Horsham

Integrated Community Team Population Profile Pack - DRAFT



November 2023









Introduction

16 geographically based Integrated Community Teams (ICTs) across Brighton and Hove, West and East Sussex have now been agreed.

The ICT Programme Team have since implemented an ICT Data Group, enabling ICB, Public Health, Local Authority, VCSE and wider stakeholders to meet and collaborate regularly in the development and design Sussex ICT data core profiles.

The Sussex ICT model, will be driven by data and reflective of population needs. To do this effectively we need to access a variety data sets that enable us to understand each of the ICTs' local demographics, health needs, social determinants and wider determinants of health.

Different data sources complimented by Local Knowledge and Community Insight will be key in highlighting specific needs and challenges faced by each ICTs population. This will allow us to construct the core offer that will be delivered by ICT delivery teams, design how these teams need to be configured and what might need further local tailoring due to marked differences in population need.

These opening ICT data packs are intended to set the scene for the ICTs. Whilst they alone will not provide the final answer, they are designed to help stimulate the questions which will. After initial release in December, the packs will develop further in response to feedback to help support the ICTs in their development.

Headline Findings 1

- **Population Size and Change** Horsham has 146,800 residents. Since 2011 the population has grown by 12%, almost double the England growth level (6.6%). Over the 10 years there have been a similar number of births and deaths. Growth is, in the main, driven by net inward migration.
- Diversity population is less ethnically diverse and older compared with England.
- Core20 No area within Horsham is ranked amongst the most 20% deprived neighbourhoods in England.
- **Life Expectancy** The Horsham compares favourably with Sussex and England on many public health outcome measures. Overall, residents enjoy a long life (the highest life expectancy amongst all Sussex ICTs). Although there are differences between life expectancy between the most and least deprived neighbourhoods, the difference is less marked in this area than others, particularly for women.
- Wider Determinants of Health Horsham compares well with England and has lower levels of child and pensioner poverty. Horsham has one of the lowest percentages of working aged people on benefits in Sussex. As with other parts of Sussex, many people cannot afford to buy their own home, the ratio of house prices to earnings is high.
- **Population Health** Horsham compares favourably with England and many parts of Sussex on a range of outcomes including a lower rate of alcohol related admissions, lower percentage of obese adults, higher levels of physical activity, the lowest smoking prevalence amongst all Sussex ICTs (5.6%) and the highest percentage of Year 6 children measured at a healthy weight. Horsham also has higher rates of cancer screening, lower rates of hospital admission for COPD, and lower premature mortality rates for the major causes (CVD, respiratory diseases and cancer).

Headline Findings 2 Health Care

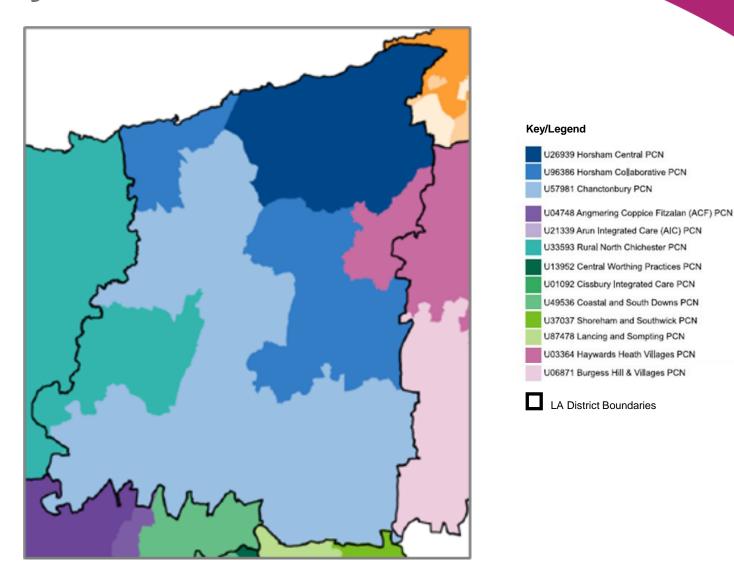
- **Primary Care** Within Horsham ICT there are 3 PCNs with 12 GP Practices with very varying levels of population, 2 Practices(Park, Holbrook) have >15k registered patients. 2 GP practices (Cowfold & Rudgwick) have <5k registered patients. In terms of CQC rating 1 practice is rated as Inadequate, 1 rated as Requiring Improvement, the remainder are rated as Good.
- In Horsham Flu vaccinations for 65+ are higher than the Sussex average, the percentage of people having dementia annual care plans lower than the Sussex average. Patient COPD reviews within the last 12 months and Coronary Heart Disease (CHD) blood pressure management (<=79 BP reading 140/90mmHg or less) worse than the Sussex average.
- Long Term Conditions* The prevalence of cancer and hypertension in Horsham ICT is higher than the Sussex average, obesity and depression lower than the Sussex average.
- **Community Care** UTC attendances (per 100) by Horsham ICT patients is higher than the Sussex average. The number of community nursing contacts per 100 population is lower than the Sussex average, as is the 2-hour referrals and standard referrals to the Urgent Community Response (UCR)
- Planned Care Alternatives and Cancer Care For Horsham ICT higher than the Sussex average are: Lower GI suspected cancer referrals; the rate of new cancer cases per 100k population; 2-week waits and the diagnosis rates for 2-week referrals.
- Acute Planned Care The percentage of Horsham ICT patients waiting 52+ or 65+ weeks for treatment at PRH is higher than the Sussex average, new outpatient appointments is lower than the Sussex average whilst follow up outpatient appointments are higher.
- **Urgent and Emergency Care** All of the measures relating to 111, 999 and A&E rates are lower for Horsham ICT than the Sussex average. The volume of 111 calls per 1,000 population is in the lowest quartile for Sussex. Emergency admission rate for Horsham ICT patients is lower than the Sussex rate per 100 population.
- Care Homes: Urgent Healthcare Use Horsham ICT emergency admissions in the past year were higher than the Sussex average, as are emergency respiratory admissions and admissions following a fall.

Horsham ICT Geography

The geography of the ICT is not an exact match between Local Authority District and NHS practice/PCN catchment.

By general rule the slides on the health of the population will be split by District and those slides on use of healthcare services split by GP/PCN registered population.

Where slides deviate from this it is noted



Summary Contents 1

| Section | Slide | Contents | |
|----------------------------------|---------------------------|---|--|
| Who lives here | Who lives in the ICT | Population, increases, reductions, broad age band %s | |
| | Key Demographics | Key demographic groups within the ICT | |
| | Population change | Age-sex profile and expected increase, including households | |
| | Population Projections | An ageing population | |
| Building blocks of health | Introduction | What do we mean by the building blocks of health | |
| | Deprivation | IMD, Core20, Child poverty, Benefits, Poverty, Earnings | |
| | Building blocks of health | Housing, Education, Employment, Crime | |
| What services are within the ICT | Map of services | Location of services within the ICT geography | |

Summary Contents 2

| Section | Slide | Contents |
|------------------------------|---|--|
| The Health of the Population | Health and Wellbeing across the life course | Headline summary of key indicators which are covered in more detail in the next 4 slides |
| | Main Causes of ill health, life expectancy and inequalities | Life expectancy, mortality and inequality |
| | Main Causes contributing to the gap in life expectancy | Causes of inequality in life expectancy |
| | Key risk factors for main causes of death | Risk factors are behind the main causes of death |
| | Starting Well | Outcomes and factors affecting them at the start of life |
| | Living Well | Outcomes and factors affecting them during Adult life |
| | Ageing Well | Outcomes and factors affecting them in older age |
| | Dying well | Palliative Care and deaths |

Summary Contents 3

| ₩ | | | | | |
|--|--|--|--|--|--|
| Section | Slide | Contents | | | |
| Healthcare services - Primary Care | Primary Care services | Size and number of GP Practices, Enhanced Services | | | |
| | Long Term Conditions (Disease Burden) | Disease Registers and QOF | | | |
| | Other Primary care in the ICT | Dental Activity, vaccination levels and medicines use | | | |
| Healthcare services - MHLDA | Mental Health and Learning Difficulties | Dementia Diagnosis Rate, Learning Disabilities AHC, Talking therapies, | | | |
| Healthcare services - Community | Community Health Services | Community Nursing, Community Beds, Community Services | | | |
| Healthcare services - Non Urgent Care | Planned Care alternatives and Cancer | Advice and Guidance, DNA rates, PIFU, Cancer waiting times, FIT testing | | | |
| | Planned Care | New Outpatients, Follow Up Outpatients, Outpatients with Procedures, Daycase and Elective Inpatients, OPProc:DC:EL ratio | | | |
| Healthcare Services - UEC | Urgent and Emergency Care | 111 calls, 999 calls, Ambulance Mobilisations | | | |
| | Acute Urgent Care | Emergency Inpatients, Long stay patients | | | |
| | Care Homes: Urgent Healthcare use | Carehome numbers, 999 call rates, A&E and emergency admission rates | | | |
| Adult Social Care | Adult Social Care | Contacts, patients receiving Long Term Support, Reported Quality of Life, Safeguarding concerns | | | |
| Appendix | Links to useful sites | For more detail on the headlines in this pack | | | |

care for all

Who lives in Horsham ICT

Around 146,800 people live in Horsham (2021 Census)
An increase of 12% since 2011

Between 2011 and 2020 there have been

- 11,586 Births
- 11,748 Deaths
- 11,750 estimated increase from internal UK migration
- 2,280 estimated increase from international migration

Census 2021 data:

- 22% of the population is under 20, compared to 23% for England
- 23% of the population is 65 or over, compared to 18% for England
- 3.3% of the population is 85 or over, compared to 2.4% for England

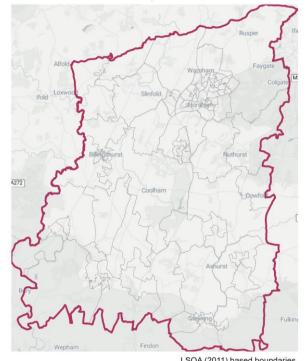
905 residents aged 65+ live in a care home (with or without nursing)

Horsham Integrated Community Team



LSOA (2021) based ICT boundaries. © Stadia Maps; © OpenStreetMap contributors

Horsham ICT Core20 areas;



© Stadia Maps; © OpenStreetMap contributors

Horsham ICT comprises of 81 neighbourhoods (2011 based LSOAs). There are **no Core20 neighbourhoods** (representing the most deprived 20% of neighbourhoods nationally) in this ICT.

Key Demographic Groups within Horsham ICT

Compared with England

- Horsham has an older age structure compared with England
- Horsham is less
 ethnically diverse
 compared with England

Horsham ICT population groups

Age

Horsham has an older age structure than England:

- 21.8% of people are aged under 20 (23%)
- 55.4% aged 20-64 (58%)
- 22.8% aged 65+ (18%)

Ethnicity

11.9% of people are Black or racially minoritised* (27%):

- 2.7% Asian or Asian British (10%)
- 0.9% Black or Black British (4%)
- 2.1% Mixed or multiple ethnic group (3%)
- 0.1% Arab (0.6%)
- 5.6% White Irish or White other (8%)

Religion

42.1% of people have no religion or belief (37%):

- 49.3% Christian (46%) 0.6% Hindu (1.8%)
- 0.9% Muslim (6.7%) 0.1% Sikh (0.9%)
- 0.2% Jewish (0.5%) 0.4% Other religion
- 0.4% Buddhist (0.5% (0.6%)

Pregnancy & maternity

There were 1,444 live births in 2021²

Sex

Female 51.2% (51%)

Male 48.8% (49%)

Gender identity

0.3% of adults aged 16+ identified as Trans in the 2021 Census (0.5%)

Sexual orientation

2.5% of those aged 16+ identified as LGB+ (gay or lesbian, bisexual or other minority sexual orientation) (3%)

Language

For 3.4% of people, English is not their main language (9%) 0.3% do not speak English well (1.6%)

Disability

14.9% of residents are disabled under the Equality Act (17%)

Children in care

At the end of March 2022, there were 860 children aged 0-17, 49 per 10,000, living in care in West Sussex (England 70 per 10,000)¹ UTLA

Veterans

4.3% of people aged 16+ stated on the 2021 Census that they had previously served in the armed forces (3.8%)

Marriage / civil partnership

52.5% of people aged 16+ are married or in a civil partnership (45%)

29.6% Never married/civil partnership (38%) 1.9% Separated (2%)

9.4% divorced/civil partnership dissolved (9%)
6.6% widowed / surviving civil partnership
partner (6%)

Carers

8.3% of people provide unpaid care (9%)

England figure in brackets

Source: Census 2021 unless otherwise stated

- ¹ Department for Education, ² ONS
- * Non White UK/British

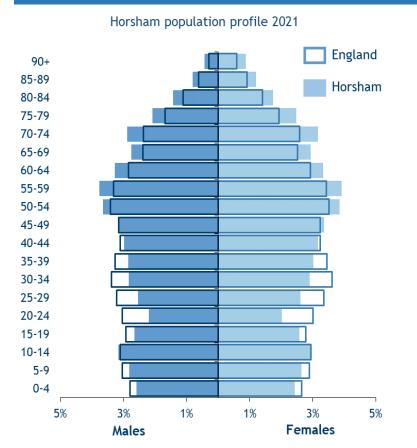
UTLA: Only available at UTLA level

Current population & change over the last 10 years

In Horsham, between 2011 and 2021

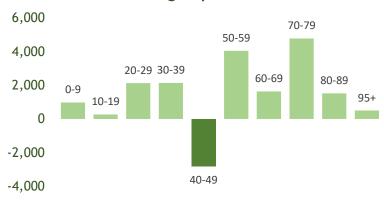
- The total population has increased by 11.5% which was higher than England (6.6%)
- The largest % increase was in the 70– 79-year-olds, which has increased by 4,781 (44.3%) since 2011.

Total population 146,783



Increase in population 15,183

Horsham change in population between 2011 and 2021 Census, in 10 year age groups



| | 2021 | 2011 | Horsham | | England |
|----------|---------|---------|---------|-------|---------|
| | 2021 | 2011 | change | % | % |
| 0-19 | 32,045 | 30,800 | 1,245 | 4.0% | 2.7% |
| 20-64 | 81,297 | 75,200 | 6,097 | 8.1% | 4.4% |
| 65+ | 33,441 | 25,600 | 7,841 | 30.6% | 20.1% |
| All ages | 146,783 | 131,600 | 15,183 | 11.5% | 6.6% |

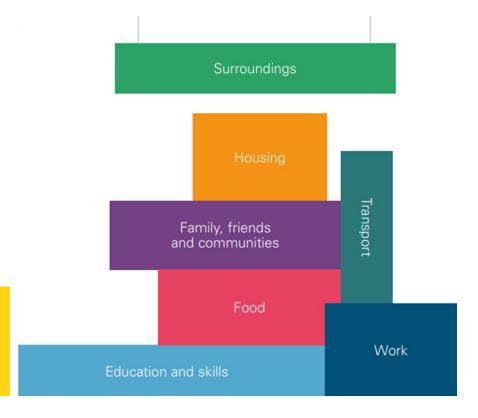
How is the population expected to change over the next ten years?

PLACEHOLDER SLIDE

Please note – population projects rebased for 2021 Census will not be published until early 2024

The building blocks of Health

- When we don't have the things we need, like warm homes and healthy food, and are constantly worrying about making ends meet, it puts a strain on our physical and mental health. This results in poorer physical and mental health, earlier onset of conditions and earlier death.
- Almost every aspect of our lives impacts our health and ultimately how long we will live – our jobs and homes, access to education and public transport and whether we experience poverty or discrimination. These are the building blocks of health.
- To create a county where everybody can thrive, we need all of the right building blocks in place:

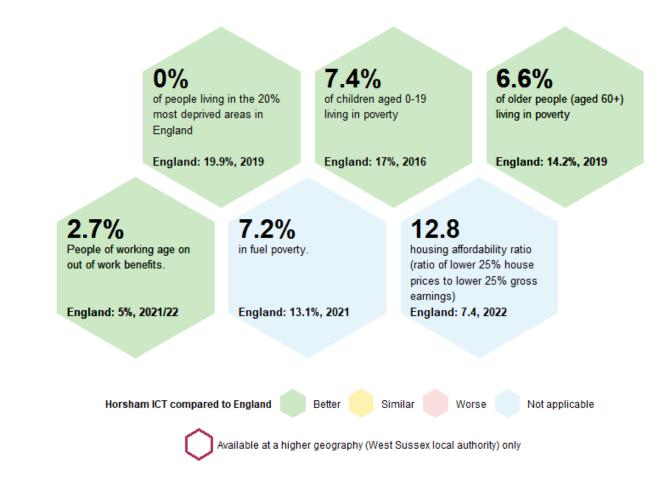


Money and

resources

Building blocks of health in Horsham ICT

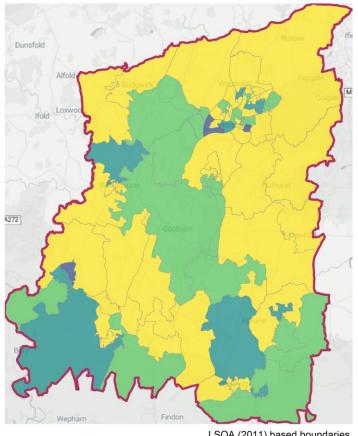
- Horsham compares well with England and has lower levels of child and pensioner poverty.
- Horsham has one of the lowest percentages of working age people on benefits.
- As with other parts of Sussex, many people cannot afford to buy their own home, the ratio of house prices to earnings is high.



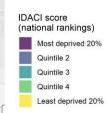
Building blocks in Horsham ICT

Income deprivation is defined as receiving Income Support or income-based Jobseekers Allowance or income-based Employment and Support Allowance or Pension Credit (Guarantee) or Universal Credit (in the 'Searching for work', 'No work requirements', 'Planning for work', 'Working – with requirements' and 'Preparing for work' conditionality groups) or families not in receipt of these benefits but in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs

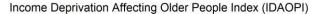
Income Deprivation Affecting Children Index (IDACI)

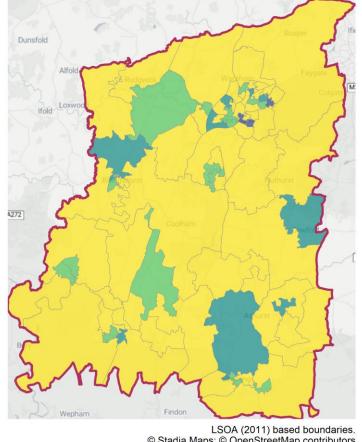


LSOA (2011) based boundaries. © Stadia Maps: © OpenStreetMap contributors



In Horsham ICT, none of its 81 neighbourhoods had an IDACI score (proportion of 0-15s living in income deprived families) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 19.1% or one in five children experiencing income deprivation.





LSOA (2011) based boundaries. © Stadia Maps; © OpenStreetMap contributors



There were no neighbourhoods in Horsham ICT with an IDAOPI score (proportion of 60+ year olds living experiencing income deprivation) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 24.6% or one in four older people.

Building blocks of health in Horsham ICT

- Population density overall is lower than England (with 277 people per square km) reflecting the mix of population based in markets towns, villages and also in rural areas.
- Horsham compares favourable on most measures, including people in employment, school attainment and lower crime rates.

62,368
households with at least one resident

England: 23,436,090, 2021

13.8%

of households comprise a person aged under 66 living alone

England: 17.3%, 2021

14.3%

of households comprise a person aged 66+ living alone

England: 12.8%, 2021

4.6% of households comprise a lone parent

England: 6.9%, 2021

277

People per square km (population density)

England: 434, 2021

1.6%

of households which are overcrowded

England: 4.4%, 2021

1%

of households lack central heating

England: 1.5%, 2021

12.5%

of households are privately renting (main type)

England: 18.2%, 2021

64.4%

of reception age children achieving a good level of development

England: 65.2%, 2021/22

53.1

Average Attainment 8 score at age 16

England: 48.7, 2021/22

13.2

Average Attainment 8 score for children in care

England: 20.3, 2021/22

12.5%

of people aged 16+ with no qualifications

England: 18.1%, 2021

58.7%

of people of working age in employment

England: 55.7%, 2021

51.3

overall crime rate per 1,000 in the 12 months to July 2023

England: 88.2, 2023

17.8

violent crime rate per 1,000 in the 12 months to July 2023

England: 30.5, 2023

6.5

antisocial behaviour incident rate per 1,000 in the 12 months to July 2023

England: 13.7, 2023

Horsham ICT Compared to England



Better



Similar

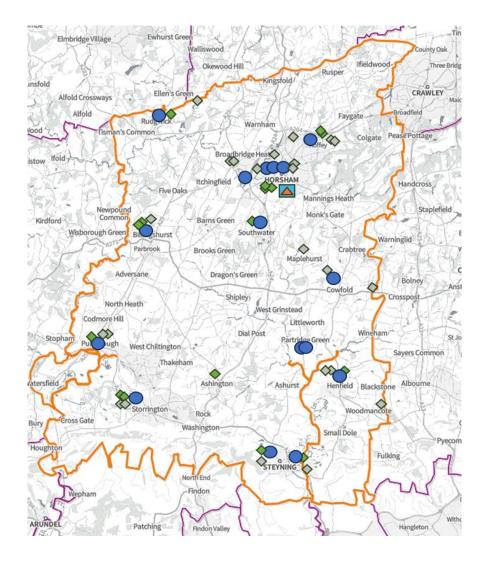
Worse

Not applicable

Available at a higher geograph

Available at a higher geography (West Sussex local authority) only

Services within Horsham ICT



More detailed mapping of services is available at:

Legend

- GP Practice
- Pharmacy
- ▲ ED/UTC/MIU/CAU
- Acute Hospital
- Community Hospital
- Care Home

Sussex Integrated Community Team Profiles - Health & Wellbeing across the life course

Horsham Integrated Community Team

Whilst some issues affect people of all ages, outcomes have been placed in the life stage where the impact may be greatest.

Data are shown for Horsham ICT and are compared with England



































86.2 81.9 Females Males Life expectancy at birth (years) 2021

5.2 Females Males the range in life expectancy at birth between the most and least deprived neighbourhoods 2018-20

7.4% Children aged 0-19 living in poverty 2016

49 of 0-18 year olds in ćare per 10,000 2022

8.1% of women smoking at the time of deliverv 2021/22

57.7% of women breast fed at 6-8 weeks after birth 2019/20

91.4% of those aged <5 years had two doses of MMR vaccine 2021/22

64.4% of reception age children achieving a good level of development 2021/22

73.5% 53.1 of children in year 6 aré a healthy weight 2021/22





























1.5% 10.7% 14.9% Depression COPD Hypertension

recorded prevalence in primary care (GP) records 2021/22

53.8%

of at risk people aged <64 years receive flu vaccination 2022/23

23% of people report a high level of anxiety 2021/22

 (\cdot)

5.6% of adults aged 18+ are current smokers 2022

72.6% of adults aged 19+ are physically active 2021/22

16.1% of adults aged 18+ classified as obese 2021/22

344.8 alcohol specific hospital admissions per 100,000 2021/22

58.7%

of people of working age in employment



599.2 hospital admissions for self-harm per 100,000 aged 10-24 years

20.1

2021/22

6% of 16-17 year olds not in education. employment, or training 2021



172.6

hospiťal

2021/22

emergency

admissions

per 100,000

for self-harm



49

diseases

Cardiovascular Cancer



Preamature (under 75s) mortality

rate per 100,000 population

2021



14.1

Respiratory

diseases



drug related

per 100,000

population

3.1

deaths

2018-20



10.1



suicide and

aged 10+

2019-21

undertermined

100,000 people

injury deaths per







6.6%

of people

aged 60+

living in

poverty

2019

✐

39%

14.3%

comprising 66+ living alone 2021

a person aged have dementia a diagnosis 2021

59.4% of households of those aged 65+ estimated to who have recevied

Males Females Life expectancy at age 65 (years) 2021

23.5







27.9%

38.2% 27.4% in a hospital care home

of deaths occuring

0.5% of patients on palliative/ end of life care list in GP records 2021/22

՛ല Dying well

24% of carers who report having as much social contact as they would like

2021/22

of adult social care clients aged 65+ who report having as much social contact as they would like 2021/22

83.5%

of people aged 65+ vears receive flu vaccination 2022/23

473.2

admissions to residential or nursina homes per 100,000 population aged 65+ 2021/22

9.8

care home beds per 100 people aged 75+ 2021

1,970.4 emergency hospital admissions for falls per 100,000 population

aged 65+

2021/22



Available only at a higher geography (West Sussex local authority)



Available only for registered population (e.g. CCG or Sub-ICB geography)

Main causes of ill health, life expectancy and inequalities – Horsham ICT

- Horsham has the highest life expectancy of all the Sussex ICTs both for men, at 81.9 years, and for women, at 86.2 years.
- There are differences between life expectancy in the poorest and wealthiest areas, there is a higher difference for men at 5.2 years compared with women at 2.4 years.
- Healthy life expectancy here is provided at West Sussex level. For men and women healthy life expectancy is well below the current State Pension Age.

81.9 years

Life expectancy at birth for males

England: 78.7, 2021

86.2 years

Life expectancy at birth for females

England: 82.8, 2021

5.2 years

Inequality in life expectancy at birth for males

England: 9.7, 2018 - 20

2.4 years

Inequality in life expectancy at birth for females

England: 7.9, 2018 - 20

20.1 years

Life expectancy at age 65 for males

England: 18.4, 2021

23.5 years

Life expectancy at age 65 for females

England: 21, 2021

3.1 years

Inequality in life expectancy at age 65 for males

England: 5.2, 2018 - 20

1.5 years

Inequality in life expectancy at age 65 for females

England: 4.8, 2018 - 20

63.8 years

Healthy life expectancy at birth for males

England: 63.1, 2018 - 20

63.9 years

Healthy life expectancy at birth for females

England: 63.9, 2018 - 20

10.8 years

Healthy life expectancy at age 65 for males

England: 10.5, 2018 - 20

11.6 years

Healthy life expectancy at age 65 for females

England: 11.3, 2018 - 20

Horsham ICT compared to England



Sir

Worse

Not applicabl



Available at a higher geography (West Sussex local authority) only

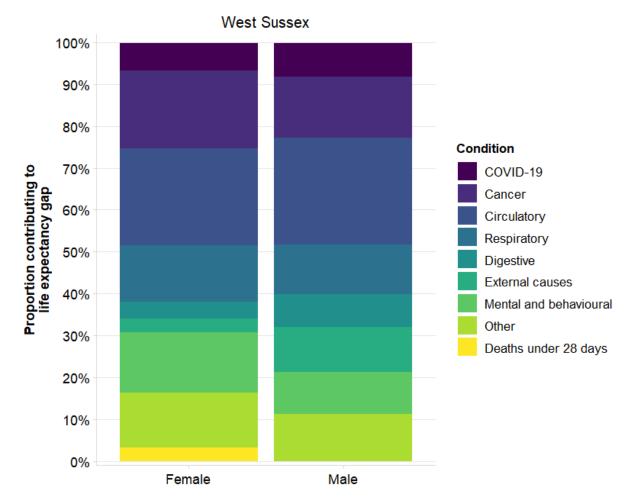
Main causes contributing to the gap in life expectancy – West Sussex

- For males circulatory, external causes (injury, poisoning and suicide) and cancer
- For females cancer, external causes, circulatory and respiratory diseases
- The contribution of external causes and digestives diseases (includes alcohol-related conditions, chronic liver disease, cirrhosis) is greater in Brighton & Hove than across England

Source: Segment Tool (phe.gov.uk)

Causes of death contributing most to inequalities in life expectancy between the most and least deprived quintiles (20%) of each area.

West Sussex; data for 2020 and 2021 combined.



Data for lower tier local authorities has been included for 2014 to 2016 and 2017 to 2019, but have not been included for 2020 to 2021 as the breakdowns based on 2 years of data are not robust due to small numbers.

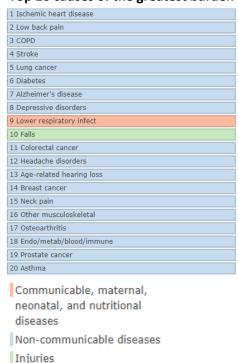


Key risk factors for main causes of death – West Sussex

Only available at UTLA level

If we want to improve population health, we need to understand what the risk factors are for West Sussex's population and whether, and how, we can modify them

Top 20 causes of the greatest burden of ill health



Top 20 risk factors

| 1 Smoking |
|----------------------------------|
| 2 High fasting plasma glucose |
| - 3 High body-mass index |
| 4 High blood pressure |
| 5 Alcohol use |
| 6 High LDL |
| 7 Low temperature |
| 8 Low whole grains |
| 9 Kidney dysfunction |
| 10 Particulate matter |
| 11 Occupational carcinogens |
| 12 Drug use |
| - 13 Low physical activity |
| 14 Low bone mineral density |
| 15 High processed meat |
| 16 High red meat |
| - 17 Low fruit |
| · 18 Secondhand smoke |
| 19 Low nuts and seeds |
| 20 Low legumes |
| Metabolic risks |
| Environmental/occupational risks |
| Behavioral risks |

To improve life expectancy, healthy life expectancy, inequalities in both life expectancy and healthy life expectancy:

- •Tackle major behavioural risks tobacco, diet, exercise, alcohol and drugs
- •Diabetes is a rising concern
- •CVD reduction including controlling blood pressure key and has considerable population impact
- •Cancer major cause of ill health, importance of behaviours and screening
- Mental health
- •Immunisation
- Air quality and cold homes

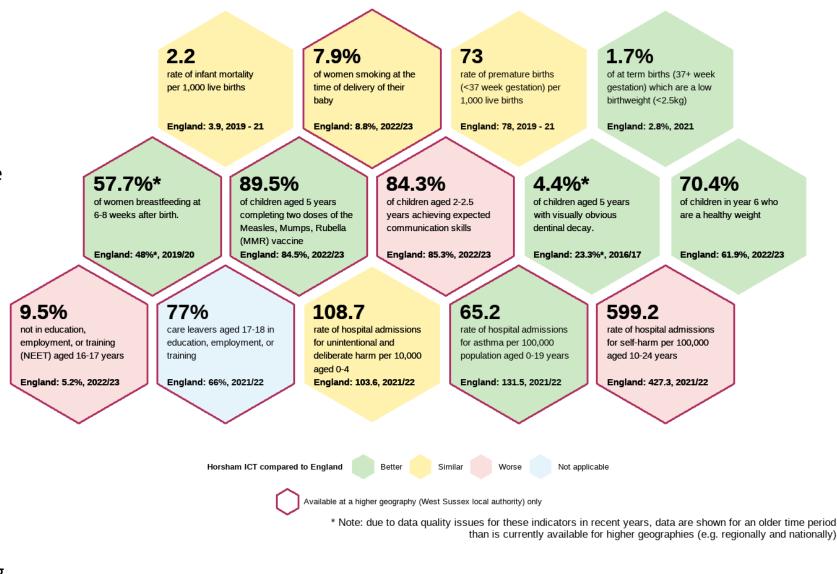
In addition, for healthy life expectancy and inequalities in healthy life expectancy tackle:

- MSK and pain management
- Sensory impairment

Source: Global Burden of Disease Visualisations: Compare (thelancet.com)

Starting well in life in Horsham ICT

- Infant, maternal and child outcomes in Horsham are similar to, or better than, England. Across Sussex ICTs Horsham has the highest percentage of Year 6 children measured at a healthy weight.
- At West Sussex level, compared with England:
 - A higher percentage of young people are not in employment, education or training (or their status is not known)
 - A lower percentage of young children (2 to 2.5 years) assessed as achieving expected communication skills
 - There is a higher level of breastfeeding and MMR take up
 - There is a higher rate of hospital admissions for young people self-harming
 - There is a lower rate of hospital admissions for asthma for 0–19-year-olds.



Living well in Horsham ICT

- Horsham compares favourably with England and many part of Sussex on a range of outcomes including a lower rate of alcohol related admissions, lower percentage of obese adults, higher levels of physical activity and the lowest smoking prevalence amongst all Sussex ICTs (5.6%).
- A lower percentage of adults reported cycling three times a week for travel.

121.9

Health Index Score

England: 100.8, 2021

5.1%

proportion of deaths (mortality) attributable to air pollution

England: 5.5%, 2021

344.8

alcohol specific emergency hospital admissions rate per 100,000 population

England: 626.1, 2021/22

23.6%

of adults drinking more than 14 units of alcohol per week

England: 22.8%, 2015 - 18

16.1%

of adults aged 18 and over classified as obese

England: 25.9%, 2021/22

72.6%

of adults aged 19 and over who are physically active

England: 67.3%, 2021/22

17.6%

of adults aged 19 and over who are physically inactive

England: 22.3%, 2021/22

12.5%

of adults aged 16 and over who walk for travel at least three days per week

England: 15.1%, 2019/20

0.7%

of adults aged 16 and over who cycle for travel at least three days per week England: 2.3%, 2019/20

5.6%

smoking prevalence among those aged 18+ years

England: 12.7%, 2022

14.9%*

Hypertension prevalence (recorded in primary care, QOF)

England: 14%*, 2021/22

1.5%*

COPD prevalence (recorded in primary care, QOF)

England: 1.9%*, 2021/22

10.7%*

Depression prevalence (recorded in primary care, QOF)

England: 12.7%*, 2021/22

10%

of people with a low happiness score

England: 8.4%, 2021/22

23%

of people with a high anxiety score

England: 22.6%, 2021/22

83.5%

of those aged 65 and over receiving flu immunisation

England: 79.9%, 2022/23

53.8%

of at risk individuals aged <65 receiving flu immunisation

England: 49.1%, 2022/23

71.5%

of people receiving vaccination for pneumococcal infection England: 70.6%, 2020/21 80.3%

aged 75+ taking up the COVID-19 spring booster

England: 69.5%, as at 15th Nov 2023

68.7%

HPV coverage (2 doses) among females aged 13-14 years

England: 67.3%, 2021/22

63.4%

HPV coverage (2 doses) among males aged 13-14 years

England: 62.4%, 2021/22

Horsham ICT compared to England



Better



Worse

Not applicable



Available at a higher geography (West Sussex local authority) only

* Note: due to data quality and availability for these indicators in recent years, data are shown for an older time period than is currently available for higher geographies (e.g. regionally and nationally)

Living well in **Horsham ICT**

- Horsham compares favourably on many measures, including higher rates of cancer screening, lower rates of hospital admission for COPD, and lower premature mortality rates for the major causes (CVD, respiratory diseases and cancer).
- At a West Sussex level, the take up of NHS Health Checks is low, as is the percentage of adults with a serious mental illness having a physical health check.

172.6 177.9 197.5 emergency hospital emergency hospital emergency hospital emergency hospital admissions for self-harm admissions for COPD rate admissions for pneumonia admissions for asthma in rate per 100,000 population per 100,000 population aged rate per 100,000 population adults per 100.000 35+ years population England: 163.9, 2021/22 England: 415.1, 2019/20 England: 241.7, 2020/21 England: 44.4, 2020/21 75.4% 3.5% 48.9% 46% of adults with learning Cancer screening coverage of people taking up an NHS of adults with serious disability taking up health for cervical cancer among Health Check following mental illness taking up a physical health check check following invitation those aged 25-49 years invitation England: 51.9%, 2020 England: 67.6%, 2022 England: 7.2%, 2022/23 England: 58.5%, 2022/23 76.2 76.5 55.7% 54.2 Cancer screening coverage of cancers diagnosed at Cancer screening coverage of new cancer diagnoses through the Two Week Wait for breast cancer for bowel cancer stage 1 or 2 pathway. England: 52.3%, 2020 England: 54.4, 2021/22 England: 65.2, 2022 England: 70.3, 2022 89 407.2 10.1 excess premature (under rate of drug related deaths premature (under 75s) premature (under 75s) rate of suicide and mortality rate for cancer 75s) mortality among adults per 100,000 population undetermined injury deaths mortality rate for respiratory diseases per per 100,000 population with serious mental illness per 100,000 population aged 100,000 population 10 years and over England: 389.9, 2018 - 20 England: 5, 2018 - 20 England: 26.5, 2021 England: 121.5, 2021 England: 10.4, 2019 - 21 Not applicable

Horsham ICT compared to England Better Similar Worse Available at a higher geography (West Sussex local authority) only

14.1

premature (under 75s)

cardiovascular diseases per

mortality rate for

100,000 population

England: 76, 2021

Indicators are published at primary care or other organisation level (NHS West Sussex CCG and Sussex ICB - 70F) representing registered patients rather than residents

Ageing well – **Horsham ICT**

Many of these measures are not available at ICT level and for some measures there is no directional assumption (i.e. whether high or low is better or worse). At Horsham level, outcomes in relation to dementia diagnosis and falls are similar to England.

At West Sussex level (compared with England) in 2021/22 they were:

- fewer adults (per 100,000 population) receiving long term residential or nursing home support,
- fewer permanent admissions to a care home per 100,000 population,
- Fewer adults (per 100,000) receiving long term support in the community.
- A lower percentage of carers said they had as much social contact as they would like.
- There was a lower percentage of people, aged 65 years or over, who were still at home 91 days after hospital discharge

59.4

of people aged 65+ estimated to have dementia who have received a diagnosis England: 63, 2023

1,970.4

emergency hospital admissions for falls rate per 100,000 population aged England: 2,099.9, 2021/22

60.1%

of people aged 65+ still at home 91 days after a discharge from hospital

England: 81.8%, 2021/22

9.8

Care home beds per 100 people aged 75+ years

England: 9.4, 2021

473.2

Permanent admissions to residential or nursing homes per 100,000 population aged 65+ years England: 538.5, 2021/22

53.6

Estimated number of self-funding care home

England: 37, 2022/23

1,035*

of adult social care clients (aged 65+) receiving long term nursing support per 100,000 population

England: 1,271*, 2021/22

226*

of adult social care clients (aged 65+) receiving long term residential support per 100,000 population England: 316*, 2021/22

1.602*

of adult social care clients (aged 65+) receiving long term community support per 100,000 population

England: 2,838*, 2021/22

3,475

of adult social care clients (aged 65+) receiving any long term support per 100,000 population

England: 5,055, 2021/22

39%

of adult social care clients aged 65+ who report as much social contact as they would like England: 40.6%, 2021/22

of carers who had as much social contact as they would like

England: 28%, 2021/22

24%

Horsham ICT compared to England



Better

Similar

Not applicable

Available at a higher geography (West Sussex local authority) only

* Note: rates have been calculated on rounded values and may not match outputs published elsewhere exactly

0.5% Palliative care prevalence on primary care records (QOF)

England: 0.5% 2021/22

24.2 Winter mortality index (all ages)

England: 36.2 Aug 2020 - Jul 2021

23.6 Winter mortality index (aged 85+)

England: 42.8 Aug 2020 - Jul 2021

27.9% of deaths occur at home 38.2% of deaths occur in hospital 27.4% of deaths occur in care 4.9% of deaths occur in hospices

England: 28.7% 2021

England: 44% 2021

England: 20.2% 2021

England: 4.4% 2021

Horsham ICT compared to England

Available at a higher geography (West Sussex local authority) only

Indicators are published at primary care or other organisation level (NHS West Sussex CCG and Sussex ICB - 70F) representing registered patients rather than residents

There are a limited set of indicators available around dying well.

- In relation to Horsham residents, a similar percentage of people die at home and within care homes, 27.9% and 27.4% respectively.
- A lower percentage of Horsham residents die in hospital compared with England, 38% of deaths compared with 44% of deaths nationally.

GP Primary Care in Horsham ICT

- Within Horsham ICT there are 3 PCNs with 12 GP Practices with very varying levels of population
 - 2 Practices(Park, Holbrook) have >15k registered patients.
 - 2 GP practices (Cowfold & Rudgwick) have <5k registered patients.
- Flu vaccinations for 65+ are higher than the Sussex average.
- The registered population change in Horsham ICT is lower than the Sussex average.
- CQC ratings, show there are 2 GP Practices in Horsham which require improvement or rated Key inadequate.
- The number of Dementia annual care plans are lower than the Sussex average.

+0.4% Registered population change in last 12months

Sx: +0.7%

10x Good 1x Rq Improvm't 1x Inadequate **GP Practices Overall CQC** Rating

2,316 Patients (Weighted) Per GP FTE Less Trainees Sx: 2.343

983 Patients (Weighted) Per GP & Nurse & DPC FTF Sx: 955

73%

Av. Patient Survey **Overall Practice** Experience - Good Sx: 74.1%

94.7 Av. QOF % (Score Overall)

Sx: 92.5%

6.8

Av. OOF PCA Adjustment Rate % (Score Overall) Sx: 7.8

61.9% **Dementia Annual** Care Plans % (target

Sx: 64.6%

75%)

80.1%

Learning Disabilities Health Checks Rolling 12m

Sx: 74.7%

54.1%

Diabetes NDA Type 2 **8 Core Processes**

Sx: 53.3%

35.0%

Diabetes NDA Type 2 All 3 Treatment **Targets** Sx: 33.5%

Sx: 81.3%

86.2%

Flu Vaccination 65+

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

354

GP Referrals 12m (OP Proxy) Per 1000 Weighted Population

Sx: 379

226

A&E Attendances 12m Per 1000 Weighted Population Sx: 208

Long term Conditions: QOF registers – Horsham ICT

This slide looks at the prevalence of long-term conditions. This is recorded prevalence on GP registers and as such may reflect a higher (or lower) prevalence amongst the local population and/or better (or worse) detection and recording by practices.

- The prevalence of Cancer in Horsham ICT is higher than the Sussex average
- Obesity prevalence is 1.25% lower than the Sussex average
- The prevalence of depression in Horsham ICT is lower than the Sussex average
- Hypertension prevalence is higher than the Sussex average

6.64%

Asthma Prevalence % of 6+ population

Sx: 6.79%

1.46%

COPD Prevalence % of total population

Sx: 1.89%

2.67%

Atrial Fibrillation
Prevalence
% of total population
Sx: 3.17%

3.24%

Coronary Heart
Disease Prevalence
% of total population
Sx: 3.31%

1.96%

Stroke Prevalence % of total population

Sx: 2.11%

0.75%

Heart Failure
Prevalence
% of total population
Sx: 0.95%

7.04%

Obesity Prevalence % over 18 population

Sx: 8.29%

6.21%

Diabetes Prevalence % over 17 population

Sx: 6.85%

4.27%

Cancer Prevalence % of total population

Sx: 4.06%

3.87%

Chronic Kidney
Disease Prevalence
% of >18 population
Sx: 4.71%

0.42%

Palliative Prevalence % of total population

Sx: 0.49%

0.87%

Dementia Prevalence % of total population

Sx: 0.92%

Key

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex
In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

10.96%

Depression Prevalence % of >18 population **Sx: 13.74**% 0.59%

Learning Difficulties
Prevalence
% of >18 population
Sx: 0.58%

0.82%

Mental Health
Prevalence
% of total population
Sx: 1.07%

15.76%

Other Hypertension Prevalence % of total population **Sx: 14.98**

Primary Care 2 – Horsham ICT

- COVID booster uptake in Horsham ICT was in the highest quartile for Sussex.
- Flu vaccination rate for 65+ is above the Sussex average in Horsham.

89.4%
Covid Booster uptake 22/23

Sx: 84%

86.2% 65+ flu vaccination rate

Sx: 81.3%

44.7% Flu vacc rate, 6m to under 50 at risk

Sx: 38.5%

Key

- Better than Sussex Average
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- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

Mental Health – West Sussex

- The proportion of patients starting Early Intervention in Psychosis services within 2week is lower than the Sussex Average.
- The proportion of Adult MH Admissions in which there was no prior contact with services is lower than the Sussex Average.

Figures are only available at East Sussex, West Sussex and Brighton Areas

13,815

NHS Talking Therapies Access rate (22-23)Sx: 38,072

52.7%

NHS Talking Therapies recovery rate (Av Apr-Aug 23) Sx: 51.0%

59.4%

EIP: % of people starting treatment within 2 wks (22-23)Sx: 67.7%

65.4%

Dementia Care Planning and Post Diagnostic Support (Av Apr-Aug 23) Sx: 66.4%

62.7%

Dementia Diagnosis Rate (Av Apr-Aug 23) Sx: 63%

4.5%

Adult MH Admissions with no prior contact (22-23)Sx: 5.7%

89.7%

Adult Discharges followed up within 72 hrs (Av Oct22-Jun23) Sx: 88.3%

109,550

Community Mental **Health Access** (2+ contacts) (Jul22-Jun23) Sx: 45,890

3,577

Physical Health Checks for people with SMI (YTD Jun-23) Sx: 7,166

103.845

CYP Access (1+ contact) (22-23)

Sx: 237.410

7.530

CYP Access 18-25 vr olds (22-23)

Sx: 15.741

3,751

Learning Disability Registers and AHCs delivered by GPs (22-23)

Sx: xx

Key

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- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

860

Perinatal mental health: Access rate to specialist Perinatal MH (22-23)

Sx: 780

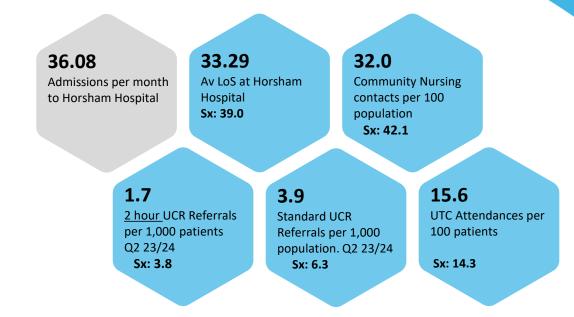
10.08%

Perinatal mental health: Access rate to specialist Perinatal MH (YTD 23)

Sx: 10.0%

Community Health Services – Horsham ICT

- UTC attendances (per 100) by Horsham ICT patients is higher than the Sussex average.
- The average length of stay of patients in Horsham ICT Community beds is lower than the Sussex average.
- The number of Community nursing contacts per 100 population is lower than the Sussex average
- Urgent Community Response (UCR) both 2-hour referrals and standard referrals are lower than the Sussex average.



Figures above are for the full year 22/23 unless stated otherwise

Key

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 - No comparison made

(lowest or highest quartile does not mean good or bad)

Planned Care Alternatives and Cancer Care – Horsham ICT

- Lower GI suspected cancer referrals for Horsham ICT patients are higher than the Sussex average.
- The rate of new cancer cases, per 100k population, are higher for Horsham ICT than England rates.
- Cancer 2-week waits are higher than England rates.
- The diagnosis rates for 2-week referrals is a higher than the England average.

21.0

Advice and Guidance Referrals per 1,000 population in 22/23

Sussex: 19.3

3.9%

Patient initiated DNA rate in 22/23

Sussex: 5.1%

551.0

New cancer cases (per 100k population)
England: 456

107.4

2wk wait referrals (5yr indirectly age-sex standardised referral ratio)

England: 100

7.63%

2wk referrals resulting in a diagnosis of cancer

England: 6.8%

Key

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- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

60.7%

Lower GI Suspected Cancer referrals with a FIT result, 23/24

Sussex: 53.9%

Acute Planned Care – Horsham ICT

- The percentage of Horsham ICT patients waiting 52+ or 65+ weeks for treatment at PRH is higher than the Sussex average.
- New outpatient appointments is lower than the Sussex average whilst follow up outpatient appointments are higher.

10,718Total RTT Waiting List for all patients at PRH

1,963 (18.3%)
Patients waiting 52+
weeks for all patients
at PRH
Sussex: 9.4%

913 (8.5%) Patients waiting 65+ weeks for all patients at PRH

Sussex: 2.8%

131.83

New Outpatient Appointments (per 100 population) Sussex: 124.56 250.40

Follow Up Outpatient Appointments (per 100 population) Sussex: 271.98 75.89

Outpatient Procedures (per 100 population)

Sussex: 78.38

Key

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- At Sussex Average
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- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

27.79

Daycase Inpatient Admissions (per 100 population)

Sussex: 27.49

1.87

Overnight Inpatient Admissions (per 100 population) Sussex: 2.00

41:15:1

Ratio of Outpatient:
Daycase: Overnight
Procedures
(of available activity types)

Sussex: 39:14:1

Figures above are for the full year 22/23 unless stated otherwise

Urgent and Emergency Care 1 – Horsham ICT

- All of these 111, 999 and A&E rates are lower than the Sussex average.
- The volume of 111 calls per 1,000 population is in the lowest quartile for Sussex.
- Emergency admission rate for Horsham ICT patients is lower than the Sussex rate per 100 population.

75.07111 Calls per 1,000 population

Sx: 98.12

42.57

999 Calls per 1,000 population (Former H&MSx CCG geography only)

Sx: 48.27

38.14

Ambulance Mobilisations per 1,000 population (Former H&MSx CCG geography only) Sx: 43.35

14.43

Same Day Urgent Care A&E Attendances rate /100 pop Sx: 15.36 34.71

A&E Attendance rate per 100 population

Sx: 37.95

18.1%

Of A&E Attendances were subsequently Admitted

Sx: 20.0%

8.12

Emergency Admission rate per 100 population **Sx: 9.35**

80.0%

Of Emergency Admissions came via A&E Sx: 80.8% 10.83

Emergency Admissions Ambulatory Care Sensitive Conditions per 1,000 pop

Sx: 13.21

Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
 - No comparison made

(lowest or highest quartile does not mean good or bad)

Figures above are for the full year 22/23

Acute Inpatient Emergency Care – Horsham ICT

Key

- The rate of Emergency admissions for Horsham ICT patients are lower than the Sussex average
- The Length of stay of Horsham ICT Emergency admissions are lower than the Sussex average for patients staying over 14 days and over 21 days

212 15.29 8.12 **Emergency Admission** Average Acute Beds **Average Acute Beds** Occupied per 10,000 rate per 100 Occupied population population Sx: 9.35 Sx: 16.8 6.87 111.23 129 Average Nights in Emergency Em.Admissions with a Hospital for LoS >=14 days Admissions with a LoS EmergencyAdmissions per 10,000 pop >=14 days per month Sx: 6.58 Sx: 131.10 67.10 **78** Em. Admissions with a Emergency Better than Sussex Average LoS >=21 days Admissions with a LoS At Sussex Average >=21 days per month per 10,000 pop Worse than Sussex Average Sx: 131.10 In the lowest number quartile for Sussex

In the inter-quartile period for Sussex In the highest quartile for Sussex

(lowest or highest quartile does not mean good or bad)

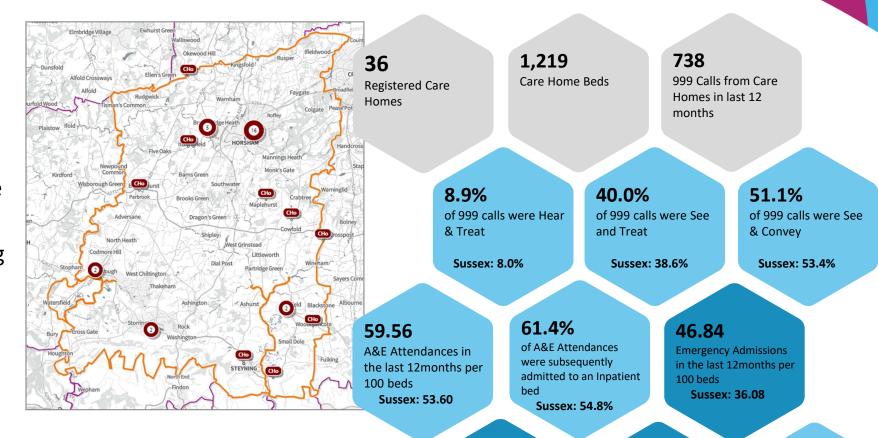
No comparison made

Better health and care for all

Figures above are for the full year 22/23 unless stated otherwise

Care Homes: Urgent Healthcare use – Horsham ICT

- Horsham ICT emergency admissions in the past year per 100 beds were higher than the Sussex average.
- Emergency respiratory admissions for Horsham ICT are higher than the Sussex average.
- Emergency admissions following a fall are higher than the Sussex average.



Key

- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

18.87

Emergency Admissions for Respiratory in the last 12months per 100 heds

Sussex: 13.01

7.79

Emergency Admissions for Injuries following Falls in the last 12months per 100 beds

Sussex: 5.20

1.97

Emergency Admissions for Non Injurious Falls in the last 12months per 100 beds

Sussex: 1.63

Adult Social Care – Horsham ICT

Note no social care data have been broken down to ICT level for West Sussex.

Data have been divided in East Sussex and Brighton and Hove.

This information is illustrative.

Key

- In the lowest Quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
 No comparison made

(lowest or highest quartile does not mean good or bad)

XX

Contacts received by ASC in last 12m (per 100k Adult pop) Sussex xx XX

Proportion of people 65+ who are still at home 3m after rehab/intermediate care Sussex xx

XX

of Adult Population receiving Long Term Support Sussex xx XX

of Adult population In permanent Nursing Care Sussex xx XX

of Adult population in permanent Residential Care Sussex xx XX

of Adult population in Community receiving long term support Sussex xx

XX

Proportion of service users who reported enough social contact England: 40.6% 21/22

XX

Proportion of carers who reported enough social contact England: 28%

1giano: 285 21/22 XX

Av service user's Quality of Life Score from ASC Survey Sussex xx XX

Av Carers Quality of Life Score from ASC Survey Sussex xx

XX

S42 Safeguarding episodes in last 12m (per 100k Adult pop) Sussex xx XX

Other safeguarding enquiries in last 12m (per 100k Adult pop)
Sussex xx

XX

Safeguarding concernsin last 12m (per 100k Adult pop) Sussex xx XX

Not Safeguarding Concern/Enquiry in last 12m (per 100k Adult pop)

Sussex xx

Links to key resources

Local mappings sites

- Community insight Brighton & Hove <u>Local Insight (communityinsight.org)</u>
- East Sussex in figures <u>Welcome to ESiF (eastsussexinfigures.org.uk)</u>

JSNAs

- Brighton & Hove <u>Joint Strategic Needs Assessment (JSNA) (brighton-hove.gov.uk)</u>
- East Sussex East Sussex Joint Strategic Needs Assessment | (eastsussexjsna.org.uk)
- West Sussex <u>Welcome to the West Sussex JSNA West Sussex JSNA Website</u>

National tools with local area data

- SHAPE tool SHAPE Shape (shapeatlas.net) (registration required)
- Fingertips Public Health Profiles Public health profiles OHID (phe.org.uk)
- Census area profile builder <u>Build a custom area profile Office for National Statistics (ons.gov.uk)</u>

NHS Sussex ICB

- Sussex Insight bank https://int.sussex.ics.nhs.uk/nhs-sussex/tools-for-your-work/insight-bank/
- ICB Information Station