

Poole Central Locality profile narrative 2020 template

Public Health Dorset
January 2020

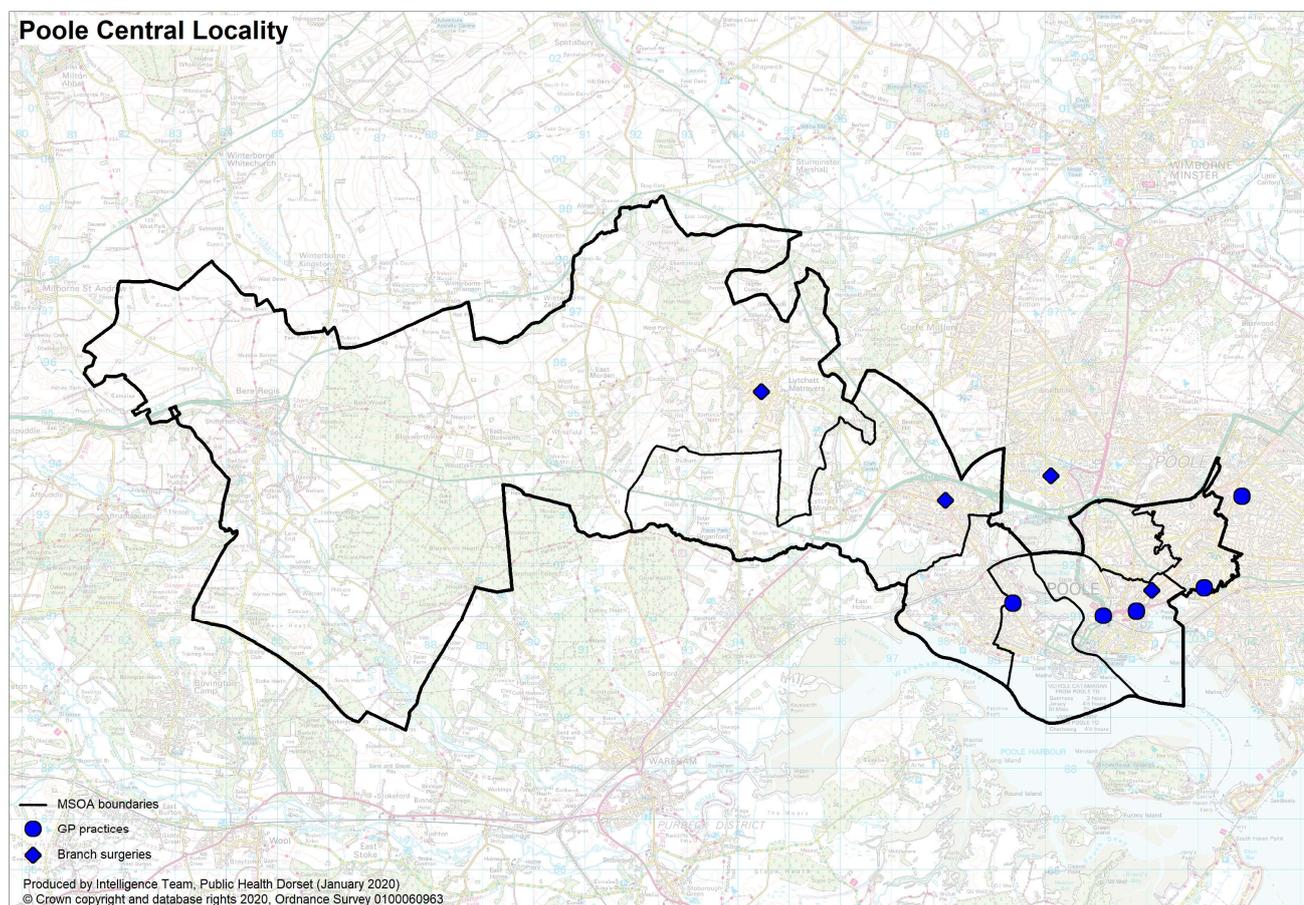


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1. Introduction

Background

- 1.1 During the summer of 2019 a review of Locality Profile narratives was carried out with key stakeholders across the health and care system in Dorset and Bournemouth, Christchurch and Poole (BCP). A summary of findings from the engagement can be found [here](#).
- 1.2 Informed by stakeholder feedback, this edition of the Locality profile narratives
 - Provides commentary on a wider range of indicators (from [Local Health](#)), presenting these by life course to increase the emphasis on wider determinants of health and wellbeing
 - Uses global burden of disease (GBD)¹ as a means of exploring in more detail specific areas of Local Health and general practice based data.
- 1.3 As with the previous versions of the narratives, these updates are based on data from two key sources: [Local Health](#) and General practice based data from <https://fingertips.phe.org.uk/profile/general-practice>.
- 1.4 In keeping with previous versions of the Locality narratives, localities across Dorset are defined as groupings of middle super output areas (MSOAs). These areas (MSOAs) are a census reporting unit of approximately 5,000 people².
- 1.5 *The aim of the Locality Profiles is to support those working in localities to identify what is working well and to highlight issues to be addressed in the Locality.*
- 1.6 Alongside the narratives for the Localities a wider range of data is being made available through Tableau public dashboards to aid you in identifying issues and opportunities in your Locality. The [Locality profiles](#) web pages contain:
 - Locality narratives (this document)
 - Dashboards with a wide range of supporting data
 - An overview of the data sources and metadata.
- 1.7 The local health system is actively developing information tools for the Integrated Care System. The emergent suite of Population Health Management (PHM) tools will, in time, provide up-to-date data for Dorset. We anticipate future versions of the narratives will align more closely with the Dorset PHM tools as these become established.

Structure of narrative

- 1.8 The narrative contains the following sections:
 - Locality basics – geography and demography
 - Wider determinants of wellbeing
 - Starting well – child and adolescent year indicators
 - Living well – the adult and working years indicators
 - Ageing well - the later working and retirement years indicators
 - Healthy places – presenting a range of indicators that impact across the life course
 - A focus on the major causes of population disability adjusted life years – the Global Burden of Disease (GBD):
 - Cancer and non-cancerous tumours;
 - Cardiovascular diseases;

¹ Disease burden is the impact of a health problem on a given population. Measuring this allows the burden of disease to be compared between different areas and helps with predicting future health care needs. Probably the most well-known assessment of disease burden is the Global Burden of Disease (GBD) Study carried out by the World Health Organisation.

² Middle super output areas (MSOAs) are a census reporting unit of approximately 5,000 people. The 13 Localities across Dorset are each defined as aggregations of MSOAs. More detail on MSOAs and census output areas can be found here <https://www.ons.gov.uk/methodology/geography/ukgeographies/censusgeography#super-output-area-soa>

Last accessed 8/10/2019.

- Musculoskeletal disorders;
- Neurological disorders;
- Mental Health; and
- Chronic Respiratory diseases.

2. Locality basics – geography and demography

- 2.1 The population of Poole Central is approximately 57,000 (ONS 2017 Mid-Year Estimates), this being middle order (6th largest) of the 13 Dorset Localities.
- 2.2 The Poole Central Locality is made up of seven areas (MSOAs). The Locality is coterminous with the area covered by the Poole Central Primary Care Network (PCN), this is shown in the map on the rear page of this document.
- 2.3 Poole Central population profile is marginally younger than Dorset overall, which is older than that for England.
- 2.4 The age-sex structure of Poole Central is characterised by:
- More (higher proportion of total) males and females amongst children (up to age of 14) particularly amongst males aged 5-9 years;
 - Slightly more males and females (greater proportion of total) amongst younger adults and the middle aged (from 25 through to 59 years); and
 - Fewer (smaller proportion of total) of males and females in the older population (60 and over)³.
- 2.5 The areas that make up the Locality range in population from 5,862 in Bere Regis And Lychett Matravers (the smallest) to 11,376 in Poole Town⁴.

3

<https://public.tableau.com/profile/public.health.dorset#!/vizhome/JSNALocalityPopulationPyramid/MYEPopulationestimatesforLocalities> last accessed 23/01/2020

⁴ <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 23/01/2020

3. Wider determinants of wellbeing

Key findings



Whilst **child poverty** in Poole Central is lower than England, it has the **highest level of the 13 Dorset Localities**. The highest levels are in: Hamworthy West; and Poole Town



Children development at 5 years is better than the England the Locality has the **lowest percentage of the 13 Dorset Localities** and the levels in Hamworthy West and East are significantly lower than England

Poole Central Emergency hospital **admissions for hip fracture** in persons 65 years is higher than England and the Locality ranks 4th highest of the 13 Dorset Localities. Within the Locality, Hamworthy East is significantly high

Poole Central has fewer **older people in deprivation** than England but it ranks 4th highest of 13 Dorset Localities. Poole Town is however higher than England and amongst the top (worse) 20% of areas across Dorset.



Starting well – child and adolescent year indicators

3.1 At the Locality level, Poole Central is similar to England averages for:

- Low birthweight babies
- GCSE Achievement
- Deliveries to teenage mothers.

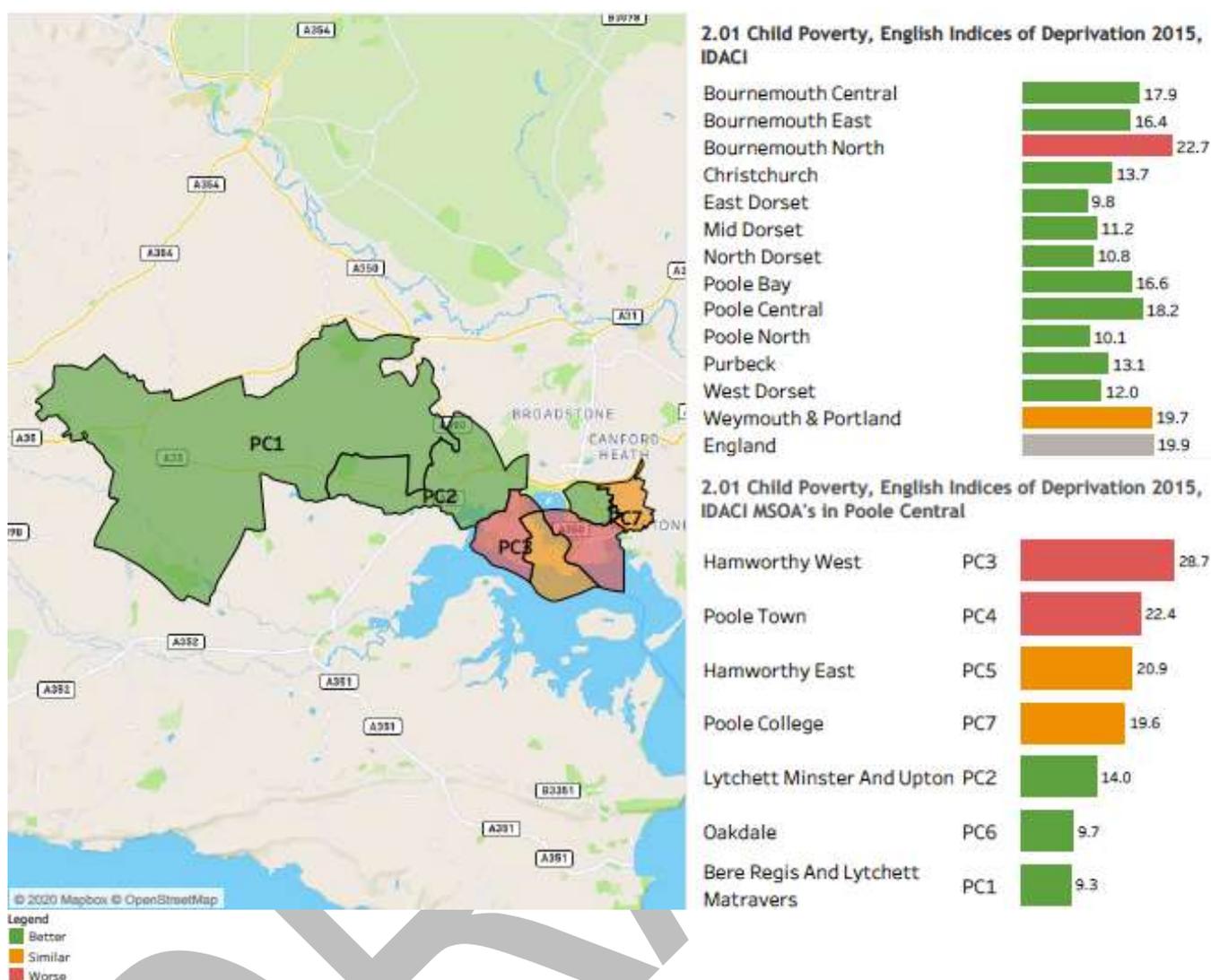
3.2 The above Locality level averages 'mask' some areas of concern:

- Whilst *GCSE achievement* is similar at Locality level to that for England, the Locality has the *lowest percentage of the 13 localities across Dorset* and achievement is significantly *lower than the England average in Poole College and Hamworthy West (both in the lowest 20% of all Dorset areas)*.
- Whilst the *percentage of births to teenage mothers* at Locality level is similar to the England average. Locality has the *highest percentage of the 13 localities across Dorset* and is significantly *higher than the England average in Oakdale and Poole Town (the former being in the top (highest) 10% of all Dorset areas)*.

3.3 Whilst child poverty in Poole Central is lower than the England average, the Locality has the highest level of the 13 Dorset Localities. Also, as we see in Figure 1 over-page, there is considerable variation across the seven areas within the Locality, with two areas being significantly worse than the England average:

- Hamworthy West (amongst the top (worse) 10% of areas across Dorset); and
- Poole Town (amongst the top (worse) 20% of areas across Dorset).

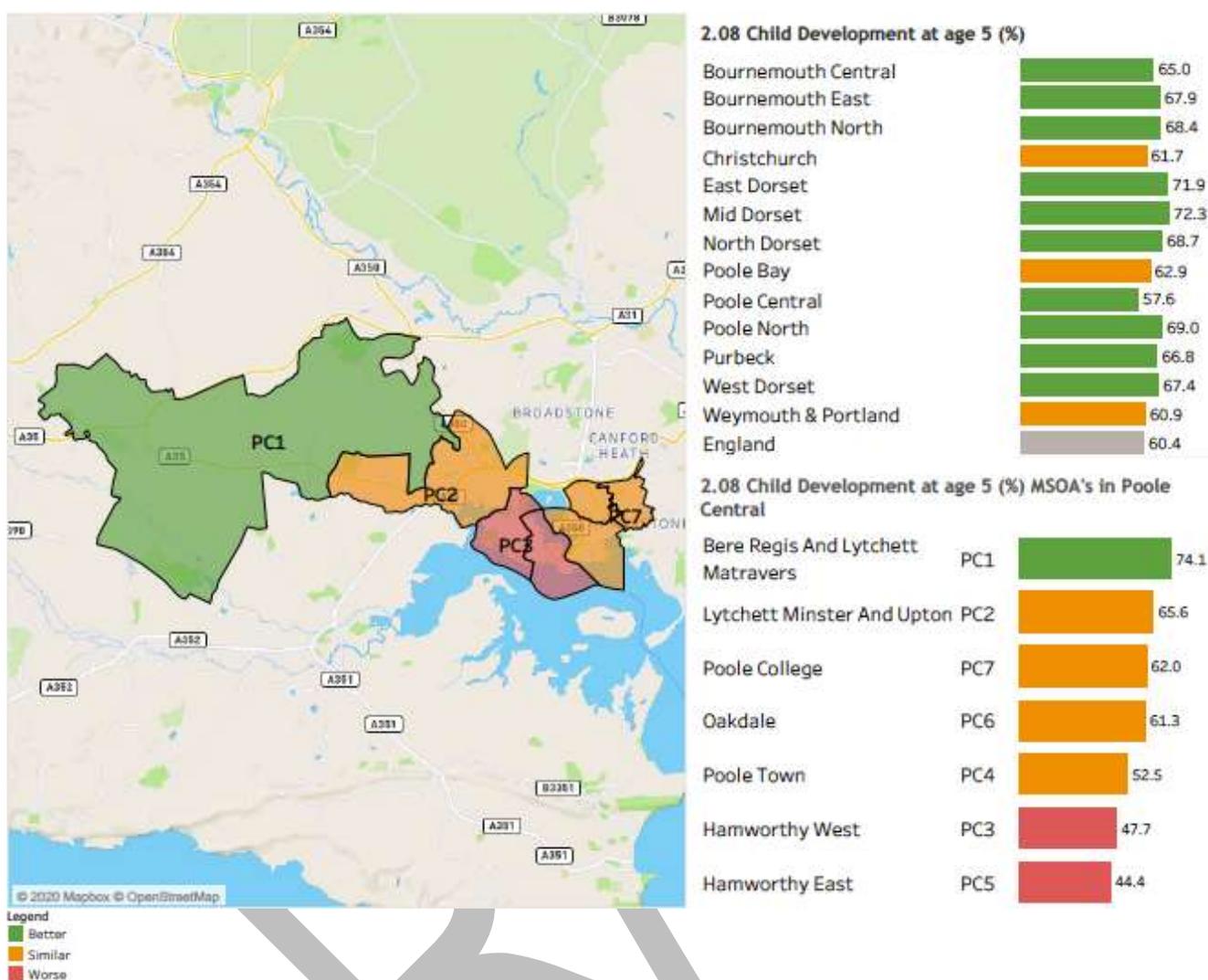
Figure 1: Child Poverty in Weymouth and Portland, 2015 English Indices of Deprivation IDACI (percentage of children aged 0–15 years living in income deprived households)



Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 29/01/2020

- 3.4 Whilst the percentage of ‘*children reaching a good level of development at 5 years*’ is significantly better than the England average for Poole Central overall, the *Locality has the lowest percentage* of the 13 Dorset Localities and the levels in *Hamworthy West and East are significantly lower* than the England average (both amongst the lowest (worse) 10% of areas across Dorset). See Figure 2 over-page.
- 3.5 At the Locality level Poole Central is significantly better (lower) than the England average for A&E attendances in under 5s (Crude rate per 1000), this being reflecting in all 7 areas within the Locality.

Figure 2: Child Development at age 5 (%) in Poole Central



Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 29/01/2020

3.6 At the Locality level, Poole Central is significantly worse than the England average for a number of hospital admissions indicators:

- Emergency admissions in under 5s (Crude rate per 1000) (the Locality having the highest rate of the 13 Dorset Localities, and 5 of the 7 areas in the Locality being amongst the highest (worse) 20% of areas across Dorset);
- Admissions for injuries in under 5s (Crude rate/100,000 aged 0-5), the Locality having the 3rd highest rate of the 13 Dorset Localities, and 3 of the 7 areas in the Locality being amongst the highest (worse) 20% of areas across Dorset)
- Admissions for injuries in under 15s (Crude rate/100,000 aged 0-14), the Locality having the 2nd highest rate of the 13 Dorset Localities, and 4 of the 7 areas in the Locality being amongst the highest (worse) 20% of areas across Dorset)
- Admissions for injuries in 15 - 24 year olds (Crude rate per 10,000), the Locality having the highest rate of the 13 Dorset Localities, and 4 of the 7 areas in the Locality being amongst the highest (worse) 20% of areas across Dorset).

3.7 Childhood Immunisation Rates for MMR Dose 2 (percentage of children immunised by 5 years old) in Poole Central are at or above the target level of 95% in two of the seven practices, ranging in 2018/19 from a low of 86% in Dr Newmans Practice to 98% in Carlisle

House Surgery. All seven practices recorded considerable increases in 2018/19 from the previous year⁵.

Living well – the adult and working years indicators

- 3.8 Whilst the *percentage of the working age claiming out of work benefits* is significantly better for Poole Central, the Locality ranks as 5th highest of the 13 Dorset Localities. Within the Locality *Hamworthy West* is amongst the highest 10% of areas across Dorset.
- 3.9 Modelled estimates of obese adults, healthy eating and binge drinking in adults all suggest that the areas within the Locality are all similar to England as a whole. This is of particular concern as we are faced with a national obesity epidemic and unhealthy eating and inactivity are at health damaging levels both locally and nationally.
- 3.10 Data collated by Dorset Public Health Intelligence team can provide insights into the use of Substance misuse services by residents in the Locality. Analysis of this shows the number of residents from Poole Central in treatment for alcohol dependency to have increased over the last five years, in line with figures for Dorset as a whole. The rate for Poole Central is -- AWAITING DATA-- highest across the 13 Dorset Localities (latest data, 2017/18).
- 3.11 --- THIS SECTION IS A WORK IN PROGRESS AND WILL BE UPDATED ---

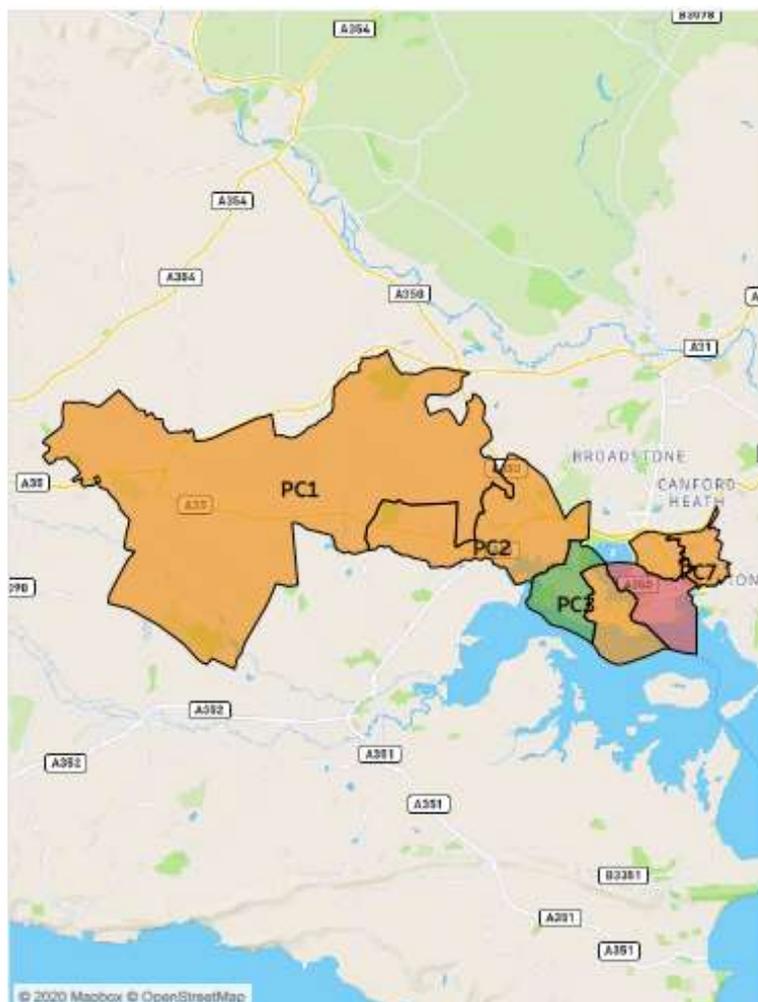
Ageing well - the later working and retirement years indicators

- 3.12 At the Locality level, Poole Central has a significantly better (lower) score for *older people in deprivation* (indicator 4.1) than England. This is reflected in significantly lower or similar levels in six of the seven areas that make up the Locality; *Poole Town is however significantly worse than the England average* and amongst the top (worse) 20% of areas across Dorset. The Locality as a whole ranks 4th highest (worse) amongst the 13 Dorset areas.
- 3.13 At the Locality level, Poole Central is similar to the England average for the *percentage of people aged 65 and over living alone*, ranking 4th highest of the 13 Dorset Localities. However, as shown in Figure 3 over-page, there is some variation across the Locality from a low of 27% in Hamworthy West (significantly better than England) to 40% in Poole Town (significantly worse than England and amongst the highest 10% of areas across Dorset).
- 3.14 The percentage of people aged 65 and over living alone has been used as a crude indicator of areas where vulnerable older people may be living. Increasingly though as the population ages, many people will be living 'frailty free' until much older age.

Figure 3: Percentage of people aged 65 and over living alone, 2011 Census

⁵

<https://public.tableau.com/profile/public.health.dorset#!/vizhome/ChildImmunisationatPracticeLevel201819/TrendanalysisbyLocality> last accessed 29/01/2020



4.2 Older people living alone, % of people aged 65 and over who are living alone

Bournemouth Central	37.8
Bournemouth East	32.8
Bournemouth North	29.1
Christchurch	30.8
East Dorset	25.8
Mid Dorset	28.5
North Dorset	29.7
Poole Bay	34.7
Poole Central	32.2
Poole North	26.9
Purbeck	29.6
West Dorset	29.6
Weymouth & Portland	30.2
England	31.5

4.2 Older people living alone, % of people aged 65 and over who are living alone MSOA's in Poole Central

Poole Town	PC4	40.3
Hamworthy East	PC5	32.2
Poole College	PC7	30.6
Oakdale	PC6	30.5
Bere Regis And Lytchett Matravers	PC1	30.2
Lytchett Minster And Upton	PC2	29.9
Hamworthy West	PC3	27.3

Legend
■ Better
■ Similar
■ Worse

Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 29/01/2020

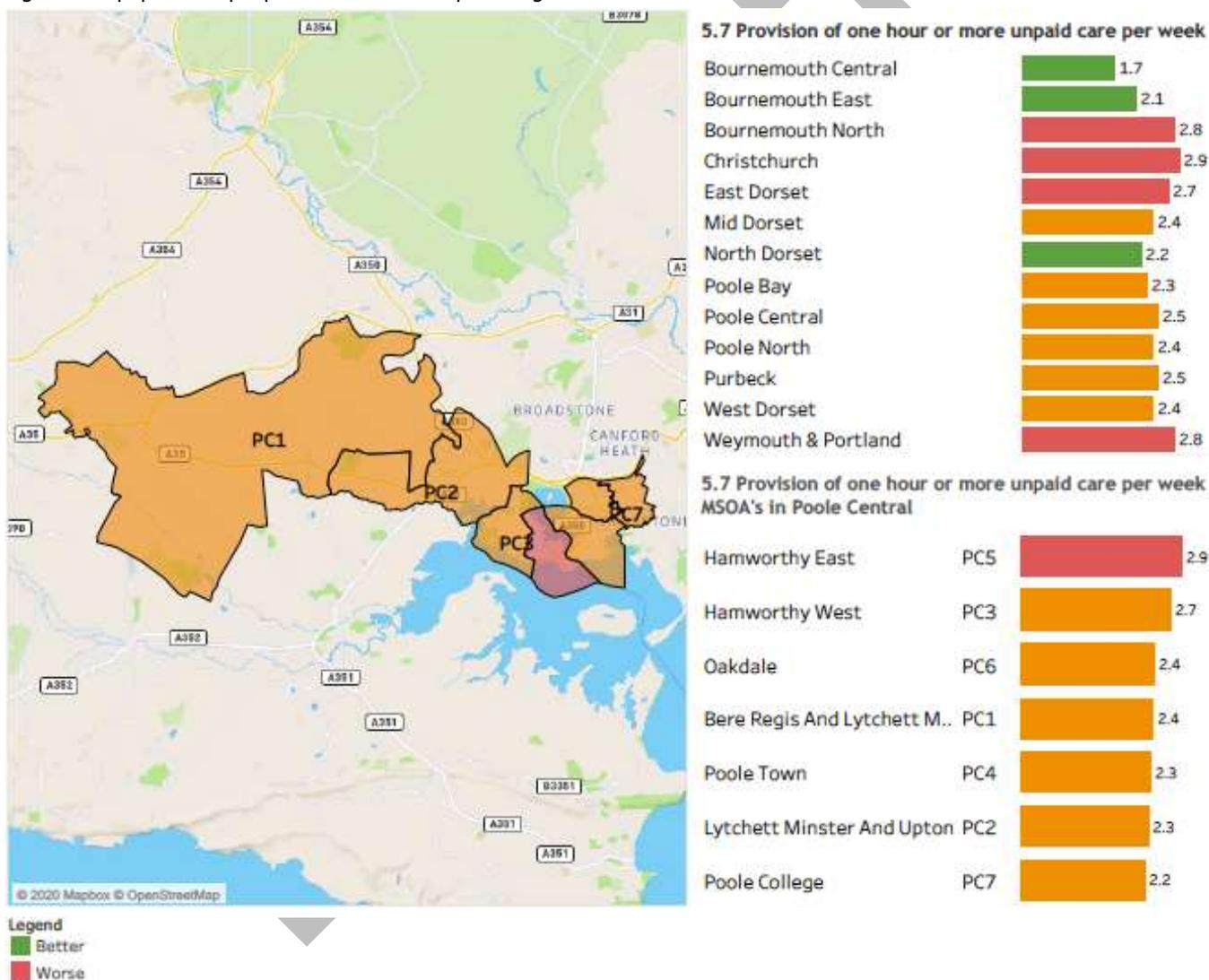
3.15 At the locality level, *Emergency hospital admissions for hip fracture in persons 65 years and over* (indicator 4.3) in *Poole Central* is significantly higher than the England average with the Locality ranking 4th highest of the 13 Dorset Localities. Within the Locality, *Hamworthy East* is significantly higher than the England average and amongst the highest 10% of areas across Dorset.

3.16 Emergency admissions for hip fracture are linked with falls and osteoporosis. Maintaining good levels of physical activity is important at all stages in life; exercising regularly reduces the rate of bone loss and conserves bone tissue, lowering the risk of fractures. Physical activity also helps reduce the risk of falling.

Healthy places

- 3.17 The income deprivation (indicator 5.2) in Poole Central is better (lower) than the England average, the Locality has the 5th highest percentage of people living in income-deprived households of the 13 Dorset Localities. Within the Locality, Hamworthy West and Poole Town both have significantly higher levels than England and are amongst the highest 20% of areas across Dorset.
- 3.18 Whilst the *proportion of people in Poole Central providing at least an hour of unpaid care per week* is similar to the England average, the level is *significantly higher than the England average in Hamworthy East* (see Figure 4 below).
- 3.19 People providing unpaid care to family and /or friends may find that their opportunities for paid work are limited. Lack of support to carers coupled with isolation of the carer may also have negative impacts on the carers' health and wellbeing.

Figure 4: Prpoption of people in Poole Central providing at least an hour a week of unaid care



Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 23/01/2020

Themes to consider for locality initiatives:

1. Poole Central has the lowest percentage of the 13 localities across Dorset for GCSE achievement and is significantly lower than England in Poole College and Hamworthy West (both in the lowest 20% of all Dorset areas).
2. Poole Central has the highest percentage of births to teenage mothers of the 13 localities across Dorset and is significantly higher than the England average in Oakdale and Poole Town (the former being in the top (highest) 10% of all Dorset areas).
3. Whilst child poverty in Poole Central is lower than the England average, the Locality has the highest level of the 13 Dorset Localities. The highest levels are in:
 - Hamworthy West (amongst the top (worse) 10% of areas across Dorset); and
 - Poole Town (amongst the top (worse) 20% of areas across Dorset).
4. Whilst the percentage of 'children reaching a good level of development at 5 years' is significantly better than the England average for Poole Central overall, the Locality has the lowest percentage of the 13 Dorset Localities and the levels in Hamworthy West and East are significantly lower than England.
5. Poole Central has a better (lower) score for older people in deprivation than England. Poole Town is however significantly worse than the England average and amongst the top (worse) 20% of areas across Dorset. The Locality as a whole ranks 4th highest amongst the 13 Dorset areas.
6. Poole Central Emergency hospital admissions for hip fracture in persons 65 years is higher than the England average with the Locality ranking 4th highest of the 13 Dorset Localities. Within the Locality, Hamworthy East is significantly high.

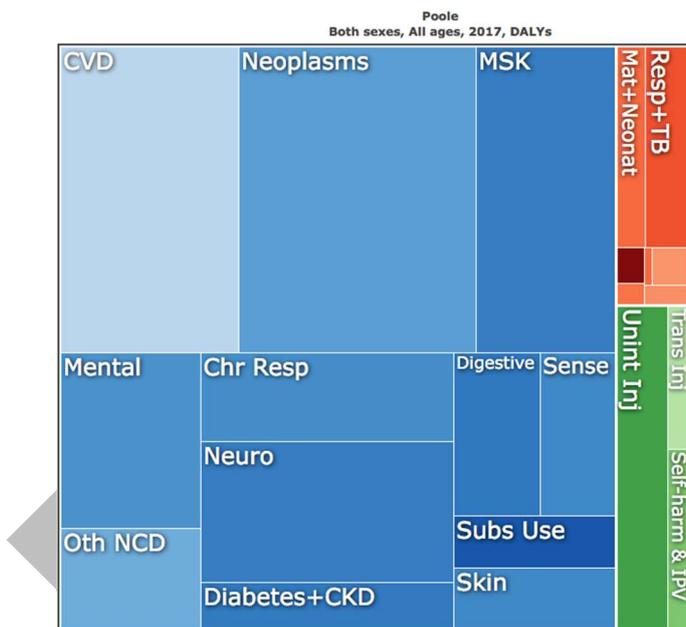
Getting started - some resources for planning actions:

- > [Local action on health inequalities: research evidence supporting action to reduce health inequalities](#)
- >> [Combating loneliness A guide for local authorities](#)
- >>> The Dorset Locality Profiles website provides [interactive dashboard](#) with more detailed data
- >>>> Your Dorset Public Health Link worker will support local actions, please contact xxxxx

4. Global burden of disease

Introduction

- 4.1 Disease burden is the impact of a health problem on a given population. Measuring this allows the burden of disease to be compared between different areas and helps with predicting future health care needs.
- 4.2 Probably the most well-known assessment of disease burden is the Global Burden of Disease (GBD) Study carried out by the World Health Organisation. GBD researchers first devised the concept of Disability-Adjusted Life-Years (DALYs). DALYs combine years of life lost from premature death and years of life lived in less than full health⁶. These disabilities can be physical or mental. One DALY can be thought of as one lost year of 'healthy' life.

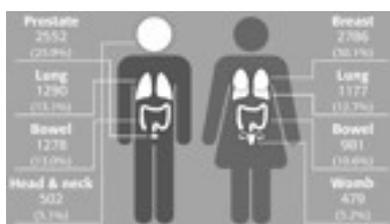


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https://www.who.int/healthinfo/global_burden_disease/about/en/ last accessed 3rd December 2019

- 4.3 The 'GBD compare' tool enables international down to England Local Authority level comparison of disease burden. The top causes of total disability adjusted life years (lost) (DALYs) in Poole Council area (2017) are as follows:
- Cancers & benign tumours (20%);
 - Cardiovascular diseases (CVD) (15%);
 - Musculoskeletal disorders (MSK) (12%);
 - Neurological disorders (10%);
 - Mental Health (7%); and
 - Chronic respiratory disease (6%)⁷.
- 4.4 In this section we consider the above GBD causes using a combination of the Local Health indicators and GP practice profile data. The GP practice profiles data from PHE fingertips relates to periods during which there were 7 practices in the Poole Central Locality.

Key findings



There are higher than expected **new cancer cases** for Poole Central, the Locality having the highest ratio of 13 Dorset Localities.

Within the locality, the highest levels are in:

- Hamworthy West; and
- Poole Town



CHD Emergency admissions are higher than England. Admissions are **highest** in Hamworthy West and Poole Town, Hamworthy East, Lytchett Minster and Upton, and Oakdale

Emergency admissions for **COPD** are 4th highest of the 13 Dorset Localities. The highest levels are in:

- Poole Town and
- Poole College



Emergency admissions for Stroke are significantly higher the England average, and **highest** of the 13 Dorset Localities. The highest levels are in Hamworthy West, Hamworthy East, and Lytchett Minster and Upton



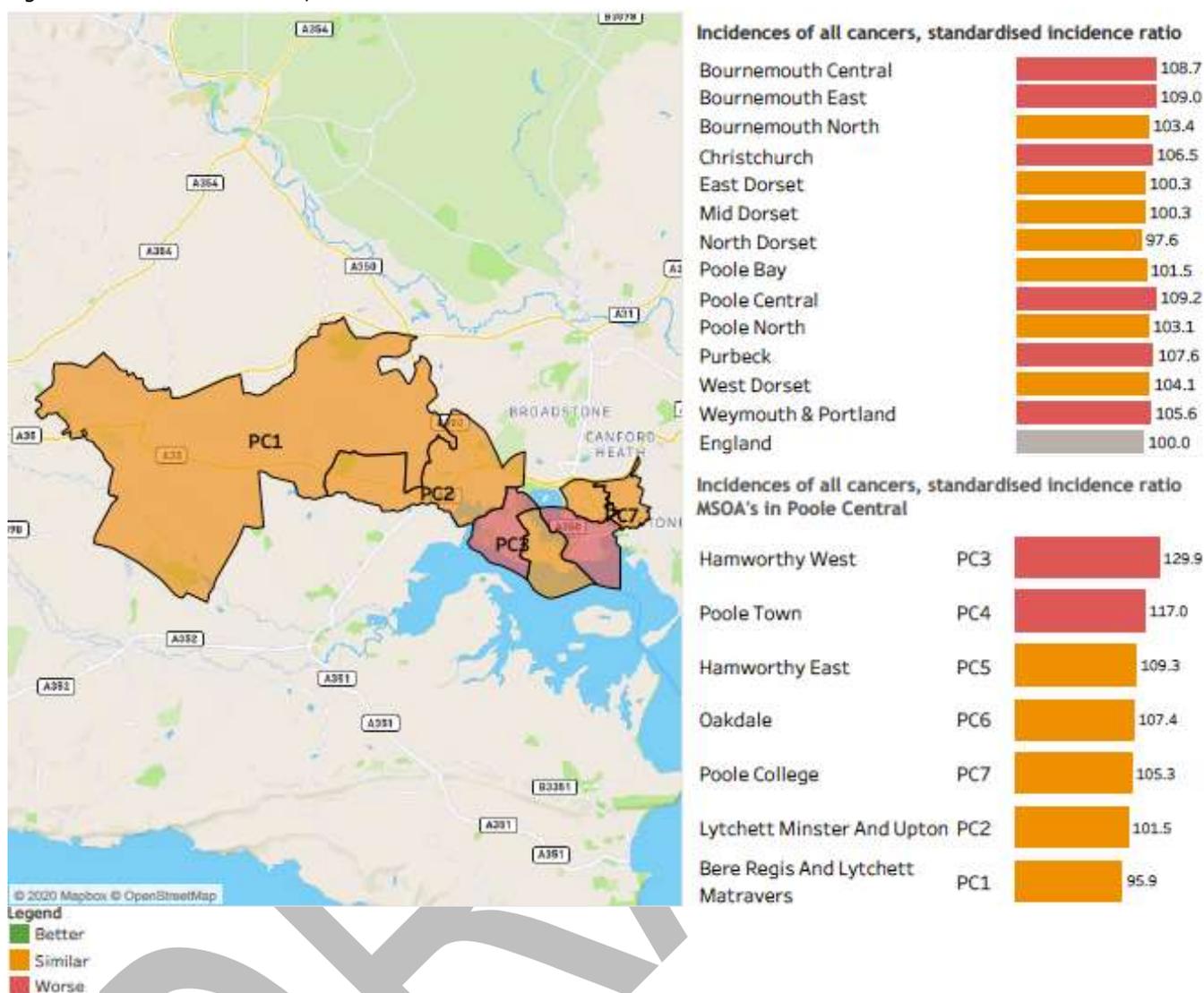
Cancers and benign tumours

- 4.5 When cells divide and grow excessively; they can be benign (not cancerous) or malignant (cancerous).
- 4.6 Figure 5 (over-page) shows *significantly higher than expected new cancer cases* for the Poole Central Locality with the Locality having the highest ratio across the 13 Dorset Localities. Within the locality, significantly higher than expected⁸ levels of new cancers in:

⁷ Source: <https://vizhub.healthdata.org/gbd-compare/> last accessed 5th December 2019, figures for each cause are the percentage of total disability adjusted life years (lost) (DALYs) in Dorset County Council area (2017)

⁸ Comparing actuals to the number that would be expected if the area had the same age-sex specific rates as England overall

- *Hamworthy West; and*
- *Poole Town.*

Figure 5: New cases of cancers, standardised incidence ratio 2012-16⁹

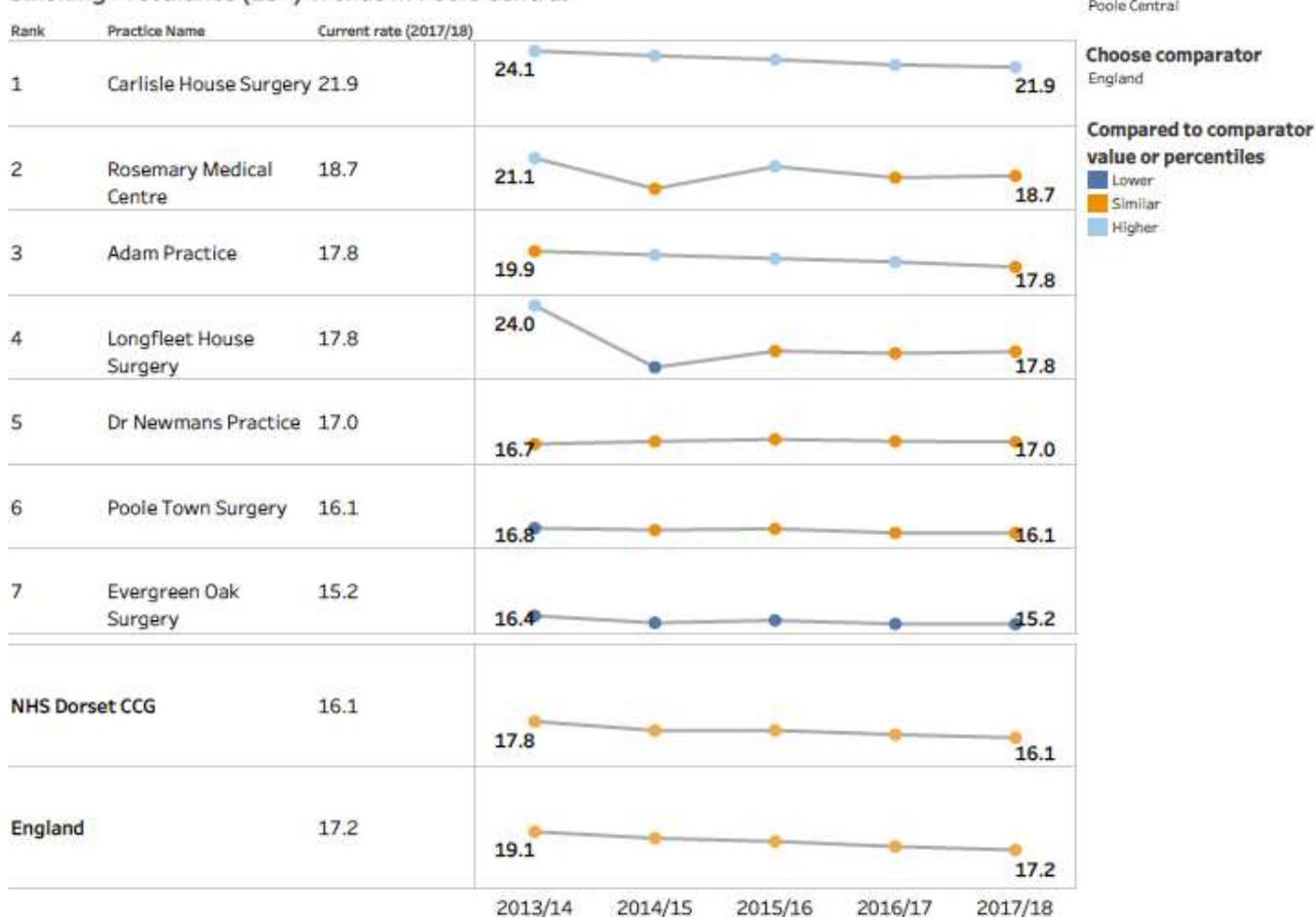
Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 23/01/2020

- 4.7 The category of cancers comprises a wide range of cancers with the largest three being:
- Lung cancer (3.5% of Poole total all cause DALYs)
 - Colon and rectum cancer (2%)
 - Breast cancer (2%).
- 4.8 Smoking is a key risk factor in many cancers. It causes at least 15 different types of cancer and around 7 in 10 lung cancer cases in the UK¹⁰.
- 4.9 *Smoking prevalence* in the seven practices in Poole Central (see figure 6 over-page) varies:
- From a low of 15% in Evergreen Oak Surgery (significantly lower than the England average);
 - To a high of 22% in Carlisle House Surgery (significantly higher than the England average).

⁹ For more detail see <https://fingertips.phe.org.uk/profile/local-health/data#page/6/qid/1938133184/pat/101/par/E07000223/ati/8/are/E05007562/iid/93234/age/1/sex/4>

¹⁰ <https://www.cancerresearchuk.org/about-cancer/causes-of-cancer/smoking-and-cancer/how-does-smoking-cause-cancer> last accessed 5th December 2019

Figure 6: Percentage of general practice registered patients 15 years and over recorded as current smokers

Smoking Prevalance (15+) Trends in Poole Central

Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/GPPracticeSmokingprevalence201718/SmokingPrevalance15> last accessed 29/01/2020

- 4.10 The number of years spent smoking affects cancer risk; smoking one pack a day for 40 years is even more dangerous than smoking two packs a day for 20 years.
- 4.11 It's never too late to stop. Smokers should be encouraged to speak to their GP or pharmacist, or visit NHS Smokefree for free support to help stop. The more cigarettes smoked a day, the higher the risk of cancer, so reducing the number of cigarettes you smoke a day can be a good first step.
- 4.12 Stop smoking advice is provided locally by LiveWell Dorset (<https://www.livewelldorset.co.uk/stop-smoking/>).

Cardiovascular diseases

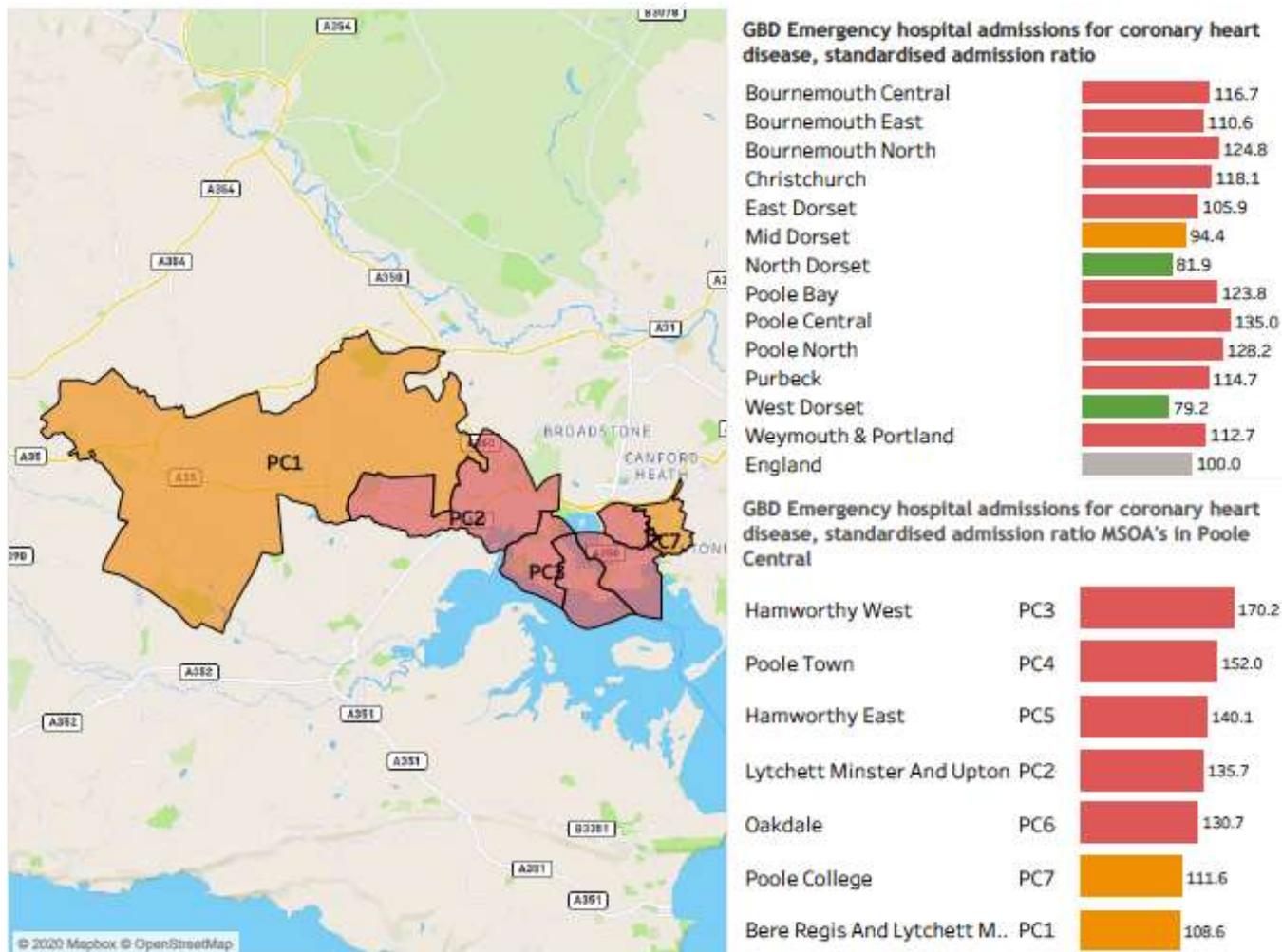
- 4.13 Two thirds of the DALYs relating to cardiovascular diseases in Dorset are attributable to coronary heart disease (6.5% of the Poole total all cause DALYs) and stroke (4%).

Coronary heart disease

- 4.14 Nationally, 1 in 6 men and 1 in 10 women die from coronary heart disease.
- 4.15 Emergency admissions for Coronary Heart Disease (CHD) can give an indication as to how well the condition is being managed.
- 4.16 *At the Poole Central Locality level, Emergency admissions for CHD are significantly higher than expected compared with the England average, the Locality having the highest ratio of the 13 Dorset Localities.*
- 4.17 As we see from the following figure, admissions are significantly higher than the England level in Hamworthy West and Poole Town (both of which having ratios which are in the

highest 10% of areas across Dorset), Hamworthy East, Lytchett Minster and Upton, and Oakdale.

Figure: Emergency admissions for CHD, 2013/14 – 2017/18¹¹



Legend
■ Similar
■ Worse

Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 29/01/2020

¹¹ This standardised admission ratio allows the level of such admissions at a local level to be compared to those expected given the age structure of local populations. For more detail see: <https://fingertips.phe.org.uk/profile/local-health/data#page/6/gid/1938133184/pat/101/par/E07000223/ati/8/are/E05007562/iid/93229/age/1/sex/4>

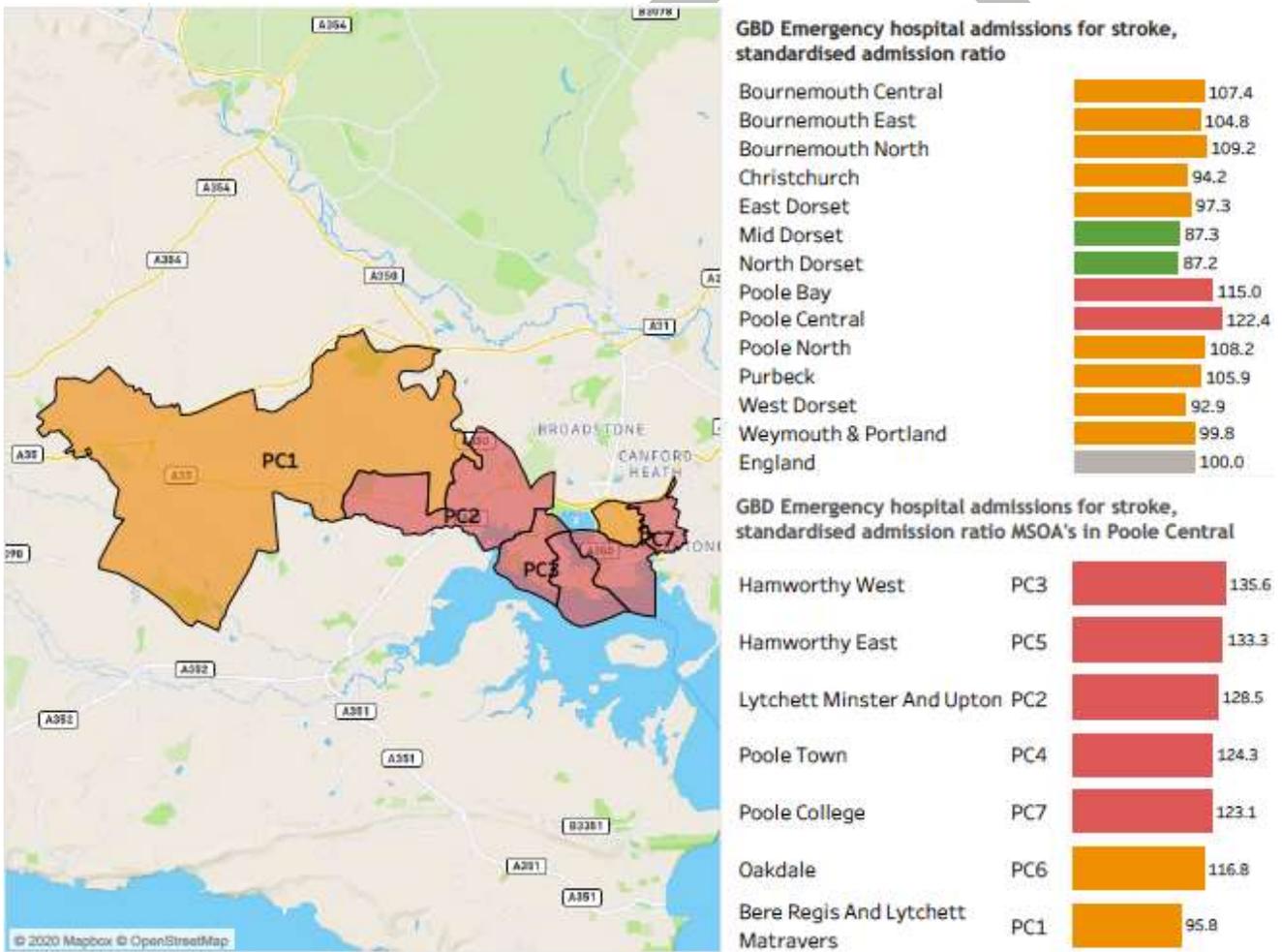
Stroke



- 4.19 At the Poole Central Locality level, Emergency admissions for Stroke are significantly higher than the England average, and the highest of the 13 Dorset localities.
- 4.20 Emergency admissions for stroke are significantly higher than the England average in 5 of the 7 areas within the Locality. The ratios in Hamworthy West, Hamworthy East and Lytchett Minster and Upton are amongst the highest 10% of areas across Dorset (see Figure 8).

4.18 Emergency admissions for Stroke can give an indication as to how well cerebrovascular diseases (CVD) such as stroke are being managed.

Figure 8: Emergency admissions to hospital for stroke, 2013/14 – 2017/18¹²



Legend
 Better
 Similar
 Worse

Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> last accessed 29/01/2020

¹² This standardised admission ratio allows the level of such admissions at a local level to be compared to those expected given the age structure of local populations. For more detail see: <https://fingertips.phe.org.uk/profile/local-health/data#page/6/gid/1938133184/pat/101/par/E07000223/ati/8/are/E05007562/iid/93231/age/1/sex/4>

- 4.21 The main risk factors for CVD¹³ are:
- High blood pressure
 - Smoking
 - High cholesterol
 - Diabetes and
 - Inactivity.
- 4.22 Many people with [type 2 diabetes](#) are also overweight or obese, which is also a risk factor for CVD. Type 2 diabetes is largely preventable. Increasing levels of diabetes in the population place a growing burden on the health and care system.
- 4.23 In the next section we examine how well diabetes is being managed in the Locality.

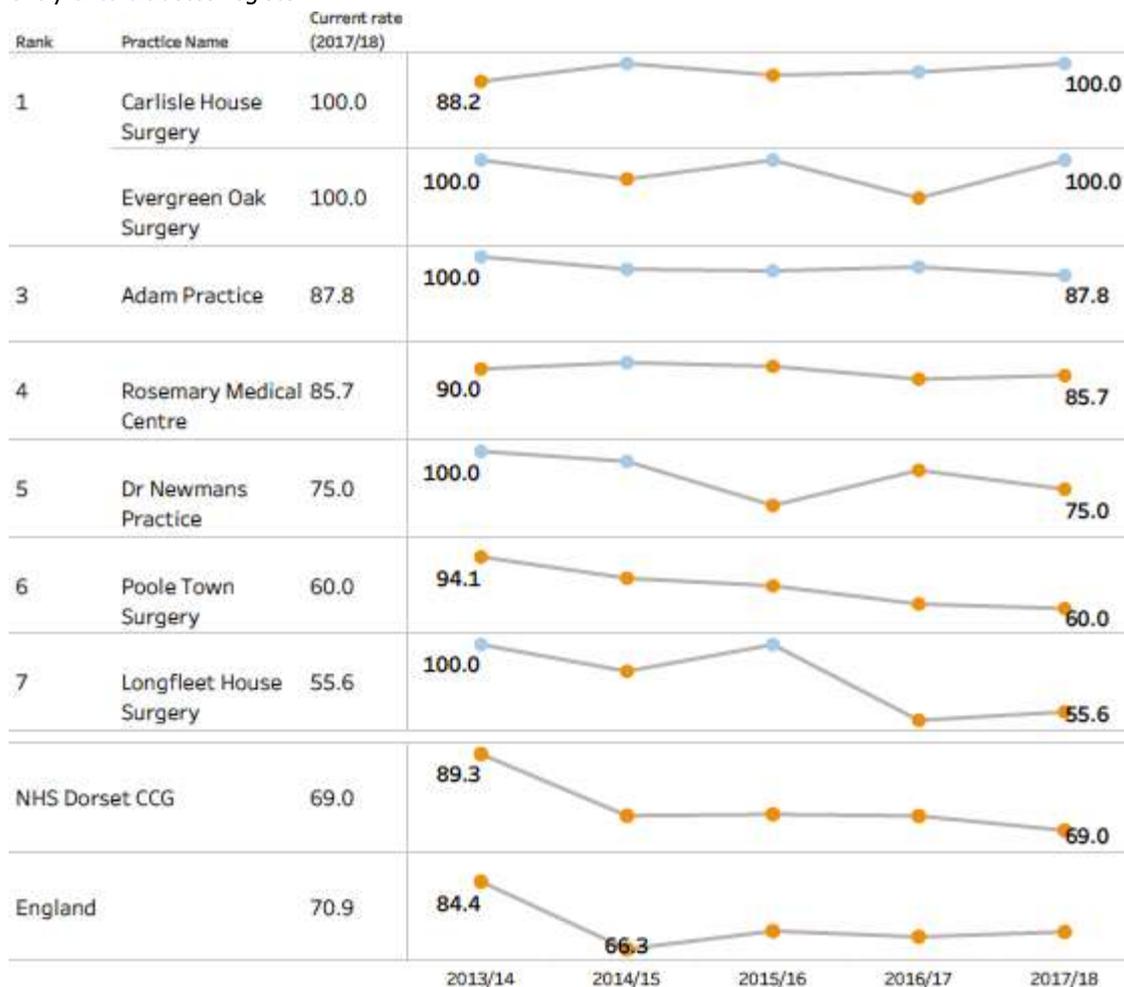
Diabetes management

- 4.24 Effective control and monitoring of diabetes can reduce mortality and morbidity. Type 2 diabetes is both preventable and can be controlled by lifestyle interventions (improved diet and increased physical activity). Much of the management and monitoring of diabetic patients, particularly patients with Type 2 diabetes is undertaken by the GP and members of the primary care team.
- 4.25 In keeping with Dorset overall and England as a whole, the recorded prevalence of diabetes amongst adults in the Locality has increased in recent years. Dorset overall this has increased from 5.3% in 2009/10 to 6.4% in 2017/18.
- 4.26 In Poole Central Locality the *prevalence of diabetes* has increased in line with national trends. Levels across the 5 of the 7 practices are similar to those for England overall. The prevalence for *Poole Town Surgery and Adam Practice* being significantly higher than the England and Dorset averages.
- 4.27 Newly diagnosed patients with diabetes referred to an education programme within 9 months is a national indicator that provides an indication of how well patients are supported in primary care¹⁴. This measure shows decreases (Figure 9 over-page) in five of the seven Poole Central practices over the last 5 years.
- 4.28 The most recent data (2017/18) shows three of the six practices as having higher percentages of newly diagnosed diabetic patients referred to a structured educational programme within 9 months of entry onto the register, than England and Dorset averages. Poole Town Surgery and Longfleet House Surgery are below England and Dorset averages, though not significantly so.

¹³ <https://www.nhs.uk/conditions/cardiovascular-disease/> last accessed 17th December 2019

¹⁴ <https://fingertips.phe.org.uk/profile/general-practice/data#page/6/gid/2000002/pat/152/par/E38000045/ati/7/are/J81613/iid/91238/age/187/sex/4> last accessed 17th December 2019

Figure 9: Percentage of newly diagnosed diabetic patients referred to structured education programme within 9 months of entry onto diabetes register



Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/Diabetesmanagement201718/DiabetesManagement> last accessed 29/01/2020

- 4.29 Exception reporting was introduced into the Quality and Outcomes Framework to allow practices to pursue quality improvement and not be penalised when patients do not attend for review, or a medication cannot be prescribed due to a contraindication or side-effect¹⁵.
- 4.30 It has been suggested that patients noted as exceptions may not be receiving routine care and hence are more likely to have poorer outcomes¹⁶; alternative approaches should be used to engage those patients who do not attend medical check-ups.
- 4.31 *Six of the seven Poole Central practices showed, consistently over the last four years, significantly higher diabetes exception rates than the England average.*
- 4.32 Sugar control across the Poole Central practices is generally similar to that for England and Dorset.
- 4.33 *Blood pressure control for Poole Central Diabetics is significantly higher than England and Dorset averages for Carlisle House Surgery and Rosemary Medical Centre, but*

¹⁵ <https://fingertips.phe.org.uk/profile/general-practice/data#page/6/gid/2000003/pat/152/par/E38000045/ati/7/are/J81613/iid/248/age/1/sex/4> last accessed 10 October 2019

¹⁶ <https://www.hsj.co.uk/comment/time-to-scrap-gp-exception-reporting/5023669.article> last accessed 10 October 2019

significantly lower in Evergreen Oak Surgery and Longfleet House Surgery (2017/18 data), see Figure 10 below)¹⁷.

Figure 10: Percentage of diabetic patients achieving blood pressure control in Poole Central Locality



Source: <https://public.tableau.com/profile/public.health.dorset#!/vizhome/Diabetesmanagement201718/DiabetesManagement> last accessed 29/01/2020

4.34 People with diabetes and high blood pressure are more at risk of having a heart attack or stroke¹⁸. The percentage of patients with established hypertension, as recorded on practice disease registers (proportion of total list size), is consistently significantly higher in four of the seven Poole Central practices than the England average¹⁷.

¹⁷ <https://public.tableau.com/profile/public.health.dorset#!/vizhome/Diabetesmanagement201718/DiabetesManagement> last accessed 29/01/2020

¹⁸ <https://www.diabetes.org.uk/guide-to-diabetes/managing-your-diabetes/blood-pressure> last accessed 12 October 2019

Musculoskeletal disorders

- 4.35 Low back pain (6% of total Poole DALYs) and neck pain (2%) comprise ¾ of all musculoskeletal disorder DALYs.
- 4.36 40% of NHS sickness absence is due to musculoskeletal issues. Good musculoskeletal health can prevent (or reduce the impacts of) low back and neck pain.
- 4.37 The Limiting long-term illness or disability indicator from Local Health gives a proxy measure of the impact of low back and neck pain (and other conditions).
- 4.38 *One in five people in Poole Central reported have a limiting long term illness or disability, at 19% this is significantly higher than the England average.*
- 4.39 *LTLI is significantly worse than England in three of the seven areas in the Locality (Poole Town, Poole College and Hamworthy East).*

Musculoskeletal health: National picture

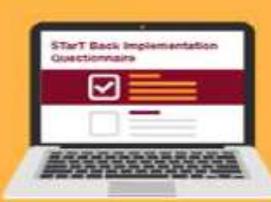


Effective interventions for MSK prevention

PHE's ROI tool shows that for every £1 invested in...



STarT Back (Stratified Risk Assessment and Care), saves £226 in healthcare savings, quality of life year & productivity gains



Self-referral to physiotherapy, saves £99 in healthcare



ESCAPE-pain, saves £5 in healthcare savings



PhysioDirect, saves £47 in healthcare savings & quality of life year gains



- 4.40 Keeping fit and active, and avoiding long periods of sedentary behaviour are key to maintaining good musculoskeletal health.
- 4.41 Livewell Dorset provides help and advice on becoming more active (<https://www.livewelldorset.co.uk/get-active/>).
- 4.42 NHS employers are encouraging the workforce to become more active through workplace wellbeing initiatives. The STP / ICS is encouraged to reach out to support other employers in making the case for promoting workplace wellbeing.

Neurological disorders

- 4.43 Almost half of the DALYs arising from neurological disorders in Poole are accounted for by Alzheimers and other dementias (5% of all cause DALYs in Poole).
- 4.44 The onset and progression of some dementias can be prevented through lifestyle interventions. The risk of dementia can be reduced by:

- eating a healthy, balanced diet
- maintaining a healthy weight
- exercising regularly
- keeping alcohol to a minimum
- stopping smoking
- keeping blood pressure at a healthy level¹⁹.

4.45 In keeping with national and Dorset wide trends, the prevalence of dementia recorded by Poole Central practices has increased over recent years (in five of the seven practice).

4.46 *Longfleet House Surgery, Evergreen Oak Surgery and Rosemary Medical Centre recorded significantly higher levels of dementia than the England and Dorset averages.*

4.47 There is variation across the Poole Central practices in terms of the percentage of dementia patients with a care plan reviewed in the past 12 months.

4.48 In the following chart (Figure 11) we see that:

- Proportions have increased in the three practices with highest levels of reviews
- Dr Newmans Practice, Poole Town Surgery, Carlisle House Surgery and the Adam Practice achieved (2017/18) higher levels than the average across England and Dorset, though not significantly so.

Figure 11 Percentage of dementia patients with a care plan reviewed in the previous 12 months



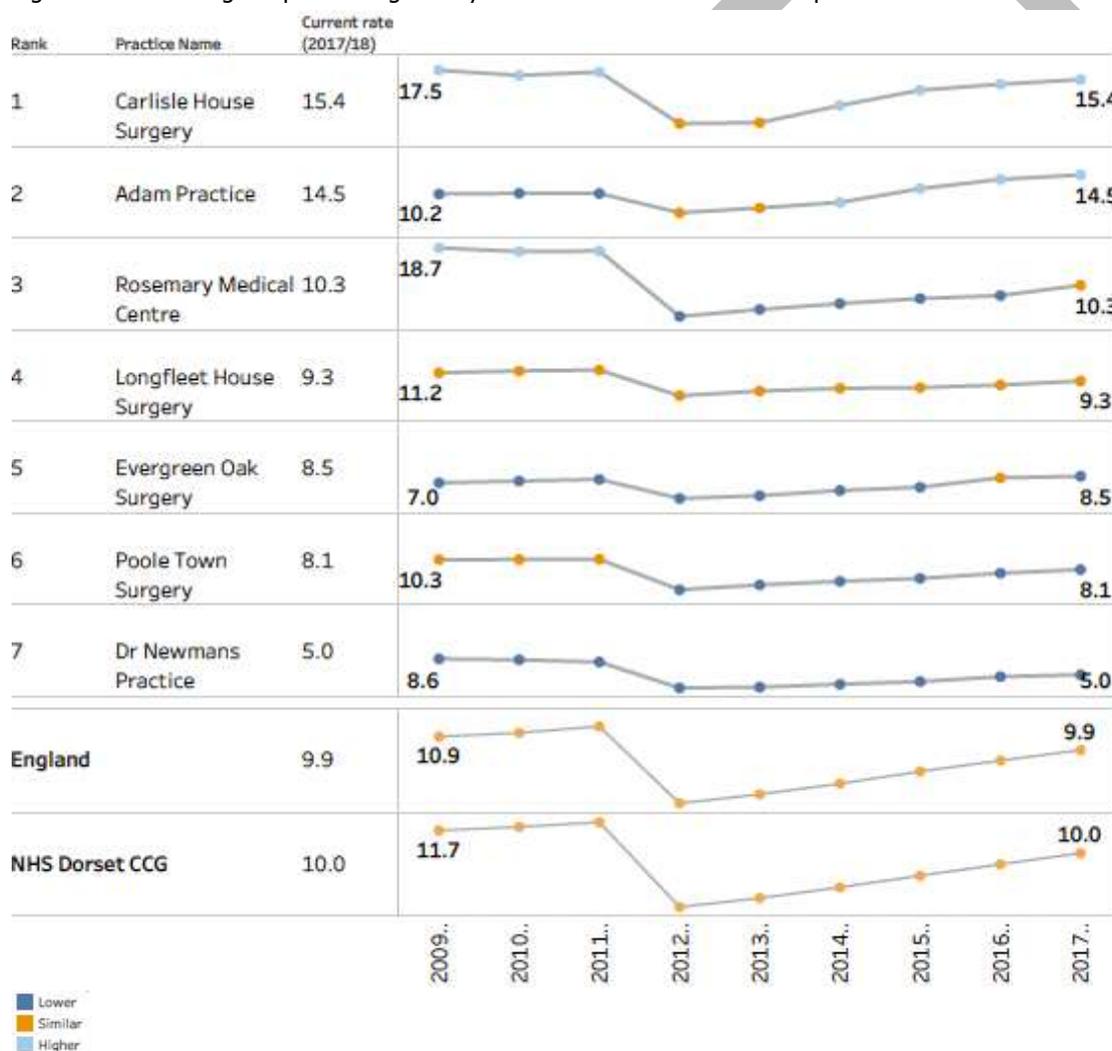
Source:

<https://public.tableau.com/profile/public.health.dorset#!/vizhome/GPPPracticeMentalHealthIndicators201718/MentalHealth?publish=yes> last accessed 29/01/2020

¹⁹ <https://www.nhs.uk/conditions/dementia/dementia-prevention/> last accessed 17th December 2019

- 4.49 The percentage of dementia patients with a care plan reviewed in the past 12 months indicator includes those patients that the practice has identified as being ‘exceptions’²⁰.
- 4.50 *Exception rates* in Poole Central practices are consistently similar to, or lower than, the England average. In contrast with the increase in figures for England overall, exception rates for dementia indicators have shown a decline over the last 7 years across 5 of the 7 Poole Central practices. *There have been increases for Dr Newmans Practice and Evergreen Oak Surgery*²¹.
- 4.51 Loneliness and depression are noted by NICE as important risk factors for dementia. Reducing the number of people with depression is important as depression may reduce the resilience to dementia onset and progression²².
- 4.52 The following chart shows the *prevalence of adult depression* to have fallen between 2009/10 and 2012/13, and then risen through to 2017/18 in the 7 Poole Central practices.
- 4.53 Compared with the England average there is variation across the 7 Poole Central practices: *Carlisle House Surgery and Adam Practice are significantly higher than England whilst Evergreen Oak Surgery, Poole Town Surgery and Dr Newmans Practice are significantly lower.*

Figure 12: Percentage of patients aged 18 years and over with recorded depression



<https://public.tableau.com/profile/public.health.dorset#!/vizhome/GPPPracticeMentalHealthIndicators201718/MentalHealth?publish=yes> last accessed 29/01/2020

²⁰ <https://fingertips.phe.org.uk/profile/general-practice/data#page/6/gid/2000003/pat/152/par/E38000045/ati/7/are/J81613/iid/248/age/1/sex/4> last accessed 10 October 2019

²¹ <https://public.tableau.com/profile/public.health.dorset#!/vizhome/GPPPracticeMentalHealthIndicators201718/MentalHealth?publish=yes> last accessed 5th December 2019

²² <https://www.nice.org.uk/guidance/ng16> last accessed 17th December 2019

Chronic respiratory diseases

- 4.54 The largest disease in this category is chronic obstructive pulmonary disease (COPD) which accounts for 70% of chronic respiratory diseases (4.3% of all causes DALYs for Poole).

Chronic obstructive pulmonary disease (COPD)

- 4.55 Nationally, 3,000,000 people are estimated to have COPD, of which only one third are diagnosed.
- 4.56 Emergency admissions for COPD can give an indication as to how well the condition is being managed. Factors outside of the health service such as the availability of community support services will also impact on emergency admissions.
- 4.57 At the Poole Central Locality level, *Emergency admissions for COPD* are similar to the England average; the Locality is ranked 4th highest of the 13 Dorset Localities. Within the Locality, the ratios for *Poole Town and Poole College* are significantly higher than the England average and amongst the highest 20% of areas across Dorset²³.
- 4.58 Lung cancer is closely associated with COPD. The incidence of lung cancer is significantly better (lower) in Poole Central (compared with England) with no areas within the locality showing significantly higher rates than the England average²³.
- 4.59 Smoking is an important risk factor in developing COPD and lung cancer. We see at point 4.9 that in line with England and Dorset as a whole, smoking prevalence has shown a small decrease over the last five years in Poole Central.
- 4.60 As the levels of smoking decrease we are left with 'harder to quit' smokers. For these people the standard smoking cessation support offer may not work and different approaches may be required.
- 4.61 Stop smoking advice is provided locally by LiveWell Dorset (<https://www.livewelldorset.co.uk/stop-smoking/>)

²³ <https://public.tableau.com/profile/public.health.dorset#!/vizhome/PrimaryCareLocalityProfile/Themes> 1st accessed 29th January 2020

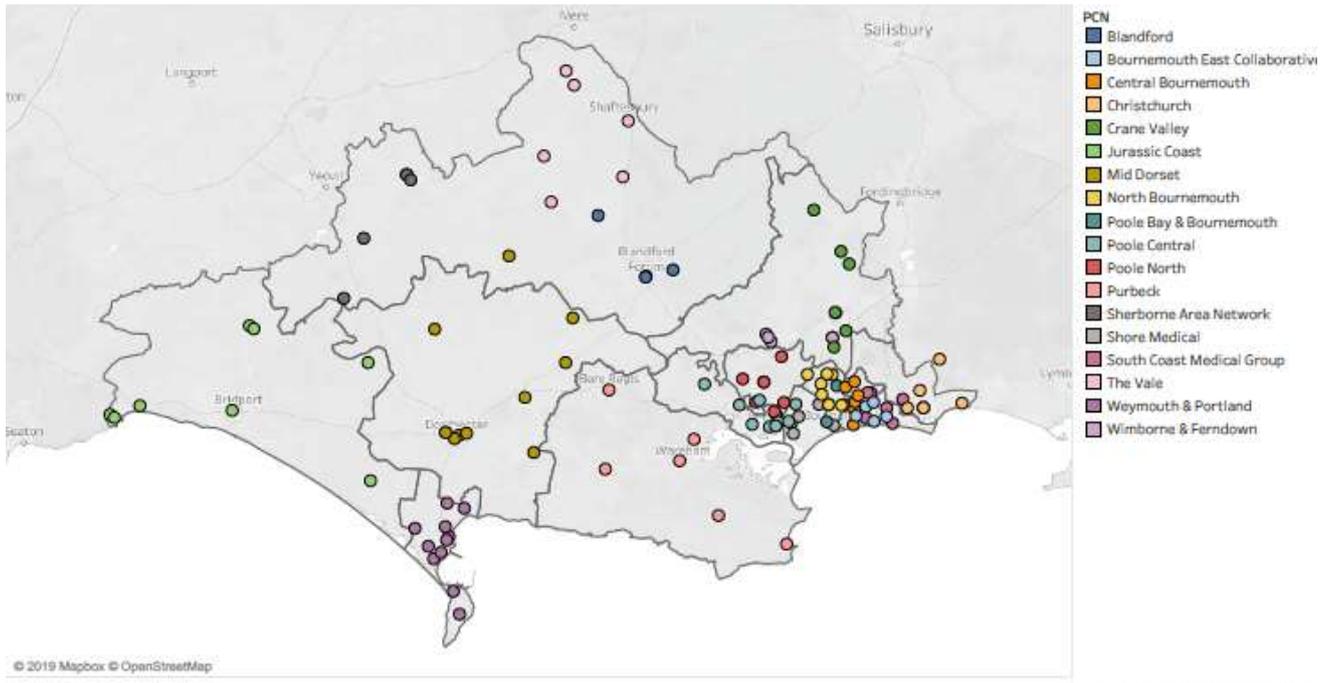
Themes to consider for locality initiatives:

1. There are higher than expected new cancer cases for the Poole Central Locality with the Locality having the highest ratio across the 13 Dorset Localities. Within the locality, the highest levels are in:
 - Hamworthy West; and
 - Poole Town
2. Poole Central Emergency admissions for CHD are significantly higher than expected compared with the England average, the Locality having the highest ratio of the 13 Dorset Localities. Admissions are highest in Hamworthy West and Poole Town, Hamworthy East, Lytchett Minster and Upton, and Oakdale
3. Poole Central Emergency admissions for Stroke are significantly higher than the England average, and the highest of the 13 Dorset localities. Admissions for stroke are significantly higher than the England average in 5 of the 7 areas within the Locality. The ratios in Hamworthy West, Hamworthy East and Lytchett Minster and Upton are amongst the highest 10% of areas across Dorset
4. Whilst Poole Central Emergency admissions for COPD are similar to the England average, the Locality is ranked 4th highest of the 13 Dorset Localities. Within the Locality, the ratios for Poole Town and Poole College are significantly higher than the England average and amongst the highest 20% of areas across Dorset

Getting started - some resources for planning actions:

- > [Local Health and Care Planning: Menu of preventative interventions](#) provides evidence based interventions to improve health and deliver (NHS) savings within 5 years. This covers key lifestyle topics and sections directly addressing a number of the GBD topics.
- >> "[If You Could Do One Thing...](#)" details nine local actions to reduce health inequalities
- >>> WessexVoices contains [key reading](#) with resources on 'people powered health'
- >>>> The Dorset Locality Profile website provides an [interactive dashboard](#) with more detailed data
- >>>>> Your Dorset Public Health Link worker will support local actions, please contact xxxxx

GP practices and branch surgeries by Primary Care Network



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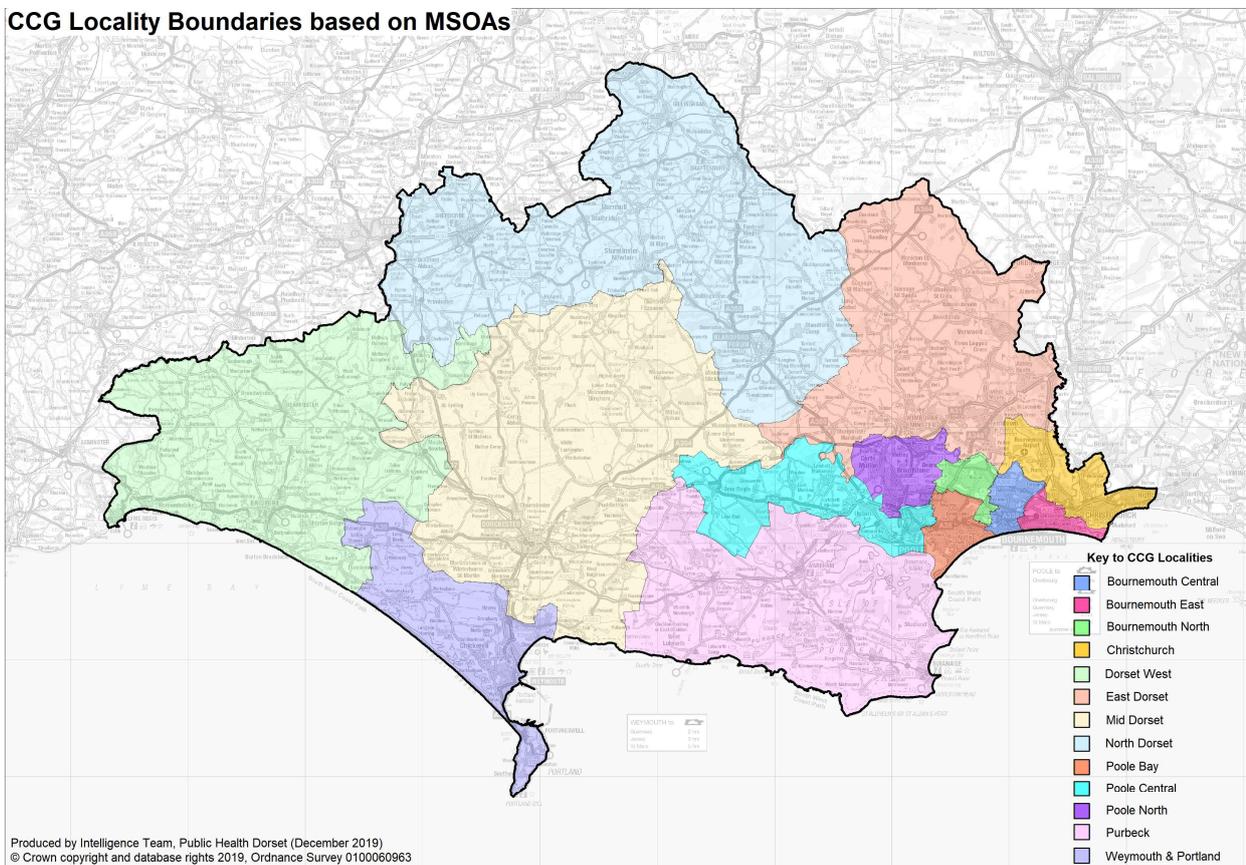
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Created and maintained by the Public Health Dorset Intelligence Team
Last updated 16/12/2019



CCG Locality Boundaries based on MSOAs



Produced by Intelligence Team, Public Health Dorset (December 2019)
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