Uckfield Community of Practice

Based on the NHS view of the
JSNAA Scorecards 2017
East Sussex Public Health
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### Key Statistics for Uckfield Community of Practice

<table>
<thead>
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<th>Indicator</th>
<th>Number per year</th>
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<td>1.02</td>
<td>GP registered population aged 0-19 yrs (%), Oct 2015</td>
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<td>1.03</td>
<td>GP registered population aged 20-64 yrs (%), Oct 2015</td>
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<td>1.04</td>
<td>GP registered population aged 65+ yrs (%), Oct 2015</td>
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<td>1.18</td>
<td>Live births per 1,000 women aged 15-44 yrs, 2014-15</td>
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<td>2.02</td>
<td>Income Deprivation (as a percentage), from ID 2015 (M)</td>
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<tr>
<td>2.04</td>
<td>Children in low-income families (%), Aug 2014 (M)</td>
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<td>3.06</td>
<td>Excess weight in 10-11 year olds (%), 2012-13-2014/15 (M)</td>
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<td>3.09</td>
<td>GP reported prevalence of smoking aged 15+, 2015/16</td>
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<td>4.04</td>
<td>Life expectancy at birth (yrs), 2013-15</td>
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<td>All-cause mortality (SMR), 2013-15</td>
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<td>Mortality from causes considered preventable (SMR), 2014-15</td>
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<td>GP reported prevalence of dementia (%), 2015/16</td>
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<td>4.23</td>
<td>GP reported prevalence of hypertension (%), 2015/16</td>
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<td>4.26</td>
<td>GP reported prevalence of CHD (%), 2015/16</td>
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<td>4.29</td>
<td>GP reported prevalence of stroke or TIA (%), 2015/16</td>
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<td>GP reported prevalence of atrial fibrillation (%), 2015/16</td>
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<td>4.34</td>
<td>GP reported prevalence of heart failure (%), 2015/16</td>
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<td>4.49</td>
<td>GP reported prevalence of asthma (%), 2015/16</td>
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<td>4.52</td>
<td>GP reported prevalence of COPD (%), 2015/16</td>
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<td>4.57</td>
<td>GP reported prevalence of diabetes aged 17+ (%) , 2015/16</td>
<td>1,821</td>
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<td>4.60</td>
<td>GP reported prevalence of epilepsy aged 18+ (%), 2015/16</td>
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<td>4.62</td>
<td>GP reported prevalence of CKD aged 18+ (%), 2015/16</td>
<td>1,423</td>
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<td>4.65</td>
<td>GP reported prevalence of learning disabilities aged 18+ (%), 2015/16</td>
<td>268</td>
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<td>4.72</td>
<td>First outpatient attendances (SAR), 2015/16</td>
<td>14,632</td>
<td>90</td>
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<td>4.74</td>
<td>All MIU and A&amp;E attendances (SAR), 2015/16</td>
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<td>4.78</td>
<td>All elective admissions (SAR), 2014/15 to 2015/16</td>
<td>6,076</td>
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<td>4.80</td>
<td>All emergency admissions (SAR), 2014/15 to 2015/16</td>
<td>3,296</td>
<td>84</td>
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<td>6.01</td>
<td>People providing one hour or more of unpaid care per week (%), 2011 (M)</td>
<td>4,292</td>
<td>10.7</td>
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</table>

**Significance Indicators**
- **Significantly worse than East Sussex**
- **Significantly better than East Sussex**
- **Significantly higher than East Sussex**
- **Significantly lower than East Sussex**
- **Not significantly different to East Sussex**
- **Significance not tested**
Introduction

Uckfield Community of Practice is one of four in High Weald Lewes Havens CCG. This narrative describes Uckfield in the East Sussex context. It is based on 2017 JSNAA scorecard data, presented in the form of indicator tables (Appendix 1) in which East Sussex localities/communities of practice and CCGs are RAG-rated against East Sussex. Further tables and charts summarise key statistics and specific topics (such as hospital admission and attendance rates) for this community of practice.

For ease of reference, throughout the rest of this area summary the term ‘localities’ is used to refer to the 4 HWLH CCG communities of practice as well as the 3 localities in EHS CCG and the 3 localities in HR CCG.

The RAG-rated tables highlight statistically significant differences between Uckfield and East Sussex. Individual JSNAA scorecards are referenced alongside the indicator titles; if data has been modelled from LA to NHS geographies indicator titles are flagged with (M). For indicators where locality or CCG data is not available, values for Wealden District (based on the LA view JSNAA scorecards and area summaries) are discussed.

For more in-depth information on how GP practices, as well as localities and CCGs, compare to East Sussex, this report should be read alongside the NHS view JSNAA indicator scorecards.

Here ‘significance’ refers to statistical significance at the 95% confidence level.

In the tables (Appendix 1) statistically significant differences between Uckfield and East Sussex are flagged in red/green and dark blue/light blue and the indicator values are given. But note that, for values based on large numbers, even small, possibly unimportant, differences can be statistically significant. Conversely, values based on small numbers can be substantially, but not (in statistical terms) significantly different to East Sussex.

Some rates are age and/or sex standardised. For those that are not, such as the GP-reported prevalence of diabetes and other chronic diseases, it is important to take into account the age profile of the population, as they are likely to be higher in areas with older age profiles.
NHS and LA view JSNAA scorecards and area summaries can be downloaded from www.eastsussexjsna.org.uk/scorecards.

The following products can also be downloaded from the East Sussex JSNAA website:

**GP Practice Profiles and Locality/Community of Practice Profiles**
Spine charts are used to compare the GP practice or locality/community of practice to East Sussex for all available JSNAA indicators.
See http://www.eastsussexjsna.org.uk/PracticeProfiles2017

**Local Needs and Assets Profiles**
East Sussex, its districts/boroughs and CCGs are compared to England. RAG-rated tables similar to those in Appendix 1 (but with England as the benchmark) are included.
See http://www.eastsussexjsna.org.uk/overviews/localneedsprofile.aspx
Uckfield has amongst the highest percentages of working age people and the lowest of people age 85 year olds and over of all East Sussex localities. The dependency ratio (of non-working age people compared to working age people) is significantly lower than for East Sussex, as are rates of lone parent households and births to teenage mothers.

Table 1 shows the estimated population changes between 2015 and 2021 for specific age groups as well as all ages. Using projections modelled from East Sussex districts and boroughs, the table shows that over the next 6 years some age groups are projected to increase in size whilst others will decrease in size. The net effect is that the population of Uckfield is estimated to increase, with the largest estimated increase in those aged 85 years and over.
Table 1: Population projections for all persons (number and percentage change) showing the increase (positive) or decrease (negative) from 2015 to 2021 (modelled)

<table>
<thead>
<tr>
<th>Population Change</th>
<th>East Sussex</th>
<th>HWLH CCG</th>
<th>Uckfield Community of Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-19 years</td>
<td>900</td>
<td>1,000</td>
<td>300</td>
</tr>
<tr>
<td></td>
<td>0.8%</td>
<td>2.8%</td>
<td>3.1%</td>
</tr>
<tr>
<td>20-64 years</td>
<td>-2,100</td>
<td>700</td>
<td>400</td>
</tr>
<tr>
<td></td>
<td>-0.7%</td>
<td>0.7%</td>
<td>1.5%</td>
</tr>
<tr>
<td>65+ years</td>
<td>14,600</td>
<td>4,700</td>
<td>1,300</td>
</tr>
<tr>
<td></td>
<td>11.0%</td>
<td>12.5%</td>
<td>13.3%</td>
</tr>
<tr>
<td>85+ years</td>
<td>3,200</td>
<td>1,200</td>
<td>350</td>
</tr>
<tr>
<td></td>
<td>15.8%</td>
<td>23.8%</td>
<td>25.9%</td>
</tr>
<tr>
<td>All Ages</td>
<td>13,500</td>
<td>6,900</td>
<td>2,050</td>
</tr>
<tr>
<td></td>
<td>2.6%</td>
<td>4.2%</td>
<td>4.9%</td>
</tr>
</tbody>
</table>

Wider determinants

Uckfield has some of the lowest levels of income deprivation (including children and older people) and employment deprivation, of all East Sussex localities. It also has amongst the lowest rates of working age people claiming JSA, UC or ESA. It has a significantly lower percentage (the lowest of all localities) of households able to access a GP within 15mins by public transport or walking.
Educational achievement is similar to East Sussex. Uckfield is amongst the lowest for pupils with SEN on SEN support, and is significantly lower than East Sussex for 16-18 year olds NEET and working age population with no or low qualifications.

Compared to East Sussex a significantly higher percentage of households are owned and a significantly lower percentage rented. A significantly lower percentage of households are overcrowded.

It has significantly lower rates of crime and the lowest of all East Sussex localities.

### Overall health status

Self-reported ill health and LLTI or disability, and premature all-cause mortality and preventable mortality, are significantly lower than in East Sussex. But Uckfield has the lowest life expectancy at age 75 of all East Sussex localities.

### Healthy lifestyles

#### Pregnancy and infancy

Uckfield has significantly higher rates of breastfeeding initiation and breastfeeding at 6-8 weeks than East Sussex and the lowest rate of low birth weight babies of all localities.

#### Physical activity and excess weight

It has similar levels of overweight or obese children to East Sussex. Wealden District has the highest levels of adults achieving 150 minutes physical activity per week, and the lowest levels of overweight or obese adults, of all districts/boroughs.

#### Smoking

It has significantly lower levels of mothers who are current smokers at the time of delivery, and of smoking quitters, than East Sussex. Wealden District has significantly lower smoking-attributable mortality and the lowest of all the districts and boroughs.
Alcohol and drug misuse

It has significantly lower rates of young people in drug or alcohol treatment and adults in drug treatment than East Sussex. Wealden District has significantly lower alcohol-related hospital admissions and the lowest of all the districts/boroughs.

Sexual health

Wealden District has the lowest under 18s conceptions and chlamydia detection rates (significantly lower than East Sussex for people aged 25+) of all the districts/boroughs. The gonorrhoea detection rate is also lower than for East Sussex.

Accidents and injuries

A&E attendances and emergency admissions for accidents and injuries in 0-4 year olds are significantly lower than for East Sussex and amongst the lowest of all the localities. Emergency admission rates for older children and young people, and for falls injuries in older people, are similar to East Sussex. Wealden District has a significantly higher rate of people killed or seriously injured on the roads than East Sussex.

Health protection

Uckfield is significantly worse than East Sussex for eligible people receiving an NHS health check, but significantly better for the uptake of screening for cervical, breast and bowel cancers. It is similar to or significantly better than East Sussex for child immunisations, but significantly worse for immunisations for persons aged 65 years or over.

Disease and poor health

Mental health and wellbeing

Uckfield has a significantly lower incidence of depression, prevalence of severe mental illness, emergency mental health admissions and rate of working age people claiming ESA due to mental health problems, than East Sussex.
Circulatory

It generally has significantly lower prevalences of circulatory conditions (not age-standardised) than East Sussex. It also has significantly lower emergency CHD admissions and premature mortality due to circulatory diseases.

Cancer

Premature mortality due to cancer is similar to East Sussex. HWLH CCG has similar incidence and mortality to East Sussex for lung, colorectal, breast and prostate cancers.

Respiratory

Uckfield has significantly lower asthma and COPD prevalences (not age-standardised) than East Sussex. It also has significantly lower emergency admissions due to asthma (and emergency admissions per 100 registered asthmatics) and emergency admissions due to COPD. Premature mortality from respiratory conditions is also significantly lower.

Diabetes

It has a significantly lower prevalence of diabetes (not age-standardised) and lower emergency admissions for diabetes than East Sussex.

Other chronic conditions

It has a significantly lower prevalence of CKD but a significantly higher prevalence of learning disabilities (second highest of all localities).

Avoidable admissions

It has significantly lower emergency admissions for under 20s admitted for LRTIs and diabetes/epilepsy/asthma and for chronic and acute ACS conditions than East Sussex.

Hospital admissions and attendances

Uckfield has significantly lower first outpatient attendances and DNA rates than East Sussex. It has significantly higher A&E/MIU attendance rates for all ages. Elective admissions are significantly lower for people of all ages and people aged 65+. Emergency admissions are significantly lower for people of all ages, and those aged 70-84 and 85+.
The following graphs present the age-specific overall attendance and admission rates for Uckfield compared to East Sussex.
Social care

Children’s services

Uckfield is significantly lower than East Sussex for referrals to children’s social care, children on child protection plans and looked after children.

Carers

Compared to East Sussex Uckfield is significantly lower for: unpaid carers, working age people claiming Carers Allowance, carers known to adult social care and those receiving self-directed support.

Adult social care

It is significantly lower than East Sussex for: requests for ASC support, adults receiving direct payments self-directed support, long term support, community equipment, ASC funded lifeline or telecare, and adults in council supported residential or nursing care.

NHS dental services

Compared to East Sussex significantly higher percentages of children and working age people, but a similar percentage of older people, access East Sussex NHS general dental services.

GP patient survey

The percentage of patients responding to the GP Patient Survey is significantly higher than for East Sussex. But the percentages of patients reporting a good experience of their surgery, of making appointments and satisfaction with opening hours are all significantly lower.
## Appendix 1: Scorecard Summary Tables

<table>
<thead>
<tr>
<th>Ref</th>
<th>Indicator</th>
<th>East Sussex</th>
<th>EHS CCG</th>
<th>H&amp;R CCG</th>
<th>HWLH CCG</th>
<th>Eastbn.</th>
<th>Hailsham &amp; Polegate</th>
<th>Seaford</th>
<th>Bexhill</th>
<th>Hastings &amp; St Leonards</th>
<th>Rural Rother</th>
<th>Crowbr.</th>
<th>Havens</th>
<th>Lewes</th>
<th>Uckfield</th>
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<tr>
<td>1.11</td>
<td>Dependency ratio, Oct 2015</td>
<td>0.69</td>
<td>0.72</td>
<td>0.69</td>
<td>0.66</td>
<td>0.67</td>
<td>0.78</td>
<td>0.86</td>
<td>0.89</td>
<td>0.59</td>
<td>0.76</td>
<td>0.69</td>
<td>0.65</td>
<td>0.64</td>
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<td>1.12</td>
<td>Lone older person (aged 65+) households (%), 2011 (M)</td>
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<td>18</td>
<td>16</td>
<td>14</td>
<td>17</td>
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<td>20</td>
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<td>Lone parent households (%), 2011 (M)</td>
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<td>1.14</td>
<td>Non-White British population (%), 2011 (M)</td>
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<td>8</td>
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<tr>
<td>1.15</td>
<td>Non-White British pupils (%), 2016 (M)</td>
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<td>Pupils with English as an additional language (per 1,000), 2016 (M)</td>
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<td>31</td>
<td>108</td>
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<td>57</td>
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<td>48</td>
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<tr>
<td>1.18</td>
<td>Live births per 1,000 women aged 15-44 yrs, 2014-15</td>
<td>59</td>
<td>61</td>
<td>61</td>
<td>54</td>
<td>60</td>
<td>68</td>
<td>55</td>
<td>55</td>
<td>64</td>
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<td>50</td>
<td>65</td>
<td>48</td>
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<tr>
<td>1.19</td>
<td>Live births per 1,000 women aged 15-19 yrs, 2014-15</td>
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<td>15</td>
<td>17</td>
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<td>5</td>
<td>16</td>
<td>3</td>
<td>8</td>
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<tr>
<td>1.20</td>
<td>Live births per 1,000 women aged 35-44 yrs, 2014-15</td>
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<td>35</td>
<td>33</td>
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<table>
<thead>
<tr>
<th>Ref</th>
<th>Indicator</th>
<th>East Sussex</th>
<th>EHS CCG</th>
<th>H&amp;R CCG</th>
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<th>Havens</th>
<th>Lewes</th>
<th>Uckfield</th>
</tr>
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<tbody>
<tr>
<td>2.02</td>
<td>Income Deprivation (as a percentage), from ID 2015 (M)</td>
<td>13</td>
<td>13</td>
<td>18</td>
<td>9</td>
<td>14</td>
<td>12</td>
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<td>15</td>
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<td>6</td>
<td>15</td>
<td>9</td>
<td>7</td>
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<tr>
<td>2.04</td>
<td>Children in low-income families (%), Aug 2014 (M)</td>
<td>19</td>
<td>19</td>
<td>25</td>
<td>12</td>
<td>20</td>
<td>19</td>
<td>14</td>
<td>23</td>
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<td>9</td>
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<td>12</td>
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<tr>
<td>2.05</td>
<td>Income Deprivation Affecting Older People Index (IDAOPI) (as a percentage), from ID 2015 (M)</td>
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<td>15</td>
<td>18</td>
<td>10</td>
<td>16</td>
<td>13</td>
<td>10</td>
<td>15</td>
<td>23</td>
<td>12</td>
<td>8</td>
<td>16</td>
<td>10</td>
<td>9</td>
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<tr>
<td>2.06</td>
<td>Households in fuel poverty (%), 2014 (M)</td>
<td>8</td>
<td>8</td>
<td>10</td>
<td>9</td>
<td>8</td>
<td>7</td>
<td>7</td>
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<td>9</td>
<td>7</td>
<td>11</td>
<td>8</td>
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<tr>
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<td>Pupils receiving the pupil premium (%), Jan 2016 (M)</td>
<td>21</td>
<td>20</td>
<td>27</td>
<td>14</td>
<td>22</td>
<td>19</td>
<td>17</td>
<td>24</td>
<td>30</td>
<td>19</td>
<td>9</td>
<td>24</td>
<td>14</td>
<td>11</td>
</tr>
<tr>
<td>2.08</td>
<td>Households with dependent children and no adults in employment (%), 2011 (M)</td>
<td>13</td>
<td>12</td>
<td>17</td>
<td>9</td>
<td>13</td>
<td>11</td>
<td>10</td>
<td>16</td>
<td>20</td>
<td>10</td>
<td>6</td>
<td>14</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>2.09</td>
<td>Employment Deprivation (as a percentage), from ID 2015 (M)</td>
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<td>Working age people claiming JSA and Universal Credit (%), Aug 2016 (M)</td>
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<td>1.4</td>
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<td>2.12</td>
<td>Households with no cars or vans (%), 2011 (M)</td>
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<td>Households able to access a GP practice in 15 min by public transport/walking (%), 2014 (M)</td>
<td>78</td>
<td>81</td>
<td>86</td>
<td>65</td>
<td>84</td>
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<td>66</td>
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### Wider determinants - Education

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<tr>
<td>2.16</td>
<td>Pupils (at age 5) reaching a good level of development in the EYFS (%)</td>
<td>75</td>
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<td>76</td>
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<td>77</td>
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<td>Pupils (at age 11) achieving the expected standard at Key Stage 2, Jun 2016 (%)</td>
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<td>49</td>
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<td>2.18</td>
<td>Average GCSE Attainment 8 score for pupils (at age 16) at Key Stage 4, Jun 2016 (%)</td>
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<td>Working age population with no or low qualifications (%)</td>
<td>30</td>
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<td>Pupils with special educational needs (SEN) on SEN Support (per 100,000)</td>
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<td>82</td>
<td>98</td>
<td>88</td>
<td>82</td>
<td>86</td>
<td>77</td>
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<td>73</td>
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<td>Pupils with a statement of SEN or an EHCP (per 100,000)</td>
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<td>2.22</td>
<td>Young people aged 16-18 yrs NEET (monthly rate per 1,000)</td>
<td>32</td>
<td>35</td>
<td>35</td>
<td>24</td>
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<td>32</td>
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### Wider determinants - Housing

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<td>2.25</td>
<td>Households that are overcrowded (%)</td>
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<td>2.26</td>
<td>Households with no central heating (%)</td>
<td>2.8</td>
<td>2.6</td>
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<td>2.8</td>
<td>2.1</td>
<td>1.8</td>
<td>2.4</td>
<td>4.5</td>
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<td>Households owned outright or with a mortgage/loan (%)</td>
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<td>69</td>
<td>64</td>
<td>75</td>
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<td>77</td>
<td>78</td>
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<td>2.28</td>
<td>Socially rented households (%)</td>
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<td>12</td>
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<td>12</td>
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<td>7</td>
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<td>2.29</td>
<td>Privately rented households (%)</td>
<td>18</td>
<td>18</td>
<td>22</td>
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<td>22</td>
<td>11</td>
<td>13</td>
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<td>11</td>
<td>16</td>
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<td>2.30</td>
<td>Persons living in care homes with nursing (%)</td>
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<td>2.31</td>
<td>Persons living in care homes without nursing (%)</td>
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<td>0.6</td>
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### Wider determinants - Crime

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<td>2.33</td>
<td>Recorded crimes (per 1,000 population)</td>
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<td>51</td>
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<td>36</td>
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<td>36</td>
<td>48</td>
<td>82</td>
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<td>28</td>
<td>50</td>
<td>42</td>
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<td>2.34</td>
<td>Recorded incidents of Anti-Social Behaviour (per 1,000 population)</td>
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<td>25</td>
<td>31</td>
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<td>30</td>
<td>17</td>
<td>18</td>
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<td>2.35</td>
<td>A&amp;E attendances by 15-59 yr olds for assaults</td>
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<td>1.3</td>
<td>1.8</td>
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<td>2.36</td>
<td>Emergency admissions for violence (SAR), 2013/14 to 2015/16</td>
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<td>85</td>
<td>138</td>
<td>74</td>
<td>94</td>
<td>68</td>
<td>75</td>
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<td>179</td>
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### Overall health status

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<th>Lewes</th>
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<tr>
<td>4.01</td>
<td>People reporting that their health is bad or very bad (%), 2011 (M)</td>
<td>6</td>
<td>6</td>
<td>12</td>
<td>16</td>
<td>21</td>
<td>27</td>
<td>32</td>
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<td>50</td>
<td>56</td>
<td>62</td>
<td>68</td>
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<td>People reporting a limiting long-term health problem or disability (%), 2011 (M)</td>
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<td>4.04</td>
<td>Life expectancy at birth (yrs), 2013-15</td>
<td>82.3</td>
<td>82.3</td>
<td>82.2</td>
<td>82.1</td>
<td>82.0</td>
<td>81.9</td>
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<td>Life expectancy at age 75 yrs, 2013-15</td>
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<td>4.07</td>
<td>Premature all-cause mortality (SMR), 2013-15</td>
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<td>102</td>
<td>113</td>
<td>82</td>
<td>105</td>
<td>106</td>
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<td>4.08</td>
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### Healthy Lifestyles - Pregnancy and infancy

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<td>3.01</td>
<td>Low birth weight (%), 2014-15</td>
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<td>3.02</td>
<td>Breastfeeding initiation (%), 2014/15</td>
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<td>73</td>
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<td>3.03</td>
<td>Breastfeeding prevalence at 6-8 weeks after birth (%), 2015/16 (M)</td>
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<td>Infant mortality (per 1,000 live births), 2014-15</td>
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### Healthy Lifestyles - Physical activity and excess weight

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<td>3.04</td>
<td>Adults achieving 150+ minutes physical activity per week (%), 2015</td>
<td>59</td>
<td>59</td>
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<td>3.05</td>
<td>Excess weight in 4-5 year olds (%), 2012/13-2014/15 (M)</td>
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<td>3.07</td>
<td>Excess weight in Adults (%), 2012/13-2014/15</td>
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### Healthy Lifestyles - Smoking

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<td>GP reported prevalence of smoking aged 15+ (%), 2015/16</td>
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<td>Smoking quitters at 4 weeks (per 100,000 aged 16+ yrs), 2015/16</td>
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<td>351</td>
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<td>337</td>
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<td>363</td>
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<td>Mothers known to be smokers at the time of delivery (%), 2014/15</td>
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<td>Smoking-attributable deaths in persons aged 35+ yrs (DSR per 100,000), 2012-2014</td>
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### Healthy Lifestyles - Alcohol and drug misuse

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<td>Young people in drug or alcohol treatment (per 10,000 aged 0-18 yrs), Sep 14 to Aug 16 (M)</td>
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<td>Adults aged 19+ in alcohol treatment (per 100,000), 2015/16 (M)</td>
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<td>Alcohol-related admissions (DSR per 100,000), 2014/15</td>
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<td>Adults aged 19+ in drug treatment (per 100,000), 2015/16 (M)</td>
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### Healthy Lifestyles - Sexual health

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<td>Under 18s conceptions (per 1,000 females aged 15-17), 2014</td>
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<td>Chlamydia detection rate in persons aged 15-24 (per 100,000), 2015</td>
<td>1,616</td>
<td>1,677</td>
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<td>Chlamydia detection rate in persons aged 25+ (per 100,000), 2015</td>
<td>89</td>
<td>109</td>
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<td>Gonorrhoea diagnostic rate (per 100,000), 2015</td>
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### Healthy Lifestyles - Accidents and injuries

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<td>3.34</td>
<td>A&amp;E attendances for accidents &amp; injuries in 0-4 yr olds (per 10,000), 2015/16</td>
<td>1,326</td>
<td>1,427</td>
<td>1,621</td>
<td>860</td>
<td>1,534</td>
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<td>1,228</td>
<td>555</td>
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<td>Emerg'ny admiss'ns for accidents &amp; injuries in 0-4 yr olds (per 10,000), 2013/14 to 2015/16</td>
<td>168</td>
<td>165</td>
<td>219</td>
<td>113</td>
<td>170</td>
<td>155</td>
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<td>Emerg'ny admiss'ns for accidents &amp; injuries in 5-14 yr olds (per 10,000), 2013/14 to 2015/16</td>
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<td>72</td>
<td>97</td>
<td>106</td>
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<td>81</td>
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<td>3.37</td>
<td>Emerg'ny admiss'ns for accidents and injuries in 15-24 yr olds (per 10,000), 2013/14 to 15/16</td>
<td>133</td>
<td>117</td>
<td>148</td>
<td>135</td>
<td>116</td>
<td>99</td>
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<td>3.38</td>
<td>Emergency admissions for falls injuries for people aged 65+ (SAR), 2014/15 to 2015/16</td>
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<td>3.39</td>
<td>People killed or seriously injured on East Sussex roads (per 100,000), 2012 to 2014</td>
<td>64</td>
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### Health protection - Health checks and screening

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<td>3.18</td>
<td>Eligible people aged 40-74 who received an NHS Health Check (%), Apr 2013 to Mar 2016</td>
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<td>34</td>
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<td>29</td>
<td>37</td>
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<td>3.19</td>
<td>Eligible women aged 25-64 screened for cervical cancer (%), at Mar 2015</td>
<td>75</td>
<td>75</td>
<td>75</td>
<td>76</td>
<td>74</td>
<td>79</td>
<td>77</td>
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<td>3.20</td>
<td>Eligible women aged 50-70 screened for breast cancer (%), at Mar 2015</td>
<td>74</td>
<td>74</td>
<td>72</td>
<td>76</td>
<td>71</td>
<td>76</td>
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<td>3.21</td>
<td>Eligible people aged 60-69 screened for bowel cancer (%), at Mar 2016</td>
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### Health protection - Immunisation

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<th>HWLH CCG</th>
<th>Eastbn.</th>
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<th>Hastings &amp; St Leonards</th>
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<tbody>
<tr>
<td>3.22</td>
<td>Children immunised for DTaP/IPV/Hib by age 1 (%), 2015/16</td>
<td>94</td>
<td>96</td>
<td>93</td>
<td>93</td>
<td>96</td>
<td>94</td>
<td>99</td>
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<td>97</td>
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<td>3.23</td>
<td>Children immunised for pneumococcal infection by age 2 (%), Apr 2015 to Dec 2016</td>
<td>93</td>
<td>93</td>
<td>92</td>
<td>93</td>
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<td>88</td>
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<td>93</td>
<td>89</td>
<td>95</td>
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<td>3.24</td>
<td>Children immunised for Hib/MenC by age 2 (%), 2015/16</td>
<td>93</td>
<td>93</td>
<td>92</td>
<td>95</td>
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<td>3.25</td>
<td>Children immunised for measles, mumps and rubella (MMR) by age 2 (%), 2015/16</td>
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<td>Children immunised for MMR by age 5 (%), 2015/16</td>
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<td>Children aged 65+ receiving seasonal flu vaccination (%)</td>
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<td>72</td>
<td>71</td>
<td>68</td>
<td>72</td>
<td>70</td>
<td>73</td>
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<td>People aged 65+ ever receiving a pneumococcal vaccination (%)</td>
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### Disease and poor health - Mental health

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<td>Emergency admissions, people with severe mental illness (SAR), 2014/15 &amp; 2015/16</td>
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<td>126</td>
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<td>Emergency admissions relating to self-harm (SAR), 2014/15 to 2015/16</td>
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<td>GP reported versus expected prevalence of dementia at age 65+ (ratio), 2014/15</td>
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<td>Working age people claiming ESA for mental health problems (per 1,000), Feb 2016 (M)</td>
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### Disease and poor health - Circulatory

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<td>GP reported prevalence of hypertension (%), 2015/16</td>
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### Disease and poor health - Cancer

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### Area Summary for Uckfield Community of Practice, February 2017

#### Disease and poor health - Respiratory

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<th>Hastings &amp; St Leonards</th>
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#### Disease and poor health - Diabetes

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#### Disease and poor health - Other conditions

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#### Disease and poor health - Avoidable admissions

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## Disease and poor health - Hospital attendances and admissions

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<td>4.74</td>
<td>All MIU and A&amp;E attendances (SAR), 2015/16</td>
<td>100</td>
<td>95</td>
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<td>MIU and A&amp;E attendances for 0-4 yr olds (per 1,000), 2015/16</td>
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<td>MIU and A&amp;E attendances for persons aged 15-29 (per 1,000), 2015/16</td>
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<td>4.77</td>
<td>MIU and A&amp;E attendances for persons aged 70+ (per 1,000), 2015/16</td>
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<td>4.78</td>
<td>All elective admissions (SAR), 2014/15 to 2015/16</td>
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<td>108</td>
<td>99</td>
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<td>Elective admissions for persons aged 65+ (SAR), 2014/15 to 2015/16</td>
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<td>352</td>
<td>304</td>
<td>290</td>
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<td>361</td>
<td>332</td>
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<td>4.80</td>
<td>All emergency admissions (SAR), 2014/15 to 2015/16</td>
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<td>Emergency admissions for persons aged 70-84 yrs (SAR), 2014/15 to 2015/16</td>
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<td>196</td>
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<td>180</td>
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<td>4.82</td>
<td>Emergency admissions for persons aged 85+ (SAR), 2014/15 to 2015/16</td>
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<td>480</td>
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## Children's services

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<th>HWLH CCG</th>
<th>Eastbn. Polegate Seaford</th>
<th>Bexhill</th>
<th>Hastings &amp; St Leonards</th>
<th>Rural Rother</th>
<th>Crowbr. Havens Lewes Uckfield</th>
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<tr>
<td>6.07</td>
<td>Referrals to children's social care (per 1,000 aged under 18 yrs), Feb 2015 to Jan 2016 (M)</td>
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<td>32</td>
<td>37</td>
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<td>6.08</td>
<td>Children on a child protection plan (per 1,000 aged under 18 yrs), 31 March 2016 (M)</td>
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<td>6.09</td>
<td>Looked after children (per 1,000 aged under 18 yrs), 31 March 2016 (M)</td>
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## Carers

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<th>Hastings &amp; St Leonards</th>
<th>Rural Rother</th>
<th>Crowbr. Havens Lewes Uckfield</th>
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<tbody>
<tr>
<td>6.01</td>
<td>People providing one hour or more of unpaid care per week (%), 2011 (M)</td>
<td>11.3</td>
<td>11.3</td>
<td>11.5</td>
<td>11.0</td>
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<td>6.02</td>
<td>Unpaid carers providing 20 hours or more care per week (%), 2011 (M)</td>
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<td>6.03</td>
<td>Working age people claiming Carers Allowance (%), Feb 2016 (M)</td>
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<td>1.6</td>
<td>1.9</td>
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<td>1.6</td>
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<td>1.2</td>
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<td>6.04</td>
<td>Carers known to adult social care (per 1,000 population) Dec 2014 to Nov 2015 (M)</td>
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<td>18</td>
<td>21</td>
<td>12</td>
<td>17</td>
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<td>6.05</td>
<td>Carers (known to adult social care) receiving a service (%), Dec 2014 to Nov 2015 (M)</td>
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<td>85</td>
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<td>6.06</td>
<td>Carers receiving self-directed support (per 1,000 aged 18+), Dec 2014 to Nov 2015 (M)</td>
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<td>10</td>
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### Adult social care

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<th>Rural Rother</th>
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<th>Havens</th>
<th>Lewes</th>
<th>Uckfield</th>
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<td>6.10</td>
<td>Requests for adult social care support (per 1,000 aged 18+), Dec 2014 to Nov 2015 (M)</td>
<td>25</td>
<td>27</td>
<td>29</td>
<td>19</td>
<td>26</td>
<td>28</td>
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<td>25</td>
<td>16</td>
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<td>19</td>
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<td>6.11</td>
<td>Adults receiving direct payments (per 1,000), at 30 Jun 2016 (M)</td>
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<td>4</td>
<td>2</td>
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<td>6.12</td>
<td>Adults receiving self-directed support (per 1,000), at 30 Jun 2016 (M)</td>
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<tr>
<td>6.13</td>
<td>Working age people receiving Long Term Support (per 1,000), Jul 2015 to Jun 2016 (M)</td>
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<td>8</td>
<td>11</td>
<td>4</td>
<td>6</td>
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<td>5</td>
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<tr>
<td>6.14</td>
<td>People aged 65+ receiving Long Term Support (per 1,000), Jul 2015 to Jun 2016 (M)</td>
<td>30</td>
<td>34</td>
<td>32</td>
<td>24</td>
<td>34</td>
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<td>18</td>
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<td>24</td>
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<td>6.15</td>
<td>Learning disabled adults aged 18-64 in settled accommodation (%), Jul 2015 to Jun 2016 (M)</td>
<td>72</td>
<td>77</td>
<td>68</td>
<td>71</td>
<td>75</td>
<td>60</td>
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<td>6.16</td>
<td>Adults receiving community equipment (per 1,000), 2015/16 (M)</td>
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<td>6.17</td>
<td>Adults receiving adult social care funded lifeline or telecare (per 1,000), 2015/16 (M)</td>
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<td>6.18</td>
<td>People 65+ discharged from hosp to intermed care (per 1,000), Sep 2014 to Aug 2015 (M)</td>
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<td>6.19</td>
<td>People in council supported residential or nursing care (per 100,000), at 30 June 2016 (M)</td>
<td>579</td>
<td>559</td>
<td>743</td>
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<td>564</td>
<td>585</td>
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<td>608</td>
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<td>6.20</td>
<td>New ASC clients receiving services, not asking for more ongoing (%), Dec 14 to Nov 15 (M)</td>
<td>90</td>
<td>86</td>
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### NHS dental services

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<td>3.40</td>
<td>Residents aged 0-17 accessing East Sussex NHS general dental services (%), 2015/16 (M)</td>
<td>76</td>
<td>78</td>
<td>75</td>
<td>76</td>
<td>76</td>
<td>79</td>
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<td>3.41</td>
<td>Residents aged 18-64 accessing East Sussex NHS general dental services (%), 2015/16 (M)</td>
<td>53</td>
<td>52</td>
<td>58</td>
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<td>57</td>
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<td>3.42</td>
<td>Residents aged 65+ accessing East Sussex NHS general dental services (%), 2015/16 (M)</td>
<td>53</td>
<td>51</td>
<td>60</td>
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### GP patient survey

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<td>Patients responding to the GP Patient Survey (%), 2015/16</td>
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<td>49</td>
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<td>53</td>
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<td>5.02</td>
<td>Patients whose experience of their GP surgery was good (%), 2015/16</td>
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<td>89</td>
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<td>88</td>
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<td>86</td>
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<td>Patients whose experience of making appointments was good (%), 2015/16</td>
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<td>5.04</td>
<td>Patients satisfied with GP surgery’s opening hours (%), 2015/16</td>
<td>78</td>
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<td>5.05</td>
<td>Patients who said the GP was good at involving them in decisions on care (%), 2015/16</td>
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<td>5.06</td>
<td>Patients who said the nurse was good at involving them in decisions on care (%), 2015/16</td>
<td>65</td>
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<td>67</td>
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## Appendix 2: Acronyms and abbreviations

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<th>Acronym</th>
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<td>Accident and Emergency</td>
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<td>Ambulatory Care Sensitive</td>
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<td>AF</td>
<td>Atrial Fibrillation</td>
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<td>ASC</td>
<td>Adult Social Care</td>
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<td>BP</td>
<td>Blood Pressure</td>
</tr>
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<td>CAMHS</td>
<td>Child and Adolescent Mental Health Services</td>
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<td>CCG</td>
<td>Clinical Commissioning Group</td>
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<tr>
<td>CHD</td>
<td>Coronary Heart Disease</td>
</tr>
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<td>CKD</td>
<td>Chronic Kidney Disease</td>
</tr>
<tr>
<td>COPD</td>
<td>Chronic Obstructive Pulmonary Disease</td>
</tr>
<tr>
<td>CV</td>
<td>Cardiovascular</td>
</tr>
<tr>
<td>CVD</td>
<td>Cardiovascular Disease</td>
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<tr>
<td>DM</td>
<td>Diabetes Mellitus (used for diabetes QOF clinical domain)</td>
</tr>
<tr>
<td>DNA</td>
<td>Did Not Attend</td>
</tr>
<tr>
<td>DSR</td>
<td>Directly Standardised Rate</td>
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<td>DTaP/IPV/Hib</td>
<td>Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (also known as the 5 in 1 vaccine)</td>
</tr>
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<td>EHCP</td>
<td>Education, Health and Care Plan</td>
</tr>
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<td>Eastbourne, Hailsham and Seaford</td>
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<td>ESA</td>
<td>Employment and Support Allowance</td>
</tr>
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<td>EYFS</td>
<td>Early Years Foundation Stage</td>
</tr>
<tr>
<td>Hib</td>
<td>Haemophilus influenzae type b</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
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<td>Hastings and Rother</td>
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<td>High Weald Lewes Havens</td>
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<td>Income Deprivation Affecting Children Index</td>
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<tr>
<td>IDAOPi</td>
<td>Income Deprivation Affecting Older People Index</td>
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<td>IMD</td>
<td>Index of Multiple Deprivation</td>
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<td>Job Seekers Allowance</td>
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<td>Lower Respiratory Tract Infection</td>
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<td>LSOA</td>
<td>Lower Super Output Area</td>
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<td>MenC</td>
<td>Meningococcal C conjugate</td>
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<td>MH</td>
<td>Mental Health</td>
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<td>MIU</td>
<td>Minor Injury Unit</td>
</tr>
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<td>MMR</td>
<td>Measles, mumps and rubella</td>
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<td>MRC</td>
<td>Medical Research Council</td>
</tr>
<tr>
<td>NEET</td>
<td>Not in Education, Employment or Training</td>
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<td>PAD</td>
<td>Peripheral Arterial Disease</td>
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<td>PCV</td>
<td>Pneumococcal conjugate vaccine</td>
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<td>PHOF</td>
<td>Public Health Outcomes Framework</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<td>PPV</td>
<td>Pneumococcal polysaccharide vaccine</td>
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<td>QOF</td>
<td>Quality and Outcomes Framework</td>
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<td>SAR</td>
<td>Standardised Attendance Ratio/ Standardised Admissions Ratio</td>
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