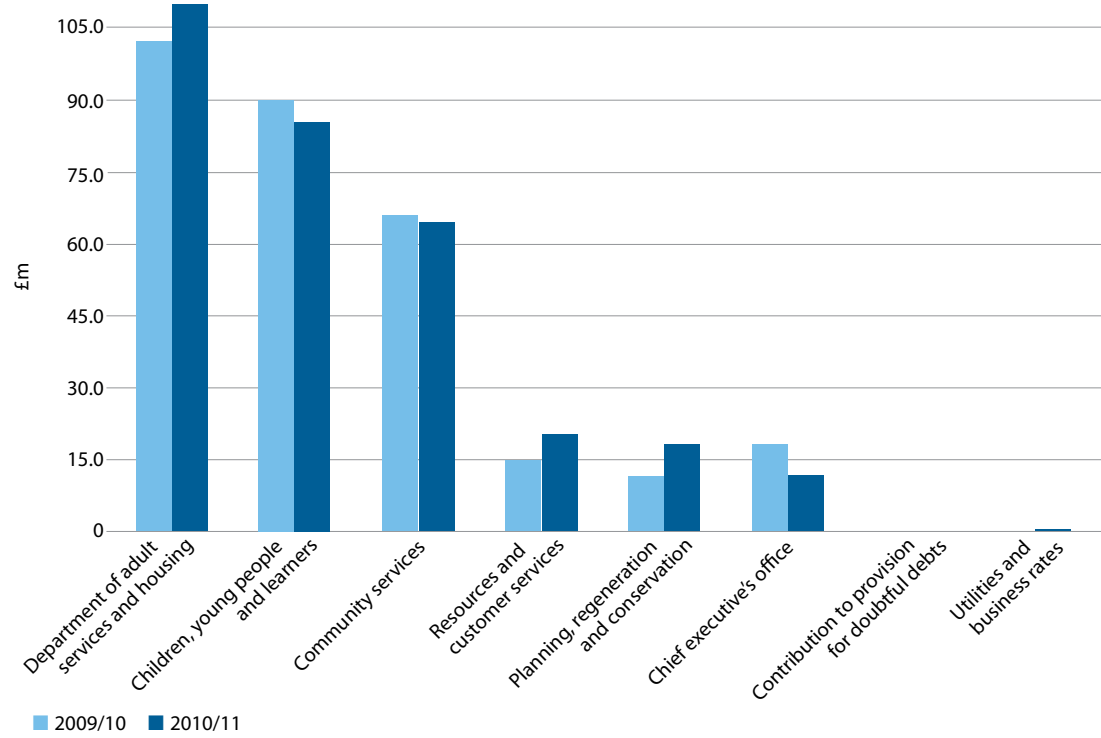
**Figure 22 | Croydon spend per head population compared with London Suburbs cluster, 2008/09**



Source: Department of Health

In 2009/10, the total expenditure of the council was £307.2 million. Figure 23 shows that the department of adult services and housing (which incorporates all adult social care services) spent £109.5 million and accounted for the largest proportion of the council's total expenditure.

**Figure 23 | Croydon Council expenditure by department**



Source: Croydon Council draft revenue budget and capital programme 2010/11.

## Croydon core dataset 2010/2011

The chart below 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. See the notes on page 52 for a detailed description of the definition and data source for each indicator.



Domain	Indicator	Croydon	London	England	England Range	
Social and environmental context						
Poverty	1 Index of multiple deprivation	21.3	26.0	21.6		
	2 Children in poverty	28.3%	33.9%	22.4%		
Disability	3 Limiting long term illness	14.7%	15.5%	17.9%		
	4 Working age population who are claiming disability benefit	0.9%	0.8%	1.0%		
	5 GP recorded learning disability prevalence (adults)	0.35%	0.27%	0.40%		
Housing	6 Social rented households	16.9%	24.0%	17.8%		
	7 Overcrowded households	11.5%	17.3%	7.1%		
	8 Statutory homelessness	3.1	4.0	2.5		
	9 Adults with learning disabilities in settled accommodation	70.5%	58.7%	61.0%		
	10 Adults in contact with secondary mental health services in settled accommodation	33.0%	62.1%	59.1%		
	11 Older people living alone	12.0%	12.7%	14.4%		
Transport	12 Older people with central heating	85.0%	84.9%	86.8%		
Education	13 Access to car or van	70.2%	62.5%	73.2%		
Employment	14 GCSE achieved (5 A*-C inc. Eng & Maths)	51.9%	53.9%	50.9%		
	15 Overall employment rate	71.7%	68.3%	70.7%		
	16 Working age people on out of work benefits	13.1%	13.0%	12.9%		
	17 Adults with learning disabilities in employment	8.5%	8.3%	6.4%		
	18 Adults in contact with secondary mental health services in employment	4.9%	6.0%	7.9%		
Income	19 Unemployment rate	8.6%	9.1%	7.9%		
Crime	20 Average weekly household income (£)	£829	£840	£674		
	Geographical access	21 Violent crime	20.4	23.0	16.4	
		22 Average road distance to a primary school (km)	0.8	0.7	0.9	
		23 Average road distance to a food store (km)	0.9	0.8	1.3	
		24 Average road distance to GP premises (km)	0.9	0.7	1.5	
25 Average road distance to a Post Office (km)		1.0	0.8	1.1		
Environment	26 Carbon emissions	4.8	5.9	6.8		
Satisfaction with local area	27 Older people's satisfaction with home and neighbourhood area	77.2%	77.1%	83.9%		

Domain	Indicator	Croydon	London	England	England Range
Lifestyle/risk factors					
Smoking	28 Modelled smoking prevalence	18.6%	20.8%	22.2%	
	29 GP recorded smoking prevalence (adults)	15.4%	18.3%	18.8%	
	30 Smoking in pregnancy	8.9%	7.5%	14.6%	
	31 Quit rates	593.1	799.2	894.7	
	32 Deaths attributable to smoking	186.7	200.4	206.8	
Eating habits	33 Modelled healthy eating prevalence (adults)	36.8%	36.4%	28.7%	
	34 Prevalence of breastfeeding at 6-8 weeks from birth	66.0%	63.6%	44.9%	
Alcohol	35 Modelled binge drinking behaviour	13.8%	14.3%	20.1%	
	36 Hospital stays for alcohol related harm	1510.2	1490.5	1582.7	
Physical activity	37 Participation in PE and school sport (children)	51.5%	49.3%	49.6%	
	38 Participation in sport and active recreation (adults)	7.4%	10.2%	11.2%	
Teenage pregnancy	39 Under 18 conception rate	55.4	44.5	40.5	
	40 Under 16 conception rate	11.2	8.7	7.9	
	41 Repeat abortions (ages under 25)	35.9%	32.2%	24.7%	
Hyper-tension	42 Modelled hypertension prevalence (adults)	29.2%	26.5%	30.5%	
	43 GP recorded hypertension prevalence (adults)	14.6%	13.4%	16.1%	
Obesity	44 Obese children (Reception Year)	11.1%	11.2%	9.6%	
	45 Obese children (Year 6)	21.3%	21.3%	18.3%	
	46 Modelled obesity prevalence (adults)	23.5%	20.7%	24.2%	
	47 GP recorded obesity prevalence (adults)	10.1%	9.0%	9.9%	
Burden of ill health					
All causes	48 All age all cause mortality (males)	641.6	677.2	692.3	
	49 All age all cause mortality (females)	477.3	463.0	490.6	
	50 Life expectancy (males)	78.9	78.2	77.9	
	51 Life expectancy (females)	82.2	82.7	82.0	
	52 Self reported measure of overall health and wellbeing	77.8%	79.4%	75.8%	
	53 Healthy life expectancy at age 65 (males)	13.3	12.5	12.5	
	54 Healthy life expectancy at age 65 (females)	14.8	14.6	14.5	
Infant mortality	55 Infant mortality	5.4	4.6	4.8	
	56 Neonatal mortality	3.7	3.1	3.3	
	57 Early neonatal mortality	3.1	2.3	2.6	
	58 Perinatal mortality	9.4	8.4	7.8	
Causes considered amenable to healthcare	59 Deaths from causes considered amenable to healthcare	96.3	103.5	101.3	
	60 Deaths from causes considered amenable to healthcare excluding CHD	61.3	60.7	59.0	
	61 Deaths from causes other than those considered amenable to healthcare	188.4	193.2	194.4	



Domain	Indicator	Croydon	London	England	England Range
Diabetes	62 Modelled diabetes prevalence (adults)	8.3%	7.5%	7.4%	
	63 GP recorded diabetes prevalence (adults)	5.4%	5.0%	5.1%	
	64 Blood sugar control (HbA1c<7.5)	54.2%	57.0%	60.2%	
	65 Emergency admissions for diabetes	35.3	27.9	26.7	
	66 Deaths from diabetes	5.6	6.2	6.1	
	67 Deaths attributable to diabetes	13.6%	13.5%	11.6%	
Circulatory disease	68 Early deaths from circulatory diseases	75.8	79.4	74.8	
Coronary heart disease	69 Modelled CHD prevalence (adults)	4.5%	4.5%	5.7%	
	70 GP recorded CHD prevalence (adults)	2.9%	2.8%	4.3%	
	71 Admissions for angiography	331.4	287.5	245.1	
	72 Admissions for revascularisation	908.6	702.3	559.7	
	73 Deaths from coronary heart disease	75.1	85.4	89.2	
Stroke	74 Modelled stroke prevalence (adults)	2.0%	2.0%	2.5%	
	75 GP recorded stroke/TIA prevalence (adults)	1.4%	1.3%	2.0%	
	76 Emergency admissions for stroke	99.8	114.9	115.4	
	77 Emergency readmissions within 28 days of discharge for stroke	10.9	11.7	10.8	
	78 Deaths from stroke	40.4	41.8	47.3	
Cancer	79 Incidence of all cancers	366.0	347.2	372.4	
	80 Early deaths from cancer	99.4	109.8	114.0	
	81 Incidence of oesophageal cancer	7.1	7.9	9.3	
	82 Deaths from oesophageal cancer	6.1	6.8	8.4	
	83 Incidence of stomach cancer	8.6	8.7	9.1	
	84 Deaths from stomach cancer	5.6	5.2	5.5	
	85 Incidence of colorectal cancer	41.8	40.5	45.6	
	86 Deaths from colorectal cancer	17.2	16.5	17.7	
	87 Incidence of lung cancer	38.3	46.3	45.9	
	88 Deaths from lung cancer	32.8	37.8	38.6	
	89 Incidence of all skin cancers	28.1	23.2	106.9	
	90 Deaths from malignant melanoma	2.3	2.1	2.5	
	91 Incidence of breast cancer	120.3	109.6	122.8	
	92 Deaths from breast cancer	23.9	25.5	26.8	
	93 Incidence of cervical cancer	7.1	6.8	8.0	
	94 Deaths from cervical cancer	1.9	2.1	2.3	
	95 Incidence of prostate cancer	129.5	93.7	99.0	
	96 Deaths from prostate cancer	27.0	22.4	24.5	
	97 Incidence of bladder cancer	13.9	11.1	11.6	
	98 Deaths from bladder cancer	4.55	4.52	4.96	
99 Deaths from leukaemia	6.0	5.1	5.0		
Pneumonia	100 Deaths from pneumonia	29.4	29.8	27.8	

Domain	Indicator	Croydon	London	England	England Range
COPD	101 Modelled COPD prevalence (adults)	4.0%	3.9%	3.7%	
	102 GP recorded COPD prevalence (adults)	1.0%	1.2%	1.9%	
	103 Deaths from COPD	29.6	26.3	26.6	
Asthma	104 GP recorded asthma prevalence	5.0%	4.7%	5.9%	
	105 Emergency admissions for children with asthma	236.1	212.9	232.3	
	106 Deaths from asthma	1.8	1.5	1.3	
Tuberculosis	107 New cases of tuberculosis	32.3	44.1	15.4	
Sexual health	108 Chlamydia diagnoses at GUM clinics (ages 15-24)	2944.2	2428.5	2212.8	
	109 Chlamydia diagnoses at GUM clinics (ages 25 and over)	168.0	181.0	97.8	
	110 Gonorrhoea diagnoses at GUM clinics	84.0	72.8	29.7	
	111 Syphilis diagnoses at GUM clinics	6.1	14.1	5.5	
	112 Herpes diagnoses at GUM clinics	79.3	79.3	51.2	
	113 Warts diagnoses at GUM clinics	111.5	163.6	145.6	
	114 HIV prevalence	4.2	5.0	1.7	
Dental health	115 Decayed, missing or filled teeth in five year olds	1.1	1.3	1.1	
Mental health	116 GP recorded dementia prevalence	0.34%	0.29%	0.43%	
	117 Modelled prevalence of any neurotic disorder	17.2%	18.2%	16.6%	
	118 Modelled prevalence of all phobias	2.1%	2.2%	1.8%	
	119 Modelled prevalence of depression	3.4%	3.5%	2.5%	
	120 Modelled prevalence of generalised anxiety disorder	5.1%	5.3%	4.5%	
	121 Modelled prevalence of mixed anxiety depression	7.9%	8.4%	8.9%	
	122 Modelled prevalence of obsessive compulsive disorder	1.5%	1.5%	1.1%	
	123 Modelled prevalence of panic disorder	0.8%	0.8%	0.7%	
	124 GP register for severe mental illness	1.0%	0.9%	0.7%	
	125 Incapacity benefits for mental illness	24.4	26.7	27.6	
	126 Deaths from suicide and injury of undetermined intent	6.7	7.3	7.8	
Falls	127 Admissions for hip fracture in over 65s	421.7	436.6	479.2	
Road accidents	128 Road injuries and deaths	43.1	49.7	51.3	
	129 Road injuries and deaths (children)	154.2	144.5	214.8	
Injuries	130 Injuries to children and young people	108.4	94.8	117.4	
Musculo-skeletal	131 Admissions for hip replacement	95.2	76.4	109.9	
	132 Admissions for knee replacement	113.5	110.3	125.8	

Domain	Indicator	Croydon	London	England	England Range
Services					
Social care	133 Timeliness of social care assessment	94.0%	87.9%	81.3%	
	134 Timeliness of social care assessment packages	98.1%	90.4%	90.4%	
	135 People supported to live independently through social services	4061.8	3238.7	3118.5	
	136 Carers receiving advice and information	12.7%	24.6%	26.4%	
	137 Social care clients receiving self directed support	5.9%	13.4%	13.0%	
Dental care	138 Percentage of adults accessing NHS dentistry	48.6%	47.2%	51.1%	
	139 Percentage of children accessing NHS dentistry	65.7%	66.0%	69.9%	
Preventative screening	140 Uptake rates for flu jab (ages over 65)	68.7%	72.5%	74.1%	
	141 Children aged one immunised for diphtheria, tetanus, polio, pertussis and Hib	89.7%	83.4%	92.0%	
	142 Children aged two immunised for pneumococcal infection	65.3%	67.5%	81.5%	
	143 Children aged two immunised for meningitis and Hib	77.7%	70.3%	85.4%	
	144 Children aged two immunised for measles, mumps and rubella (MMR)	79.2%	76.3%	84.9%	
	145 Children aged five immunised for diphtheria, tetanus, polio, pertussis	74.5%	58.2%	80.1%	
	146 Children aged five immunised for measles, mumps and rubella (MMR)	70.8%	63.0%	78.0%	
	147 Girls aged 12-13 years immunised for the human papilloma virus	71.3%	63.3%	70.4%	
	148 Breast screening coverage for women aged 53-70	71.5%	64.5%	76.5%	
	149 Cervical screening coverage for women aged 25-64	75.9%	73.8%	78.9%	
Sexual health	150 GP prescribed long acting reversible contraception (LARC)	36.3	22.0	41.4	
	151 Access to NHS funded abortions before 10 weeks gestation	80.2%	77.4%	74.4%	
Long term conditions	152 Support for people with long-term conditions	52.9%	54.0%	56.8%	
	153 Support for older people to live independently at home	23.6%	23.3%	30.0%	
User perspective on health care	154 Parental experience of services for disabled children	60.0%	59.4%	61.0%	
	155 Satisfaction with telephone access to GP practice	69.7%	65.1%	67.9%	
	156 Ability to see GP quickly	75.2%	75.8%	80.0%	
	157 Ability to book GP consultation ahead if wanted	72.2%	69.6%	71.4%	
	158 Ability to see a specific GP if wanted	71.2%	69.9%	75.0%	
	159 Satisfaction with GP practice opening times	79.9%	78.4%	81.5%	

## Indicator notes

- 1 Index of multiple deprivation score, 2007, Source: Department of Communities and Local Government, Indices of Deprivation 2007
- 2 Percentage of children in working age families receiving key benefits, 2007, Source: Health Profiles, Association of Public Health Observatories
- 3 Self reported percentage of people with limiting long term illness (all ages), 2001, Source: 2001 Census (KS08)
- 4 Percentage of working age population who are claiming disability benefit, February 2010, Source: Labour Force Survey
- 5 Percentage of patients aged over 18 on GP registers diagnosed with a learning disability, 2008/2009, Source: Quality and Outcomes Framework
- 6 Percentage of LA (incl. owned by other LA's) and RSL households, 2008, Source: Housing Strategy Statistical Appendix data
- 7 Percentage of households with an occupancy rating of less than zero, 2001, Source: 2001 Census (KS19)
- 8 Statutory homeless households per 1,000 households, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 9 Percentage of adults with learning disabilities known to Councils with Adult Social Services Responsibilities (CASSRs) in settled accommodation (NI 145), 2009/2010, Source: Information Centre for Health and Social Care
- 10 Percentage of adults receiving secondary mental health services known to be in settled accommodation at the time of their most recent assessment (NI 149), 2009/2010, Source: Information Centre for Health and Social Care
- 11 Percentage of households consisting of a lone pensioner, 2001, Source: 2001 Census (KS19)
- 12 Percentage of households with at least one person of pensionable age with central heating, 2001, Source: 2001 Census (T06)
- 13 Percentage of households with access to a car or van, 2001, Source: 2001 Census (KS17)
- 14 Percentage of pupils achieving 5 or more GCSEs at grades A\*-C (including English and Maths) or equivalent, percentage of pupils at end of Key Stage 4 in schools maintained by the Local Education Authority, at the end of the academic year 2008/09, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 15 Percentage of the working age population in employment (NI 151), 2009/2010, Source: Labour Statistics
- 16 Percentage of working age population on out of work benefits (NI 152), February 2010, Source: Labour Statistics
- 17 Percentage of learning disabled in employment (NI 146), 2009/2010, Source: Information Centre for Health and Social Care
- 18 Percentage of adults receiving secondary mental health services in employment (NI 150), 2009/2010, Source: Information Centre for Health and Social Care
- 19 Unemployment rate, 2009/2010, Source: Labour Statistics
- 20 Model based estimates of average weekly household total income, 2007/2008, Source: Neighbourhood Statistics
- 21 Violence against the person offences recorded per 1,000 population, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 22 Population weighted average road distance to a primary school (km), 2007, Source: Neighbourhood Statistics
- 23 Population weighted average road distance to a food store (km), 2007, Source: Neighbourhood Statistics
- 24 Population weighted average road distance to GP premises (km), 2007, Source: Neighbourhood Statistics
- 25 Population weighted average road distance to a Post Office (km), 2007, Source: Neighbourhood Statistics
- 26 Total end user CO2 emissions per capita (tonnes of CO2 per resident), 2007, Source: Health Profiles, Association of Public Health Observatories
- 27 Percentage of people over 65 satisfied with both home and neighbourhood (NI 138), 2008, Source: Place Survey
- 28 Estimates of current smoking prevalence from Health Survey for England data, 2006-2008, Source: Association of Public Health Observatories
- 29 Smoking prevalence calculated using latest GP recorded smoking status (ages 16 and over), 2009/2010 Q4, Source: Department of Health
- 30 Percentage of women who are smokers at the time of delivery, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 31 Self reported 4 week smoking quitters per 100,000 adult population, 2009/2010, Source: Information Centre for Health and Social Care
- 32 Deaths attributable to smoking per 100,000 population aged over 35, 2006-2008, Source: Health Profiles, Association of Public Health Observatories
- 33 Estimated percentage of adults who consume five or more portions of fruit and vegetables per day from Health Survey for England data, 2006-2008, Source: Health Profiles, Association of Public Health Observatories
- 34 Percentage of infants breastfed at 6-8 weeks after birth (NI 53), 2009/2010, Source: Department of Health
- 35 Estimated percentage of adults who binge drink (>=8 units of alcohol on one day in the last week for men; >=6 units for women) from Health Survey for England data, 2007/2008, Source: Health Profiles, Association of Public Health Observatories
- 36 Alcohol related harm admissions directly standardised rate per 100,000 population, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 37 Percentage of year 1-13 pupils who spend at least three hours per week on high quality PE and school sport, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
- 38 Participation in moderate intensity sport and active recreation on 20 or more days in the previous 4 weeks, 2007-2009, Source: Health Profiles, Association of Public Health Observatories
- 39 Under 18 conception rate per 1,000 girls aged 15-17, 2008, Source: Teenage Pregnancy Unit
- 40 Under 16 conception rate per 1,000 girls aged 13-15, 2005-2007, Source: Teenage Pregnancy Unit
- 41 Percentage of abortions in women aged under 25 who have previously had an abortion, 2009, Source: Department of Health
- 42 Estimated prevalence of hypertension (diagnosed and undiagnosed) (ages 16 and over), 2010, Source: Association of Public Health Observatories
- 43 Percentage of patients on GP registers diagnosed with established hypertension (ages 16 and over), 2008/2009, Source: Quality and Outcomes Framework
- 44 Percentage of children in Year R with height and weight recorded who are obese, 2008/2009, Source: Information Centre for Health and Social Care
- 45 Percentage of children in Year 6 with height and weight recorded who are obese, 2008/2009, Source: Information Centre for Health and Social Care
- 46 Estimated percentage of adults who are obese, 2006-2008, Source: Health Profiles, Association of Public Health Observatories
- 47 Percentage of adults on GP registers recorded as obese, 2008/2009, Source: Quality and Outcomes Framework
- 48 Age standardised mortality rate per 100,000 population (all causes, all ages, males), 2006-2008, Source: Compendium of Clinical and Health Indicators
- 49 Age standardised mortality rate per 100,000 population (all causes, all ages, females), 2006-2008, Source: Compendium of Clinical and Health Indicators
- 50 Life expectancy at birth (males), 2006-2008, Source: Compendium of Clinical and Health Indicators

51	Life expectancy at birth (females), 2006-2008, Source: Compendium of Clinical and Health Indicators
52	Self reported percentage of people who say their health is good or very good (NI 119), 2008, Source: Place Survey
53	Healthy life expectancy at age 65 (males), 2001, Source: Office for National Statistics
54	Healthy life expectancy at age 65 (females), 2001, Source: Office for National Statistics
55	Infant deaths under one year of age per 1,000 live births, 2006-2008, Source: Compendium of Clinical and Health Indicators
56	Infant deaths under 28 days of age per 1,000 live births, 2006-2008, Source: Compendium of Clinical and Health Indicators
57	Infant deaths under seven days of age per 1,000 live births, 2006-2008, Source: Compendium of Clinical and Health Indicators
58	Stillbirths and infant deaths under seven days of age per 1,000 live births, 2006-2008, Source: Compendium of Clinical and Health Indicators
59	Age standardised mortality rate per 100,000 population (causes considered amenable to health care, ages under 75), 2006-2008, Source: Compendium of Clinical and Health Indicators
60	Age standardised mortality rate per 100,000 population (causes considered amenable to health care excluding coronary heart disease, ages under 75), 2006-2008, Source: Compendium of Clinical and Health Indicators
61	Age standardised mortality rate per 100,000 population (causes other than those considered amenable to health care, ages under 75), 2006-2008, Source: Compendium of Clinical and Health Indicators
62	Estimated prevalence of diabetes (diagnosed and undiagnosed) (ages 16 and over), 2010, Source: York and Humber Public Health Observatory
63	Percentage of patients on GP registers aged 17 and over diagnosed with diabetes, 2008/2009, Source: Quality and Outcomes Framework
64	Percentage of patients with diabetes whose last HbA1c reading (taken in the last 15 months) was less than 7.5, 2008/2009, Source: Quality and Outcomes Framework
65	Age standardised rate of admissions for diabetic ketoacidosis and coma per 100,000 population, 2007/2008, Source: Compendium of Clinical and Health Indicators
66	Age standardised mortality rate per 100,000 population (diabetes, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
67	Estimated percentage of deaths aged 20-79 attributable to diabetes, 2005, Source: York and Humber Public Health Observatory
68	Age standardised mortality rate per 100,000 population (all circulatory diseases, ages under 75), 2006-2008, Source: Compendium of Clinical and Health Indicators
69	Estimated prevalence of patient reported doctor diagnosed coronary heart disease (aged 16 and over), 2010, Source: Eastern Region Public Health Observatory
70	Percentage of patients on GP registers aged 16 and over diagnosed with coronary heart disease, 2008/2009, Source: Quality and Outcomes Framework
71	Age standardised rate of hospital episodes for angiography per 100,000 population, 2008/2009, Source: Local Basket of Indicators, London Health Observatory
72	Age standardised rate of hospital episodes for revascularisation per 100,000 population aged over 65, 2008/2009, Source: Local Basket of Indicators, London Health Observatory
73	Age standardised mortality rate per 100,000 population (coronary heart disease, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
74	Estimated prevalence of patient reported doctor diagnosed stroke (aged 16 and over), 2010, Source: Eastern Region Public Health Observatory
75	Percentage of patients on GP registers diagnosed with stroke or TIA (ages 16 and over), 2008/2009, Source: Quality and Outcomes Framework
76	Emergency hospital admissions for stroke, indirectly age standardised rate per 100,000 population, 2007/2008, Source: Compendium of Clinical and Health Indicators
77	Emergency readmissions to hospital within 28 days of discharge for stroke, indirectly age standardised percent, 2007/2008, Source: Compendium of Clinical and Health Indicators
78	Age standardised mortality rate per 100,000 population (stroke, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
79	Age standardised registration rate per 100,000 population for all cancers (ICD10 C00-C99 excluding C44), 2004-2006, Source: Compendium of Clinical and Health Indicators
80	Age standardised mortality rate per 100,000 population (all cancers, ages under 75), 2006-2008, Source: Compendium of Clinical and Health Indicators
81	Age standardised registration rate per 100,000 population for oesophageal cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
82	Age standardised mortality rate per 100,000 population (oesophageal cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
83	Age standardised registration rate per 100,000 population for stomach cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
84	Age standardised mortality rate per 100,000 population (stomach cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
85	Age standardised registration rate per 100,000 population for colorectal cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
86	Age standardised mortality rate per 100,000 population (colorectal cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
87	Age standardised registration rate per 100,000 population for lung cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
88	Age standardised mortality rate per 100,000 population (lung cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
89	Age standardised registration rate per 100,000 population for all skin cancers, 2004-2006, Source: Compendium of Clinical and Health Indicators
90	Age standardised mortality rate per 100,000 population (malignant melanoma, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
91	Age standardised registration rate per 100,000 female population for breast cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
92	Age standardised mortality rate per 100,000 population (breast cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators

93	Age standardised registration rate per 100,000 female population for cervical cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
94	Age standardised mortality rate per 100,000 population (cervical cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
95	Age standardised registration rate per 100,000 male population for prostate cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
96	Age standardised mortality rate per 100,000 population (prostate cancer), 2006-2008, Source: Compendium of Clinical and Health Indicators
97	Age standardised registration rate per 100,000 population for bladder cancer, 2004-2006, Source: Compendium of Clinical and Health Indicators
98	Age standardised mortality rate per 100,000 population (bladder cancer, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
99	Age standardised mortality rate per 100,000 population (leukaemia, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
100	Age standardised mortality rate per 100,000 population (pneumonia, all ages), 2006-2008, Source: Office for National Statistics (VS3)
101	Estimated prevalence of COPD (diagnosed and undiagnosed) (aged 16 and over), 2010, Source: Eastern Region Public Health Observatory
102	Percentage of patients on GP registers diagnosed with COPD (ages 16 and over), 2008/2009, Source: Quality and Outcomes Framework
103	Age standardised mortality rate per 100,000 population (COPD, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
104	Percentage of patients on GP registers diagnosed with asthma (all ages), 2008/2009, Source: Quality and Outcomes Framework
105	Emergency hospital admissions: children with asthma (ICD10 codes: J45.- and J46.-), 2007/2008, Source: Compendium of Clinical and Health Indicators
106	Age standardised mortality rate per 100,000 population (asthma, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
107	Incidence of tuberculosis per 100,000 population, 2006-2008, Source: Health Profiles, Association of Public Health Observatories
108	Rate of chlamydia diagnoses for people aged 15-24 per 100,000 population, 2009, Source: Health Protection Agency
109	Rate of chlamydia diagnoses for people aged 25 and over per 100,000 population, 2009, Source: Health Protection Agency
110	Rate of gonorrhoea diagnoses per 100,000 population, 2009, Source: Health Protection Agency
111	Rate of syphilis diagnoses per 100,000 population, 2009, Source: Health Protection Agency
112	Rate of herpes diagnoses per 100,000 population, 2009, Source: Health Protection Agency
113	Rate of warts diagnoses per 100,000 population, 2009, Source: Health Protection Agency
114	Diagnoses HIV prevalence per 1000 (aged 15-59), 2008, Source: Sexual Health Balanced Scorecard, Association of Public Health Observatories
115	Average number of decayed, missing or filled teeth in five year olds, 2007/2008, Source: Health Profiles, Association of Public Health Observatories
116	Percentage of patients on GP registers diagnosed with dementia, 2008/2009, Source: Quality and Outcomes Framework
117	Estimated percentage of people aged 16-74 with any neurotic disorder, 2006, Source: Mental Health Observatory
118	Estimated percentage of people aged 16-74 with a phobia, 2006, Source: Mental Health Observatory
119	Estimated percentage of people aged 16-74 with depression, 2006, Source: Mental Health Observatory
120	Estimated percentage of people aged 16-74 with generalised anxiety disorder, 2006, Source: Mental Health Observatory
121	Estimated percentage of people aged 16-74 with mixed anxiety disorder, 2006, Source: Mental Health Observatory
122	Estimated percentage of people aged 16-74 with any obsessive compulsive disorder, 2006, Source: Mental Health Observatory
123	Estimated percentage of people aged 16-74 with any panic disorder, 2006, Source: Mental Health Observatory
124	GP recorded prevalence of schizophrenia, bipolar disorder and other psychoses, 2008/2009, Source: Quality and Outcomes Framework
125	Claimants of incapacity benefit/severe disablement allowance with mental or behavioural disorders. Crude rate per 1000 working age population, 2008, Source: Health Profiles, Association of Public Health Observatories
126	Age standardised mortality rate per 100,000 population (suicide and injury of undetermined intent, all ages), 2006-2008, Source: Compendium of Clinical and Health Indicators
127	Emergency hospital admissions of older people for fractured neck of femur, 2008/2009, Source: Health Profiles, Association of Public Health Observatories
128	People killed or seriously injured on roads, crude rate per 100,000 population, all ages, 2006-2008, Source: Health Profiles, Association of Public Health Observatories
129	Children killed or seriously injured on roads, crude rate per 100,000 population, ages 0-15, 2006-2008, Source: Local Basket of Indicators, London Health Observatory
130	Emergency admission for children (ages under 18) as a result of unintentional and deliberate injury per 10,000 population (NI 070), 2008/2009, Source: Floor Targets Interactive
131	Age standardised admission rate per 100,000 population for hip replacement (OPCS4 codes W37-W39, W46-W48), 2007/2008, Source: Compendium of Clinical and Health Indicators
132	Age standardised admission rate per 100,000 population for knee replacement (OPCS4 codes W40-W42), 2007/2008, Source: Compendium of Clinical and Health Indicators
133	Percentage of new clients whose assessments were completed within four weeks of first contact (NI 132), 2009/2010, Source: Information Centre for Health and Social Care
134	Percentage of new clients aged 65 and over for whom all services were put in place within four weeks of completion of assessment (NI 133), 2009/2010, Source: Information Centre for Health and Social Care
135	People supported to live independently through social services per 100,000 population (NI 136), 2009/2010, Source: Information Centre for Health and Social Care
136	Percentage of carers receiving needs assessment or review and a specific carer's service, or advice and information (NI 135), 2009/2010, Source: Information Centre for Health and Social Care
137	Clients and carers receiving social care through self directed support as a percentage of the total number of clients and carers receiving services (NI 130), 2009/2010, Source: Information Centre for Health and Social Care
138	Percentage of adults accessing NHS dentistry in the last two years, March 2010, Source: Information Centre for Health and Social Care
139	Percentage of children accessing NHS dentistry in the last two years, March 2010, Source: Information Centre for Health and Social Care
140	Percentage of people aged 65 and over immunised against influenza, 2008/2009, Source: Information Centre for Health and Social Care

- 141 Immunisation rate for children age one who have received all three doses of DTaP/IPV/Hib, 2008/2009, Source: Information Centre for Health and Social Care
- 142 Immunisation rate for children age two who have received Pneumococcal booster (PVC), 2008/2009, Source: Information Centre for Health and Social Care
- 143 Immunisation rate for children age two who have received Hib/MenC booster, 2008/2009, Source: Information Centre for Health and Social Care
- 144 Immunisation rate for children age two who have received two doses of MMR vaccine, 2008/2009, Source: Information Centre for Health and Social Care
- 145 Immunisation rate for children aged five who have received all four doses of DTaP/IPV vaccine, 2008/2009, Source: Information Centre for Health and Social Care
- 146 Immunisation rate for children age five who have received two doses of MMR vaccine, 2008/2009, Source: Information Centre for Health and Social Care
- 147 Immunisation rate for girls aged around 12-13 years who have received all three doses of HPV vaccine, 2008/2009, Source: Information Centre for Health and Social Care
- 148 Percentage of women aged 53-70 screened in the last three years, March 2009, Source: Information Centre for Health and Social Care
- 149 Percentage of women aged 25-64 screened in the last five years, 2008/2009, Source: Information Centre for Health and Social Care
- 150 Rate per 1000 registered female population aged 15-44, 2008/2009, Source: Association of Public Health Observatories
- 151 Percentage of NHS funded abortions under 10 weeks gestation, 2009, Source: Department of Health
- 152 Percentage of people with a long-term condition who "had enough support from local services or organisations to help manage their long-term health condition(s)" (NI 124), 2009/2010, Source: GP Patient Survey
- 153 Percentage of people who think that older people in their local area get the help and support they need to continue to live at home for as long as they want to (NI 139), 2008, Source: Place Survey
- 154 Overall score for parental experience of services for disabled children (NI 54), 2009/2010, Source: Survey of parents' experiences of services provided to disabled children, Department for Children, Schools and Families
- 155 Percentage of people rating it easy to get through to the surgery on the phone ( in the past six months), 2009/2010, Source: GP Patient Survey
- 156 Percentage of people able to get an appointment with a GP fairly quickly ( in the past six months), 2009/2010, Source: GP Patient Survey
- 157 Percentage of people able to book ahead for an appointment with a GP (in the past six months), 2009/2010, Source: GP Patient Survey
- 158 Percentage of people able to see preferred doctor always or a lot of the time, 2009/2010, Source: GP Patient Survey
- 159 Percentage of people satisfied with GP practice opening hours, 2009/2010, Source: GP Patient Survey

