Health and Wellbeing Board 4th May 2011

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NHS Nottinghamshire County

Aim of session

- Using Public Health skills and analysis to drive and target effective commissioning
- Understand Health Inequalities Indicators
- Agreeing priorities / Partnership working
- Measuring impact / Clinical Variation

Joint strategic needs assessment (JSNA)

- 2008 Statutory duty to develop between PCT and upper tier local authority
- National minimum data set
- 2011 Statutory duty for Consortia and upper tier local authority
- Plus demonstrate used in Commissioning

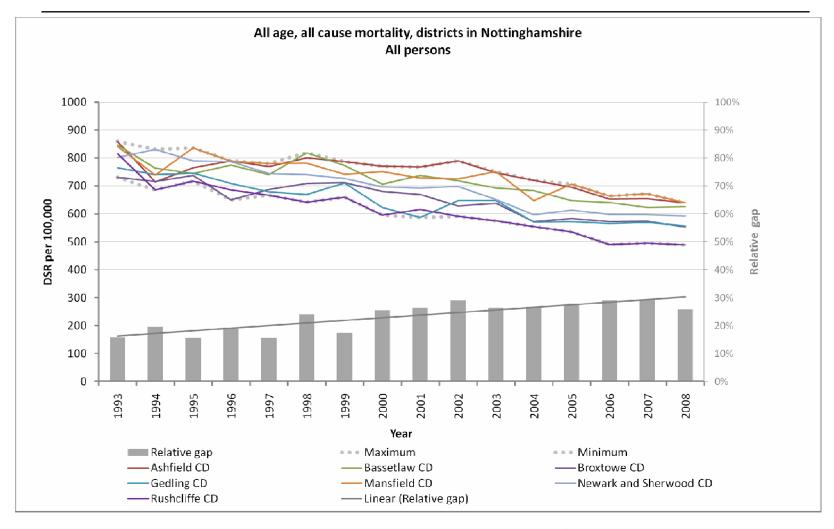
JSNA continued

- Ongoing process
- Link other needs assessments (Library)
- Requires Steering Group
- Joint Local Information Systems
 - ALLAN (ALL About Notts)
- Designated resources
 - Management / coordination
 - Analyst time
 - Software licenses etc.
 - Quality Assurance process

Health inequalities

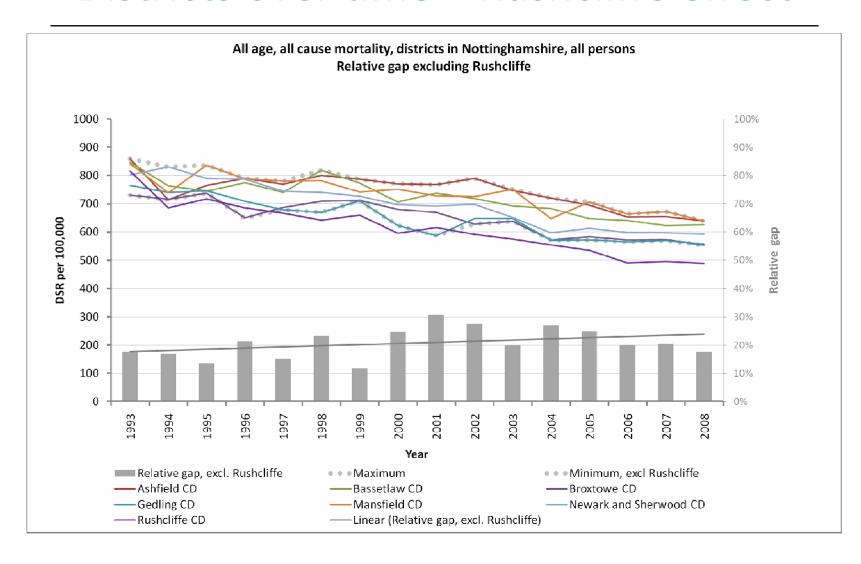
- Life Expectancy (LE)
- All Age All Cause Mortality (AACM)
- Both used to measure overall health of population
- Can assess causes of death
- (LE) Average number of years new born would survive, bias towards early/ young deaths
- AACM Proxy for LE, measures rate of all mortality, all ages, for a locality.

Districts over time



Relative gap = (maximum district-minimum district) as a percentage of Nottinghamshire County

Districts over time – Rushcliffe effect



All ages

Males all ages - England

	n	%
Circulatory system	77,636	32.6
Neoplasms	74,016	31.1
Respiratory system	31,786	13.4
Digestive system	11,974	5.0
External causes of morbidity	11,190	4.7
All deaths all ages	238,062	

Males all ages - Nottinghamshire

	n	%
Circulatory system	1,197	34.1
Neoplasms	876	31.2
Respiratory system	166	13.0
Digestive system	166	4.7
External causes of morbidity	142	4.0
All deaths all ages	3,506	

Females all ages - England

	n	%
Circulatory system	82,143	32.4
Neoplasms	66,481	26.2
Respiratory system	35,773	14.1
Digestive system	13,256	5.2
Mental & behavioural	12,112	4.8
All deaths all ages	253,286	

Females all ages - Nottinghamshire

	n	%
Circulatory system	1,275	32.9
Neoplasms	955	24.6
Respiratory system	530	13.7
Digestive system	209	5.4
Symtoms & signs	179	4.6
All deaths all ages	3,879	

Data: England ONS data for 2009. Nottinghamshire: Mean for 2005-2008

Deaths aged under 75

Males Under 75 - England

	n	%
Neoplasms	36,404	36.7
Circulatory system	27,654	27.9
Respiratory system	8,547	8.6
External causes	8,474	8.5
Digestive system	6,726	6.8
All deaths aged under 75	99,119	

Males Under 75 - Nottinghamshire

<u> </u>		
	n	%
Neoplasms	552	38.5
Circulatory system	437	30.5
Respiratory system	130	9.1
External causes	98	6.8
Digestive system	84	5.9
All deaths aged under 75	1,436	

Females under 75 - England

	n	%
Neoplasms	30,874	46.6
Circulatory system	12,883	19.4
Respiratory system	6,329	9.5
Digestive system	4,317	6.5
External causes	2,852	4.3
All deaths aged under 75	66,282	

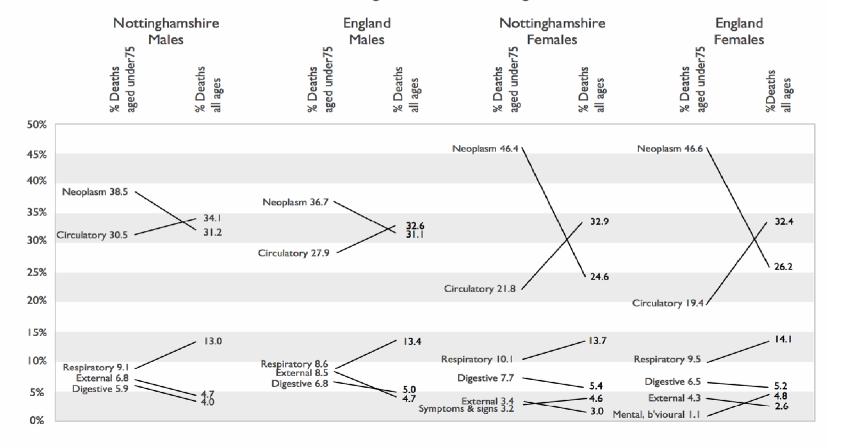
Females under 75 - Nottinghamshire

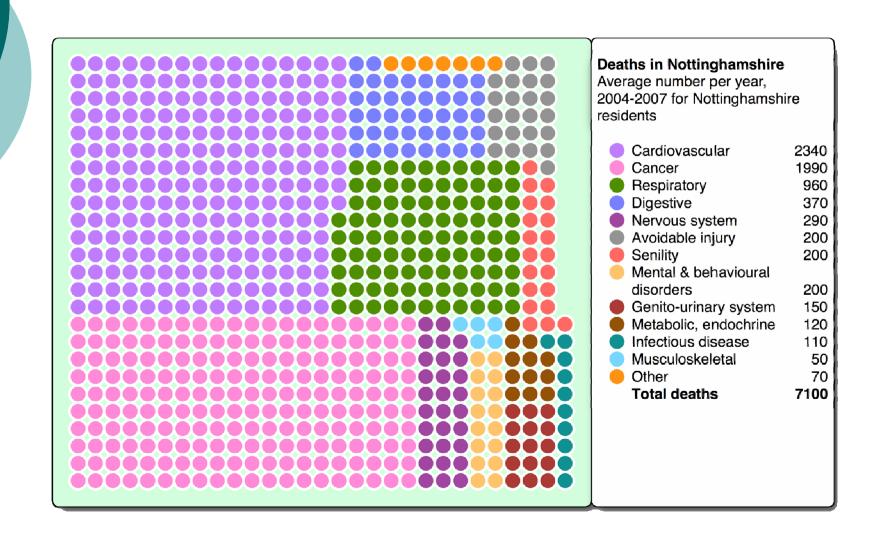
	n	%
Neoplasms	461	46.4
Circulatory system	217	21.8
Respiratory system	100	10.1
Digestive	76	7.7
External causes	34	3.4
All deaths aged under 75	994	

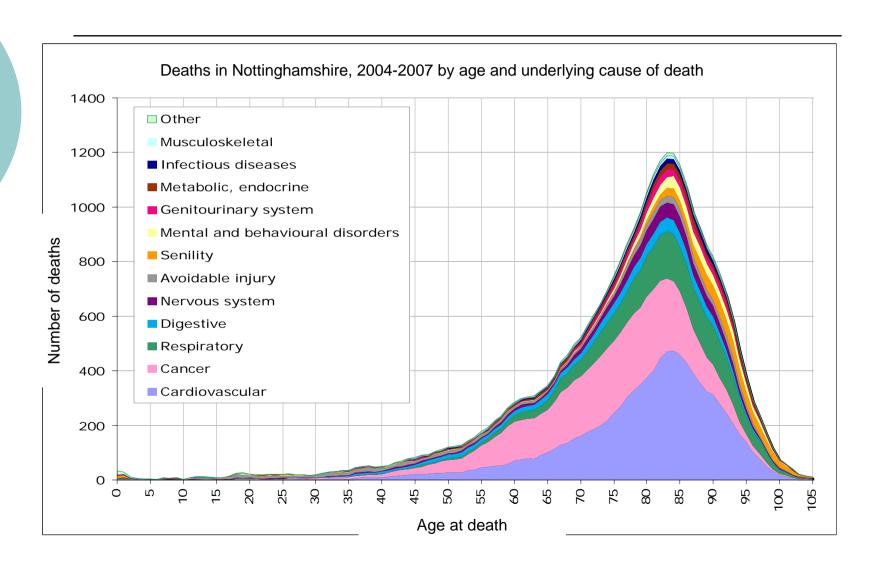
Data: England ONS data for 2009. Nottinghamshire, mean p.a. for 2005-2008

Main underlying causes of death in Nottinghamshire and England, males and females

Deaths aged under 75 and all ages







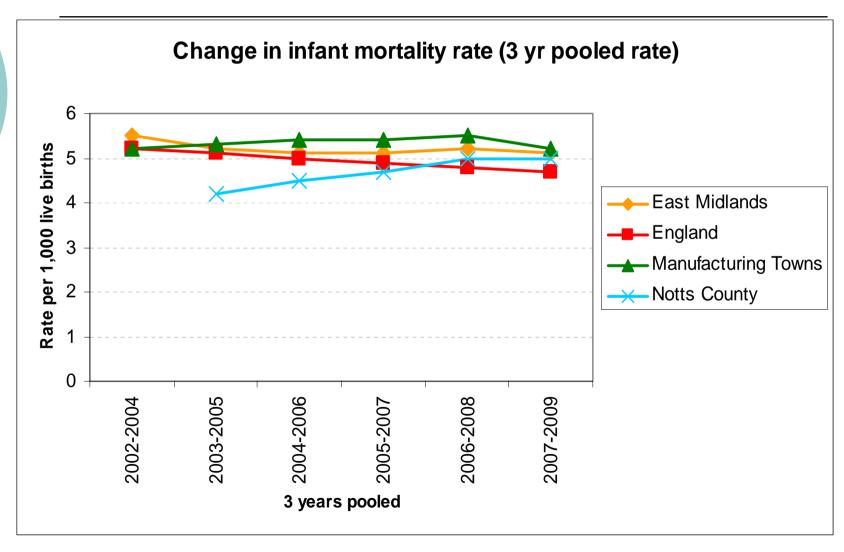
Cancer Death Proportions – Male

Group Description	% of male cancer deaths
Malignant neoplasm of bronchus and lung	23.46
Malignant neoplasm of prostate	13.00
Malignant neoplasm without specification of site	6.90
Malignant neoplasm of colon	6.01
Malignant neoplasm of oesophagus	5.37
Malignant neoplasm of pancreas	5.07
Malignant neoplasm of stomach	4.50
Malignant neoplasm of bladder	4.07
Malignant neoplasm of rectum	3.22
Malignant neoplasm of kidney, except renal pelvis	2.76
Malignant neoplasm of brain	2.67
Other and unspecified types of non-Hodgkin's lymphoma	2.03
Total	79.05
Other	20.95

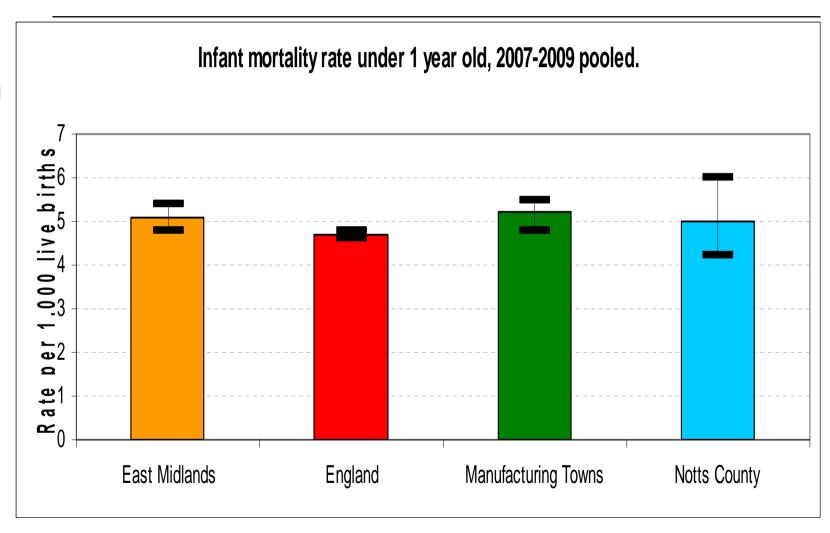
Cancer Death Proportions – Female

Group Description	% female cancer deaths
Malignant neoplasm of breast	17.89
Malignant neoplasm of bronchus and lung	17.68
Malignant neoplasm without specification of site	9.01
Malignant neoplasm of ovary	5.32
Malignant neoplasm of colon	5.19
Malignant neoplasm of pancreas	4.53
Malignant neoplasm of oesophagus	3.33
Malignant neoplasm of bladder	2.88
Malignant neoplasm of stomach	2.62
Malignant neoplasm of rectum	2.57
Malignant neoplasm of brain	2.10
Malignant neoplasm of kidney, except renal pelvis	1.99
Total	75.09
Other	24.91

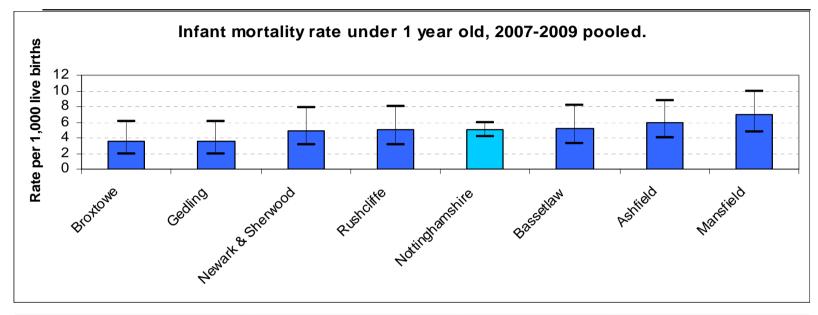
Infant Mortality



Infant Mortality



Infant Mortality

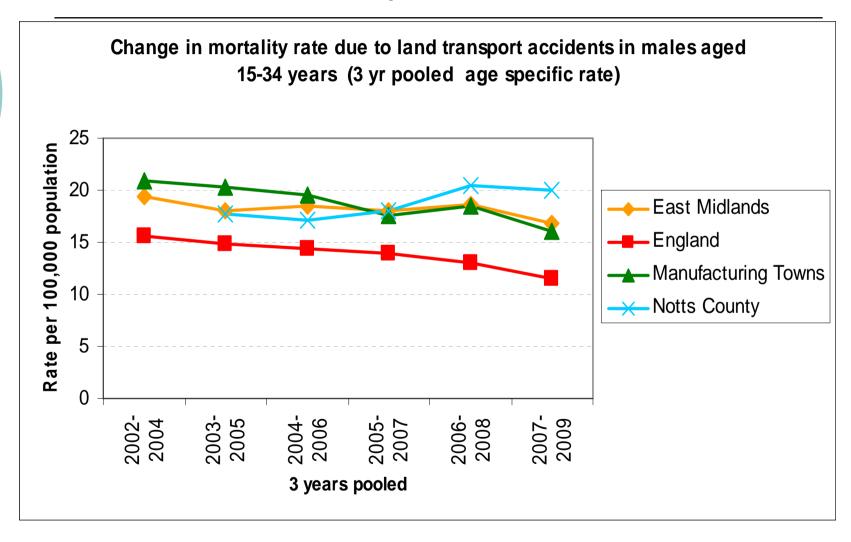


Area	Rate per 1,000 live births	LCL	UCL
Broxtowe	3.5	2	6.1
Gedling	3.5	2	6.1
Newark & Sherwood	4.9	3.1	7.8
Rushcliffe	5	3.1	8
Nottinghamshire	5	4.2	6
Bassetlaw	5.2	3.3	8.2
Ashfield	5.9	4	8.7
Mansfield	6.9	4.7	10

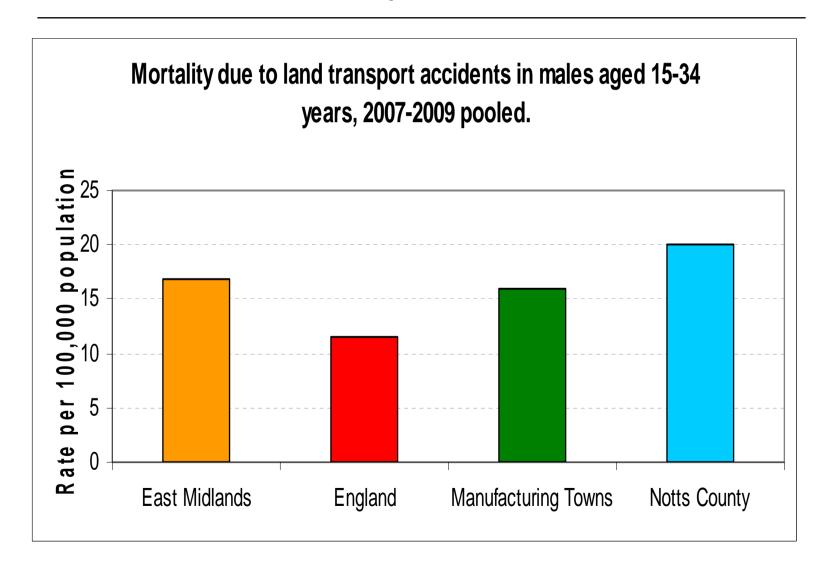
Infant Mortality Rates (2007-2009)

Region	Number of Live Births	Number of Deaths <1Yr
Nottinghamshire County	26073	131
Ashfield CD	4244	25
Bassetlaw CD	3628	19
Broxtowe CD	3473	12
Gedling CD	3688	13
Mansfield CD	3940	27
Newark and Sherwood CD	3669	18
Rushcliffe CD	3431	17
East Midlands	160420	816
England	1999224	9421
Manufacturing Towns	153882	795
Grand Total	2365672	11294

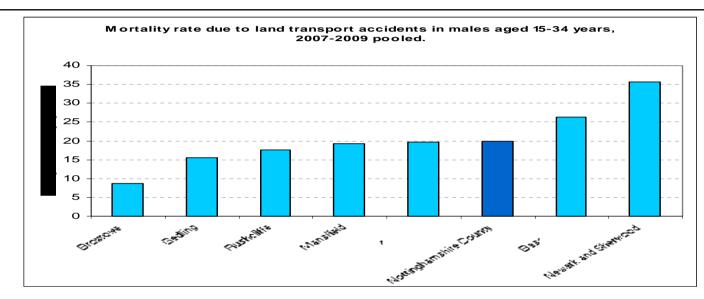
Land Transport Accidents



Land Transport Accidents



Land Transport Accidents



Area	Rate per 100,000 males		
Broxtowe	8.8		
Gedling	15.5		
Rushcliffe	17.7		
Mansfield	19.3		
Ashfield	19.7		
Nottinghamshire County	20		
Bassetlaw	26.4		
Newark and Sherwood	35.7		

Land Transport Deaths

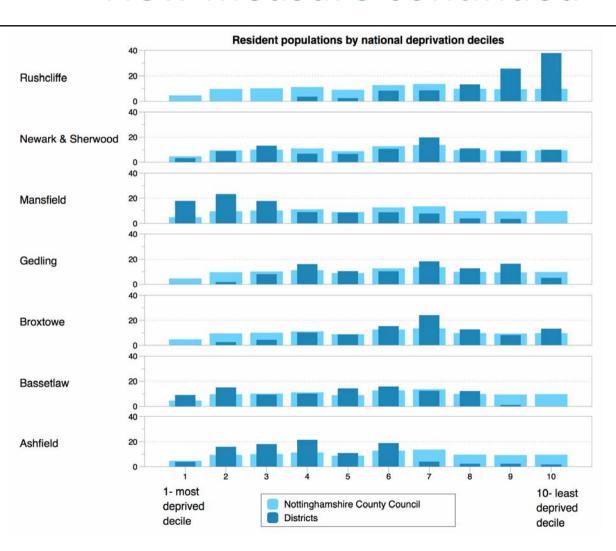
Area	Deaths from LTA in males 15 - 34 Yrs, 2009			
Nottinghamshire County	16			
Ashfield	2			
Bassetlaw	3			
Broxtowe	1			
Gedling	2			
Mansfield	1			
Newark and Sherwood	6			
Rushcliffe	1			
EAST MIDLANDS	83			
ENGLAND	676			
MANUFACTURING TOWNS	55			

- Cardiovascular Disease, cancer, respiratory
- Cause over 65% of deaths
- Explain 2/3 gap between Life Expectancy
- Smoking underpins all three and explains 50% difference in Life Expectancy
- Life Expectancy weighted by infant mortality and Road Traffic Accident young males

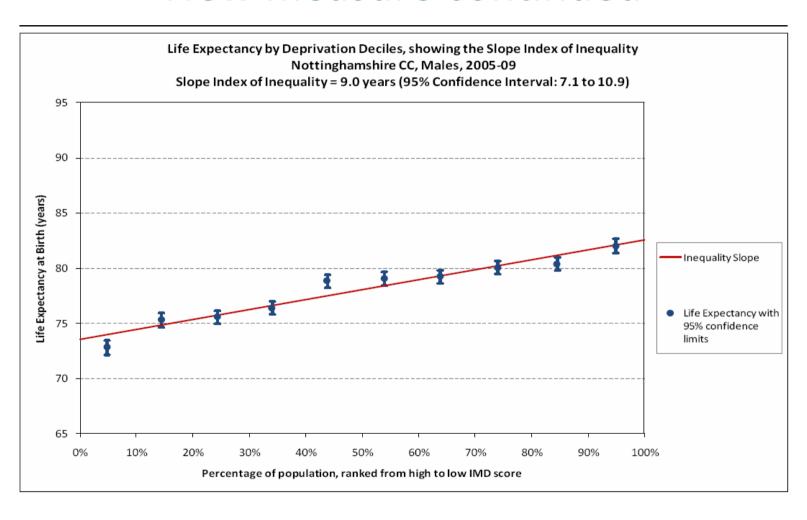
New measure: Slope index of inequality for LE

- Measures level of inequality across locality between most and least deprived areas
- Included in proposed Public Health Outcomes

New measure continued



New measure continued



New measure - Nottinghamshire

Slope Index of Inequality for Life Expectancy by Deprivation Deciles - 2005-09

		Males			Females			
Area Code	Area Name	Slope Index of Inequality (years)	95% CI		Slope Index of Inequality	95	95% CI	
			lower	upper	(years)	lower	upper	
37	Nottinghamshire CC	9.0	7.1	10.9	7.7	5.6	9.8	
37UB	Ashfield CD	7.6	5.4	9.8	13.1	10.0	16.3	
37UC	Bassetlaw CD	7.3	4.1	10.5	5.7	2.5	9.0	
37UD	Broxtowe CD	8.6	4.0	13.3	7.9	1.9	13.8	
37UE	Gedling CD	7.7	3.3	12.2	6.6	1.1	12.0	
37UF	Mansfield CD	10.1	5.6	14.6	7.9	3.3	12.4	
37UG	Newark and Sherwood CD	8.0	5.1	10.9	6.8	3.4	10.2	
37UJ	Rushcliffe CD	5.2	1.4	9.0	6.9	3.2	10.7	

Published by APHO, January 2011

Trend data for Tier-1 and Tier-2 local authorities will be published by APHO by March 2011

New measure – East Midlands

Slope Index of Inequality for Life Expectancy by Deprivation Deciles – 2005-09

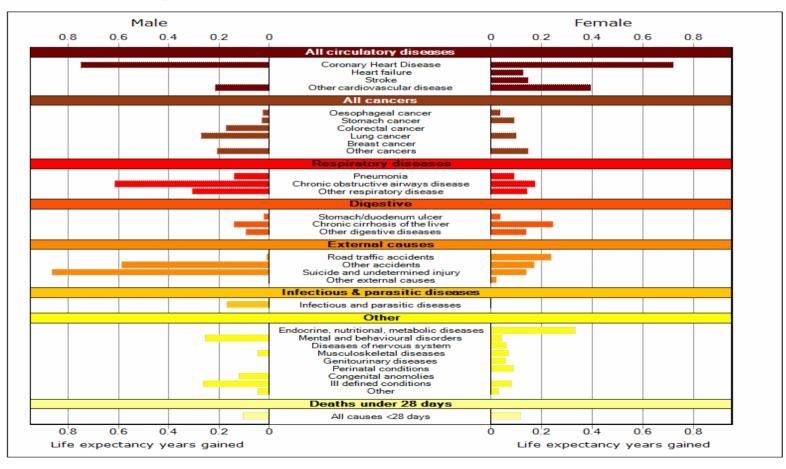
		Males					
		Slope Index			Slope Index	•	•
Area	Area Name	of	95% CI		of 95%		% CI
Code		Inequality			Inequality		
		(years)	lower	upper	(years)	lower	upper
00FK	Derby UA	12.6	10.6	14.6	9.5	6.6	12.5
00FN	Leicester UA	9.0	8.1	9.9	5.1	3.1	7.1
00FP	Rutland UA	4.2	-2.1	10.6	6.4	0.3	12.5
00FY	Nottingham UA	9.2	6.7	11.8	8.4	4.2	12.6
17	Derbyshire CC	7.6	6.3	8.9	5.4	4.6	6.2
31	Leicestershire CC	5.8	3.9	7.7	4.9	2.9	7.0
32	Lincolnshire CC	7.0	4.9	9.0	4.6	2.8	6.5
34	Northamptonshire CC	9.1	7.0	11.1	5.5	4.0	7.1
37	Nottinghamshire CC	9.0	7.1	10.9	7.7	5.6	9.8

Trend data for Tier-1 and Tier-2 local authorities will be published by APHO by March 2011

Life expectancy – Mansfield

Life expectancy years gained if the Most Deprived Quintile (MDQ) of Mansfield CD had the same mortality rate as the England average for each cause of death.

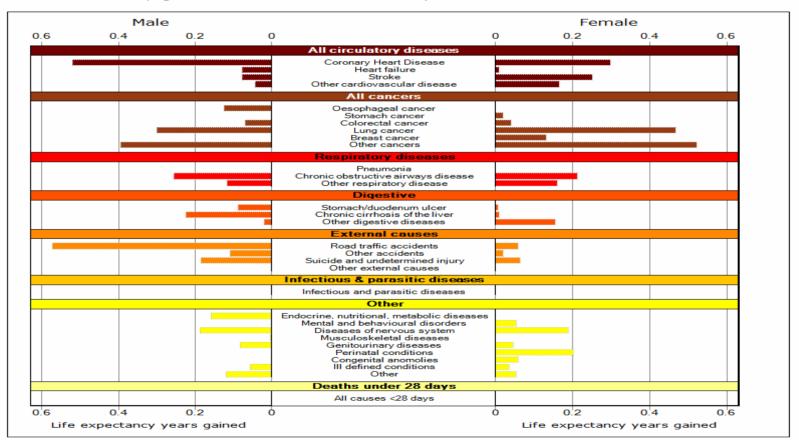
See the instructions page for more information on how to interpret these charts.



Life expectancy – Newark & Sherwood

Life expectancy years gained if the Most Deprived Quintile (MDQ) of Newark and Sherwood CD had the same mortality rate as the England average for each cause of death.

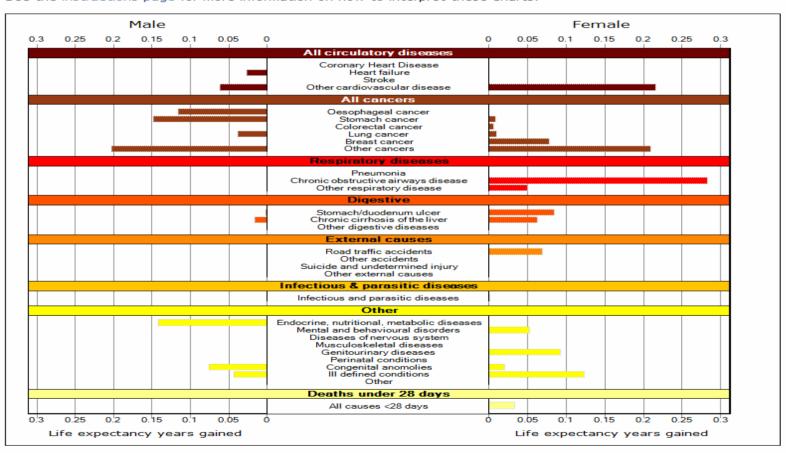
See the instructions page for more information on how to interpret these charts.



Life expectancy – Rushcliffe

Life expectancy years gained if the Most Deprived Quintile (MDQ) of Rushcliffe CD had the same mortality rate as the England average for each cause of death.

See the instructions page for more information on how to interpret these charts.



Summary

- Health inequalities remains national priority
- Life Expectancy/AAACM/Slope Index Inequity used to monitor progress
- Cardiovascular Disease/cancer/ respiratory main causes of death
- Effective interventions are available
- Need to retain focus on what will make a difference in prioritisation and commissioning process
- Implementation complex and takes time

Actions for Health & Well Being Board

- Recognise the degree of health and wellbeing inequalities within Nottinghamshire
- Recognise that Cardiovascular Disease, Cancer and Respiratory disease are the leading causes of death and premature death
- Recognise that Tobacco is a major contributing factor
- Agree in principle to target resources as appropriate to reduce health and wellbeing inequalities whenever possible.