

WARRINGTON GP CLUSTER PROFILE

SOUTH CLUSTER

GP Practices:

Brookfield Surgery

CCA Partnership - Appleton

Lakeside Surgery

Latchford MC

Stockton Heath MC

Stretton MC

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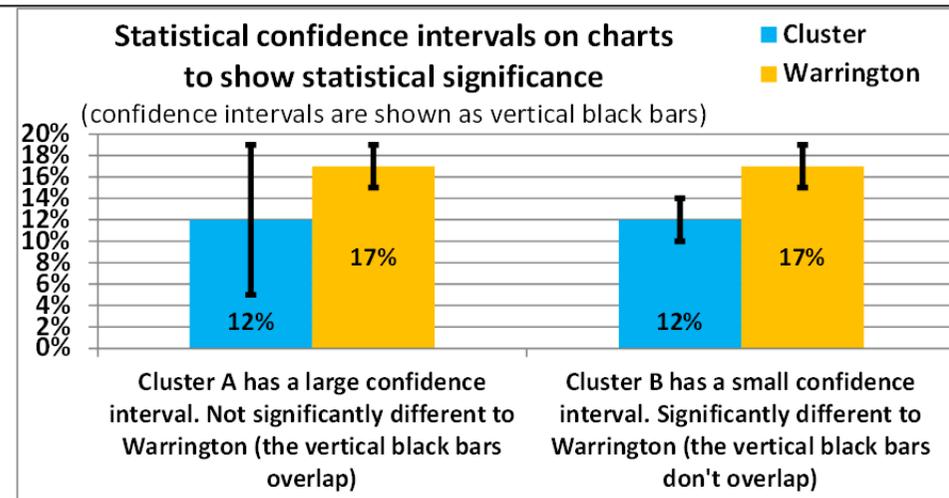
INTRODUCTION

Introduction

- There are 26 GP practices in Warrington. Practices have been grouped into 7 GP Clusters. Clusters have begun to work together to offer extended services and increased access. This population health profile presents data for the registered patients of South Cluster practices. South Cluster consists of Brookfield Surgery, CCA Partnership – Appleton, Lakeside Surgery, Latchford MC and Stockton Heath MC.
- The profile contains information on a range of factors known to impact on population health. There are limitations to some of the data used, and caveats and assumptions are stated in the notes page at the end of the profile.
- It is envisaged that the profile will provide useful background and contextual information for clusters planning or reconfiguring services. This is the first version of a cluster specific public health profile and feedback is welcome. If you have any suggestions for additional information or wish to discuss findings in more detail, please contact the Public Health Knowledge and Intelligence Team at Warrington Borough Council. Contact details at the end of the profile.
- The profile contains information on health *need*, and higher need is very often associated with higher levels of socio-economic deprivation. However, *demand* for health services can be at odds with this, in that less deprived areas can demand more from their health services.

Interpretation of charts: statistical significance and confidence intervals

On some bar charts in this report, 95% confidence intervals are shown as vertical black lines on each bar. These indicate the level of uncertainty about each value on the chart. Wider intervals mean more uncertainty. Where confidence intervals do not overlap the difference is said to be statistically significant. The top of the black bar is called the Upper Confidence Limit (UCL) and the bottom is called the Lower Confidence Limit (LCL); there is a 95% chance that the true value of whatever is being measured will lie between the LCL and UCL.



Data sources

Quality Outcomes Framework (QOF) 2014/15 (Health and Social Care Information Centre). Prevalence of disease/conditions as recorded on GP registers.

Mortality (Open Exeter)

Hospital admissions North West CSU & St Helens CCG.

GP Survey via Public Health England fingertips data

<http://fingertips.phe.org.uk/profile/general-practice>

Practice populations (Health and Social Care Information Centre and Open Exeter)

Health and Wellbeing Survey, 2013 (Public Health Team, Warrington Borough Council). A comprehensive, large scale survey of Warrington residents (aged 18+) was undertaken early in 2013. It collected information on a wide range of factors that impact on an individual's health and wellbeing, including lifestyle factors and the wider determinants of health. Questionnaires were posted to a randomly selected sample of adults living within the Warrington borough boundary and 6,673 valid returns were received. Respondents were weighted for non-response based on age-band, sex and level of deprivation where the respondent lived. This data has been analysed by GP practice. Some practices have patients who live outside Warrington borough; none of these patients will have been in the survey.

Index of Multiple Deprivation (IMD) 2010 (Department of Communities and Local Government). The IMD provides a measure of socio-economic deprivation. It is based on a number of factors; income, employment, health, education, barriers to housing and services, crime and living environment. More information is available at <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2010>

Adult Social Care Data: Warrington Borough Council CareFirst database.

Produced February 2016 by Public Health Knowledge & Intelligence Team, Warrington Borough Council

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SUMMARY

- All of South Cluster's GP practices are located in South Warrington, South of the Manchester Ship Canal, except Latchford MC which is in Latchford East ward. For most analysis in this report, Latchford MC shows very different results to the other practices.
- South Cluster has approximately 49,000 patients. Stockton Heath MC is by far the biggest GP practice (17,000 patients), and Stretton MC by far the smallest (3,000).
- Most of South Cluster's patients live in the wards of Lymm (27%), Appleton (18%), Grappenhall & Thelwall (15%) and Stockton Heath (11%). 7% live outside Warrington borough, and the remainder are spread across Latchford East, Latchford West, and Hatton Stretton & Walton. Most live in areas of very low socio-economic deprivation, although Latchford MC is very much the exception with most of their patients living in the most deprived 40% of areas in England.
- Compared to Warrington overall, South Cluster has a lower proportion of 20-39 year-olds, and a higher proportion of patients aged 40+. However Latchford MC has a much younger population than the other 5 practices. Within the cluster, Stockton Heath MC has the highest proportion of patients aged 85+ (7%). The cluster had a significantly lower proportion who said they live alone, compared to Warrington overall, although it was significantly higher at Latchford MC.
- South Cluster was significantly better than Warrington as a whole in terms of employment and finances, but Latchford MC was the exception where significantly more said they'd gone without food (1 in 12), without heating (1 in 5), or had to borrow money (1 in 6) to manage financially, and 1 in 5 received means-tested benefits.
- South Cluster as a whole was worse than Warrington overall in terms of unsafe levels of alcohol consumption, and Lakeside Surgery was significantly worse. The cluster was significantly better in terms of smoking, obesity, physical activity, diet, and the proportion of patients with 3 or more lifestyle risk factors. Latchford MC was very different to the other practices; it was significantly worse for each risk factor apart from obesity, and had a significantly higher proportion of patients with 3 or more risk factors. 1 in 3 at Latchford MC said it wasn't easy to access leisure facilities, although South Cluster as a whole was similar to Warrington.
- General health, emotional wellbeing and limiting long-term illness/disability (all self-reported) were significantly better in South Cluster than Warrington overall, but significantly worse at Latchford MC. Out of the 26 Warrington GP practices, those with the best (Stretton MC) and worst (Latchford MC) levels of low emotional wellbeing are both in South Cluster. At Latchford MC, 1 in 8 patients said they felt lonely, but this was much lower at the other practices.
- Feeling safe when out alone after dark in their neighbourhood was significantly better in South Cluster than Warrington, but significantly worse at Latchford MC, where almost half of patients said they felt unsafe.

SUMMARY

- There was wide variation between practices in the proportion of patients who said they would recommend their GP practice; Brookfield Surgery and Stretton MC were significantly better than Warrington, and Stockton Heath significantly worse. There was also wide variation in the proportion of patients who said it wasn't easy to make a GP appointment; across the 26 practices in Warrington, Stretton MC was lowest and Stockton Heath MC highest (where nearly 1 in 4 said it wasn't easy).
- South Cluster was significantly better than Warrington overall for emergency (unplanned) hospital admissions in the all-age population and in those aged 65+, and for elective (planned) admissions in the all-age population. The elective admission rate in those aged 65+ was similar to Warrington. Most South practices were significantly lower for most of the 4 measures (elective/emergency, all-age/65+), apart from Latchford was significantly higher for all 4 measures, and Brookfield was significantly higher for elective admissions in people aged 65+. Latchford MC had the highest rate of all Warrington GP practices for elective admissions.
- Compared to Warrington overall, more South Cluster patients said it wasn't easy to access an A&E department, but there was wide variation between practices.
- South Cluster patients were more likely to be registered with a dentist, and more likely to have had a dental appointment in the past 2 years, although Latchford MC was very different to the other practices, with 1 in 4 not registered.
- South Cluster had substantially *lower* prevalence of heart failure, chronic obstructive pulmonary disease (COPD), obesity, palliative care, depression, epilepsy, learning disabilities, mental health and osteoporosis than Warrington overall. For South Cluster as a whole, none of the diseases listed had a substantially *higher* prevalence than Warrington overall, although some individual GP practices were substantially higher. (A lower recorded prevalence value can be due to a genuinely lower prevalence, or can be due to under-diagnosis).
- In terms of high-level health outcomes, both male and female life expectancy in South Cluster, Brookfield Surgery and Stockton Heath MC were significantly better than the Warrington average. However, at Latchford MC they were significantly worse. The all-age all-cause mortality rate, and the all-cause rate in patients aged 65+, were significantly better in South Cluster than Warrington overall.

Notes:

- *CCA Partnership GP practice. NB The 3 sites (Appleton, Chapelford and Culcheth), are in different clusters. The population structures of the 3 sites are very, very different, e.g. at April 2015, the proportion of the each site's population aged 65+ were: Appleton 13%; Chapelford 6%; Culcheth 21%. It is therefore reasonable to assume that health needs might be very different at the 3 sites. Most data is only available for CCA as a whole, and cannot be disaggregated to the 3 sites, in which case it is excluded from cluster calculations. However, the 3 sites are located far apart in the South, West and North of the borough, and in data for which geographical information (postcode/ward) is known, geographical location can be used to allocate data records to one of the 3 sites, based on the assumption that a patient is likely to attend the nearest CCA site to where they live (see notes at end of profile for more detail).*
- *Much of this analysis is based on the Warrington Health and Wellbeing Survey 2013. South Cluster had 1129 respondents. However CCA Partnership – Appleton and Stretton MC, being smaller practices, had less than 100 survey respondents each (57 and 71 respectively), so results for these individual practices should be interpreted cautiously.*

DEMOGRAPHY AND WIDER DETERMINANTS: Population Age Structure and Proportion Living Alone

GP Practice	Registered Pop'n	Percentage in each ageband, 2015						Total
		0 to 4	5 to 19	20 to 39	40 to 64	65 to 84	85+	
Brookfield Surgery	9004	5%	19%	18%	38%	16%	5%	100%
CCA Partnership - Appleton *Approx	*(3200)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Lakeside MC	10437	6%	18%	20%	36%	14%	5%	100%
Latchford MC	6238	8%	17%	31%	31%	9%	3%	100%
Stockton Heath MC	16969	5%	16%	20%	36%	16%	7%	100%
Stretton MC	3127	4%	18%	18%	42%	15%	4%	100%
CLUSTER 1 (SOUTH) excluding CCA	45775	6%	18%	21%	36%	14%	5%	100%
Warrington	214025	6%	17%	25%	35%	13%	4%	100%

NB Percentages may not sum to 100% due to rounding.

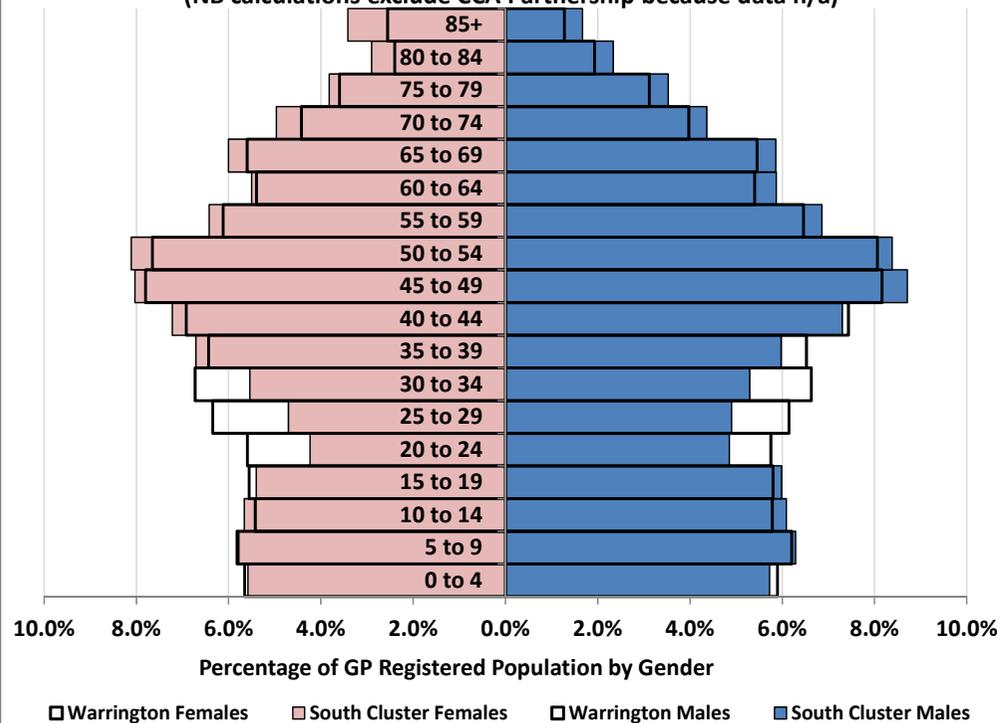
Population size: approximately 49,000, including CCA (2015). Stockton Heath MC is by far the biggest GP practice (almost 17,000 patients), and CCA Chapelford and Stretton MC by far the smallest (just over 3,000).

Population structure. A major factor affecting health needs is population structure; some practices have a much older population than the Warrington average, and some a much younger population.

- South Cluster practices: (NB Figures for South Cluster exclude CCA). Latchford MC has a much higher proportion of 20-39 year-olds and a much lower proportion of patients aged 65+ than the other practices. Stretton has a very high proportion of 40-64 year-olds. Stockton Heath MC has the highest proportion of patients aged 85+ (7%).
- Compared to Warrington, the cluster has a lower proportion of 20-39 year-olds and a higher proportion of patients aged 40+.

South Cluster and Warrington: GP Registered Populations
Population Pyramid 2015, by 5 Year Age Groups
(Source: Open Exeter)

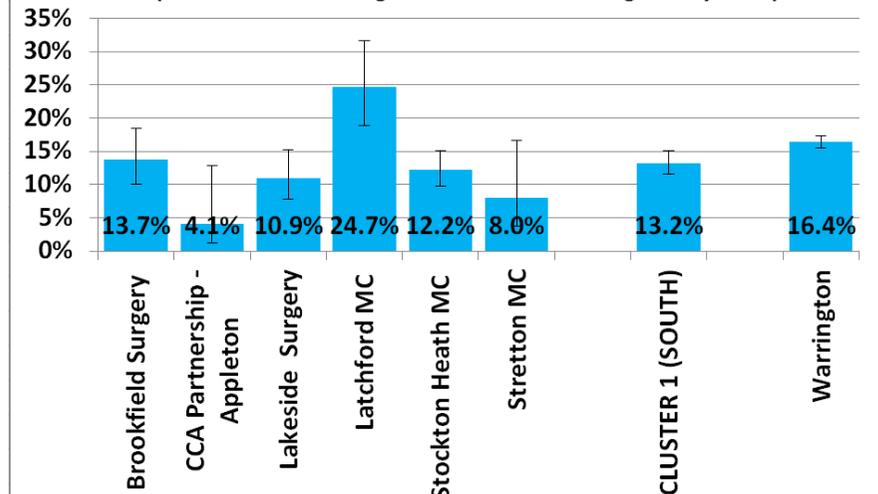
(NB calculations exclude CCA Partnership because data n/a)



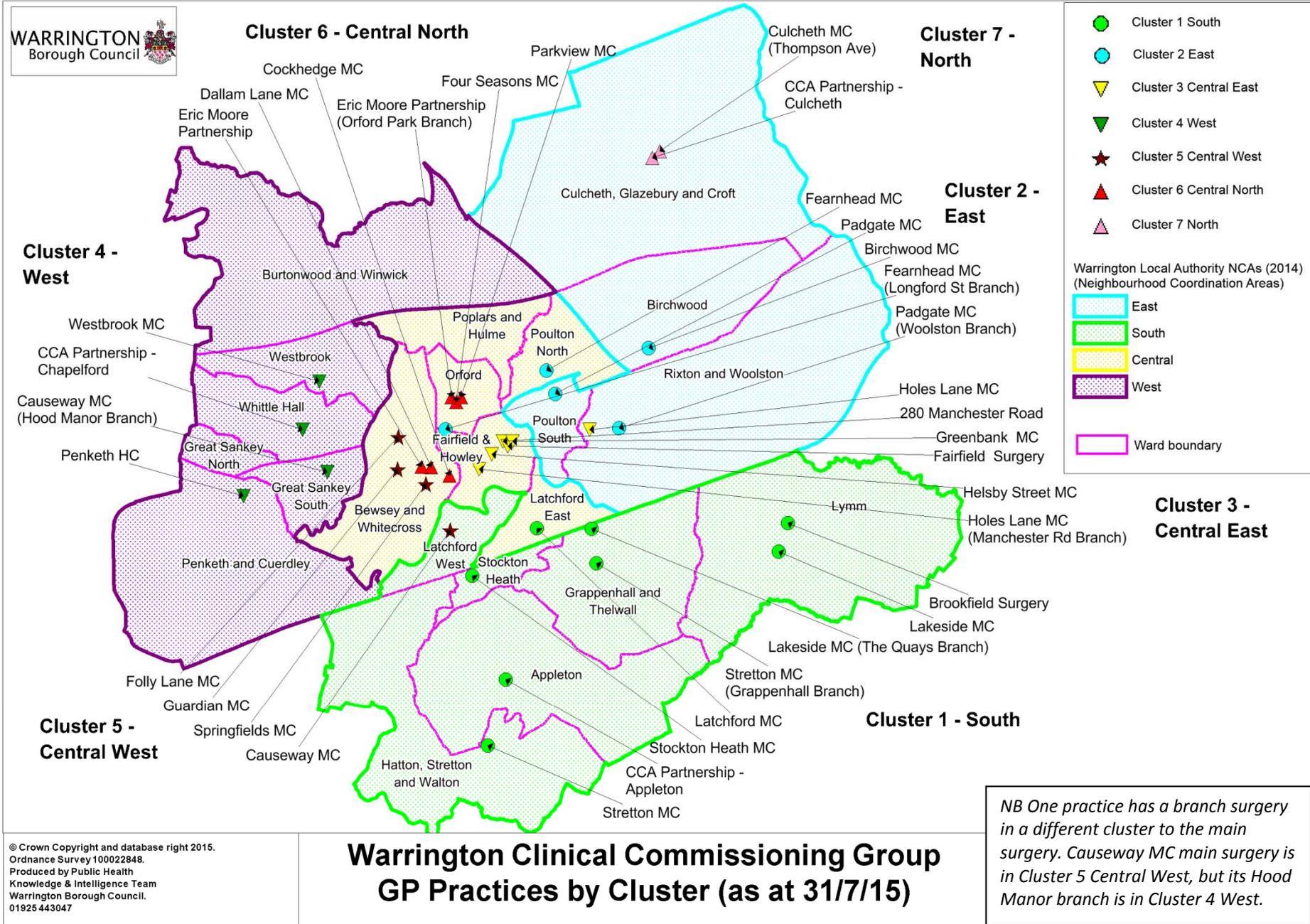
Percentage of people who live alone

Practices across Warrington ranged from 3.3% to 27.3% (Warrington average 16.4%). South Cluster was significantly lower than Warrington overall. By GP practice it ranged from 4.1% at CCA Partnership Appleton to 24.7% at Latchford MC. CCA Partnership Appleton, Lakeside Surgery and Stockton Heath MC were significantly lower; Latchford MC was significantly higher than Warrington overall.

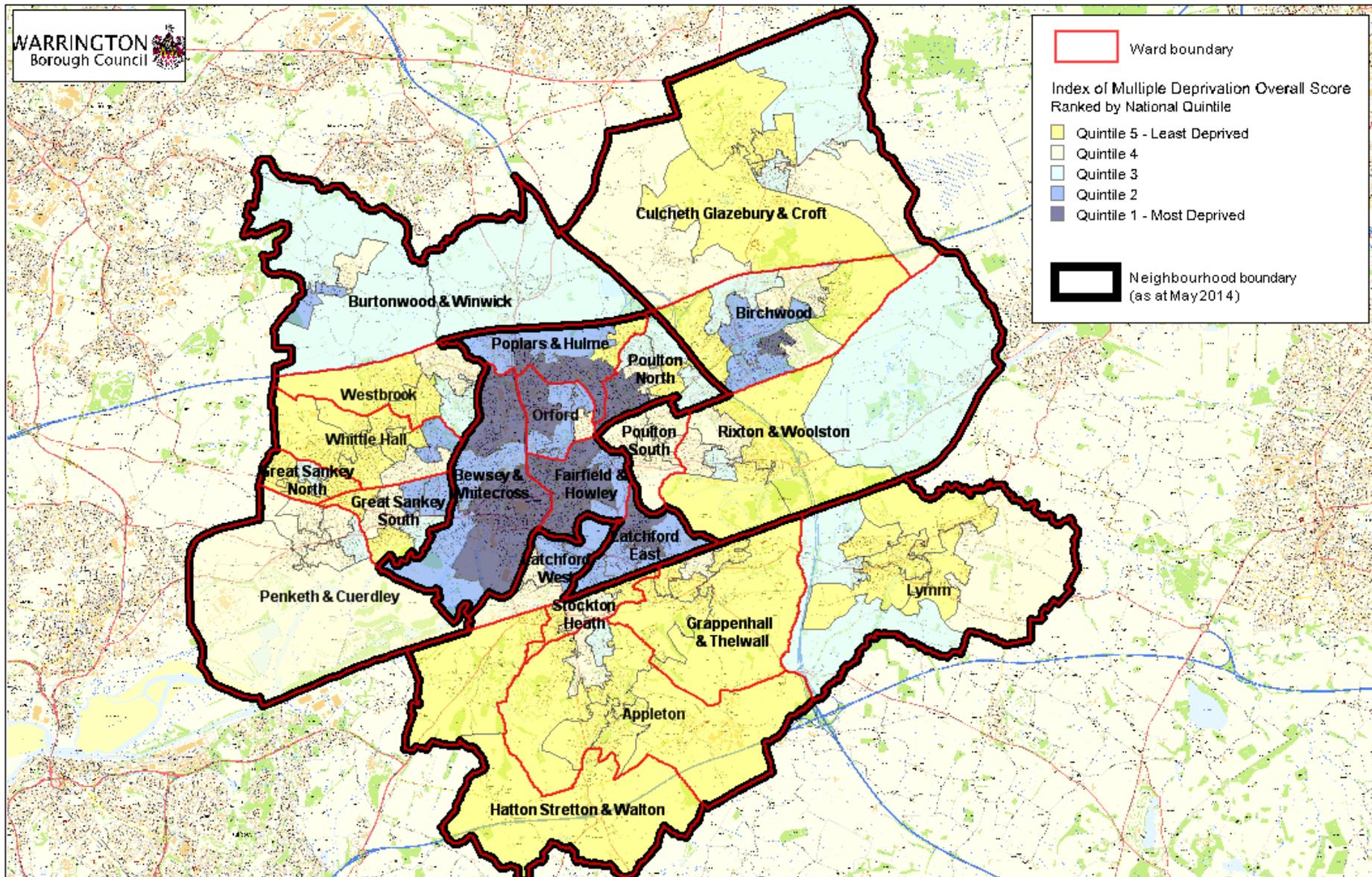
Percentage of people who live alone: GP Practices & Cluster
(Data Source: Warrington Health & Wellbeing Survey 2013)



Map of Warrington GP Practice and Cluster Locations



DEMOGRAPHY AND WIDER DETERMINANTS: Map of Socio-Economic Deprivation across Warrington



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**Warrington LSOAs:
 Indices of Multiple Deprivation 2010: Overall Deprivation**

Aug 2014

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 IMD 2010 with backdrop.wor

DEMOGRAPHY AND WIDER DETERMINANTS: Socio-Economic Deprivation and Geographical Location (Electoral Ward)

Population by ward: South Cluster patients live in Lymm (27%), Appleton (18%), Grappenhall & Thelwall (15%), Stockton Heath (11%), Latchford East (9%), Hatton Stretton & Walton 6%) and Latchford West (5%). 7% of South Cluster patients live outside Warrington (mainly in Cheshire East and Cheshire West & Chester local authorities).

There are wide health inequalities between people living in areas of high levels of socio-economic deprivation and those living in areas of low deprivation; this is reflected in the analysis by GP practice, with practices serving more deprived populations usually having worse health outcomes.

PROPORTION OF PRACTICE/CLUSTER POPULATION LIVING IN EACH WARD

Ward	Brookfield Surgery	CCA Appleton	Lakeside Surgery	Latchford MC	Stockton Heath MC	Stretton MC	CLUSTER 1 (SOUTH)	ALL WARRINGTON GP REGISTERED PATIENTS
Appleton	2%	62%	3%	3%	32%	27%	18%	5%
Bewsey & Whitecross	0%	0%	0%	1%	0%	0%	0%	7%
Birchwood	0%	0%	0%	0%	0%	0%	0%	5%
Burtonwood & Winwick	0%	0%	0%	0%	0%	0%	0%	1%
Culcheth, Glazebury & Croft	0%	0%	0%	0%	0%	0%	0%	5%
Fairfield & Howley	0%	0%	0%	4%	0%	0%	1%	7%
Grappenhall & Thelwall	6%	10%	30%	7%	16%	8%	15%	5%
Great Sankey North	0%	0%	0%	0%	0%	0%	0%	3%
Great Sankey South	0%	0%	0%	0%	0%	0%	0%	5%
Hatton, Stretton & Walton	0%	12%	1%	0%	10%	19%	6%	2%
Latchford East	0%	1%	0%	58%	3%	2%	9%	4%
Latchford West	0%	2%	0%	14%	10%	3%	5%	4%
Lymm	81%	0%	54%	0%	0%	0%	27%	6%
Orford	0%	0%	0%	2%	0%	0%	0%	5%
Penketh & Cuerdley	0%	0%	0%	0%	0%	0%	0%	4%
Poplars & Hulme	0%	0%	0%	3%	0%	0%	0%	5%
Poulton North	0%	0%	0%	1%	0%	0%	0%	5%
Poulton South	0%	0%	0%	1%	0%	0%	0%	3%
Rixton & Woolston	0%	0%	0%	1%	0%	0%	0%	4%
Stockton Heath	1%	8%	3%	4%	25%	5%	11%	3%
Westbrook	0%	0%	0%	0%	0%	0%	0%	3%
Whittle Hall	0%	0%	0%	0%	0%	0%	0%	7%
All Warrington Wards	91%	95%	91%	100%	96%	67%	93%	98%
All non-Warrington wards	9%	5%	9%	0%	4%	33%	7%	2%
ALL WARRINGTON REGISTERED PATIENTS	100%	100%	100%	100%	100%	100%	100%	100%

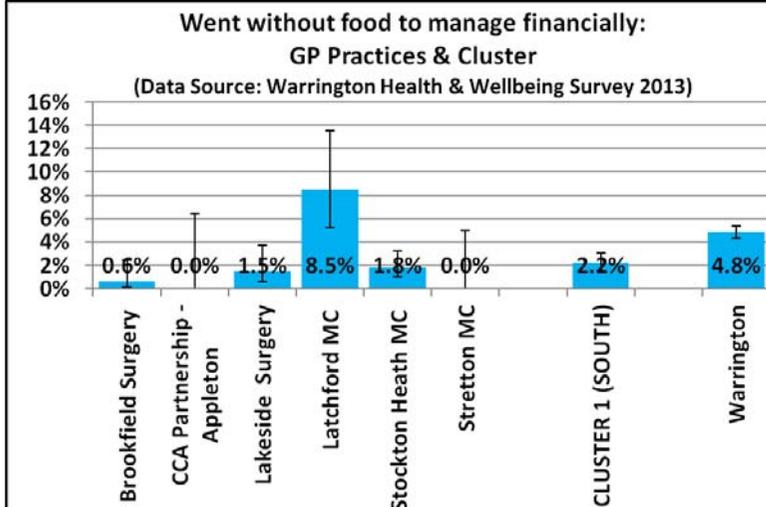
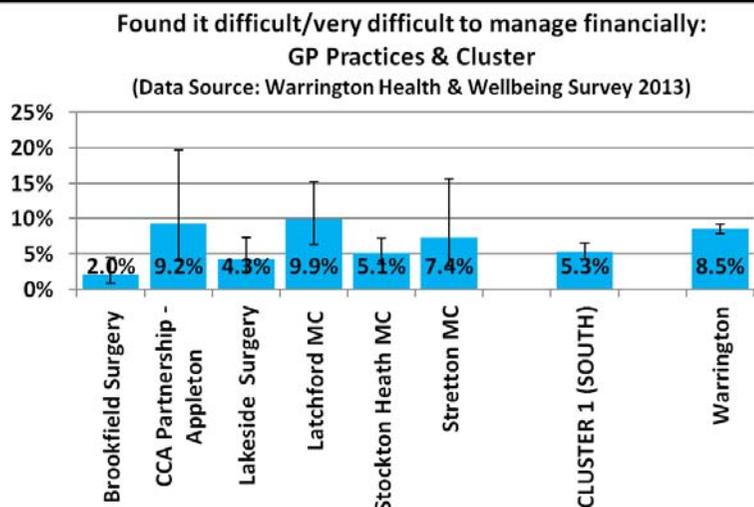
Measuring Socio-Economic Deprivation (see map of deprivation in Warrington). Lower Super Output Areas (LSOAs) are small geographical units. Deprivation is measured using the Index of Multiple Deprivation (IMD) 2010. For each LSOA, a deprivation score is calculated covering a broad range of issues: income, employment, health and disability, education and skills, housing and services, crime, and living environment. All LSOAs in England are ranked by IMD score and then split into 5 equal sized groups (called quintiles). Warrington contains 127 LSOAs; these are grouped according to which national quintile they are in (Quintile 1 is the most deprived; Quintile 5 the least).

Population by socio-economic deprivation: overall, 57% of South Cluster patients live in Quintile 5 (the least deprived), with a further 17% in Quintile 4. The population of most practices do not live in deprived areas, the exception being Latchford MC, with 28% of its patients living in Quintile 1 (most deprived areas) and a further 52% in Quintile 2.

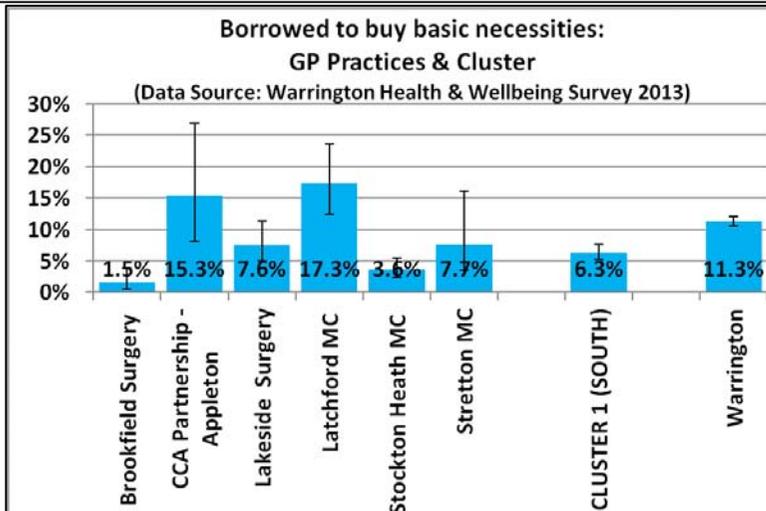
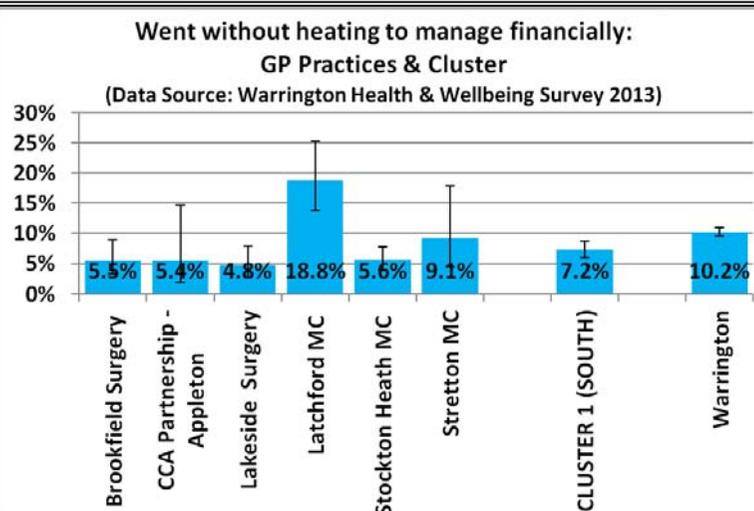
NB Percentages may not sum to 100% due to rounding.

IMD 2010 Quintile	Brookfield Surgery	CCA Appleton	Lakeside Surgery	Latchford MC	Stockton Heath MC	Stretton MC	CLUSTER 1 (SOUTH)	ALL WARRINGTON GP REGISTERED PATIENTS
Quintile 1 (most deprived)	0%	0%	0%	28%	1%	1%	4%	18%
Quintile 2	0%	1%	0%	52%	6%	3%	9%	17%
Quintile 3	9%	5%	8%	2%	6%	2%	6%	10%
Quintile 4	12%	11%	17%	6%	26%	8%	17%	21%
Quintile 5 (least deprived)	69%	78%	65%	11%	58%	53%	57%	31%
All Warrington LSOAs	91%	95%	91%	100%	96%	67%	93%	98%
All non-Warrington LSOA	9%	5%	9%	0%	4%	33%	7%	2%

DEMOGRAPHY AND WIDER DETERMINANTS: Finances

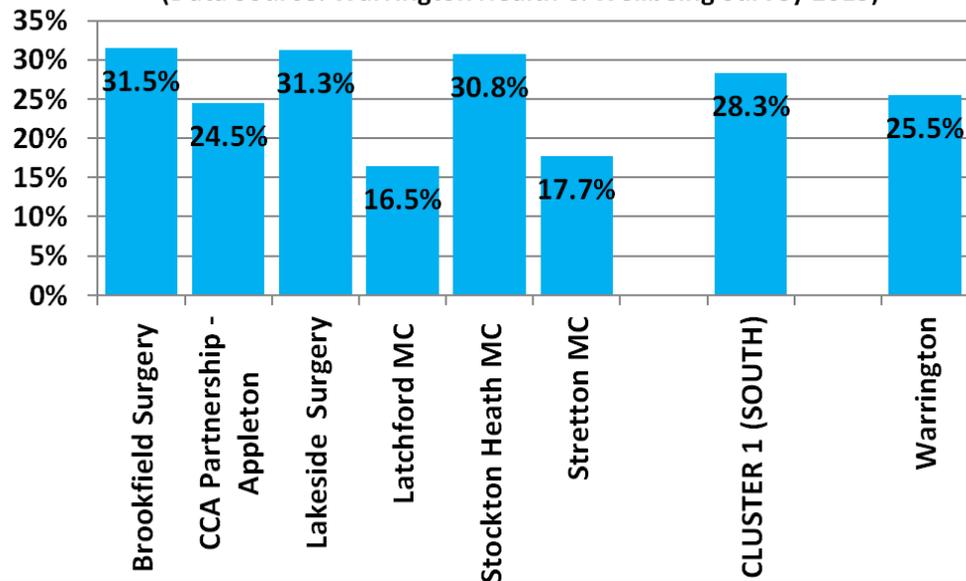


- **Found it difficult/very difficult to manage financially:** GP practices across Warrington ranged from 2.0% to 17.8% (Warrington average 8.5%). South Cluster was significantly better than Warrington, as were Brookfield Surgery, Lakeside Surgery and Stockton Heath MC.
- **Went without food to manage financially:** GP practices across Warrington ranged from 0% to 12.9% (Warrington average 4.8%). South Cluster was significantly better than Warrington, as were Brookfield Surgery, Lakeside Surgery and Stretton MC.
- **Went without heating to manage financially:** GP practices across Warrington ranged from 3.5% to 20.7% (Warrington average 10.2%). South Cluster was significantly better than Warrington. All GP practices were better than Warrington, except Latchford MC (18.8%, significantly worse). Brookfield Surgery, Lakeside Surgery and Stockton Heath MC were significantly better than Warrington.
- **Borrowed to buy basic necessities:** GP practices across Warrington ranged from 1.5% to 31.6% (Warrington average 11.3%). South Cluster was significantly better than Warrington. Latchford MC (17.3%) was significantly worse than Warrington; Stockton Heath MC and Brookfield Surgery were significantly better.

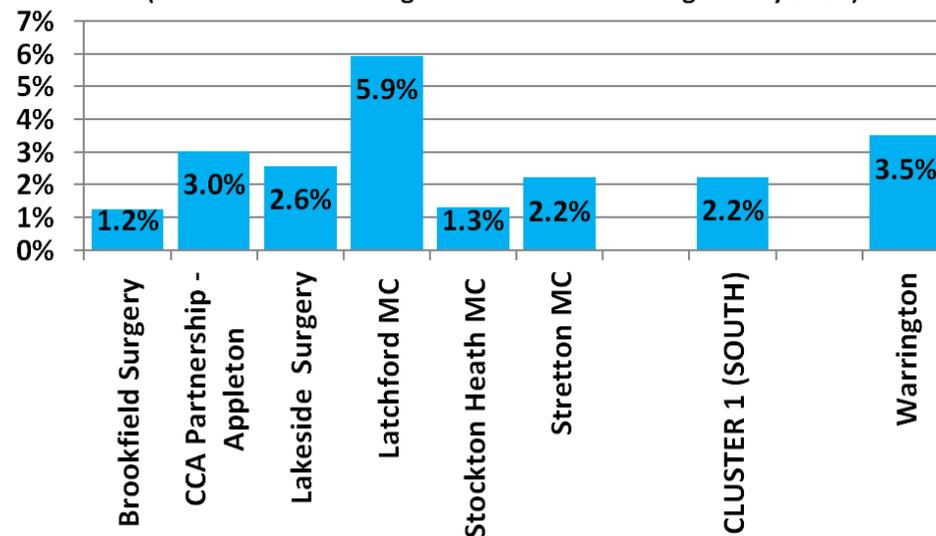


DEMOGRAPHY AND WIDER DETERMINANTS: Unemployment, Benefits and Retired

Employment status - Retired: GP Practices & Cluster
(Data Source: Warrington Health & Wellbeing Survey 2013)



Employment Status - Unemployed and looking for a job: GP Practices & Cluster
(Data Source: Warrington Health & Wellbeing Survey 2013)

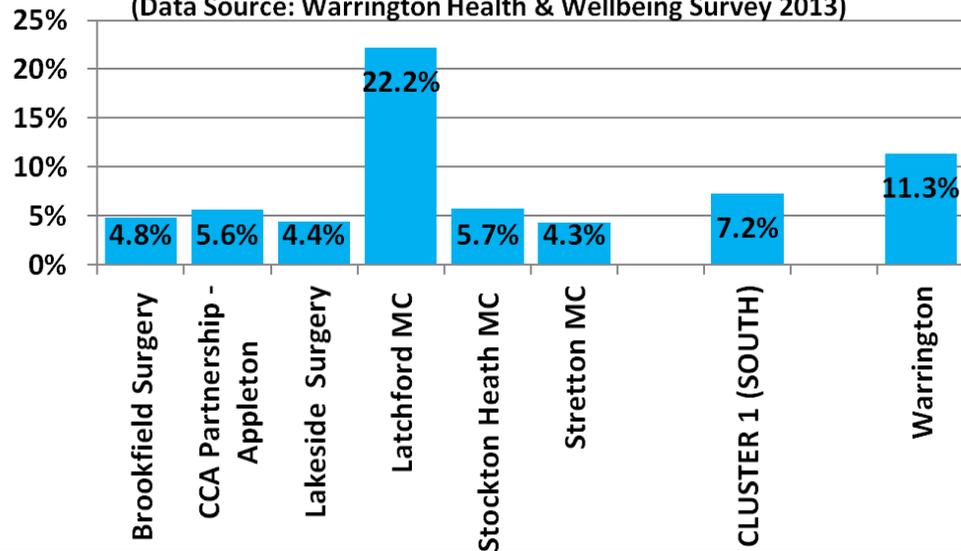


- **Employment status - retired:** GP practices across Warrington ranged from 5.7% to 38.8% (Warrington average 25.5%). South Cluster (28.3%) was slightly higher than Warrington. South GP practices ranged from 16.5% at Latchford MC to 31.5% at Brookfield Surgery.

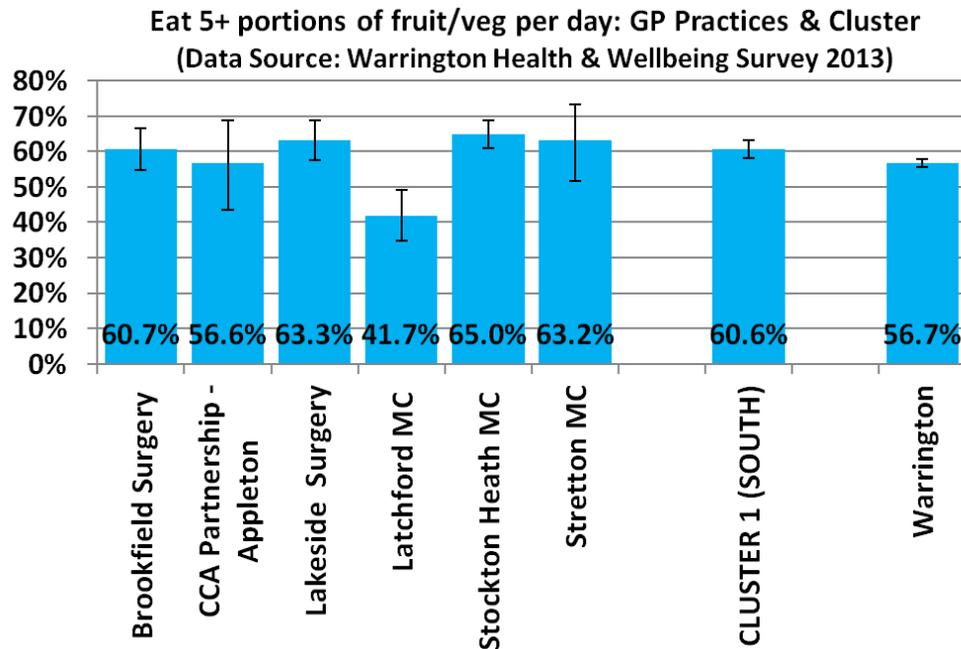
- **Employment status - unemployed and looking for a job:** GP practices across Warrington ranged from 1.2% to 5.9% (Warrington average 3.5%). South Cluster (2.2%) was better than Warrington, as were all practices except Latchford MC (5.9%).

- **Employment status - received income support / social security benefits:** GP practices across Warrington ranged from 3.7% to 25.4% (Warrington average 11.3%). South Cluster (7.2%) was substantially lower than Warrington. All South GP practices were lower than Warrington overall (between 4% and 6%) apart from Latchford MC (22.2%).

Received income support/social security benefits: GP Practices & Cluster
(Data Source: Warrington Health & Wellbeing Survey 2013)



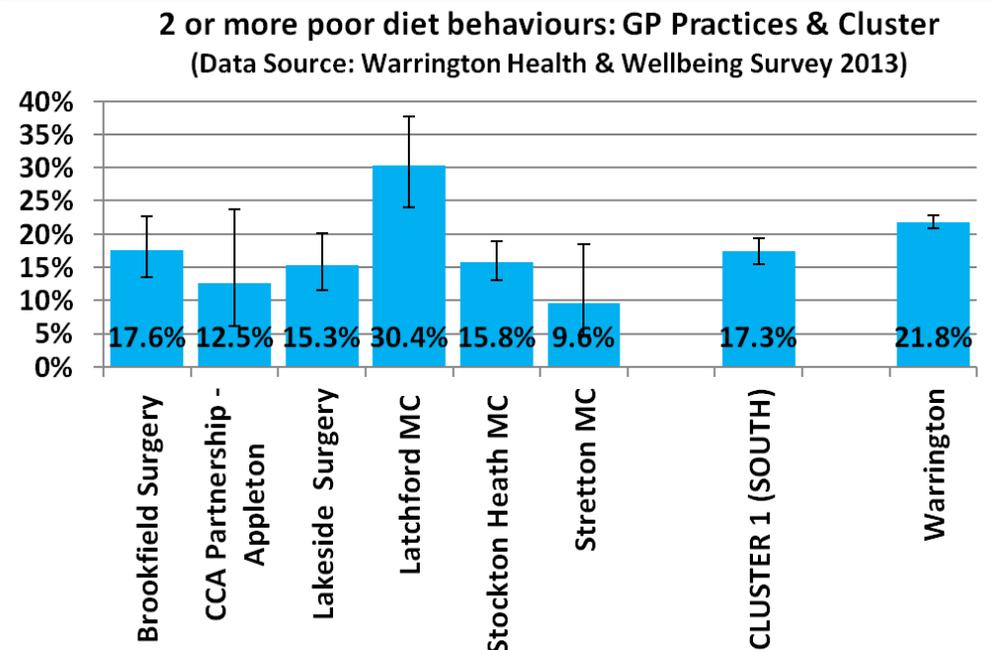
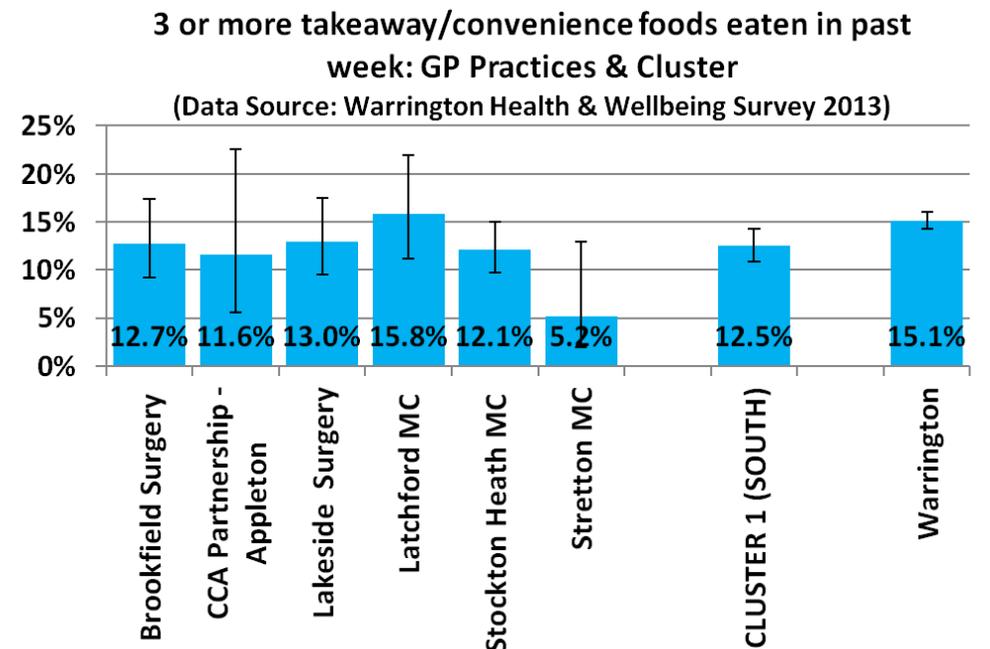
HEALTH-RELATED BEHAVIOUR: Diet



• **Eat 5+ portions of fruit/veg per day:** GP practices across Warrington ranged from 35.9% to 65.0% (Warrington average 56.7%). South Cluster (60.6%) was significantly better than Warrington overall. South GP practices ranged from 41.7% at Latchford MC (significantly worse) to 65.0% at Stockton Heath MC (significantly better).

• **3 or more takeaway/convenience foods eaten in past week:** GP practices across Warrington ranged from 5.2% to 21.8% (Warrington average 15.1%). South Cluster (12.5%) was not significantly different to Warrington overall. South GP practices ranged from 5.2% at Stretton MC (significantly better) to 15.8% at Latchford MC.

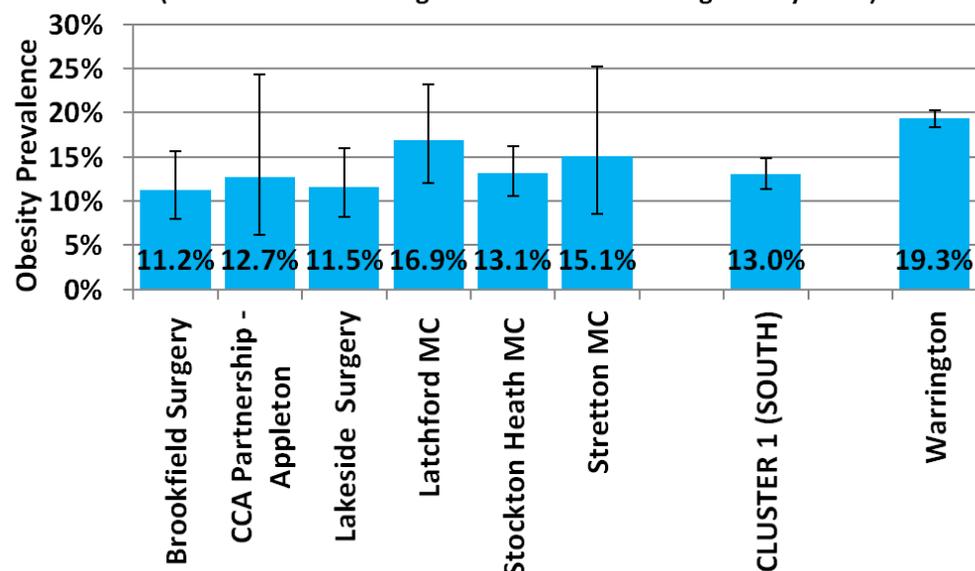
• **2 or more poor diet behaviours:** GP practices across Warrington ranged from 9.6% to 35.9% (Warrington average 21.8%). South Cluster (17.3%) was significantly better than Warrington overall. South GP practices ranged from 9.6% at Stretton MC to 30.4% at Latchford MC. Latchford MC was significantly worse; Lakeside Surgery, Stockton Heath MC and Stretton MC were significantly better.



HEALTH-RELATED BEHAVIOUR: Obesity and Physical Activity

Obesity Prevalence: GP Practices & Cluster

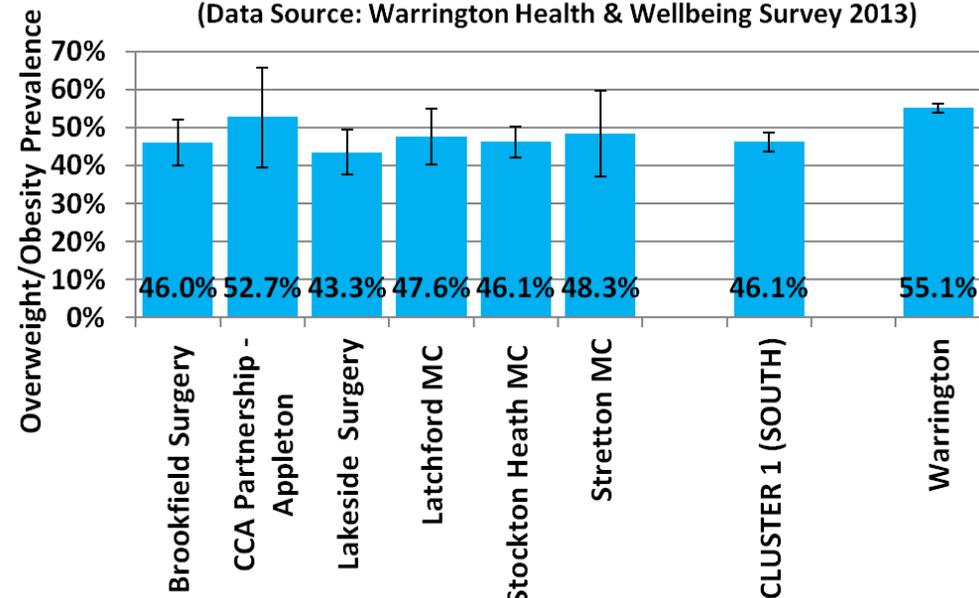
(Data Source: Warrington Health & Wellbeing Survey 2013)



- Obesity prevalence:** GP practices across Warrington ranged from 11.2% to 29.4% (Warrington average 19.3%). South Cluster (13%), Brookfield Surgery, Lakeside Surgery and Stockton Heath MC were significantly better than Warrington.
- All excess weight (overweight/obese) prevalence:** GP practices across Warrington ranged from 43.3% to 66.0% (Warrington average 55.1%). South Cluster (46.1%), Brookfield Surgery, Lakeside Surgery and Stockton Heath MC were significantly better than Warrington.
- Do less than 30 "equivalent" minutes physical activity/week:** GP practices across Warrington ranged from 5.8% to 22.2% (Warrington average 13.3%). South Cluster (9.7%) was significantly better than Warrington, as were Brookfield Surgery, Lakeside Surgery and Stockton Heath MC. South GP practices ranged from 5.8% at CCA Partnership Appleton to 17.5% at Latchford MC.

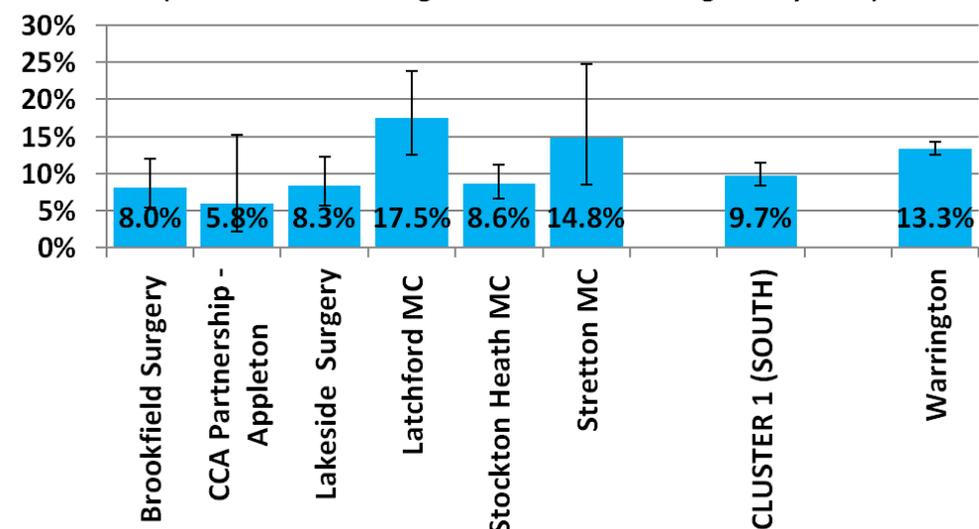
Overweight/Obesity Prevalence: GP Practices & Cluster

(Data Source: Warrington Health & Wellbeing Survey 2013)



Do less than 30 "equivalent" minutes physical activity/week: GP Practices & Cluster

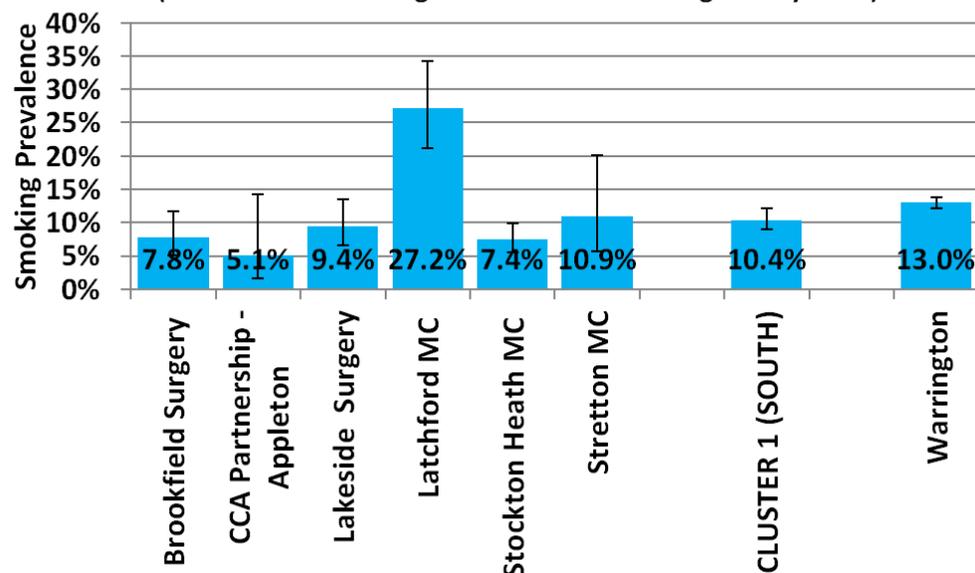
(Data Source: Warrington Health & Wellbeing Survey 2013)



HEALTH-RELATED BEHAVIOUR: Smoking, Alcohol Consumption, and Multiple Lifestyle Risk Factors

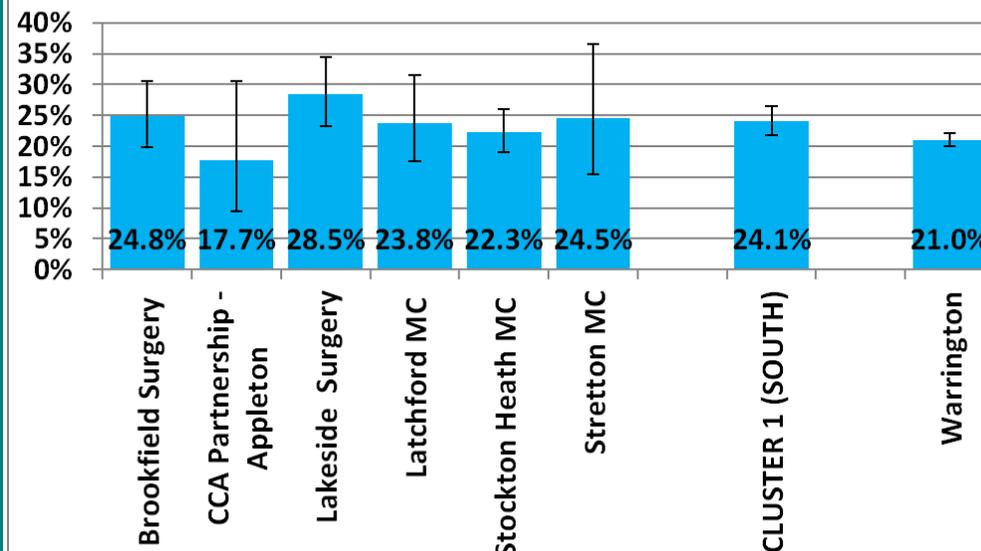
Smoking Prevalence: GP Practices & Cluster

(Data Source: Warrington Health & Wellbeing Survey 2013)



Unsafe level of alcohol consumption: GP Practices & Cluster

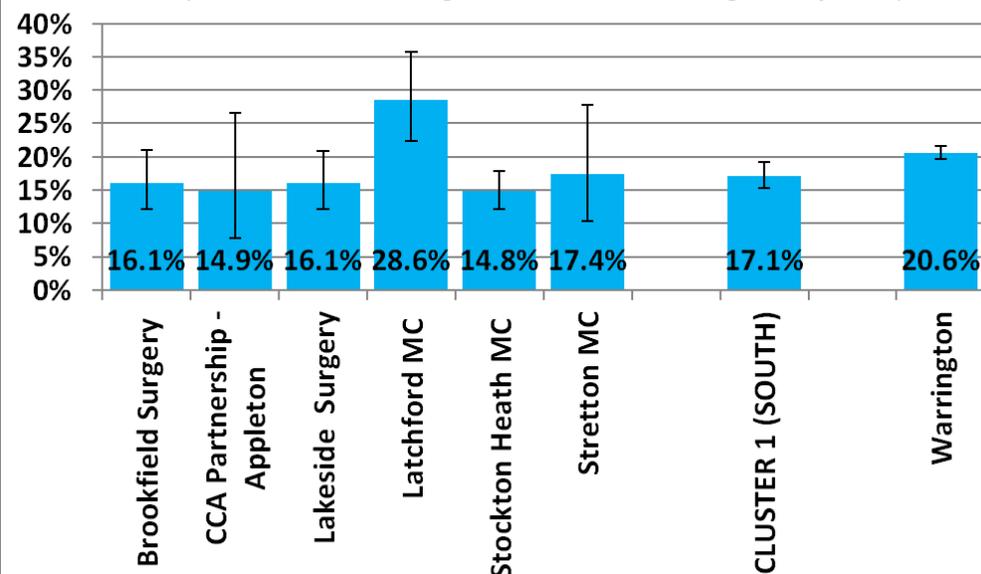
(Data Source: Warrington Health & Wellbeing Survey 2013)



- Smoking prevalence:** practices across Warrington ranged from 5.1% to 27.2% (Warrington average 13.0%). South Cluster (10.4%) was significantly better than Warrington overall. At Brookfield and Stockton Heath practices it was significantly better and at Latchford highly significantly worse than Warrington.
- Unsafe alcohol consumption:** GP practices across Warrington ranged from 12.1% to 28.5% (Warrington average 21.0%). South Cluster (24.1%) was worse than Warrington overall, but not significantly so. By GP practice, it ranged from 17.7% at CCA Partnership (Appleton) to 28.5% at Lakeside MC (significantly worse).
- Key modifiable lifestyle factors that increase the risk of cardiovascular disease (CVD) are:** smoking, poor diet, obesity, lack of physical activity and high alcohol consumption. These risk factors tend to 'cluster' together. The 5 risk factors used for this analysis are: overweight/obese, low physical exercise, <5 fruit/veg per day, excess alcohol consumption, and smoking.
- 3 or more health-related risk factors:** GP practices across Warrington ranged from 14.8% to 32.9% (Warrington average 20.6%). South Cluster (17.1%) was significantly better than Warrington overall. By GP practice, it ranged from 14.8% at Stockton Heath MC (significantly better) to 28.6% at Latchford MC (significantly worse).

3 or more lifestyle risk factors: GP Practices & Cluster

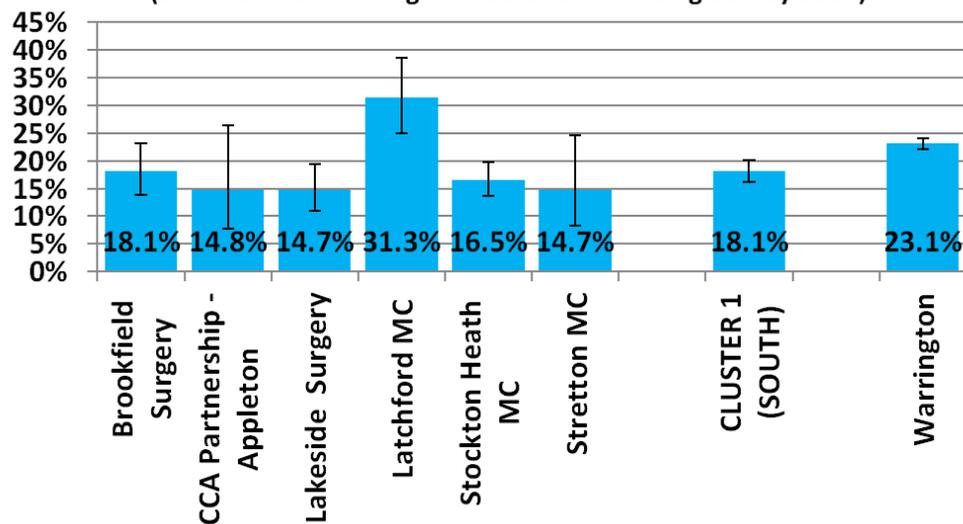
(Data Source: Warrington Health & Wellbeing Survey 2013)



HEALTH STATUS: Self-reported General Health and Emotional Wellbeing

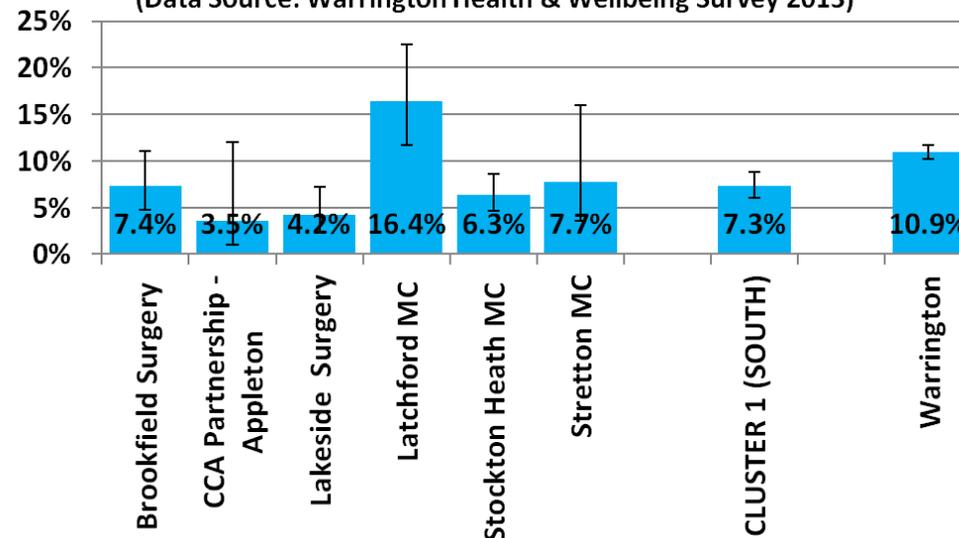
Self-reported general health is fair/bad/very bad: GP Practices & Cluster

(Data Source: Warrington Health & Wellbeing Survey 2013)



Have longstanding illness/disability/infirmary that limits activity: GP Practices & Cluster

(Data Source: Warrington Health & Wellbeing Survey 2013)



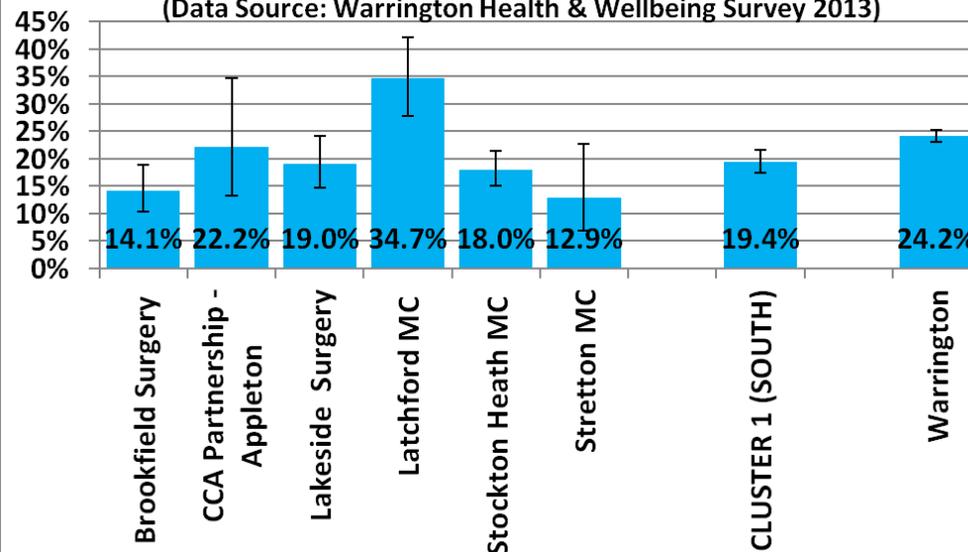
NB The following data was self-reported in the Warrington Health and Wellbeing Survey 2013 (i.e. is not based on GP records/diagnoses).

- **Self-reported general health is fair/bad/very bad:** GP practices across Warrington ranged from 14.4% to 31.3% (Warrington average 23.1%). South Cluster (18.1%) was significantly better than Warrington overall. Lakeside Surgery and Stockton Heath MC were also significantly better than Warrington overall; Latchford MC was significantly worse (31.3%).
- **Have a long-standing illness, disability or infirmity that limits activity** (compared to other people of the same age): GP practices across Warrington ranged from 3.5% to 16.5% (Warrington average 10.9%). South Cluster (7.3%) was significantly better than Warrington overall. All South practices were better than Warrington, except Latchford MC (16.4%, significantly worse). Lakeside Surgery (4.2%) and Stockton Heath MC (6.3%) were significantly better than Warrington overall.
- **Low emotional wellbeing:** GP practices across Warrington ranged from 12.9% to 34.7% (Warrington average 24.2%). South Cluster (19.4%) was significantly better than Warrington overall. Out of all 26 Warrington GP practices, those with the best and worst levels of low emotional wellbeing are both in South Cluster; 12.9% at Stretton MC and 34.7% at Latchford MC. Latchford MC was significantly worse; Brookfield Surgery, Stockton Heath MC and Stretton MC were significantly better.

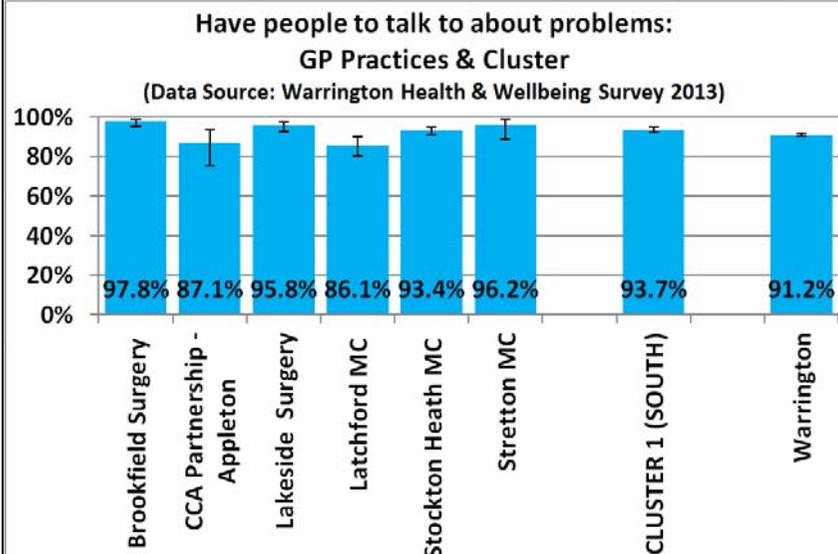
Low Emotional Wellbeing (WEMWBS):

GP Practices & Cluster

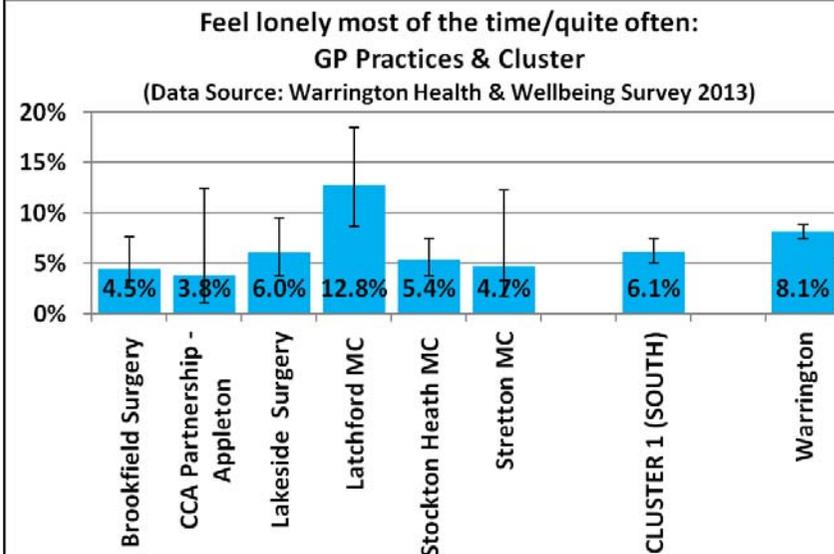
(Data Source: Warrington Health & Wellbeing Survey 2013)



HEALTH STATUS: Emotional Wellbeing - Loneliness, Talking about Problems, and Feelings of Safety



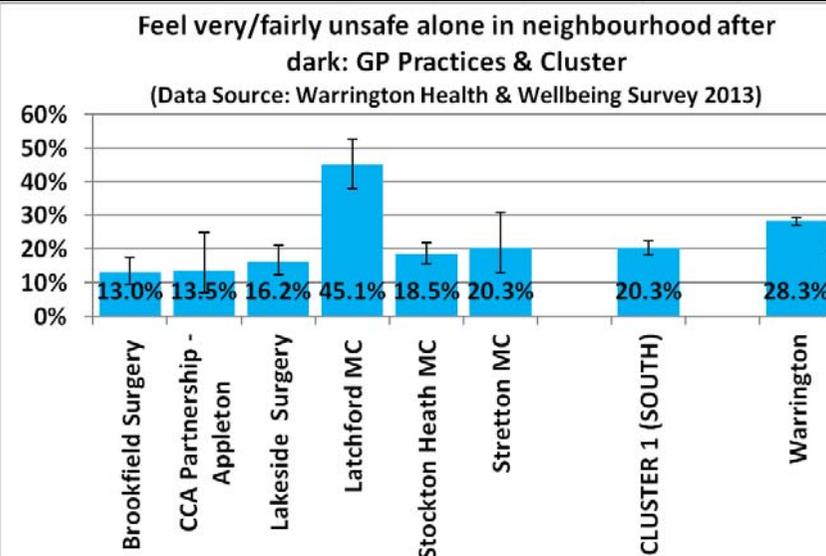
Had people to talk to about problems: GP practices across Warrington ranged from 83.1% to 97.8% (Warrington average 91.2%). South Cluster was significantly better than Warrington, as were Brookfield Surgery and Lakeside Surgery. Latchford MC was significantly worse than Warrington at 86.1%.



Felt lonely most of the time / quite often: GP practices across Warrington ranged from 2.3% to 16.2% (Warrington average 8.1%). South Cluster was slightly better than Warrington, but not significantly so. South practices ranged from 3.8% at CCA Partnership Appleton to 12.8% at Latchford MC. Stockton Heath MC was significantly better (5.4%) than Warrington overall.

Felt quite/very unsafe alone: at home/in local neighbourhood, daytime/after dark.

- **Alone at home during the day:** GP practices across Warrington ranged from 0% to 9.1% (Warrington average 2.5%). South Cluster (2.1%) was very similar to Warrington overall. Latchford MC was significantly worse (6.4%) and Stockton Heath MC was significantly better (0.9%) than Warrington overall.
- **Alone at home after dark:** GP practices across Warrington ranged from 2.0% to 26.8% (Warrington average 10.5%). South Cluster (8.5%) was similar to Warrington overall. By GP practice it ranged from 2.0% at CCA Partnership Appleton to 26.4% at Latchford MC (i.e. over a quarter of adults, and highly significantly worse than Warrington overall). Stockton Heath MC (6.6%) and Brookfield Surgery (4.2%) were significantly better than Warrington overall.
- **Alone in local neighbourhood during the day:** GP practices across Warrington ranged from 1.0% to 13.4% (Warrington average 4.8%). South Cluster (2.9%) was slightly better than Warrington overall, but not significantly so. South GP practices ranged from 1.0% at CCA Partnership Appleton to 9.9% at Latchford MC. Lakeside Surgery (1.8%) and Stockton Heath MC (1.9%) were significantly better than Warrington.
- **Alone in local neighbourhood after dark:** GP practices across Warrington ranged from 13.0% to 45.1% (Warrington average 28.3%). South Cluster (20.3%) was significantly better than Warrington overall. South GP practices ranged from 13.0% at Brookfield Surgery to 45.1% at Latchford MC. Latchford MC was extremely significantly worse than Warrington overall; Stretton MC was not significantly different; the other practices were significantly better.



WARRINGTON OVERALL: Health related behaviour by age/sex/deprivation

Data from the Health and Wellbeing Survey 2013 can't be analysed at a practice level by different age-bands, sex and deprivation; the statistics produced would be very imprecise and unreliable due to the small sample of respondents in each subgroup of the practice population. However, the following analysis at a Warrington level shows the general patterns and differences between men/women, age-bands and deprivation levels.

Obesity In both women and men, there was a strong relationship between obesity prevalence and deprivation. There was a steady decrease from 26% in the most deprived quintile to 15% in the least deprived. It was much lower in 18-39 year-olds than in the other age-bands.

Diet behaviours (related to consumption of takeaways, convenience foods, and 5+ fruit/veg per day).

The proportion of people with 2 or more poor diet behaviours was much higher in men (28%) than women (16%), and generally followed the pattern of deprivation, i.e. higher in more deprived areas. There were large differences by age; approximately 3 times more women aged 18-39 had 2 or more poor diet behaviours (25%) than those aged 65+ (8%). Over twice as many men aged 18-39 had 2 or more poor diet behaviours (38%) than those aged 65+ (18%). The proportion eating 5+ fruit/veg was higher in older people than younger people, higher in women than men, and higher in less deprived areas. Takeaways and convenience foods seemed to contribute much more to the differences in overall poor diet behaviour between men/women/age-bands/deprivation, whereas there were comparatively small differences in fruit/veg consumption.

Physical activity less than 30 mins/week (based on 'Equivalent minutes' = moderate intensity minutes + 2 x vigorous intensity minutes). More women than men had very low levels of physical activity. There were very large differences by age; 23% in those aged 65+ compared to 8% in the 18-39 age-band. There was a strong link with deprivation; twice as high in the most deprived quintile (20%) than in the least deprived (10%). (This link with deprivation was slightly more extreme in women than men).

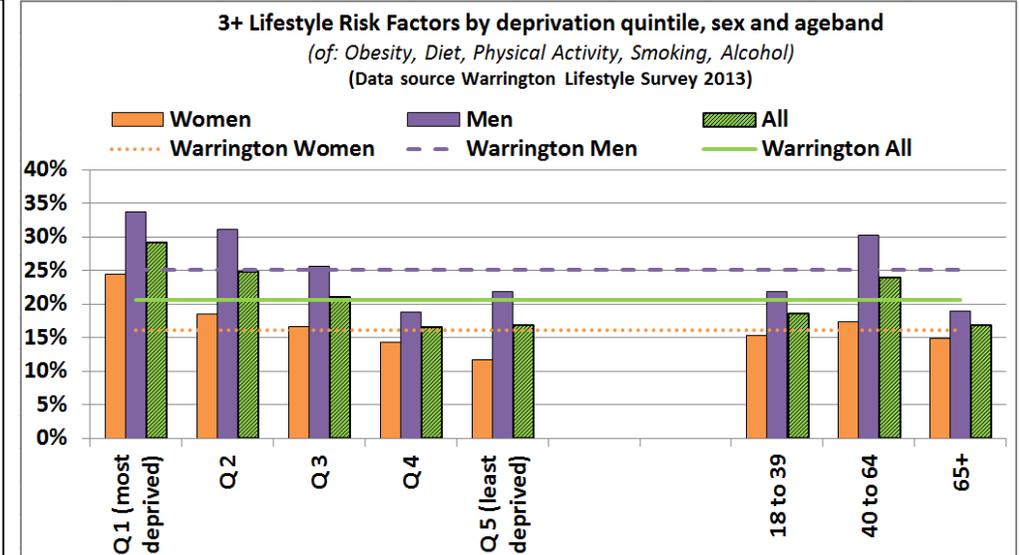
3 or more risk factors (of obesity, poor diet behaviours, physical activity, smoking and alcohol) In Warrington as a whole, 21% of respondents had 3 or more risk factors. In all deprivation quintiles and all age-bands, a higher proportion of men than women had at least 3 of the risk factors (in Warrington overall, 25% men and 16% women). There was little difference between age-bands in women, but in men it was much higher in those aged 40-64.

In both men and women, there was a very strong link with deprivation, with higher prevalence in the more deprived areas. The proportion was extremely high (44%) in men aged 40-64 in the most deprived quintile.

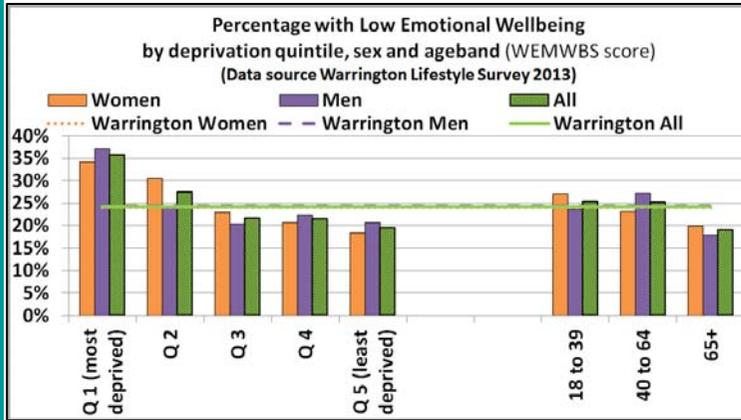
Smoking By age, prevalence was highest (16%) in 18-39 year-olds, 13% in 40-64 year-olds and 8% in people aged 65+. There was also a very strong relationship with deprivation; 26% in quintile 1 (most deprived), 17% in quintile 2, 10% in quintiles 3 and 4, and 7% in quintile 5 (least deprived).

On the whole, prevalence was slightly higher in men (15%) than women (11%), although there was very little difference between men and women in the 65+ age-band.

Unsafe alcohol consumption By age, this was highest in the 40-64 age-band. In women, it was noticeably higher in the *least* deprived quintile, than in the other quintiles. In men, it varied, but with no particular pattern across deprivation quintiles. In all age-bands and all quintiles, it was higher in men than women, although this difference was less pronounced in the less deprived areas (quintiles 4 and 5), and in the 18-39 and 40-64 age-bands.



WARRINGTON OVERALL: Emotional wellbeing, feelings of safety, and finances, by age/sex/deprivation

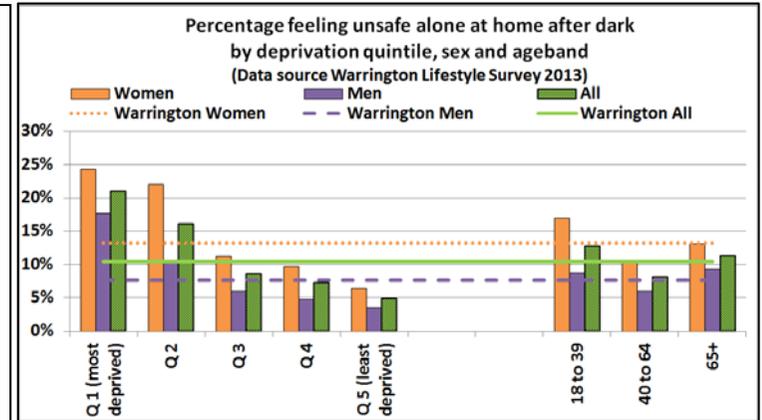
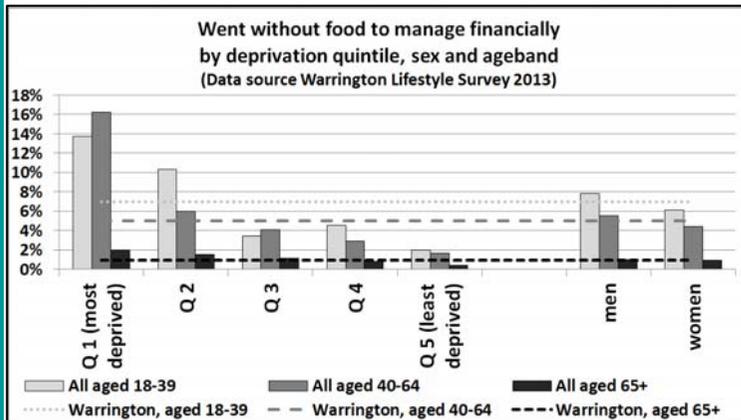
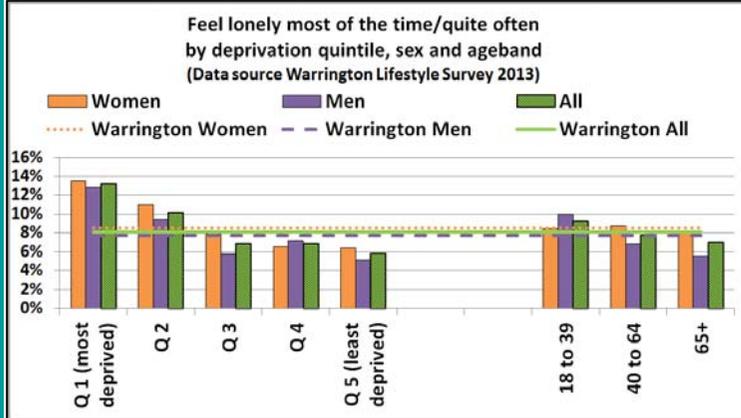


Low emotional wellbeing Across Warrington as a whole, 24% had low emotional wellbeing. There was little difference between men and women. It was less prevalent in those aged 65+ (19%) compared to 25% in the other age-bands. There was a very strong link with deprivation: almost twice as high in the most deprived quintile (36%) than in the least deprived (20%).

Loneliness Across Warrington, 8% said they felt lonely most of the time or quite often. By age-band, there was little difference in women (about 8.5%), but in men, 18-39 year-olds were most likely to feel lonely (10%), and men aged 65+ least likely (6%). There was a strong link with deprivation: prevalence in the most deprived quintile (13%) was over double that in the least deprived (6%).

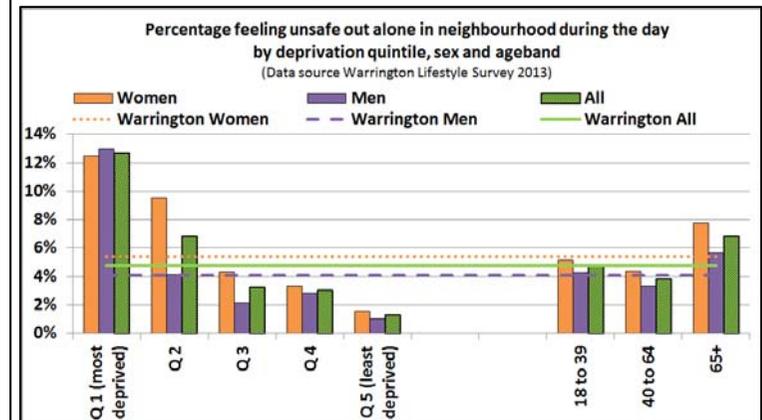
5% said they'd gone without food to manage financially. Generally, in each deprivation quintile and each age-band, there was relatively little difference between men and women, but there were big differences between age-bands and deprivation quintiles. Very few people aged 65+ in all deprivation quintiles said they had gone without food (1%). In the 40-64 age-band, 16% in quintile 1, and 6% in quintile 2 said they'd gone without food. In the 18-39 age-band, 14% in quintile 1, and 10% in quintile 2 said they'd gone without food.

Going without heating, and borrowing, in order to manage financially showed similar patterns; it was more likely to be people in the most deprived two quintiles, especially in the 18-39 age-band, and to a lesser extent the 40-64 age-band.



Unsafe alone at home after dark Women were more likely than men to feel unsafe; this was most extreme in the most deprived two quintiles, where almost a quarter felt unsafe. Women aged 18-39 were more likely to feel unsafe (17%), than women aged 40-64 (10%) or aged 65+ (13%).

Felt unsafe out alone in their neighbourhood after dark Women were much more likely than men to feel unsafe, and this was most extreme in the two most deprived quintiles, where over half of women felt unsafe; about a third in quintiles 3 and 4 felt unsafe, and about a quarter in quintile 5 (least deprived). 35% of those aged 65+ felt unsafe compared to 29% of 18-39 year-olds and 25% of 40-64 year-olds.



HEALTH STATUS: Disease Prevalence

Disease prevalence as recorded on GP registers (data source: QOF, Quality Outcomes Framework, 2014/15).

Large differences are highlighted: more than 20% higher (yellow) or lower (blue) - between the cluster or GP practice, and Warrington overall. NB These differences are likely to be partially due to the population structure of the practices, as QOF doesn't adjust for this. The proportion of patients aged 50+ is also shown. For some conditions, higher prevalence is linked to higher levels of deprivation. A lower prevalence value can be due to a genuinely lower prevalence, or can be due to under-diagnosis. South Cluster has substantially lower recorded prevalence of heart failure, COPD, obesity, palliative care, depression, epilepsy, learning disabilities, mental health and osteoporosis than Warrington overall. None of the diseases listed have a substantially higher recorded prevalence than Warrington overall.

Practice Name	2014-15 List Size, All Ages	PREVALENCE 2014-15 (QOF)																			Percentage of patients aged 50+		
		Atrial Fibrillation	CHD (Coronary Heart Disease) Cardiovascular Disease - Primary Prevention (30-74)	Heart Failure	Hypertension	Peripheral Arterial Disease Stroke and Transient Ischaemic Attack	Asthma	COPD (Chronic Obstructive Pulmonary Disease)	Obesity (16+)	Cancer	Chronic Kidney Disease (18+)	Diabetes Mellitus (17+)	Palliative Care	Dementia	Depression (18+)	Epilepsy (18+)	Learning Disabilities (18+)	Mental Health	Osteoporosis (50+)	Rheumatoid Arthritis (16+)			
Brookfield Surgery	8,942	1.64	3.29	0.72	0.42	11.74	0.56	1.57	5.71	0.85	4.10	2.68	1.52	4.03	0.13	0.60	5.95	0.49	0.11	0.48	0.05	0.62	41%
Lakeside Surgery	10,281	1.58	3.39	0.81	0.47	12.23	0.38	1.29	5.65	1.07	4.81	1.50	3.51	4.75	0.26	0.84	6.69	0.61	0.16	0.63	0.08	0.38	38%
Latchford MC	6,131	1.39	2.97	0.73	0.64	11.22	1.09	1.60	7.26	2.30	12.05	1.55	4.03	5.76	0.08	0.62	9.18	0.83	0.52	0.78	0.17	0.64	28%
Stockton Heath MC	17,244	2.33	4.02	0.63	0.68	13.70	1.10	1.99	5.09	0.91	4.38	2.84	4.11	5.75	0.08	0.97	3.75	0.70	0.34	0.73	0.03	0.75	44%
Stretton MC	3,093	1.36	3.36	2.03	0.71	16.91	0.52	1.49	5.30	1.58	8.81	2.78	5.55	5.54	0.03	0.58	6.31	0.40	0.39	0.29	0.15	0.94	44%
CCA Partnership - Appleton	3,172	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CLUSTER 1 (South)	48,863	1.83	3.55	0.80	0.58	12.9	0.79	1.66	5.64	1.17	5.7	2.33	3.57	5.18	0.13	0.79	5.7	0.63	0.28	0.64	0.07	0.64	n/a
Compared to Warrington overall*		112%	98%	83%	78%	94%	98%	97%	91%	65%	68%	101%	94%	83%	57%	106%	69%	78%	72%	75%	66%	88%	
NHS WARRINGTON CCG	212,955	1.64	3.64	0.97	0.74	13.7	0.81	1.72	6.21	1.80	8.5	2.29	3.78	6.23	0.23	0.75	8.3	0.82	0.39	0.84	0.10	0.73	37%
CHESHIRE, WARRINGTON & WIRRAL AREA TEAM	1,290,923	2.05	3.68	1.14	0.80	14.8	0.79	2.03	6.30	1.96	9.1	2.57	4.39	6.39	0.38	0.86	7.9	0.85	0.42	0.86	0.17	0.78	40%
NORTH OF ENGLAND COMMISSIONING REGION	15,914,528	1.73	3.91	1.07	0.86	14.5	0.84	1.96	6.38	2.37	10.4	2.33	4.47	6.67	0.35	0.80	8.13	0.90	0.49	0.91	0.17	0.77	37%
ENGLAND TOTAL	56,817,654	1.63	3.25	1.07	0.72	13.8	0.63	1.73	5.99	1.82	9.0	2.26	4.13	6.37	0.31	0.74	7.33	0.79	0.44	0.88	0.17	0.73	35%

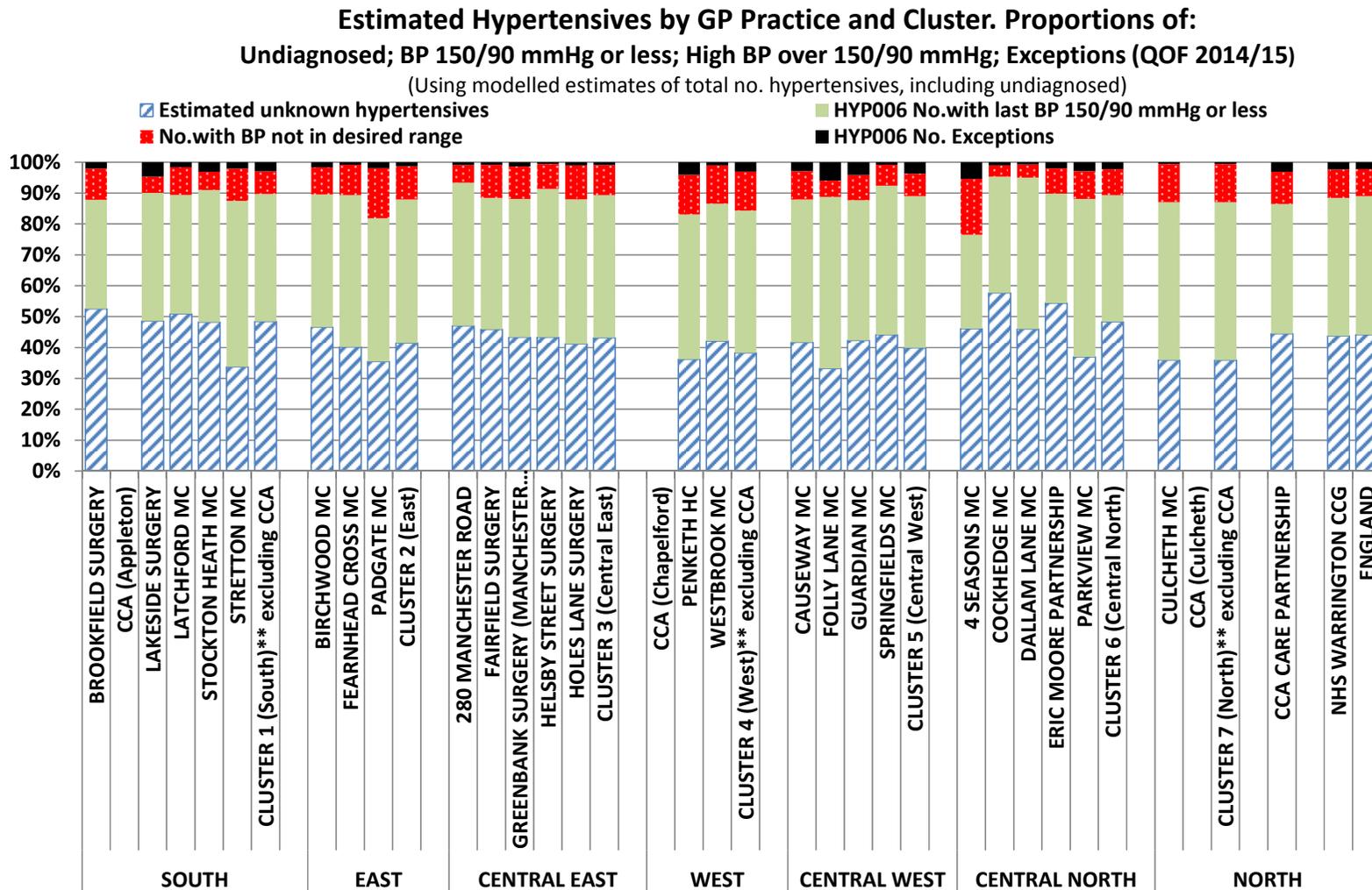
Note 1: Cluster compared to Warrington: e.g. 100% means cluster = Warrington; 62% means cluster is 62% of Warrington value; 112% means cluster is 12% higher than Warrington. These are shaded blue if prevalence is at least 20% lower than Warrington or yellow if prevalence is at least 20% higher than Warrington. GP practices are also shaded on this basis.

Note 2: Clusters which include one of the 3 CCA Partnership sites: The 3 sites of the CCA Partnership (Appleton, Chapelford & Culcheth) are in 3 different clusters. QOF data is only available for CCA as a whole. The 3 sites have very, very different population structures, e.g. at April 2015, the proportion of the each site's population aged 65+ were: Appleton 13%; Chapelford 6%; Culcheth 21%. It is therefore reasonable to assume that prevalence of long-term conditions will be very different at the 3 sites. For clusters with a CCA site, prevalence is based on non-CCA practices.

Note 3: Cluster prevalence rates are a weighted average of practice prevalences, weighted by practice population.

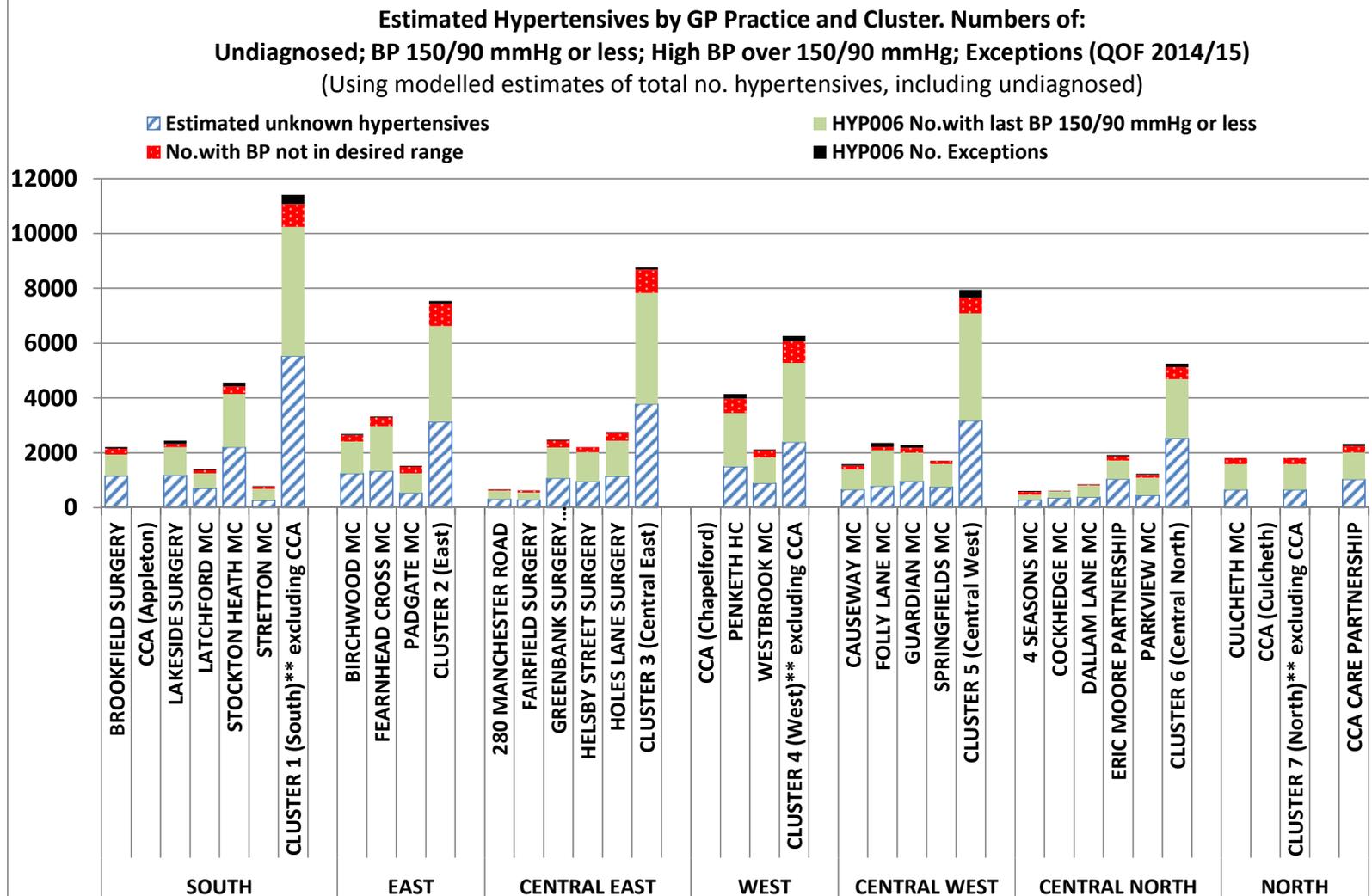
HEALTH STATUS: Disease Management, Hypertension

- The chart below shows the *proportion* of patients in each category. The chart on the following page shows the *number* of patients in each category. *Disease prevalence, exceptions and BP readings as recorded on GP registers in QOF 2014/15. Modelled estimates of total number of hypertensives, including those undiagnosed, available from PHE GP Practice Profiles (these are most recent available but should be interpreted with caution, as they are now quite out of date - 2011). NB South Cluster figures exclude CCA Appleton.*
- 5881 patients are on the hypertension registers (a recorded prevalence of 12.9%). Of these, 334 (5.7%) are excepted for the hypertension achievement indicator HYP006. Of the remaining 5547, the most recent BP reading in the last year of 4710 patients was within the desired range of 150/90 or less; 837 had a BP reading not in the desired range. The percentage of patients on the hypertension registers, whose most recent BP reading in the last year was in the desired range of 150/90 or less, is 80.1%. Using modelled estimates of the number of hypertensives (both diagnosed and undiagnosed), the cluster's diagnosis rate was 52% compared to 56% in Warrington and England.

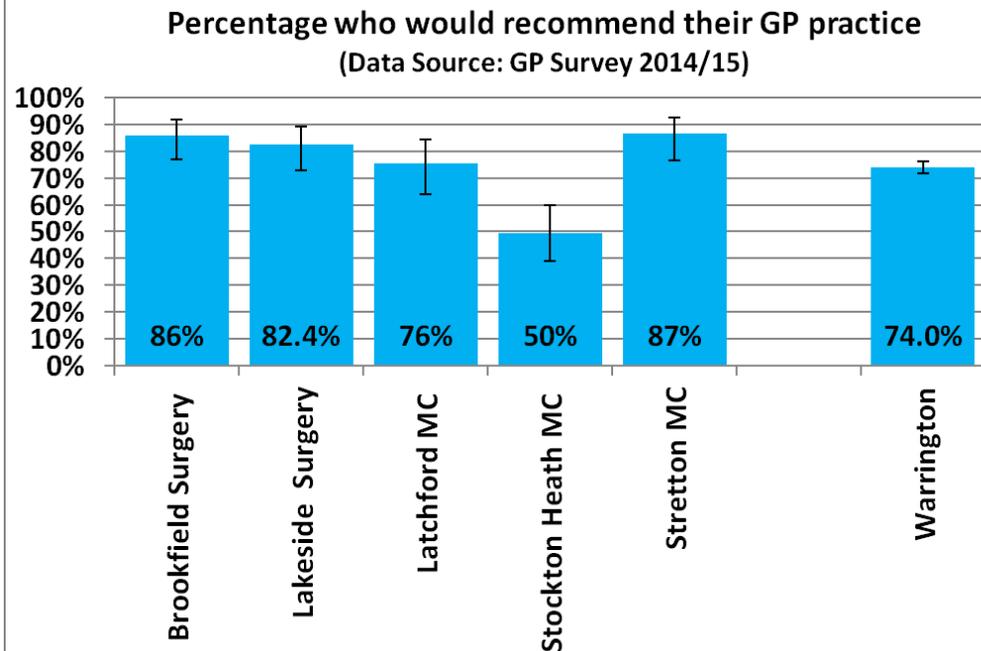


HEALTH STATUS: Disease Management, Hypertension

- The chart below shows the number of patients in each category. The chart on the previous page shows the proportion of patients in each category. *Disease prevalence, exceptions and BP readings as recorded on GP registers in QOF 2014/15. Modelled estimates of total number of hypertensives, including those undiagnosed, available from PHE GP Practice Profiles (these are most recent available but should be interpreted with caution, as they are now quite out of date - 2011). NB South Cluster figures exclude CCA Appleton.*
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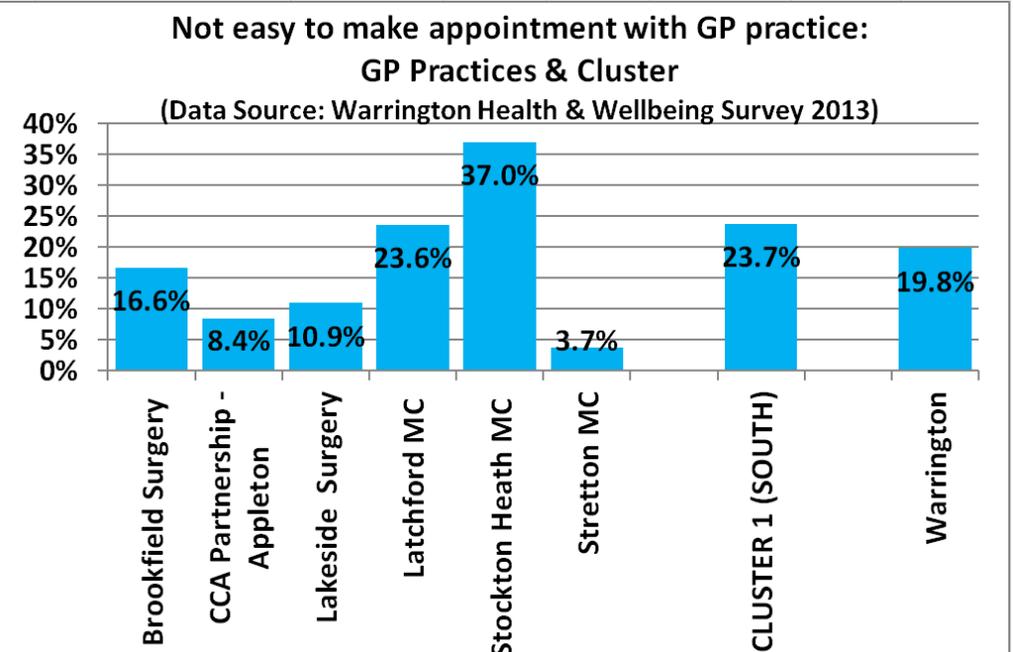
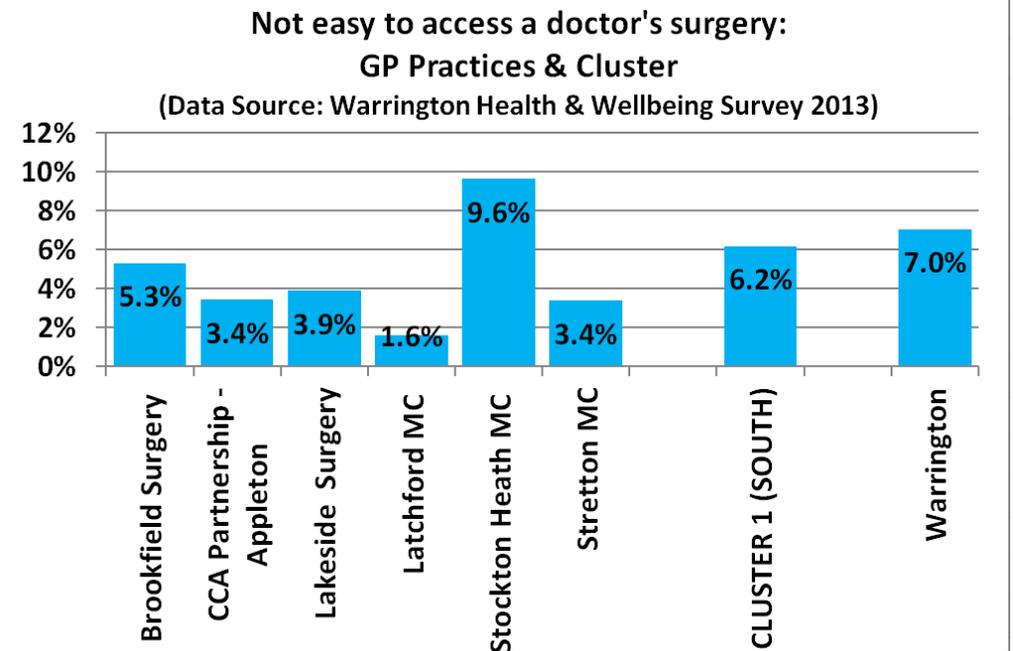
HEALTH EXPERIENCE: Access to Health Services



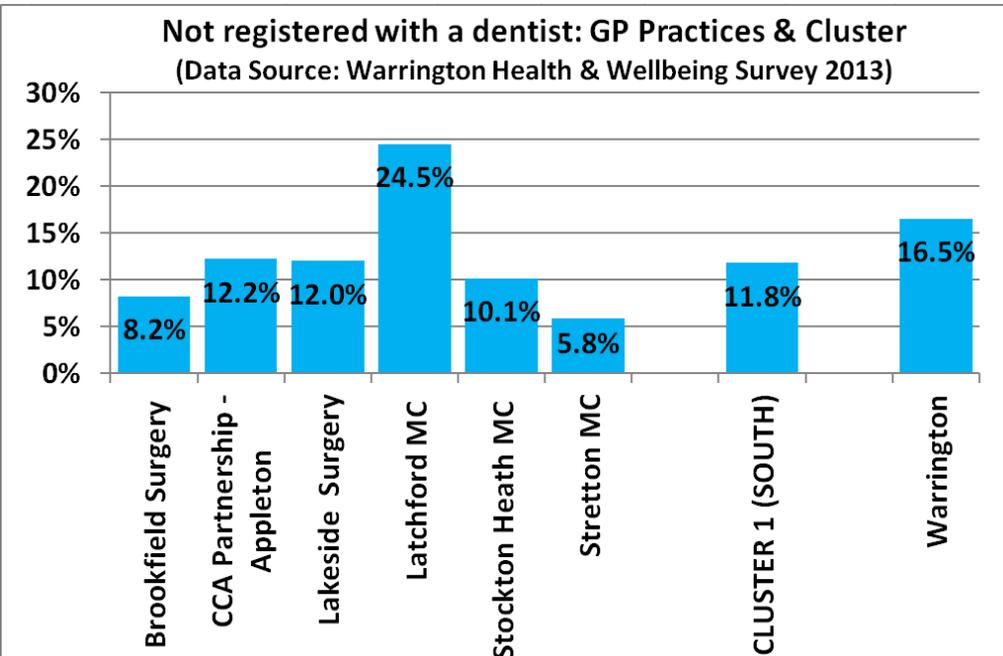
- **Percentage of patients who would recommend their GP practice** (*GP Survey 2014/15. NB Cluster level data n/a*): GP practices across Warrington ranged from 50% to 91% (Warrington average 74%). In South Cluster, Brookfield Surgery (86%) and Stretton MC (87%) were significantly better than Warrington; Stockton Heath MC (50%) was significantly worse. (*Data n/a for CCA Partnership.*)

- **Percentage who said it wasn't easy to access doctor's surgery:** GP practices across Warrington ranged from 1.6% to 25.8% (Warrington average 7.0%). South Cluster (6.2%) was similar to Warrington overall. South GP practices ranged from 1.6% at Latchford MC to 9.6% at Stockton Heath MC.

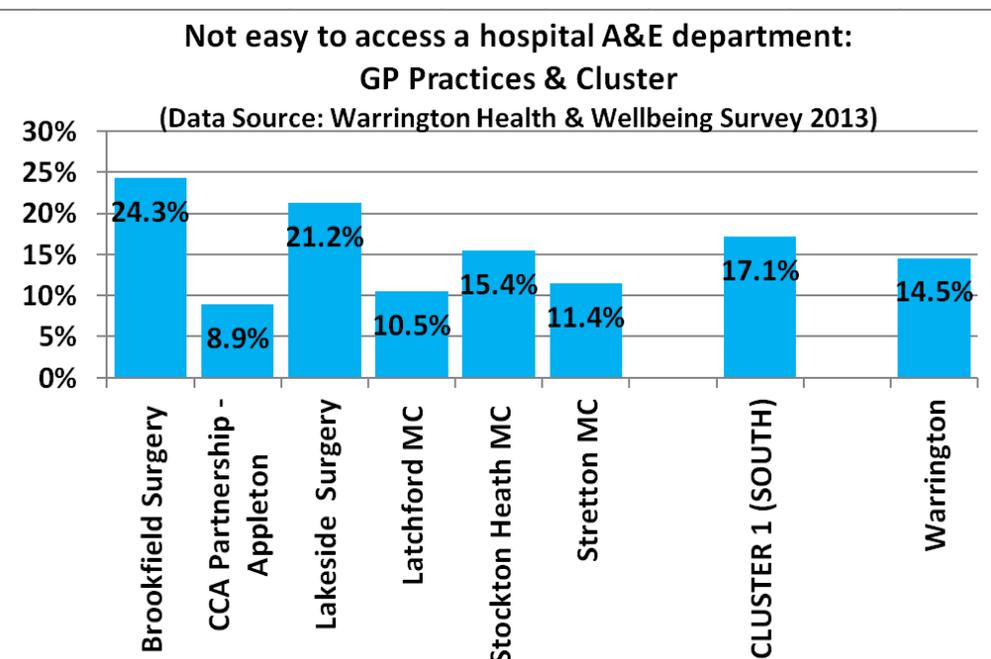
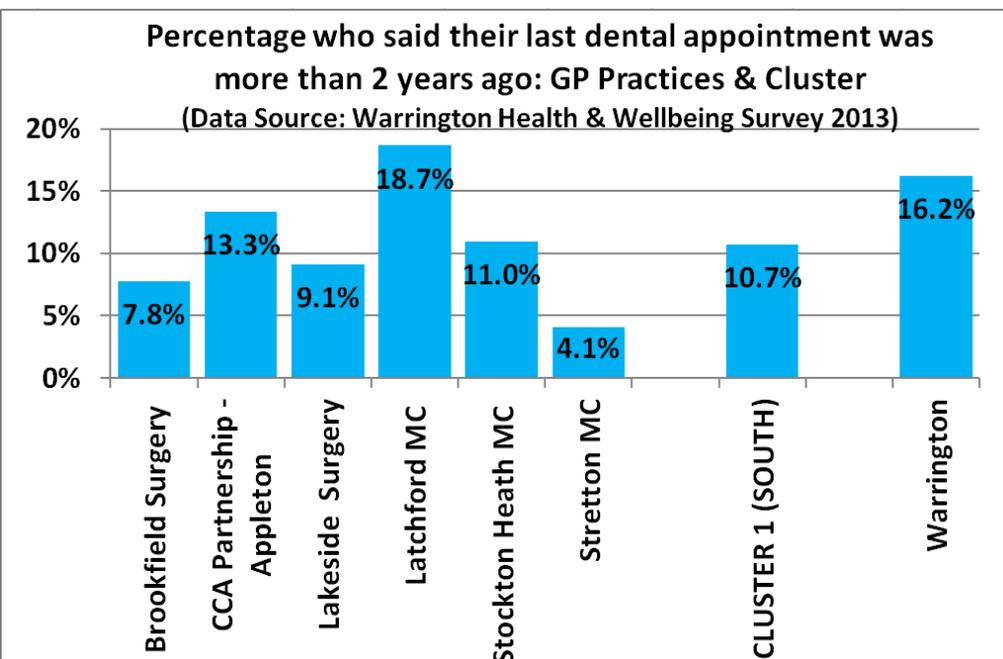
- **Percentage who said it wasn't easy to make an appointment at GP practice:** practices across Warrington ranged from 3.7% to 37.0% (Warrington average 19.8%). South Cluster (23.7%) was worse than Warrington overall. South GP practices ranged from 3.7% at Stretton MC to 37.0% at Stockton Heath MC.



HEALTH EXPERIENCE: Access to Health Services

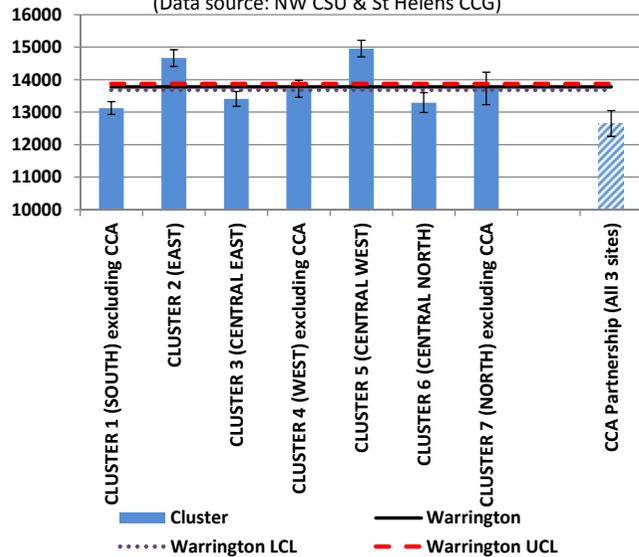


- Percentage not registered with a dentist (NHS/private):** GP practices across Warrington ranged from 5.8% to 41.3% (Warrington average 16.5%). South Cluster (11.8%) was better than Warrington. At Latchford MC it was much worse (24.5%); the other 5 GP practices ranged from 5.8% to 12.2%.
- Percentage who said it was more than 2 years since last dental appointment:** GP practices across Warrington ranged from 4.1% to 40.2% (Warrington average 16.2%). South Cluster (10.7%) was better than Warrington and by practice, it ranged from 4.1% at Stretton MC to 18.7% at Latchford MC.
- Percentage who said it wasn't easy to access a hospital A&E department:** GP practices across Warrington ranged from 2.7% to 30.7% (Warrington average 14.5%). South Cluster (17.1%) was worse than Warrington overall. South GP practices ranged from 8.9% at CCA Partnership Appleton to 24.3% at Brookfield Surgery.



HEALTH EXPERIENCE: Hospital Admissions

Warrington GP Clusters: Elective (i.e. planned) Hospital Admissions, All ages, F/Y 2012/13 to 2014/15
Age-standardised DSR per 100,000 population
(Data source: NW CSU & St Helens CCG)

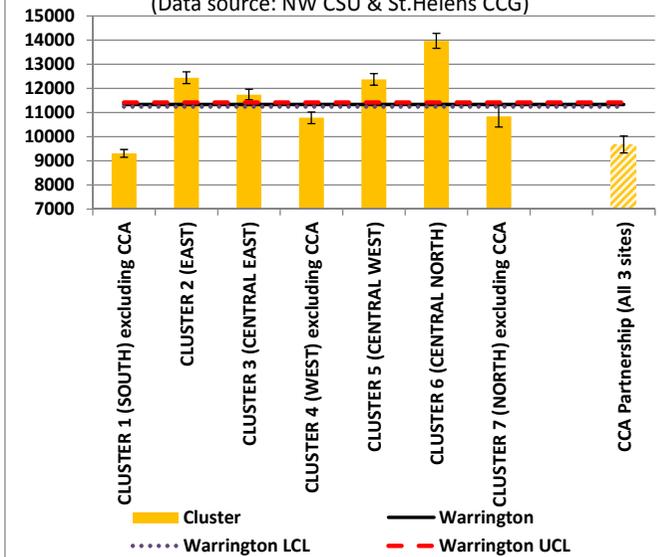


• **Elective (planned) hospital admissions in the all-age population:** South, Central East, and Central North clusters, and CCA Partnership have significantly lower rates than Warrington overall. East and Central West have significantly higher rates.

• **Elective (planned) hospital admissions of people aged 65+:** Central East, Central West and Central North clusters have significantly lower rates than Warrington overall. East and North clusters have significantly higher rates.

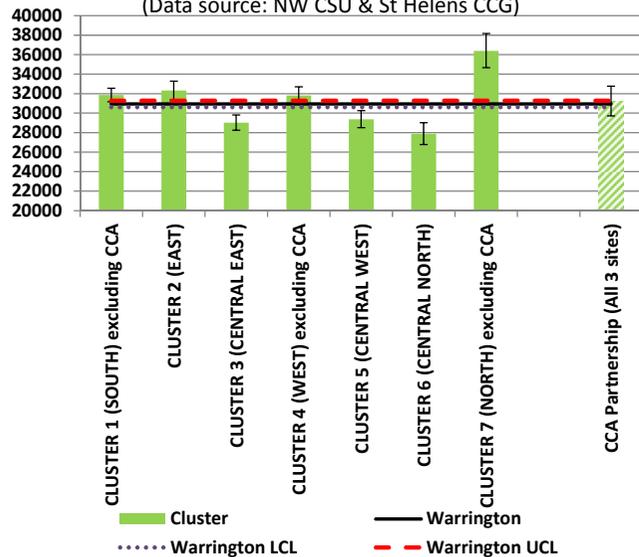
• **Emergency (unplanned) hospital admissions in the all-age population:** South and West clusters, and CCA Partnership have significantly lower rates than Warrington overall. East, Central West and Central North have significantly higher rates.

Warrington GP Clusters: Emergency (i.e. Unplanned) Hospital Admissions, All ages, F/Y 2012/13 to 2014/15
Age-standardised DSR per 100,000 population
(Data source: NW CSU & St. Helens CCG)



• **Emergency (unplanned) hospital admissions in the all-age population:** South and West clusters, and CCA Partnership have significantly lower rates than Warrington overall. East, Central West and Central North have significantly higher rates.

Warrington GP Clusters: Elective (i.e. planned) Hospital Admissions, aged 65+, F/Y 2012/13-2014/15
Age-standardised DSR per 100,000 population
(Data source: NW CSU & St Helens CCG)

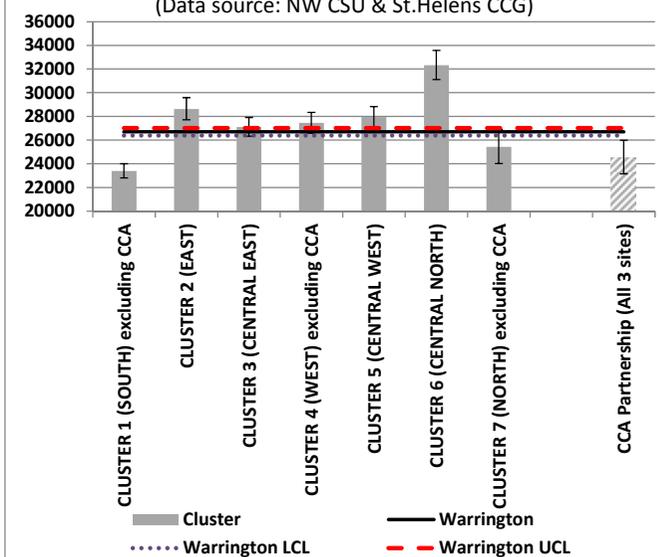


• **Emergency (unplanned) hospital admissions of people aged 65+:** South cluster and CCA Partnership have significantly lower rates than Warrington overall. East, Central West and Central North clusters have significantly higher rates.

Note 1 - DSRs (Directly Standardised Rates, standardised by age) are based on hospital admissions starting in the 3 financial years 2012/13 to 2014/15 and on GP registered populations in those years, because data for both admissions and populations were available for these years. Data wasn't available separately for the 3 CCA sites at Appleton, Chapelford and Culcheth, so CCA is excluded from rates for South, West and North clusters, but shown as a whole at the end of each chart. (For North Cluster, this means that rates are based purely on Culcheth MC.)

Note 2 - LCL and UCL: Chart shows LCL and UCL, the 95% statistical Lower Confidence Limit and Upper Confidence Limit for Warrington.

Warrington GP Clusters: Emergency (i.e. Unplanned) Hospital Admissions, Aged 65+, F/Y 2012/13 to 2014/15
Age-standardised DSR per 100,000 population
(Data source: NW CSU & St. Helens CCG)

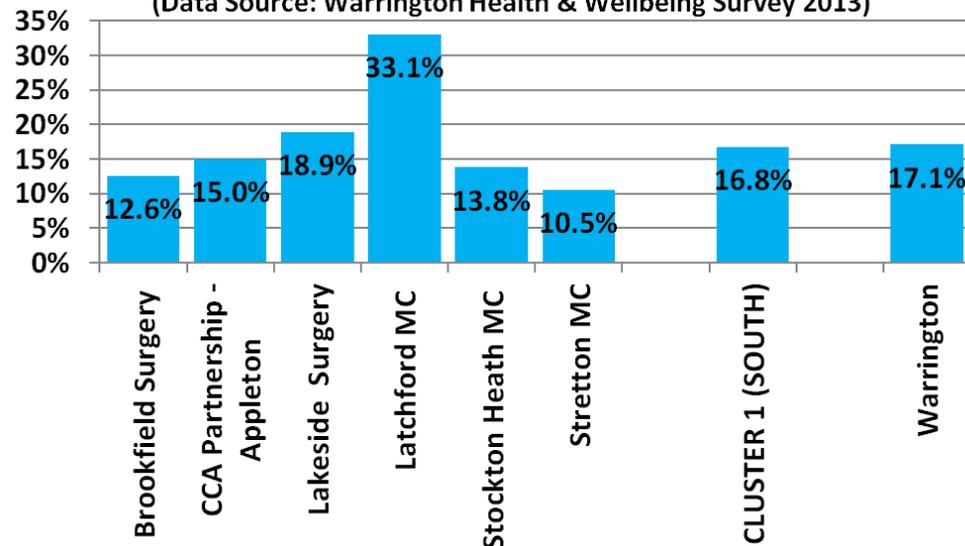


• **Emergency (unplanned) hospital admissions of people aged 65+:** South cluster and CCA Partnership have significantly lower rates than Warrington overall. East, Central West and Central North clusters have significantly higher rates.

ACCESS TO SERVICES: Shops and Leisure Facilities

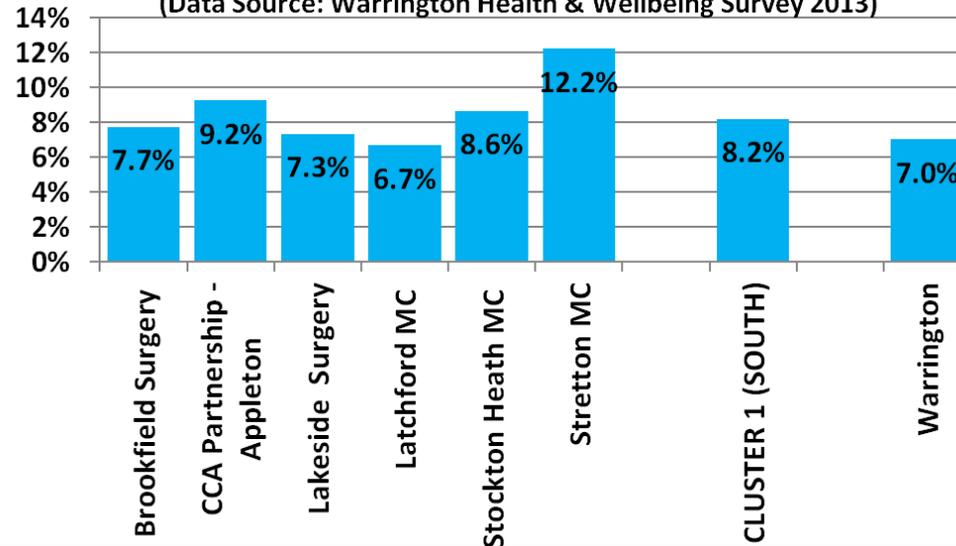
Not easy to access leisure facilities: GP Practices & Cluster

(Data Source: Warrington Health & Wellbeing Survey 2013)



Not easy to access general shops: GP Practices & Cluster

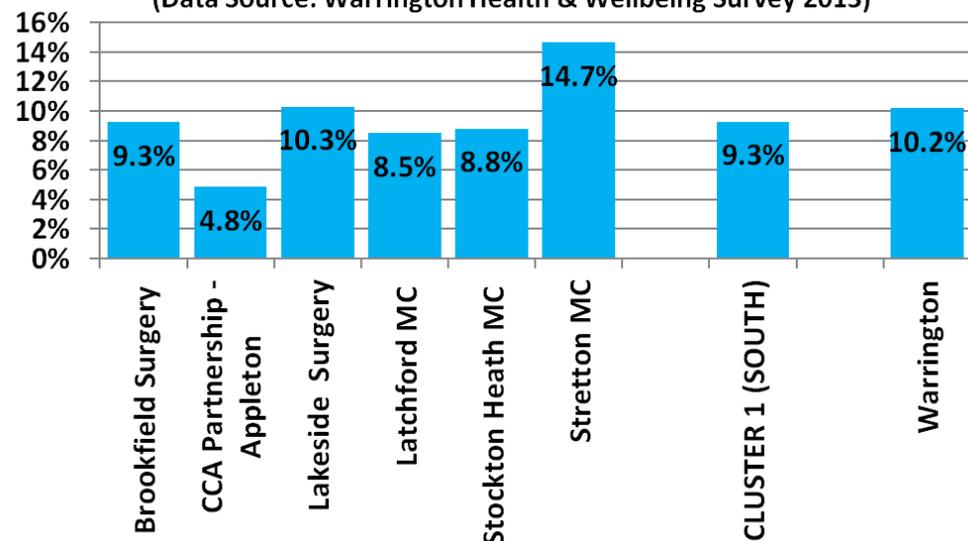
(Data Source: Warrington Health & Wellbeing Survey 2013)



- Percentage who said it wasn't easy to access leisure facilities:** GP practices across Warrington ranged from 4.9% to 33.1% (Warrington average 17.1%). South Cluster (16.8%) was very similar to Warrington, and South practices ranged from 10.5% at Stretton MC to 33.1% at Latchford MC (i.e. almost double the Warrington average).
- Percentage who said it wasn't easy to access general shops:** GP practices across Warrington ranged from 0.6% to 14.2% (Warrington average 7.0%). South Cluster (8.2%) was similar to Warrington, and practices ranged from 6.7% at Latchford MC to 12.2% at Stretton MC.
- Percentage who said it wasn't easy to access shops selling fresh fruit and vegetables:** GP practices across Warrington ranged from 3.8% to 15.2% (Warrington average 10.2%). South Cluster (9.3%) was very similar to Warrington, and by practice ranged from 4.8% at CCA Partnership Appleton to 14.7% at Stretton MC.

Not easy to access shops selling fresh fruit and vegetables: GP Practices & Cluster

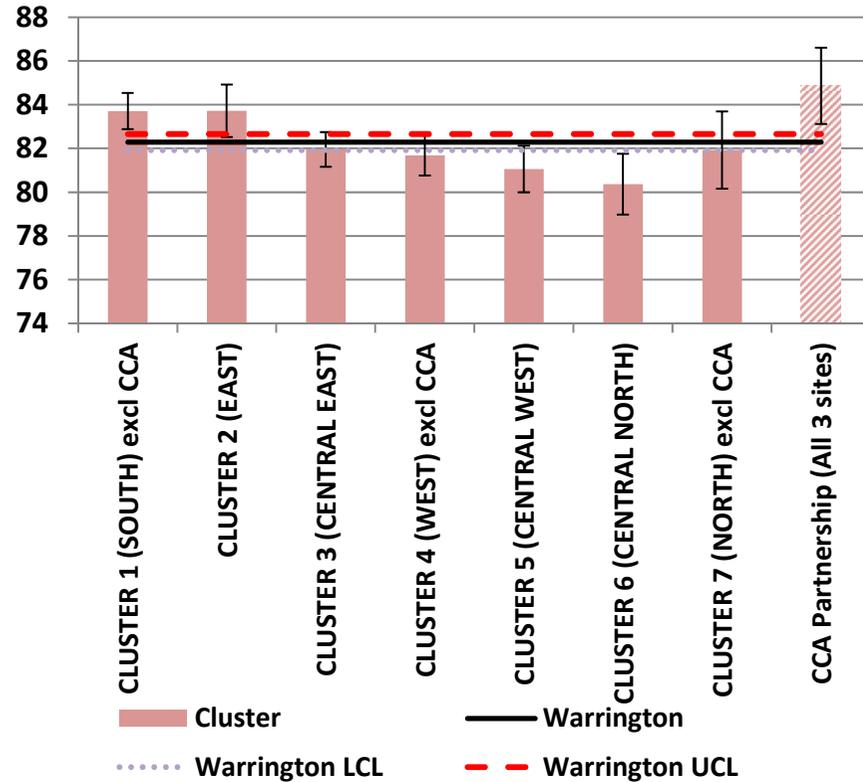
(Data Source: Warrington Health & Wellbeing Survey 2013)



HEALTH OUTCOMES: Life Expectancy

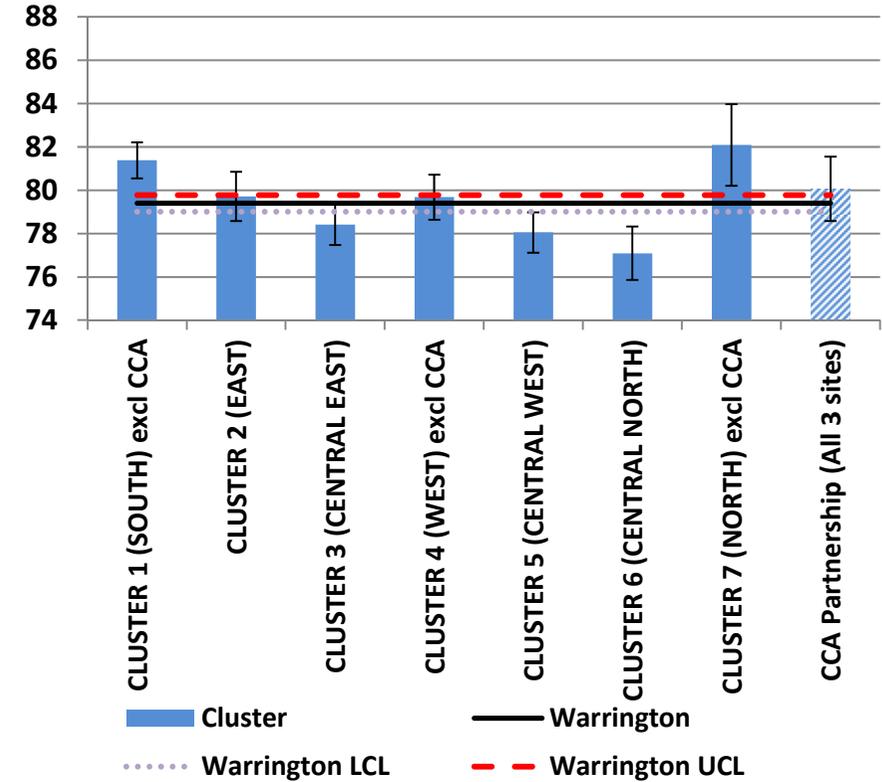
**Warrington GP Clusters Female Life Expectancy
2011-2014**

(Source: calculated from Open Exeter data)



**Warrington GP Clusters Male Life Expectancy
2011-2014**

(Source: calculated from Open Exeter data)



Life expectancy is an internationally accepted measure of the overall health of a population. It broadly measures the same thing as All-Age, All-Cause Mortality, but is more intuitive and easier to understand.

Nationally and locally, female life expectancy is higher than male life expectancy. In this analysis, which is based on deaths in the Warrington GP registered population between 2011 and 2014, female life expectancy is approximately 3 years higher than male life expectancy (82.3 years females and 79.4 years males).

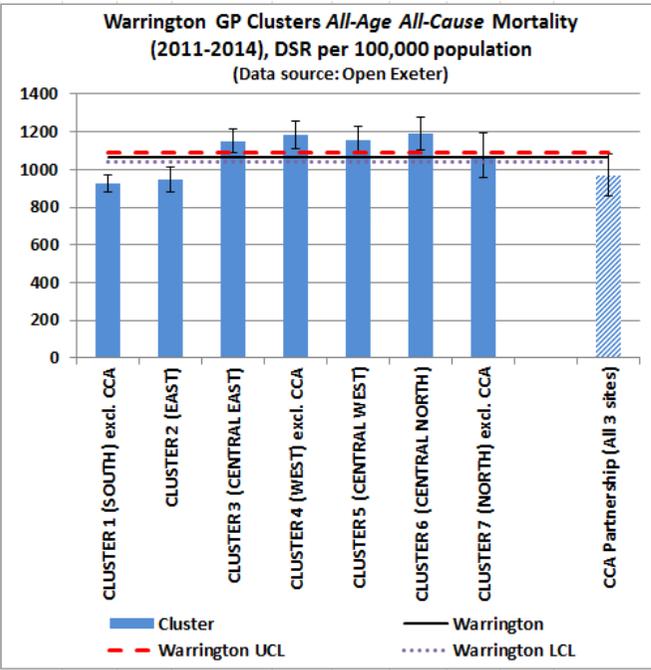
The only clusters that are significantly different to Warrington are:

- **Female life expectancy:** South Cluster and CCA Partnership were significantly higher than Warrington overall; Central North was significantly lower.
- **Male life expectancy:** South and North clusters were significantly higher than Warrington; Central West and Central North were significantly lower.

Note 1 - Data: life expectancy was calculated over 4 year period 2011-2014 because data for both deaths and populations were available for these years. Data was not available separately for the 3 CCA sites at Appleton, Chapelford and Culcheth, so CCA is excluded from South, West and North cluster level life expectancies, but shown as a whole at the end of each chart. (For North Cluster, this means that L.E. is based purely on Culcheth MC.)

Note 2 - LCL and UCL: Chart shows LCL and UCL, the 95% statistical Lower Confidence Limit and Upper Confidence Limit for Warrington.

HEALTH OUTCOMES: Mortality Rates



- **All-Age All-Cause mortality.** Compared to Warrington overall, South and East clusters had significantly better rates, and West, Central West and Central North have significantly worse rates.

- **All-Cause mortality in people aged 65 and over.** Compared to Warrington overall, South and East clusters had significantly better rates, and West has a significantly worse rate.

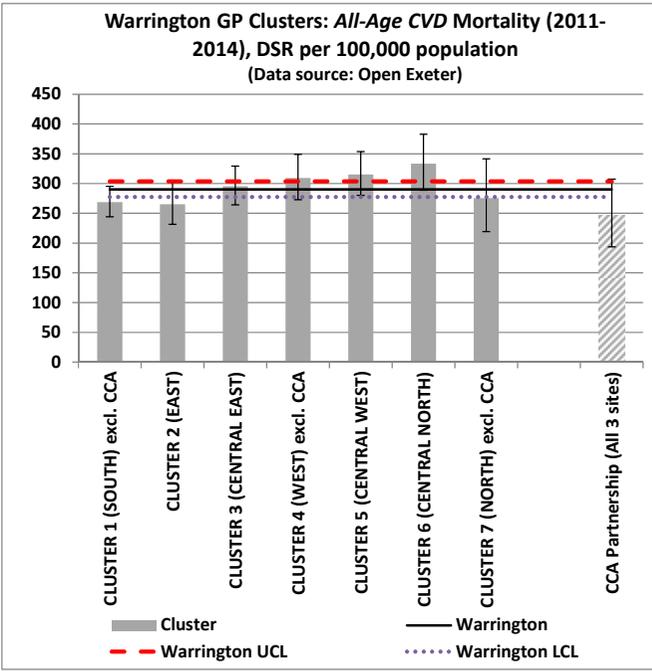
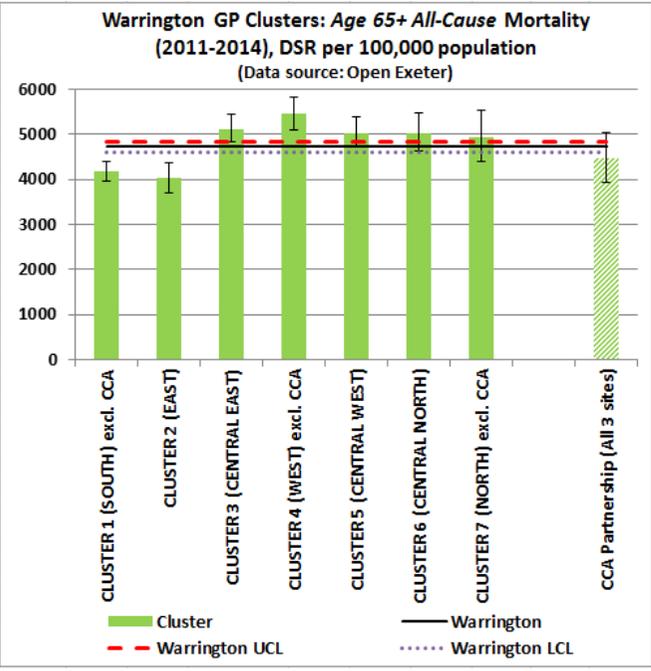
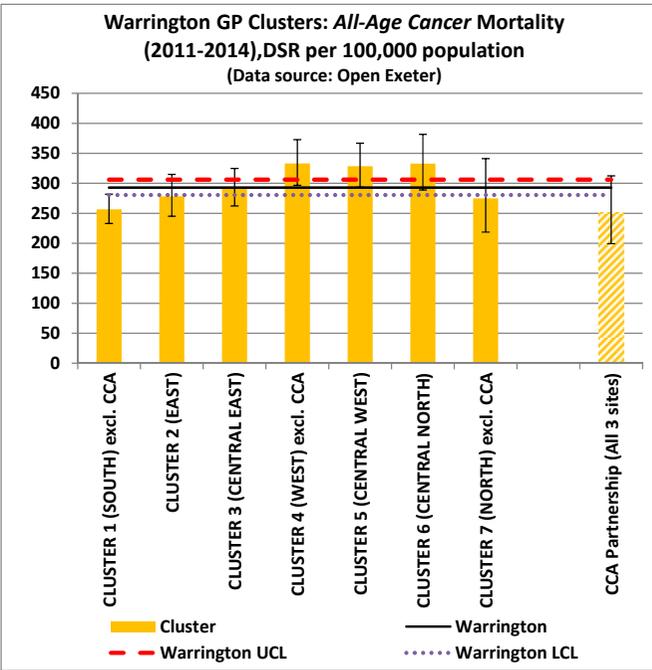
- **Cancer All-Age mortality.** No cluster was significantly different to Warrington overall.

- **CVD All-Age mortality.** No cluster was significantly different to Warrington overall.

- **Premature mortality (aged under 75)** No cluster was significantly different to Warrington overall in terms of all-cause, cancer or CVD deaths.

Note 1 - Mortality rates are Directly Standardised Rates (DSRs), standardised by age, calculated over 4 year period 2011-2014 because data for both deaths and populations were available for these years. Data wasn't available separately for the 3 CCA sites at Appleton, Chapelford and Culcheth, so CCA is excluded from rates for South, West and North clusters, but shown as a whole at the end of each chart. (For North Cluster, this means that mortality rates are based purely on Culcheth MC.)

Note 2 - LCL and UCL: Chart shows LCL and UCL, the 95% statistical Lower Confidence Limit and Upper Confidence Limit for Warrington.



ADULT SOCIAL CARE

Data source, caveats and limitations

The data on adult social care clients is from the Warrington Borough Council CareFirst database (at Sept 2015). It includes care type (residential with/without nursing care, or community care, i.e. at home), primary reason for needing care, and funding (client/WBC or non-chargeable). This data can't be aggregated to GP practice or GP cluster level.

There were 3,452 clients on WBC CareFirst System at 30th Sept 2015. Note that there are substantial limitations to this data, including:

- It does not include people who have been assessed as needing care, but who aren't entitled to WBC funding, and who arrange their own care (i.e. not via WBC). Nor does it include people who have not had an assessment as to whether they need care, but who choose to pay for some kind of care privately.
- People who receive community care at home, and who wholly self-fund, are likely to live in less deprived areas of Warrington. They will only be included in this data if they choose to have their care arranged by WBC.
- People who receive community care in their own home, and who are funded wholly/partly by WBC (having been financially assessed as being entitled to council funding) are more likely to live in the more deprived areas of Warrington.
- Those who self-fund residential care (not via WBC) are not included in this data, but will live wherever there are residential homes.
- NB Individuals may require support for more than one reason, but this analysis only looks at the primary reason.

Of the 3,452 clients on WBC CareFirst System at 30th Sept 2015:

- There are 2,222 people for whom WBC pays all or part of the cost of care, 667 who need non-chargeable services, and only 353 who choose to have their care arranged by WBC although they pay the full cost. (There were also 210 for whom funding source is not recorded).
- There are roughly equal numbers of men/women in the 18-39 years and the 40-64 years age-bands, but there are increasingly higher proportions of women in the older age-bands (in the 85+ age-band, 78% are women). This is not surprising, given that female life expectancy is higher than male life expectancy.
- Overall, 73% of the clients receive community care (i.e. in their home), 14% residential without nursing care, and 12% residential with nursing care. Unsurprisingly, the split between community care and residential varies by age: 91% of 18-64 year-olds have community care, and 9% residential, compared to 62% of those aged 65+ with community care, and 38% residential.
- Of the 1229 18-64 year-olds receiving community care, 34% have a primary support reason of mental health, 32% learning disability, 20% personal care, 5% access/mobility, 7% other, and 3% not recorded.
- Of the 1295 people aged 65+ receiving community care, 58% have a primary support reason of personal care, 13% access/mobility, 9% mental health, 4% visual/hearing impairment, 10% other, and 5% not recorded.

Care Type	18-39	40-64	65-74	75-84	85+	Unknown	Total	%
Community care	504	725	318	462	515	3	2527	73%
Nursing residential care	11	41	47	133	193		425	12%
Residential care	24	41	62	136	237		500	14%
Total	539	807	427	731	945	3	3452	100%

NB Percentages may not sum to 100% due to rounding.

ADULT SOCIAL CARE: by ward

Community care is spread across Warrington, wherever the client lives. Residential care is obviously based where the care homes are located.

- For many wards, the number of care home beds in each ward is much bigger than the number of clients known to WBC. The remaining beds may be: Warrington residents who wholly self-fund (and arrange their own care not via WBC), empty beds, people who lived outside Warrington borough prior to moving into the home.
- The table shows some wards as having some people in residential care, but no care home beds (e.g. there are no care homes located in Orford ward, but 12 people receiving residential care have an Orford postcode). This may be because the care is known to be temporary (e.g. respite care), or because there is a time lag between a person moving into a care home and the address being updated (in case the client only stays there a short time). There are likely to be some instances of this in all wards.
- Burtonwood and Winwick, and Fairfield and Howley wards each have almost 200 beds in care homes. There are 4 nursing homes in Burtonwood and Winwick, and 2 large care homes in Fairfield and Howley.
- Also located within Fairfield and Howley is Ryfields, a very large retirement village for people aged 55+, with care on site for some residents if appropriate. Residents own/rent flats, and it is not a nursing/residential care home. The dataset includes a large number of records for Ryfields residents receiving community care (46 people aged 65+, and 6 aged 55-64). 4% of the people aged 65+ receiving community care are Ryfields residents.
- In the 5 wards south of the Manchester Ship Canal (Appleton, Grappenhall & Thelwall, Hatton Stretton & Walton, Lymm, and Stockton Heath), mainly served by South Cluster, there are 424 beds (24% of the 1767 beds). A further 236 beds are in Latchford East and Latchford West wards.
- In the area of West Warrington covered by the wards of Great Sankey North, Great Sankey South, Penketh & Cuerdley, Westbrook and Whittle Hall, there are 642 beds (36% of the 1767 beds).
- Looking at the spread of care across Warrington wards, of the 1346 18-64 year-olds, the biggest proportion are in Fairfield and Howley ward (12%); of the 2,106 clients aged 65+, the biggest proportion are also in Fairfield and Howley ward (11%).

Note 1: In 18-64 year-olds, only 9% have residential care, and numbers by ward are too small, so residential care is not split by age.

Note 2: Percentages may not sum to 100% due to rounding.

Ward	No. people receiving community care (known to WBC, Sept 2015)				% in each ward (of total)		Care home beds in Warrington, adults (18+)	
	Community care, 18-64 year-olds	Community care, aged 65+	Community care, all adults (18+)	Residential, all adults (18+)	Community care, all adults (18+)	Residential, all adults (18+)	No. beds	No. beds not occupied by people funded by WBC or self-fund via WBC
Appleton	30	67	98	21	4%	2%	59	38
Bewsey and Whitecross	103	61	164	23	6%	2%	20	-3
Birchwood	77	69	147	13	6%	1%	13	0
Burtonwood and Winwick	30	45	75	57	3%	6%	195	138
Culcheth, Glazebury and Croft	30	87	118	44	5%	5%	91	47
Fairfield and Howley	148	138	286	119	11%	13%	187	68
Grappenhall and Thelwall	25	65	90	41	4%	4%	137	96
Great Sankey North	26	39	65	67	3%	7%	105	38
Great Sankey South	49	45	94	6	4%	1%	0	-6
Hatton, Stretton and Walton	10	12	22	17	1%	2%	18	1
Latchford East	88	50	138	63	5%	7%	91	28
Latchford West	38	68	106	37	4%	4%	145	108
Lymm	33	63	96	26	4%	3%	144	118
Orford	88	64	152	12	6%	1%	0	-12
Penketh and Cuerdley	41	62	103	76	4%	8%	166	90
Poplars and Hulme	76	51	127	8	5%	1%	0	-8
Poulton North	80	72	152	8	6%	1%	3	-5
Poulton South	41	50	91	7	4%	1%	6	-1
Rixton and Woolston	26	53	79	53	3%	6%	87	34
Stockton Heath	22	46	68	34	3%	4%	66	32
Westbrook	42	26	68	80	3%	9%	162	82
Whittle Hall	45	40	85	22	3%	2%	72	50
ZZZ Outside Warrington	60	11	71	86	3%	9%	n/a	n/a
ZZZ Unknown	21	11	32	5	1%	1%	n/a	n/a
Total in Warrington	1229	1295	2527	925	100%	100%	1767	n/a

CLUSTERS SUMMARY: Population and Wider Determinants

CLUSTER	South	East	Central East	West	Central West	Central North	North	Warrington	KEY:
Population (April 2015)	48,887	32,418	34,084	30,426	32,655	22,879	12,055	213,404	Significantly better than Warrington overall
% Aged 65-74	10%	9%	10%	10%	9%	7%	11%	10%	Better
% Aged 75+	9%	6%	8%	8%	7%	5%	11%	7%	Not significantly different
% Aged 65+	19%	15%	18%	18%	15%	12%	22%	17%	Worse
Deprivation Quintile	Very undeprived	Medium (spread across all levels of deprivation)	Medium (spread across all levels of deprivation)	Very undeprived	Relatively deprived	Relatively deprived	Relatively undeprived		Significantly worse than Warrington overall
Unemployed & looking for a job	2.2%	3.9%	3.1%	2.5%	4.9%	6.3%	2.4%	3.5%	
Retired	28.3%	22.7%	25.3%	28.2%	23.0%	18.8%	30.1%	25.5%	
Difficult or very difficult to manage financially	5.3%	13.8%	9.4%	5.8%	9.3%	10.0%	8.0%	8.5%	
Went without food to manage financially	2.2%	5.8%	6.1%	2.8%	6.8%	9.6%	1.6%	4.8%	
Borrowed to buy basic necessities	6.3%	17.3%	10.0%	6.8%	14.1%	20.5%	7.2%	11.3%	
Received income support / benefits	7.2%	15.7%	10.5%	7.1%	14.7%	18.9%	6.0%	11.3%	
Have people they can talk to about problems	93.7%	88.9%	92.0%	90.6%	89.4%	88.8%	93.9%	91.2%	
Live alone	13.2%	17.6%	18.4%	12.7%	19.8%	20.4%	15.0%	16.4%	
Feel lonely most of the time / quite often	6.1%	10.6%	8.6%	6.4%	9.4%	9.8%	7.3%	8.1%	
Feel very/fairly unsafe alone at home after dark	8.5%	12.4%	11.8%	5.8%	13.5%	14.0%	8.0%	10.5%	
Feel very/fairly unsafe alone in neighbourhood during day	2.9%	6.7%	5.9%	2.0%	7.4%	6.4%	1.5%	4.8%	
Feel very/fairly unsafe alone in neighbourhood after dark	20.3%	37.6%	31.4%	21.2%	36.3%	32.5%	17.8%	28.3%	

Dark green indicates significantly better than Warrington.

Pale green indicates either a) better than Warrington overall, but not significantly so, or b) better than Warrington, but statistical significance not available.

Yellow indicates not statistically different to Warrington.

Pink indicates either a) worse than Warrington overall, but not significantly so, or b) worse than Warrington, but statistical significance not available.

Red indicates significantly better than Warrington.

Blue/purple is used for 'Retired' and for 'Living alone', for which better/worse does not apply. Blue indicates particularly high; purple indicates particularly low.

CLUSTERS SUMMARY: Self-reported Health, Health Related Behaviour and Experience of Health Services

CLUSTER	South	East	Central East	West	Central West	Central North	North	Warrington	KEY:
Population (April 2015)	48,887	32,418	34,084	30,426	32,655	22,879	12,055	213,404	Significantly better than Warrington overall
% Aged 65-74	10%	9%	10%	10%	9%	7%	11%	10%	Better
% Aged 75+	9%	6%	8%	8%	7%	5%	11%	7%	Not significantly different
% Aged 65+	19%	15%	18%	18%	15%	12%	22%	17%	Worse
Deprivation Quintile	Very undeprived	Medium (spread across all levels of deprivation)	Medium (spread across all levels of deprivation)	Very undeprived	Relatively deprived	Relatively deprived	Relatively undeprived		Significantly worse than Warrington overall
Self-reported general health is fair, bad or very bad	18.1%	27.5%	25.7%	20.4%	24.5%	26.4%	18.6%	23.1%	
Have Long-standing illness, disability or infirmity	29.7%	35.4%	32.8%	32.6%	33.7%	31.5%	29.8%	32.5%	
Have long-standing illness, disability or infirmity that limits activity a lot	7.3%	12.9%	12.6%	9.0%	12.9%	12.6%	9.0%	10.9%	
Low Emotional Wellbeing (WEMWBS)	19.4%	31.1%	23.8%	20.7%	28.0%	27.3%	20.8%	24.2%	
Smoking prevalence	10.4%	14.4%	13.8%	8.3%	17.4%	18.9%	7.9%	13.0%	
Obesity Prevalence	13.0%	23.4%	20.9%	19.2%	21.4%	23.2%	14.5%	19.3%	
2 or more poor diet behaviours	17.3%	25.9%	20.5%	21.1%	27.5%	24.5%	16.2%	21.8%	
Unsafe alcohol consumption (as a % of those who drink alcohol i.e. excluding non-drinkers)	24.1%	20.9%	21.7%	19.1%	20.5%	16.8%	20.0%	21.0%	
Do less than 30 "equivalent" minutes physical exercise/week	9.7%	13.4%	15.7%	10.9%	16.8%	16.2%	12.3%	13.3%	
3 or more lifestyle risk factors	17.1%	23.3%	21.2%	18.7%	24.7%	22.0%	15.7%	20.6%	
Access to GP/Doctors surgery: not very easy or not at all easy	6.2%	6.0%	7.2%	4.5%	7.6%	10.4%	8.2%	7.0%	
Very/fairly poor experience of making GP appointment	23.7%	15.9%	22.5%	24.4%	15.1%	14.2%	19.3%	19.8%	
Ease of access to a hospital A&E: Not very easy or not at all easy	17.1%	20.5%	14.3%	5.4%	7.9%	10.9%	25.8%	14.5%	
Not registered with a dentist	11.8%	16.3%	18.9%	10.0%	22.9%	27.9%	9.8%	16.5%	
Last dental appointment more than 2 years ago	10.7%	16.4%	19.0%	12.8%	21.1%	23.5%	12.5%	16.2%	

Pale green indicates either a) better than Warrington overall, but not significantly so, or b) better than Warrington, but statistical significance not available.

Pink indicates either a) worse than Warrington overall, but not significantly so, or b) worse than Warrington, but statistical significance not available.

CLUSTERS SUMMARY: Disease Prevalence

Disease prevalence as recorded on GP registers (data source: QOF, Quality Outcomes Framework, 2014/15).

Large differences are highlighted - more than 20% higher (yellow) or lower (blue) - between the cluster or GP practice, and Warrington overall. NB These differences are likely to be partially due to the population structure of the practices. The proportion of patients aged 50+ is also shown. For some conditions, higher prevalence is linked to higher levels of deprivation. A lower prevalence value can be due to a genuinely lower prevalence, or can be due to under-diagnosis.

QOF PREVALENCE 2014/15	South	East	Central East	West	Central West	Central North	North	Warrington
Deprivation Quintile	Relatively undeprived	Medium deprivation	Medium deprivation	Relatively undeprived	Relatively deprived	Relatively deprived	Relatively undeprived	
2014-15 List Size, All Ages	48863	32328	34,099	30478	32511	22868	12046	212955
Percentage of patients aged 50+	n/a	0.4	38%	n/a	0.3	0.3	n/a	0.4
Atrial Fibrillation	1.83	1.54	1.85	1.87	1.64	1.08	1.95	1.64
CHD (Coronary Heart Disease)	3.55	3.59	4.11	4.05	3.63	3.23	3.97	3.64
Cardiovascular Disease - Primary Prevention (30-74)	0.80	1.03	0.99	0.90	1.19	0.77	0.65	0.97
Heart Failure	0.58	0.80	0.90	0.73	0.92	0.57	1.05	0.74
Hypertension	12.87	13.64	14.62	15.22	14.69	11.86	16.83	13.66
Peripheral Arterial Disease	0.79	0.75	0.85	0.59	0.82	1.50	0.46	0.81
Stroke and Transient Ischaemic Attack	1.66	1.84	1.90	1.86	1.75	1.50	1.81	1.72
Asthma	5.64	6.80	6.19	6.43	7.07	5.33	6.11	6.21
COPD (Chronic Obstructive Pulmonary Disease)	1.17	1.88	2.08	1.58	2.34	2.43	1.69	1.80
Obesity (16+)	5.72	9.38	8.50	9.25	11.45	8.46	7.55	8.47
Cancer	2.33	2.17	2.48	2.90	2.14	1.71	2.75	2.29
Chronic Kidney Disease (18+)	3.57	3.98	4.89	3.11	4.74	2.53	3.30	3.78
Diabetes Mellitus (17+)	5.18	6.77	6.40	6.91	7.16	6.58	5.67	6.23
Palliative Care	0.13	0.18	0.43	0.22	0.31	0.18	0.07	0.23
Dementia	0.79	0.51	0.77	1.03	0.76	0.59	0.92	0.75
Depression (18+)	5.71	10.32	8.74	6.63	12.02	7.86	6.29	8.28
Epilepsy (18+)	0.63	1.09	0.75	0.79	0.94	0.92	0.66	0.82
Learning Disabilities (18+)	0.28	0.53	0.40	0.36	0.48	0.44	0.30	0.39
Mental Health	0.64	1.02	0.83	0.55	1.22	1.01	0.87	0.84
Osteoporosis (50+)	0.07	0.06	0.06	0.08	0.29	0.12	0.03	0.10
Rheumatoid Arthritis (16+)	0.64	0.75	0.84	0.76	0.78	0.60	0.85	0.73

Note 1: Cluster prevalence rates are a weighted average of GP practice prevalences, weighted by practice population.

Note 2: The 3 sites of the CCA Partnership (Appleton, Chapelford & Culcheth) are in different clusters: South, West and North. QOF data is only available for CCA as a whole. The population structure of the 3 sites are very, very different. e.g. at April 2015, the proportion of the each site's population aged 65+ were: Appleton 13%; Chapelford 6%; Culcheth 21%. It is therefore reasonable to assume that prevalence of long-term conditions will be very different at the 3 sites. For clusters with a CCA site, prevalence is based on non-CCA practices.

NOTES

NOTES:

Mortality at GP practice level. There can be several spurious factors that can contribute to a high mortality rate, e.g. if a practice serves large care homes or places offering palliative care, and so a relatively high proportion are registered there because they have moved into a nearby care home (and are likely to be in ill-health, given that they require nursing care). On the whole, practices with populations living in areas of higher deprivation have worse mortality rates, and vice versa.

CCA Partnership GP practice. The 3 sites of the CCA Partnership, Appleton, Chapelford and Culcheth, are in 3 different clusters. The population structures of the 3 sites are very, very different. e.g. at April 2015, the proportion of the each site's population aged 65+ were: Appleton 13%; Chapelford 6%; Culcheth 21%. It is therefore reasonable to assume that health needs might be very different at the 3 sites. Most data is only available for CCA as a whole, and cannot be disaggregated to the 3 sites.

However, there is some data included in the profile for which geographical information such as postcode/LSOA/ward is known (e.g. Health and Wellbeing Survey, population data). Given that the 3 sites are located far apart in the South, West and North of the borough, data records were allocated to one of the 3 sites based on the following assumption: Appleton site - Appleton, Grappenhall & Thelwall, Hatton, Stretton & Walton, Stockton Heath (with a small amount of data from Fairfield & Howley, Latchford East, Latchford West and Lymm wards); Chapelford site – Great Sankey North, Great Sankey South, Penketh & Cuerdley, Westbrook and Whittle Hall wards, plus Burtonwood (with a small amount of data from Bewsey & Whitecross and Orford wards); Culcheth site – Birchwood, Culcheth, Glazebury & Croft, Rixton & Woolston wards plus Winwick (with a small amount of data from Poplars & Hulme, Poulton North & Poulton South). It is recognised that this will not be perfect, but it appears to be the best option available.

Causeway Medical Centre. The Hood Manor branch of Causeway MC is located in Great Sankey South ward and is in West Cluster; the main Causeway surgery is in Latchford West ward in Central West Cluster. Data is only available for Causeway MC as a whole and can't be split between the two sites, so has been placed in Central West Cluster (i.e. West Cluster data excludes patients at Hood Manor branch but Central West Cluster includes them).

Burtonwood Only approximately a third of residents in Burtonwood and Winwick ward are registered with a Warrington GP practice; the other two-thirds are registered with a practice outside Warrington, mainly with a St Helen's practice which has a branch surgery in Burtonwood.