

North PCN Profile

Prepared by Newham Public Health Intelligence Team
May 2023

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Slide Contents

Summary



Worse than the Newham average Similar to the Newham average

Better than the Newham average

Key:

- Male life expectancy in North PCN is similar to the Newham average.
- Female life expectancy in North PCN is above the Newham average.
 - On average, a female born in North PCN will live 1.2 years more than the average female born in Newham.
- There is a higher rate (47 per 100k residents) of premature mortality in North PCN when compared to the Newham average.
- For North PCN, child immunisation uptake for children at 12 months is similar to the Newham average, whilst child immunisation for children at 2 and 5 years of age is above the Newham average.
- For North PCN, stroke and coronary heart disease prevalence is similar to the Newham average.
- For North PCN, the percentage of heart failure patients with a review is above the Newham average (6.5 percentage points).
- For North PCN, the prevalence of cancer, emergency admissions (with cancer), and 2 week wait referrals (for cancer) are above the Newham average.
- For North PCN, depression and long term mental health prevalence is higher than the Newham average.
- Diabetes prevalence for North PCN patients is similar to the Newham average, whilst HbA1c levels and BMI levels at diabetes diagnosis are lower or similar to the Newham average.

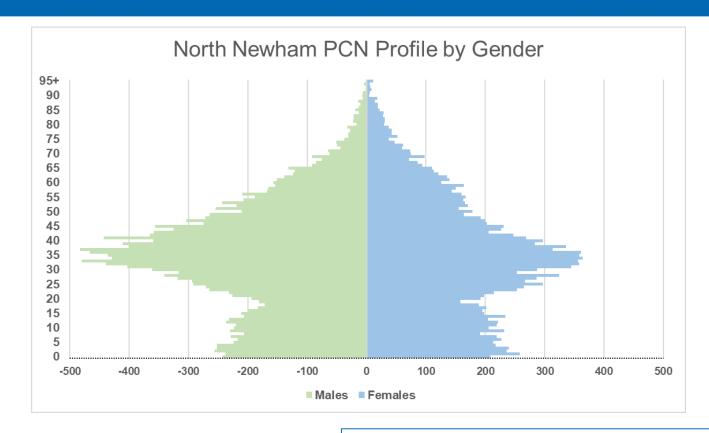
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Data source: NHS digital

Demographics: Age and gender





Age band	North PCN	Newham
0-9	13.3%	15.1%
10-19	11.9%	12.0%
20-29	15.3%	18.6%
30-39	22.2%	20.1%
40-49	16.1%	12.9%
50-59	10.5%	9.9%
60-69	6.6%	6.3%
70-79	2.8%	3.2%
80+	1.3%	1.9%

- There is a slightly higher percentage (54%) of males in the North PCN.
- The highest proportion of the population are in 30-39 age group.

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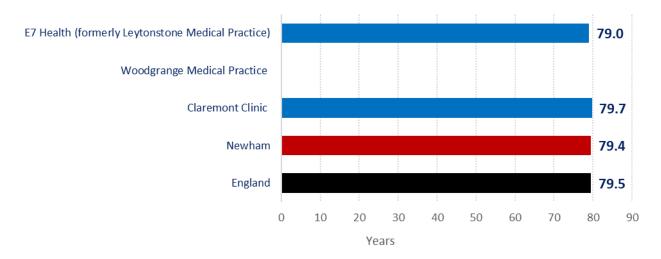
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Data source: NHS digital Back to contents

Life expectancy - males



Life expectancy at birth - males 2016-20



Males	Newham	London	England
Life expectancy at birth (2018-20)	79	80.3	79.4
Life expectancy at 65 (2018-20)	18.4	19.2	18.7
Healthy life expectancy at birth (2018-20)	59.5	63.8	63.1
Healthy life expectancy at 65 (2018-20)	5.9	10.3	10.5
Disability free life expectancy at birth (2018-20)	60.9	64.4	62.4
Disability free life expectancy at 65 (2018-20)	6.2	10.3	9.8

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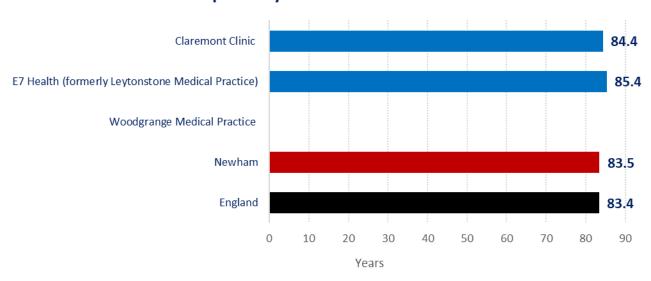
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Data source: PHE, based on ONS mortality data

Life expectancy - females



Life expectancy at birth - females 2016-20



Females	Newham	London	England
Life expectancy at birth (2018-20)	83.1	84.3	83.1
Life expectancy at 65 (2018-20)	21.2	22	21.1
Healthy life expectancy at birth (2018-20)	64.6	65.0	54.3
Healthy life expectancy at 65 (2018-20)	11.5	11.2	11.3
Disability free life expectancy at birth (2018-20)	65.7	63.3	60.9
Disability free life expectancy at 65 (2018-20)	11.5	10.2	9.9

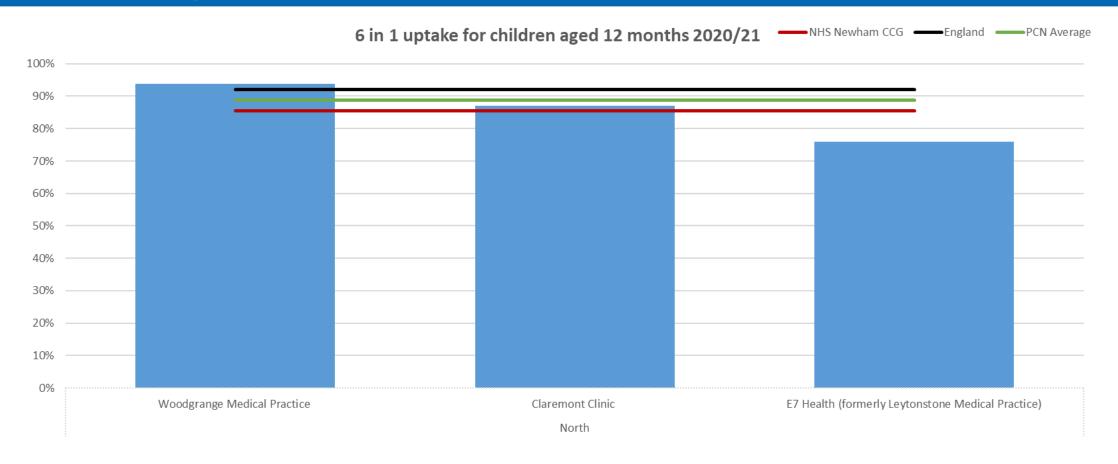
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Data source: PHE, based on ONS mortality data

Childhood Immunisations: 6 in 1 uptake for children aged 12 months



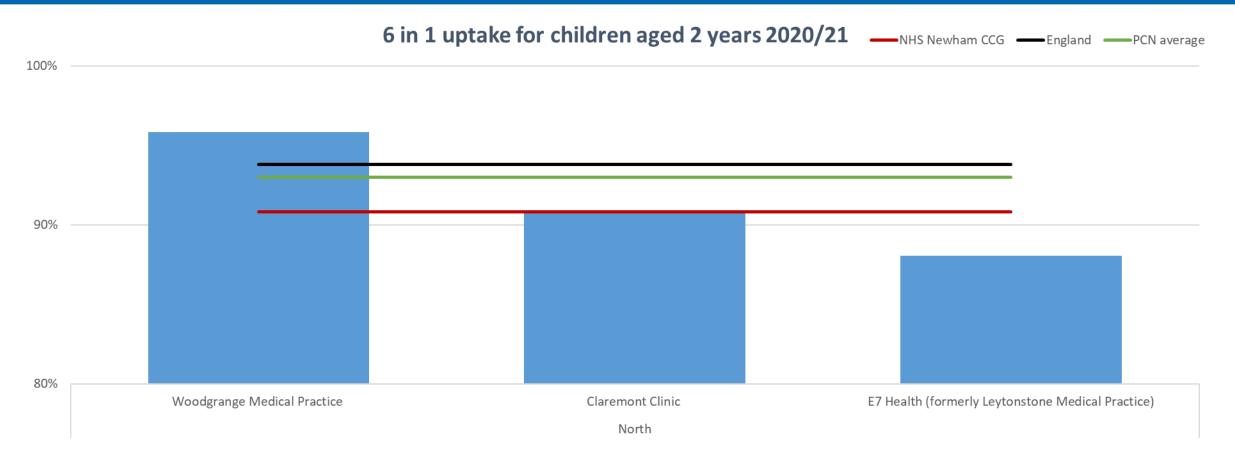


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Data source: CEG dashboards, Fingertips PHE

Childhood Immunisations: 6 in 1 uptake for children aged 2 years



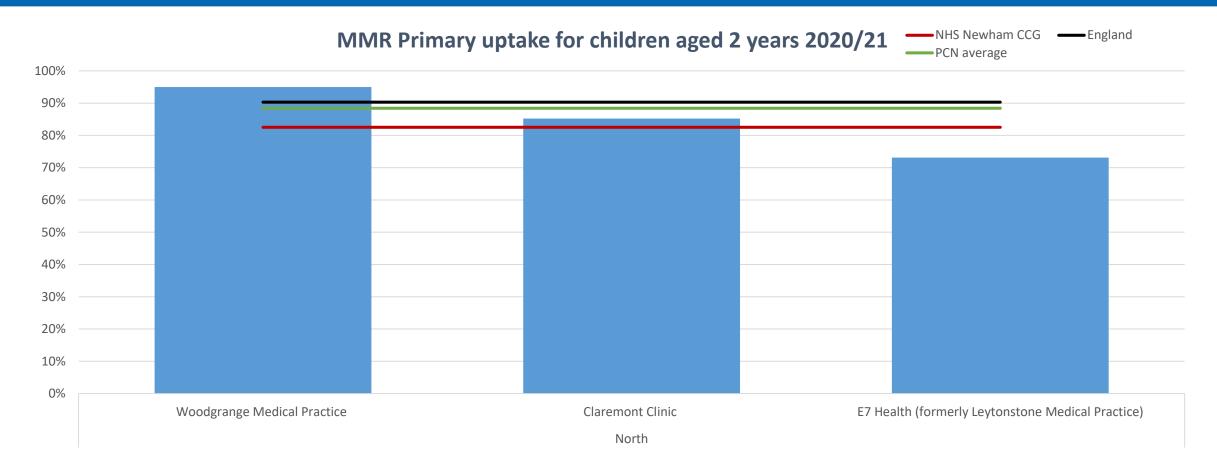


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Data source: CEG dashboards, Fingertips PHE

Childhood Immunisations: MMR primary uptake for children aged 2 years



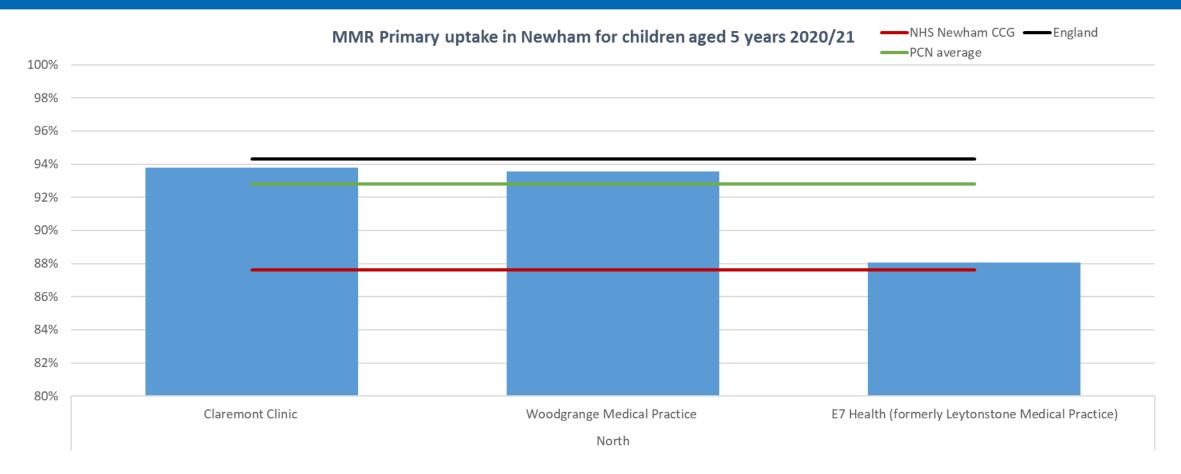


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Data source: CEG dashboards, Fingertips PHE

Childhood Immunisations: MMR primary uptake for children aged 5 years



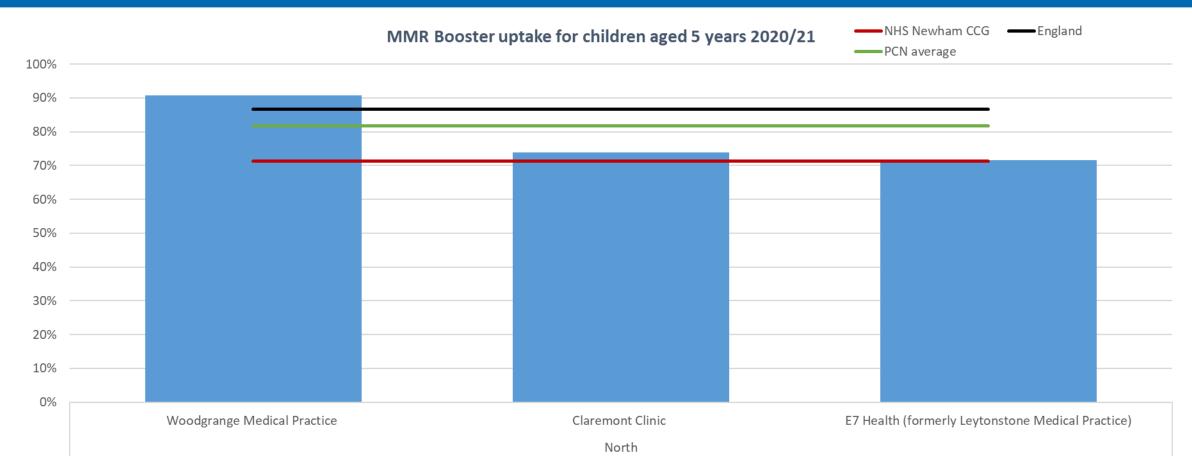


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Data source: CEG dashboards, Fingertips PHE

Childhood Immunisations: MMR booster uptake for children aged 5 years



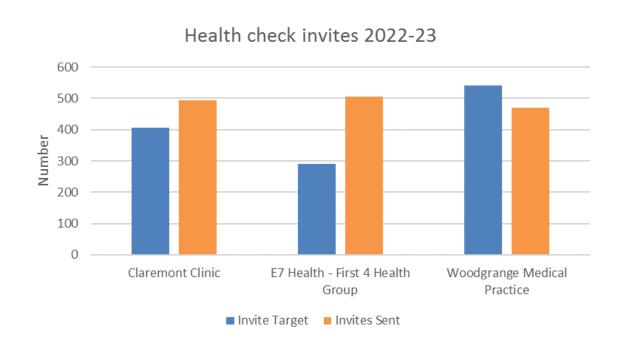


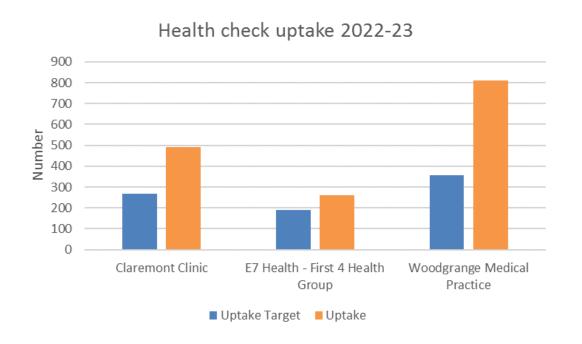
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Data source: CEG dashboards, Fingertips PHE

Health checks – invites and uptake







- In 2022-23, 1470 invites were sent for health checks from North PCN with a target of 1238
- Uptake was 1561 with a target of 817

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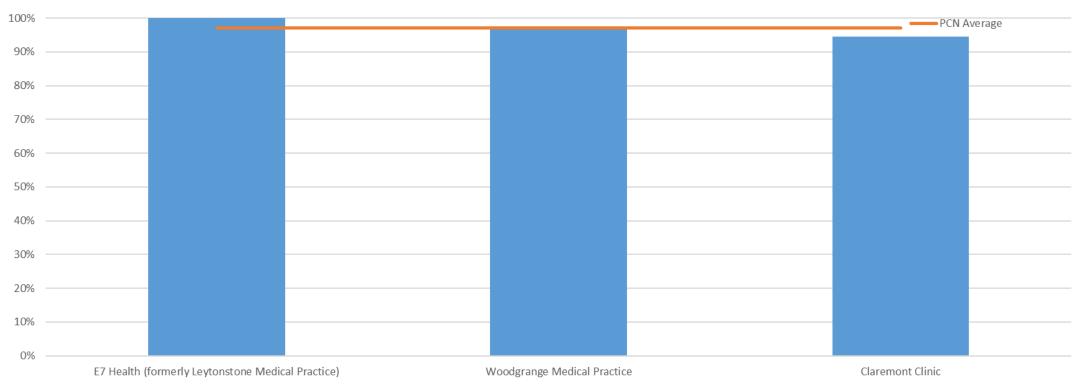
Data source: Clinical Effectiveness Group

Health checks: Measurements

Q-risk score ≥10 & cholesterol test within 3 months







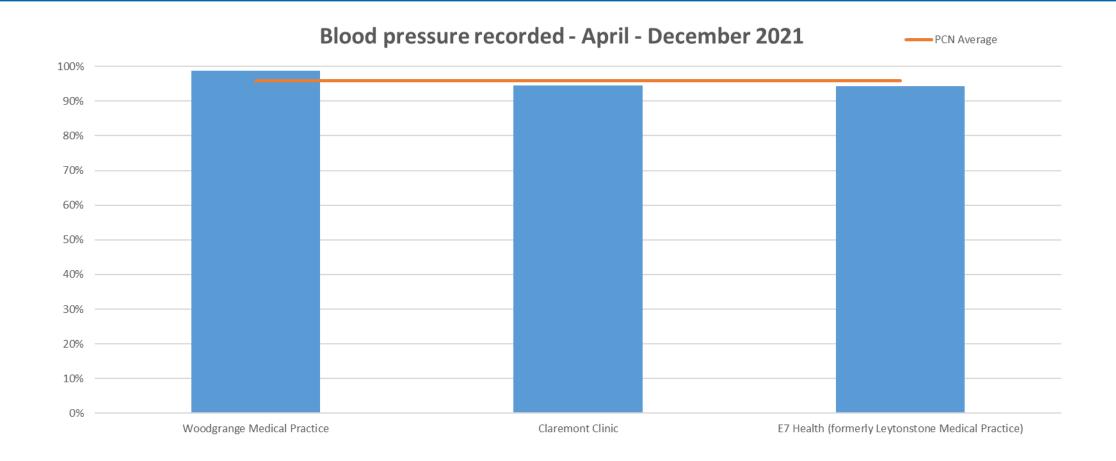
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Data source: Clinical Effectiveness Group

Health checks: Measurements

Blood pressure recorded as a proportion of NHS Health Check





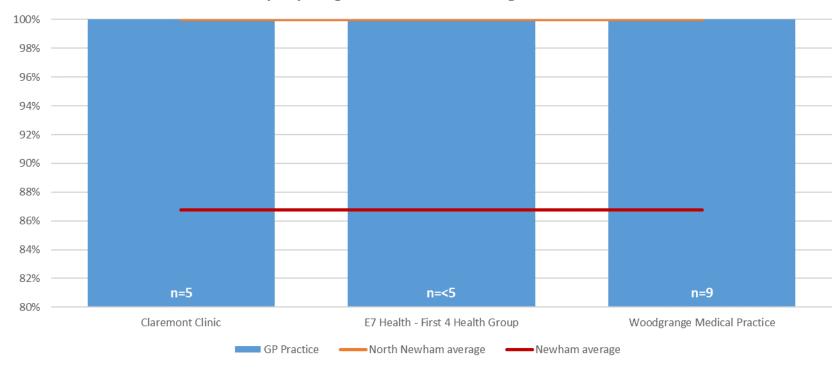
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Data source: Clinical Effectiveness Group

Learning Disabilities: Health checks 14-17 years







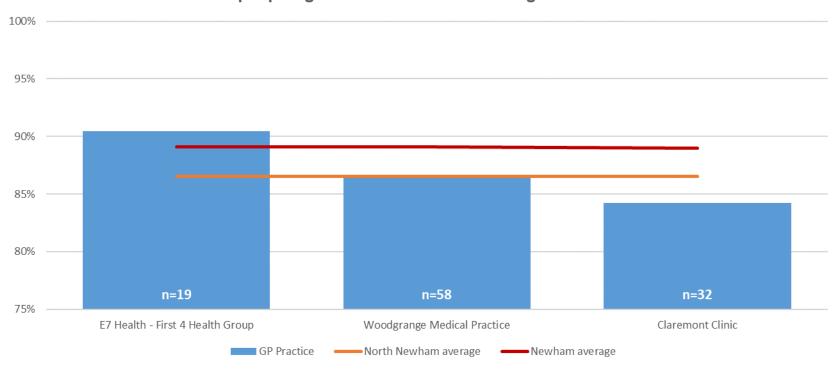
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Source: CEG NEL Dashboards

Learning Disabilities: Health checks 18+ years



Percentage of Health Checks carried out over the last 12 months (as at 1st May 2023) in people aged 18 and over with learning disabilities

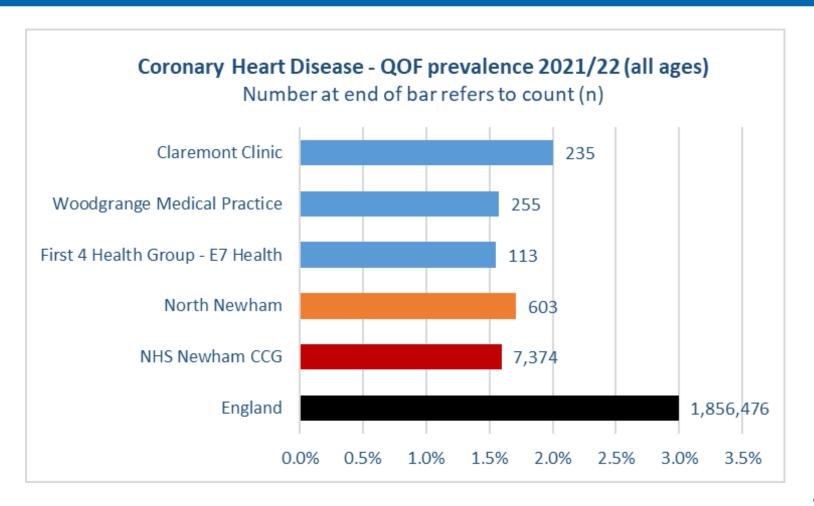




Source: CEG NEL Dashboards

CVD: Coronary Heart Disease

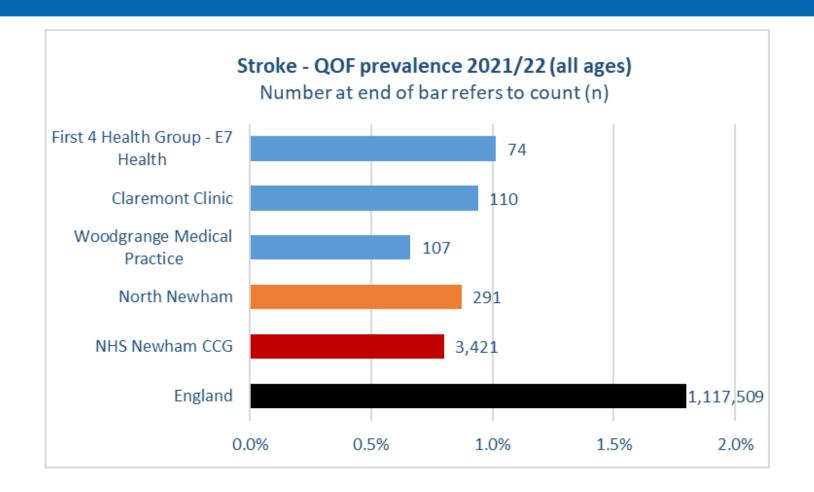




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CVD: Stroke – QOF Prevalence

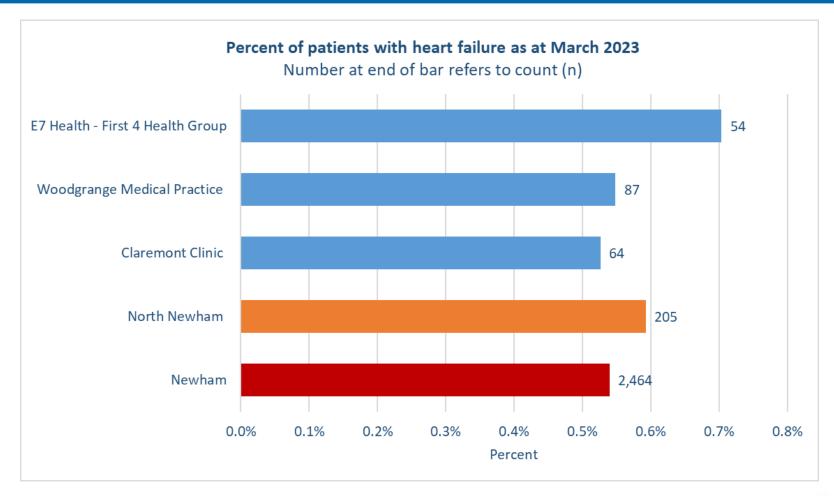




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CVD: % of all patients with heart failure





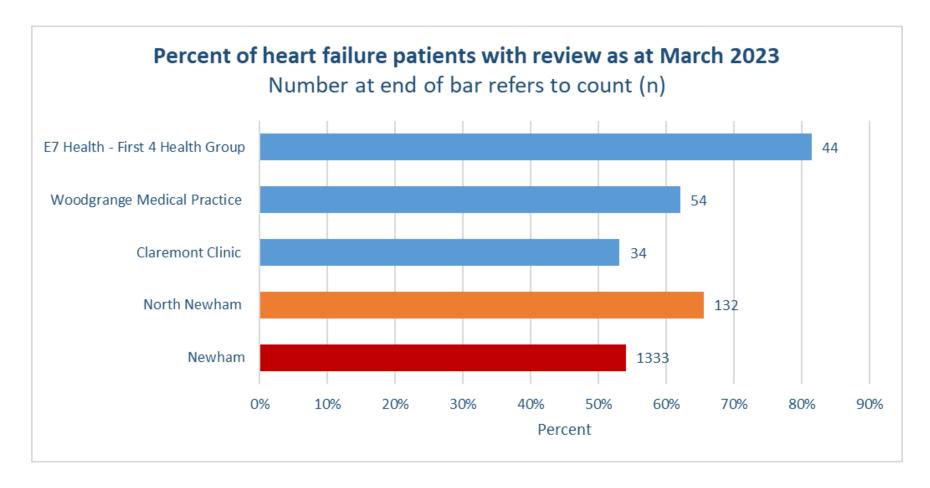
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Data source: Clinical Effectiveness Group Toolkit

CVD: % of all heart failure patients with review Newham London



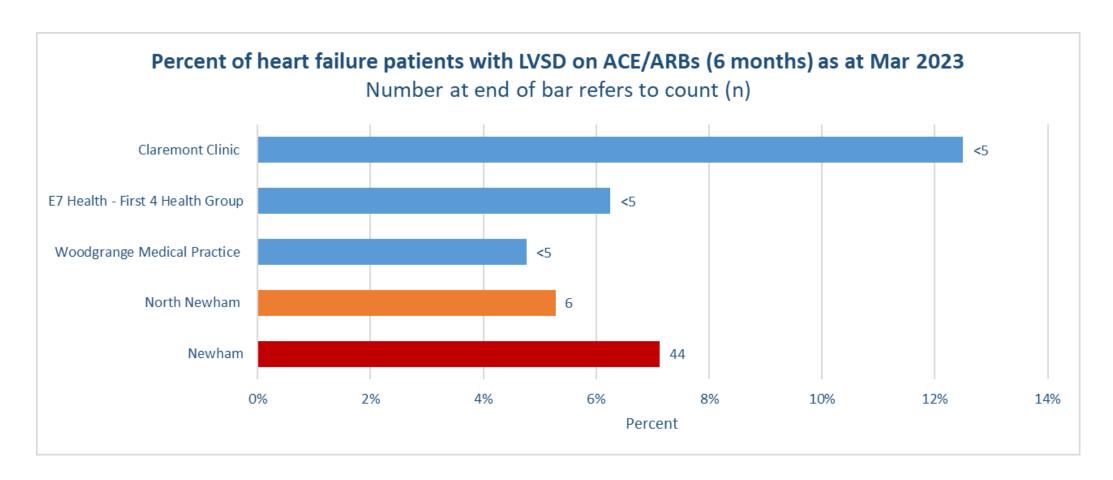


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Data source: Clinical Effectiveness Group Toolkit

CVD: % of all patients with LVSD on ACE/ARBs (6m) Newham London



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Data source: Clinical Effectiveness Group Toolkit

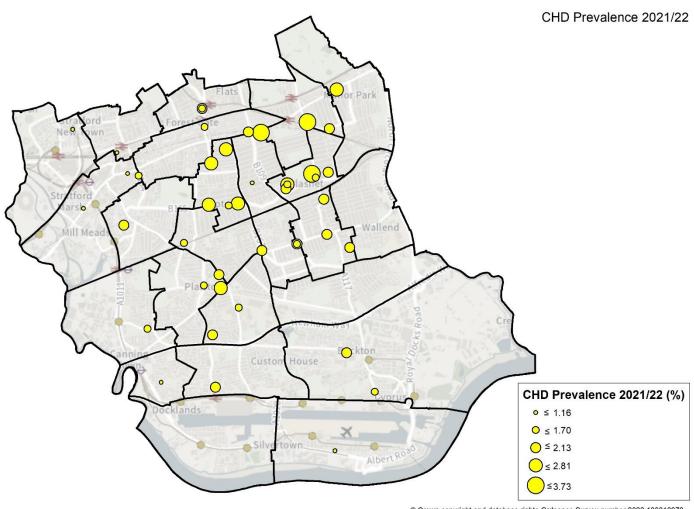
Coronary Heart Disease prevalence

In Newham and North by GP practice



Coronary Heart Disease prevalence (%, all ages) in 2021/22

GP practice	CHD prevalence (%)		
Woodgrange Medical Practice	1.6		
E7 Health (formerly Leytonstone Medical Practice)	1.5		
Claremont Clinic	2.0		



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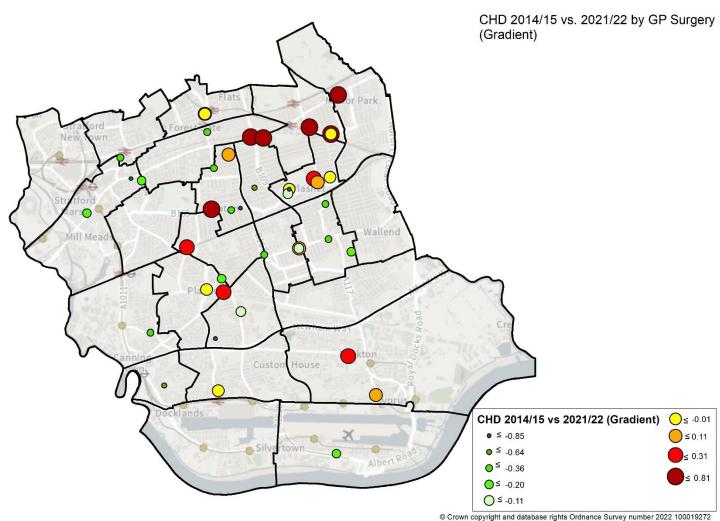
Coronary Heart Disease prevalence - gradient change

In Newham and North by GP practice



Coronary Heart Disease prevalence (%, all ages) 2015/16 vs. 2021/22 and gradient change

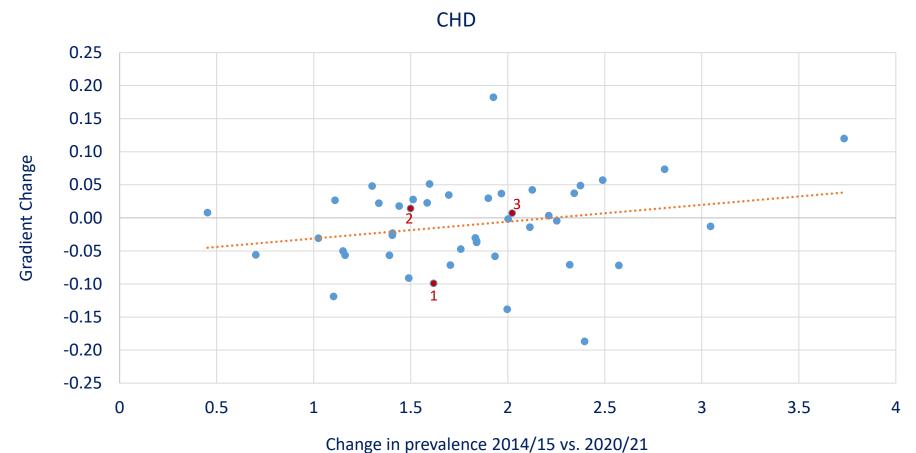
GP practice	2015/2016	2021/2022	Gradient change
First 4 Health Group - E7 Health	1.5	1.5	0.01
Woodgrange Medical Practice	2.0	1.6	-0.47
Claremont Clinic	1.5	2.0	0.50



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CHD prevalence and change in prevalence scatterplot Among all Newham GP practices





Key

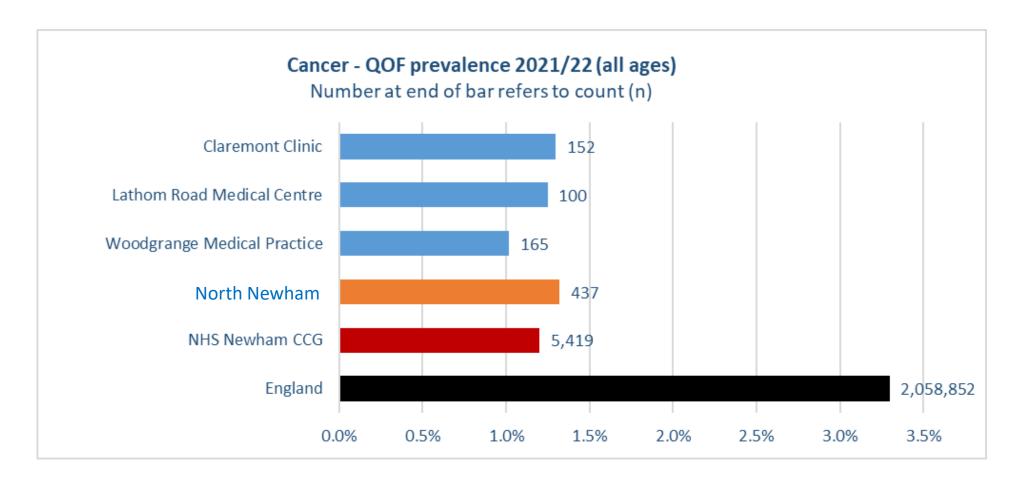
- 1 E7 Health
- 2 Woodgrange Medical Practice
- **3** Claremont Clinic

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Cancer: Prevalence



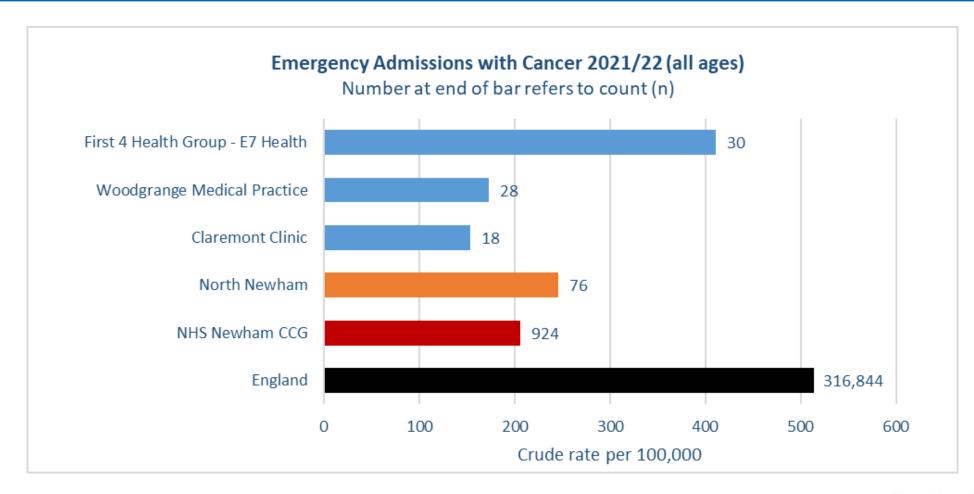


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Source: HES data held by OHID originally provided by NHS Digital

Cancer: Emergency Admissions



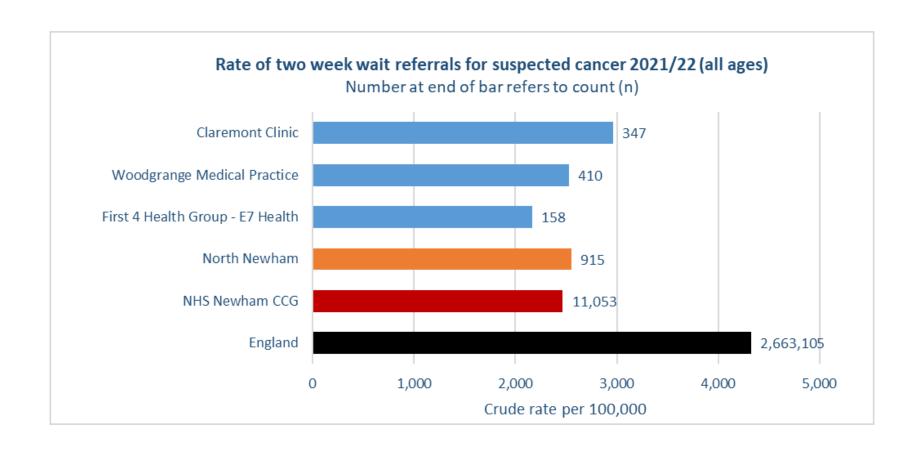


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Source: HES data held by PHE originally provided by NHS Digital

Cancer: 2 week wait referrals

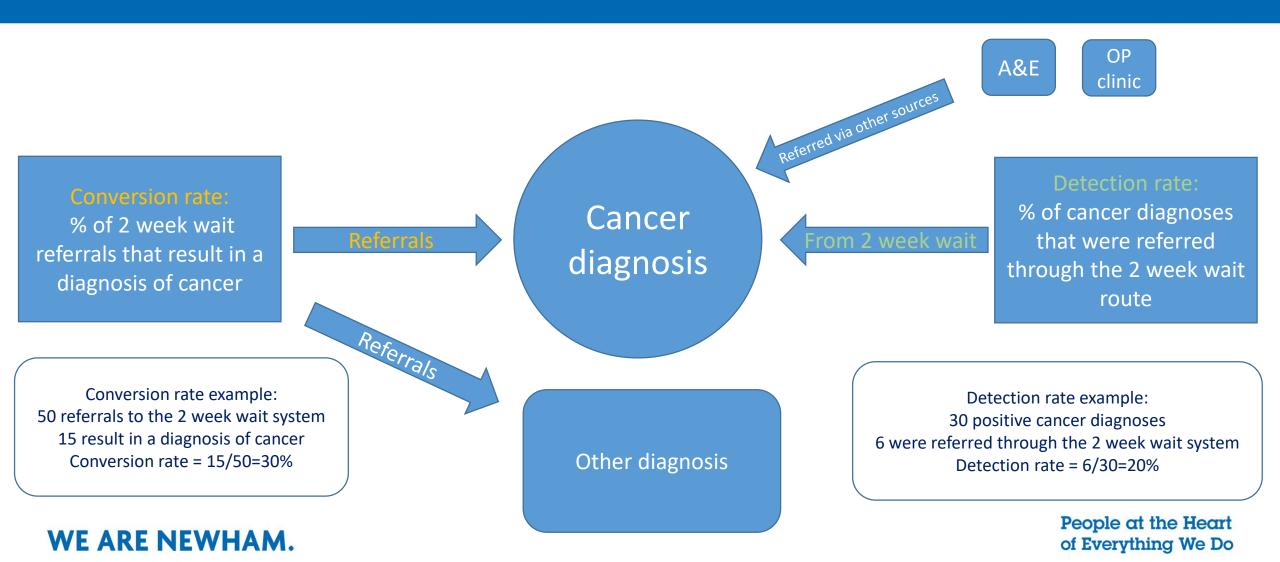




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Cancer: 2 week wait referrals: Detection and conversion explained



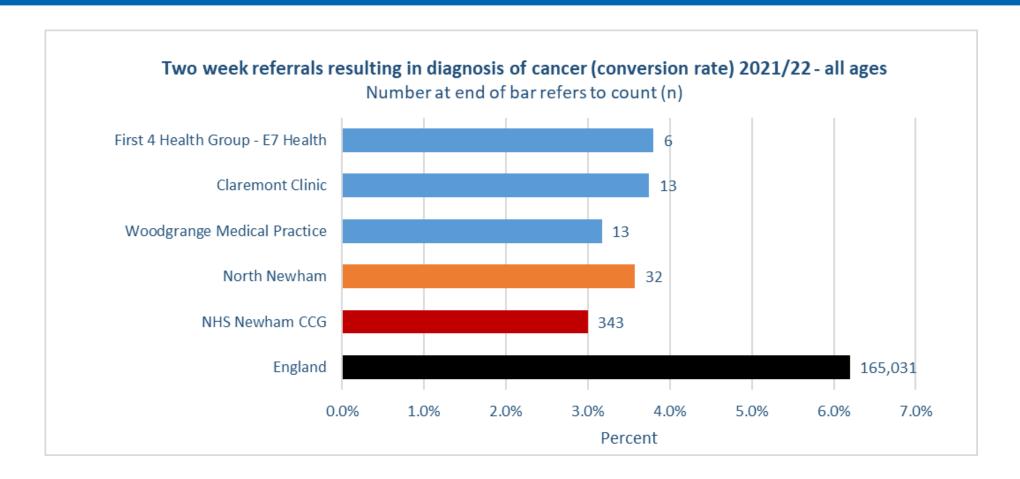


Data source: NHS England Cancer Waiting Times database via National GP Practice Profiles, OHID

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Cancer: 2 week wait referrals - conversion

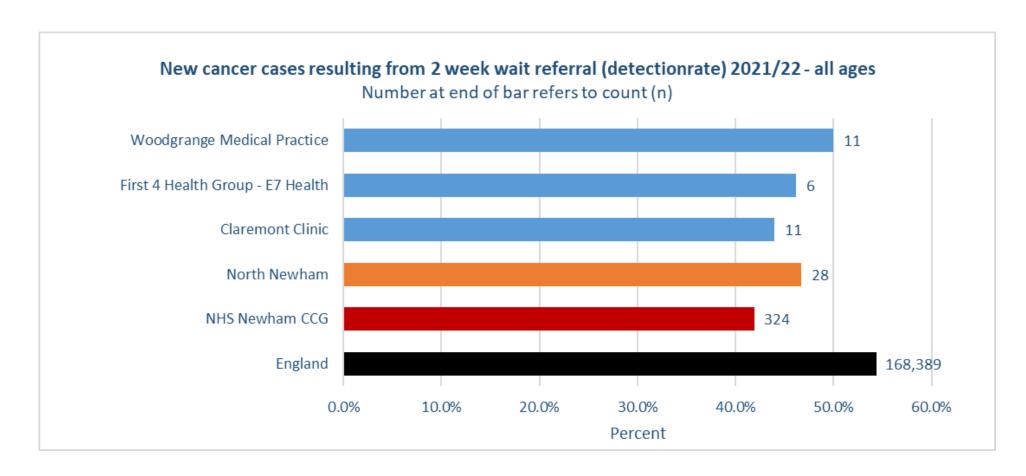




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Cancer: 2 week wait referrals - detection



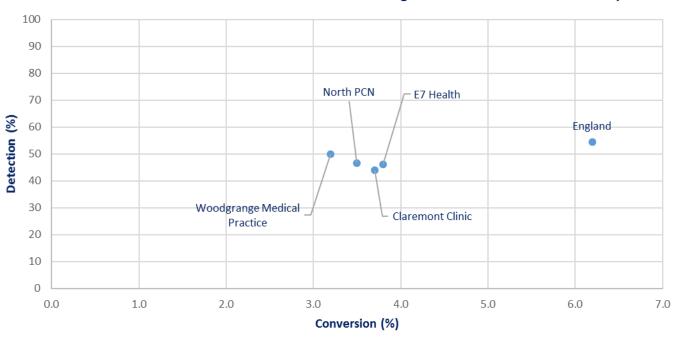


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Cancer: 2 week wait referrals – conversion/detection 2021/22



2 week wait referrals - GP Practices showing detection and conversion 2021/22



Conversion = 2ww referrals resulting in a diagnosis of cancer

Higher conversion percentage means that a higher proportion of 2 week wait referrals for suspected cancer resulted in a cancer diagnosis.

Detection = cancers referred via the 2 week wait referral

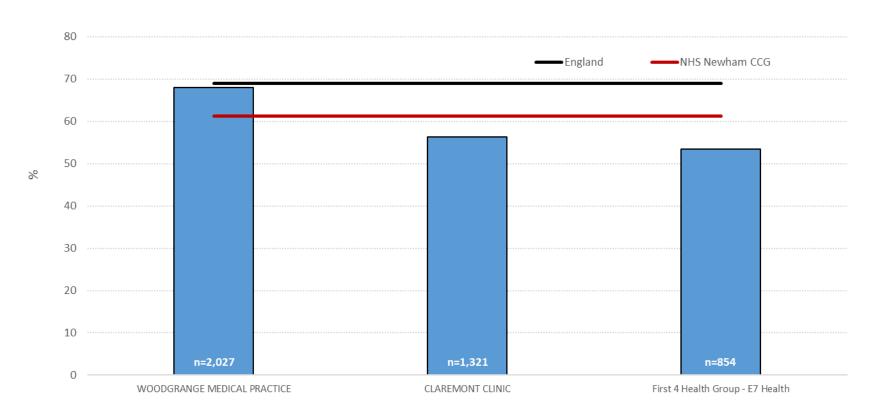
A higher detection percentage means cancers have been detected via referrals through the 2 week wait system, as opposed to emergency admissions for example.

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Cervical Screening



Percentage of Women aged 25-49 with a record of cervical screening in the last 3.5 years (including patients with PCAs) - 2021/22

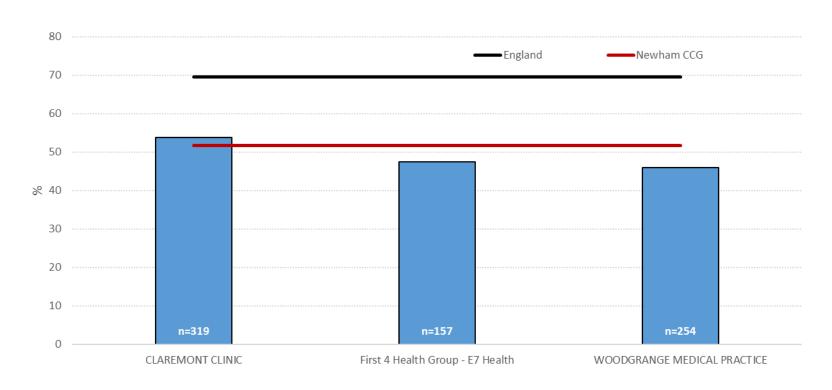


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Bowel Screening



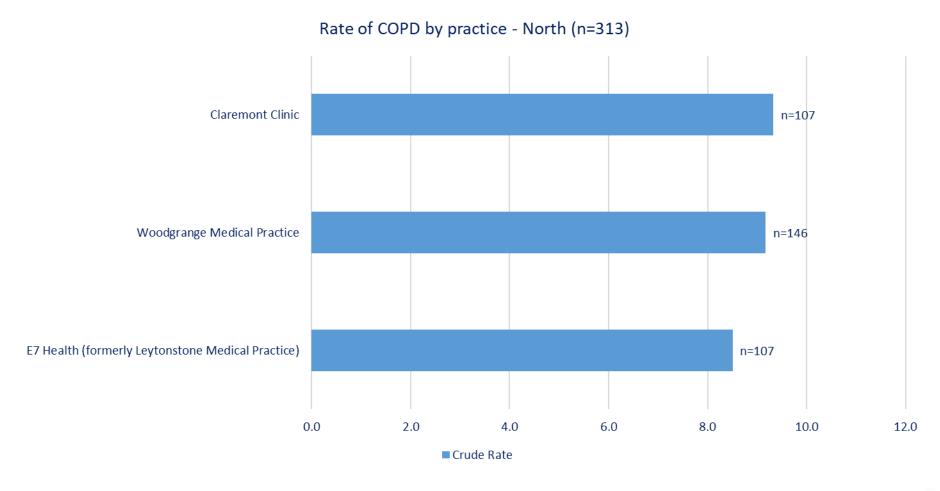
Percentage of people aged 60-74 screened for bowel cancer within 6 months of invitation (uptake) 2021/22



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Chronic obstructive pulmonary disease (COPD)





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Data source: Clinical Effectiveness Group

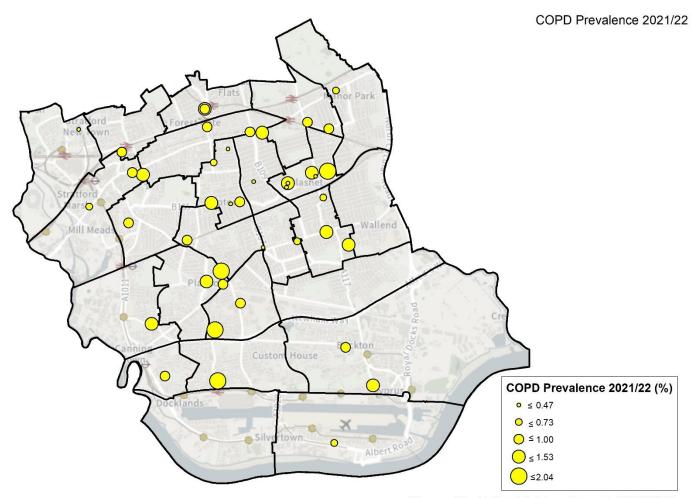
COPD prevalence

In Newham and North by GP practice



COPD prevalence (%, all ages) in 2021/22

GP practice	CHD prevalence (%)		
Claremont Clinic	0.9		
E7 Health (formerly Leytonstone Medical Practice)	0.8		
Woodgrange Medical Practice	0.8		



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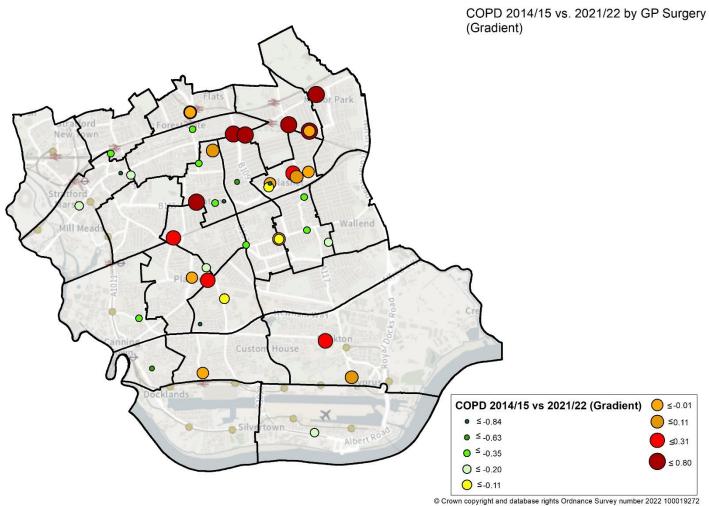
COPD prevalence - gradient change

In Newham and North by GP practice



COPD prevalence (%, all ages) 2015/16 vs. 2021/22 and gradient change

GP practice	2015/2016	2021/2022	Gradient change
First 4 Health Group - E7 Health	0.7	0.8	0.09
Woodgrange Medical Practice	0.8	0.8	0.01
Claremont Clinic	1.3	0.9	-0.49

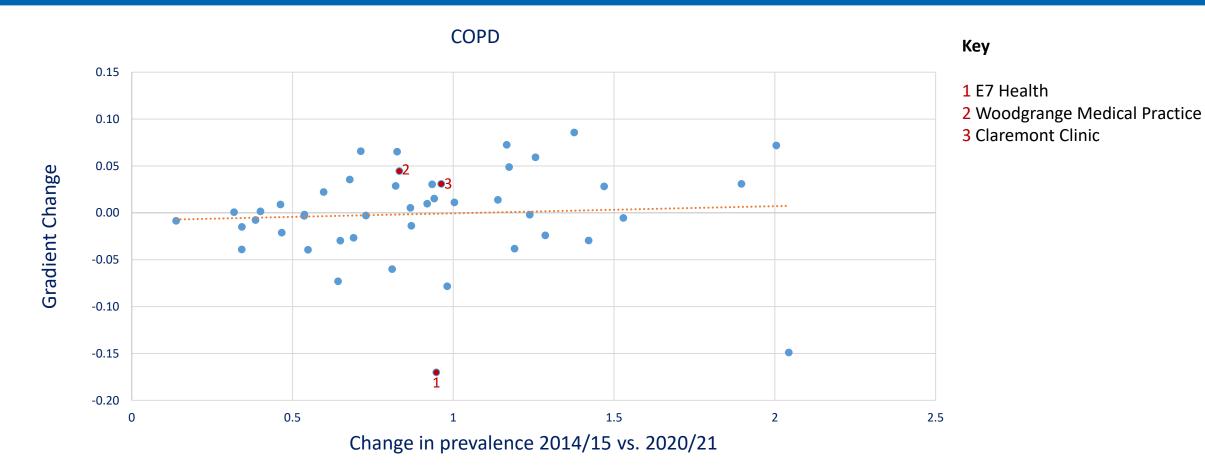


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Data source: OHID Fingertips Back to contents

COPD prevalence and change in prevalence scatterplot Among all Newham GP practices





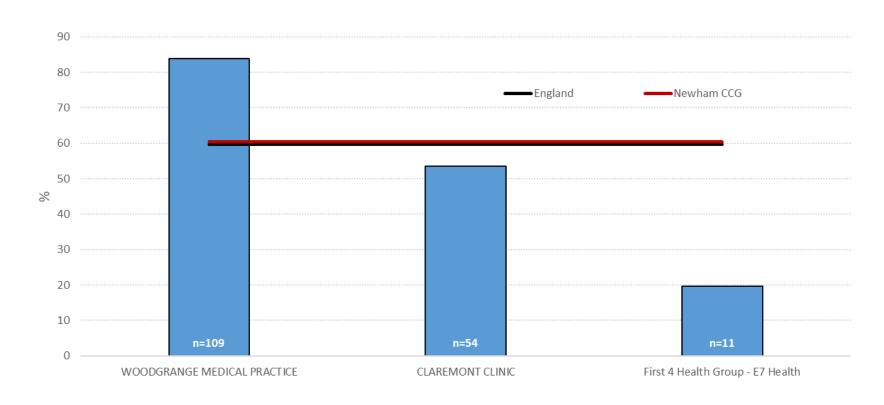
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COPD: Patients who had a review in the last 12 months



Percentage of Patients with COPD who had a review in the last 12 months (2021/22)

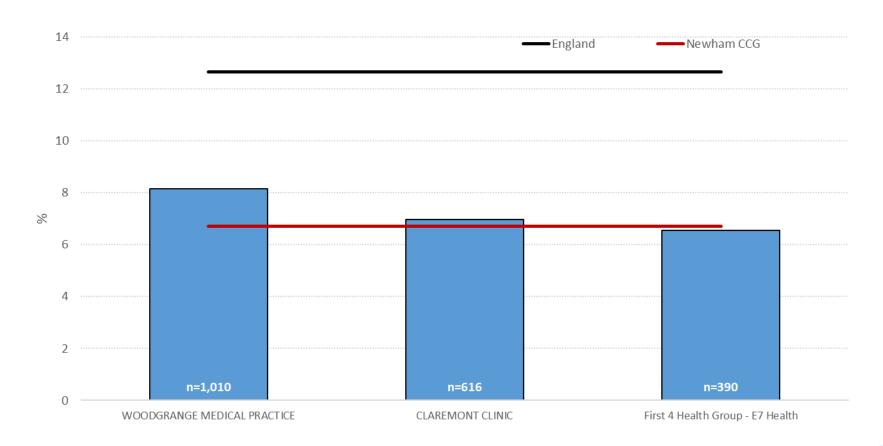


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Mental health: Depression prevalence



Depression Prevalence (18+): 2021/22



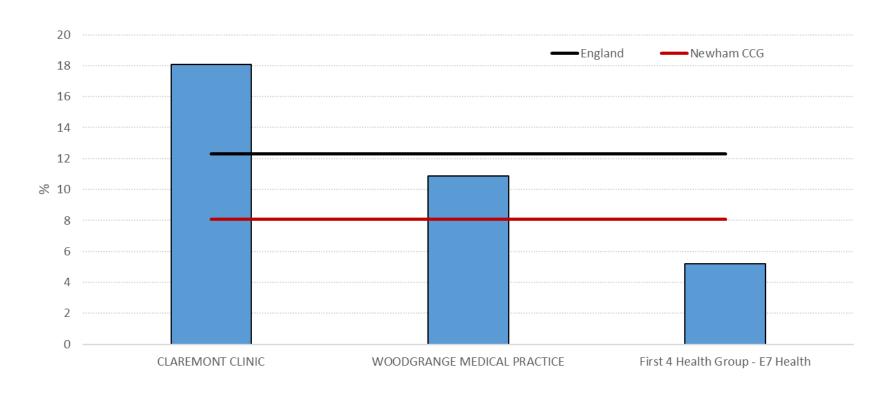
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Mental health: Long term mental health problem

Prevalence (%) with long term mental health problem 2021/22



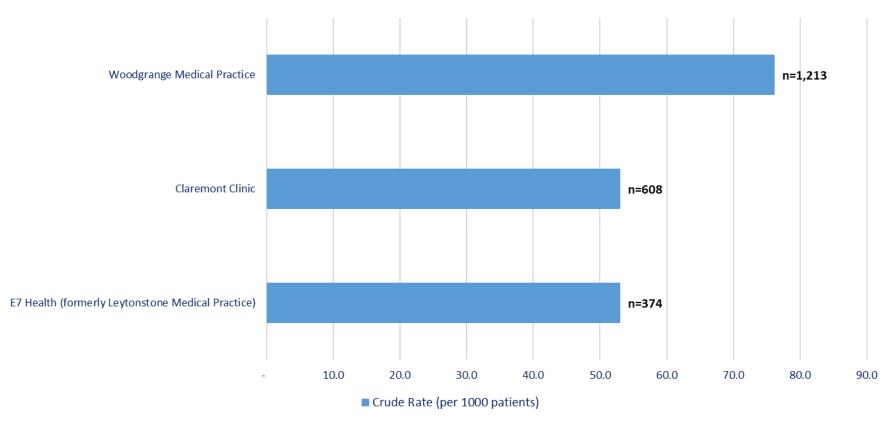
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Chronic mental illness (CMI)







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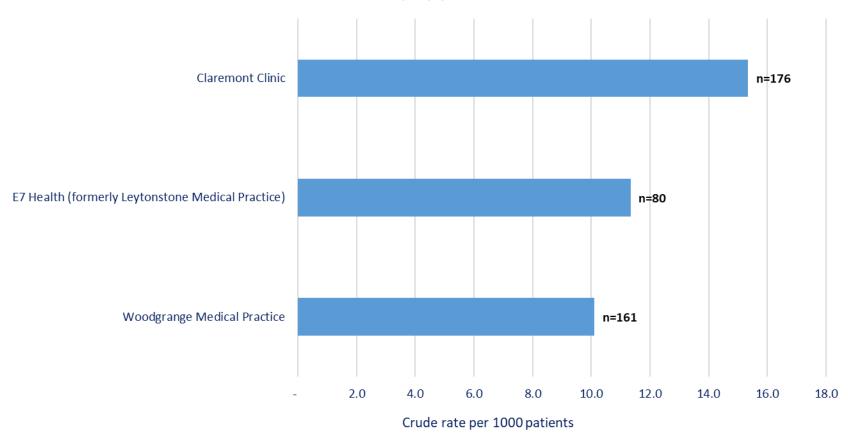
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Data source: Clinical Effectiveness Group

Serious mental illness (SMI)







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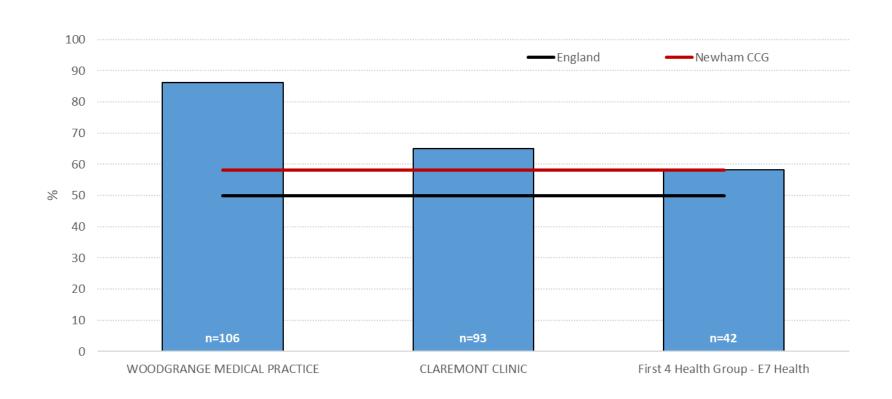
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Data source: Clinical Effectiveness Group

Mental health: Patients with severe mental issues having a comprehensive care plan



Patients with severe mental health issues having a comprehensive care plan (2021/22)



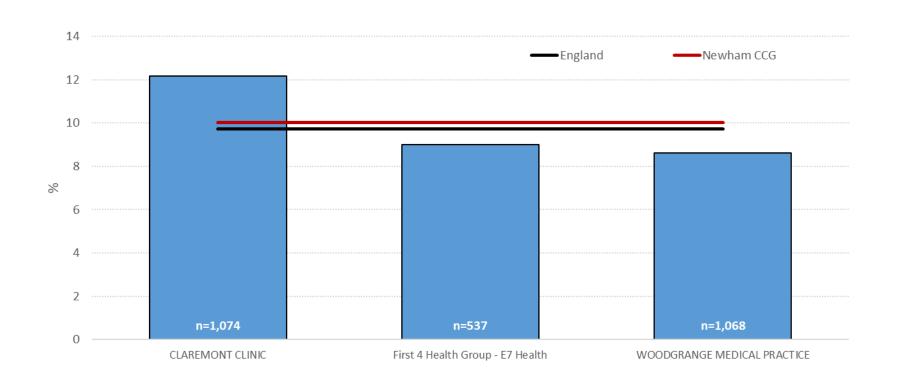
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Obesity: Prevalence 18+



Obesity Prevalence (18+): 2021/22

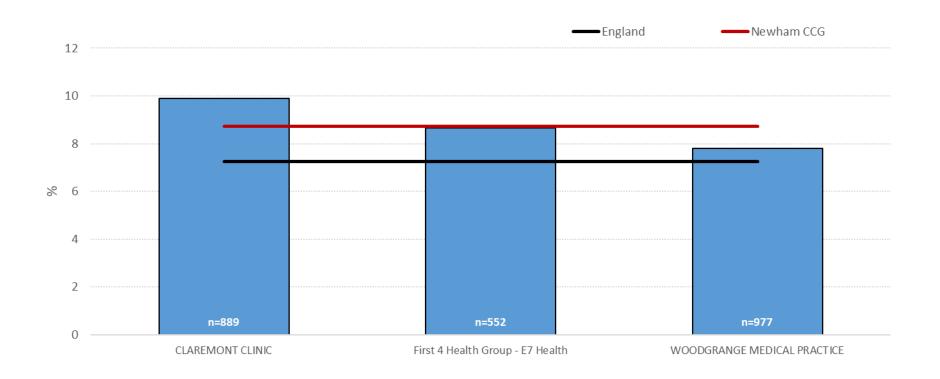


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Diabetes prevalence – as of Nov 2021 (Type 1 and Type 2 diabetes mellitus)



Diabetes Prevalence (Type 1 & Type 2 diabetes melitus): 2021/22



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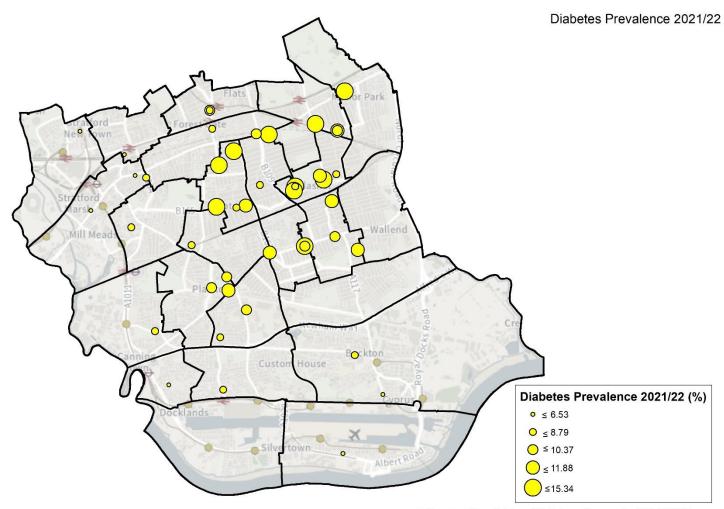
Diabetes prevalence

In Newham and North by GP practice



Diabetes prevalence (%, all ages) in 2021/22

GP practice	Diabetes prevalence (%)		
Claremont Clinic E7 Health (formerly Leytonstone Medical	8.2		
Practice) Woodgrange Medical Practice	7.8		



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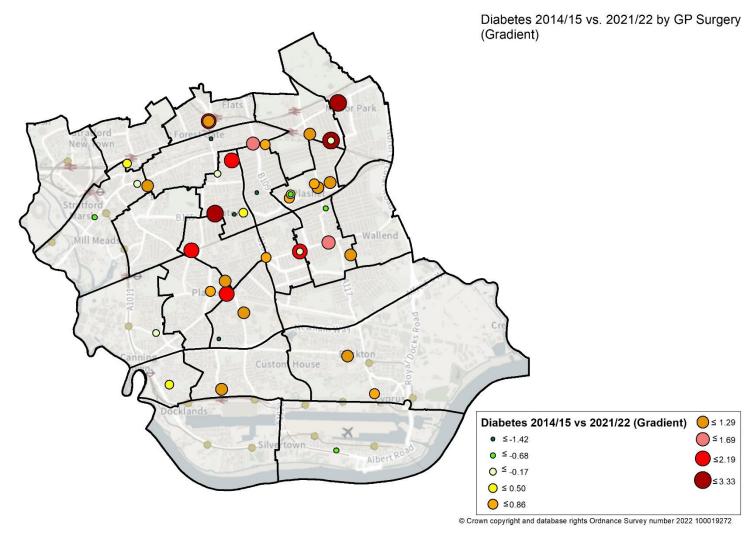
Diabetes prevalence - gradient change

In Newham and North by GP practice



Diabetes prevalence (%, all ages) 2015/16 vs. 2021/22 and gradient change

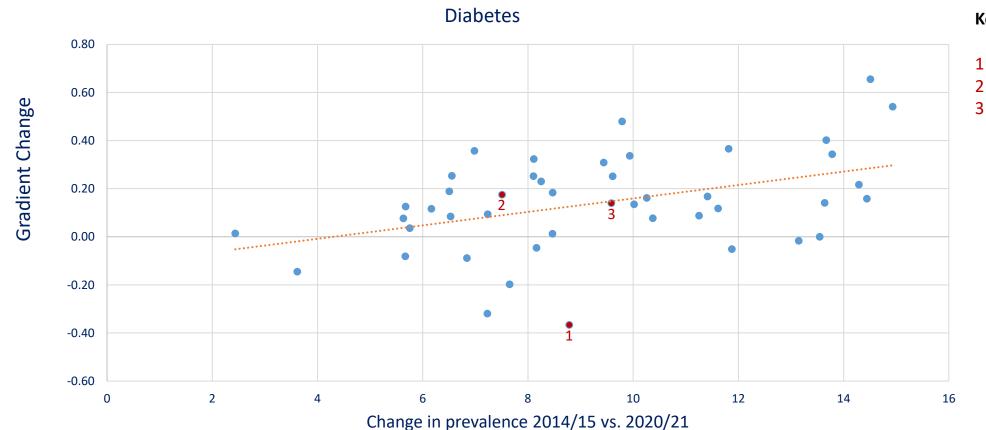
GP practice	2015/2016	2021/2022	Gradient change
E7 Health (formerly Leytonstone Medical Practice)	6.6	8.7	2.01
Woodgrange Medical Practice	9.2	7.8	-1.43
Claremont Clinic	8.2	9.9	1.69



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Diabetes prevalence and change in prevalence scatterplot Among all Newham GP practices





Key

- 1 E7 Health
- 2 Woodgrange Medical Practice
- **3** Claremont Clinic

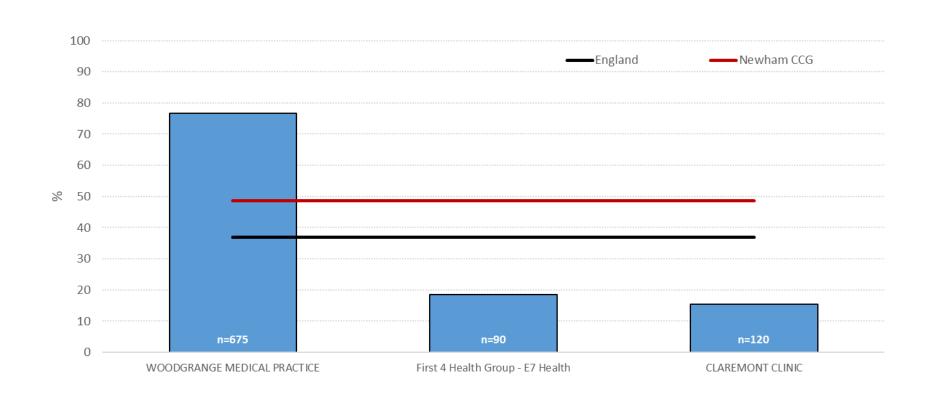
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Diabetes: Type 2 diabetic patients who have 8 recorded care processes



Type 2 diabetic patients who have 8 recorded care processes 2021/22

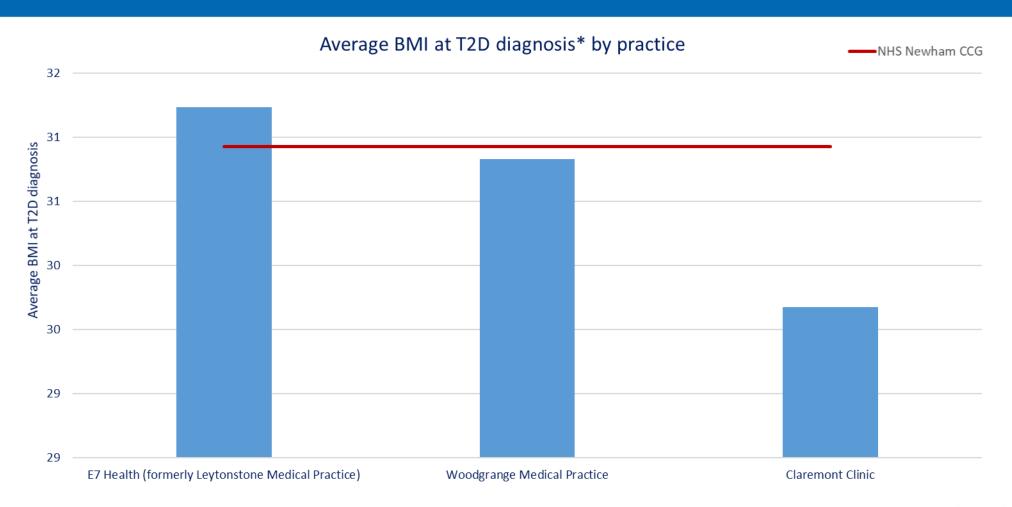


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Diabetes: Type 2 diabetic patients: Average Body Mass Index (BMI) at diagnosis*





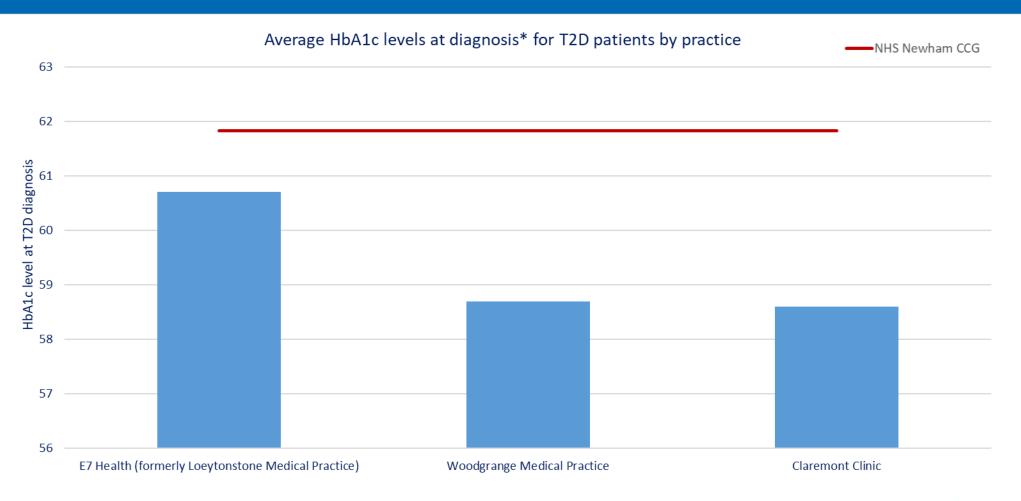
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*Diagnosis refers to value taken between 3 months before to 2 months after T2D diagnosis

Data source: Clinical Effectiveness Group (CEG)

Diabetes: Type 2 diabetic patients: Average HbA1c levels at diagnosis*





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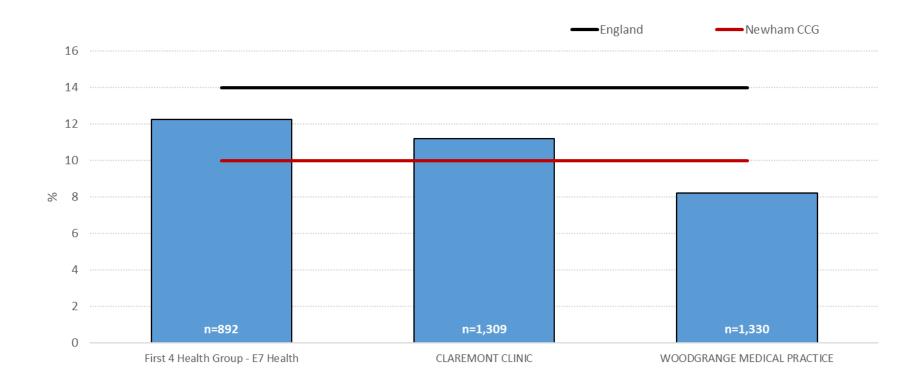
*Diagnosis refers to value taken between 3 months before to 14 days after T2D diagnosis

Data source: Clinical Effectiveness Group (CEG)

Hypertension: Prevalence



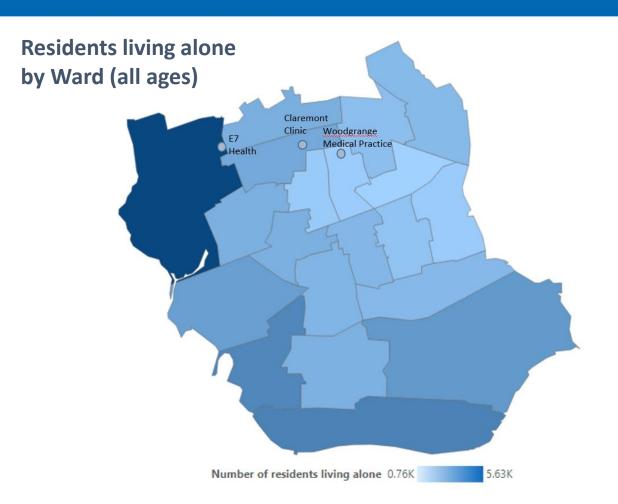
Hypertension Prevalence 2021/22

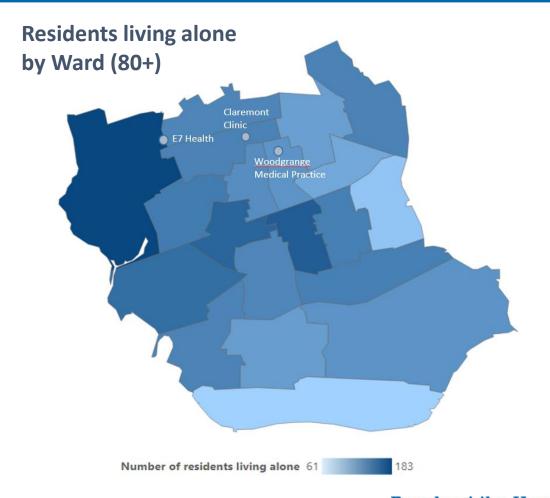


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Living alone







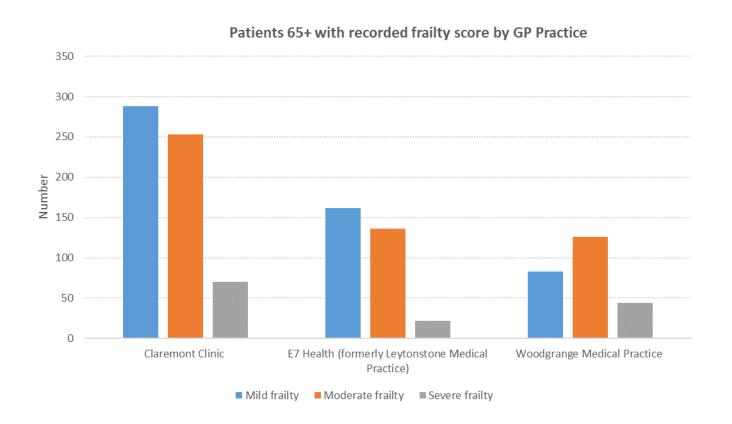
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Data source: Data Warehouse (March 2022)

Frailty





- The data is a snapshot as at 1st April 2020
- Patients in this data are those with a frailty score recorded between 2016-2020
 - Score 0 to 0.12 represents patients without frailty
 - > >0.12 to 0.24 represents patients with mild frailty
 - > >0.24 to 0.36 represents patients with moderate frailty
 - >0.36 represents patients with severe frailty

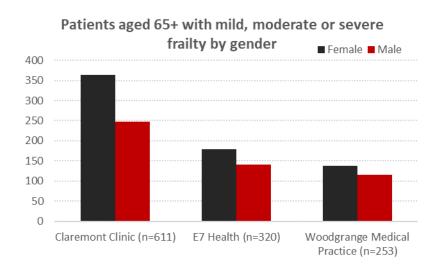
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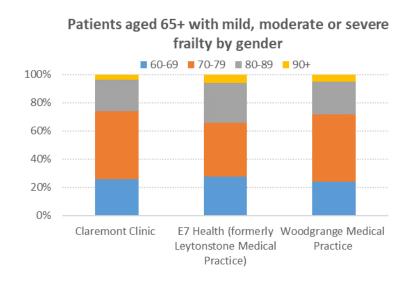
Data source: East London Database via CEG

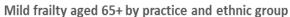
Frailty by ethnicity and age

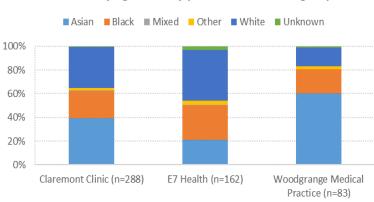




- The data is a snapshot as at 1st April 2020
- Females account for the highest proportion at 57% compared to 43% males
- Data by age band shows the highest proportion to be in the 70-79 age band for all practices
- The graphs below show a split by Practice and ethnicity for mild, moderate and severe frailty scores



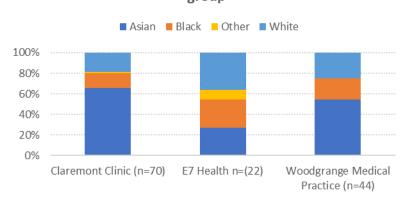




Moderate frailty aged 65+ by practice and ethnic group



Severe frailty aged 65+ by practice and ethnic group

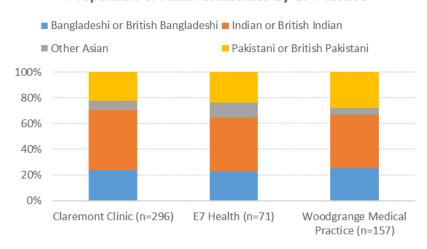


Data source: East London Database via CEG

Frailty showing detailed ethnicity



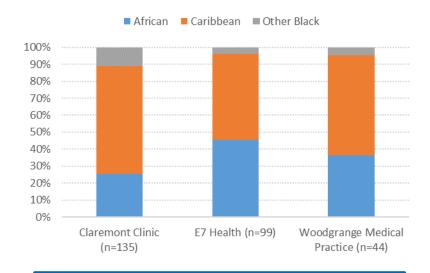
Proportion of Asian ethnicities by GP Practice



Asian ethnicities make up 44.3% of all North PCN patients with mild, moderate or severe frailty

- The chart above shows a breakdown of the Asian ethnic groups for residents with mild, moderate and severe frailty scores
- Total counts for all Asian ethnicities are shown for each practice

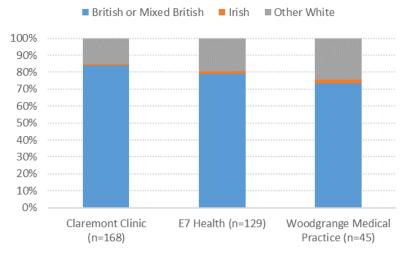
Proportion of Black ethnicities by GP Practice



Black ethnicities make up 23.5% of all North PCN patients with mild, moderate or severe frailty

- The chart above shows a breakdown of the Black ethnic groups for residents with mild, moderate and severe frailty scores
- Total counts for all Black ethnicities are shown for each practice

Proportion of White ethnicities by GP Practice

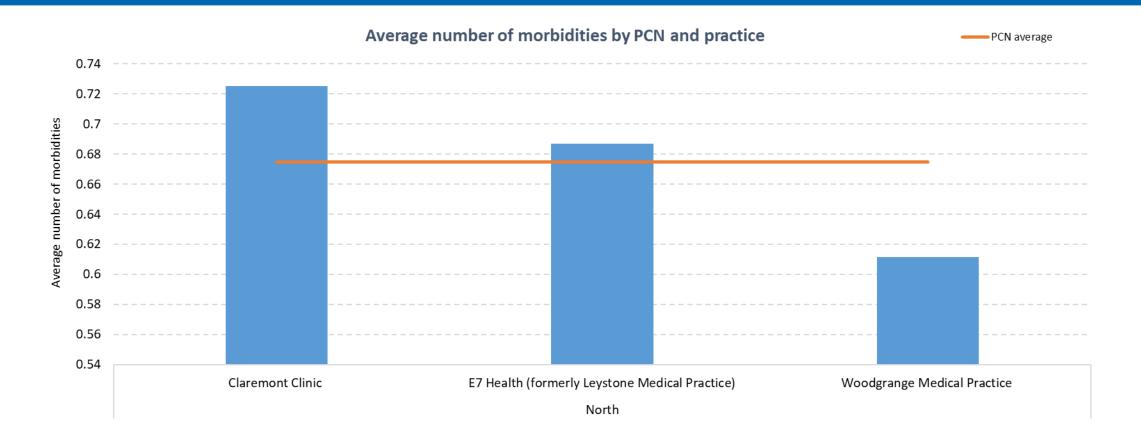


- White ethnicities make up 28.9% of all North PCN patients with mild, moderate or severe frailty
- The chart above shows a breakdown of the White ethnic groups for residents with mild, moderate and severe frailty scores
- Total counts for all White ethnicities are shown for each practice

Data source: East London Database via CEG

Multi-morbidity: Average number by practice





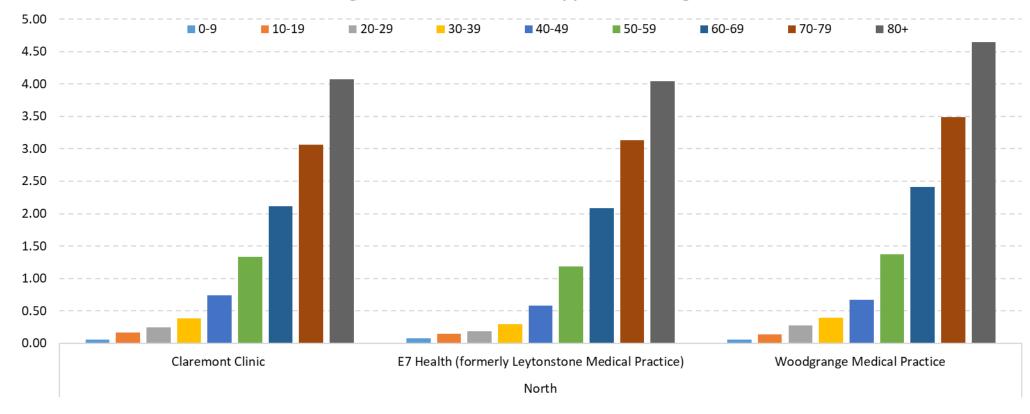
WE ARE NEWHAM.

Data source: Clinical Effectiveness Group – ELDB (2021)

Multi-morbidity: Average number by practice and age







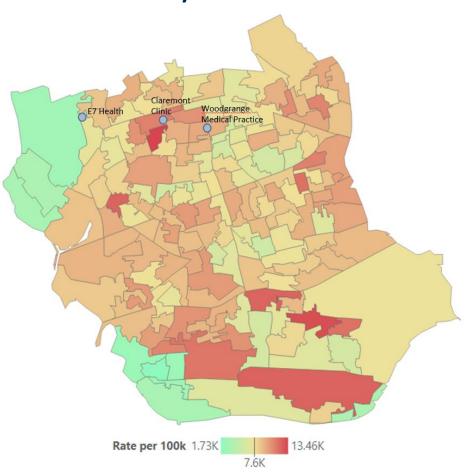
WE ARE NEWHAM.

Data source: Clinical Effectiveness Group – ELDB (2021)

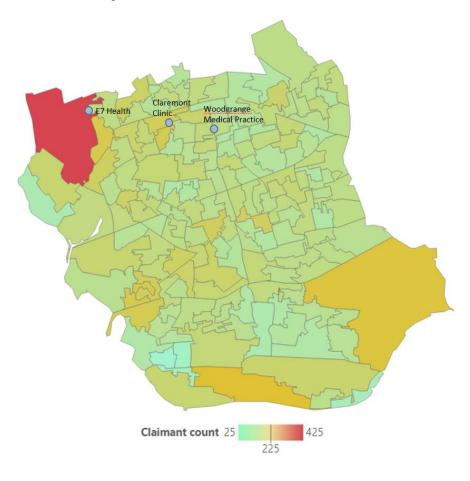
Unemployment



Claimant count crude rate per 100k by LSOA February 2022



Total number of claimants by LSOA February 2022

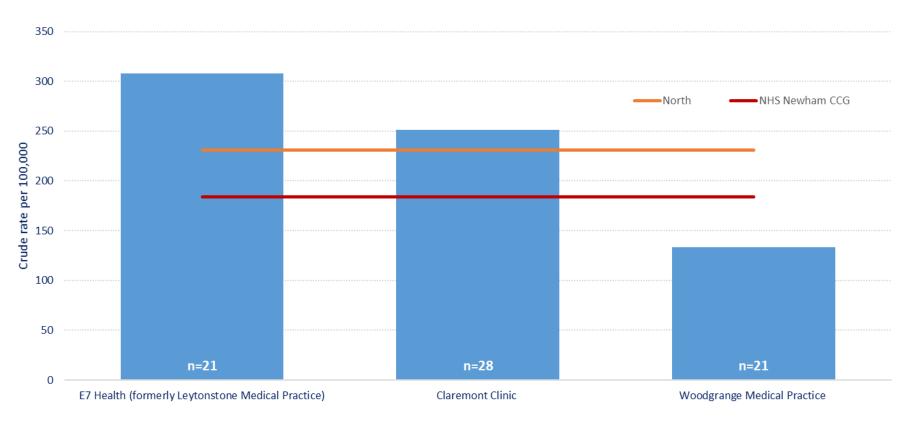


Data source: Office for National Statistics - NOMIS

Mortality: Premature deaths (<75 years)



Premature mortality rates: Deaths in 2021 - population under 75 years



WE ARE NEWHAM.

Data source: Primary Care Mortality Data, NHS Digital



Newham Public Health Team North PCN Profile May 2023

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