

Joint Strategic Needs Assessment

Core dataset, 2017

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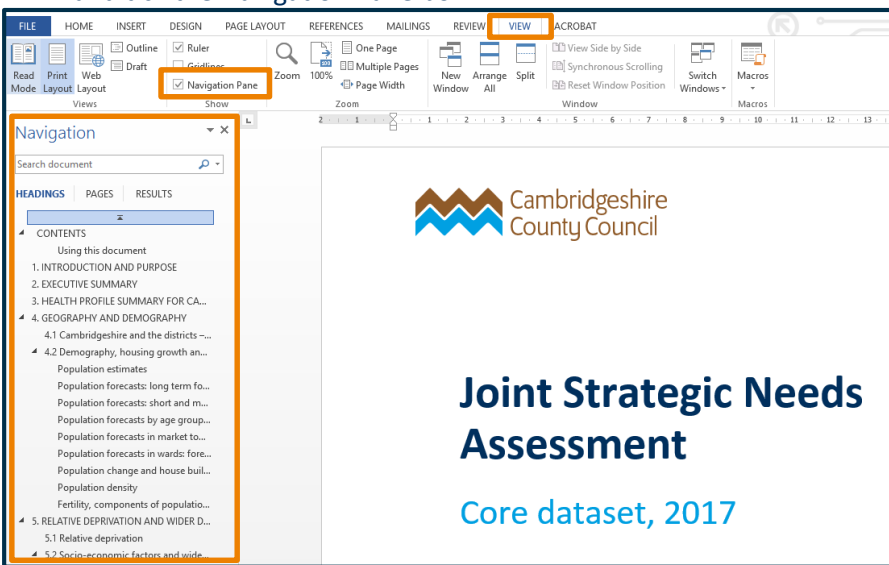
This report can be found on **Cambridgeshire’s Joint Strategic Needs Assessment (JSNA) website** at <http://cambridgeshireinsight.org.uk/jsna>.

Using this document

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1. EXECUTIVE SUMMARY

PURPOSE

The purpose of Cambridgeshire's Joint Strategic Needs Assessment (JSNA) is to identify local needs and views to support local strategy development and service planning. In order to understand whether we are achieving good health and care outcomes locally, it is useful to benchmark outcomes in Cambridgeshire against the national average and look at trends over time.

The primary purpose of this Executive Summary is to identify key points from this Cambridgeshire Joint Strategic Needs Assessment Core Dataset, section by section, with particular emphasis on those areas and issues that are of greater overall concern within each part of the report.

Cambridgeshire's summary of the national health profiles for England are also a good place to start in looking at the overall local picture of health and wellbeing in the County, and this is summarised in Table 1 in Section 1.1 below.

OVERALL EXECUTIVE SUMMARY

It should be noted that any summary is by necessity high-level, relatively crude, and cannot include the detailed differences and nuances of health and wellbeing across a large area like Cambridgeshire.

- Overall, **Cambridgeshire is a healthy place** and one that **compares generally well** with national health and wellbeing determinants and outcomes.
- However, there are **areas within Cambridgeshire with more widespread health and wellbeing issues**, where health determinants and outcomes are often more adverse than in Cambridgeshire and often **similar to, or worse than, national averages**. In **Fenland** it is a priority to broadly improve health determinants and outcomes and to reduce health inequalities.
- There are also some **very small areas**, often with relatively high levels of disadvantage and deprivation, which have correspondingly **adverse** health and wellbeing determinants and outcomes. In some areas of **Cambridge City** in particular further attention may be needed to **reduce health inequalities** and to **reverse emerging adverse trends** in some health determinants and outcomes.

The **principal points** in this report can be summarised as follows.

- **Life expectancy** in **Cambridgeshire** in men and women is generally **above national averages** and premature and overall **death rates** are **low**. However, **Fenland** has relatively **lower life expectancy and higher death rates**, at levels around and sometimes below England's and there are also **important gaps** in life expectancy and mortality in **deprived areas of Cambridgeshire** compared with more affluent ones. This pattern is generally maintained for the principal causes of death.
- Levels of **disability** and **general ill-health** are generally **low in Cambridgeshire**, but are **higher in Fenland**
- The general practice (GP) recorded **prevalence** of some specific long-term conditions like **diabetes** and **cancer** appear to be **higher in Cambridgeshire** than nationally, but this is influenced by GP clinical recording quality, varying age structures and deprivation, the as well as the amount of disease in the population. **Fenland** tends to have the **highest prevalence** rates for many diseases.
- The picture for **mental health** is again influenced by GP recording and access to services, with the **highest** recorded prevalence of more **severe mental illness** in **Cambridge** and the prevalence of **depression higher** in **Fenland** and **Huntingdonshire**.
- **Self-harm** appears to be a particular **issue across Cambridgeshire**, with sustained high rates of emergency hospital admissions and increasing trends at levels above the national average in all

districts other than South Cambridgeshire and **notably high levels in Cambridge City**. However this may reflect recording issues, hospital A&E practice and repeated admissions of individuals, as well as overall population prevalence.

- **Suicide** rates in Cambridgeshire do not differ significantly from England levels. **Male** rates are higher than female rates. **Fenland's male suicide rate** is significantly higher than the Cambridgeshire average. A continuing focus on **suicide prevention** is warranted.
- As the **population ages** a continuing **focus on dementia** will be necessary, along with the surveillance of dementia and Alzheimer's disease as a potentially emerging and increasingly important cause of death.
- In terms of **NHS healthcare services**, the **numbers of total and emergency inpatient hospital admissions increased** over time in all districts from 2011/12 to 2015/16, and numbers of **elective admissions increased** over this period in **Cambridge, Fenland and Huntingdonshire**. In general, **rates of all types of hospital admission are highest in Fenland and Huntingdonshire**. Numbers and rates of **accident and emergency attendances have increased in all districts**.
- The **Adult Social Care Outcomes Framework** indicates that the only indicator that is statistically significantly **worse** than England is the proportion of people who use services who say that those services have made them **feel safe and secure**. Other indicators, where local values differ from national averages but where the differences are not formally statistically significant, may warrant some attention.
- **Cambridgeshire and all districts** have experienced recent overall **population increases** and, while these differ between areas in terms of levels and demographic structure (age), all areas are expected to **continue to experience growth** in the short, medium and longer term to 2036 whether based on **Cambridgeshire County Research Group (CCC RG)** forecasts or **Office for National Statistics (ONS)** population projections
- Although starting at a similar level in 2016, there are differences between **Cambridgeshire County Research Group (CCC RG)** population forecasts, which are house building policy led, and **Office for National Statistics (ONS)** population projections which are based only on current population trends. **CCC RG** forecasts predict 151,000 more people by 2036 (a proportional rise of **23%**) and **ONS** projections predict 101,000 more (a proportional rise of **15%**).
- The proportional changes to 2036 across **districts are in the same rank** order whether CCC RG or ONS, but the levels of change are **larger** in the **CCC RG forecasts**.
- The **differences** between CCC RG forecasts and ONS projections are much **more marked** in the **child and working age** population groups than in the **older age** groups.
- To **2026**, **CCC RG** house building policy led forecasts indicate a proportional change for Cambridgeshire's population of **16%** and **ONS** forecasts predict **9%**. The proportional changes across **districts are larger** in the **CCC RG forecasts** and **both CCC RG and ONS** predict the **highest levels** of growth to 2026 in **East Cambridgeshire and South Cambridgeshire**, but with East Cambridgeshire the higher in the CCC RG forecasts.
- The **drivers of population change** differ by district, with migration, natural change (births and deaths) and housing development playing respectively greater and lesser parts.
- Overall Cambridgeshire is **not ethnically diverse** and most districts follow this pattern.
- Cambridgeshire is a generally **rural area** with low levels of population density, especially outside of the relatively more urban areas.
- Cambridgeshire overall has **low levels of socio-economic disadvantage** and relative to England is a **prosperous place with low levels of deprivation**.
- **Deprivation is higher and most widespread in Fenland** and some **smaller areas** of East Cambridgeshire, Huntingdon and north-east Cambridge.

- **Child development and educational performance** warrants further attention across Cambridgeshire, particularly in Fenland and other relatively **deprived** smaller areas.
- In general, **levels of employment** are **better** than found nationally in **most areas of Cambridgeshire**, but are **similar to England's average in Fenland**. There are **greater levels of income based disadvantage** in small areas **within Fenland**.
- More **urban areas**, such as **Cambridge**, have the highest levels of fast food outlets and household overcrowding, but **Fenland** also has a **higher density of fast food outlets** than the national average.
- **Fenland** has a high level of **unpaid carers**.
- Generally, levels of **overweight children are lower in Cambridgeshire**, but **Fenland has a similar level** to that found nationally. Children's **activity levels tend to decrease** as they get older.
- Almost **two-thirds of Cambridgeshire adults are overweight**, with higher levels than found nationally in **East Cambridgeshire, Fenland and Huntingdonshire**. A **quarter are physically inactive**, with the **lowest** activity levels in **Fenland**.
- **Adult smoking** is statistically significantly **worse** than the national average in **Fenland** and levels of smoking **do not differ in Cambridgeshire** as a whole compared with England. 15% of all Cambridgeshire adults are smokers and there appears to have been a **decline in children smoking**. Cambridgeshire's stop smoking service met its most recent targets.
- **Alcohol misuse** warrants some attention **across Cambridgeshire**, in both younger people and adult populations. Rates of **hospital admissions for alcohol-related conditions** are statistically significantly **higher** than the England average in **Cambridge and Fenland** and appear to be **increasing**.
- The picture regarding **sexual health** in Cambridgeshire is mixed, and sometimes unclear with **infection testing rates lower** than in England, which could be attributable to low levels of disease or poor detection. **HIV testing** at later stages of infection is **relatively high** in Cambridgeshire and is **increasing**. **Conceptions in young women** are generally **low in Cambridgeshire**, but are **higher** than found nationally in **Fenland**.
- **Falls** are an issue requiring **continuing attention** in **Cambridgeshire**. Emergency **hospital admissions** for falls are **higher in Cambridgeshire's very elderly population** and are **higher** than the national average in people aged **65 years plus in Cambridge City and Fenland**.
- **Cancer screening rates** in **Cambridgeshire**, and especially in **Cambridge City and Fenland**, are relatively **low**.
- Some **childhood vaccinations** have relatively **low**, and **declining**, coverage rates in **Cambridgeshire**.
- **Cambridgeshire's flu vaccination rates** for older people and at risk individuals are sustained at levels **below national targets**.

EXECUTIVE SUMMARY BY JSNA CORE DATASET 2017 REPORT CHAPTER

GEOGRAPHY AND DEMOGRAPHY

Population estimates and forecasts

- The **population** of Cambridgeshire in 2015 was estimated locally as just under 650,000 having increased by around 4% since 2011.
- Cambridge has seen the largest absolute and proportional **population growth**.
- Population growth to 2020, based on natural change and migration, suggests that population increases will be concentrated in children and in adults aged 55 and older.
- Overall Cambridgeshire's **population profile** by sex and age is similar to England's but a lower proportion of people are from minority ethnic groups.
- Cambridgeshire is a relatively rural area, with **lower population density** than in England and the East of England but notably higher density in Cambridge.
- **Population density** in Cambridgeshire has **increased** since 2007 with a slightly higher proportional increase than in the East of England and England.

Population forecasts

- Please ensure that the **IMPORTANT NOTE REGARDING USE OF POPULATION FORECASTS AND PROJECTIONS on page 24** is read and understood before using the data in this part of the Executive Summary.
- This **section of the Executive Summary is largely based** on locally produced forecasts from **CCC's Research Group**, which include the **impact of local planning policy**, as well as natural change and migration. It should be noted that **national public sector funding allocations** tend to be based on adjusted **ONS population projections** and these are generally **lower** than the CCC Research Group forecasts, as the **sensitive local data on future housing development** are not included. The **divergence** between the ONS projections and the Research Group forecasts tends to **increase over time**. The **differences** between CCC RG forecasts and ONS projections are **more marked** in the **child and working age** population groups than in the **older age** groups. The **detailed differences** can be found in the **relevant sections of the report**.
- CCC Research Group predict that Cambridgeshire's **population is forecast to grow** by 23% between 2016 and 2036, increasing by 151,000 people to just over 800,000. ONS predicts that Cambridgeshire's population will grow by 15%, or 101,000 over this period.
- **South Cambridgeshire** is forecast to have the **largest absolute and proportional increase** in population, but **growth is forecast across the county**.
- In the shorter term, to 2021, **Cambridge** is forecast to have the **highest** absolute and proportional population increases, followed by South Cambridgeshire.
- Between 2021 and 2026 the rate of growth is expected to **fall in Cambridge and Fenland** but **continues** in the other **districts**, notably in **East Cambridgeshire**.
- Cambridgeshire and its districts are forecast to experience absolute and proportional increases in **all age groups** in the next 5 to 10 years.
- The proportional increase in **under 16s** over the next 5 years is forecast to be highest in Cambridge; and in **16-64s**, in Cambridge and South Cambridgeshire. Increases are notably higher in people **aged 65+** across all districts.

Factors influencing population change

- Major **new housing developments** are proposed across Cambridgeshire: Northstowe, and the proposed Wisbech Garden Town, have the highest numbers of planned dwellings followed by Waterbeach New Town, Alconbury and March.
- The greatest **density** of proposed new housing sites and numbers of dwellings is expected to be in South Cambridgeshire. Cambridge has had the greatest number of completed developments since 2001.

- **Birth rates** have stabilised in recent years after generally increasing trends to 2012; rates are highest in Fenland but notably lower in Cambridge.
- In Fenland **migration** had the largest proportional impact in Cambridgeshire in 2016/17 and was the dominant component of annual population change over that period. In Fenland, the vast majority of migrants are from EU countries (96%) but in Cambridge 35% originate from non-EU countries.

RELATIVE DEPRIVATION AND WIDER DETERMINANTS OF HEALTH

Relative deprivation

- Cambridgeshire as a whole has **low levels of deprivation** with small proportions of people living in the most deprived 20% of areas nationally.
- Fenland is the only district with a level of overall **deprivation above the national rate** and has a larger proportion of its population living in the most deprived 20% of areas nationally, which is similar to the national average.
- The greatest levels of **relative deprivation** are in the north of the county, clustered in Fenland, but with some areas in East Cambridgeshire, Huntingdon and north-east Cambridge.
- The percentage of children aged **under 16 living in poverty** is statistically significantly worse than the England average in Fenland. Although relatively stable in recent years, it has worsened in relation to the national average as the national position has improved.
- The highest levels of **income deprived older people aged 60+ years** within Cambridgeshire are in Fenland with a rate that is around the national average.

Child development and education

- Cambridgeshire's percentage of children with **free school meal status achieving a good level of development** at the end of reception has been statistically significantly worse than the England rate since 2012/13.
- Fenland's **GCSE attainment rate** is statistically significantly worse than the England and Cambridgeshire averages.
- The rate of **pupil absence** in Cambridge is significantly worse than the Cambridgeshire and national averages.

Employment

- Fenland has many more **deprived areas in terms of employment and income** compared to the other districts of Cambridgeshire.
- **Employment rates** in Cambridgeshire and its districts are statistically better or similar to the national average but rates are lowest in Fenland.
- Rates of **employment support allowance (ESA)** claimants for mental and behavioural disorders are increasing in all districts; the rate is highest in Fenland but is statistically significantly similar to the England average.
- Fenland and Cambridgeshire as a whole have significantly higher rates of **sickness absence** than found nationally.

Other wider determinants

- There is a higher **density of fast food outlets** compared to the Cambridgeshire average in Cambridge and Fenland.
- Cambridge has statistically higher levels of **household overcrowding** than found on average in England.
- Fenland has a statistically higher level of **unpaid carers** than England and Cambridgeshire collectively.

LIFESTYLES AND RISK FACTORS

Excess weight and physical activity

- Rates of **excess weight in children** are statistically similar to the England average in Fenland but statistically significantly better elsewhere and for the county as a whole.
- The rate of **excess weight in adults** is statistically significantly worse than the national average in East Cambridgeshire, Fenland and Huntingdonshire. 63% of Cambridgeshire adults are overweight.
- 8% of Year 10 Cambridgeshire **children** were **inactive** in the week before they were surveyed in 2016 and the percentages have notably increased since 2006.
- The percentages of **adults that are physically active and inactive** are statistically significantly worse than the national averages in Fenland. 25% of all Cambridgeshire adults are inactive.

Smoking

- 10% of Year 10 Cambridgeshire **children** are **smokers** though rates have decreased since 2006.
- The percentage of **adults smoking** is statistically significantly worse than the national average in Fenland. 15% of all Cambridgeshire adults are smokers.
- Cambridgeshire's **stop smoking service (CAMQUIT)** met its target for the number of people successfully quitting smoking at 4 weeks in 2016/17. In 2016/17, quit rates per 100,000 smokers increased in Cambridgeshire compared with 2015/16.
- Levels of smoking quitters have tended to fall and have stabilised at a lower rate following the wider use of e-cigarettes.

Alcohol and drug use

- The percentage of **15 year olds** in Cambridgeshire that have **ever had an alcoholic drink** is statistically significantly higher than the England average, but the rate has notably decreased.
- The percentage of Cambridgeshire **adults who abstain from drinking alcohol** is statistically significantly lower than the England average.
- The rates of **hospital admission episodes** for alcohol-related conditions are statistically significantly higher than the England average in Cambridge and Fenland and appear to be increasing. There are pockets of higher than national average rates across the county.
- 16% of Year 10 **children** in Cambridgeshire report having ever **taken drugs**.
- Around 28 **adults** die each year due to **drug misuse** in the county; rates of deaths are higher in Cambridge and Fenland.

NHS Health Checks

- Although the percentage of the eligible population invited for an NHS Health Check in Cambridgeshire is higher than the England average, the actual uptake of those offers is statistically significantly lower than average.

Sexual health

- The **chlamydia detection rate** is lower than the national target in Cambridgeshire and each of its districts. It is notably low and falling in Cambridge.
- The percentage of **HIV diagnoses** at a late stage of infection in Cambridgeshire is currently worse than the national target and national average and appears to be increasing.
- **STI testing** rates are statistically significantly lower than the national average in Cambridgeshire. Although rates have increased, positivity rates have declined, which may indicate poor targeting or a general decrease in prevalence of infection in the population.

Under 18 births

- Although rates have declined, **birth rates to mothers aged under 18** are statistically significantly higher in Fenland compared with the national average.

Falls

- Rates of **emergency hospital admissions due to falls** in people aged 65 and over are statistically significantly higher than the national average in Cambridge and Fenland. Rates in people aged 80+ are higher than the national average in Cambridgeshire.

SCREENING, VACCINATION AND IMMUNISATION

Adult screening

- The rate of **breast cancer screening** has been statistically significantly lower than the England average in Cambridge since 2010. Coverage for the county as a whole is decreasing.
- The rate of **cervical cancer screening** in Cambridgeshire is statistically significantly lower than the England average and has declined. Coverage is notably low in Cambridge.
- The rate of **bowel cancer screening** is statistically significantly lower than the England average in Cambridge and Fenland.

Children

- Vaccination coverage rates for **Hib/MenC booster at 5 years** of age and **2 doses of MMR by 5 years** of age are below national targets in Cambridgeshire and are declining.
- Coverage rates are also declining in Cambridgeshire for **Dtap/IPV/Hib, Hib/MenC booster at 2 years**, and **PCV booster**.

Influenza

- Cambridgeshire's **flu vaccination** rates for **older people** and **at risk individuals** have been statistically significantly below national targets since 2010/11.

LEVELS OF ILLNESS AND HEALTH AND SOCIAL CARE SERVICES

Cardiovascular, respiratory and long-term conditions

- The recorded prevalences of **coronary heart disease** and **stroke** have been statistically significantly higher than the national averages in Fenland since 2008/09.
- The recorded prevalences of **high blood pressure** have been statistically significantly higher than the national average in Fenland and Huntingdonshire since 2008/09.
- The recorded prevalence of **asthma** has been consistently statistically significantly higher than the England average in East Cambridgeshire, Fenland, Huntingdonshire, and South Cambridgeshire since 2008/09. Rates appear to be increasing in South Cambridgeshire.
- The recorded prevalence of **chronic obstructive pulmonary disease** has been consistently statistically significantly higher than the England average in Fenland since 2008/09.
- The recorded prevalence of **cancer** is statistically significantly higher than the national average for the county as a whole and in all districts except for Cambridge.
- The recorded prevalence of **diabetes** in people aged 17 years and over has been statistically significantly higher than the England average in Fenland since 2008/09.

Mental health

- The prevalence of recorded **schizophrenia, bipolar disorder and other psychoses** has been consistently statistically significantly higher than the national average in Cambridge since 2008/09.
- Rates of recorded **depression** are statistically significantly higher than the national average in Fenland and Huntingdonshire.
- Levels of recorded **dementia** across the county are increasing but are significantly lower or similar to the national average. The estimated diagnosis rate, however, is below the national target in East Cambridgeshire, Fenland and Huntingdonshire.

- The proportion of people with a recorded **learning disability** is statistically significantly higher than the England average in Fenland.
- Rates of emergency admission to hospital for **self-harm** have been statistically significantly higher than the national average in Cambridgeshire since 2013/14 and appear to be increasing. Rates are worse than England in all districts except for South Cambridgeshire and notably high in Cambridge.
- **Suicide** rates in Cambridgeshire do not differ significantly from England levels. Male rates are higher than female rates. Fenland's male suicide rate is significantly higher than the Cambridgeshire average and is sustained at a level above both the England and Cambridgeshire averages.

Inpatient hospital admissions

- Numbers of **inpatient hospital admission episodes** have increased among residents of all districts.
- The rates of inpatient admission episodes are statistically significantly higher than the Cambridgeshire average in Fenland and Huntingdonshire and appear to be increasing. There are also signs of increasing rates in people aged 75 and over in Cambridge.
- Numbers of **elective** inpatient hospital admission episodes have increased in Cambridge, Fenland and Huntingdonshire residents.
- The rates of elective admissions in the under 75s are statistically significantly higher than the Cambridgeshire average in Fenland and Huntingdonshire. In 75s and over, rates are statistically significantly higher than the county average in Fenland and Huntingdonshire; rates have notably increased in Fenland but decreased in South Cambridgeshire.
- Numbers of **emergency** inpatient hospital admission episodes have increased among residents of all districts.
- The rates of emergency admissions in under 75s are statistically significantly higher than the Cambridgeshire average in Fenland and Huntingdonshire. In the 75s and over, rates are statistically significantly higher than the county average in Fenland. Rates have increased across the county but more notably in 75s and over and in Fenland.

Accident and emergency attendances

- Numbers and rates of attendances have increased among residents of all districts, at both 24-hour consultant-led A&E and minor injuries units.

Social care services

- The proportion of people who use services who say that those services have made them feel **safe and secure** is statistically significantly worse in Cambridgeshire than the England average.
- Although not statistically assessed, Cambridgeshire fairs worse than the England average for:
 - People who use services who receive **direct payments**
 - Adults with a **learning disability** in paid **employment**
 - Adults in contact with secondary **mental health** services in paid **employment**
 - Adults with a **learning disability** who live **in their own home** or with their family
 - Adults in contact with secondary **mental health** services **living independently**, with or without support
 - **Older people** (aged 65 and over) who were still at home 91 days after discharge from hospital into **reablement/rehabilitation** services.

LIFE EXPECTANCY AND MORTALITY

Life expectancy

- **Life expectancy at birth** is statistically significantly lower than the England average in men in Fenland.
- The **gap in life expectancy** between the least and most deprived is noticeably high in Cambridge in both men and women.

All-cause mortality

- The rates of **all-age and under-75 all-cause mortality** have been statistically significantly higher than the Cambridgeshire average in Fenland since 2006-08.
- Rates declined in Fenland and Cambridgeshire as a whole up to 2010-12 but have since stabilised or increased again, particularly in under 75s in Fenland.
- The rate of all-age all-cause mortality is statistically significantly higher than the county average in the **most deprived 40% of wards**, and in under 75s, in the **most deprived 20%**.
- Rates have **declined** in the most **deprived 20% of wards**, but have **remained worse** than the county **average** and **increased** again in 2014-16.
- The **main causes of death** in Cambridgeshire residents are cancer (29%), cardiovascular disease (27%), respiratory disease (12%) and dementia and Alzheimer's (12%).

Overall health status and levels of disability

- At the 2011 Census, the age-standardised percentage of household residents reporting **good or very good health** was statistically significantly lower than the England average in Fenland.
- The age-standardised percentage reporting a **long-term activity-limiting illness** was statistically significantly higher than the England average in Fenland.

Cardiovascular mortality

- Rates of **all-age and under-75 mortality from cardiovascular disease** have been higher than the Cambridgeshire average in Fenland since 2006-08 but continue to fall.
- In Cambridge, rates have increased since 2011-13 becoming statistically significantly higher than the county average.
- The rate of all-age and under-75 mortality in the **most deprived 20%** of wards has been statistically significantly higher than the county average since 2006-08 but continues to fall.
- Rates have notably increased in recent years in the **middle quintile** of wards by deprivation becoming statistically significantly higher than the county average in 2014-16.

Cancer mortality

- Rates of **all-age mortality from cancer** have been higher than the Cambridgeshire average in Fenland since 2008-10 and have increased in contrast to a decline seen for the county as a whole.
- Rates of **under-75 mortality from cancer** have been higher than the county average in Fenland since 2009-11; they appear stable but in contrast to a decline seen for the county as a whole.
- Rates have generally been statistically significantly higher than the Cambridgeshire average in the **most deprived 20%** of wards since 2006-08 but have fallen in recent years.

Respiratory disease mortality

- Rates of **all-age and under-75 mortality from respiratory disease** have been higher than the Cambridgeshire average in Fenland since 2006-08. All-age rates were falling but have increased since 2010-12 in contrast to continued decline for the county as a whole.
- Rates of all-age mortality in Huntingdonshire were in decline up to 2009-11 but have increased to level statistically significantly worse than the county average.
- Rates have been statistically significantly higher than the Cambridgeshire average in the **most deprived 20%** of wards in the county since 2006-08. Rates have generally declined but the rate in the under 75s increased in 2014-16.

Dementia and Alzheimer's mortality

- The rate of **all-age mortality from dementia and Alzheimer's** has been statistically significantly higher than the Cambridgeshire average in Cambridge since 2011-13 and has been increasing, as it has across the county (some of this is thought to be related to increased awareness, diagnosis and recording).
- The rates of all-age and under 75 mortality due to dementia and Alzheimer's are statistically significantly higher than the Cambridgeshire average in the **most deprived 20%** of wards in the county.
- All-age rates are also statistically significantly higher than the county average in the **middle 20%** of wards in Cambridgeshire by deprivation.

1.1 Health Profile summary for Cambridgeshire and districts

Public Health England's **Health Profiles** give a **snapshot** of the overall health of each local authority in England. The profiles present a small set of some of the **most important health indicators** that show how each area compares to the national average in order to highlight potential local issues. In this section, we present a **summary** of these key indicators to provide a rapid overview for Cambridgeshire and its districts. Many of these indicators are described in more detail in the main report.

Table 1. Public Health England (PHE): annual health profile summary for Cambridgeshire and the districts - selected indicators, 2017

Category	Indicator*	Period	England value	Cams value	Cams recent trend	Cambridgeshire Districts				
						Cambridge	E Cambs	Fenland	Hunts	S Cambs
Our Communities	Index of Multiple Deprivation Score 2015 (score)	2015	21.8	13.4	-	13.8	12.1	25.4	11.8	8.1
	Children in low income families (%)	2014	20.1	12.9	↓5	15.9	10.1	21.3	11.9	8.5
	Statutory homelessness (per 1,000 households)	2015/16	0.9	0.5	-	2.3	Suppressed	Suppressed	0.1	0.2
	GCSEs Achieved (%)	2015/16	57.8	61.2	-	63.3	58.7	52.2	59.2	70.2
	Violent crime (violence offences per 1,000 popn)	2015/16	17.2	10.9	↑5	16.2	7.3	14.6	9.9	7.1
	Long term unemployment (per 1,000 working age popn)	2015/16	3.7	1.1	↓5	1.6	0.9	1.4	0.6	0.9
Children's & young peoples health	Breastfeeding initiation (%)	2014/15	74.3	DQ	-	DQ	DQ	68.8	80.9	DQ
	Obese children (year 6) (prevalence - %)	2014/15	19.8	14.9	→10	11.3	15.3	20.0	15.8	12.6
	Hospital stays for alcohol-specific conditions (under 18s) per 100,000	2013/14-15/16	37.4	38.5	-	42.5	27.9	37.6	54.2	25.4
	Under 18 conceptions per 1,000 females 15-17	2015	20.8	16.5	↓6	15.9	12.7	26	14.5	15.2
Adult's health & lifestyle	Smoking prevalence in adults (%)	2016	15.5	15.2	-	15.1	15.3	21.6	14.0	12.8
	Physically active adults (%)	2015	57.0	58.6	-	69.8	53.8	47.9	57.9	59.5
	Excess weight in adults (%)	2013-15	64.8	63.2	-	46.7	68.1	72.9	67.6	63.6
Disease & poor health	Cancer diagnosed at an early stage (%)	2015	52.4	56.8	-	55.8	56.2	55.9	58.4	56.6
	Emergency hospital stays for self-harm (per 100,000 population)	2015/16	196.5	264.9	-	351.5	253.0	310.7	226.8	197.8
	Hospital stays for alcohol-related harm (per 100,000 population)	2015/16	647	638	-	818	589	731	590	558
	Recorded diabetes (%)	2014/15	6.4	5.5	↑5	3.3	6.5	7.8	6.1	4.8
	Incidence of TB (per 100,000)	2013/15	12.0	6.0	-	9.8	2.7	7.8	5.0	4.6
	New sexually transmitted infections (per 100,000 popn 15-64)	2016	795	511	↓5	761	342	475	495	400
	Hip fractures in people aged 65 and over (per 100,000 population)	2015/16	589	583	-	660	497	667	562	542
	Estimated dementia diagnosis rate (aged 65+) (%)	2017	67.9	62.7	-	67.4	58.0	60.1	69.6	54.8
Life expectancy, causes of death & selected inequalities indicators	Life expectancy at birth (males), years	2013-15	79.5	80.9	-	80.3	81.6	78.6	81.0	82.1
	Life expectancy at birth (females), years	2013-15	83.1	84.4	-	84.1	84.8	82.6	84.7	85.2
	Infant mortality - deaths under 1 year per 1,000 live births	2013-15	3.9	3.1	-	4.0	1.0	4.3	2.5	3.4
	Suicide rate (per 100,000)	2013-15	10.1	9.1	-	7.6	Suppressed	12.7	9.2	9.7
	Smoking related deaths (per 100,000 aged 35 +)	2013-15	283.5	227.8	-	-	-	-	-	-
	Under 75 cardiovascular disease mortality rate (per 100,000 popn)	2013-15	74.6	63.5	-	75.8	59.8	83.5	60.5	50.2
	Under 75 cancer mortality rate (per 100,000 popn)	2013-15	138.8	120.3	-	119.9	115.6	145.4	114.5	113.3
	Excess winter deaths (index)	8/2012 - 7/2015	19.6	16.7	-	24.6	14.5	19.7	12.5	14.4
	Premature (under 75) mortality from all causes (male) - per 100,000	2013-15	408	339	-	361	306	444	328	299
	Premature (under 75) mortality from all causes (female) - per 100,000	2013-15	266	225	-	237	227	286	218	187
	Dependency ratio (%)	2015	60.7	59.6	-	39.4	67.5	69.0	63.1	65.5

* Full indicator descriptions and definitions are available at <https://fingertips.phe.org.uk/profile/health-profiles>

Statistically significantly better than the England average
 Statistically similar to the England average
 Statistically significantly worse than the England average

Lower than the England value
 Higher than the England value

Suppressed: removed due to small numbers
 DQ: data quality issue
 -: not available

↑n Getting worse (number of years on which trend based)
→n No significant change (number of years on which trend based)
↓n Getting better (number of years on which trend based)

Source: Public Health England Health Profiles for 2017

Public Health England Health Profiles at <https://fingertips.phe.org.uk/profile/health-profiles>

Key points:

- Overall **Cambridgeshire** is a healthy place to live, with many health and wellbeing determinants and outcomes more favourable when compared with England averages.
- For **Cambridgeshire** as a whole particular areas of concern, based on the local health profile, potentially include: violent crime where the rate of offences is increasing; mental health and self-harm; alcohol abuse; adult physical activity; suicide and excess winter deaths.
- The district area of Cambridgeshire with most adverse issues remains **Fenland**, where many indicators are more challenging than the county averages and sometimes when compared nationally. Areas of particular concern in Fenland are: general inequalities in health determinants and some outcomes across the life-course; child poverty; educational attainment; breastfeeding uptake; smoking; physical activity and excess weight in adults; mental health and self-harm; alcohol abuse; recorded diabetes; male life expectancy at birth. Many other important indicators are also closer to national, rather than local county, averages and so remain areas of concern (see those measures assessed as 'statistically similar' to England averages in Table 1 above).
- **Cambridge** has many health and wellbeing indicators that are better than national averages. However, there is an increasing trend of some indicators moving towards national, rather than overall local, averages and this is of some concern. Issues to consider further are alcohol abuse; smoking; mental health and self-harm; TB incidence; sexual health; falls and hip fractures in older people; dementia diagnosis rate; suicide; excess winter deaths.
- For the remaining districts of **East Cambridgeshire**, **Huntingdonshire** and **South Cambridgeshire**, most indicators are relatively favourable when assessed against national comparators and, broadly, it is these districts that drive the Cambridgeshire position as a healthy place compared with England collectively. Particular areas of concern in **East Cambridgeshire** are: adult excess weight; mental health and self-harm; dementia diagnosis rate. In **Huntingdonshire**: alcohol abuse; adult excess weight. In **South Cambridgeshire**: dementia diagnosis rate. In these relatively healthy areas it is important to also have regard for those indicators that are similar to national averages or are also of concern more broadly in Cambridgeshire: in **East Cambridgeshire** educational attainment; smoking; adult physical activity; recorded diabetes; in **Huntingdonshire** educational attainment; smoking; adult physical activity; falls and hip fractures in older people; suicide; excess winter deaths; in **South Cambridgeshire** alcohol abuse; smoking; adult physical activity and excess weight; mental health and self-harm; falls and hip fractures in older people; suicide; excess winter deaths.
- It should be noted that some measures may still be important, even if they are not shown to be locally or nationally adverse – for example if significant numbers of people are involved, they are good overall measures of population health status or trends are adverse.
- Similarly, some issues that are masked at county and district level may be important at a **smaller area level** and smaller area analysis may highlight particular pockets of deprivation where there are relatively worse health determinants and outcomes. Small area data can be found on **Cambridgeshire Insight** at <http://cambridgeshireinsight.org.uk/> and within **Local Health** at <http://www.localhealth.org.uk/>.

The list below **summarises areas of potential priority**:

- Fenland - broadly improving health determinants and outcomes in this district and reducing health inequalities.
- Cambridge, reducing health inequalities in this district and improving emerging adverse trends in some health determinants and outcomes.
- Educational attainment in East Cambridgeshire, Fenland and Huntingdonshire.
- Alcohol abuse.
- Mental health including self-harm and suicide.
- Smoking.
- Physical activity and weight management across the life-course, including diabetes in East Cambridgeshire and Fenland.

- Falls and hip fractures in older people.
- Dementia.
- Excess winter deaths.

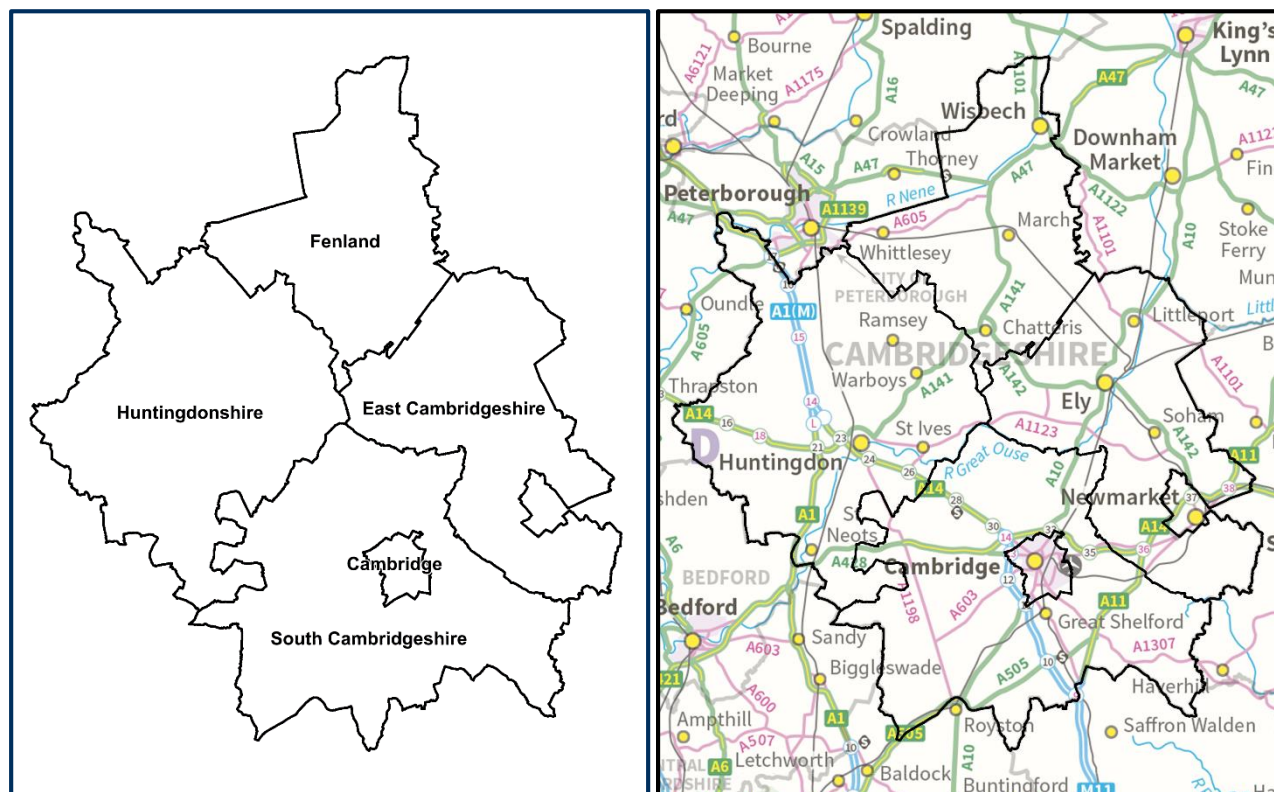
Notes – national Health Profiles:

- The following two indicators are in the local health profiles on Public Health England’s website but are not included in the summary above for the reasons below.
- **Infant mortality.** This indicator is assessed as the same as the national average In Cambridgeshire as a whole and in all districts other than East Cambridgeshire. It is important to note that the numbers of deaths are relatively few and this means that the test used to assess statistical importance yields wide levels of uncertainty and hence similarity to the average. No district has a rate that is statistically higher than the county average either. The rate is highest in Fenland, but does not differ statistically when compared with the national and local averages.
- **Killed and seriously injured on roads.** This indicator benchmarks poorly locally compared with the national measure. However, it is a poor indicator that uses area based road casualty data as its numerator and resident based population data as its denominator. This gives a clear mismatch between the component parts of the indicator and does not deal well with area based traffic flow patterns. Local measures should be taken from the County Council’s own road safety team at <https://www.cambridgeshire.gov.uk/residents/travel-roads-and-parking/roads-and-pathways/road-safety/>.

2. GEOGRAPHY AND DEMOGRAPHY

2.1 Cambridgeshire and the districts – geography and main administrative boundaries

Figure 1. Local authority districts and major market towns, Cambridgeshire



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2.2 Demography, housing growth and land use

This section includes demographic estimates, population and housing growth information and data for population density.

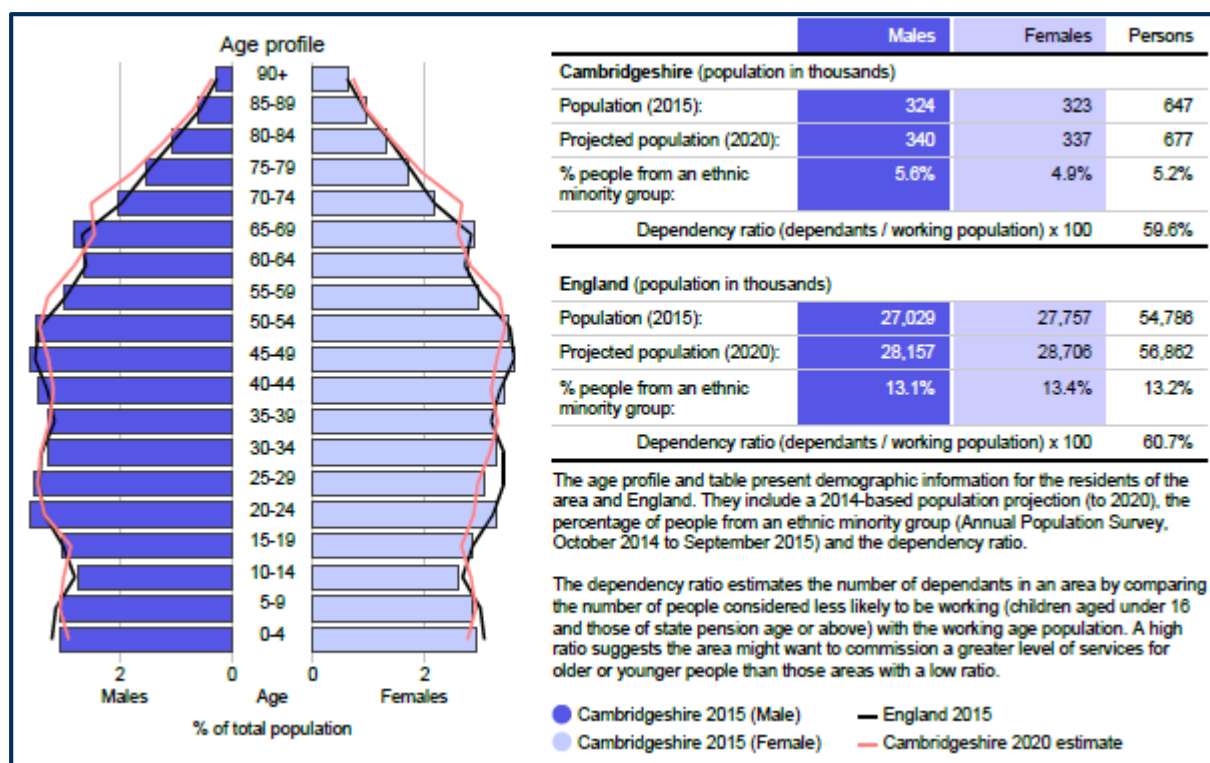
It is important to note that both the Office for National Statistics (ONS) and the Council's own demographers in the Research Group provide population estimates, projections and forecasts. ONS data are trend driven and based on natural change (births and deaths) and population migration and the local data are based on these components and also local planning policy (housing building plans).

Further local information can be found at:

<http://cambridgeshireinsight.org.uk/populationanddemographics>

Population estimates

Figure 2. Population summary (ONS) – mid-2015 and projected population 2020 for Cambridgeshire compared with England, ethnic minority proportion and dependency ratio



Source: Public Health England Health Profile for Cambridgeshire 2017 - <http://fingertipsreports.phe.org.uk/health-profiles/2017/e10000003.pdf>

Key points:

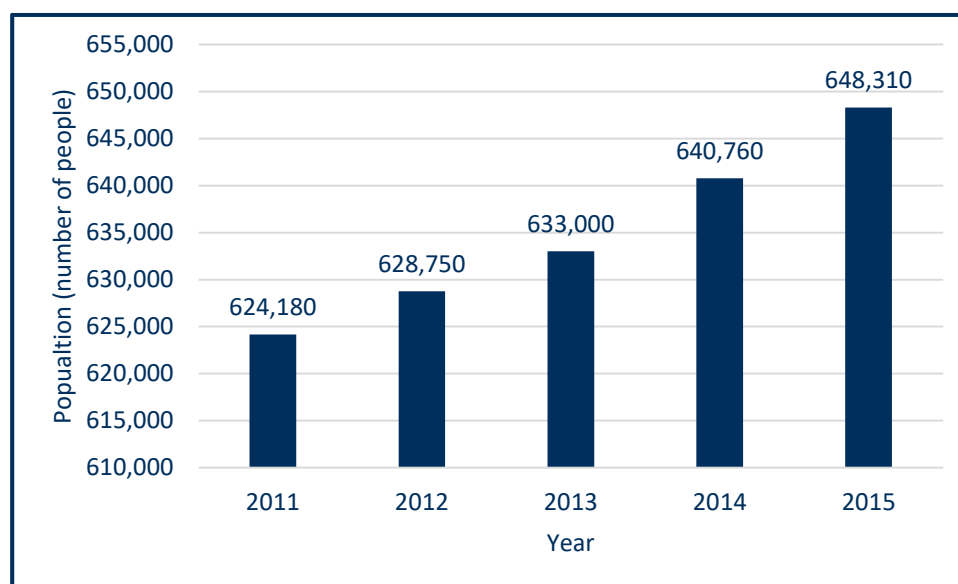
- Overall Cambridgeshire's population profile by gender and age is similar to England's.
- The proportion of young children in Cambridgeshire is slightly lower than in England, there are proportionally more young adults aged 20-24 years, more middle-aged adults and younger older people and similar percentages of the very elderly.
- Population growth to 2020, based on natural change and migration, suggests that population increases will be concentrated in children and adults aged 55 and older, with fewer younger adults and adults aged between 40 and 50 years.
- Cambridgeshire has a lower proportion of people from ethnic minorities than England.
- Cambridgeshire's dependency ratio is just lower than in England, suggesting that there are slightly more working age people in Cambridgeshire relative to older people compared with England as a whole.

Table 2. CCC Research Group Mid-2011 to mid-2015 population estimates - Cambridgeshire and the districts

Area	Year					Change 2011 - 2015	
	2011	2012	2013	2014	2015	+/-	%
Cambridge	124,350	125,480	127,050	130,250	132,130	+7,780	6.3%
East Cambridgeshire	84,100	84,710	85,280	85,740	86,300	+2,200	2.6%
Fenland	95,870	96,420	97,240	97,880	99,170	+3,300	3.4%
Huntingdonshire	170,470	171,950	172,880	174,540	176,050	+5,580	3.3%
South Cambridgeshire	149,390	150,190	150,550	152,350	154,660	+5,270	3.5%
Cambridgeshire	624,180	628,750	633,000	640,760	648,310	+24,130	3.9%

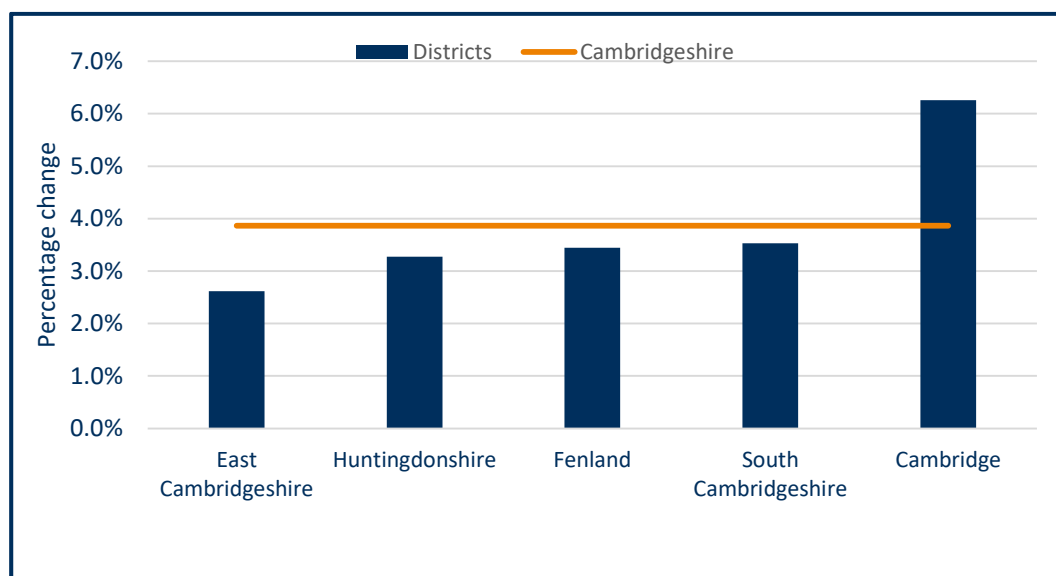
Source: Cambridgeshire County Council Research Group mid-2015 based population estimates

Figure 3. Cambridgeshire - retrospective population growth in absolute numbers mid-2011 to mid-2015



Source: Cambridgeshire County Council Research Group mid-2015 based population estimates

Figure 4. Cambridgeshire and the districts - retrospective percentage population change, mid-2011 to mid-2015



Source: Cambridgeshire County Council Research Group mid-2015 based population estimates

Key points:

- Cambridgeshire’s population increased by 3.9% (24,130) people between 2011 and 2015.
- There were population increases in all districts in the period 2011 to 2015.
- Of the districts, Cambridge has the largest absolute and proportional increases.
- Fenland, Huntingdonshire and South Cambridgeshire have experienced proportionately similar levels of growth, at just below the Cambridgeshire average.
- East Cambridgeshire had the lowest levels of growth, both proportionally and in absolute numbers.

Table 3. ONS and County Council Research Group population data – comparison of ONS mid-2016 based population estimates with the Research Group’s population forecast for 2016

Area	ONS mid 2016 (estimate)	CCCRG 2016 (forecast)	Diff (+/-) (RG-ONS)
Cambridge	131,799	134,080	+2,281
East Cambridgeshire	87,825	86,580	-1,245
Fenland	100,182	99,200	-982
Huntingdonshire	175,666	176,590	+924
South Cambridgeshire	156,468	155,660	-808
Cambridgeshire	651,940	652,110	+170

Source: ONS mid-2016 population estimates and Cambridgeshire County Council Research Group mid-2015 based population forecast for 2016

Key points:

- Overall, for Cambridgeshire, the differences between locally (CCCRG) and nationally (ONS) produced population data are small.
- However, the impacts of residential building are clear with the local data for Cambridge indicating a higher population than the national ONS estimate.

Population forecasts: background to short, medium and long term forecasts to 2036

IMPORTANT NOTE REGARDING USE OF POPULATION FORECASTS AND PROJECTIONS

In using the following **locally-produced** demographic forecasts of future population growth from **CCC's Research Group** it is important to understand that they are led by **planned levels of house-building**. In contrast, **nationally produced ONS projections** of future population growth use **trends in previous levels of house-building**. Both CCC Research Group forecasts and ONS projections take into account births, deaths and migration.

Therefore, the most **material differences** between the CCRG and ONS predictions of population growth tend to be in areas where house-building has occurred and has been above or below previous trends, in areas where there has been no or little previous large-scale house-building or where planned housing is at levels radically above recent trends. The **differences** are **more marked** for the **child and working age** population groups than in the **older age** groups.

Future population change is strongly linked to local **planning policy**, especially in the **shorter term**. Therefore, this section is largely based on the **CCC Research Group's planning policy led population forecasts to 2026** rather than **trend-based** population projections from the **Office for National Statistics (ONS)**. This is because there are **significant large local developments**, such as **Northstowe**, that are likely to impact on **service planning and commissioning** in the relatively **shorter term** timeframe of the **JSNA**.

However, as **planning policy** is subject to potentially **changing economic market conditions** and many organisations in Cambridgeshire receive national **funding based on the ONS projections**, some **comparison** of Research Group forecasts and ONS projections is included in the detailed sections below. The local forecasts, especially over longer period, tend to indicate **higher levels** of population than the ONS projections.

As stated, the **Research Group's** mid-2015 based **planning policy led** forecasts rely on house building targets being achieved, as well as patterns of natural change and migration and are therefore subject to change. They tend to be **less reliable the further ahead they look**. More information on the **data modelling methodology** for the Research Group's population forecasts can be found specifically at: <http://www.cambridgeshireinsight.org.uk/file/3435/download>.

ONS projections are trend-based, meaning they assume that recent trends continue in the future. The ONS forecasts make no specific assumptions about the levels of house-building, however in general terms they implicitly assume that **building continues on a similar level to recent years**. They therefore do not take account of new housing developments in areas with low growth previously; similarly, they may over-estimate future growth in areas that had high levels of house-building in the past.

The **ONS** population projections are **2014-based**, which means that they project forward from ONS's population estimates for 2014, whereas **CCC Research Group's** population forecasts are **2015-based**, using 2015-based population estimates as the starting point, so **CCC's forecasts are more up-to-date**.

If required, further details can be accessed as follows:

ONS projections:

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections>.

Research Group forecasts at <https://cambridgeshireinsight.org.uk/populationanddemographics>.

Population forecasts: CCC Research Group and ONS long term forecasts to 2036
Table 4. Cambridgeshire and districts – CCC Research Group forecast absolute and proportional long term (20 year) population change, 2016 to 2036 (all ages)

Area	Year					Abs change	% change
	2016	2021	2026	2031	2036	2016-2036	2016-2036
Cambridge	134,080	148,500	154,510	156,240	157,810	+23,730	17.7%
East Cambridgeshire	86,580	92,630	103,580	108,050	108,610	+22,030	25.4%
Fenland	99,200	107,630	113,260	116,180	118,590	+19,390	19.5%
Huntingdonshire	176,590	189,440	203,100	212,620	217,710	+41,120	23.3%
South Cambridgeshire	155,660	169,800	184,500	192,840	200,480	+44,820	28.8%
Cambridgeshire	652,110	708,000	758,950	785,930	803,200	+151,090	23.2%

Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Table 5. Cambridgeshire and districts – Office for National Statistics (ONS) projected absolute and proportional long term (20 year) population change, 2016 to 2036 (all ages)

Area	Year					Abs change	% change
	2016	2021	2026	2031	2036	2016-2036	2016-2036
Cambridge	131,200	134,500	138,300	142,800	145,900	+14,700	11.2%
East Cambridgeshire	88,800	93,800	98,100	101,500	104,600	+15,800	17.8%
Fenland	99,300	102,800	106,400	109,600	112,700	+13,400	13.5%
Huntingdonshire	176,600	184,300	191,700	198,100	203,800	+27,200	15.4%
South Cambridgeshire	157,100	166,400	174,400	180,900	186,500	+29,400	18.7%
Cambridgeshire	653,000	681,900	708,800	732,900	753,500	+100,500	15.4%

Source: ONS 2014-based Subnational population projections

Table 6. Comparison of CCC Research Group mid-2015 based population forecasts and ONS 2014 based population projections to 2036 (all ages)

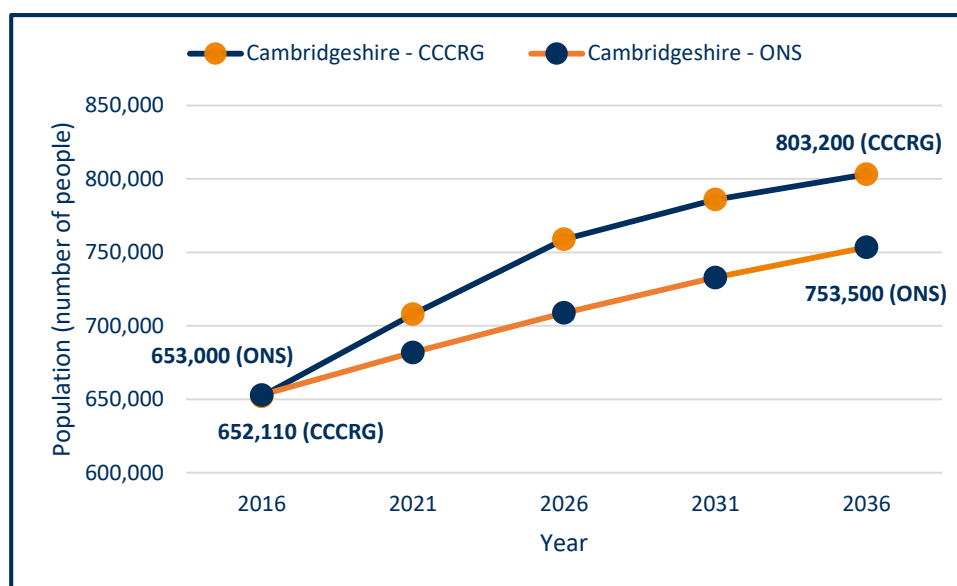
Area	Year - CCCRG minus ONS					Absolute difference (RG-ONS)	% point difference (RG-ONS)
	2016	2021	2026	2031	2036	2016-2036	2016-2036
Cambridge	+2,880	+14,000	+16,210	+13,440	+11,910	+9,030	6.5%
East Cambridgeshire	-2,220	-1,170	+5,480	+6,550	+4,010	+6,230	7.7%
Fenland	-100	+4,830	+6,860	+6,580	+5,890	+5,990	6.1%
Huntingdonshire	-10	+5,140	+11,400	+14,520	+13,910	+13,920	7.9%
South Cambridgeshire	-1,440	+3,400	+10,100	+11,940	+13,980	+15,420	10.1%
Cambridgeshire	-890	+26,100	+50,150	+53,030	+49,700	+50,590	7.8%

Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Cambridgeshire's population - Key points:

- CCC RG house-building policy led forecasts indicate that Cambridgeshire's population is expected to increase by 151,000 people between 2016 and 2036 (a proportional change of 23%).
- ONS projections indicate that Cambridgeshire's population is expected to increase by 101,000 people between 2016 and 2036 (a proportional change of 15%).
- Research Group forecasts, though starting at a similar levels to ONS in 2016, predict higher levels of population growth than ONS projections, with the differences overall stabilising by 2026.
- In Cambridgeshire the overall difference between the predicted population growth is 51,000 people, with a proportional difference of 7.8 percentage points.

Figure 5. Cambridgeshire - absolute long term (20 year) population change, 2016 to 2036 (all ages)



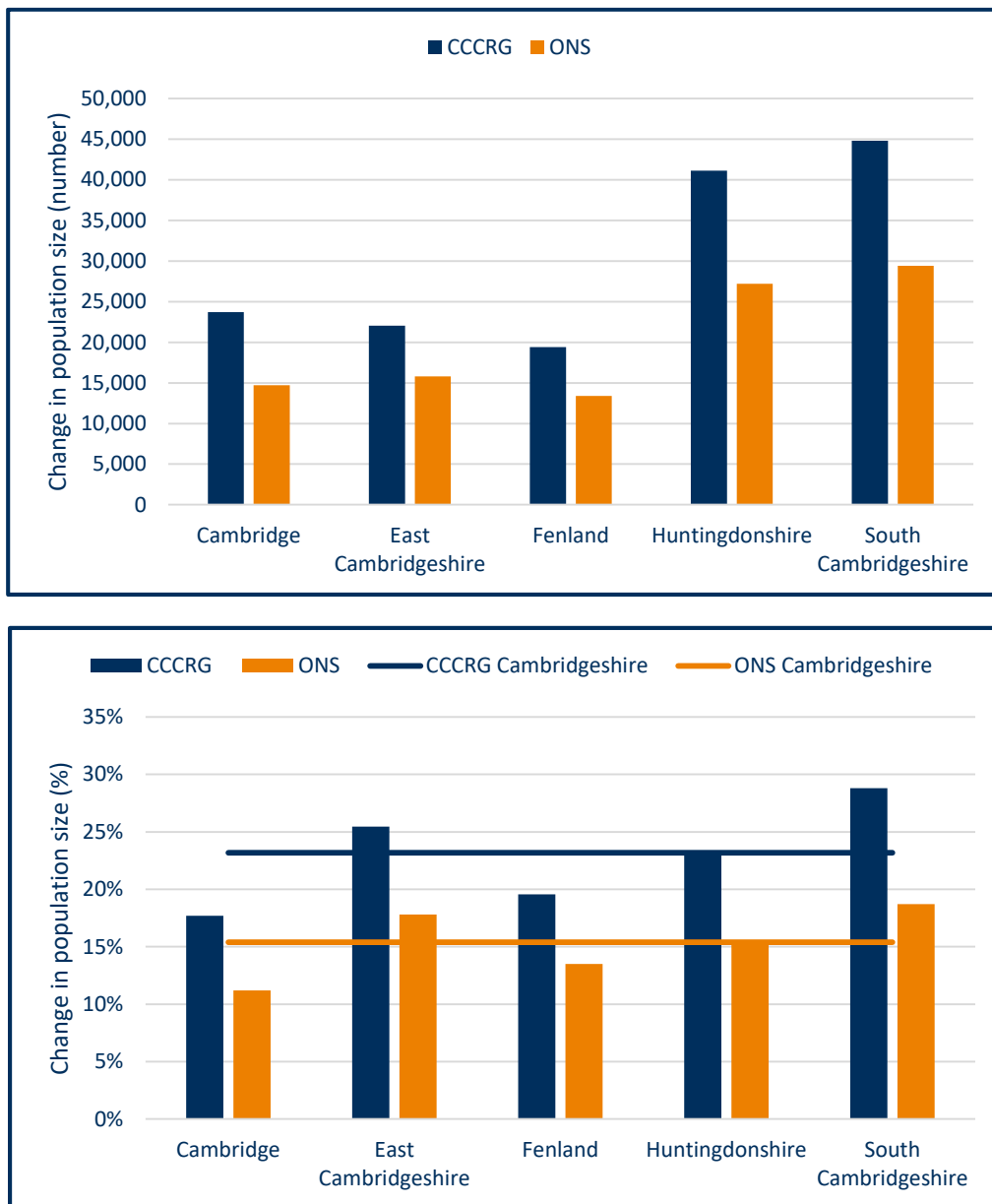
Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Cambridgeshire and District populations - Key Points

- CCC RG predicts greater levels of population change to 2036 than ONS, whether absolutely or proportionally, for Cambridgeshire and all of the districts.
- CCC RG predicts that South Cambridgeshire and Huntingdonshire are expected to have the largest absolute increases in population numbers, with over 40,000 additional people in each area. Absolute growth in Fenland, East Cambridgeshire and Cambridge is forecast at a lower level, with around 20,000 extra people in each area.
- To 2036, both CCC RG and ONS predict the greatest absolute changes in Huntingdonshire and South Cambridgeshire and the lowest in Fenland.
- However, ONS predict more absolute growth to 2036 in East Cambridgeshire than CCC RG and less in Cambridge City.
- CCC RG predicts that proportional increases are expected to be largest in South Cambridgeshire and East Cambridgeshire, with the lowest level of proportional long term population change expected in Cambridge.
- Proportionally, both CCC RG and ONS predict the same rank order for levels of change for the districts to 2036, with South Cambridgeshire and East Cambridgeshire having the largest proportional increases and Cambridge the lowest.

[Figure - see following page]

Figure 6. Comparison of absolute and proportional population changes to 2036 for Cambridgeshire’s districts - CCC Research Group mid-2015 based population forecasts and ONS 2014 based population projections to 2036 (all ages)



Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Population forecasts: CCC Research Group and ONS short and medium term forecasts to 2026
Table 7. Comparison of ONS 2014 based population projections and CCC Research Group mid-2015 based population forecasts to 2026, all ages

Area	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	ONS	131,200	134,500	138,300	+3,300	+3,800	+7,100	2.5%	2.8%	5.4%
East Cambridgeshire	ONS	88,800	93,800	98,100	+5,000	+4,300	+9,300	5.6%	4.6%	10.5%
Fenland	ONS	99,300	102,800	106,400	+3,500	+3,600	+7,100	3.5%	3.5%	7.2%
Huntingdonshire	ONS	176,600	184,300	191,700	+7,700	+7,400	+15,100	4.4%	4.0%	8.6%
South Cambridgeshire	ONS	157,100	166,400	174,400	+9,300	+8,000	+17,300	5.9%	4.8%	11.0%
Cambridgeshire	ONS	653,000	681,900	708,800	+28,900	+26,900	+55,800	4.4%	3.9%	8.5%

Area	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	CCCRG	134,080	148,500	154,510	+14,420	+6,010	+20,430	10.8%	4.0%	15.2%
East Cambridgeshire	CCCRG	86,580	92,630	103,580	+6,050	+10,950	+17,000	7.0%	11.8%	19.6%
Fenland	CCCRG	99,200	107,630	113,260	+8,430	+5,630	+14,060	8.5%	5.2%	14.2%
Huntingdonshire	CCCRG	176,590	189,440	203,100	+12,850	+13,660	+26,510	7.3%	7.2%	15.0%
South Cambridgeshire	CCCRG	155,660	169,800	184,500	+14,140	+14,700	+28,840	9.1%	8.7%	18.5%
Cambridgeshire	CCCRG	652,110	708,000	758,950	+55,890	+50,950	+106,840	8.6%	7.2%	16.4%

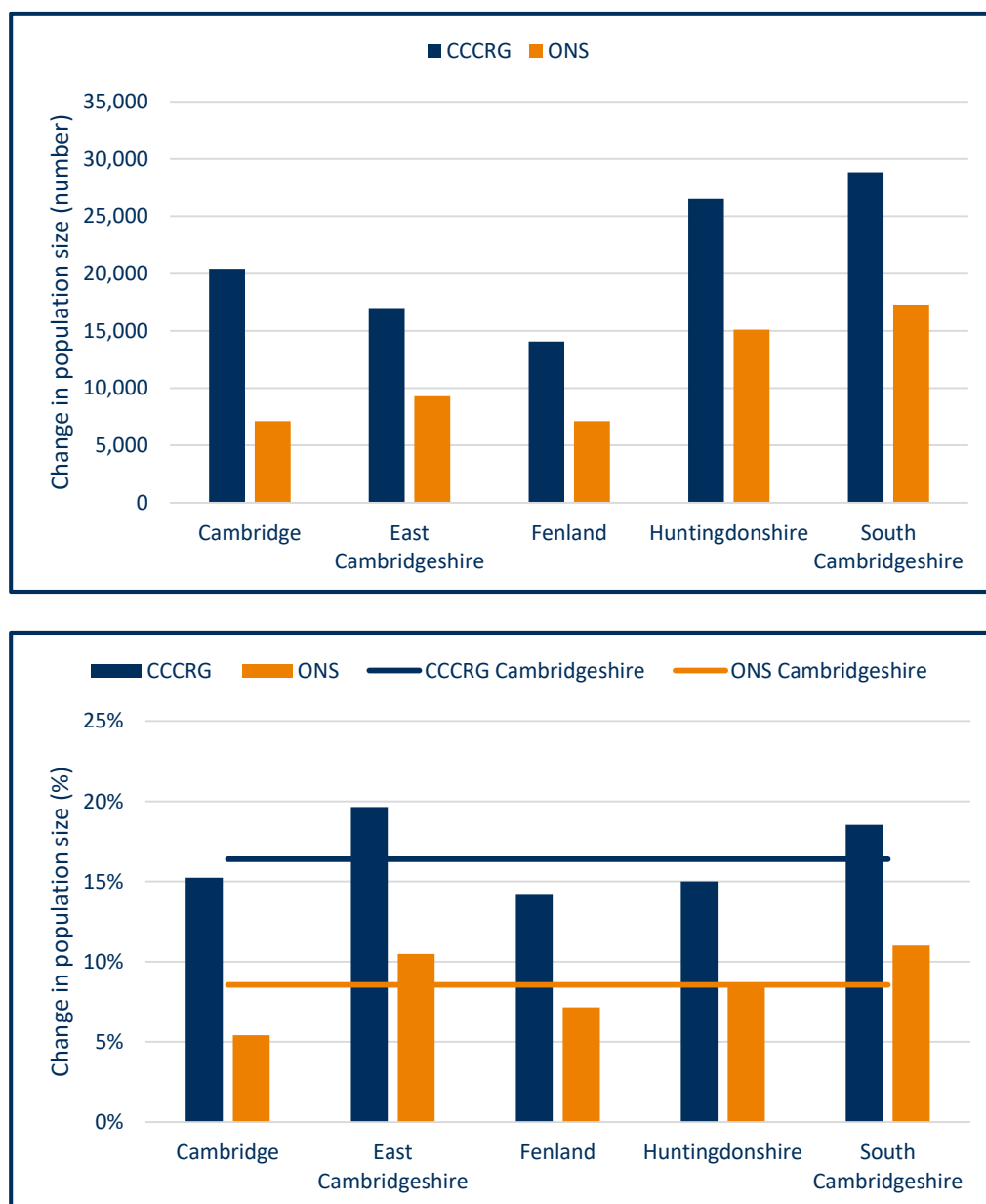
Area	Source	Year - CCCRG minus ONS			Absolute change: CCCRG - ONS			% change: percentage point diff RG - ONS		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	RG-ONS	2,880	14,000	16,210	+11,120	+2,210	+13,330	8.2%	1.2%	9.8%
East Cambridgeshire	RG-ONS	-2,220	-1,170	5,480	+1,050	+6,650	+7,700	1.4%	7.2%	9.2%
Fenland	RG-ONS	-100	4,830	6,860	+4,930	+2,030	+6,960	5.0%	1.7%	7.0%
Huntingdonshire	RG-ONS	-10	5,140	11,400	+5,150	+6,260	+11,410	2.9%	3.2%	6.5%
South Cambridgeshire	RG-ONS	-1,440	3,400	10,100	+4,840	+6,700	+11,540	3.2%	3.8%	7.5%
Cambridgeshire	RG-ONS	-890	26,100	50,150	+26,990	+24,050	+51,040	4.1%	3.3%	7.8%

[Figure - see following page]

Key points:

- The CCC RG forecasts are generally higher than the ONS projections, with the primary reason being the impact of future housing policy in the local forecasts.
- Overall there is not a great difference in the 2016 ONS projection and the 2016 CCC RG forecast, with the impact of more recent housing development clear in the local forecast for Cambridge City.
- Differences between the ONS and CCC RG tend to increase over time.
- To 2026 the CCC RG forecasts are higher in all areas, with the CCC RG forecast predicting 51,000 more people than the ONS projections across Cambridgeshire. CCCRG predict overall population growth of 16.4% between 2016 and 2026, whereas ONS predict 8.5% population growth.
- To 2026, both CCC RG and ONS predict the greatest absolute changes in population in Huntingdonshire and South Cambridgeshire.
- Proportionally, both CCC RG and ONS predict the highest levels of growth to 2026 in East Cambridgeshire and South Cambridgeshire.
- To 2026, the largest differences between CCCRG and ONS in predicted absolute change are in Cambridge, South Cambridgeshire and Huntingdonshire.
- To 2026, the largest differences between CCCRG and ONS in predicted proportional change are in Cambridge and East Cambridgeshire.

Figure 7. Comparison of absolute and proportional population changes to 2026 - CCC Research Group mid-2015 based population forecasts and ONS 2014 based population projections to 2026 (all ages)



Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Table 8. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change, 2016 to 2026 (all ages)

Area	Year			Absolute change			% change		
	2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	134,080	148,500	154,510	+14,420	+6,010	+20,430	10.8%	4.0%	15.2%
East Cambridgeshire	86,580	92,630	103,580	+6,050	+10,950	+17,000	7.0%	11.8%	19.6%
Fenland	99,200	107,630	113,260	+8,430	+5,630	+14,060	8.5%	5.2%	14.2%
Huntingdonshire	176,590	189,440	203,100	+12,850	+13,660	+26,510	7.3%	7.2%	15.0%
South Cambridgeshire	155,660	169,800	184,500	+14,140	+14,700	+28,840	9.1%	8.7%	18.5%
Cambridgeshire	652,110	708,000	758,950	+55,890	+50,950	+106,840	8.6%	7.2%	16.4%

Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figure - see following page]

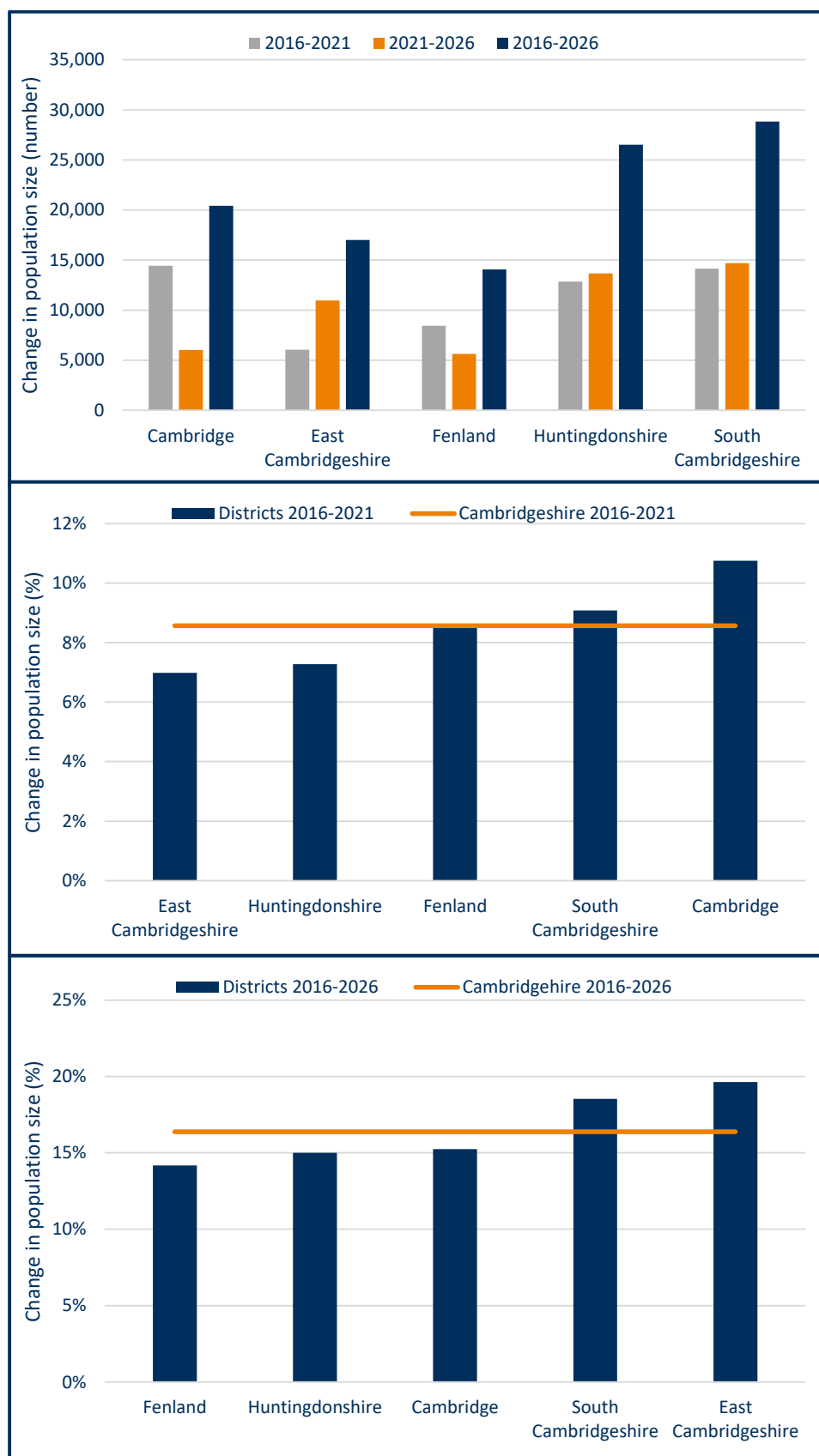
Key points (Cambridgeshire, CCC RG forecasts only):

- Using CCC RG five year forecasts only (with no ONS comparison), Cambridgeshire's population is forecast to grow by 8.6% to 2021, with an increase of almost 56,000 people. From CCC RG forecasts, a further 51,000 people are expected to be living in the County by 2026.

Key points (Districts, CCC RG forecasts only):

- In the shorter term, to 2021, Cambridge is forecast to have the highest absolute and proportional population increases, followed by South Cambridgeshire. Fenland is expected to experience a moderate proportional increase, with Huntingdonshire and East Cambridgeshire forecast to have the lowest levels of proportional change. The absolute increase are forecast to be relatively high in Huntingdonshire, however.
- Between 2021 and 2026 the rate of growth is then expected to fall in Cambridge and Fenland, compared with the preceding five years, but is forecast to continue in East Cambridgeshire, Huntingdonshire and South Cambridgeshire. East Cambridgeshire, in particular, is expected to experience an increasing rate of growth in both absolute and proportional terms.

Figure 8. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change, 2016 to 2026 (all ages)



Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Population forecasts: CCC Research Group and ONS by age group - short and medium term forecasts to 2026

Table 9. Comparison of CCC Research Group mid-2015 based population forecasts and ONS 2014 based population projections to 2026 **by age group** for Cambridgeshire to 2026

Under 16 years	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridgeshire	CCCRG	119,420	130,550	139,030	+11,130	+8,480	+19,610	9.3%	6.5%	16.4%
Cambridgeshire	ONS	119,589	126,753	129,073	+7,164	+2,319	+9,484	6.0%	1.8%	7.9%
Difference (RG - ONS)	-	-169	+3,797	+9,957	+3,966	+6,161	+10,126	3.3%	4.7%	8.5%

16 to 64 - ONS v RG

16 to 64 years	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridgeshire	CCCRG	413,620	442,440	465,410	+28,820	+22,970	+51,790	7.0%	5.2%	12.5%
Cambridgeshire	ONS	414,027	421,703	429,894	+7,676	+8,191	+15,867	1.9%	1.9%	3.8%
Difference (RG - ONS)	-	-407	+20,737	+35,516	+21,144	+14,779	+35,923	5.1%	3.2%	8.7%

65+ - ONS v RG

65 years and over	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridgeshire	CCCRG	119,070	135,010	154,510	+15,940	+19,500	+35,440	13.4%	14.4%	29.8%
Cambridgeshire	ONS	118,926	133,407	149,841	+14,481	+16,434	+30,915	12.2%	12.3%	26.0%
Difference (RG - ONS)	-	144	+1,603	+4,669	+1,459	+3,066	+4,525	1.2%	2.1%	3.8%

75+ - ONS v RG

75 years and over	Source	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridgeshire	CCCRG	53,060	64,600	80,970	+11,540	+16,370	+27,910	21.7%	25.3%	52.6%
Cambridgeshire	ONS	52,759	63,869	78,810	+11,110	+14,942	+26,052	21.1%	23.4%	49.4%
Difference (RG - ONS)	-	301	+731	+2,160	+430	+1,428	+1,858	0.7%	1.9%	3.2%

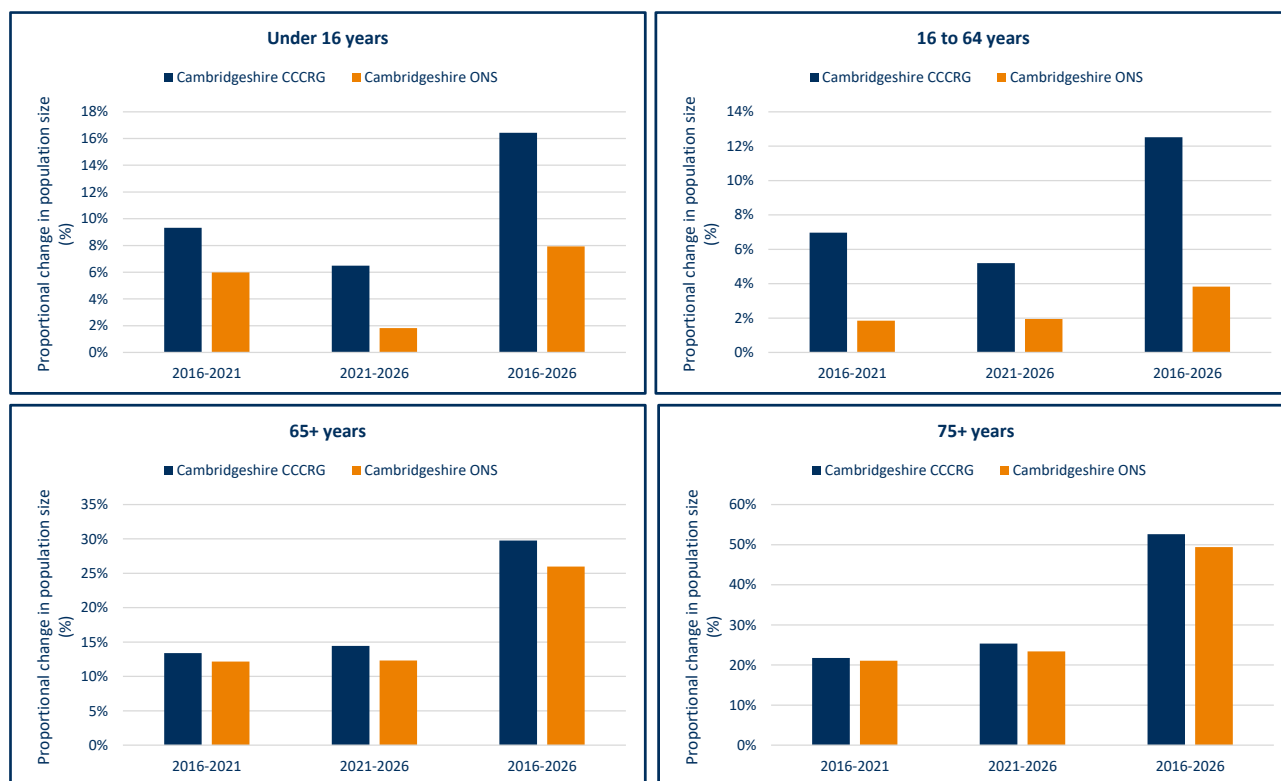
Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figures - see following page]

Key points:

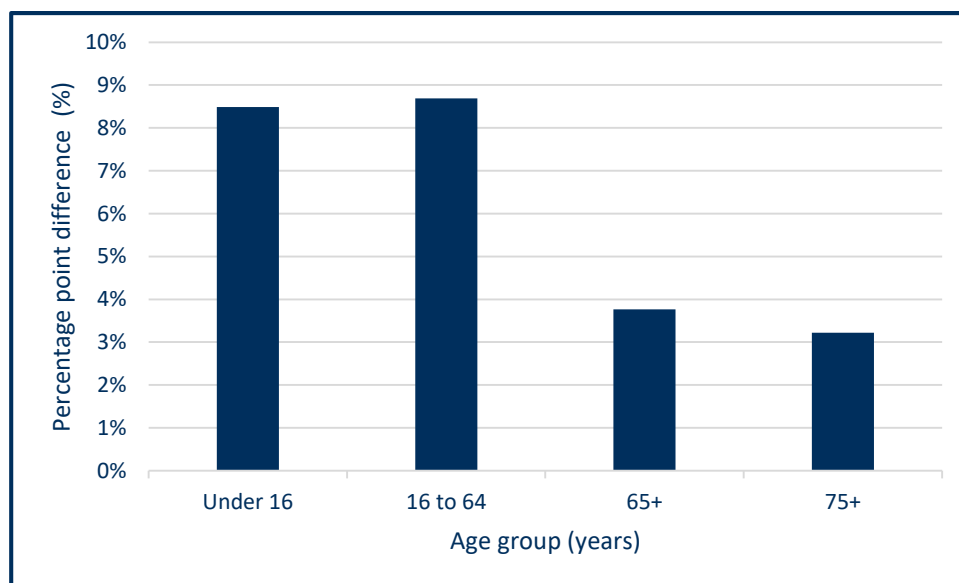
- Cambridgeshire population data at 2016 are similar whether based on CCC RG or ONS models.
- Both CCC RG and ONS data suggest future population increases in Cambridgeshire.
- CCC RG forecast higher levels of change than ONS.
- Differences between the CCC RG and ONS sources tend to increase over time.
- Differences in predicted population growth between CCCRG and ONS are much greater for children and working age groups than for older people, reflecting the significant influence of future house-building based and local planning policy in the CCC RG forecasts.

Figure 9. Comparison of proportional change in CCC Research Group mid-2015 based population forecasts and ONS 2014 based population projections to 2026 by age group for Cambridgeshire to 2026



Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Figure 10. Percentage point difference between the proportional change in CCC RG population forecasts and ONS population projections, 2016 to 2026 by age group in Cambridgeshire



Source: ONS 2014-based Subnational population projections and Cambridgeshire County Council Research Group mid-2015 based population forecasts

Age under 16 years

This section uses **CCC Research Group forecasts only**. To put these forecasts in a wider context it is advised to also consider the ONS forecasts by age group on pages 32-33 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Table 10. Cambridgeshire and districts - **CCC Research Group** absolute and proportional short term (5 and 10 year) population change in younger people, 2016 to 2026 (people aged under 16 years)

Area	Year			Absolute change			% change		
	2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	20,510	23,510	24,550	+3,000	+1,040	+4,040	14.6%	4.4%	19.7%
East Cambridgeshire	17,050	18,340	20,120	+1,290	+1,780	+3,070	7.6%	9.7%	18.0%
Fenland	17,800	19,410	20,210	+1,610	+800	+2,410	9.0%	4.1%	13.5%
Huntingdonshire	33,030	35,490	37,950	+2,460	+2,460	+4,920	7.4%	6.9%	14.9%
South Cambridgeshire	31,030	33,800	36,200	+2,770	+2,400	+5,170	8.9%	7.1%	16.7%
Cambridgeshire	119,420	130,550	139,030	+11,130	+8,480	+19,610	9.3%	6.5%	16.4%

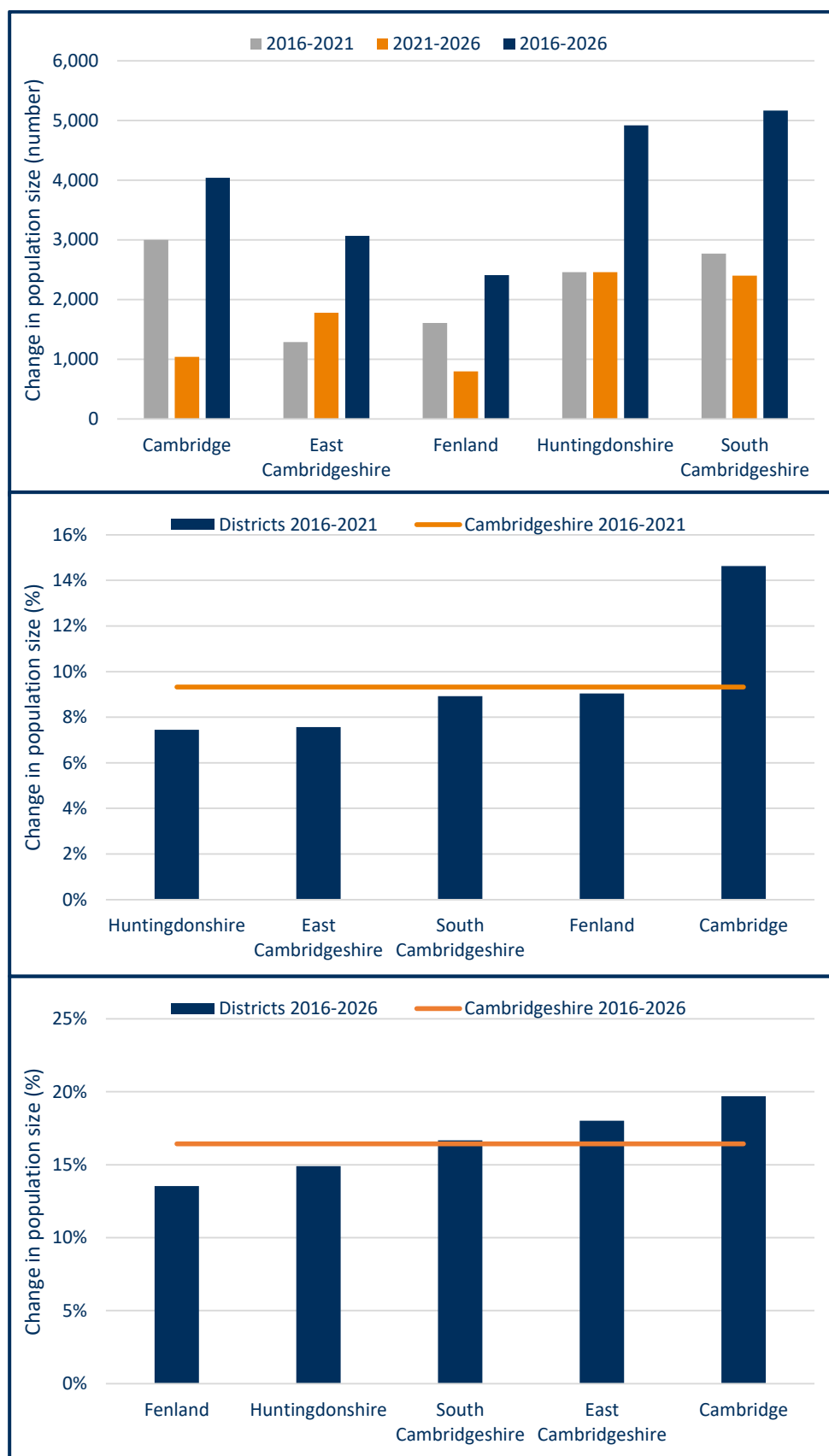
Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figure - see following page]

Key points:

- Cambridgeshire and the districts are all forecast to experience absolute and proportional increases in their younger populations in the next 5 to 10 years.
- Over the entire period the largest absolute increases are expected to be in South Cambridgeshire, Huntingdonshire and Cambridge. In the shorter term they are forecast in Cambridge, South Cambridgeshire and Huntingdonshire.
- Fenland is initially forecast to have larger absolute and proportional increases than East Cambridgeshire, but between 2021 and 2026 this is expected to reverse and over the whole period Fenland is forecast to have the lowest absolute and proportional growth for children under 16.
- Proportional increases are forecast to be highest in Cambridge in the next 5 years and over the entire 10 years, although the expected increases become more equal across the districts by 2026. In comparison with other districts, Huntingdonshire is forecast to experience relatively low proportional increases over the next 5 years, although as stated Fenland is expected to have the lowest absolute and proportional increases by 2026.

Figure 11. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change in younger people, 2016 to 2026 (people aged under 16 years)



Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Age 16 to 64 years

This section uses CCC Research Group forecasts only. To put these forecasts in a wider context it is advised to also consider the ONS forecasts by age group on pages 32-33 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Table 11. Cambridgeshire and districts - **CCC Research Group** absolute and proportional short term (5 and 10 year) population change in working age people, 2016 to 2026 (people aged 16 to 64 years)

Area	Year			Absolute change			% change		
	2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	97,370	106,720	109,390	+9,350	+2,670	+12,020	9.6%	2.5%	12.3%
East Cambridgeshire	52,520	55,120	61,110	+2,600	+5,990	+8,590	5.0%	10.9%	16.4%
Fenland	59,320	63,260	64,980	+3,940	+1,720	+5,660	6.6%	2.7%	9.5%
Huntingdonshire	109,340	114,710	119,780	+5,370	+5,070	+10,440	4.9%	4.4%	9.5%
South Cambridgeshire	95,070	102,630	110,150	+7,560	+7,520	+15,080	8.0%	7.3%	15.9%
Cambridgeshire	413,620	442,440	465,410	+28,820	+22,970	+51,790	7.0%	5.2%	12.5%

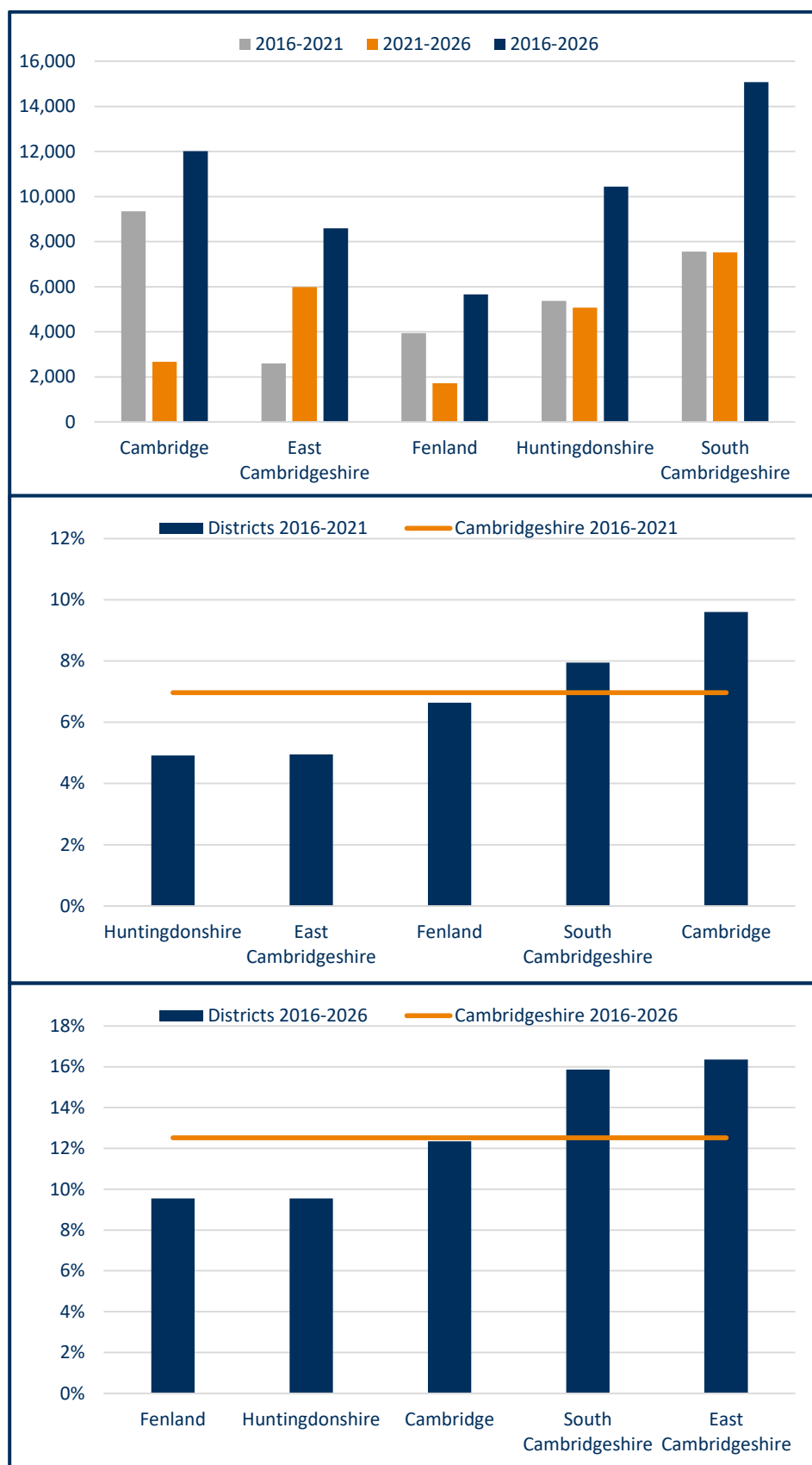
Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figure - see following page]

Key points:

- Cambridgeshire and the districts are all expected to experience absolute and proportional increases in their working age populations in the next 5 to 10 years.
- Over the entire period the largest absolute increases are forecast in South Cambridgeshire, Huntingdonshire and Cambridge. In the shorter term they are forecast in Cambridge, South Cambridgeshire and Huntingdonshire.
- Fenland is expected to initially have larger absolute and proportional increases than East Cambridgeshire, but between 2021 and 2026 this is forecast to reverse. Over the whole period Fenland is forecast to have the lowest absolute increase and similar proportional growth to Huntingdonshire.
- In the shorter term the largest proportional increase is forecast in Cambridge and South Cambridgeshire. However, over the entire period the rate of proportional growth in the working age population is expected to increase in East Cambridgeshire and by 2026 this district is forecast to have experienced the largest proportional growth, followed by South Cambridgeshire.

Figure 12. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change in working age people, 2016 to 2026 (people aged 16 to 64 years)



Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Age 65 years and over

This section uses CCC Research Group forecasts only. To put these forecasts in a wider context it is advised to also consider the ONS forecasts by age group on pages 32-33 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Table 12. Cambridgeshire and districts - **CCC Research Group** absolute and proportional short term (5 and 10 year) population change in older people, 2016 to 2026 (people aged 65 years and over)

Area	Year			Absolute change			% change		
	2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	16,200	18,270	20,570	+2,070	+2,300	+4,370	12.8%	12.6%	27.0%
East Cambridgeshire	17,010	19,170	22,350	+2,160	+3,180	+5,340	12.7%	16.6%	31.4%
Fenland	22,080	24,960	28,070	+2,880	+3,110	+5,990	13.0%	12.5%	27.1%
Huntingdonshire	34,220	39,240	45,370	+5,020	+6,130	+11,150	14.7%	15.6%	32.6%
South Cambridgeshire	29,560	33,370	38,150	+3,810	+4,780	+8,590	12.9%	14.3%	29.1%
Cambridgeshire	119,070	135,010	154,510	+15,940	+19,500	+35,440	13.4%	14.4%	29.8%

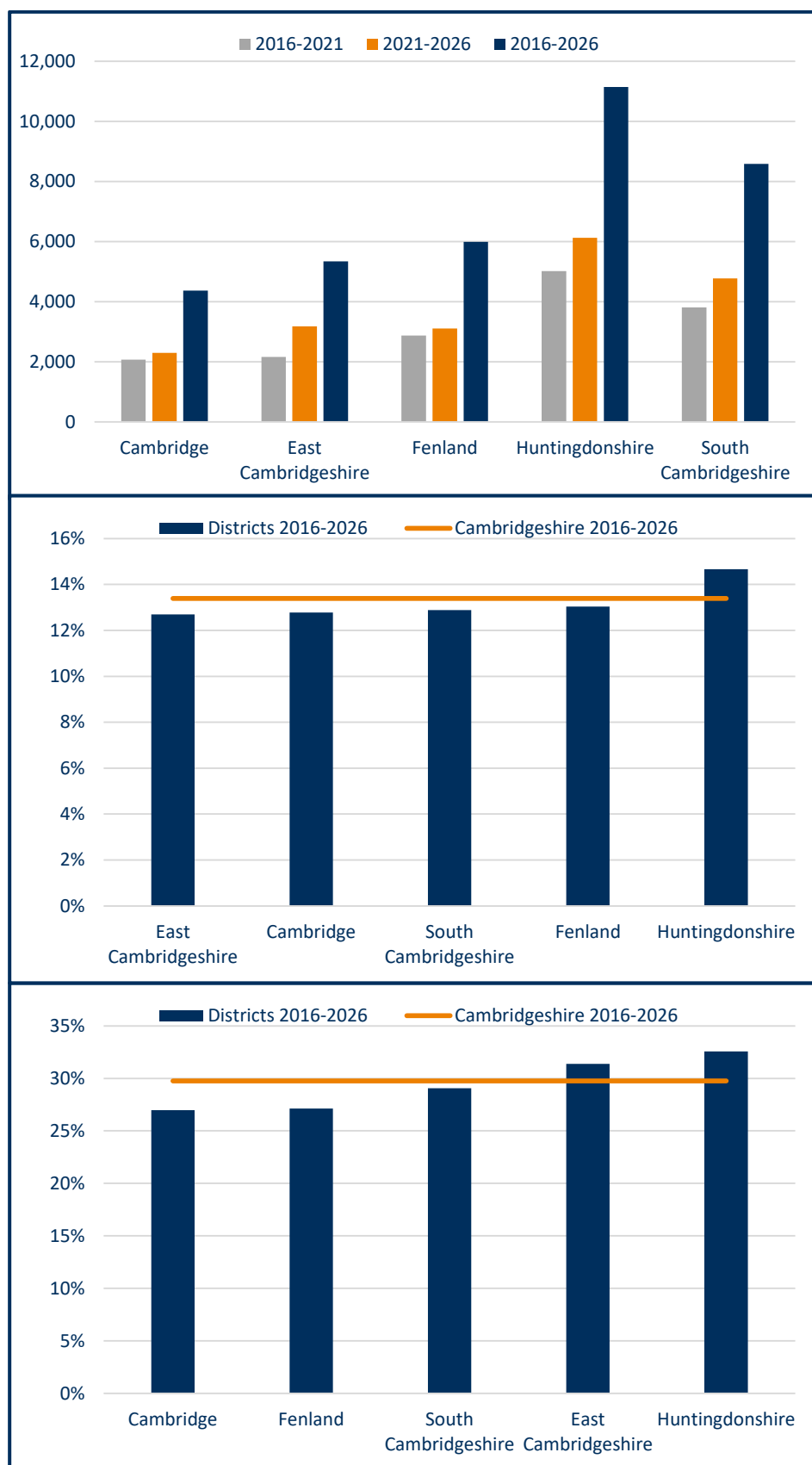
[Figure - see following page]

Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Key points:

- Cambridgeshire and the districts are forecast to experience absolute and proportional increases in their older age populations aged 65 years and over in the next 5 to 10 years.
- Over the shorter term and the entire period the largest absolute increases are expected in Huntingdonshire, South Cambridgeshire and Fenland, though the Fenland absolute increases are forecast to be relatively similar to those seen in East Cambridgeshire.
- Proportional increases are expected to be fairly similar across the districts, with Huntingdonshire forecast to experience the largest proportional increases in older people over the shorter term and the whole period.
- East Cambridgeshire's growth accelerates across the period and by 2026 is forecast to have the second highest proportional growth in older people of Cambridgeshire districts. Cambridge is forecast to experience relatively low levels of proportional growth in older people across the period.

Figure 13. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change in older people, 2016 to 2026 (people aged 65 years and over)



Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Age 75 years and over

This section uses CCC Research Group forecasts only. To put these forecasts in a wider context it is advised to also consider the ONS forecasts by age group on pages 32-33 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Table 13. Cambridgeshire and districts - **CCC Research Group** absolute and proportional short term (5 and 10 year) population change in older people, 2016 to 2026 (people aged 75 years and over)

Area	Year			Absolute change			% change		
	2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Cambridge	7,980	9,210	10,990	+1,230	+1,780	+3,010	15.4%	19.3%	37.7%
East Cambridgeshire	7,490	9,060	11,640	+1,570	+2,580	+4,150	21.0%	28.5%	55.4%
Fenland	10,050	11,780	14,380	+1,730	+2,600	+4,330	17.2%	22.1%	43.1%
Huntingdonshire	14,420	18,400	23,640	+3,980	+5,240	+9,220	27.6%	28.5%	63.9%
South Cambridgeshire	13,120	16,150	20,320	+3,030	+4,170	+7,200	23.1%	25.8%	54.9%
Cambridgeshire	53,060	64,600	80,970	+11,540	+16,370	+27,910	21.7%	25.3%	52.6%

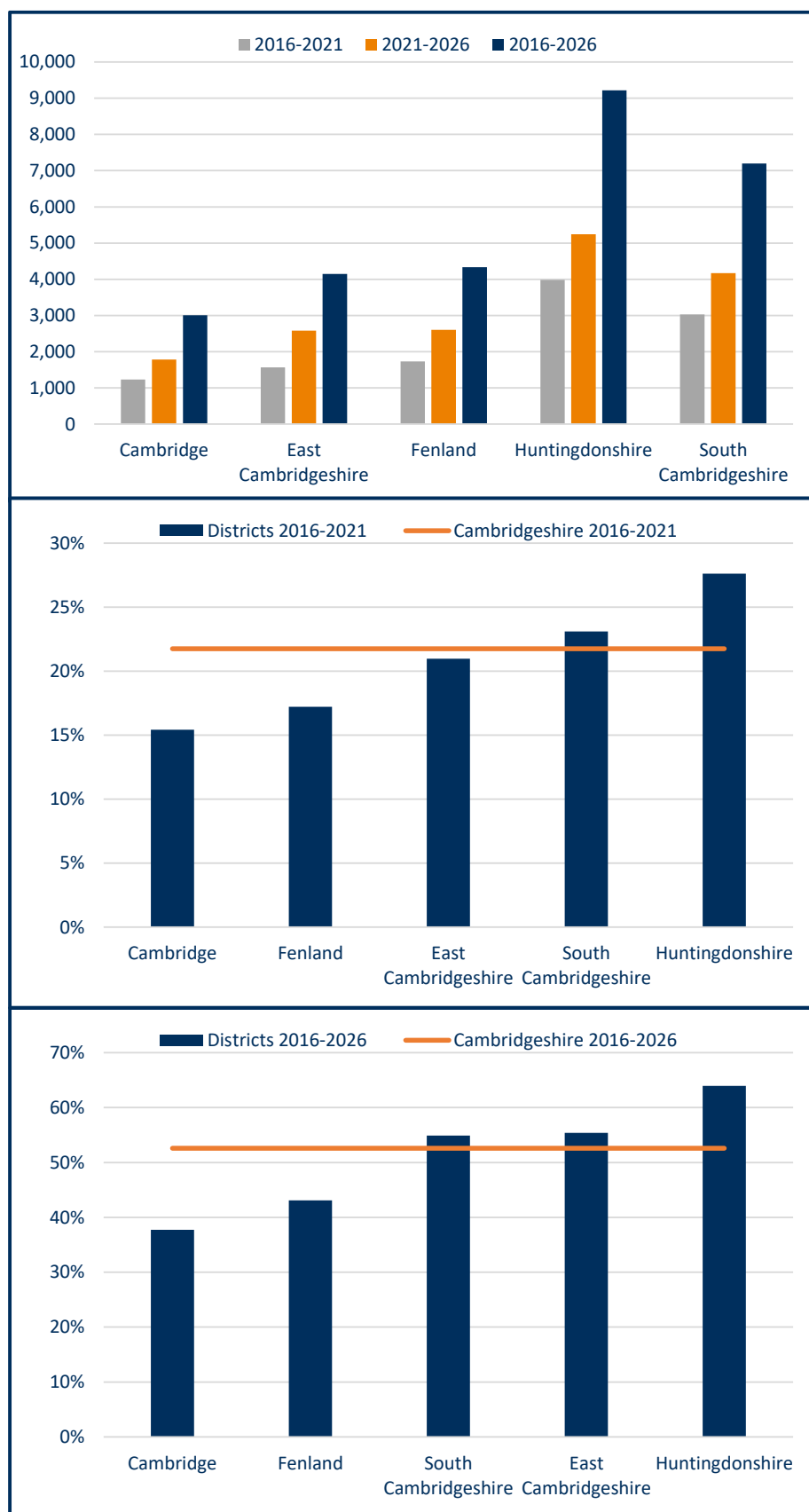
Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figure - see following page]

Key points:

- Cambridgeshire and the districts are forecast to experience absolute and proportional increases in their older age populations aged 75 years and over in the next 5 to 10 years, with all areas expected to have increases in the short and medium term, as well as over the whole period.
- Over the shorter term and the entire period the largest absolute increases are expected in Huntingdonshire and South Cambridgeshire
- Fenland and East Cambridgeshire have similar forecast levels of absolute growth, but East Cambridgeshire has higher expected proportional growth than Fenland over the whole period.
- Cambridge is forecast to have the lowest absolute and proportional growth in the shorter term and across the whole period.
- Proportional increases are forecast to be more marked between districts for this older age group than the in the group aged 65 years and over.

Figure 14. Cambridgeshire and districts - CCC Research Group absolute and proportional short term (5 and 10 year) population change in older people, 2016 to 2026 (people aged 75 years and over)



Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Population forecasts in market towns: CCC Research Group short and medium term forecasts to 2026

This section uses CCC Research Group forecasts only. To put these forecasts in a wider context it is advised to also consider the Office of National Statistics (ONS) forecasts for 2016-2026 on pages 28-29 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Table 14. Cambridgeshire market towns - CCC Research Group absolute and proportional short term (5 and 10 year) population change, 2016 to 2026 (all ages)

Market town	District	Year			Absolute change			% change		
		2016	2021	2026	2016-2021	2021-2026	2016-2026	2016-2021	2021-2026	2016-2026
Ely	East Cambridgeshire	20,740	22,310	24,850	+1,570	+2,540	+4,110	7.6%	11.4%	19.8%
Littleport	East Cambridgeshire	9,240	10,370	12,330	+1,130	+1,960	+3,090	12.2%	18.9%	33.4%
Soham	East Cambridgeshire	12,830	14,220	17,580	+1,390	+3,360	+4,750	10.8%	23.6%	37.0%
Chatteris	Fenland	10,780	12,330	13,460	+1,550	+1,130	+2,680	14.4%	9.2%	24.9%
March	Fenland	23,010	24,560	27,440	+1,550	+2,880	+4,430	6.7%	11.7%	19.3%
Whittlesey	Fenland	12,940	14,780	15,260	+1,840	+480	+2,320	14.2%	3.2%	17.9%
Wisbech	Fenland	24,130	26,130	27,660	+2,000	+1,530	+3,530	8.3%	5.9%	14.6%
Huntingdon	Huntingdonshire	25,080	26,170	28,270	+1,090	+2,100	+3,190	4.3%	8.0%	12.7%
St Ives	Huntingdonshire	17,090	17,200	17,460	+110	+260	+370	0.6%	1.5%	2.2%
St Neots	Huntingdonshire	33,430	36,050	39,870	+2,620	+3,820	+6,440	7.8%	10.6%	19.3%
All market towns	All market towns	189,270	204,120	224,180	+14,850	+20,060	+34,910	7.8%	9.8%	18.4%
Cambridgeshire	Cambridgeshire	652,110	708,000	758,950	+55,890	+50,950	+106,840	8.6%	7.2%	16.4%

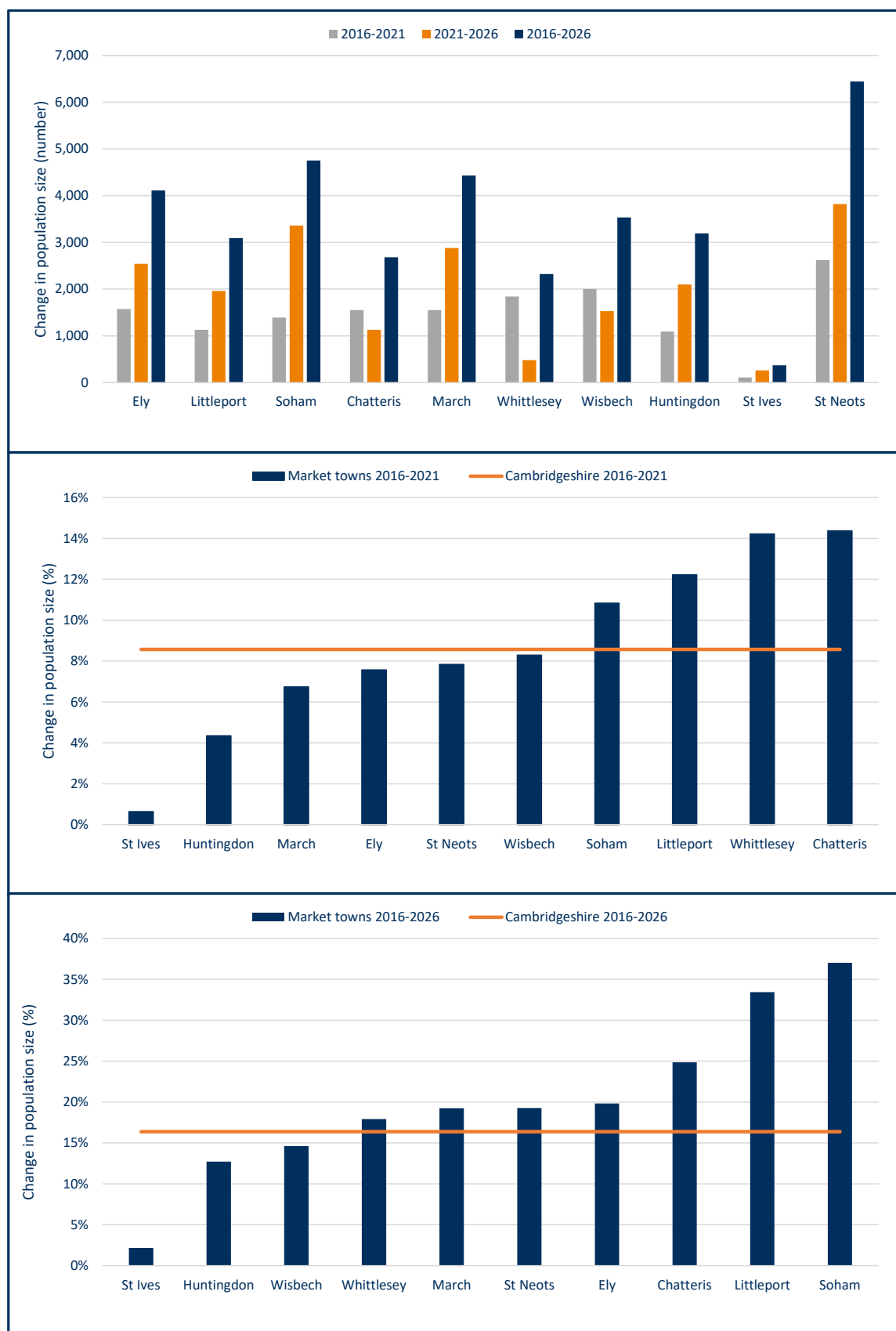
Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

[Figure - see following page]

Key points:

- All major Cambridgeshire market towns are forecast to experience absolute and proportional population growth to 2026.
- Most market towns are expected to experience cumulative absolute growth between 2016 and 2026, whereas some towns (Chatteris, Whittlesey and Wisbech) are forecast to have higher levels of initial growth to 2021 compared with the subsequent period 2021-2026.
- St Neots, Soham, March and Ely are forecast to have the highest levels of absolute growth to 2026.
- Chatteris, Whittlesey and Littleport are forecast to experience the highest levels of proportional growth to 2021.
- By 2026, Soham, Littleport and Chatteris are expected to have the largest proportional increases.
- St Neots, while forecast to experience the largest absolute growth, has expected moderate proportional levels compared with all Cambridgeshire market towns.
- St Ives is forecast to have relatively small levels of growth to 2026 and indeed by 2036 absolute and proportional growth there is expected to be approximately neutral (0).

Figure 15. Cambridgeshire market towns - CCC Research Group absolute and proportional short term (5 and 10 year) population change, 2016 to 2026 (all ages)

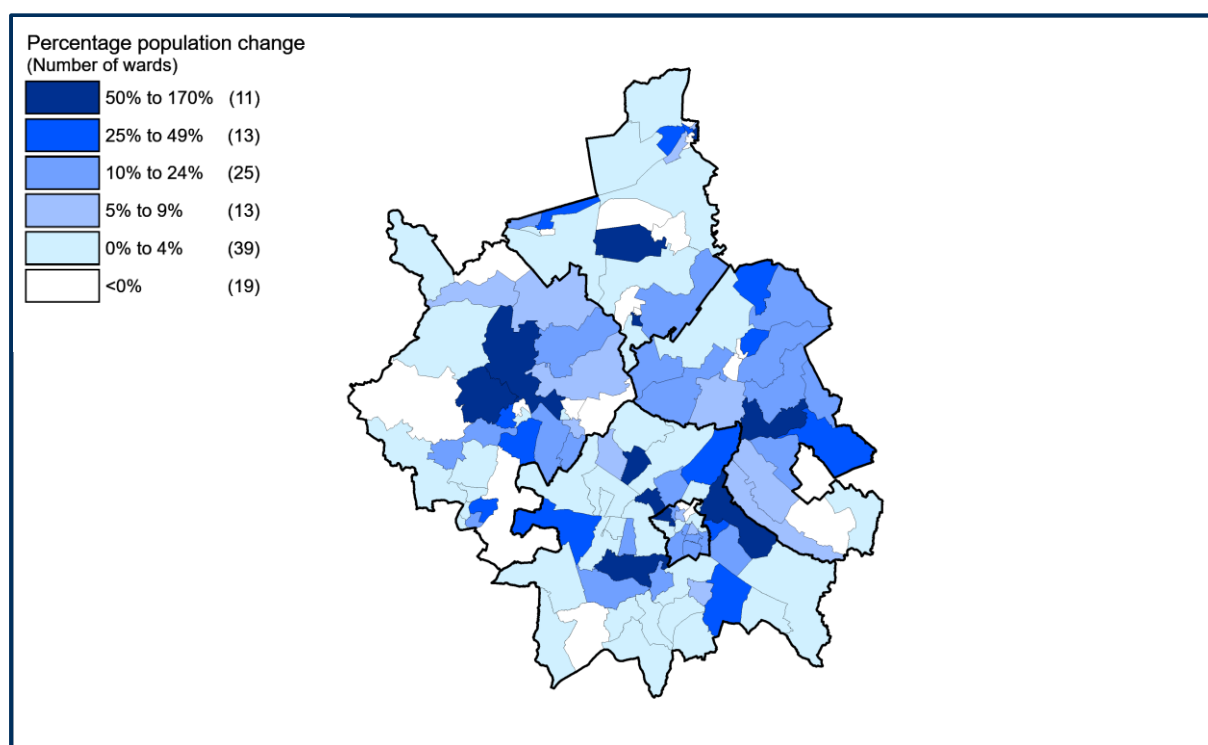


Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Population forecasts in wards: CCC Research Groups forecasts to 2026

This section uses CCC Research Group forecasts only. To put these forecasts in a wider context it is advised to also consider the Office of National Statistics (ONS) forecasts for 2016-2026 on pages 28-29 and to read the section on Use of Population Forecasts and Projections on page 24, which explains the differences between the forecasting methods used by CCC RG and ONS.

Figure 16. Cambridgeshire wards - CCC Research Group proportional medium term (10 year) population change, 2016 to 2026 (all ages)



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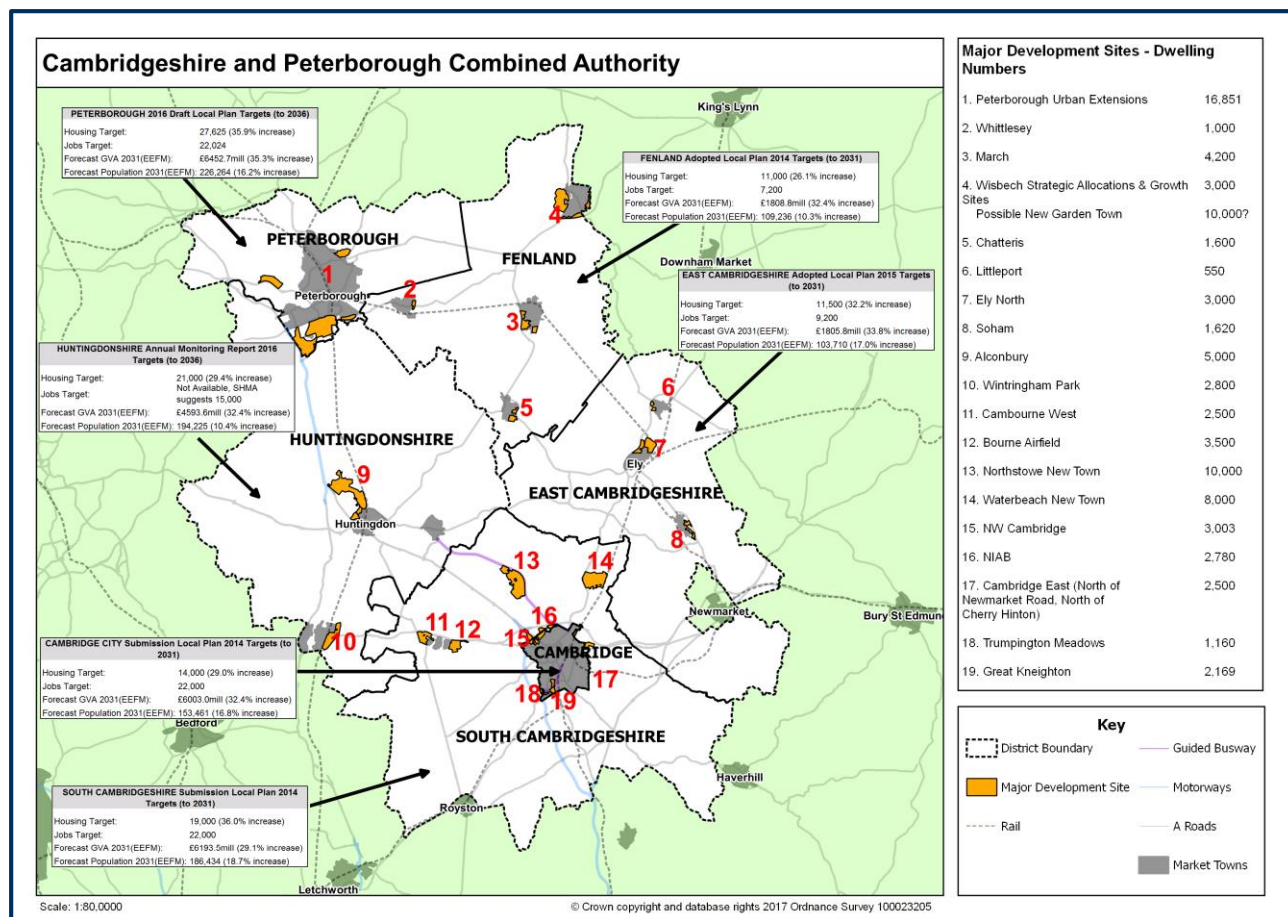
Source: Cambridgeshire County Council Research Group mid-2015 based population forecasts

Key points:

- The wards that are forecast to have the greatest levels of proportional growth between 2016 and 2026, at levels of 50% or more, are: **Longstanton** (South Cambridgeshire, which includes Northstowe), **Upwood and The Raveleys** (Huntingdonshire), **Alconbury and The Stukeleys** (Huntingdonshire), **Wenneye** (Fenland), **The Wilbrahams** (South Cambridgeshire), **Castle** (Cambridge), **March West** (Fenland), **Staithe** (Fenland), **Girton** (South Cambridgeshire), **Haslingfield and The Eversdens** (South Cambridgeshire) and **Soham South** (East Cambridgeshire).

Population change and house building

Figure 17. Cambridgeshire and Peterborough Combined Authority – major development sites and dwelling numbers

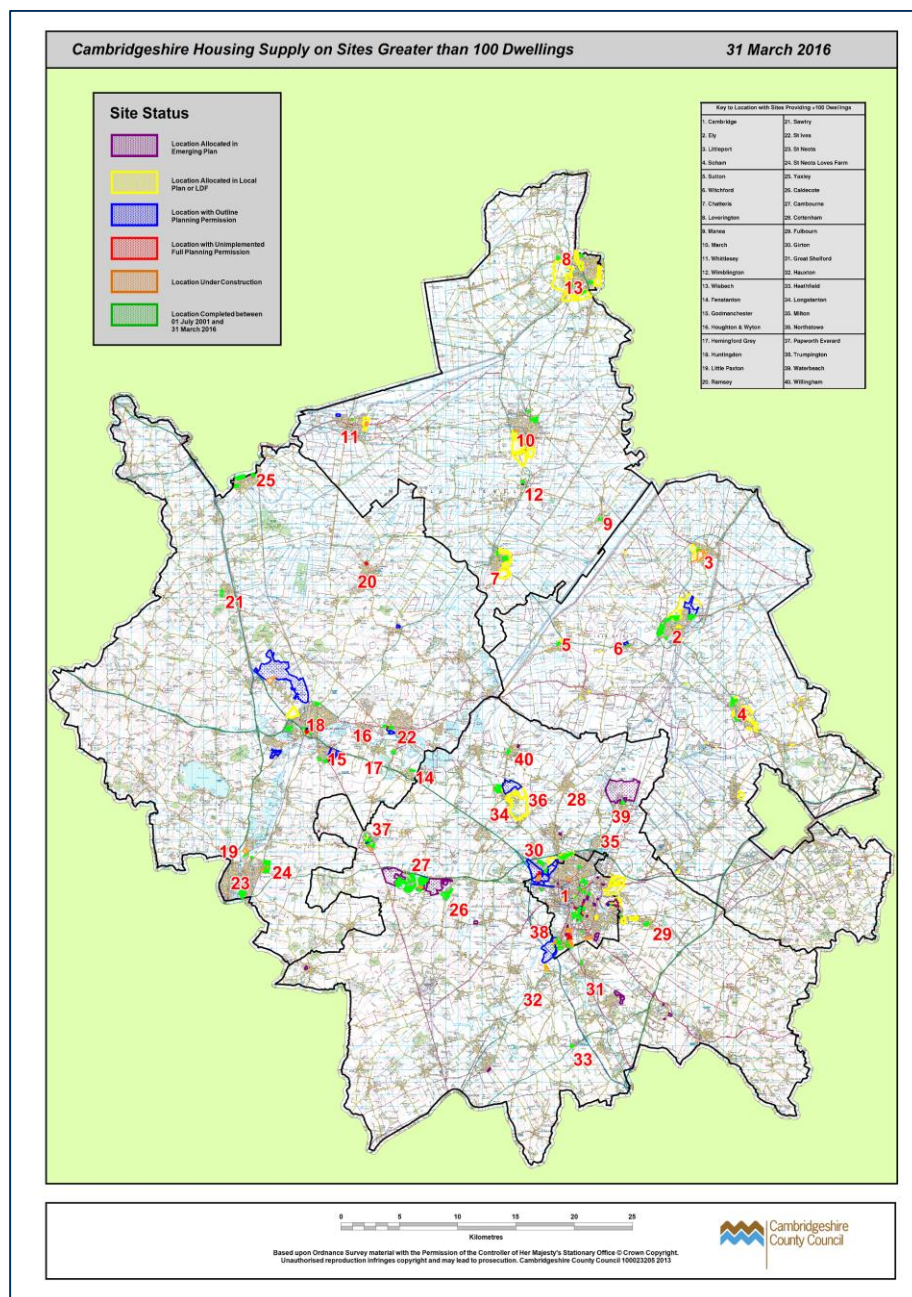


Source: Cambridgeshire County Council Business Intelligence – Research Group

Key points:

- The map above shows the proposed major new housing development proposed sites and the planned number of dwellings by site.
- Within Cambridgeshire, Northstowe and the proposed Wisbech Garden Town are expected to have the highest numbers of planned dwellings.
- Waterbeach New Town, Alconbury and March have the next highest proposed numbers of dwellings.
- Cambridge and Cambridgeshire market towns are all set to have new housing.
- The greatest density of proposed housing sites and the greatest numbers of dwellings is proposed to be in South Cambridgeshire.

Figure 18. Cambridgeshire housing supply sites with greater than 100 dwellings, March 2016



Source: Cambridgeshire County Council Business Intelligence – Research Group

Key points:

- The map above shows new housing site status in terms of planning permissions and completion for those sites with greater than 100 dwellings.
- Without considering site status, South Cambridgeshire had the highest number of sites, followed by Huntingdonshire and then Fenland (though Cambridge is shown as a single site and has had the greatest number of housing developed completions between 2001 and 2016).
- In terms of those areas with outline planning permissions there were two in South Cambridgeshire, clustered on the border with Cambridge and primarily others in Huntingdonshire and East Cambridgeshire.
- Across Cambridgeshire, there was a low number of sites with unimplemented full planning permission.

Population density

Table 15. Cambridgeshire and the districts – Population density for Cambridgeshire and the districts, the East of England and England, mid-2016

Area	Area (square km)	Estimated population mid-2016	2016 - people per sq km
Cambridge	41	131,799	3,215
East Cambridgeshire	651	87,825	135
Fenland	546	100,182	183
Huntingdonshire	906	175,666	194
South Cambridgeshire	902	156,468	173
Cambridgeshire	3,046	651,940	214
England	130,310	55,268,067	424
East of England	19,119	6,130,542	321

Source: Office for National Statistics (ONS table MYE5)

Key points:

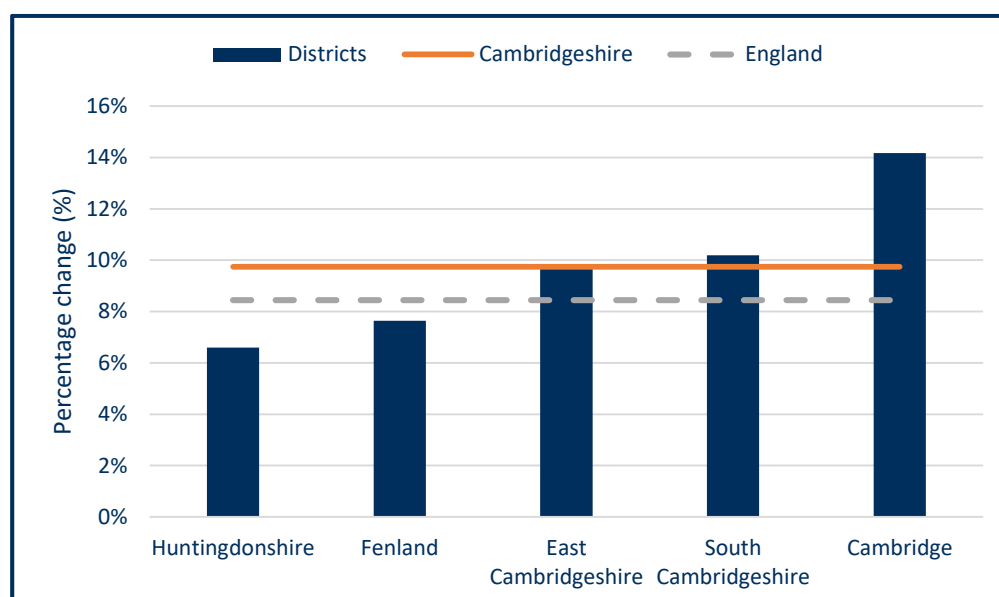
- Cambridgeshire is a relatively rural area, with lower population density than in England and as seen in the East of England.
- Cambridge has by far the greatest level of population density in Cambridgeshire. Other districts have relatively similar levels, with East Cambridgeshire having the least density of population.

Table 16. Change in population density for Cambridgeshire and the districts, the East of England and England, 2007-2016

Area	Year										Abs change 2007-2016	% change 2007-2016
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
Cambridge	2,816	2,834	2,847	2,932	2,993	3,053	3,089	3,135	3,193	3,215	399	14.2%
East Cambridgeshire	123	124	127	128	129	131	132	133	134	135	12	9.8%
Fenland	170	172	173	174	175	176	177	179	182	183	13	7.6%
Huntingdonshire	182	184	184	186	188	189	190	192	193	194	12	6.6%
South Cambridgeshire	157	159	162	164	166	167	168	170	172	173	16	10.2%
Cambridgeshire	195	197	199	202	204	206	208	210	212	214	19	9.7%
East of England	394	398	401	404	408	411	413	417	420	424	30	7.6%
England	296	299	301	304	307	309	311	315	318	321	25	8.4%

Source: Office for National Statistics (ONS)

Figure 19. Change in population density for Cambridgeshire and the districts, the East of England and England, 2007-2016



Source: Office for National Statistics (ONS)

Key points:

- Population density in Cambridgeshire and all the districts has increased since 2007, with a slightly higher proportional increase from 2007 to 2016 in Cambridgeshire than found in England and the East of England.
- Of the districts Cambridge, South Cambridgeshire and East Cambridgeshire have experienced the greatest proportional increase in density from 2007, with Huntingdonshire and Fenland experiencing the lowest.

USEFUL LINK:

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates>

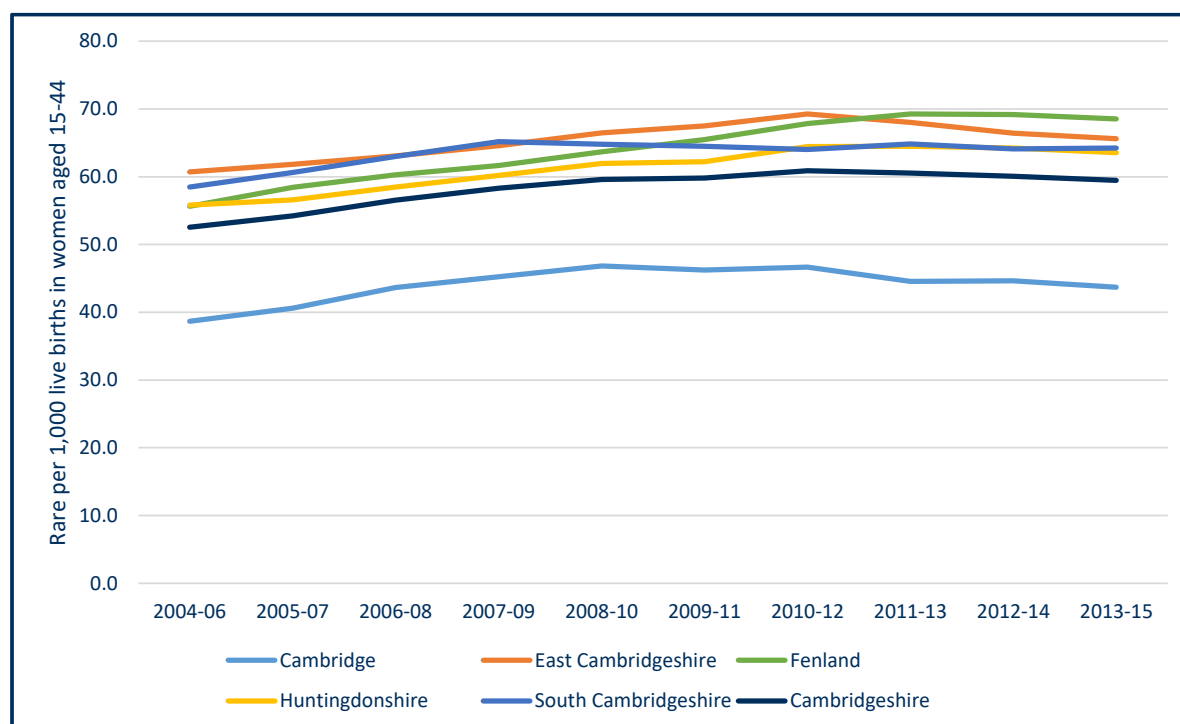
Fertility, components of population change, national insurance number registrations and ethnicity

Table 17. Cambridgeshire and the districts – population change: trend in general fertility rate (live birth rate per 1,000 women aged 15-44 years) by local authority of mother's residence, 2002-04 to 2013-15

Area	Years (3 year aggregate)									
	2004-06	2005-07	2006-08	2007-09	2008-10	2009-11	2010-12	2011-13	2012-14	2013-15
Cambridge	38.7	40.6	43.6	45.3	46.8	46.2	46.7	44.6	44.7	43.7
East Cambridgeshire	60.7	61.8	63.1	64.6	66.5	67.5	69.2	68.0	66.4	65.6
Fenland	55.6	58.4	60.3	61.6	63.7	65.5	67.8	69.2	69.2	68.5
Huntingdonshire	55.8	56.6	58.5	60.2	61.9	62.2	64.4	64.5	64.2	63.5
South Cambridgeshire	58.5	60.6	63.0	65.2	64.8	64.5	64.0	64.8	64.1	64.2
Cambridgeshire	52.5	54.2	56.5	58.3	59.6	59.8	60.9	60.5	60.1	59.4

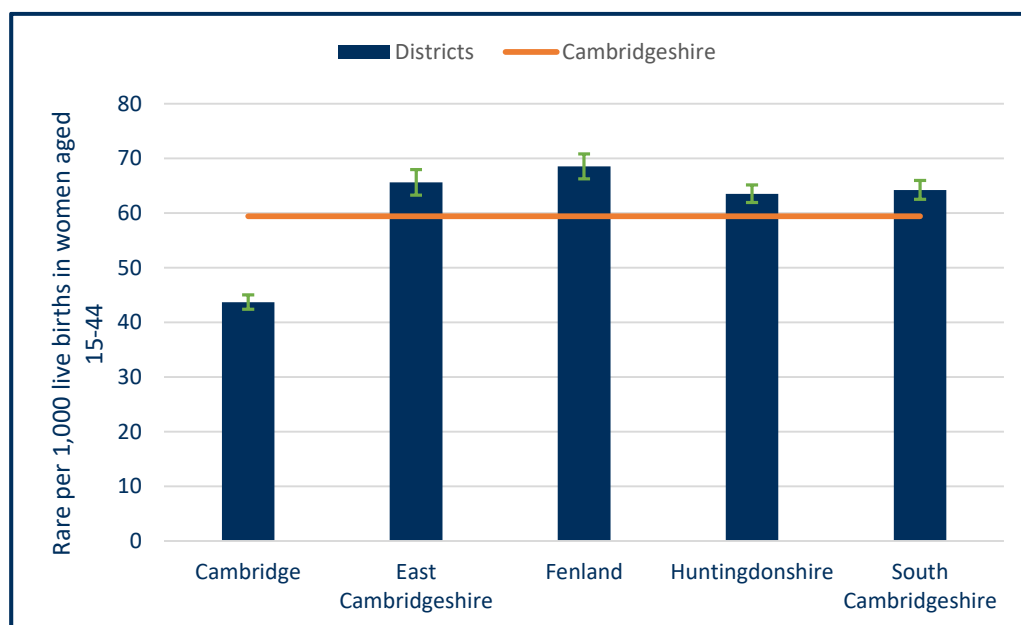
Sources: Office for National Statistics birth registrations, Office for National Statistics mid-year population estimates

Figure 20. Cambridgeshire and the districts – population change: trend in general fertility rate (live birth rate per 1,000 women aged 15-44 years) by local authority of mother's residence, 2002-04 to 2013-15



Sources: Office for National Statistics birth registrations, Office for National Statistics mid-year population estimates

Figure 21. Cambridgeshire and the districts – general fertility rate (live birth rate per 1,000 women aged 15-44 years) by local authority of mother's residence, 2013-15



Sources: Office for National Statistics birth registrations, Office for National Statistics mid-year population estimates

Key points:

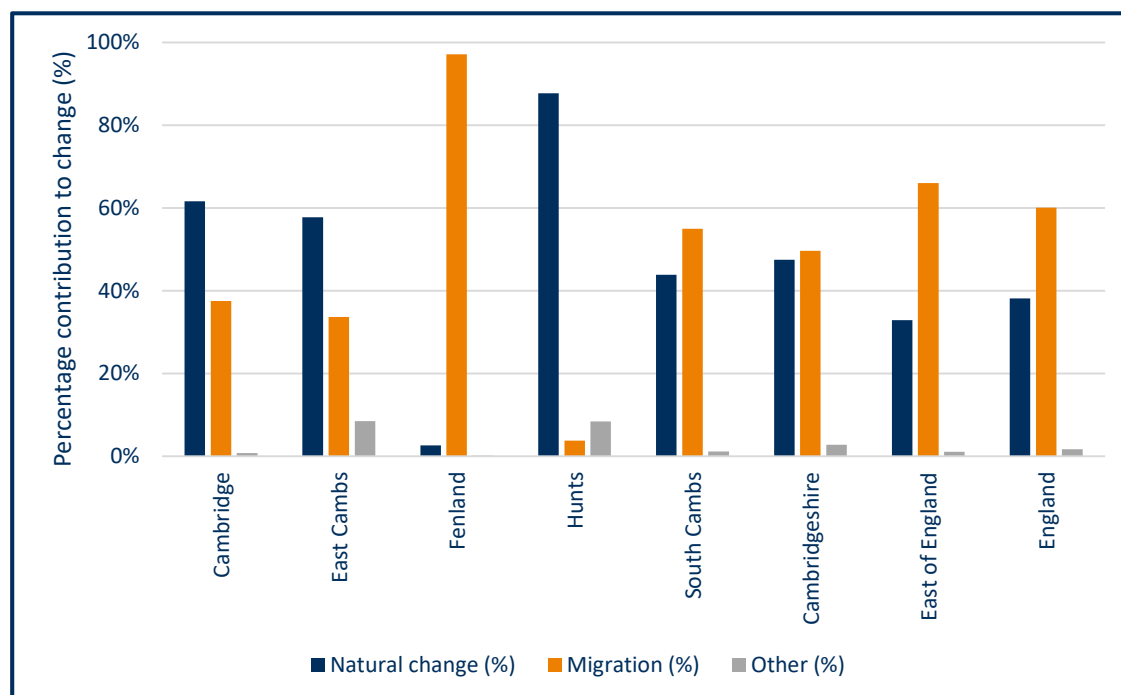
- The most marked difference in birth rates in Cambridgeshire is in Cambridge where there is a relatively low birth rate compared with other districts in Cambridgeshire. This rate is statistically significantly lower than the county average. All other districts have significantly higher rates than the Cambridgeshire rate, which is obviously influenced by the low Cambridge rate.
- Birth rates generally increase from 2004 to around 2010-2012, but have tended to generally level off since then.
- Historically East Cambridgeshire had the highest rates, but Fenland's rate has increased in recent years and it now has the highest fertility rate in the county.

Table 18. Cambridgeshire and the districts – ONS mid-2015 to ONS mid-2016 population estimates – absolute and proportional contribution of each component of population change

Area	Population change 2015-2016 (number - gross)	Natural change (number)	Migration (number)	Other (number)	Natural change (%)	Migration (%)	Other (%)
Cambridge	892	550	335	7	61.7%	37.6%	0.8%
East Cambridgeshire	519	300	175	44	57.8%	33.7%	8.5%
Fenland	1,015	27	986	2	2.7%	97.1%	0.2%
Huntingdonshire	758	665	-29	64	87.7%	3.8%	8.4%
South Cambridgeshire	1,580	693	869	18	43.9%	55.0%	1.1%
Cambridgeshire	4,702	2,235	2336	131	47.5%	49.7%	2.8%
East of England	54,091	17,797	35,718	576	32.9%	66.0%	1.1%
England	481,740	183,861	289,432	8,447	38.2%	60.1%	1.8%

Source: Office for National Statistics (ONS) population estimates mid-2016

Figure 22. Cambridgeshire and the districts – ONS mid-2015 to ONS mid-2016 population estimates – absolute and proportional contribution of each component of population change



Source: Office for National Statistics (ONS) population estimates mid-2016

Key points:

- Natural change (births and deaths) and internal and international migration are the major components of population change considered here.
- In 2015 to 2016 natural change and migration made an approximately equal contribution to population change in Cambridgeshire as a whole. In England collectively migration made a larger contribution than natural change.
- The components of change in Cambridge and East Cambridgeshire have similar patterns, with natural change making the larger contribution but with a relatively large contribution from migration.

- South Cambridgeshire has relatively similar contributions from natural change and migration, though migration has a larger impact.
- In Huntingdonshire by far the major contribution comes from natural change.
- In Fenland migration makes the largest proportional impact in Cambridgeshire and in that district it is the dominant component of annual population change.

USEFUL LINK:

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates>

Table 19. National insurance registrations to adult overseas nationals entering Cambridgeshire and the districts - registration's year to March 2017

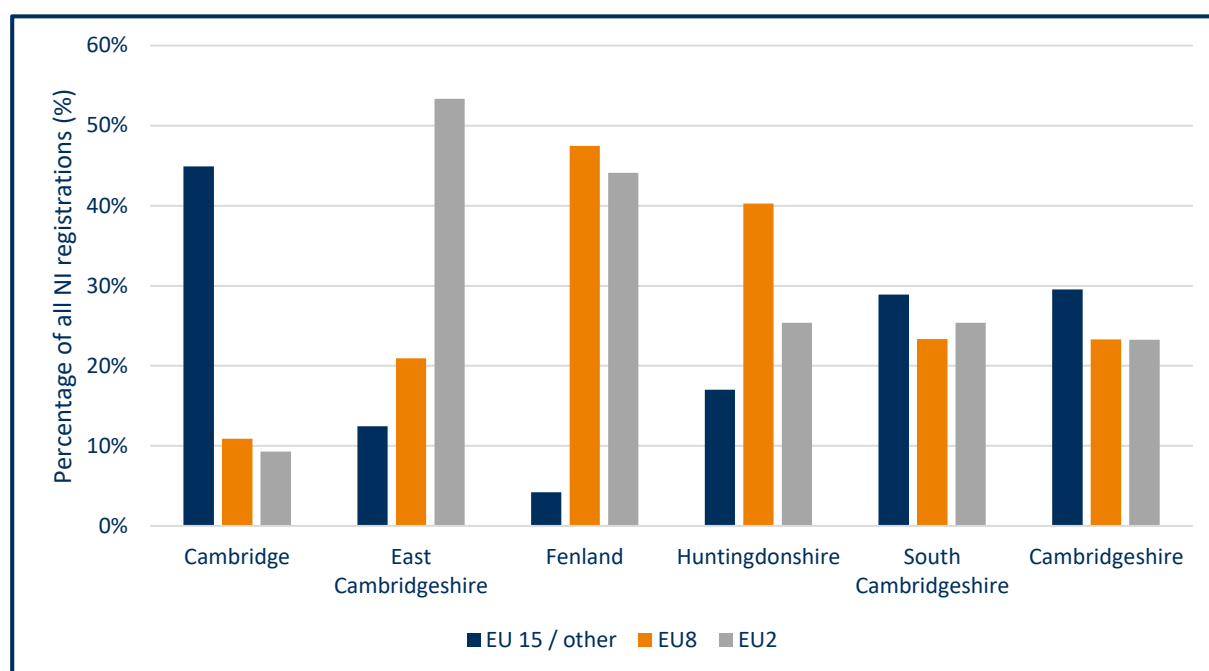
Area	European Union								Elsewhere in the world		Total*
	EU 15 / other		EU8		EU2		EU all		Num	%	
	Num	%	Num	%	Num	%	Num	%			
Cambridge	2,110	44.9%	511	10.9%	435	9.3%	3,056	65.1%	1,638	34.9%	4,696
East Cambridgeshire	102	12.4%	172	21.0%	438	53.3%	712	86.7%	109	13.3%	821
Fenland	72	4.2%	818	47.5%	760	44.1%	1,650	95.8%	62	3.6%	1,723
Huntingdonshire	187	17.0%	443	40.3%	279	25.4%	909	82.6%	196	17.8%	1,100
South Cambridgeshire	382	28.9%	308	23.3%	335	25.4%	1,025	77.6%	293	22.2%	1,321
Cambridgeshire	2,853	29.5%	2,252	23.3%	2,247	23.3%	7,352	76.1%	2,298	23.8%	9,661

Note1*: Cells in this table have been randomly adjusted by DWP to avoid the release of confidential data and may not aggregate to the total registrations.

Note2: EU15 member countries = EU members prior to the accession of 10 candidate countries on 1/5/2004; EU8 = the 10 accession countries; EU2 = those countries joining from 2007 (Bulgaria and Romania)

Source: Department for Work and Pensions (DWP)

Figure 23. National insurance registrations to adult overseas nationals entering Cambridgeshire and the districts from the European Union - registration's year to March 2017



Note: EU15 member countries = EU members prior to the accession of 10 candidate countries on 1/5/2004; EU8 = the 10 accession countries; EU2 = those countries joining from 2007 (Bulgaria and Romania)

Source: Department for Work and Pensions (DWP)

Key points:

- The data shows new national insurance registrations for adult overseas nationals entering Cambridgeshire and indicates where people are migrating to Cambridgeshire from.
- In Cambridgeshire as a whole European Union (EU) countries make up around three quarters of all registrations and there is a fairly equal balance among EU country groupings, albeit with the EU15 countries making the largest single contribution of the 3 groups.
- All districts have registrations from all 3 groups of EU countries.

- Across the districts, EU15 countries make the largest contribution in Cambridge and are slightly dominant in South Cambridgeshire.
- Of the other districts, Huntingdonshire has proportionally the most registrations from EU8 accession countries, as does Fenland. However, in Fenland's case the EU2 countries make an almost equal contribution.
- In East Cambridgeshire the EU2 countries make by far the largest proportional contribution, with that district having the largest proportion from these countries in Cambridgeshire.

USEFUL LINK:

<https://www.gov.uk/government/statistics/national-insurance-number-allocations-to-adult-overseas-nationals-to-march-2017>

Table 20. Population by broad ethnic group and local authority district, Cambridgeshire, 2011

Area	Asian: Chinese		Asian: Indian/ Pakistani/ Bangladeshi		Black		White: British		White: Other		Mixed/Others		Total
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	
Cambridge	4,454	3.6%	6,004	4.8%	1,898	1.5%	81,742	66.0%	18,696	15.1%	11,073	8.9%	123,867
East Cambridgeshire	290	0.3%	499	0.6%	383	0.5%	75,218	89.7%	4,928	5.9%	2,500	3.0%	83,818
Fenland	215	0.2%	502	0.5%	402	0.4%	86,151	90.4%	6,090	6.4%	1,902	2.0%	95,262
Huntingdonshire	575	0.3%	2,468	1.5%	1,289	0.8%	151,694	89.5%	7,867	4.6%	5,615	3.3%	169,508
South Cambridgeshire	1,189	0.8%	2,892	1.9%	1,101	0.7%	129,812	87.3%	7,881	5.3%	5,880	4.0%	148,755
Cambridgeshire	6,723	1.1%	12,365	2.0%	5,073	0.8%	524,617	84.5%	45,462	7.3%	26,970	4.3%	621,210
England	379,503	0.7%	2,944,498	5.6%	1,568,757	3.0%	42,279,236	79.8%	2,484,905	4.7%	3,355,557	6.8%	53,012,456

Source: Office for National Statistics, Census 2011, Table QS211EW

Key points:

- Compared with England, Cambridgeshire has relatively small proportions of people from Non-White ethnic groups. Cambridge does have a higher proportion of people with Chinese ethnicity than England and a fairly similar proportion of people from the Indian/Pakistani/ Bangladeshi group than found nationally.
- Cambridgeshire has higher proportions of people from the White British and White Other groups than found nationally. Here the 'White Other' group includes the White Gypsy or Irish Traveller and the original Census 'White Other' grouping.
- In most districts the White British group comprises around 90% of the population. In Cambridge, this is around 66% with a larger proportional contribution made by the White Other group and the Mixed/Others group where the proportion is bigger than in England collectively.

3. RELATIVE DEPRIVATION AND WIDER DETERMINANTS OF HEALTH

Public Health England (PHE) describe **wider determinants**, also known as social determinants, as a diverse range of social, economic and environmental factors which impact on people's health. Several studies have attempted to estimate the contribution of the wider determinants to population health, finding that **wider determinants have a greater influence on health** than health care, behaviours or genetics. It is therefore an important aspect of public health in terms of informing preventative action and reducing inequality (Public Health England, Wider Determinants of Health, <https://fingertips.phe.org.uk/profile/wider-determinants>).

3.1 Relative deprivation

The **Indices of Deprivation 2015** comprise seven weighted domains that aim to capture important socio-economic factors at local area level. The indices are combined together to form the composite **Index of Multiple Deprivation 2015 (IMD2015)**, which is presented as a single measure of relative deprivation for each area of England.

The section that follows presents the IMD2015 for Cambridgeshire and the districts, comparing our local area with England. There are also data for selected individual domain indices.

The County Council's Research Group have written a **local IMD2015 report** and this can be found at: <http://cambridgeshireinsight.org.uk/deprivation-0>.

Table 21. Indices of deprivation, 2015 - overall score, children's and older people's indices and the percentage locally living in the national 20% most deprived area group

Area	IMD score 2015	IDACI score 2015 ¹	IDOPI score 2015 ²	% living in 20% most deprived area 2015 ³
Cambridge	13.8	14.1	12.7	2.6
East Cambridgeshire	12.1	10.1	11.7	0.0
Fenland	25.4	22.4	16.4	20.4
Huntingdonshire	11.8	12.0	9.6	1.9
South Cambridgeshire	8.1	8.4	8.4	0.0
Cambridgeshire	13.4	12.7	11.3	4.1
England	21.8	19.9	16.2	20.2

Notes:

1 - Income Deprivation Affecting Children Index (IDACI): Proportion of children aged 0–15 years living in income deprived households as a proportion of all children aged 0–15 years.

2 - Income Deprivation Affecting Older People Index (IDAOPI): Adults aged 60 or over living in income-deprived households as a percentage of all adults aged 60 or over.

3 - IMD 2015: % of people in an area living in 20% most deprived areas in England.

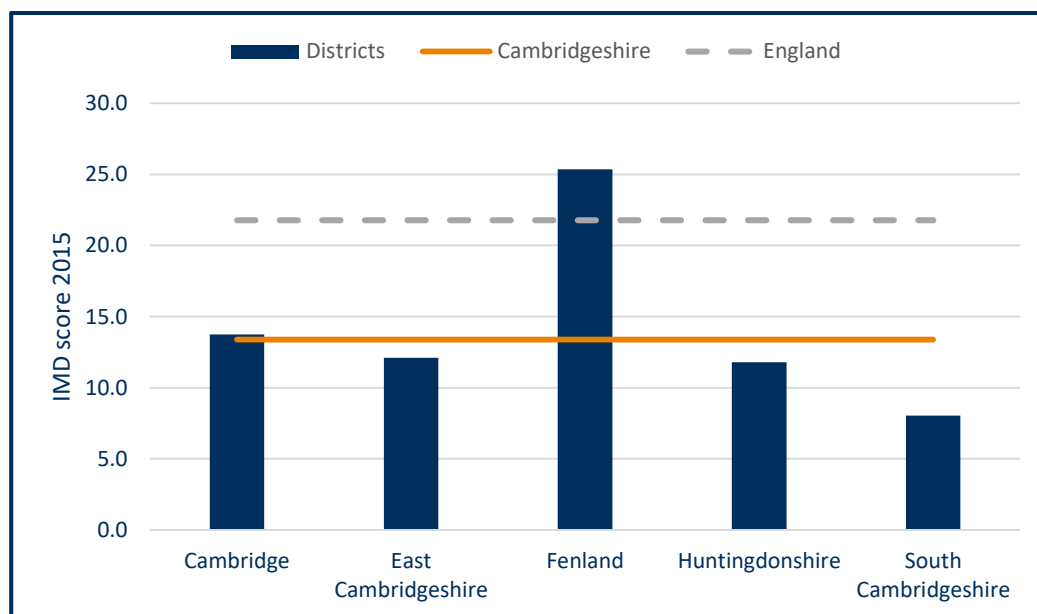
Source: DCLG from PHE Mental Health and Wellbeing JSNA

Key points:

- Cambridgeshire as a whole has low levels of relative deprivation, compared with nationally, whether that is overall, or whether related to income deprivation in children or older people. Cambridgeshire has low levels of people living in the most deprived fifth (20%) of areas nationally.

- At district level, Fenland is the only area with a level of overall deprivation above the national rate. Fenland’s rate of income deprivation in children is also higher than the national rate, with the rate in older people similar to the England average.
- Fenland also has by far the largest proportion in Cambridgeshire of its population living in the most deprived fifth (20%) of areas nationally, with a level that is similar to the average for all of England.
- South Cambridgeshire is markedly the least deprived district in Cambridgeshire, across all the measures presented and, along with East Cambridgeshire, has none of its population living in the most deprived fifth (20%) of areas nationally.

Figure 24. Indices of deprivation, 2015 - overall IMD2015 score for Cambridgeshire, the districts and England

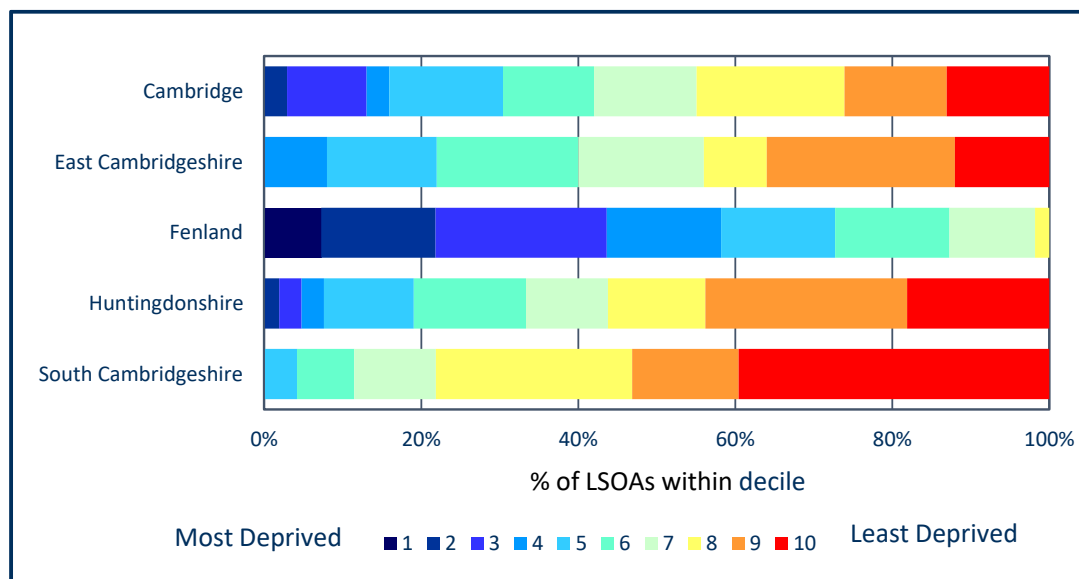


Source: DCLG from PHE Mental Health and Wellbeing JSNA

Key points:

- Fenland is the most deprived area in Cambridgeshire, with overall levels of deprivation above the county and national levels.
- Cambridge has similar levels of relative overall deprivation as the county average, at a level well below England, with all other districts having lower levels than the Cambridgeshire average.

Figure 25. Indices of Multiple Deprivation, 2015 (IMD2015) - percentage of lower super output areas (LSOAs) in national IMD2015 deciles by district in Cambridgeshire

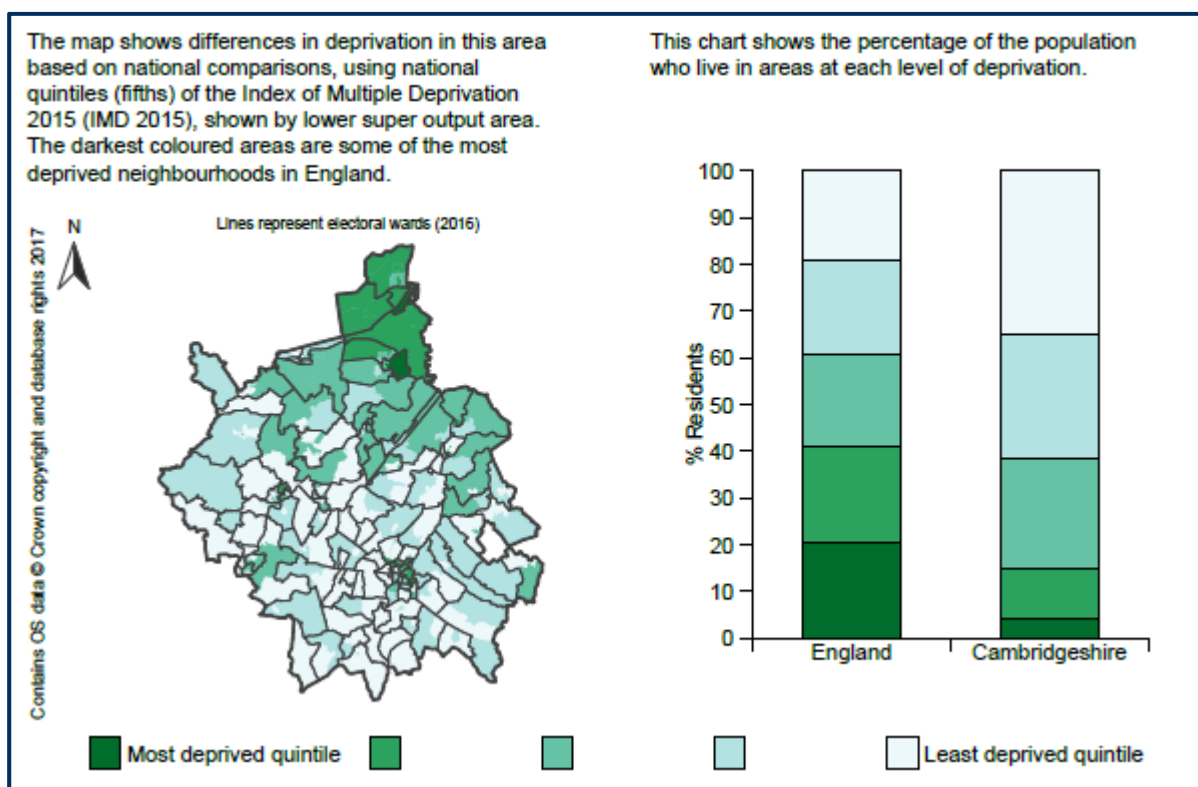


Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Compared to other districts in Cambridgeshire, Fenland has by far the largest part of its population living in the more deprived areas when these are grouped nationally into tenths.
- Cambridge and Huntingdonshire have some areas in the more deprived groups and no one in East Cambridgeshire and South Cambridgeshire is living in an area that is judged as the most deprived nationally.
- South Cambridgeshire is by some distance the least overall relatively deprived place in Cambridgeshire.

Figure 26. Indices of deprivation, 2015 - Cambridgeshire LSOAs within national quintiles of IMD2015 score and the percentage of the population living within each deprivation group

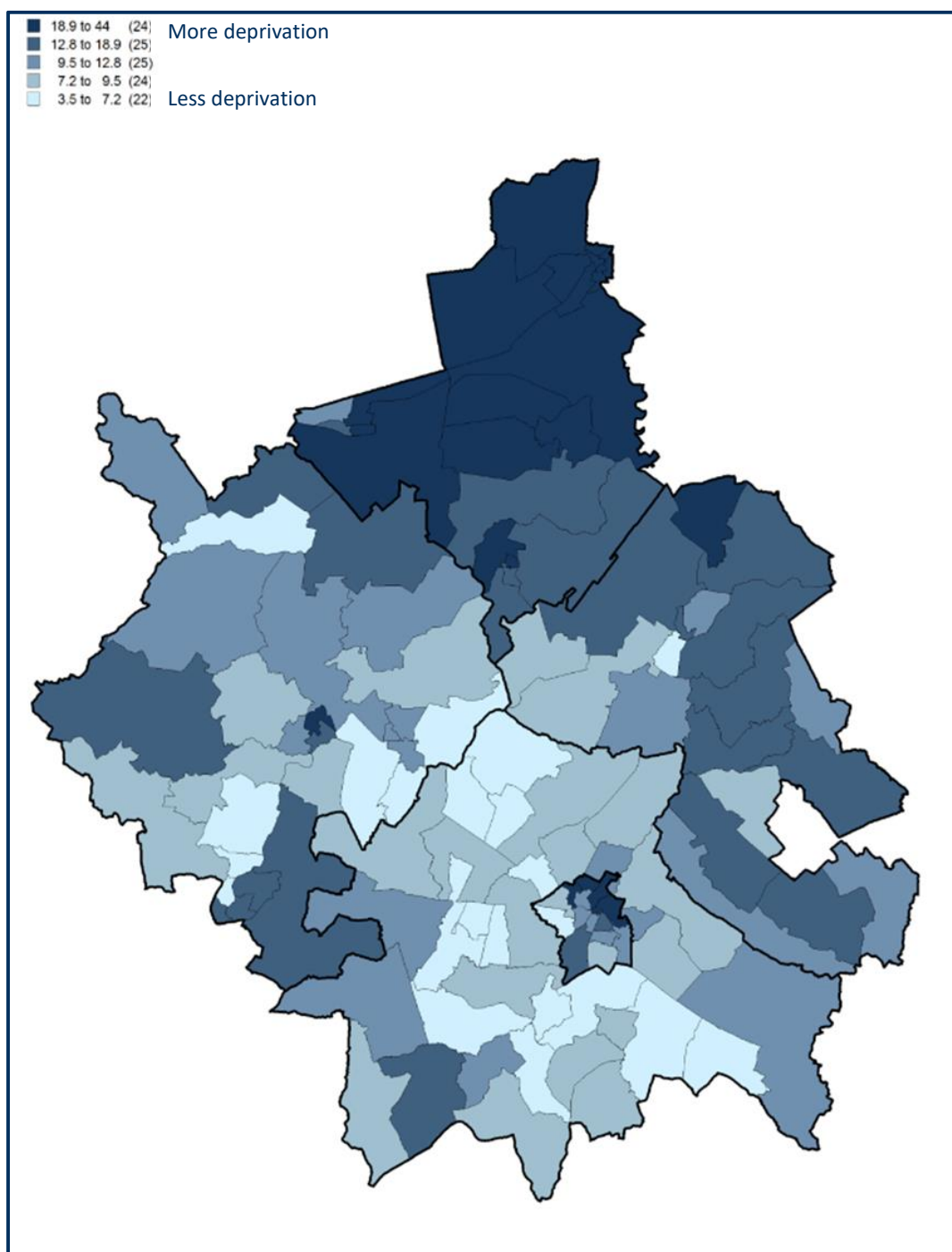


Source: DCLG from PHE Cambridgeshire Health Profile 2017 (Crown Copyright 2017) - <http://fingertipsreports.phe.org.uk/health-profiles/2017/e10000003.pdf>

Key points:

- At a small area level, the map above shows greater levels of relative deprivation in the north of the county, clustered in Fenland. There are a few areas with higher deprivation levels in East Cambridgeshire, Huntingdon and north-east Cambridge.
- The chart on the right of the Figure shows that, when compared with England, Cambridgeshire is an area that overall is not relatively deprived with most areas in the more affluent groups.

Figure 27. Indices of Multiple Deprivation, 2015 - Cambridgeshire ward level IMD2015 scores in groups (quintiles)



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Note: Ward level geography for Cambridgeshire can be found within the 2016/2017 Annual Public Health Report at: <http://cambridgeshireinsight.org.uk/health/aphr>

Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Relative deprivation at ward level is concentrated in Fenland in the north of Cambridgeshire.
- There are pockets of greater relative deprivation elsewhere in Cambridgeshire, most notably in north-east Cambridge, north Huntingdon and Littleport West.

Table 22. Indices of deprivation, 2015 – wards in the most deprived quintile (20%) of wards in Cambridgeshire by district

Area	Ward name	IMD score 2015
Fenland	Medworth	44.0
Fenland	Waterlees Village	43.4
Fenland	Clarkson	39.3
Fenland	Staithe	36.3
Fenland	Parson Drove & Wisbech St Mary	33.0
Fenland	Octavia Hill	31.7
Fenland	Peckover	30.3
Fenland	Kirkgate	29.3
Huntingdonshire	Huntingdon North	27.9
Fenland	Elm & Christchurch	27.6
Fenland	Roman Bank	27.4
Cambridge	Abbey	25.9
Fenland	March East	24.8
Cambridge	King's Hedges	24.0
Fenland	Lattersey	24.0
Fenland	Bassenhally	22.3
Fenland	Birch	21.5
Fenland	March North	21.2
Fenland	Slade Lode	21.0
Fenland	March West	20.5
East Cambridgeshire	Littleport West	20.1
Fenland	Benwick, Coates & Eastrea	19.8
Cambridge	Arbury	19.2
Cambridge	East Chesterton	18.9

Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Of the 24 wards in the most deprived quintile (20%) of wards in Cambridgeshire, 18 (three-quarters) of them are in Fenland. The 8 most deprived ward are all in Fenland.
- The remainder are in Cambridge (4 wards), East Cambridgeshire (1 ward) and Huntingdonshire (1 ward).

3.2 Socio-economic factors and wider determinants influencing health and wellbeing

Child poverty

Figure 28. Percentage of children in low income families (aged under 16), 2014

Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	↓	2,003,060	20.1	20.1	20.1
Cambridgeshire	↓	14,155	12.9	12.7	13.1
Cambridge	↓	2,715	15.9	15.4	16.5
East Cambridgeshire	↓	1,575	10.1	9.7	10.6
Fenland	→	3,745	21.3	20.7	21.9
Huntingdonshire	↓	3,710	11.9	11.6	12.3
South Cambridgeshire	↓	2,405	8.5	8.2	8.9

Source: HM Revenue and Customs (Personal Tax Credits: Related Statistics - Child Poverty Statistics)

- Statistically significantly better than the England average (2014)
- Statistically similar to the England average (2014)
- Statistically significantly worse than the England average (2014)

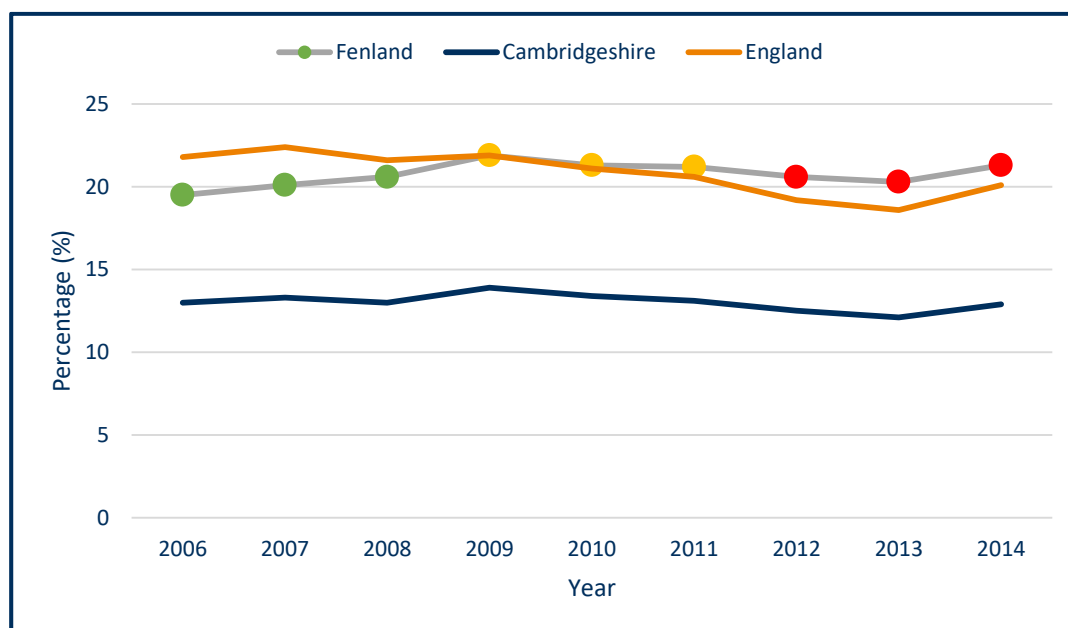
Trend ↑ Increasing / Getting worse ↑ Increasing / Getting better ↓ Decreasing / Getting worse ↓ Decreasing / Getting better → No significant change

Source: HMRC, from PHE Public Health Outcomes Framework

Key points:

- Fenland’s percentage of children aged under 16 living in poverty is statistically significantly worse than found in the England as a whole and there is no significant change in Fenland’s recent child poverty trend.
- All other Cambridgeshire districts have child poverty rates that are statistically significantly better than the England child poverty level. As in England, all these districts have decreasing recent trends.
- An internal Cambridgeshire comparison shows that Cambridge and Fenland have statistically significantly worse child poverty rates than the Cambridgeshire average. The remaining districts have statistically significantly better rates than the Cambridgeshire rate. Cambridge’s rate is always above the Cambridgeshire average, but has reduced over recent periods.

Figure 29. Trends in the percentage of children in low income families (aged under 16) - Fenland, Cambridgeshire and England, 2006 to 2014



- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: HMRC, from PHE Public Health Outcomes Framework

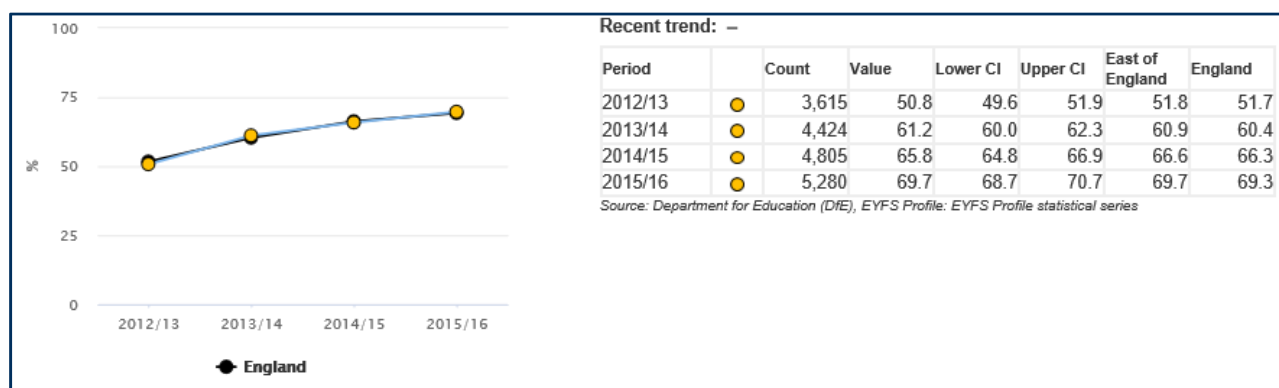
Key points:

- Fenland's rate of child poverty in children aged under 16 has worsened since 2006, increasing to 2009 before largely levelling off.
- In 2012, as the national position improved, Fenland's child poverty rate became statistically significantly worse than England's rate.
- Fenland is always statistically significantly worse than the Cambridgeshire rate and shows no significant change for the better compared with England or Cambridgeshire over the last 6 years.

USEFUL LINK: <http://www.phoutcomes.info>

Child development and educational attainment

Figure 30. School Readiness: the percentage of children achieving a good level of development at the end of reception (all pupils) in Cambridgeshire and England, 2012/13 to 2015/16



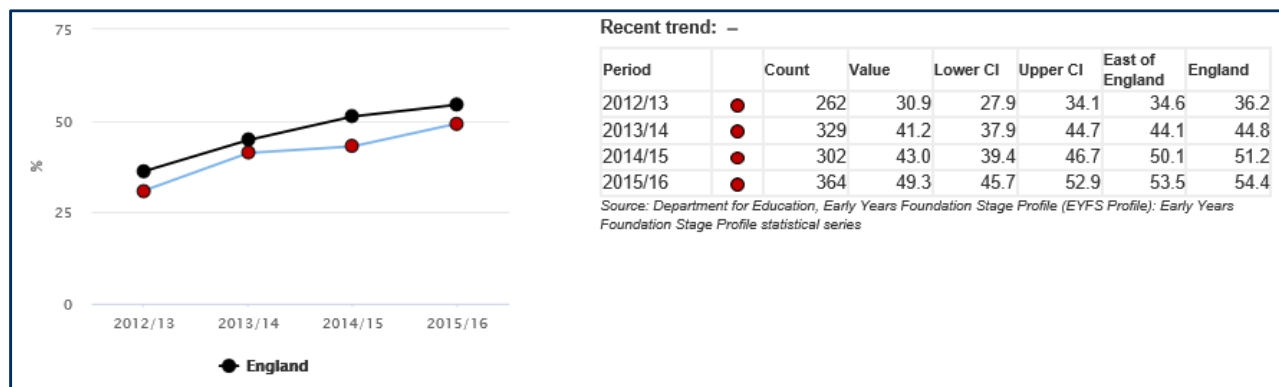
- Cambridgeshire statistically significantly better than the England average
- Cambridgeshire shire statistically similar to the England average
- Cambridgeshire statistically significantly worse than the England average

Source: Department of Education, from PHE Public Health Outcomes Framework

Key points:

- Cambridgeshire's rate is statistically similar to the England average and, in line with the national rate, has increased over recent periods.

Figure 31. School Readiness: the percentage of children with free school meal status achieving a good level of development at the end of reception (all pupils) in Cambridgeshire and England, 2012/13 to 2015/16



- Cambridgeshire statistically significantly better than the England average
- Cambridgeshire shire statistically similar to the England average
- Cambridgeshire statistically significantly worse than the England average

Source: Department of Education, from PHE Public Health Outcomes Framework

Key points:

- Cambridgeshire's percentage of children with free school meal status achieving a good level of development at the end of reception is statistically significantly worse than the England rate and has remained so between 2012/13 and 2015/16.
- While both England and Cambridgeshire have improving trends, the Cambridgeshire rate has remained lower than England's rate through the entire period.

USEFUL LINK: <http://www.phoutcomes.info>

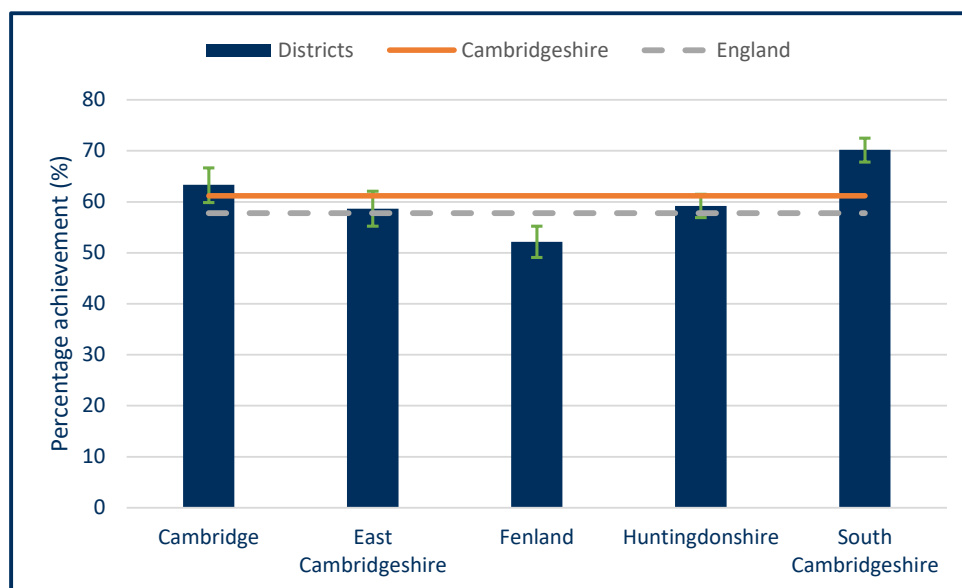
Table 23. Educational attainment - the proportion of pupils achieving at least 5 GCSEs at grade A*-C including English & Maths, 2015/16

Area	Percentage (%)	95% CI	
		Lower CI	Upper CI
Cambridge	63.3	59.9	66.7
East Cambridgeshire	58.7	55.2	62.1
Fenland	52.2	49.1	55.2
Huntingdonshire	59.2	56.9	61.5
South Cambridgeshire	70.2	67.8	72.5
Cambridgeshire	61.2	59.9	62.4
England	57.8	57.6	57.9

Statistically significantly better than the England average
 Statistically similar to the England average
 Statistically significantly worse than the England average

Source: Department of Education, from PHE Wider Determinants of Health Atlas

Figure 32. Educational attainment - the proportion of pupils achieving at least 5 GCSEs at grade A*-C including English & Maths, 2015/16



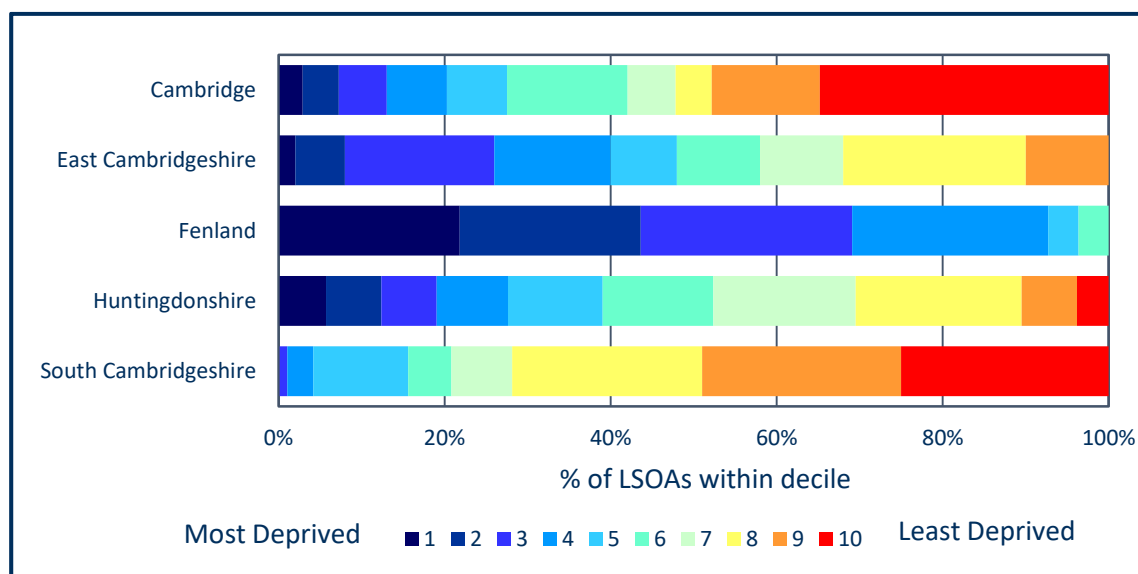
Source: Department of Education, from PHE Wider Determinants of Health Atlas

Key points:

- Fenland’s GCSE attainment rate is statistically significantly worse than the England average.
- The rates in East Cambridgeshire and Huntingdonshire do not differ from the national rate and the rates in Cambridgeshire as a whole, Cambridge and South Cambridgeshire are statistically significantly better when compared nationally.
- Fenland’s rate is also statistically worse than the Cambridgeshire rate. Achievement rates in Cambridge, East Cambridgeshire and Huntingdonshire are similar to the county average and the South Cambridgeshire percentage is statistically significantly better than Cambridgeshire’s.

USEFUL LINK: <https://fingertips.phe.org.uk/profile/wider-determinants>

Figure 33. Indices of Multiple Deprivation, 2015 – education, skills and training domain - percentage of lower super output areas (LSOAs) in national IMD deciles by district in Cambridgeshire



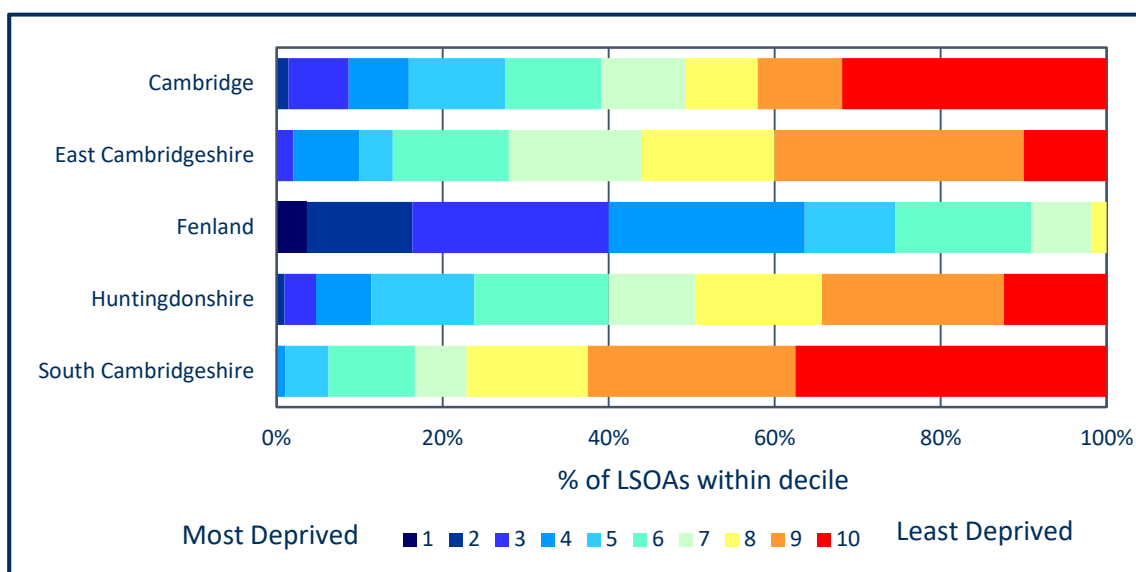
Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Related to education, skills and training, of Cambridgeshire districts, Fenland has by far the highest number of small areas (LSOAs) in the most deprived national groups and no small areas in the four least deprived groups.
- East Cambridgeshire has the next highest number of small areas in the relatively deprived national groups, followed by Huntingdonshire.
- Cambridge’s and South Cambridgeshire’s positions are more favourable, with the former having greater levels of deprivation but more small areas in the least deprived national group and the latter having more small areas overall in the least deprived groups and no areas in the two most deprived tenths.

Employment, worklessness, income and benefits

Figure 34. Indices of Multiple Deprivation, 2015 - employment domain - percentage of lower super output areas (LSOAs) in national decile by district in Cambridgeshire

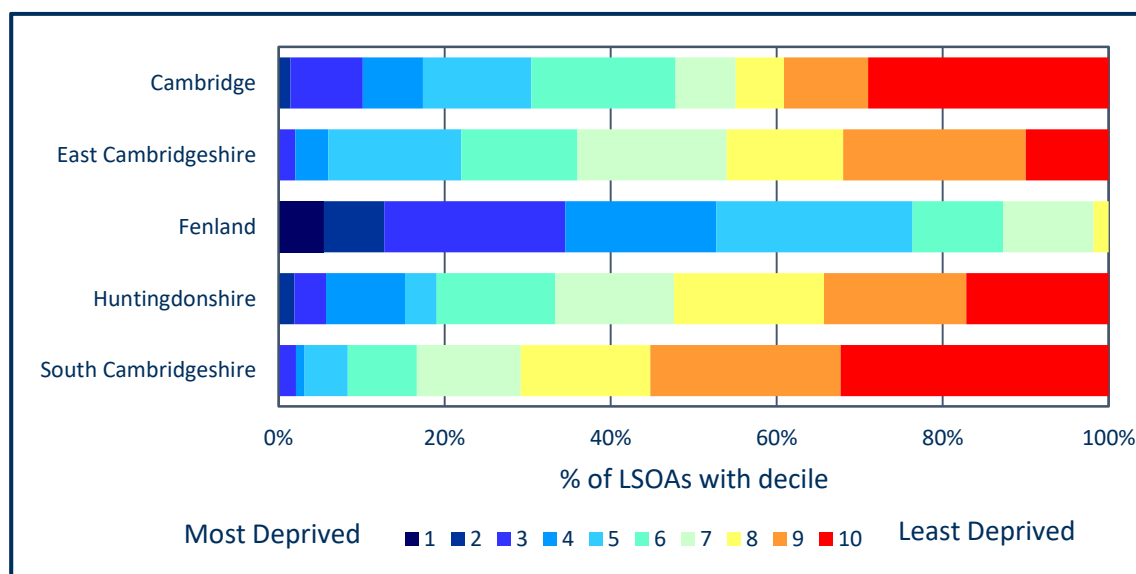


Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Related to employment, of Cambridgeshire districts, Fenland has by far the highest number of small areas (LSOAs) in the most deprived national groups and no small areas in the two least deprived groups.
- Huntingdonshire has the next highest number of most small areas across the relatively deprived national groups and Cambridge has a few small areas in the most deprived groups.
- Overall, Cambridge’s and South Cambridgeshire’s positions are more favourable.

Figure 35. Indices of Multiple Deprivation, 2015 - income domain - percentage of LSOAs in national decile by district



Source: Index of Multiple Deprivation 2015, Department for Communities & Local Government (DCLG)

Key points:

- Related to income levels, of Cambridgeshire districts, Fenland has by far the highest number of small areas (LSOAs) in the most deprived national groups and no small areas in the two least deprived groups.
- The picture in Huntingdonshire and East Cambridgeshire is relatively similar, although Huntingdonshire has more areas in more deprived groups than East Cambridgeshire and, conversely, more areas in the least deprived decile.
- Cambridge has a few small areas in the most deprived groups.
- Overall, Cambridge's and South Cambridgeshire's positions are more favourable.

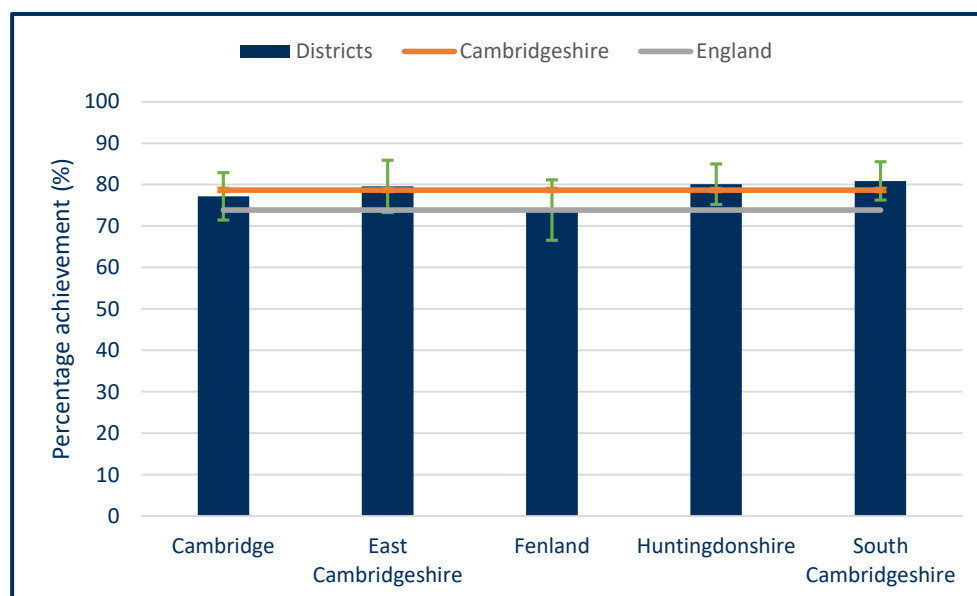
Table 24. Percentage of people aged 16-64 in employment (Persons), 2015/16

Area	Number in employment	%	Recent trend	95% CI	
				Lower CI	Upper CI
Cambridge	72,100	77.2	↑5	71.5	82.9
East Cambridgeshire	42,200	79.6	↑5	73.3	85.9
Fenland	43,700	73.9	↑5	66.6	81.2
Huntingdonshire	87,600	80.1	↑5	75.2	85.0
South Cambridgeshire	75,600	80.9	↑5	76.3	85.5
Cambridgeshire	321,200	78.7	↑5	76.2	81.2
England	25,447,200	73.9	↑5	73.7	74.1

■ Statistically significantly better than the England average
■ Statistically similar to the England average
■ Statistically significantly worse than the England average
↑ n Getting better (number of years on which trend based)
→ n No significant change (number of years on which trend based)
↓ n Getting worse (number of years on which trend based)

Source: NOMIS from PHE Public Health Outcomes Framework

Figure 36. Percentage of people aged 16-64 in employment (Persons), 2015/16



Source: NOMIS from PHE Public Health Outcomes Framework

Key points:

- Compared with England’s average, Cambridgeshire has a statistically significantly better rate of people in employment, as do Huntingdonshire and South Cambridgeshire.
- Employment rates in Cambridge, East Cambridgeshire and Fenland are similar to the national average.
- Within Cambridgeshire, there are no statistically important differences between the Cambridgeshire average and any of the districts. However, Fenland has the lowest employment rate based on a simple ranking of Cambridgeshire rates at a level identical to the national rate.

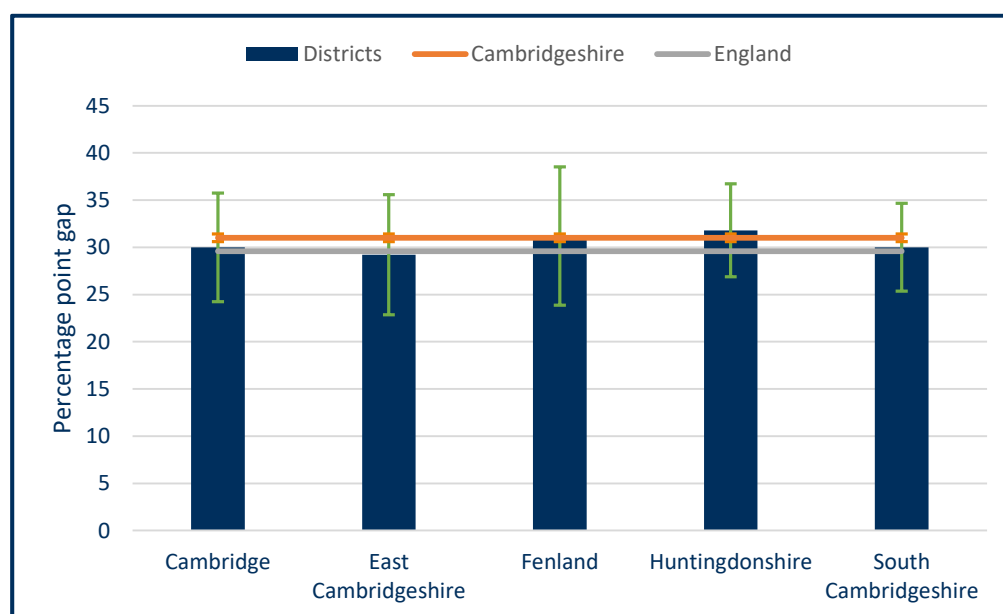
Table 25. Gap in the employment rate between those with a long-term health condition and the overall employment rate (ages 16-64 years), 2015/16

Area	Gap (% point)	95% CI	
		Lower CI	Upper CI
Cambridge	30.0	24.2	35.8
East Cambridgeshire	29.2	22.8	35.6
Fenland	31.2	23.9	38.5
Huntingdonshire	31.8	26.9	36.7
South Cambridgeshire	30.0	25.3	34.7
Cambridgeshire	31.0	28.5	33.5
England	29.6	29.4	29.8



Source: NOMIS from PHE Public Health Outcomes Framework

Figure 37. Gap in the employment rate between those with a long-term health condition and the overall employment rate (ages 16-64 years), 2015/16



Source: NOMIS from PHE Public Health Outcomes Framework

Key points:

- There is no statistically important difference between any of Cambridgeshire’s rates and the national rate for the gap in the employment rate between those with a long-term health condition and the overall employment rate.
- Based on a simple ranking Huntingdonshire and Fenland have the greatest percentage point gaps.

USEFUL LINK: <http://www.phoutcomes.info>

Table 26. Employment Support Allowance (ESA) claimants for mental and behavioural disorders: rate per 1,000 working age population (people aged 16-64 years), 2016

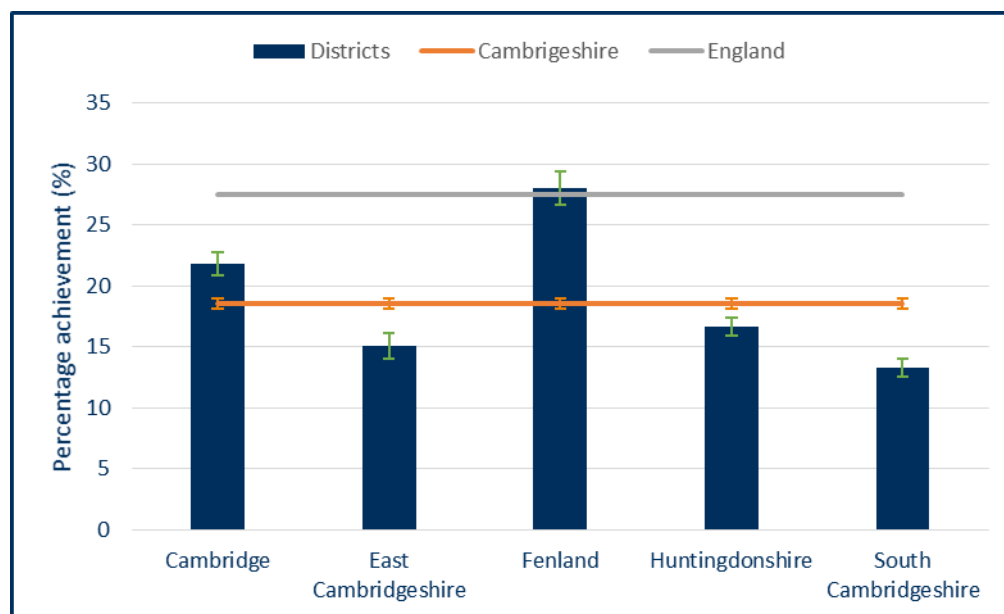
Area	Number of claimants	Recent trend	Rate/1,000	95% CI	
				Lower CI	Upper CI
Cambridge	2,070	↑5	21.8	20.9	22.8
East Cambridgeshire	800	↑5	15.1	14.0	16.1
Fenland	1,680	↑5	28.0	26.7	29.4
Huntingdonshire	1,820	↑5	16.6	15.9	17.4
South Cambridgeshire	1,270	↑5	13.3	12.6	14.1
Cambridgeshire	7,650	↑5	18.5	18.1	19.0
England	954,230	↑5	27.5	27.5	27.6

↓ n Decreasing (number of years on which trend based)

↑ n Increasing (number of years on which trend based)

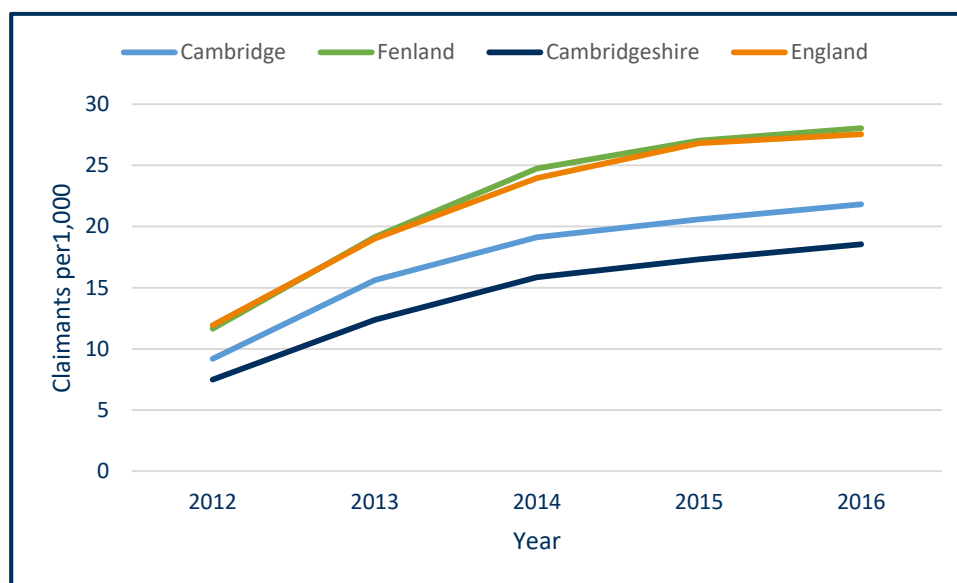
Source: NOMIS, from PHE Mental Health and Wellbeing JSNA

Figure 38. Employment Support Allowance (ESA) claimants for mental and behavioural disorders: rate per 1,000 working age population (people aged 16-64 years), 2016



Source: NOMIS, from PHE Mental Health and Wellbeing JSNA

Figure 39. Trends in employment Support Allowance (ESA) claimants for mental and behavioural disorders: rate per 1,000 working age population (people aged 16-64 years), 2012-2016



Source: NOMIS, from PHE Mental Health and Wellbeing JSNA

Key points:

- Fenland’s rate of employment support allowance (ESA) claimants for mental and behavioural disorders is the only one in Cambridgeshire that is statistically significantly similar to the England rate. Rates in all other districts, and the county average, are statistically significantly better than the England level.
- Cambridge’s rate, along with Fenland’s rate, are higher than Cambridgeshire average, with all other district rates being lower than the county rate.
- Cambridgeshire, all of the districts and England have an increasing rate of claimants with mental and behavioural disorders.

USEFUL LINK: <http://fingertips.phe.org.uk/mh-jsna>

Table 27. Wider determinants of health and wellbeing: summary of key indicators from Public Health England's Wider Determinants Atlas

Category	Indicator*	Period	England value	Cambs value	Cambs recent trend	Cambridgeshire Districts				
						Cambridge	E Cambs	Fenland	Hunts	S Cambs
Natural & built environment	Density of fast food outlets - per 10,000 popn	2014	88.2	59.4	-	93.4	40.4	92.1	56.4	24.1
	Air pollution: fine particulate matter concentration	2015	8.3	8.8	-	8.3	8.7	9.3	9.1	8.5
	Overcrowded households (%)	2011	4.8	3.1	-	5.8	2.3	3.4	2.4	2.2
Work & labour market	Employment rate ages 16-64 (%)	2015/16	73.9	78.7	↑5	77.2	79.6	73.9	80.1	80.9
	Economic inactivity rate ages 16-64 (%)	2015/16	22.0	17.6	↓5	19.0	15.4	19.2	17.6	16.5
	Sickness absence (%)	2013-15	2.2	3.3	-	3.5	2.5	5.0	2.8	3.3
Vulnerability	Unpaid carers (%)	2011	2.4	1.9	-	1.3	2.0	3.1	2.0	1.6
Income	Dependent children aged <20 in low income families (%)	2014	19.9	12.6	↓5	15.7	10.0	20.7	11.7	8.3
	Dependent children aged <16 in low income families (%)	2014	20.1	12.9	↓5	15.9	10.1	21.3	11.9	8.5
	Income deprived older people 60+ (IDAOP1) (%)	2015	16.2	11.3	-	12.7	11.7	16.4	9.6	8.4
Crime	Violent crime: emergency hospital admissions per 100,000	2013/14-15/16	44.8	24.8	-	33.3	22.4	37.6	18.6	22.9
Education	GCSE achieved 5A*-C including English & Maths (%)	2015/16	57.8	61.2	-	63.3	58.7	52.2	59.2	70.2
	Pupil absence (%)	2015/16	4.6	4.4	↓5	5.0	4.1	4.7	4.4	4.0

Note: * Full indicator descriptions and definitions are available at <https://fingertips.phe.org.uk/profile/wider-determinants>

- ↑ n Getting better - increase (number of years on which trend based)
- n No significant change
- ↓ n Getting worse - decrease (number of years on which trend based)

- ↓ n Getting better - decrease (number of years on which trend based)
- n No significant change (number of years on which trend based)
- ↑ n Getting worse - increase (number of years on which trend based)

- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: PHE wider determinants atlas

Key points:

- **Density of fast food outlets** – Cambridgeshire and most district rates are statistically significantly better than the England average. The rates in Cambridge and Fenland are statistically similar to the England rate, but are statistically significantly worse than the Cambridgeshire average.
- **Air pollution: fine particulate matter concentration** – this measure is not formally tested statistically, but based on a simple ranking Fenland and Huntingdonshire have the higher levels. All other levels within Cambridgeshire, including the county average, are around or above the national level.
- **Overcrowded households** – Cambridge has statistically higher levels of household overcrowding than found on average in England. Cambridgeshire and all of the districts have statistically significantly lower levels. Cambridge and Fenland have levels that are statistically higher than the Cambridgeshire rate.
- **Employment rate ages 16-64 years** - Compared with England's average, Cambridgeshire has a statistically significantly better rate of people in employment, as do Huntingdonshire and South Cambridgeshire. Employment rates in Cambridge, East Cambridgeshire and Fenland are similar to the national average. Within Cambridgeshire, there are no statistically important differences between the Cambridgeshire average and any of the districts. However, Fenland has the lowest employment rate based on a simple ranking of Cambridgeshire rates. In Cambridgeshire the employment rate has increased over the last 5 years.
- **Economic inactivity rate ages 16-64 years** – rates in Cambridgeshire as a whole, East Cambridgeshire and South Cambridgeshire are statistically better than the England average. Cambridge, Fenland and Huntingdonshire have levels of economic inactivity that do not differ significantly to the England level. There are no important statistical differences at district level compared with the county average, but based on a simple ranking Fenland and Cambridge have the highest levels of economic inactivity. The Cambridgeshire rate has decreased over the last 5 years.
- **Sickness absence** – Fenland and Cambridgeshire have significantly higher rates of sickness absence than found nationally. Of the other districts, none of their levels differ from the national position statistically. There are no important statistical differences at district level compared with the county average.
- **Unpaid carers** – Fenland has a statistically higher level of unpaid carers than England and Cambridgeshire collectively. All other districts have significantly lower rates of unpaid carers than England. The rate in Huntingdonshire is statistically significantly higher than the county's rate, with Cambridge and South Cambridgeshire having significantly lower rates.
- **Dependent children aged <20 years in low income families** – Fenland's rate is higher than the England rate and the difference is statistically important. Cambridgeshire's rate, along with all other district's rates, are statistically significantly lower than the England average. Internal to Cambridgeshire, Cambridge and Fenland have levels that are significantly worse than the county average and all other districts have rates that are significantly better.
- **Dependent children aged <16 years in low income families** - Fenland's rate is higher than the England rate and the difference is statistically important. Cambridgeshire's rate, along with all other district's rates, are statistically significantly lower than the England average. Internal to Cambridgeshire, Cambridge and Fenland have levels that are significantly worse than the county average and all other districts have rates that are significantly better.
- **Income deprived older people aged 60+ years (IDAOP1)** – while not statistically assessed, the highest levels within Cambridgeshire are in Fenland with a rate that is around the national average. All other districts, and Cambridgeshire, have lower levels than found nationally, with Huntingdonshire and South Cambridgeshire having the lowest levels.
- **Violent crime: emergency hospital admissions** – the levels in Cambridgeshire are all statistically better than the national rate, other than in Fenland where the level is similar. The rates in Cambridge and Fenland are statistically significantly higher than the Cambridgeshire average, with rates in Huntingdonshire significantly better.

- **GCSE achieved 5A*-C including English & Maths** - Fenland's GCSE attainment rate is statistically significantly worse than the England average. The rates in East Cambridgeshire and Huntingdonshire do not differ from the national rate and the rates in Cambridgeshire as a whole, Cambridge and South Cambridgeshire are statistically significantly better when compared nationally. Fenland's rate is also statistically worse than the Cambridgeshire rate. Achievement rates in Cambridge, East Cambridgeshire and Huntingdonshire are similar to the county average and the South Cambridgeshire percentage is statistically significantly better than Cambridgeshire's.
- **Pupil absence** – the rate in Cambridge is significantly worse than the Cambridgeshire and national average and rates in Fenland and Huntingdonshire are similar. The rates in the other districts and Cambridgeshire as a whole are significantly better than in England.

USEFUL LINK: <https://fingertips.phe.org.uk/profile/wider-determinants>

4. LIFESTYLES, RISK FACTORS AND HEALTH AND WELLBEING

4.1 Excess weight

Children

Table 28. Prevalence of excess weight in children (overweight or obese) by district, Cambridgeshire, 2015/16

Area	Reception Year			Year 6		
	Number	Percentage	Trend	Number	Percentage	Trend
Cambridge	172	16.4	↓ 7	189	23.2	↓ 5
East Cambridgeshire	207	19.7	→ 10	223	29.2	→ 10
Fenland	222	21.4	↓ 5	294	33.9	→ 10
Huntingdonshire	370	19.0	→ 10	506	30.0	→ 10
South Cambridgeshire	299	17.3	↓ 5	380	25.1	↓ 9
Cambridgeshire	1,270	18.7	↓ 5	1,592	28.2	↓ 5
England	138,432	22.1	↓	186,074	34.2	↑

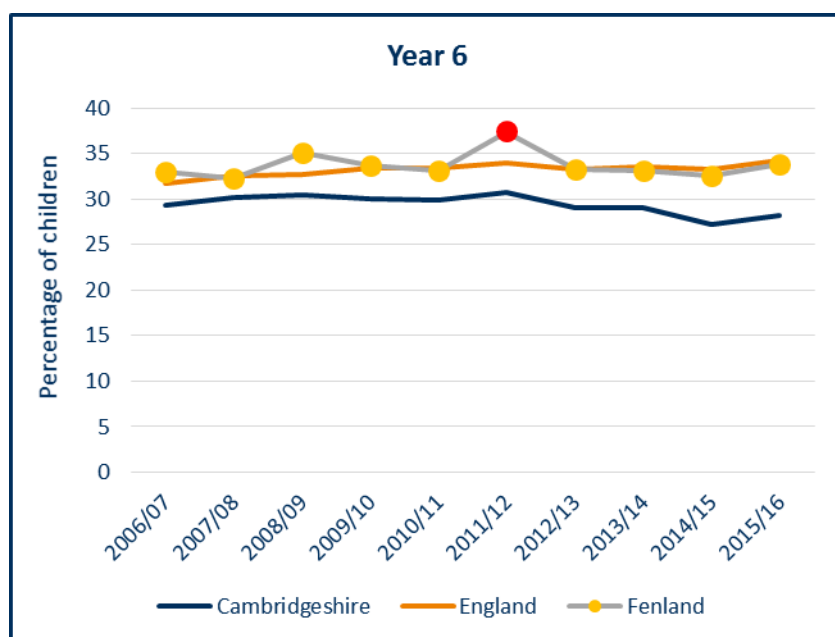
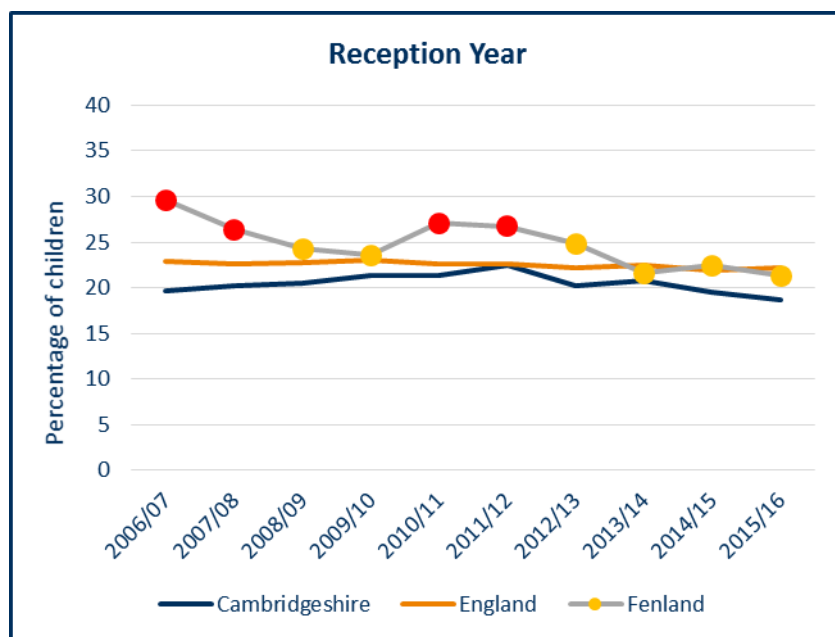
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average
↓ n	Getting better (number of years on which trend based)
→ n	No significant change (number of years on which trend based)
↑ n	Getting worse (number of years on which trend based)

Source: Public Health England Public Health Outcomes Framework Indicator 2.06 (National Child Measurement Programme, NHS Digital)

Key point:

- Rates of excess weight in children in Reception Year and Year 6 are statistically similar to the England average in Fenland but statistically significantly better elsewhere and for the county as a whole.

Figure 40. Trends in prevalence of excess weight in children (overweight or obese), Fenland, 2006/07-2015/16



- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework Indicator 2.06 (National Child Measurement Programme, NHS Digital)

Key point:

- The percentage of children with excess weight in Fenland has fallen in Reception Year children but has remained stable in Year 6.

Figure 41. Prevalence of obesity in Reception Year by Lower Super Output Area, Cambridgeshire, 2013/14 to 2015/16

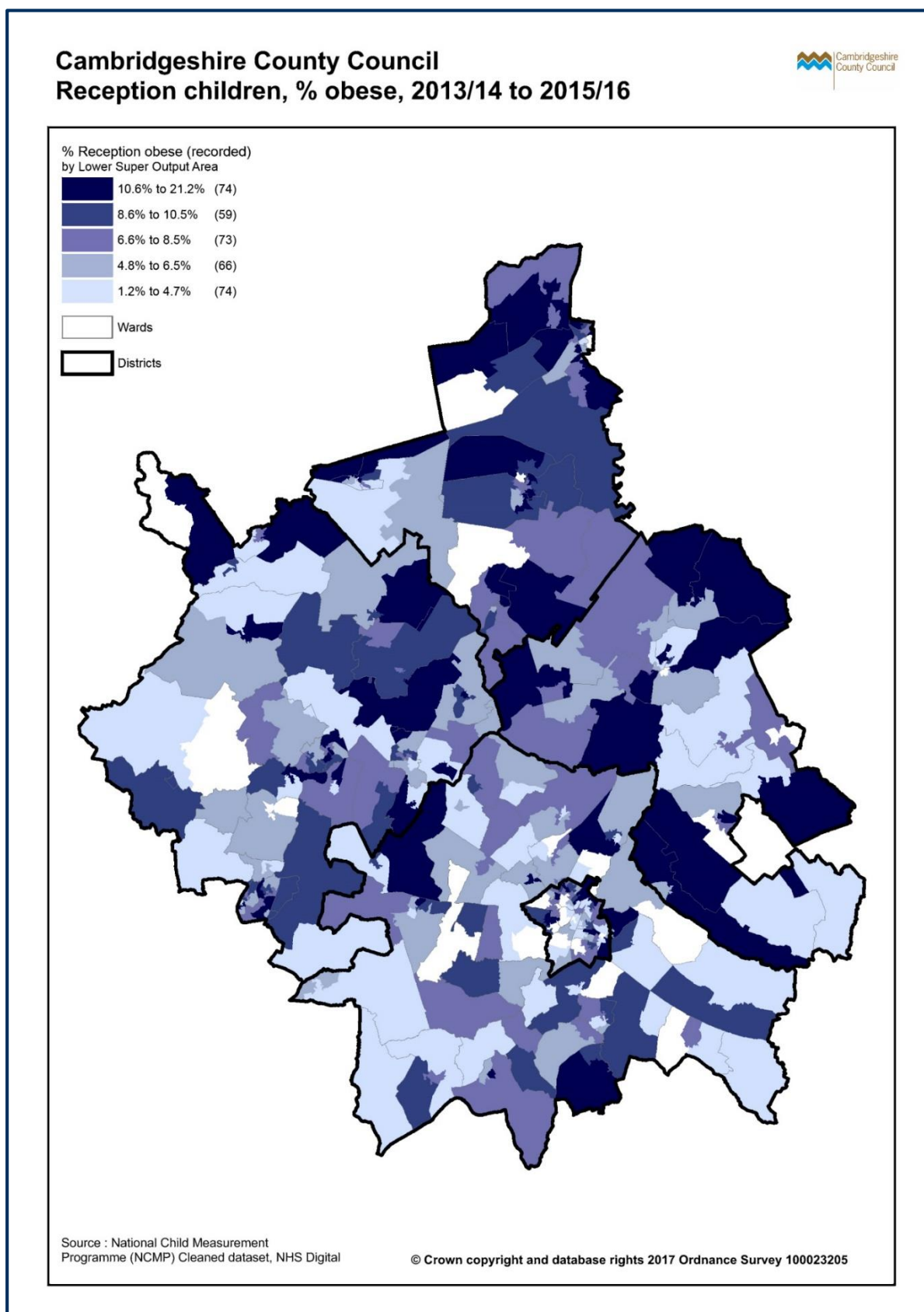
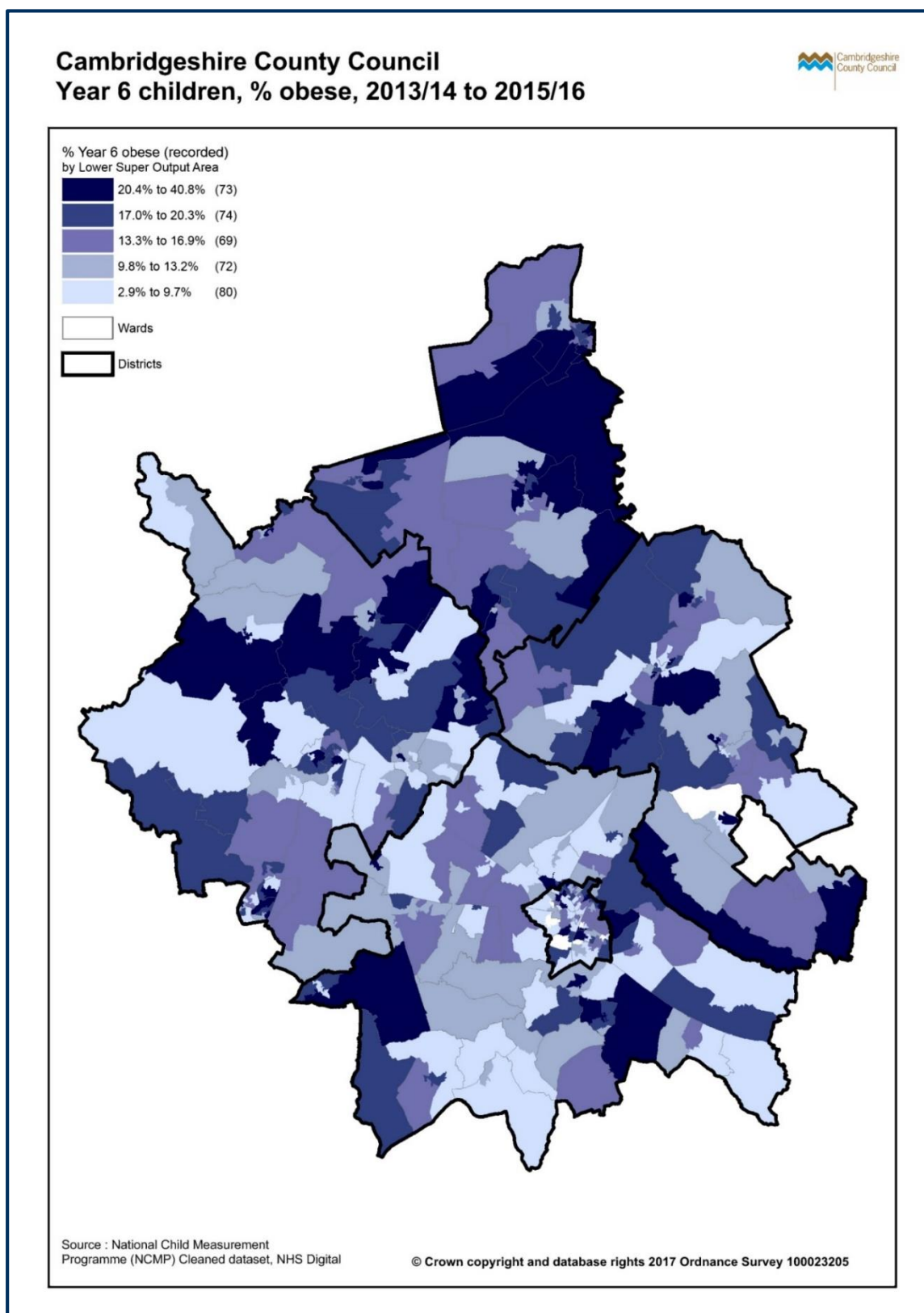


Figure 42. Prevalence of obesity in Year 6 by Lower Super Output Area, Cambridgeshire, 2013/14 to 2015/16






Key point:

- The prevalence of obesity in Reception and Year 6 varies widely, with pockets of high prevalence across the county.

Adults

Table 29. Prevalence of excess weight in adults (16+) (overweight or obese) by district, Cambridgeshire, 2013-15

Area	Percentage	Number of people
Cambridge	46.7	51,850
East Cambridgeshire	68.1	47,847
Fenland	72.9	60,138
Huntingdonshire	67.6	96,592
South Cambridgeshire	63.6	79,630
Cambridgeshire	63.2	336,144
England	64.8	28,990,851

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average




Sources: Public Health England Public Health Outcomes Framework Indicator 2.12 (Active People Survey, Sport England), Office for National Statistics mid-2016 population estimates

Key points:

- The rate of excess weight in adults (16+) is statistically significantly better than the England average for Cambridgeshire as a whole. At 63.2% however, this still equates to just over 336,000 people across the county.
- At district level, the percentages are statistically significantly worse than the national average in East Cambridgeshire, Fenland and Huntingdonshire.
- The red-amber-green (RAG) ratings for 2013-15, for the county and districts, remained the same compared to 2012-14 [data not shown].

Table 30. Prevalence of obesity in adults (18+) by district of general practice location, Cambridgeshire, 2015/16

Area of GP location	Percentage	Number of people
Cambridge	4.7	7,043
East Cambridgeshire	8.7	5,846
Fenland	13.0	12,203
Huntingdonshire	8.8	12,557
South Cambridgeshire	6.5	6,357
Cambridgeshire	7.9	44,006
England	9.5	4,317,919

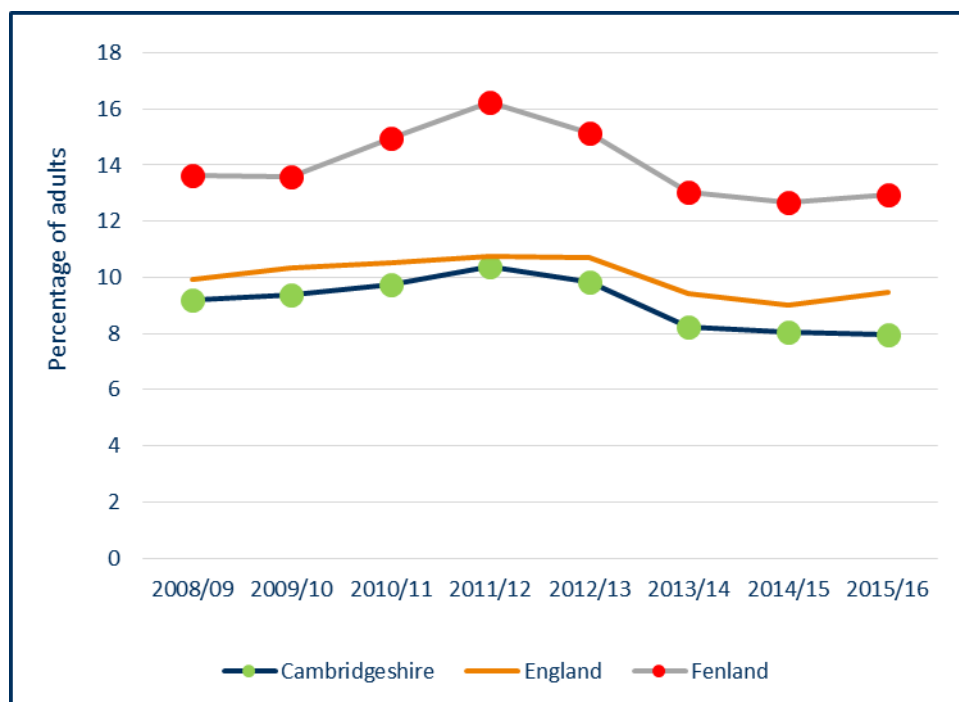
	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The recorded prevalence of obesity among patients registered at general practices is statistically significantly higher than the England average among patients registered with Fenland practices.
- The prevalence of obesity as recorded by general practices is likely to be an underestimate due to infrequent recording but variation by district is likely to be valid if levels and frequency of recording are consistent across the county.

Figure 43. Trends in prevalence of obesity in adults*, Fenland, 2008/09-2015/16



* 2008/09-2014/15: Adults=16+; 2015/16: Adults=18+

- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalence of obesity has been statistically significantly worse than the national average in Fenland since 2008/09, though rates have reduced over the last 5 years.
- Some caution should be exercised in interpreting QOF data as recording completeness can vary.

Table 31. General practices with statistically significantly higher than national average rates of recorded obesity, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Fenland	George Clare, Chatteris	18.9
Fenland	Parson Drove	18.7
Fenland	Riverside Practice, March	17.2
Fenland	Doddington	15.3
Huntingdonshire	Rainbow Surgery, Ramsey	14.8
Fenland	Trinity Surgery, Wisbech	14.8
Fenland	Cornerstone Practice, March	13.6
Huntingdonshire	Church St, Somersham	13.2
East Cambridgeshire	Littleport	13.2
Fenland	Mercheford House, March	12.3
Huntingdonshire	Priory Fields, Huntingdon	11.7
Fenland	Manea	11.5
Fenland	Jenner Health Centre, Whittlesey	11.3
East Cambridgeshire	Haddenham	11.2
Huntingdonshire	Acorn Surgery, Huntingdon	11.1
Huntingdonshire	Moat House, Warboys	10.8
South Cambridgeshire	Maple Surgery, Bar Hill Health Centre	10.6
Fenland	Queen St, Whittlesey	10.2
Fenland	North Brink, Wisbech	10.1

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- Many practices in Cambridgeshire with statistically significantly higher than national average rates of recorded obesity are located in Fenland (11), but other practices are located in Huntingdonshire (5), East Cambridgeshire (2) and South Cambridgeshire (1).

4.2 Physical activity




Children

Table 32. Physical activity and sedentary behaviour in 15 year olds, Cambridgeshire, 2014/15

Area	Percentage physically active ¹	Percentage sedentary ²
Cambridgeshire	11.9	68.5
England	13.9	70.1

1. Percentage of 15 year olds physically active for at least one hour per day seven days a week

2. Percentage of 15 year olds with a mean daily sedentary time in the last week over 7 hours per day

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, What About YOUth (WAY) Survey

Key point:

- Based on data from the What About YOUth Survey, the percentages of 15 year olds physically active and sedentary are statistically similar to the England average.

Table 33. Inactivity in young people - percentage of children that didn't exercise and have to breathe harder at all in the week before survey, Cambridgeshire, 2016

Area of school location	Year 8	Year 10
Cambridge	6.5%	8.3%
East Cambridgeshire	5.2%	9.7%
Fenland	4.7%	8.8%
Huntingdonshire	4.1%	9.5%
South Cambridgeshire	3.4%	5.9%
Cambridgeshire	4.3%	8.0%

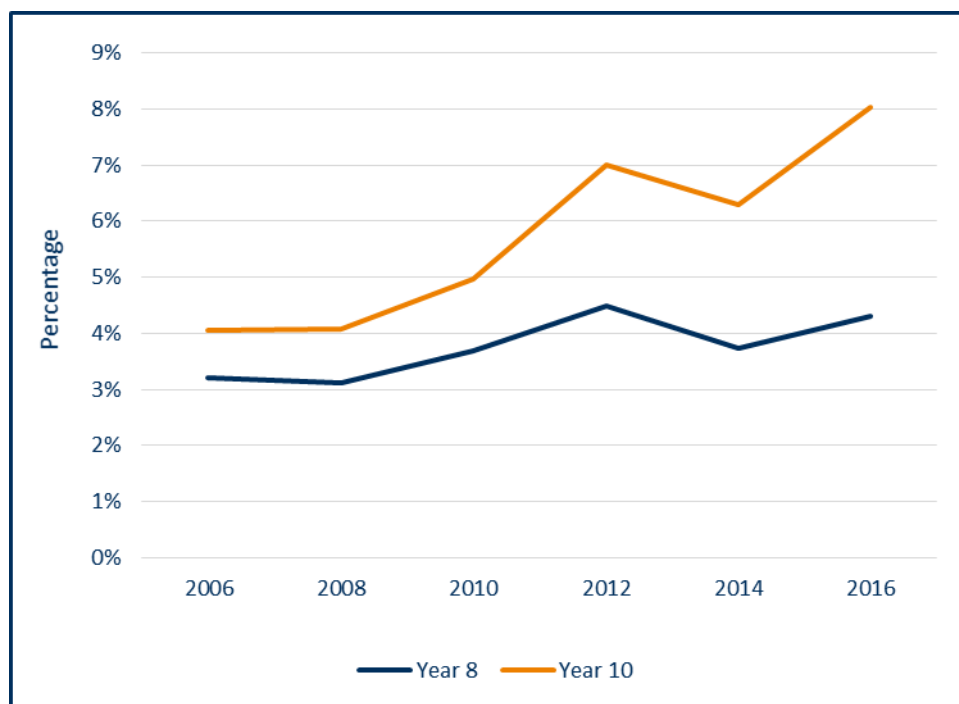
Note: Two Secondary schools did not take part in 2016. One in Fenland and one in East Cambridgeshire. If a school took part there may not be samples from both Year 8 and Year 10. The Cambridgeshire total includes records that weren't assigned to a district in HRBS raw dataset.

Source: Health Related Behaviour Survey, School Health Education Unit

Key point:

- Local data from the Health Related Behaviour Survey indicate higher levels of inactivity as children grow up, with 8% of Year 10 Cambridgeshire children inactive in the week before survey compared to 4% of Year 8 children.

Figure 44. Trends in inactivity in young people - percentage of children that didn't exercise and have to breathe harder at all in the last week, Cambridgeshire, 2006-2016



Source: Health Related Behaviour Survey, School Health Education Unit

Key point:




- The percentages of Cambridgeshire children inactive have notably increased, particularly in Year 10 where the percentage double from 4% to 8% between 2006 and 2016.

Adults

Table 34. Percentage of adults physically active*, Cambridgeshire, 2015

Area	Percentage	Number of people
Cambridge	69.8	77,497
East Cambridgeshire	53.8	37,800
Fenland	47.9	39,515
Huntingdonshire	57.9	82,732
South Cambridgeshire	59.5	74,497
Cambridgeshire	58.6	311,678
England	57.0	25,501,211

* Percentage of adults 16+ achieving at least 150 minutes of physical activity per week in accordance with UK Chief Medical Officer (CMO) recommended guidelines.

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Sources: Public Health England Public Health Outcomes Framework Indicator 2.13 (Active People Survey, Sport England), Office for National Statistics mid-2016 population estimates




Key points:

- The rate of physical activity in adults (16+) is statistically similar to the England average for Cambridgeshire as a whole.
- At district level, the percentage is statistically significantly worse than the national average in Fenland but statistically significantly better in Cambridge.

Table 35. Percentage of adults physically inactive*, Cambridgeshire, 2015

Area	Percentage	Number of people
Cambridge	14.7	16,321
East Cambridgeshire	29.7	20,867
Fenland	37.4	30,853
Huntingdonshire	25.6	36,579
South Cambridgeshire	23.8	29,799
Cambridgeshire	25.3	134,564
England	28.7	12,840,084

* Percentage of adults 16+ doing less than 30 “equivalent” minutes of at least moderate intensity physical activity per week in bouts of 10 minutes or more in the previous 28 days.

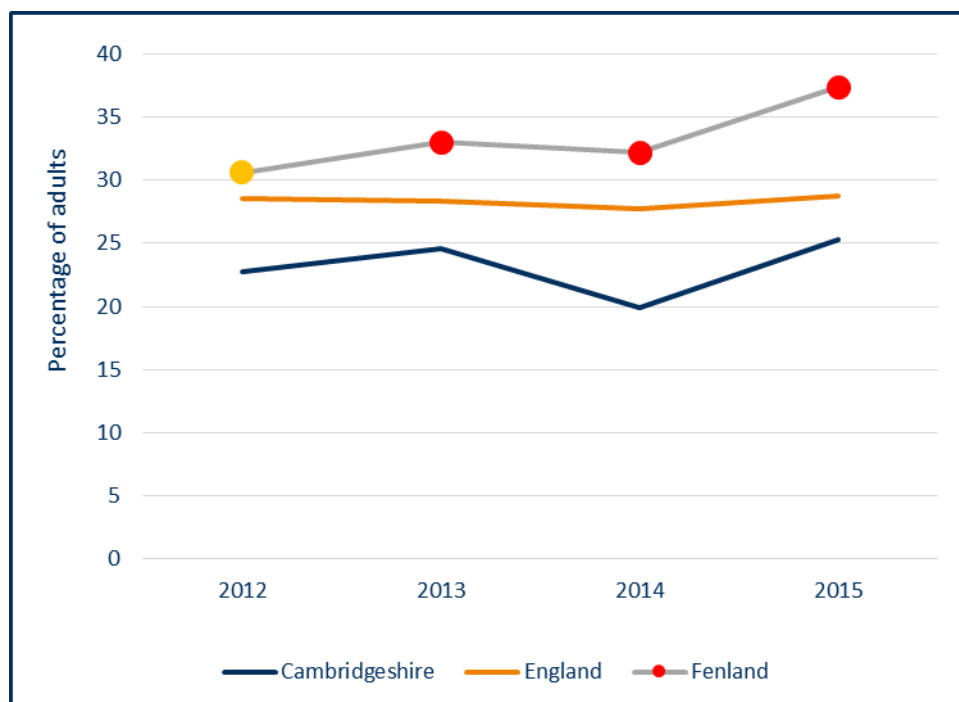
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Sources: Public Health England Public Health Outcomes Framework Indicator 2.13 (Active People Survey, Sport England), Office for National Statistics mid-2016 population estimates

Key points:

- The rate of physical inactivity in adults (16+) is statistically significantly better than the England average for Cambridgeshire as a whole. At 25.3% however, this still equates to around 135,000 people across the county.
- At district level, the percentage is statistically significantly worse than the national average in Fenland.

Figure 45. Trends in physical inactivity in adults, Fenland, 2012-2016



- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework Indicator 2.13 (Active People Survey, Sport England)

Key points:

- Although the trend is not statistically assessed, the percentage of adults inactive in Fenland appears to be increasing.

4.3 Smoking




Prevalence in children

Table 36. Smoking prevalence (percentage) in 15 year olds, Cambridgeshire, 2014/15

Area	Current smokers ¹	Regular smokers ²
Cambridgeshire	8.2	5.2
England	8.2	5.5

1. Regular smokers (>1 cigarette per week) and occasional smokers (smoke cigarettes sometimes)

2. Regular smokers (>1 cigarette per week)

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, What About YOUth (WAY) Survey

Key point:

- Based on data from the What About YOUth Survey, the percentages of 15 year olds that are current smokers and regular smokers are statistically similar to the England average.

Table 37. Smoking prevalence in young people - regular or occasional smokers, Cambridgeshire, 2016

Area of school location	Year 8	Year 10
Cambridge	1.4%	12.8%
East Cambridgeshire	2.1%	6.4%
Fenland	2.1%	13.5%
Huntingdonshire	1.7%	9.0%
South Cambridgeshire	2.2%	11.3%
Cambridgeshire	1.9%	10.2%

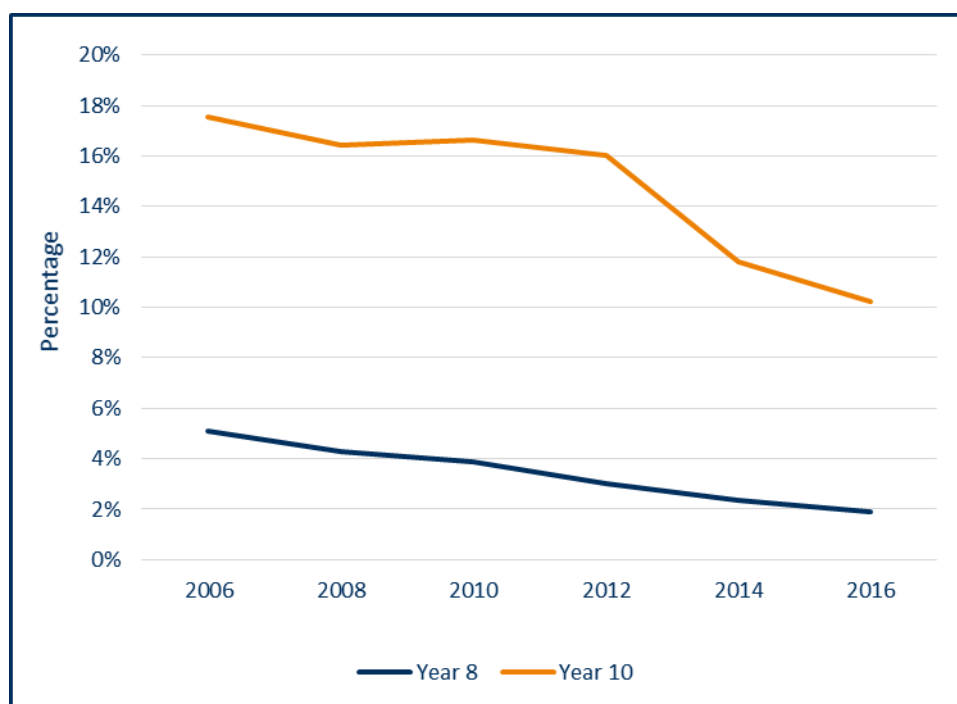
Note Two Secondary schools did not take part in 2016. One in Fenland and one in East Cambridgeshire. If a school took part there may not be samples from both Year 8 and Year 10. Cambridgeshire total includes records that weren't assigned to a district in HRBS raw dataset.

Source: Health Related Behaviour Survey, School Health Education Unit

Key point:

- Local data from the Health Related Behaviour Survey indicate a steep increase in levels of smoking between Years 8 and 10, with 10% of Year 10 children smoking compared to 2% of Year 8 children.

Figure 46. Trends in smoking prevalence in young people - regular or occasional smokers, Cambridgeshire, 2006-2016



Source: Health Related Behaviour Survey, School Health Education Unit




Key point:

- Smoking prevalence in Cambridgeshire children has notably decreased in both Year 8 and Year 10 since 2006. In Year 10, this seems particularly apparent after 2012.

Prevalence in adults

Table 38. Smoking prevalence in adults, Cambridgeshire, 2016

Area	Percentage	Number of people
Cambridge	15.1	16,415
East Cambridgeshire	15.3	10,438
Fenland	21.6	17,336
Huntingdonshire	14.0	19,434
South Cambridgeshire	12.8	15,564
Cambridgeshire	15.2	78,675
England	15.5	6,739,832

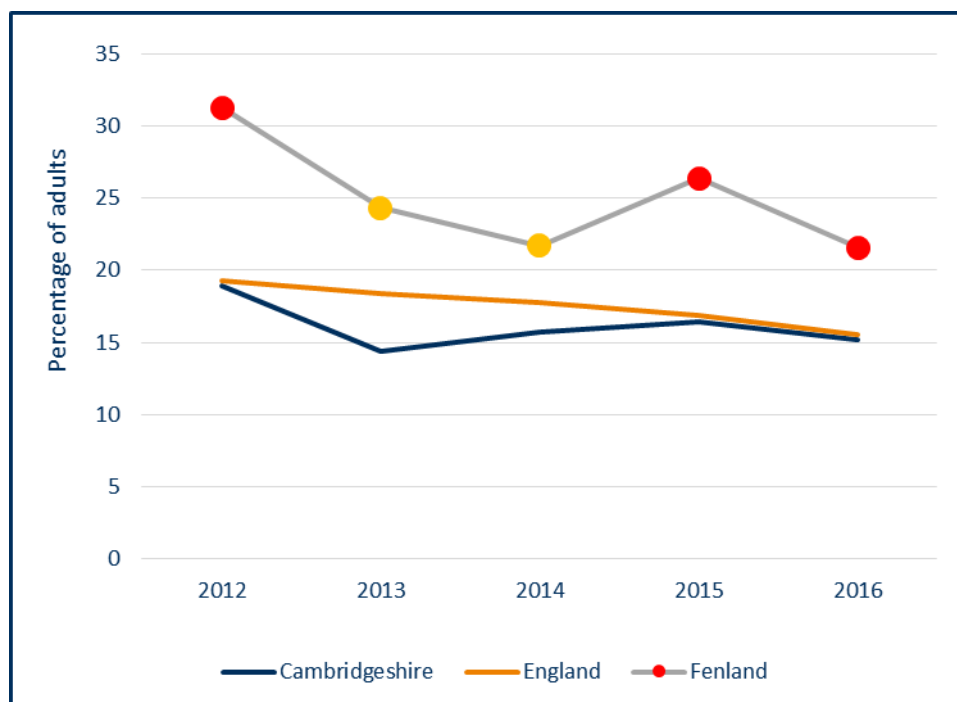
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Sources: Public Health England Public Health Outcomes Framework Indicator 2.14 (Annual Population Survey), Office for National Statistics mid-2016 population estimates

Key points:

- Smoking prevalence in adults 18+ is statistically similar to the England average for Cambridgeshire as a whole. At 15.2% however, this still equates to just under 79,000 adult smokers across the county.
- At district level, the percentage is statistically significantly worse than the national average in Fenland.

Figure 47. Trends in smoking prevalence in adults, Fenland, 2012-2016



- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework Indicator 2.14 (Annual Population Survey)

Key point:

- Although the trend is not statistically assessed, the percentage of adults smoking in Fenland appears to be decreasing but has generally remained statistically significantly higher than the national average.

Table 39. General practices with statistically significantly higher than national average recorded smoking prevalence, Cambridgeshire, 2015/16

Area	Practice	Prevalence (%)
Fenland	Trinity Surgery	35.8
Huntingdonshire	Acorn Surgery	26.7
Cambridge	Arbury Road Surgery	25.4
Fenland	Riverside Practice	24.3
Fenland	North Brink Practice	24.1
Cambridge	East Barnwell Health Centre	23.5
Fenland	Clarkson Surgery	22.6
Huntingdonshire	Priory Fields Surgery	22.5
Fenland	George Clare Surgery	22.5
Huntingdonshire	St Neots Health Centre	21.8
East Cambridgeshire	Staploe Medical Centre	21.8
Fenland	Cornerstone Practice	21.6
East Cambridgeshire	St. George's Medical Centre	21.2
Cambridge	Nuffield Road Medical Centre	20.6
England		18.1

Source: Public Health England National General Practice Profiles (NHS Digital Quality and Outcomes Framework), Cambridgeshire County Council Public Health Intelligence

Key point:




- Many practices in Cambridgeshire with statistically significantly higher than national average rates of smoking are located in Fenland (6), but eight other practices are located elsewhere in the county: Cambridge (3), Huntingdonshire (3) and East Cambridgeshire (2).

Smoking cessation

Table 40. Smoking cessation in Cambridgeshire, 2015/16

Indicator	Period	England	Cambs	Cambs (number)
Number setting a quit date per 100,000 smokers	2015/16	5,092	5,128	4,450
Successful quitters at 4 weeks per 100,000 smokers	2015/16	2,598	2,585	2,243
Successful quitters (CO validated) at 4 weeks per 100,000 smokers	2015/16	1,854	1,639	1,422
Completeness of NS-SEC recording by Stop Smoking Services (%)	2015/16	91.1%	88.4%	3,933
Cost per quitter (£)	2015/16	£479	£566*	-

Note:* - Not assessed statistically

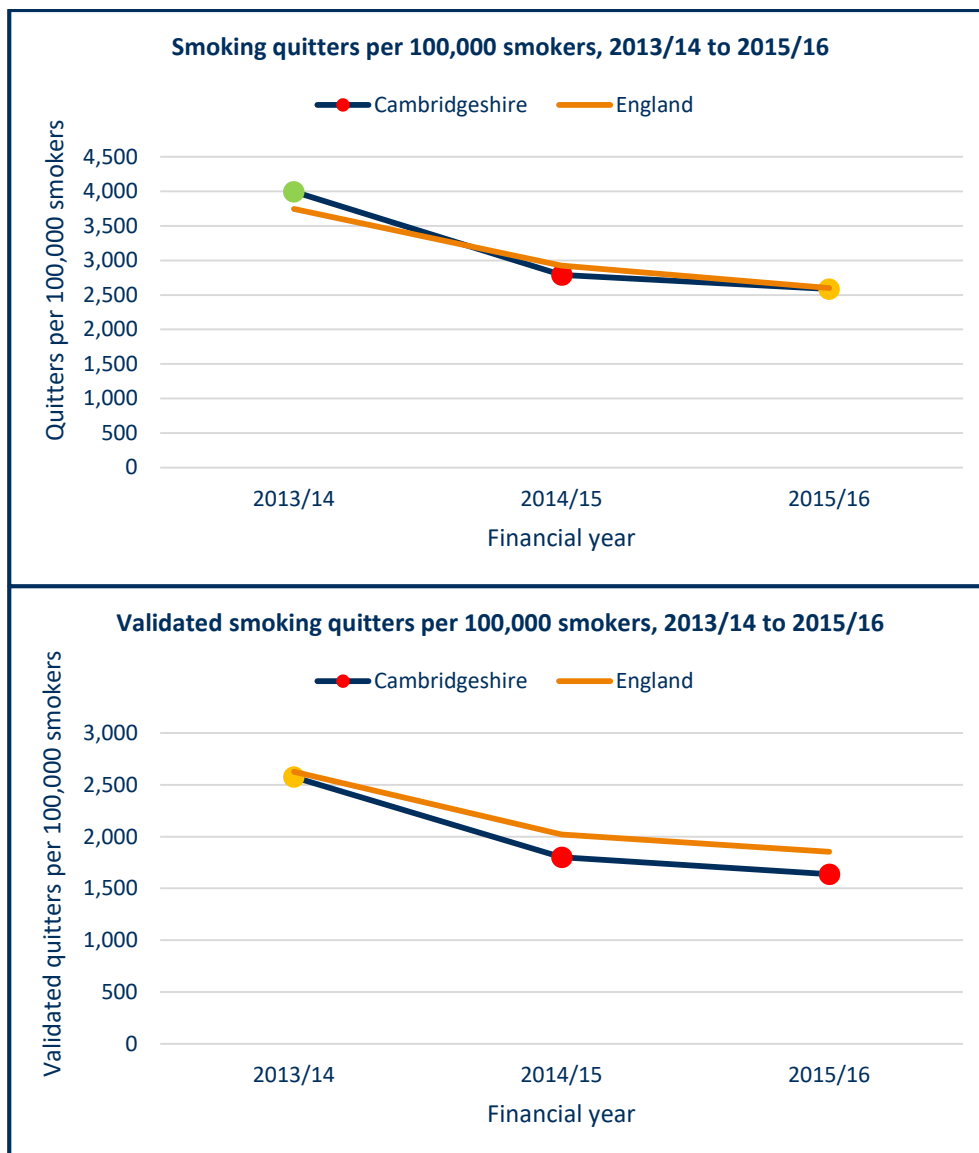
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England Local Tobacco Control profiles - <https://fingertips.phe.org.uk/profile/tobacco-control>

Key points:

- In 2015/16 Cambridgeshire had similar or worse performance in the key metrics for smoking cessation services than nationally. However, do note that rates per 100,000 smokers are based on survey data for smoking prevalence and are thus prone to error.
- Cambridgeshire has statistically significantly low rates of validated smoking quitters compared with England.
- The cost per quitter is slightly higher in Cambridgeshire than in England, though the difference is not statistically tested.
- Cambridgeshire has statistically significantly low completeness rate for NS-SEC (social class) recording compared to England. Note, however, that Cambridgeshire Stop Smoking Services record data about routine and manual workers who stop smoking and geographic and GP based data to address inequalities.
- In 2016/17 quit rates per 100,000 smokers increased in Cambridgeshire compared with 2015/16 (source: NHS Digital at <http://digital.nhs.uk/catalogue/PUB30058>). Cambridgeshire's rate of successful 4 week quitters was 2,787 compared with a lower than 2015/16 England rate of 2,248. The rate of CO validated quitters had also risen in Cambridgeshire to 1,878, but had fallen in England to 1,627 per 100,000 smokers.
- Cambridgeshire sets its own targets for Stop Smoking Services and the data for the CAMQUIT service for 2016/17 are included below (see CAMQUIT data).

Figure 48. Smoking cessation in Cambridgeshire, trends 2013/14 to 2015/16



- Statistically significantly lower than the England average
- Statistically significantly lower than the England average
- Statistically significantly lower than the England average

Source: Public Health England Local Tobacco Control profiles - <https://fingertips.phe.org.uk/profile/tobacco-control>

Key points:

- Levels of smoking quitters have tended to fall and have stabilised at a lower rate following the wider use of e-cigarettes and this is reflected in the data above.
- Cambridgeshire’s rate of successful quitters has fluctuated statistically, compared to England’s rate, but for the latest period shows no statistical difference.
- Cambridgeshire’s rate of verified quitters has been statistically significantly lower than the England rates for the last two time periods shown.

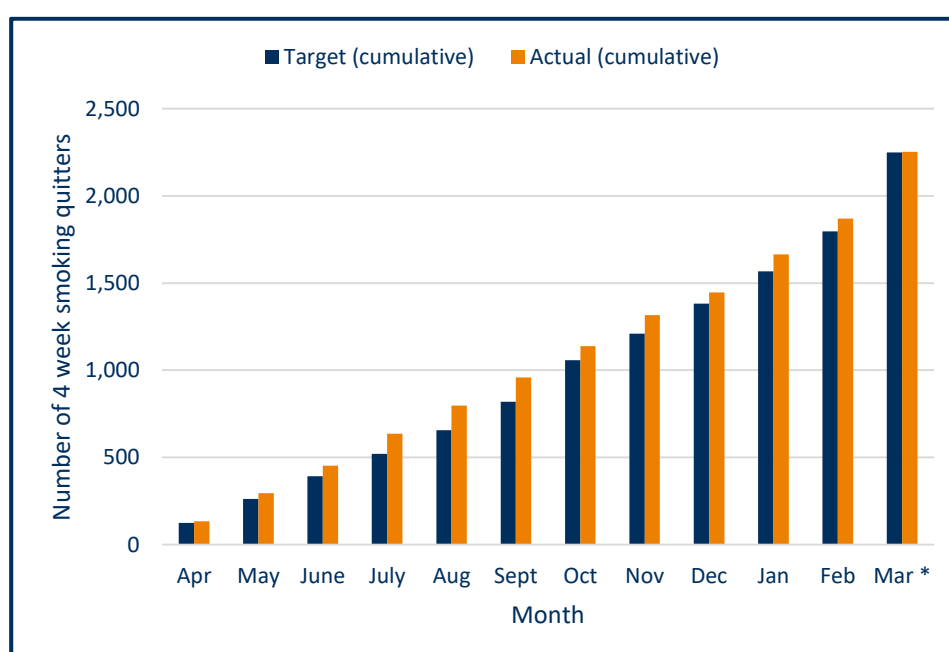
Table 41. Stop smoking services in Cambridgeshire (CAMQUIT) – performance data for 2016/17 for the number of successful 4 week stop smoking quitters

Cambridgeshire	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar *
Target (cumulative)	125	262	392	520	656	819	1,057	1,210	1,382	1,568	1,797	2,249
Actual (cumulative)	133	295	452	635	797	959	1,138	1,316	1,447	1,665	1,870	2,253
% target achieved	106%	113%	115%	122%	121%	117%	108%	109%	105%	106%	104%	100%

Note: * - final numbers for successful 4 week quitters were collected in April 2017, as some people set quit dates in March, and these are added into the March total above.

Source: CAMQUIT Smoking cessation dashboard EOY 2016/17

Figure 49. Stop smoking services in Cambridgeshire (CAMQUIT) – performance data for 2016/17 for the number of successful 4 week stop smoking quitters



Source: CAMQUIT Smoking cessation dashboard EOY 2016/17

Key point:




- Cambridgeshire stop smoking service (CAMQUIT) met its target for the number of people successfully quitting smoking at 4 weeks in 2016/17.

4.4 Alcohol use

Children

Table 42. Drinking behaviours in 15 year olds, Cambridgeshire, 2014/15

Area	Ever had an alcoholic drink	Regular drinkers (at least once a week)	Drunk in the last 4 weeks
Cambridgeshire	72.4%	7.2%	16.4%
England	62.4%	6.2%	14.6%

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, What About YOUth (WAY) Survey

Key point:

- Based on the What About YOUth Survey, the percentage of 15 year olds in Cambridgeshire that have ever had an alcoholic drink is statistically significantly higher than the England average.

Table 43. Drinking in young people - had an alcoholic drink in the last week, Cambridgeshire, 2016

Area of school location	Year 8	Year 10
Cambridge	10.6%	32.1%
East Cambridgeshire	14.5%	31.5%
Fenland	15.7%	32.6%
Huntingdonshire	10.2%	34.1%
South Cambridgeshire	13.7%	35.6%
Cambridgeshire	12.4%	33.5%

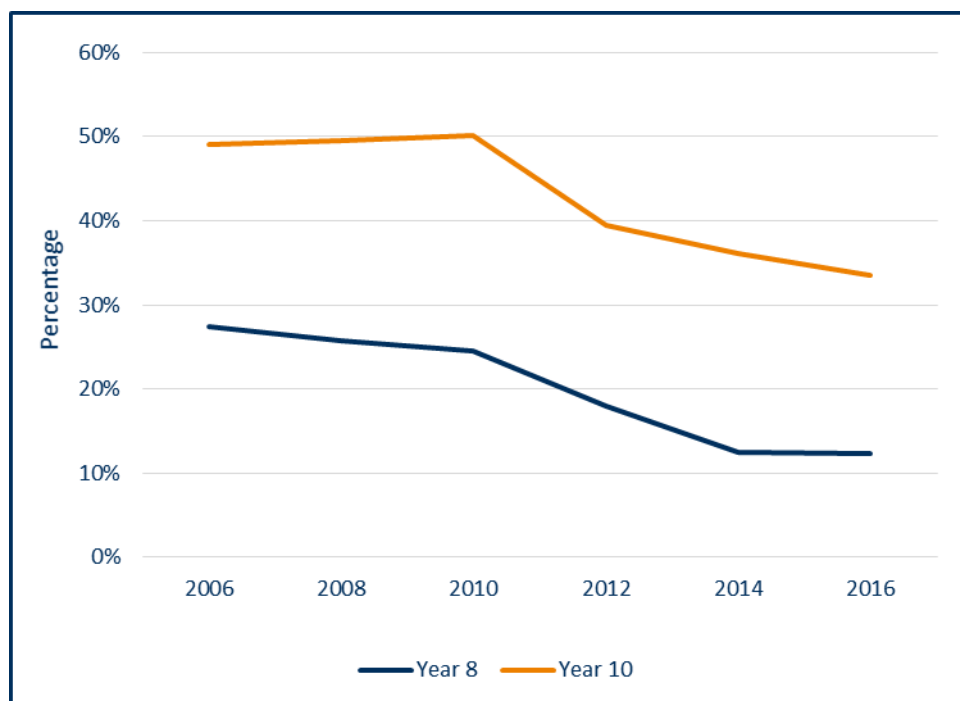
Note: Two Secondary schools did not take part in 2016. One in Fenland and one in East Cambridgeshire. If a school took part there may not be samples from both Year 8 and Year 10. Cambridgeshire total includes records that weren't assigned to a district in HRBS raw dataset.

Source: Health Related Behaviour Survey, School Health Education Unit

Key point:

- Local data from the Health Related Behaviour Survey indicate a steep increase in levels of alcohol use between Years 8 and 10, with 34% of Year 10 children having a drink in the previous week compared to 12% of Year 8 children.

Figure 50. Trends in drinking in young people - had an alcoholic drink in the last week, Cambridgeshire, 2006-2016



Source: Health Related Behaviour Survey, School Health Education Unit




Key point:

- Drinking in Cambridgeshire children has notably decreased in both Year 8 and Year 10 since 2010.

Adults

Table 44. Drinking behaviours among adults 18+, Cambridgeshire, 2011-14

Area	Abstainers		Binge drinking in the previous week		Drinking more than 14 units per week	
	Percentage	Number of people	Percentage	Number of people	Percentage	Number of people
Cambridgeshire	9.5%	49,172	17.6%	91,097	27.1%	140,269
England	15.5%	6,739,832	16.5%	7,174,660	25.7%	11,175,077

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England Local Alcohol Profiles for England (Health Survey for England), Office for National Statistics mid-year population estimates.

Key point:




- According to the Health Survey for England the percentage of Cambridgeshire adults who abstain from drinking alcohol is statistically significantly lower than the England average.
- Levels of binge drinking and excess drinking are similar to national levels.

Table 45. Admission episodes for alcohol-related conditions (broad definition*) Cambridgeshire, 2015/16

Area	DASR per 100,000	Number of admission episodes
Cambridge	2,552	2,495
East Cambridgeshire	2,002	1,708
Fenland	2,447	2,528
Huntingdonshire	2,067	3,542
South Cambridgeshire	1,878	2,815
Cambridgeshire	2,143	13,089
England	2,179	1,119,022

* Alcohol-related conditions as primary or subsidiary cause of admission. Broad measures are considered the best reflection of the burden of alcohol on the community and services.

DASR = directly age standardised rate per 100,000 population.

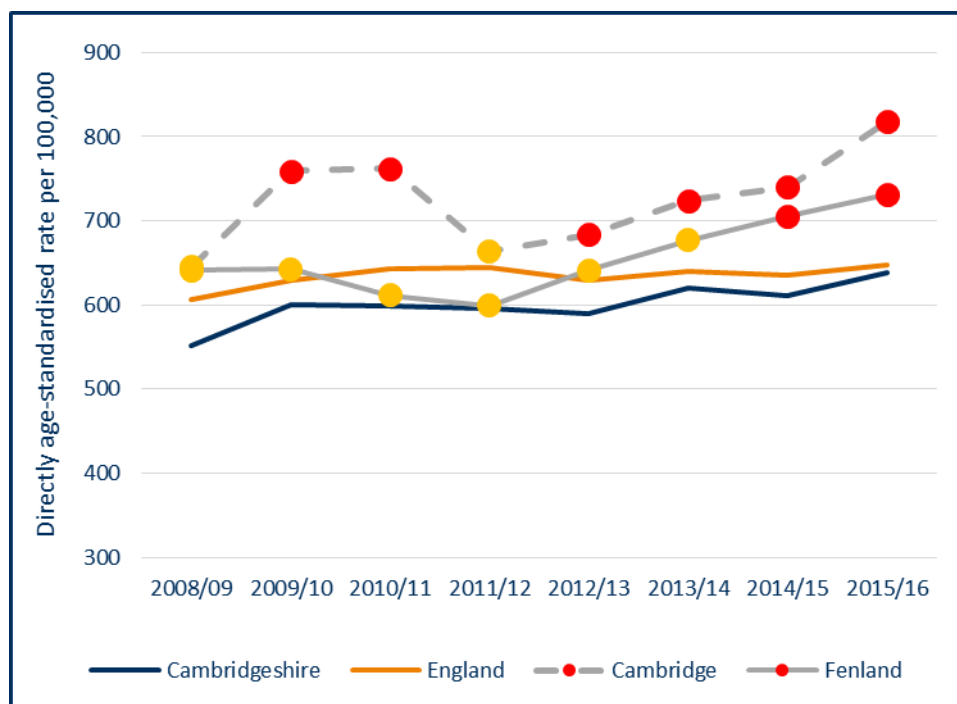
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England Local Alcohol Profiles for England

Key point:

- The rates of hospital admission episodes for alcohol-related conditions are statistically significantly higher than the England average in Cambridge and Fenland.

Figure 51. Admission episodes for alcohol-related conditions (narrow definition*) Cambridge and Fenland, 2015/16



* Alcohol-related conditions as primary cause of admission. Narrow measures are considered the best measure for analysing trends over time as they are less sensitive to changes in recording and coding.

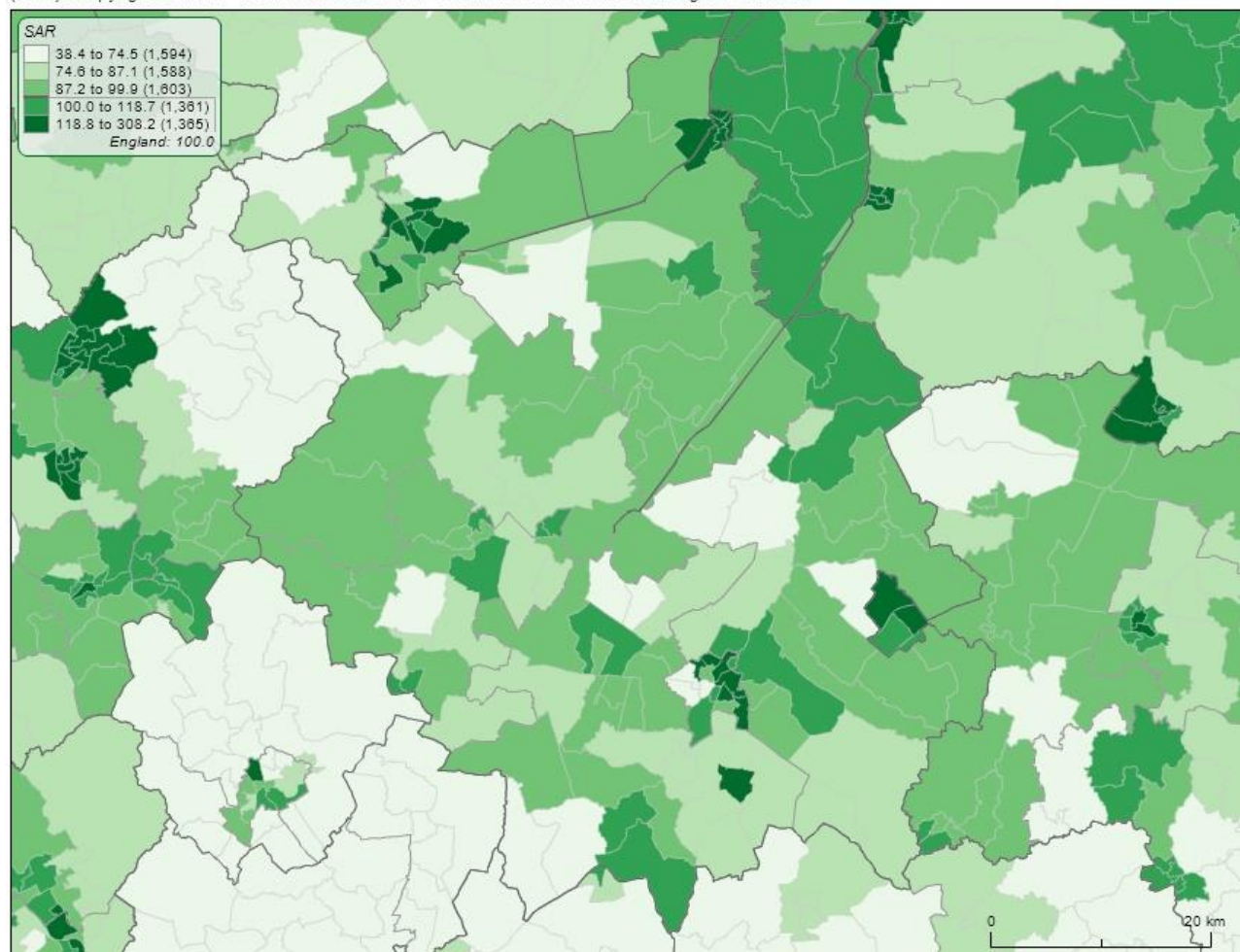
Source: Public Health England Public Health Outcomes Framework indicator 2.18

Key point:

- Although the trend is not statistically assessed, the rates of hospital admissions for alcohol-related conditions appear to have increased in Cambridge and Fenland since 2011/12.

Figure 52.

Hospital admissions for alcohol attributable conditions, standardised admission ratio, 2010/11-2014/15 - source: Hospital Episodes Statistics (HES). Copyright © 2016. The Health and Social Care Information Centre. All rights reserved.



©PHE - © Crown copyright and database rights 2016. Ordnance Survey 100016969 – ONS © Crown Copyright 2016 - Ward (2015 boundaries)

Key point:

- At ward level, standardised admission ratios for alcohol-related conditions vary, with pockets of higher than national average rates across the county.

4.5 NHS Health Checks

Table 46. NHS health checks - data from Public Health England's health checks profile, financial year 2016/17

Indicator	Period	England (%)	Cambs (%)	Cambs (number)	Cambs recent trend ⁴
People invited for an NHS Health Check per year ¹	2016/17	17.0	26.3	48,912	↑ 5
People receiving an NHS Health Check per year ²	2016/17	8.5	9.6	17,900	↑ 6
People taking up an NHS Health Check invite per year ³	2016/17	49.9	36.6	17,900	↓ 5

Note:¹ - Percentage of NHS Health Checks offered to the total eligible population aged 40-74 years in the financial year

Note:² - Percentage of NHS Health Checks received in the total eligible population aged 40-74 years in the financial year


Note:³ - Percentage of NHS Health Checks invites taken up by those offered health checks in the eligible population aged 40-74 years in the financial year


Note:⁴ - recent trend based on data for quarter 4 2016/2017 and most recent data points as stated

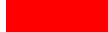
↑ n Getting better - increase (number of years on which trend based)

→ n No significant change (number of years on which trend based)

↓ n Getting worse - decrease (number of years on which trend is based)

 Statistically significantly better than the England average

 Statistically similar to the England average

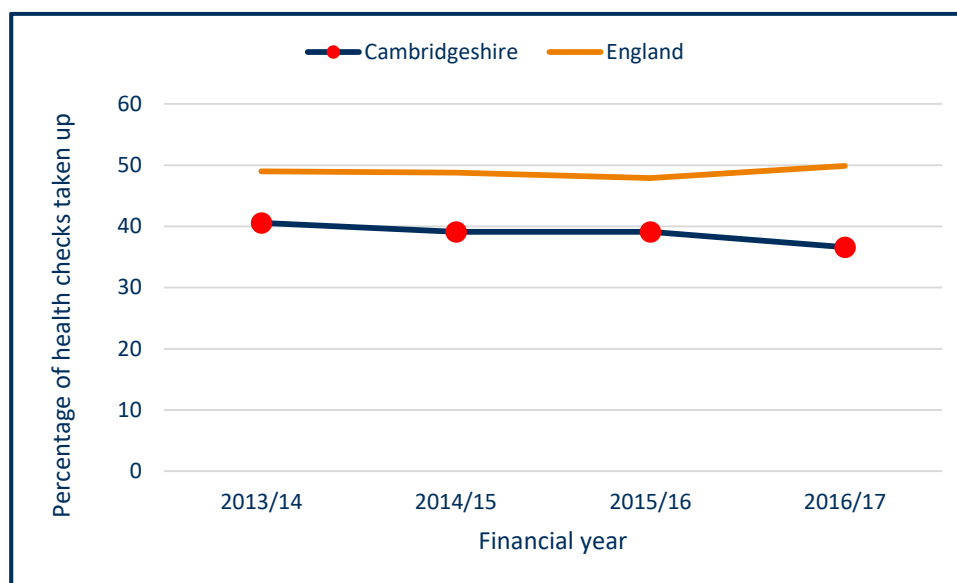
 Statistically significantly worse than the England average

Source: Public Health England NHS Health Check profile

Key points:

- Cambridgeshire has a statistically better rate of people being invited for NHS health checks than England and also a better rate of people receiving checks in the year.
- However, of those invited within a given financial year, the uptake rate is statistically significantly lower (worse) than the England rate.

Figure 53. NHS health checks - data from Public Health England's health checks profile, trends from 2013/14 to 2016/17



Source: Public Health England NHS Health Check profile

Key points:

- This indicator relates to those aged 40-74 years offered a NHS health check who took up that offer.
- Over the last 4 financial years Cambridgeshire has maintained a worse uptake rate of NHS health checks than in England as a whole.

USEFUL LINK: <https://fingertips.phe.org.uk/profile/nhs-health-check-detailed>

4.6 Drug use

Children

Table 47. Drug use in young people - ever taken an illegal drug, Cambridgeshire, 2016

Area of school location	Year 8	Year 10
Cambridge	1.7%	19.1%
East Cambridgeshire	3.7%	15.3%
Fenland	2.9%	16.9%
Huntingdonshire	3.3%	15.2%
South Cambridgeshire	4.1%	16.6%
Cambridgeshire	3.3%	16.1%

Note: Two Secondary schools did not take part in 2016. One in Fenland and one in East Cambridgeshire. If a school took part there may not be samples from both Year 8 and Year 10. Cambridgeshire total includes records that weren't assigned to a district in HRBS raw dataset.




Source: Health Related Behaviour Survey, School Health Education Unit

Key point:

- Local data from the Health Related Behaviour Survey indicate a steep increase in levels of drug use between Years 8 and 10, with 16% of Year 10 children having ever taken drugs compared to 3% of Year 8 children.

Table 48. Drug use in 15 year olds, Cambridgeshire, 2014/15

Area	Ever tried cannabis	Used cannabis in the last month	Taken drugs (excluding cannabis) in the last month
Cambridgeshire	12.1%	5.8%	0.7%
England	10.7%	4.6%	0.9%

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, What About YOUth (WAY) Survey

Key point:

- Based on data from the What About YOUth Survey, drug use among 15 year olds in Cambridgeshire is statistically similar to the England average.

Adults

Table 49. Estimated numbers using any illegal drug*, Cambridgeshire, 2016

Area	Used in the last year		Using more than once a month	
	16-24 year olds	16-59 year olds	16-24 year olds	16-59 year olds
Cambridgeshire	14,357	32,153	3,141	7,380

*Any drug controlled under the Misuse of Drugs Act 1971

Numbers estimated based on prevalence estimates for England and Wales 2016/17 applied to the mid-2016 population:

Using in the last year: 16-24 year olds 19.2%, 16-59 year olds 8.5%.

Using more than once a month: 16-24 year olds 4.2%, 16-59 year olds 2.0%.

Sources: Crime Survey for England 2016/17, Office for National Statistics mid-year population estimates

Key point:

- There are an estimated 32,000 people who have used drugs at least once in the last year in Cambridgeshire. Around 7,400 of which use more than once a month.

Table 50. Directly age-standardised drug-related* mortality, Cambridgeshire, 2012-16

Area	Number of deaths	Rate per 100,000 population
Cambridge	36	6.0
East Cambridgeshire	10	2.3
Fenland	30	6.4
Huntingdonshire	41	4.8
South Cambridgeshire	21	2.8
Cambridgeshire	138	4.4

*Any drug controlled under the Misuse of Drugs Act 1971

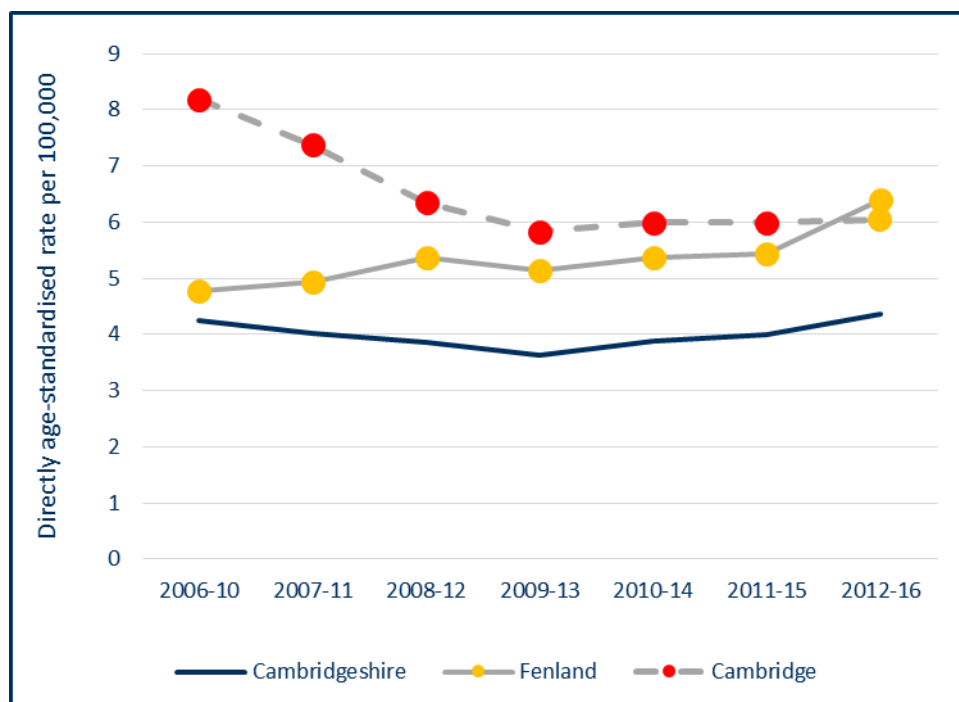
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Primary Care Mortality Database (Office for National Statistics (ONS) death registrations), ONS mid-year population estimates

Key point:

- Around 28 people die each year due to drug misuse in Cambridgeshire.
- Rates of deaths are known to be higher in Cambridge and Fenland.

Figure 54. Trends in drug-related mortality, Cambridge and Fenland, 2012-2016



- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Primary Care Mortality Database (Office for National Statistics (ONS) death registrations), ONS mid-year population estimates

Key point:

- Although the trend itself is not statistically assessed, rates of drug-related mortality appear to have fallen in Cambridge but have increased in Fenland.

4.7 Sexual health

Table 51. Chlamydia detection rate per 100,000 aged 15-24, Cambridgeshire, 2016

Area	Number of diagnoses	Rate per 100,000	5-yr trend
Cambridge	287	961	↓
East Cambridgeshire	88	1,049	→
Fenland	157	1,435	→
Huntingdonshire	275	1,502	↓
South Cambridgeshire	150	993	→
Cambridgeshire	957	1,159	↓
England	128,098	1,882	↓

	≥ 2,300	↑ Getting better (increasing)
	1,900 to 2300	→ No significant change
	< 1,900	↓ Getting worse (decreasing)

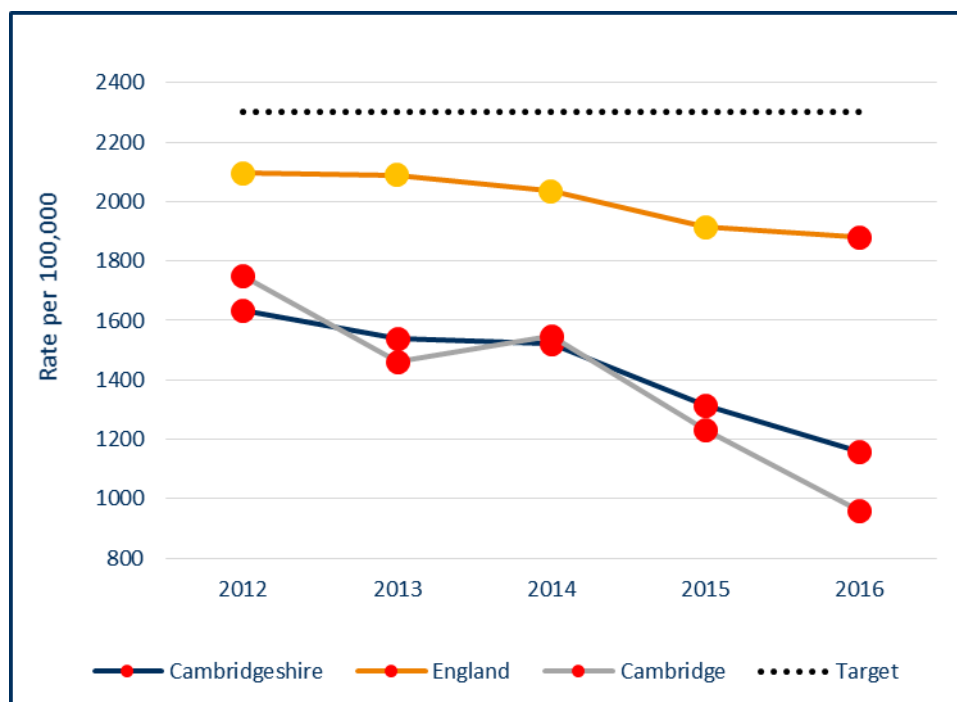
Note: Higher chlamydia detection rates are currently considered favourable as they are thought to reflect better control activity. However, low detection rates may also indicate low prevalence of infection in the population.

Source: Public Health England Public Health Outcomes Framework indicator 3.02 (National Chlamydia Screening Programme)

Key point:

- The chlamydia detection rate is lower than the national target in Cambridgeshire and each of its districts. The rate of overall for the county has decreased over the last 5 years.

Figure 55. Trends in chlamydia detection rate per 100,000 aged 15-24, Cambridge, 2012-2016



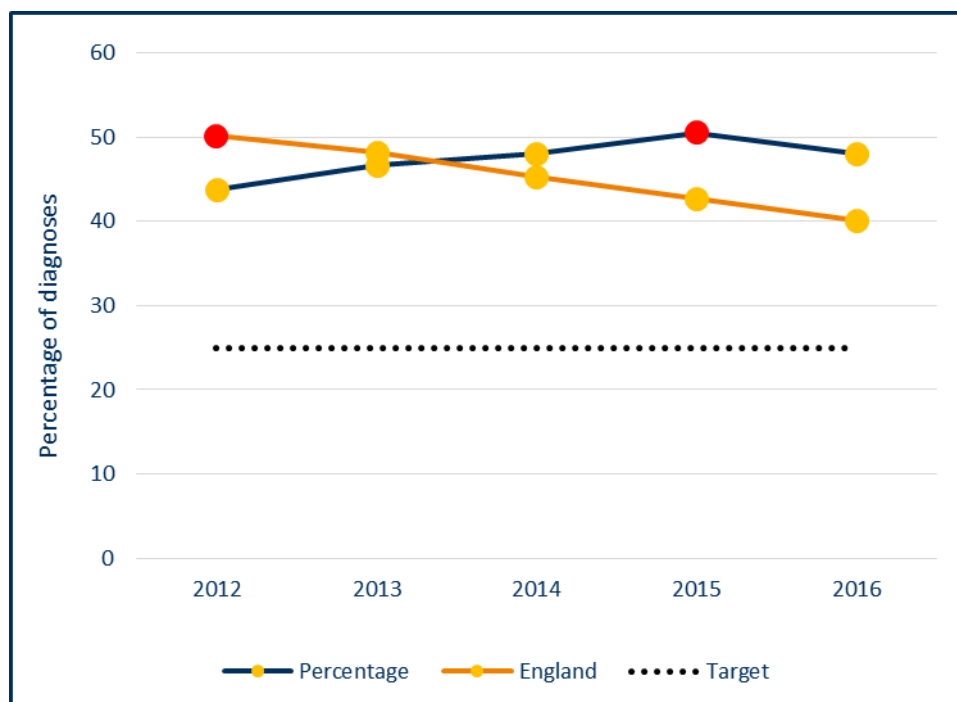
- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 3.02 (National Chlamydia Screening Programme)

Key points:

- The chlamydia detection rate is notably statistically significantly lower than the county average in Cambridge but not the other districts [data not shown] and has significantly decreased over the past 5 years.

Figure 56. Percentage of HIV diagnoses at a late stage of infection, Cambridgeshire, 2012-2016



- < 25%
- 25% to 50%
- ≥ 50%

Source: Public Health England Public Health Outcomes Framework indicator 3.04

Key points:

- The percentage of HIV diagnoses being made at a late stage of infection in Cambridgeshire is currently 48%, above the target of 25% and England average of 40% although the difference from the England average was not statistically significant in 2016.
- Although the trend is not statistically assessed, the percentage appears to have increased in Cambridgeshire compared to a decrease seen nationally.

Table 52. New sexually transmitted infection diagnoses* in those aged 15-64, Cambridgeshire, 2016

Area	Diagnoses			Testing		Positivity	
	Number of diagnoses	Rate per 100,000	5-yr trend	Rate per 100,000	5-yr trend	Percentage	5-yr trend
Cambridge	731	761	↓	19,959	↑	3.8	↓
East Cambridgeshire	185	342	↓	8,183	→	4.2	↓
Fenland	290	475	→	10,196	↑	4.7	↓
Huntingdonshire	551	495	↓	11,179	↑	4.4	↓
South Cambridgeshire	388	400	↓	9,725	→	4.1	↓
Cambridgeshire	2,145	511	↓	12,323	↑	4.1	↓
England	280,622	795	↓	16,722	↑	4.8	↓

* excluding chlamydia in under 25s

	Statistically significantly better than the England average	↓ ↑	Getting better (decrease/increase)
	Statistically similar to the England average	→	No significant change
	Statistically significantly worse than the England average	↑ ↓	Getting worse (increase/decrease)

Source: Public Health England Sexual and Reproductive Health Profiles

Key points:




- The STI diagnosis rate in Cambridgeshire is currently statistically significantly lower than the England average and has decreased over the last 5 years, as it has nationally. However, these low diagnosis rates likely reflect the statistically significantly lower than average testing rates generally seen across the county.
- In Cambridge, the testing rate is significantly higher than the average for England but the positivity rate is significantly lower which may indicate inappropriate targeting of testing or lower prevalence.
- Testing rates have been stable or increasing over the last 5 years across all districts but positivity rates have declined, which again may indicate inappropriate targeting or a general decrease in prevalence of infection in the population. Similar trends are observed for England as a whole.

4.8 Under 18 conceptions and births

Table 53. Under 18 conception and birth rates, Cambridgeshire, 2015

Area	Conceptions			Births		
	Number	Rate per 1,000*	Trend	Number	Rate per 1,000*	Trend
Cambridge	27	15.9	↓ 7	8	4.7	→ 7
East Cambridgeshire	18	12.7	↓ 9	6	4.2	→ 7
Fenland	43	26.0	↓ 6	18	10.9	→ 7
Huntingdonshire	43	14.5	↓ 7	15	5.1	→ 7
South Cambridgeshire	41	15.2	↓ 7	4	1.5	→ 7
Cambridgeshire	172	16.5	↓ 6	51	4.9	↓ 6
England	19,080	20.8	↓ 5	5788	6.3	↓ 5

* per 1,000 females aged 15-17

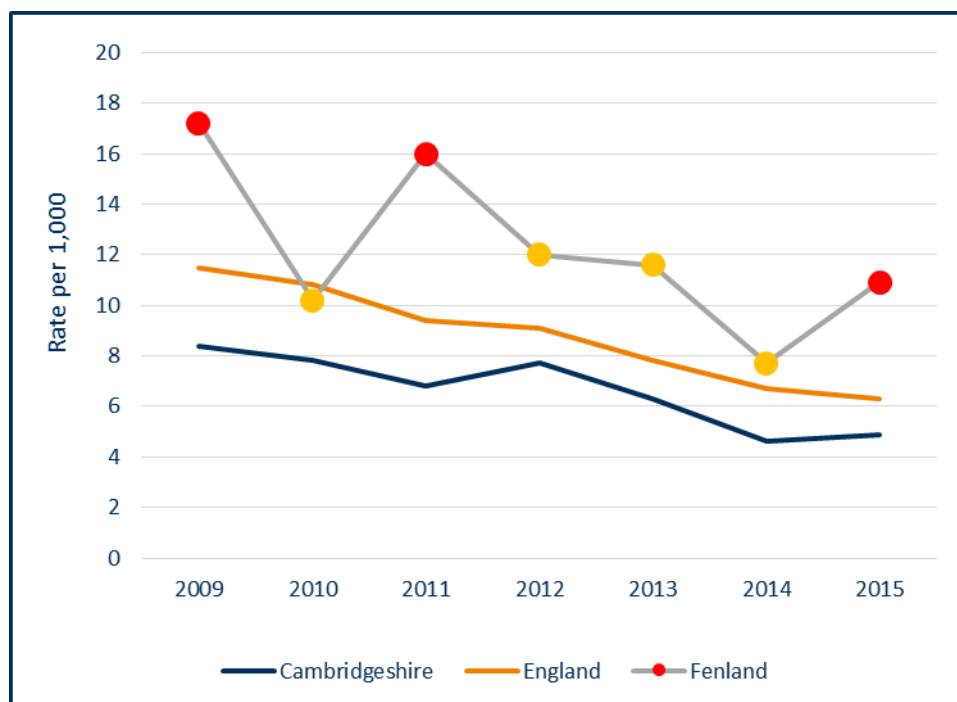
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average
↓ n	Getting better (number of years on which trend based)
→ n	No significant change (number of years on which trend based)
↑ n	Getting worse (number of years on which trend based)

Sources: Public Health England Public Health Outcomes Framework indicator 2.04, Sexual and Reproductive Health Profiles (Office for National Statistics)

Key points:

- The rate of under 18 conception in Cambridgeshire is statistically significantly lower than the England average and rates are declining across the county, as they are nationally.
- Birth rates to mothers aged under 18 are statistically significantly higher in Fenland compared with the national average.

Figure 57. Trends in under 18 birth rates per 1,000*, Fenland, 2009-2016



* per 1,000 females aged 15-17

- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Sexual and Reproductive Health Profiles (Office for National Statistics)

Key points:

- The rates of births to mothers aged under 18 have significantly declined in Cambridgeshire as they have nationally.
- Rates in Fenland have declined but not significantly and have been similar to or statistically significantly higher than national average since 2009.

4.9 Falls and hip fracture

Table 54. Falls in people aged 65 and over - emergency hospital admissions (for age/sex groups where Cambridgeshire or one or more districts have worse rates than England), 2015/16

Indicator	Period	England rate per 100,000 ¹	Cams rate per 100,000 ¹	Cams number	Cambridgeshire Districts ¹				
					Cambridge	E Cambs	Fenland	Hunts	S Cambs
People aged 65 & over (persons)	2015/16	2,169	2,232	2,613	2,523	2,296	2,442	2,052	2,055
People aged 65-79 (persons)	2015/16	1,012	970	785	1,227	1,144	1,021	891	788
People aged 65-79 (male)	2015/16	825	768	302	1,021	1,246	653	641	594
People aged 80 & over (persons)	2015/16	5,526	5,892	1,828	6,280	5,636	6,563	5,419	5,727
People aged 80 & over (male)	2015/16	4,367	4,597	523	5,122	3,982	6,088	4,163	3,995
People aged 80 & over (female)	2015/16	6,223	6,728	1,305	6,887	6,738	6,961	6,244	6,843

Note:¹ - age standardised rate per 100,000 population

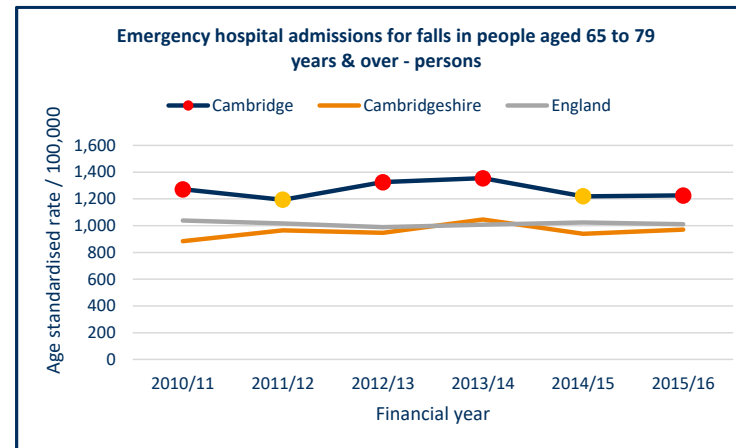
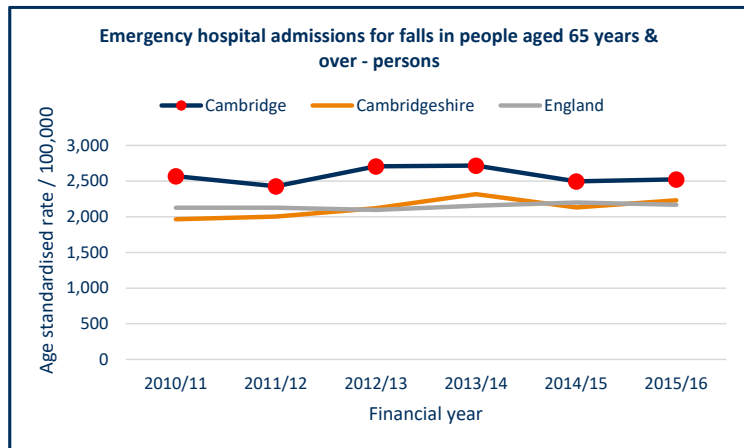
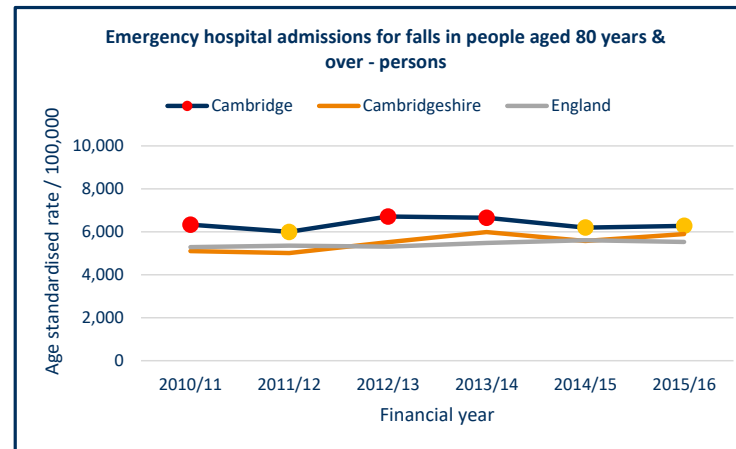
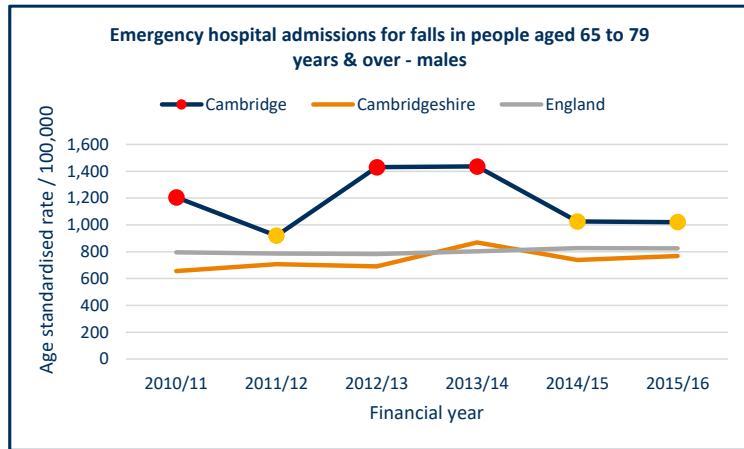
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, Public Health Outcomes Framework

Key points:

- Overall, in people aged 65 years and over Cambridgeshire and the districts tend to have similar, sometimes worse, rates than the England averages. South Cambridgeshire and Huntingdonshire sometimes have better rates in some age groups.
- Falls in males and females in Cambridge and Fenland people aged 65 years and over are statistically significantly worse rates than England, as are the rates for all persons [gender data not shown].
- In falls in people aged 65-79 years, Cambridge has statistically significantly worse rates than England for falls across the population.
- In falls in people aged 65-79 years, East Cambridgeshire has statistically significantly worse rates than England for falls in men. There has been a large increase in the rate in 2015/16.
- In falls in people aged 80 years and over, Cambridgeshire, Cambridge and Fenland have significantly worse rates than England across the population. Fenland's rate has increased in 2015/16.
- In falls in people aged 80 years and over, Fenland has significantly worse rates than England in males and the rate has shown a sharp increase in 2015/16.
- In falls in people aged 80 years and over, Cambridgeshire as a whole has significantly worse rates than England in females.

Figure 58. Falls in people aged 65 and over - trends in emergency hospital admissions where Cambridgeshire or the districts have static adverse trends, 2010/11 to 2015/16



Key points:

- Cambridgeshire tends to have rates of falls around the England average, with annual fluctuations in rates. Cambridge is the area where rates are statistically significantly worse than England and the pattern is sustained over time.
- In all persons aged 65 and over the rate in Cambridge has been significantly higher than the England average since 2010/11.

- Statistically significantly lower than the England average
- Statistically significantly lower than the England average
- Statistically significantly lower than the England average

Source: Public Health England, Public Health Outcomes Framework

Table 55. Hip fractures in people aged 65 and over - emergency hospital admissions for fractured neck of femur, Cambridgeshire, the districts and England, 2015/16

Indicator	Period	England rate per 100,000 ¹	Cams rate per 100,000 ¹	Cams number	Cambridgeshire Districts				
					Cambridge	E Cambs	Fenland	Hunts	S Cambs
People aged 65 & over (persons)	2015/16	589	583	681	660	497	667	562	542
People aged 65 - 79 (persons)	2015/16	244	234	187	264	257	251	187	248
People aged 80 & over (persons)	2015/16	1,591	1,596	494	1,812	1,191	1,872	1,651	1,396

Note:¹ - age standardised rate per 100,000 population

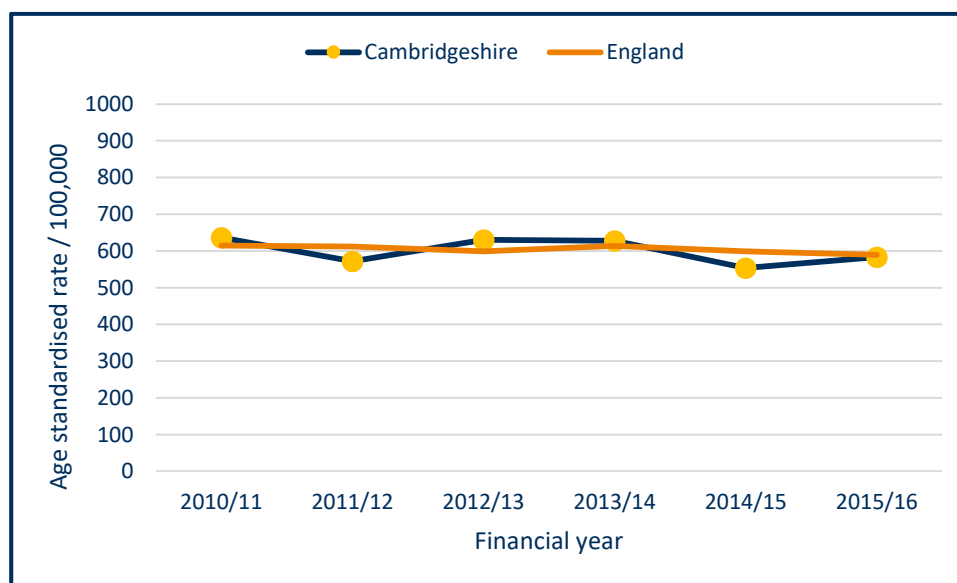
	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

Source: Public Health England, Public Health Outcomes Framework

Key points:

- Across Cambridgeshire the rates of hip fractures in people aged 65 and over tend to show no statistical difference to the England average. Looking back to 2011/12 this pattern is similar with Cambridgeshire and most districts generally having rates that do not differ statistically from the England average. However, the numbers of falls are relatively small and this makes it harder to detect statistical differences.
- The rate in males aged 65 and over in South Cambridgeshire in 2015/16 was significantly lower than the England average [data not shown], with all other areas having similar rates to England for all persons, males and females
- In people aged 65-79 years the rates by gender in most districts are not available, as the numbers of fractures are too small. The Cambridgeshire rates for males and females are no different to the England average, as with for all persons.
- Rates of hip fracture in people aged 80 years and over are not statistically different from England's, other than in East Cambridgeshire where the rate is statistically significantly lower. In East Cambridgeshire the female rate is also significantly lower [data not shown], with rates in all other areas being statistically similar to the England level or with too few cases to calculate a stable rate.
- Although the rates of falls tend to be higher in Cambridge it would appear that hip fractures from falls are not such an issue - however, it should be noted that the numbers of cases of hip fracture are small and the confidence intervals are relatively wide due to this, making the detection of statistically important differences more difficult. Cambridge's rates are still numerically higher than the England and Cambridgeshire levels, as are Fenland's.

Figure 59. Trends in emergency hospital admissions for hip fracture in people aged 65 years & over – persons, 2010/11 to 2015/16



- Statistically significantly lower than the England average
- Statistically significantly lower than the England average
- Statistically significantly lower than the England average

Source: Public Health England, Public Health Outcomes Framework

Key points:

- Across Cambridgeshire the rates of hip fractures in people aged 65 and over tend to show no statistical difference to the England average. Looking back to 2010/11 this pattern is similar with Cambridgeshire and most districts generally having rates that do not differ statistically from the England average. However, the numbers of falls are relatively small and this makes it harder to detect statistical differences.
- The chart above indicates the relative similarity of Cambridgeshire's overall rate to England for people aged 65 years and over from 2010/11 to 2015/16, with no statistically important differences apparent.

USEFUL LINK: <http://www.phoutcomes.info/>

5. SCREENING, VACCINATION AND IMMUNISATION

This section presents key information for cancer screening, abdominal aortic aneurysm screening, childhood screening and vaccinations and flu vaccination.

5.1 Adult screening

Table 56. Screening coverage, 2016 (cancer) and 2015/16 (abdominal aortic aneurysm) - Cambridgeshire and the districts

Indicator	Period	England %	Cams %	Cams recent trend	Cambridgeshire Districts				
					Cambridge %	E Cambs %	Fenland %	Hunts %	S Cambs %
Breast cancer screening ¹	2016	75.5	76.0	↓ 5	67.4	77.7	75.2	77.3	78.8
Cervical cancer screening ²	2016	72.7	72.2	↓ 5	59.1	78.1	72.4	76.3	76.7
Bowel cancer screening ³	2016	57.9	58.7	-	55.7	61.6	53.2	57.8	63.7
Abdominal aortic aneurysm ⁴	2015/16	79.9	82.1	-	77.4	81.9	80.8	84.0	83.7

Note:¹ - % of eligible women screened adequately within the previous 3 years on 31st March

Note:² - % of eligible women screened adequately within the previous 3.5 or 5.5 years (according to age) on 31st March

Note:³ - % of people eligible for bowel screening who were screened




Note:⁴ - % of men eligible for abdominal aortic aneurysm screening who are conclusively tested

↑ n Getting better - increase (number of years on which trend based)

→ n No significant change (number of years on which trend based)

↓ n Getting worse - decrease (number of years on which trend is based)

- Recent trend not available

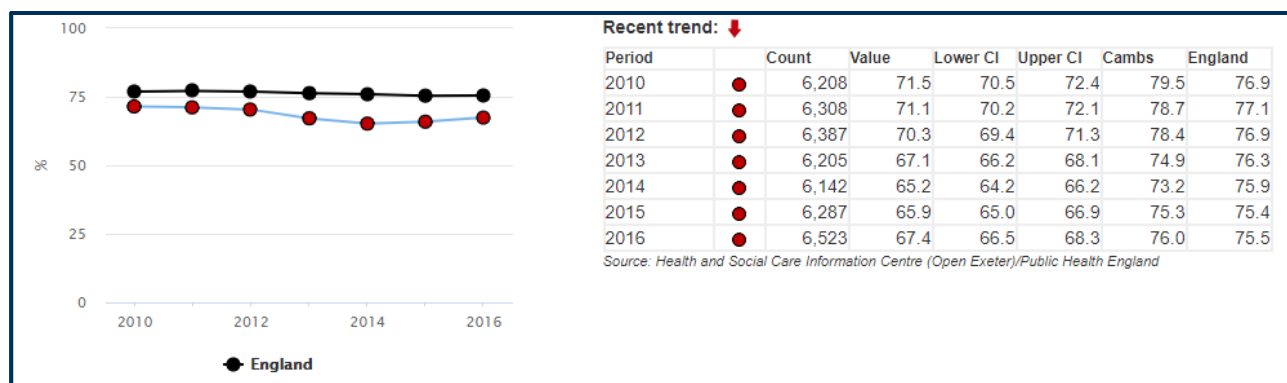
 Statistically significantly better than the England average
 Statistically similar to the England average
 Statistically significantly worse than the England average

Source: Public Health England, Public Health Outcomes Framework

Key points:

- At the county level, Cambridgeshire's screening rates are all statistically significantly above the England average, other than the rate for cervical cancer screening, which is significantly worse.
- The county trend in coverage for both breast and cervical cancer screening is downwards and this is the case in every district and nationally for cervical cancer and everywhere but South Cambridgeshire for breast cancer.
- Screening rates in Cambridge and Fenland are generally the worst in terms of the districts - Cambridge's rates are significantly worse than the England rate for breast, cervical and bowel cancer screening and are statistically similar to the national average for abdominal aortic aneurysm screening. Fenland's rates are generally similar to the national average, other than for bowel cancer screening where they are statistically significantly worse than England's rate.

Figure 60. Trend in breast cancer screening coverage, 2010-2016 Cambridge - percentage eligible women screened adequately in previous 3 years at 31 March



● Cambridge City statistically significantly lower than the England average

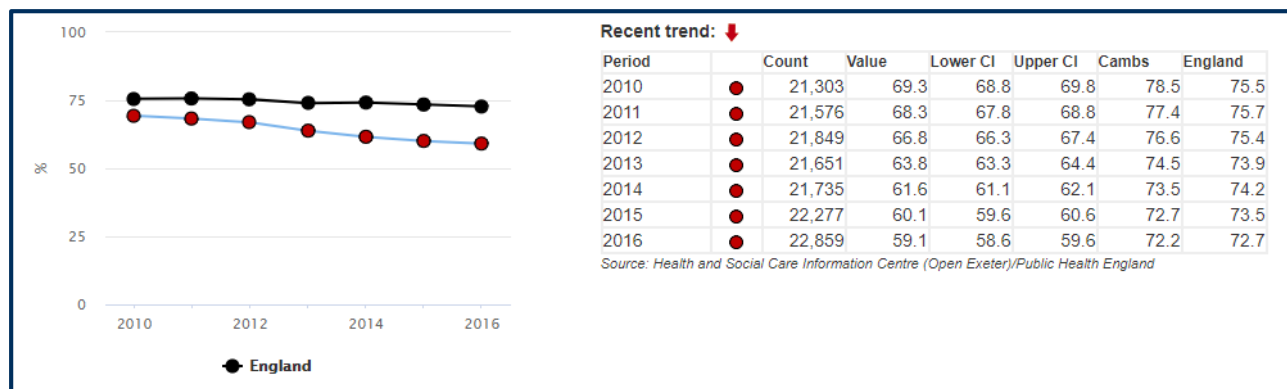
↓ n Recent trend getting worse - decrease

Source: Public Health England, Public Health Outcomes Framework

Key point:

- Cambridge's rate has been statistically significantly worse than the England average rate since 2010 and so this is a sustained trend.

Figure 61. Trend in cervical cancer screening coverage, 2010-2016 in Cambridge - percentage of eligible women screened adequately within the previous 3.5 or 5.5 years (according to age) on 31st March



● Cambridge City statistically significantly lower than the England average

↓ n Recent trend getting worse - decrease

Source: Public Health England, Public Health Outcomes Framework

Key points:

- Cambridge's rate has been statistically significantly worse than the England rate since 2010.
- Cambridgeshire's rate has been statistically worse than the England rate for the last 3 periods.

USEFUL LINK: <http://www.phoutcomes.info/>

5.2 Children

Table 57. Childhood screening, vaccination and immunisation - coverage (%) for Cambridgeshire

Indicator	Period	England %	Cambs %	Cambs recent trend
Newborn blood spot screening ¹	2015/16	95.6	98.6*	-
Newborn Hearing Screening ²	2015/16	98.7	99.4*	-
Vaccination coverage - Dtap / IPV / Hib (1 year old) ^{3,4}	2015/16	93.6	93.5**	↓ 6
Vaccination coverage - Dtap / IPV / Hib (2 years old) ^{3,4}	2015/16	95.2	93.6**	↓ 5
Vaccination coverage - Meningitis C ⁴	2015/16	DQ ⁵	95.2**	-
Vaccination coverage - pneumonia ⁴	2015/16	93.5	93.8**	→ 6
Vaccination coverage - Hib / MenC booster (2 years old) ^{4,6}	2015/16	91.6	90.2**	↓ 5
Vaccination coverage - Hib / MenC booster (5 years old) ^{4,6}	2015/16	92.6	89.3**	↓ 5
Vaccination coverage - pneumonia booster ⁴	2015/16	91.5	90.3**	↓ 5
Vaccination coverage - MMR for 1 dose (2 years old) ^{4,7}	2015/16	91.9	90.6**	↑ 6
Vaccination coverage - MMR for 1 dose (5 years old) ^{4,7}	2015/16	94.8	93.2**	↑ 5
Vaccination coverage - MMR for 2 doses (5 years old) ^{4,7}	2015/16	88.2	84**	↓ 5
Vaccination coverage - HPV vaccination for 1 dose (females 12-13 years old) ^{4,8}	2015/16	87.0	87**	-
Vaccination coverage - HPV vaccination for 1 dose (females 13-14 years old) ^{4,8}	2015/16	85.1	86.6**	-

Note:¹ - % of babies eligible for newborn blood spot screening who were screened

Note:² - % of babies eligible for newborn hearing screening for whom screening process is complete within 4 weeks

Note:³ - Vaccination - Dtap / IPV / Hib (1 year old) = diphtheria, hepatitis B, Hib (Haemophilus influenzae type b), polio, tetanus, whooping cough (pertussis).

Note:⁴ - benchmarked against threshold based goals

Note:⁵ - DQ = value not published for data quality reasons

Note:⁶ - Hib = Haemophilus influenzae type b; MenC = meningitis C

Note:⁷ - MMR = measles, mumps and rubella


Note:⁸ - HPV = Human papilloma virus


↑ n Getting better - increase (number of years on which trend based)

→ n No significant change (number of years on which trend based)


↓ n Getting worse - decrease (number of years on which trend is based)


 * Statistically significantly better than the England average

 * Statistically similar to the England average

 * Statistically significantly worse than the England average

 ** Statistically significantly better than the benchmark goal

 ** Statistically similar to the benchmark goal

 ** Statistically significantly worse than the benchmark goal

Source: Public Health England, Public Health Outcomes Framework

Key points:

- In general, Cambridgeshire's vaccination coverage rates tend to be similar to or worse than target goals. Trends, where available, for those measures that are significantly below goal are adverse, as are many of the trends where Cambridgeshire's rates are similar to target goals.
- The trend in coverage rate for 2 dose MMR vaccination at ages 5 years old has been off target goal since 2010/11 and is falling.
- Coverage rates for newborn blood spot and hearing screening and meningitis C vaccination are statistically significantly above target goals.

USEFUL LINK: <http://www.phoutcomes.info/>

5.3 Influenza

Table 58. Flu vaccination coverage (%) – Cambridgeshire

Indicator	Period	England %	Cambs %	Cambs recent trend
Vaccination coverage - Flu (aged 65+) ¹	2016/17	70.5	72.5	↓ 5
Vaccination coverage - Flu (at risk individuals) ¹	2016/17	48.6	47.3	↓ 5
Vaccination coverage - Flu (2-4 years old) ¹	2016/17	38.1	41.1	-

Note:¹ - benchmarked against threshold based goals

- ↑ n Getting better - increase (number of years on which trend based)
- n No significant change (number of years on which trend based)
- ↓ n Getting worse - decrease (number of years on which trend based)

	Statistically significantly better than the benchmark goal
	Statistically similar to the benchmark goal
	Statistically significantly worse than the benchmark goal

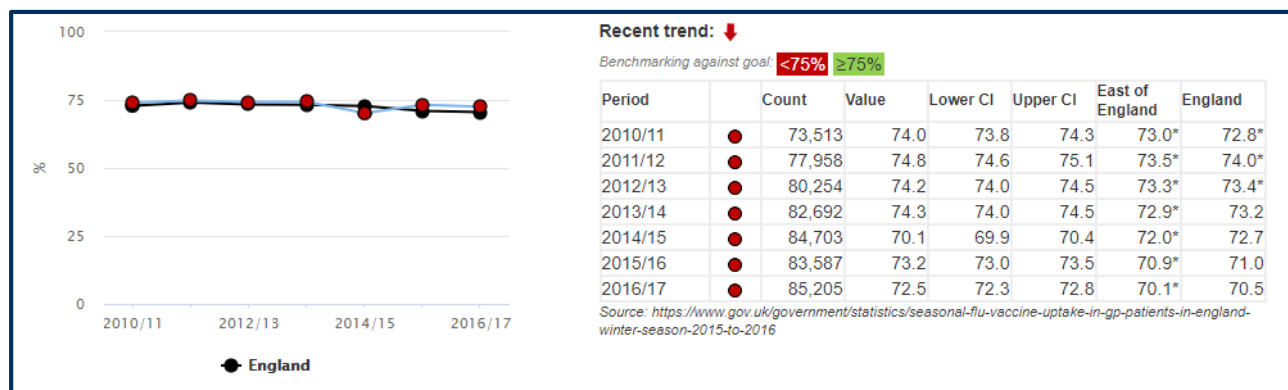
Source: Public Health England, Public Health Outcomes Framework

Key points:

- Cambridgeshire, and England's, flu vaccination rates for older people and at risk individuals¹ are statistically significantly below target goals and the five year trends are adverse.
- The flu vaccination coverage for young children aged 2-4 years old is on target, whereas the overall rate in England is statistically significantly below target.

¹ People aged 6 months to 64 years with certain medical conditions, excluding otherwise healthy pregnant women and carers.

Figure 62. Trend in flu vaccination coverage for people aged 65+, Cambridgeshire 2010/11 to 2016/17 ¹



Note:¹ - benchmarked against threshold based goals at <75% or >=75%

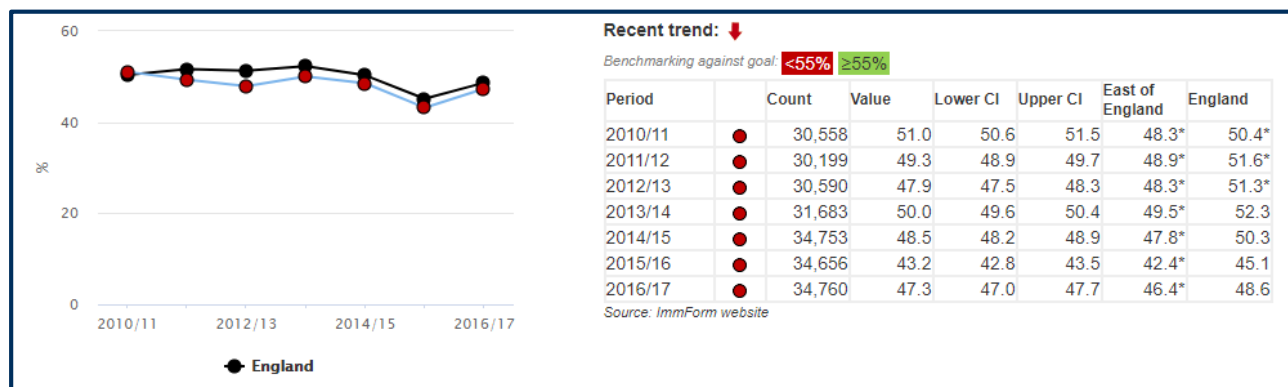
- Cambridgeshire statistically significantly lower than the benchmark goal.
- ↓ n Recent trend getting worse - decrease
- * aggregated from all known lower geography values

Source: Public Health England, Public Health Outcomes Framework

Key point:

- Cambridgeshire's trend for flu vaccination in older people is sustained at a level that is statistically significantly below target goal.

Figure 63. Trend in flu vaccination coverage for at risk individuals, Cambridgeshire 2010/11 to 2016/17 ¹



Note:¹ - benchmarked against threshold based goals at <75% or >=75%

- Cambridgeshire statistically significantly lower than the benchmark goal.
- ↓ n Recent trend getting worse - decrease
- * aggregated from all known lower geography values

Source: Public Health England, Public Health Outcomes Framework

Key point:

- Cambridgeshire's trend for flu vaccination in at risk individuals is sustained at a level that is statistically significantly below target goal.

USEFUL LINK: <http://www.phoutcomes.info/>

6. LEVELS OF ILLNESS AND HEALTH AND SOCIAL CARE SERVICES

Interpreting data from the NHS Quality and Outcomes Framework (QOF) (sections 6.1 to 6.4)




- The recorded prevalence of disease in QOF is the percentage of patients recorded on practice disease registers as a proportion of the relevant GP registered population.
- Data presented by district are based on the location of the general practice and not necessarily the residence of the patient.
- QOF data are not available by age. As the prevalence of most diseases varies with age, differences in prevalence between areas may be due to differences in the age structures of populations rather than true differences in disease prevalence. In general most disease prevalence increases with age.
- Recorded prevalence may not reflect true prevalence as some people may have undiagnosed disease or not be registered with GPs.
- The data are also reliant on the ascertainment and quality of recording within individual practices.
- Locally, the quality of QOF recording is thought to be good and consistent in recent years, so although the prevalence estimates included below may not represent the actual morbidity of illness, the patterns by area and over time are likely to still be valid.

6.1 Cardiovascular conditions (coronary heart disease, high blood pressure and stroke)

Latest prevalence and modelled estimates

Table 59. Prevalence of cardiovascular conditions by area of general practice location, Cambridgeshire, 2015/16

Area of GP location	Coronary heart disease		High blood pressure		Stroke	
	Percentage	Number of people	Percentage	Number of people	Percentage	Number of people
Cambridge	1.8	3,172	8.1	14,490	1.0	1,769
East Cambridgeshire	3.2	2,682	13.8	11,657	1.6	1,332
Fenland	4.0	4,690	16.6	19,419	2.0	2,335
Huntingdonshire	3.2	5,777	14.2	25,539	1.6	2,793
South Cambridgeshire	2.8	3,512	13.0	16,484	1.4	1,806
Cambridgeshire	2.9	19,833	12.7	87,589	1.5	10,035
England	3.2	1,839,330	13.8	7,949,274	1.7	998,774

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalences of coronary heart disease, high blood pressure and stroke are statistically significantly higher than the national averages among patients of general practices in Fenland.
- The recorded prevalence of high blood pressure is also statistically significantly higher than the national average among patients of Huntingdonshire practices.

Table 60. Estimated prevalence of cardiovascular conditions, Cambridgeshire districts, 2015

Area	Coronary heart disease (55-79) (%)	High blood pressure (all ages) (%)		Stroke (55-79) (%)
		Diagnosed	Undiagnosed	
Cambridge	6.9	12.9	9.5	3.5
East Cambridgeshire	7.9	19.9	12.3	4.0
Fenland	8.7	23.9	13.2	4.0
Huntingdonshire	7.4	20.4	12.2	3.6
South Cambridgeshire	7.1	19.3	11.8	3.4
England	7.9	20.8	12.2	3.7

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

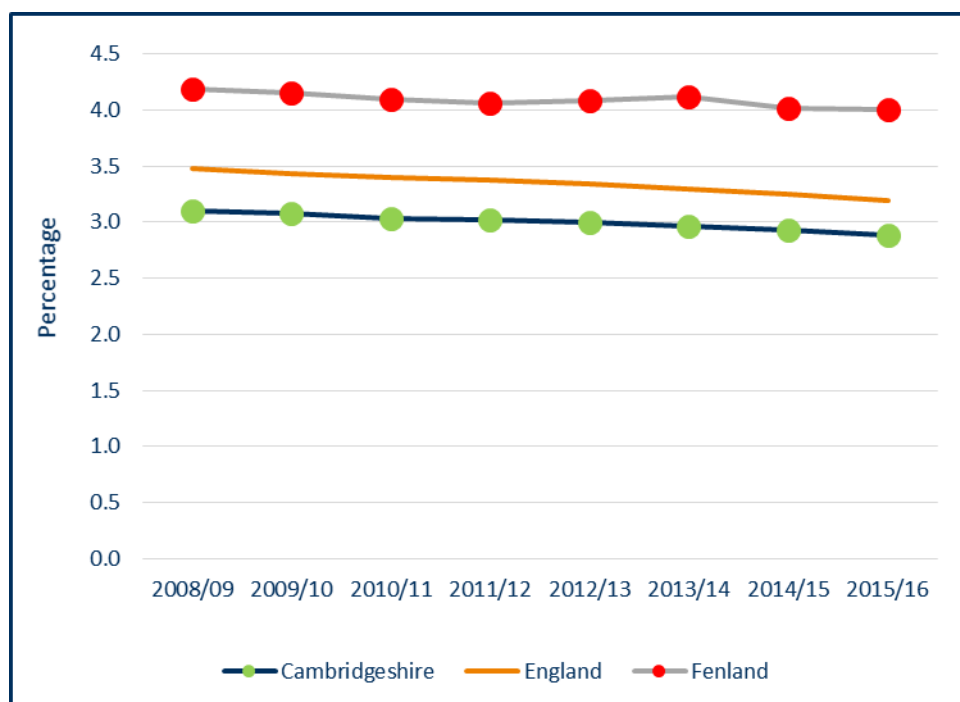
Sources: Public Health England Disease and risk factor prevalence profiles (Whitehall II study - CHD and Stroke; Imperial College, London - High blood pressure)

Key points:

- The estimated prevalences of CHD, diagnosed and undiagnosed high blood pressure are statistically significantly higher than the England average in Fenland.
- Although these modelled estimates are not comparable to recorded prevalence data due to differences in age definitions, the patterns by district are similar.

Trends and local patterns

Figure 64. Trends in prevalence of coronary heart disease, Fenland, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The prevalence of coronary heart disease (CHD) in Fenland has been consistently statistically significantly higher than the average for England since 2008/09. Prevalence has fallen slightly, as it has nationally and for the county as a whole.

Table 61. General practices with statistically significantly higher than national average rates of recorded CHD, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Fenland	Doddington	5.4
Fenland	Mercheford House, March	5.3
Huntingdonshire	Church St, Somersham	4.8
Huntingdonshire	Ramsey Health Centre	4.6
Fenland	Parson Drove	4.4
Fenland	Riverside Practice, March	4.3
Fenland	Cornerstone Practice, March	4.3
Fenland	North Brink, Wisbech	4.2
Fenland	Jenner Health Centre, Whittlesey	4.2
East Cambridgeshire	Sutton	4.2
Fenland	Clarkson Surgery, Wisbech	4.2
Huntingdonshire	Eaton Socon	4.1
Fenland	George Clare, Chatteris	4.0
East Cambridgeshire	St Mary's, Ely	3.9
East Cambridgeshire	Bottisham	3.8
Huntingdonshire	Alconbury and Brampton	3.7
Huntingdonshire	Cromwell Place, St Ives	3.7
Huntingdonshire	Priory Fields, Huntingdon	3.5

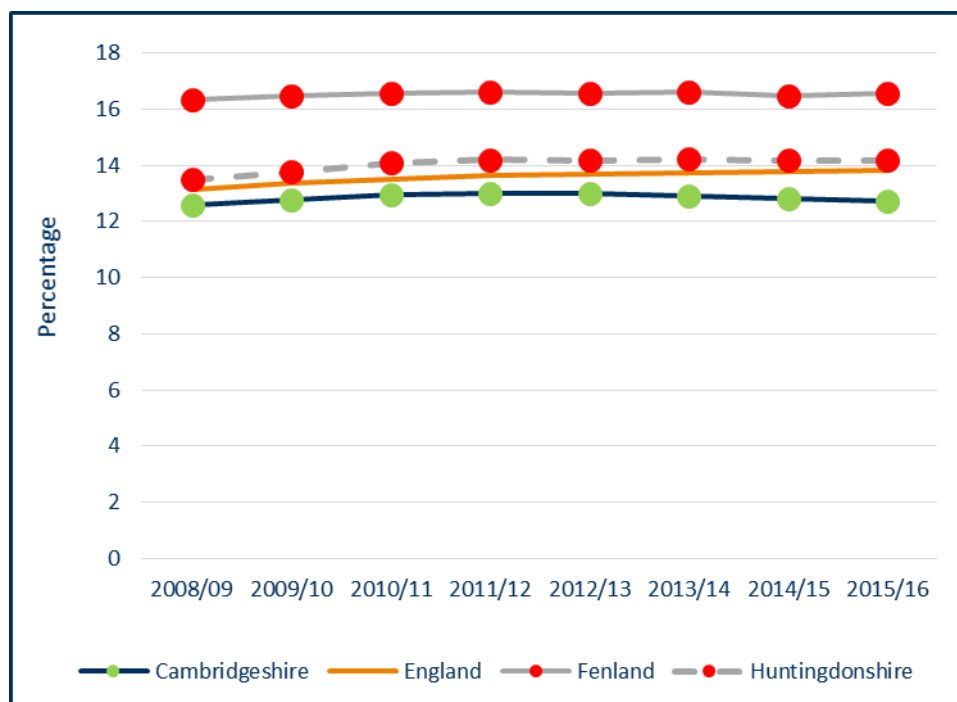
England average: 3.2%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Many practices in Cambridgeshire with statistically significantly higher than national average rates of recorded CHD are located in Fenland (9), but other practices are located in Huntingdonshire (6) and East Cambridgeshire (3).

Figure 65. Trends in prevalence of high blood pressure, Fenland and Huntingdonshire, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The prevalence of high blood pressure has been consistently statistically significantly higher than the average for England in both Fenland and Huntingdonshire since 2008/09 though prevalence is notably higher in Fenland than in Huntingdonshire.
- Prevalence rates in Fenland appear stable, as they do countywide.
- Prevalence rates in Huntingdonshire appear to have increased slightly, following the national trend.

Table 62. General practices with statistically significantly higher than national average rates of recorded high blood pressure, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Fenland	Mercheford House, March	22.1
Huntingdonshire	Church St, Somersham	21.7
Fenland	Jenner Health Centre, Whittlesey	19.9
Huntingdonshire	Old Exchange Surgery, St Ives	19.3
Fenland	Cornerstone Practice, March	18.2
Fenland	Manea	18.0
Fenland	Doddington	18.0
Huntingdonshire	Ramsey Health Centre	17.8
Fenland	Parson Drove	17.7
Fenland	Clarkson Surgery, Wisbech	17.6
Fenland	North Brink, Wisbech	17.3
Huntingdonshire	Kimbolton	17.0
Fenland	Riverside Practice, March	16.9
East Cambridgeshire	Bottisham	16.4
East Cambridgeshire	Sutton	16.3
Huntingdonshire	Great Staughton	16.3
Fenland	Queen St, Whittlesey	16.3
East Cambridgeshire	St Mary's, Ely	16.2
Huntingdonshire	Priory Fields, Huntingdon	16.0
Huntingdonshire	Eaton Socon	15.5
East Cambridgeshire	Littleport	15.4
South Cambridgeshire	Orchard Surgery, Melbourn	15.4
Huntingdonshire	Alconbury and Brampton	15.2
Huntingdonshire	Northcote House, St Ives	15.2
South Cambridgeshire	Comberton	15.2
Huntingdonshire	Buckden and Little Paxton	15.1
South Cambridgeshire	Harston	14.7
Huntingdonshire	Yaxley	14.7
South Cambridgeshire	Granta Medical Practices	14.3

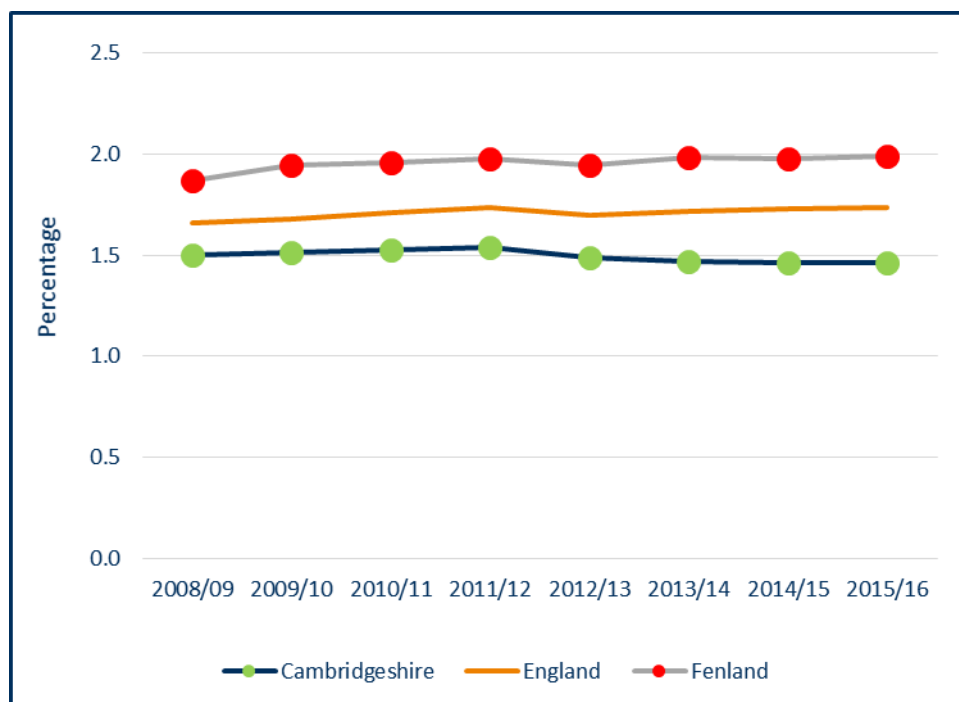
England average: 13.8%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Many practices in Cambridgeshire with statistically significantly higher than national average rates of recorded high blood pressure are located in Huntingdonshire (11) and Fenland (10), but other practices are located in East Cambridgeshire (4) and South Cambridgeshire (4).

Figure 66. Trends in prevalence of stroke, Fenland, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The prevalence of stroke in Fenland has been consistently statistically significantly higher than the average for England since 2008/09. Prevalence appears to have increased slightly, in line with national trends but against a small decrease for the county as a whole.

Table 63. General practices with statistically significantly higher than national average rates of recorded stroke, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Fenland	Doddington	3.0
Fenland	Clarkson Surgery, Wisbech	2.6
Fenland	Jenner Health Centre, Whittlesey	2.5
Fenland	Mercheford House, March	2.5
East Cambridgeshire	Bottisham	2.4
Huntingdonshire	Great Staughton	2.2
Fenland	Parson Drove	2.2
Fenland	North Brink, Wisbech	2.1
Huntingdonshire	Spinney, St Ives	2.0

England average: 1.7%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:




- Many practices in Cambridgeshire with statistically significantly higher than national average rates of recorded stroke are located in Fenland (6), but other practices are located in Huntingdonshire (2) and East Cambridgeshire (1).

6.2 Respiratory conditions (asthma and chronic obstructive pulmonary disease)

Latest prevalence and modelled estimates

Table 64. Prevalence of respiratory conditions by district of general practice location, Cambridgeshire, 2015/16

Area of GP location	Asthma		Chronic obstructive pulmonary disease	
	Percentage	Number of people	Percentage	Number of people
Cambridge	5.2	9,275	1.1	1,915
East Cambridgeshire	6.7	5,677	1.9	1,558
Fenland	6.5	7,568	2.5	2,970
Huntingdonshire	6.5	11,698	1.9	3,375
South Cambridgeshire	7.1	8,915	1.3	1,641
Cambridgeshire	6.3	43,133	1.7	11,459
England	5.9	3,400,679	1.9	1,066,471

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average




Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalence of asthma is statistically significantly higher than the national average among patients of general practices for the county as a whole and in all districts except for Cambridge.
- The recorded prevalence of chronic obstructive pulmonary disease (COPD) is statistically significantly higher than the England average in Fenland.

Table 65. Estimated prevalence of COPD, Cambridgeshire districts, 2015

Area	Prevalence (%)
Cambridge	1.6
East Cambridgeshire	3.0
Fenland	4.1
Huntingdonshire	2.6
South Cambridgeshire	2.4
England	3.0

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

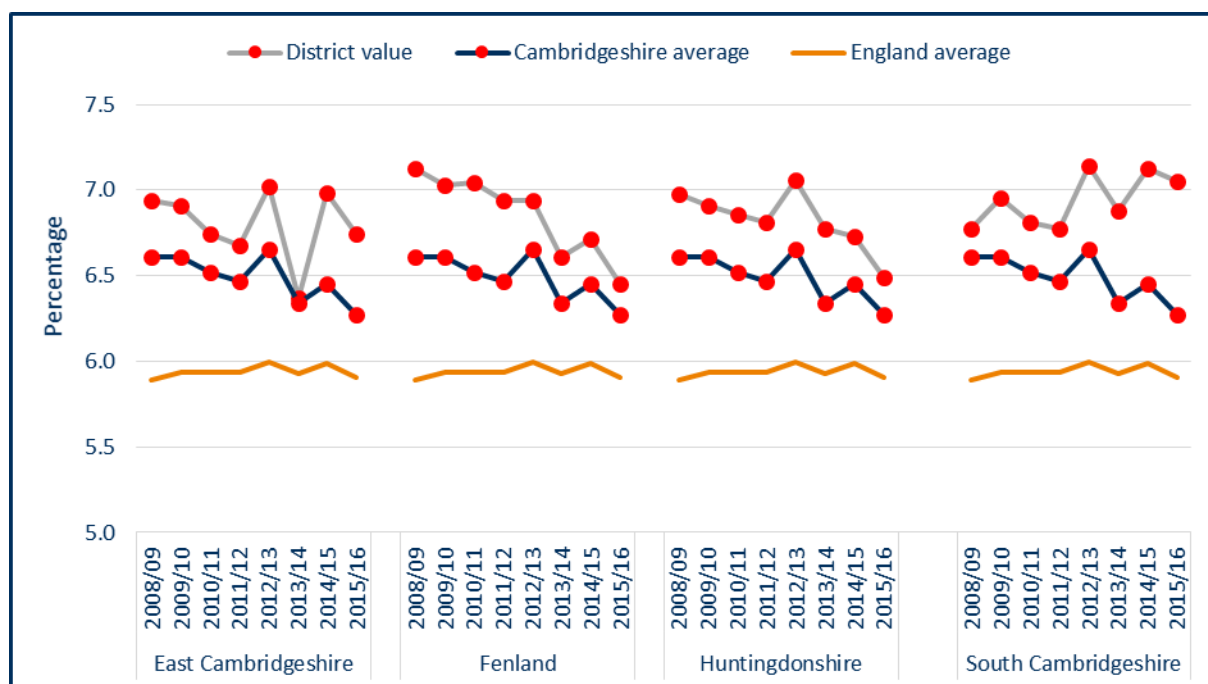
Source: Public Health England Disease and risk factor prevalence profiles (Imperial College, London - Clinical Practice Research Datalink)

Key point:

- The estimated prevalence of COPD is statistically significantly higher than the England average in Fenland.
- The estimated prevalences of COPD by district are between 1.4x and 1.8x the recorded prevalence (Table 60), though the patterns by district are very similar.

Trends and local patterns

Figure 67. Trends in prevalence of asthma, East Cambridgeshire, Fenland, Huntingdonshire and South Cambridgeshire, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalence of asthma has been consistently statistically significantly higher than the England average in East Cambridgeshire, Fenland, Huntingdonshire, and South Cambridgeshire since 2008/09.
- Rates appear to have decreased in Fenland and Huntingdonshire, as for the county as a whole, but increased in South Cambridgeshire. Rates in Cambridge have been more variable; national rates appear stable.

Table 66. General practices with statistically significantly higher than national average rates of recorded asthma, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Cambridge Access Surgery*	10.2
Fenland	Mercheford House, March	8.9
South Cambridgeshire	Comberton	8.8
East Cambridgeshire	Bottisham	8.5
South Cambridgeshire	Granta Medical Practices	8.4
Fenland	Cornerstone Practice, March	8.1
Huntingdonshire	Rainbow Surgery, Ramsey	8.1
East Cambridgeshire	Burwell	8.0
Huntingdonshire	Alconbury and Brampton	7.9
South Cambridgeshire	Cottenham	7.9
Huntingdonshire	Great Staughton	7.8
Huntingdonshire	Charles Hicks, Huntingdon	7.8
Fenland	Riverside Practice, March	7.6
East Cambridgeshire	Sutton	7.6
Huntingdonshire	Parkhall Surgery, Somersham	7.5
Huntingdonshire	Kimbolton	7.3
Huntingdonshire	Cromwell Place, St Ives	7.2
Fenland	Clarkson Surgery, Wisbech	7.2
Fenland	George Clare, Chatteris	7.1
South Cambridgeshire	Shelford	7.1
South Cambridgeshire	Maple Surgery, Bar Hill Health Centre	7.1
South Cambridgeshire	Milton	7.0
Cambridge	Arbury Road, Cambridge	7.0
Huntingdonshire	Buckden and Little Paxton	7.0
East Cambridgeshire	Haddenham	7.0
South Cambridgeshire	Swavesey	6.9
Huntingdonshire	Ramsey Health Centre	6.9
East Cambridgeshire	Littleport	6.9
Cambridge	Nuffield Road, Cambridge	6.8
South Cambridgeshire	Orchard Surgery, Melbourn	6.7
Huntingdonshire	Wellside Surgery, Sawtry	6.7
Cambridge	East Barnwell, Cambridge	6.7
South Cambridgeshire	Over	6.6
East Cambridgeshire	Soham	6.5
Fenland	Jenner Health Centre, Whittlesey	6.5
Huntingdonshire	Spinney, St Ives	6.5
Huntingdonshire	Cedar House, St Neots	6.5
East Cambridgeshire	St Mary's, Ely	6.3

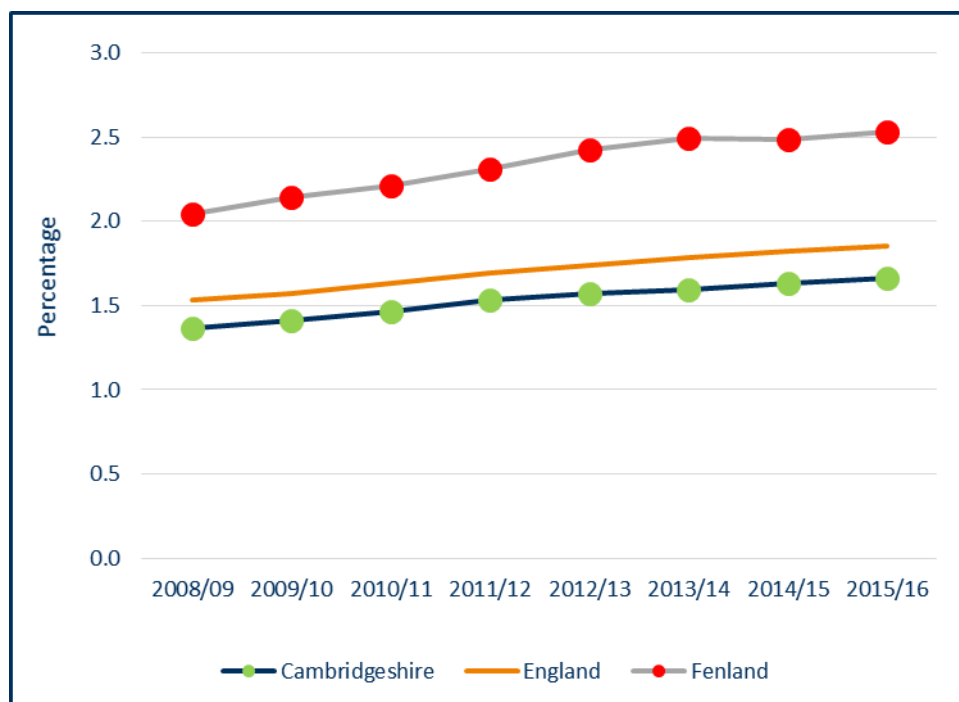
* Dedicated surgery for people homeless, in sheltered accommodation or at risk of homelessness
England average: 5.9 %

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Practices with statistically significantly higher than average rates of asthma are located throughout the county: Cambridge – 4, East Cambridgeshire – 7, Fenland – 6, Huntingdonshire – 12, South Cambridgeshire – 9.

Figure 68. Trends in prevalence of COPD, Fenland, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalence of COPD has been consistently statistically significantly higher than the England average in Fenland since 2008/09.
- Rates appear to have increased in Fenland, as they have for the county as a whole and nationally.

Table 67. General practices with statistically significantly higher than national average rates of recorded COPD, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Cambridge Access Surgery*	4.7
Fenland	Doddington	4.2
Huntingdonshire	Church St, Somersham	3.3
Fenland	Mercheford House, March	3.2
Huntingdonshire	Ramsey Health Centre	2.9
Fenland	Cornerstone Practice, March	2.7
Fenland	Trinity Surgery, Wisbech	2.7
Fenland	North Brink, Wisbech	2.6
Fenland	Clarkson Surgery, Wisbech	2.6
Fenland	Manea	2.6
East Cambridgeshire	Bottisham	2.5
Huntingdonshire	Great Staughton	2.4
Fenland	Jenner Health Centre, Whittlesey	2.4
Huntingdonshire	Almond Road, St Neots	2.2
Fenland	George Clare, Chatteris	2.2
East Cambridgeshire	St Mary's, Ely	2.2
Huntingdonshire	Cromwell Place, St Ives	2.2
Fenland	Queen St, Whittlesey	2.1
Huntingdonshire	Eaton Socon	2.1
Huntingdonshire	Yaxley	2.1

* Dedicated surgery for people homeless, in sheltered accommodation or at risk of homelessness
England average: 1.9%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Many of the practices in Cambridgeshire with statistically significantly higher than national average prevalence of COPD are located in Fenland (10), but other are located in Cambridge (1), East Cambridgeshire (2) and Huntingdonshire (7).




6.3 Long term and high dependency conditions (cancer and diabetes)

Latest prevalence

Table 68. Prevalence of long-term and high dependency conditions by district of general practice location, Cambridgeshire, 2015/16

Area of GP location	Cancer*		Diabetes (17+)	
	Percentage	Number of people	Percentage	Number of people
Cambridge	1.8	3,274	3.3	5,110
East Cambridgeshire	3.0	2,501	6.6	4,507
Fenland	2.9	3,372	7.9	7,582
Huntingdonshire	2.6	4,664	6.2	8,989
South Cambridgeshire	2.9	3,681	4.9	4,928
Cambridgeshire	2.5	17,492	5.5	31,116
England	2.4	1,392,577	6.5	3,033,529

* Patients diagnosed with cancer (excluding non-melanotic skin cancer) on or after 01/04/2003

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The recorded prevalence of cancer is statistically significantly higher than the national average among patients of general practices for the county as a whole and in all districts except for Cambridge. It should be noted that this is a cumulative measure of new cancer diagnosis since 01/04/2003 and not the prevalence of existing cancers in the population.
- The recorded prevalence of diabetes in people aged 17 years and over is statistically significantly higher than the England average in Fenland.

Trends and local patterns

Table 69. General practices with statistically significantly higher than national average rates of recorded cancer*, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
East Cambridgeshire	Bottisham	4.3
Huntingdonshire	Great Staughton	3.8
East Cambridgeshire	Sutton	3.7
South Cambridgeshire	Shelford	3.6
East Cambridgeshire	St Mary's, Ely	3.6
South Cambridgeshire	Harston	3.6
Huntingdonshire	Buckden and Little Paxton	3.6
Fenland	Jenner Health Centre, Whittlesey	3.5
Fenland	Mercheford House, March	3.5
South Cambridgeshire	Granta Medical Practices	3.5
Huntingdonshire	Church St, Somersham	3.4
Fenland	Riverside Practice, March	3.4
Huntingdonshire	Eaton Socon	3.4
Huntingdonshire	Alconbury and Brampton	3.3
South Cambridgeshire	Cottenham	3.3
South Cambridgeshire	Over	3.2
South Cambridgeshire	Comberton	3.2
Fenland	George Clare, Chatteris	3.2
Huntingdonshire	Old Exchange Surgery, St Ives	3.2
Fenland	Parson Drove	3.1
East Cambridgeshire	Burwell	3.1
Fenland	Cornerstone Practice, March	3.1
South Cambridgeshire	Bourn	3.0
South Cambridgeshire	Swavesey	3.0
Cambridge	Cornford House, Cherry Hinton	3.0
Huntingdonshire	Kimbolton	3.0
Fenland	Clarkson Surgery, Wisbech	3.0
Huntingdonshire	Ramsey Health Centre	3.0
Huntingdonshire	Spinney, St Ives	2.9
Cambridge	Queen Edith's, Cambridge	2.9
South Cambridgeshire	Willingham	2.8
Fenland	Queen St, Whittlesey	2.8
Fenland	North Brink, Wisbech	2.8
East Cambridgeshire	Soham	2.6

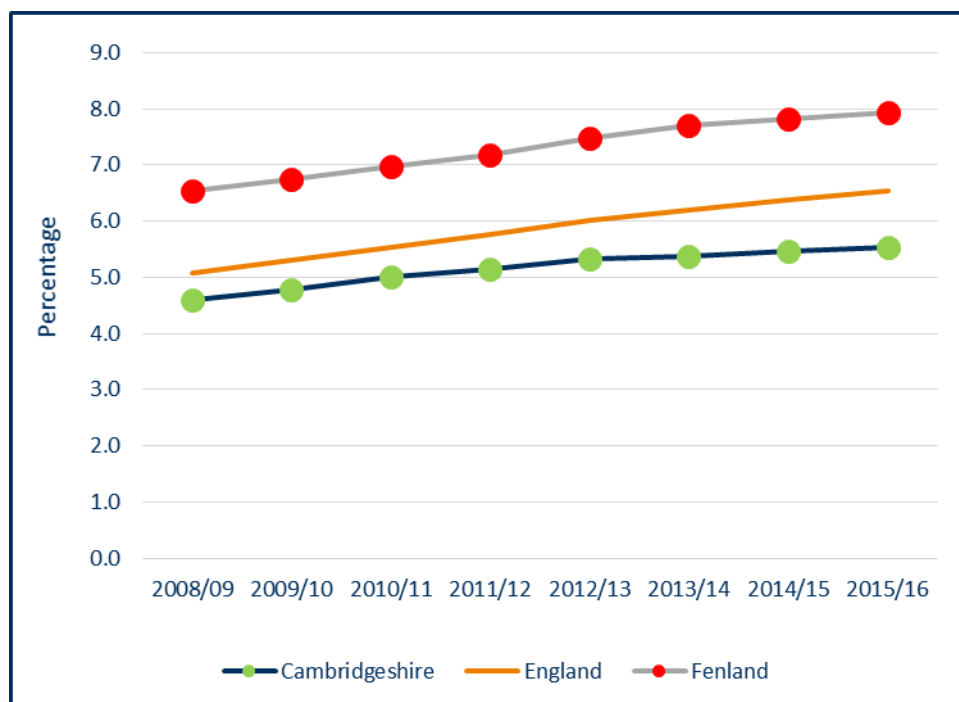
* Patients diagnosed with cancer (excluding non-melanotic skin cancer) on or after 01/04/2003
England average: 2.4%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Practices with statistically significantly higher than average rates of recorded cancer are spread throughout the county: Huntingdonshire (11), Fenland (10), South Cambridgeshire (9), East Cambridgeshire (6) and Cambridge (2).

Figure 69. Trends in prevalence of diabetes (17+), Fenland, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Although not statistically assessed, the prevalence of recorded diabetes appears to have increased in Fenland, as it has for the county as a whole and nationally, remaining statistically significantly higher than the England average since 2008/09.

Table 70. General practices with statistically significantly higher than national average rates of recorded diabetes (17+), Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Fenland	Manea	9.3
Fenland	Riverside Practice, March	9.2
Fenland	Mercheford House, March	9.2
Fenland	Cornerstone Practice, March	8.6
Fenland	Doddington	8.6
Fenland	Clarkson Surgery, Wisbech	8.5
Huntingdonshire	Ramsey Health Centre	8.5
Fenland	Parson Drove	8.4
Fenland	Jenner Health Centre, Whittlesey	7.9
Fenland	North Brink, Wisbech	7.9
East Cambridgeshire	Littleport	7.7
Fenland	George Clare, Chatteris	7.5
Huntingdonshire	Moat House, Warboys	7.4
Fenland	Queen St, Whittlesey	7.3

England average: 6.5%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Most practices with statistically significantly higher than national average rates of recorded diabetes are located in Fenland (11), two are located in Huntingdonshire and one in East Cambridgeshire.




6.4 Mental health (psychoses, depression, dementia and learning disability)

Latest prevalence and modelled estimates

Table 71. Prevalence of mental health conditions by district of general practice location, Cambridgeshire, 2015/16

Area of GP location	Schizophrenia, bipolar affective disorder and other psychoses		Depression (18+)*		Dementia		Learning disabilities	
	Percentage	Number of people	Percentage	Number of people	Percentage	Number of people	Percentage	Number of people
Cambridge	1.1	1,956	6.4	9,734	0.5	981	0.3	569
East Cambridgeshire	0.7	592	7.6	5,075	0.7	599	0.4	337
Fenland	0.6	718	9.1	8,604	0.8	930	0.5	609
Huntingdonshire	0.7	1,215	8.5	12,186	0.7	1,301	0.5	826
South Cambridgeshire	0.7	915	7.2	7,059	0.6	782	0.3	401
Cambridgeshire	0.8	5,396	7.7	42,658	0.7	4,593	0.4	2,742
England	0.9	518,320	8.3	3,775,531	0.8	436,805	0.5	263,588

* Patients with a record of unresolved depression since April 2006

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence




Key points:

- The recorded prevalence of schizophrenia, bipolar affective disorder and other psychoses is statistically significantly higher than the England average in Cambridge.
- Rates of recorded depression are statistically significantly higher than the national average in Fenland and Huntingdonshire.
- Levels of recorded dementia across the county are statistically significantly lower or similar to the national average. The recorded prevalence of dementia among people aged 65+ in Cambridgeshire is 3.9%, statistically significantly lower than the England average [data not shown].²
- The proportion of people with a recorded learning disability is statistically significantly higher than the England average in Fenland.

² September 2016, Public Health England Dementia Profile.

Table 72. Estimated prevalence of depression (all ages), Cambridgeshire districts, 2015

Area	Prevalence (%)
Cambridge	14.4
East Cambridgeshire	14.9
Fenland	17.0
Huntingdonshire	14.9
South Cambridgeshire	14.1
England	15.0

	Statistically significantly lower than the England average
	Statistically similar to the England average
	Statistically significantly higher than the England average




Source: Public Health England Disease and risk factor prevalence profiles (Imperial College, London - Health Survey for England)

Key point:

- The estimated prevalence of depression among people of all ages is statistically significantly higher than the national average in Fenland at 17%.

Table 73. Estimated dementia diagnosis rate (65+), Cambridgeshire districts, 2015

Area	Prevalence (%)
Cambridge	67.4
East Cambridgeshire	58.0
Fenland	60.1
Huntingdonshire	69.6
South Cambridgeshire	54.8
Cambridgeshire	62.7
England	67.9

	Statistically significantly higher than 66.7%
	Statistically similar to 66.7%
	Statistically significantly lower than 66.7%

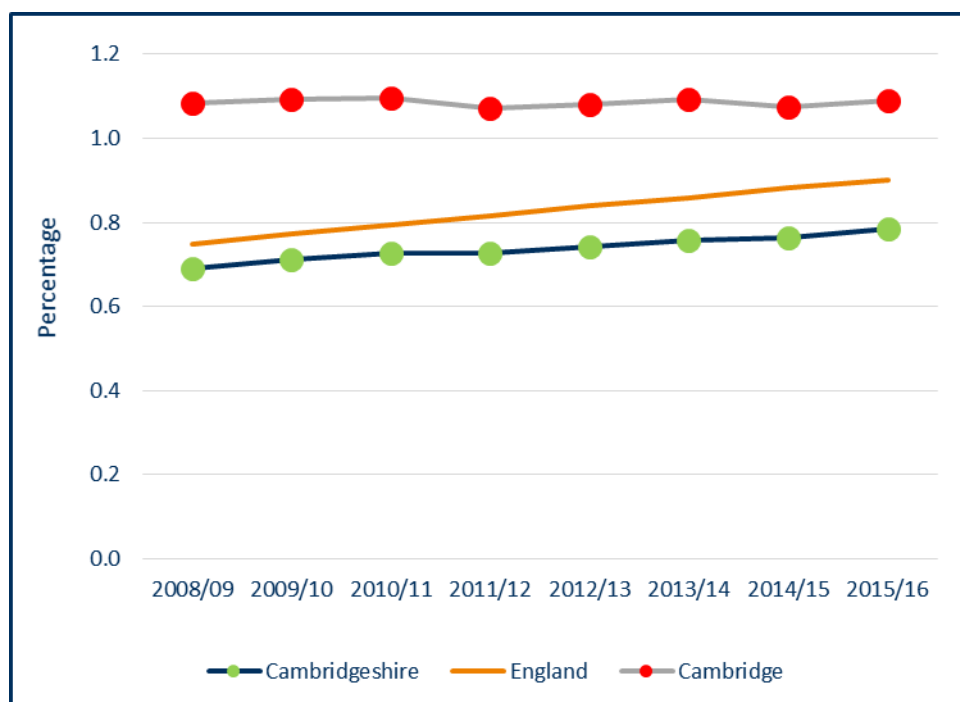
Source: Public Health England Public Health Outcomes Framework Indicator 4.16 (NHS Digital)

Key points:

- It is estimated that 62.7% of people aged 65 and over with dementia in Cambridgeshire have their condition diagnosed, below but statistically similar to the target of 66.7%.
- The percentage of estimated dementia cases diagnosed is statistically significantly below the benchmark in East Cambridgeshire, Fenland and South Cambridgeshire.

Trends and local patterns

Figure 70. Trends in prevalence of recorded schizophrenia, bipolar affective disorder and other psychoses, Cambridge, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The prevalence of recorded schizophrenia, bipolar affective disorder and other psychoses has been consistently statistically significantly higher than the national average in Cambridge since 2008/09 but appears stable, in contrast to rates appearing to be increasing slightly in England and Cambridgeshire as a whole.

Table 74. General practices with statistically significantly higher than national average rates of recorded schizophrenia, bipolar affective disorder and other psychoses, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Cambridge Access Surgery*	12.3
Cambridge	Woodlands Surgery, Cambridge	1.6
Cambridge	Nuffield Road, Cambridge	1.4
Cambridge	Petersfield, Cambridge	1.4
Cambridge	Arbury Road, Cambridge	1.4
Cambridge	York St, Cambridge	1.3
Cambridge	281 Mill Road, Cambridge	1.2
Cambridge	Cherry Hinton Med Centre	1.2
Cambridge	Cornford House, Cherry Hinton	1.2
Cambridge	East Barnwell, Cambridge	1.2
Huntingdonshire	Priory Fields, Huntingdon	1.2
Cambridge	Lensfield Road, Cambridge	1.1

* Dedicated surgery for people homeless, in sheltered accommodation or at risk of homelessness
England average: 0.9%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- Nearly all practices with statistically significantly higher than national average rates of recorded schizophrenia, bipolar affective disorder and other psychoses are located in Cambridge (11), with one other practice in Huntingdon.

Table 75. General practices with statistically significantly higher than national average rates of recorded depression (18+)*, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Cambridge Access Surgery**	26.6
Huntingdonshire	Church St, Somersham	17.1
Cambridge	East Barnwell, Cambridge	15.2
Fenland	Riverside Practice, March	14.2
Huntingdonshire	Rainbow Surgery, Ramsey	13.9
Huntingdonshire	Almond Road, St Neots	12.7
Fenland	Cornerstone Practice, March	12.4
Huntingdonshire	Parkhall Surgery, Somersham	12.0
Huntingdonshire	Acorn Surgery, Huntingdon	11.7
Fenland	Clarkson Surgery, Wisbech	11.6
South Cambridgeshire	Willingham	11.1
South Cambridgeshire	Cambourne	11.1
Fenland	George Clare, Chatteris	10.8
East Cambridgeshire	Littleport	10.7
East Cambridgeshire	Cathedral Medical Centre, Ely	10.4
Fenland	Mercheford House, March	10.3
Huntingdonshire	Ramsey Health Centre	9.7
Huntingdonshire	Alconbury and Brampton	9.7
Huntingdonshire	Yaxley	9.5
Cambridge	Cherry Hinton Med Centre	9.3
Fenland	Queen St, Whittlesey	9.1
Cambridge	Nuffield Road, Cambridge	9.1
Huntingdonshire	Cromwell Place, St Ives	9.1
Huntingdonshire	Charles Hicks, Huntingdon	8.9

* Patients with a record of unresolved depression since April 2006

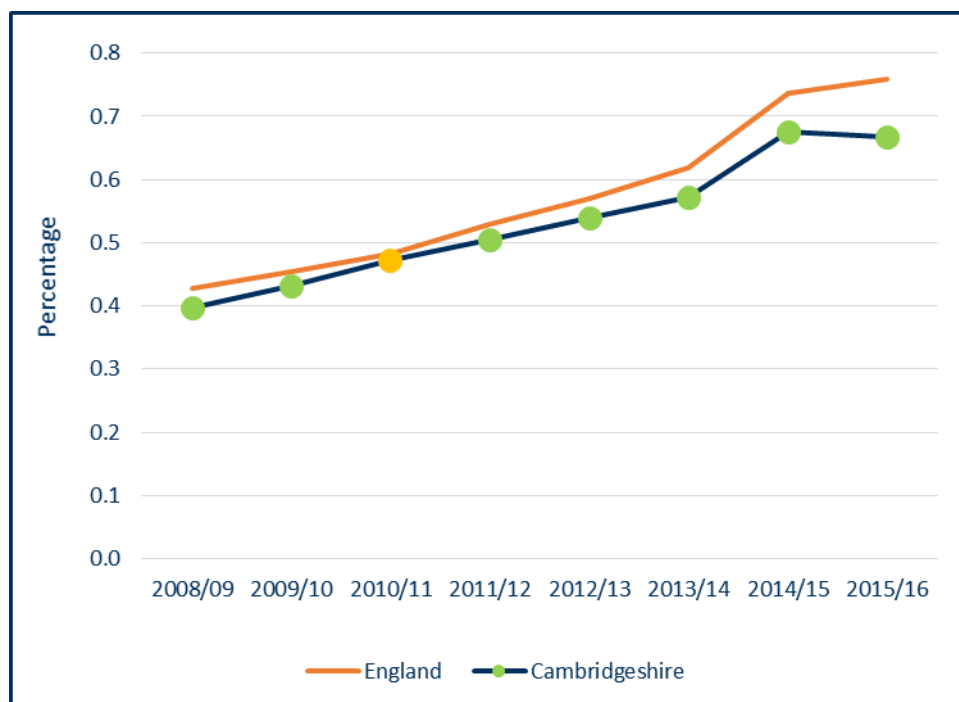
** Dedicated surgery for people homeless, in sheltered accommodation or at risk of homelessness
England average: 8.3%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- Practices with statistically significantly higher than average rates of depression are located throughout the county: Cambridge – 4, East Cambridgeshire – 2, Fenland – 6, Huntingdonshire – 10, South Cambridgeshire – 2.

Figure 71. Trends in prevalence of recorded dementia, Cambridgeshire, 2008/09-2015/16



- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- The prevalence of recorded dementia in Cambridgeshire has increased since 2008/09 as it has nationally, but remains statistically significantly lower than the national average.

Table 76. General practices with statistically significantly higher than national average rates of recorded dementia, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Nuffield Road, Cambridge	2.1
East Cambridgeshire	Bottisham	1.8
Huntingdonshire	Priory Fields, Huntingdon	1.5
Fenland	Jenner Health Centre, Whittlesey	1.4
Huntingdonshire	Old Exchange Surgery, St Ives	1.2
Huntingdonshire	Buckden and Little Paxton	1.1
Fenland	Mercheford House, March	1.1
South Cambridgeshire	Firs House, Histon	1.1
Fenland	North Brink, Wisbech	1.0
Huntingdonshire	Ramsey Health Centre	1.0
Fenland	Doddington	1.0

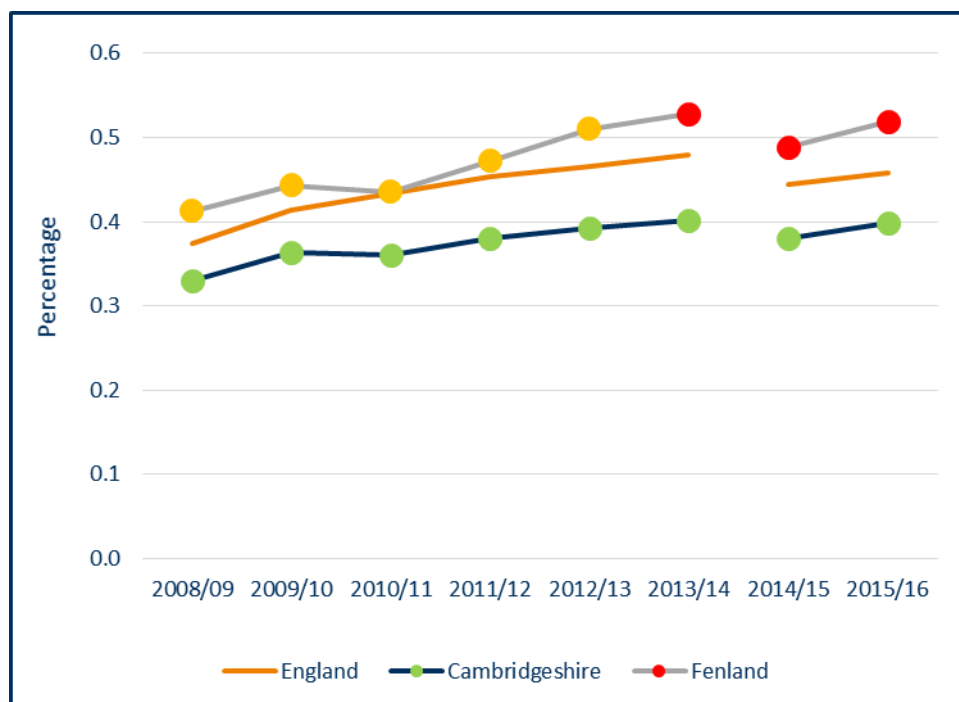
England average: 0.8%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- Practices with statistically significantly higher than average rates of recorded dementia are located throughout the county: Cambridge – 1, East Cambridgeshire – 1, Fenland – 4, Huntingdonshire – 4, South Cambridgeshire – 1.

Figure 72. Trends in prevalence of recorded learning disabilities*, Fenland, 2008/09-2015/16



* 2008/09-2013/14: Adults=18+; 2014/15-2015/16: All ages

- Statistically significantly lower than the England average
- Statistically similar to the England average
- Statistically significantly higher than the England average

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key points:

- The prevalence of recorded learning disabilities increased to a level statistically significantly higher than the national average in 2013/14.
- Prevalence appears to be increasing in Fenland, Cambridgeshire as a whole and nationally.

Table 77. General practices with statistically significantly higher than national average rates of recorded learning disabilities, Cambridgeshire, 2015/16

District	Practice	Prevalence (%)
Cambridge	Cambridge Access Surgery*	1.9
Huntingdonshire	Acorn Surgery, Huntingdon	1.3
Fenland	Cornerstone Practice, March	1.0
Huntingdonshire	Almond Road, St Neots	0.9
South Cambridgeshire	Milton	0.9
Huntingdonshire	Priory Fields, Huntingdon	0.8
Fenland	Riverside Practice, March	0.8
East Cambridgeshire	Littleport	0.6
Cambridge	Nuffield Road, Cambridge	0.6
Huntingdonshire	Charles Hicks, Huntingdon	0.6
Fenland	North Brink, Wisbech	0.6

* Dedicated surgery for people homeless, in sheltered accommodation or at risk of homelessness
England average: 0.5%

Sources: NHS Digital, Quality and Outcomes Framework, Cambridgeshire County Council Public Health Intelligence

Key point:

- Practices with statistically significantly higher than average rates of recorded learning disabilities are located throughout the county: Cambridge – 2, East Cambridgeshire – 1, Fenland – 3, Huntingdonshire – 4, South Cambridgeshire – 1.

Self-harm

Table 78. Emergency hospital admission episodes for intentional self-harm, Cambridgeshire, 2015/16

Area	Male		Female		Total	
	Number of admission episodes	DASR per 100,000	Number of admission episodes	DASR per 100,000	Number of admission episodes	DASR per 100,000
Cambridge	218	273	380	440	598	352
East Cambridgeshire	48	117	158	388	206	253
Fenland	92	197	201	426	293	311
Huntingdonshire	153	181	234	279	387	227
South Cambridgeshire	92	128	201	270	293	198
Cambridgeshire	60	180	1,174	356	1,777	265
England	40,577	147	69,164	248	109,749	197

DASR – Directly age-standardised rate

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average

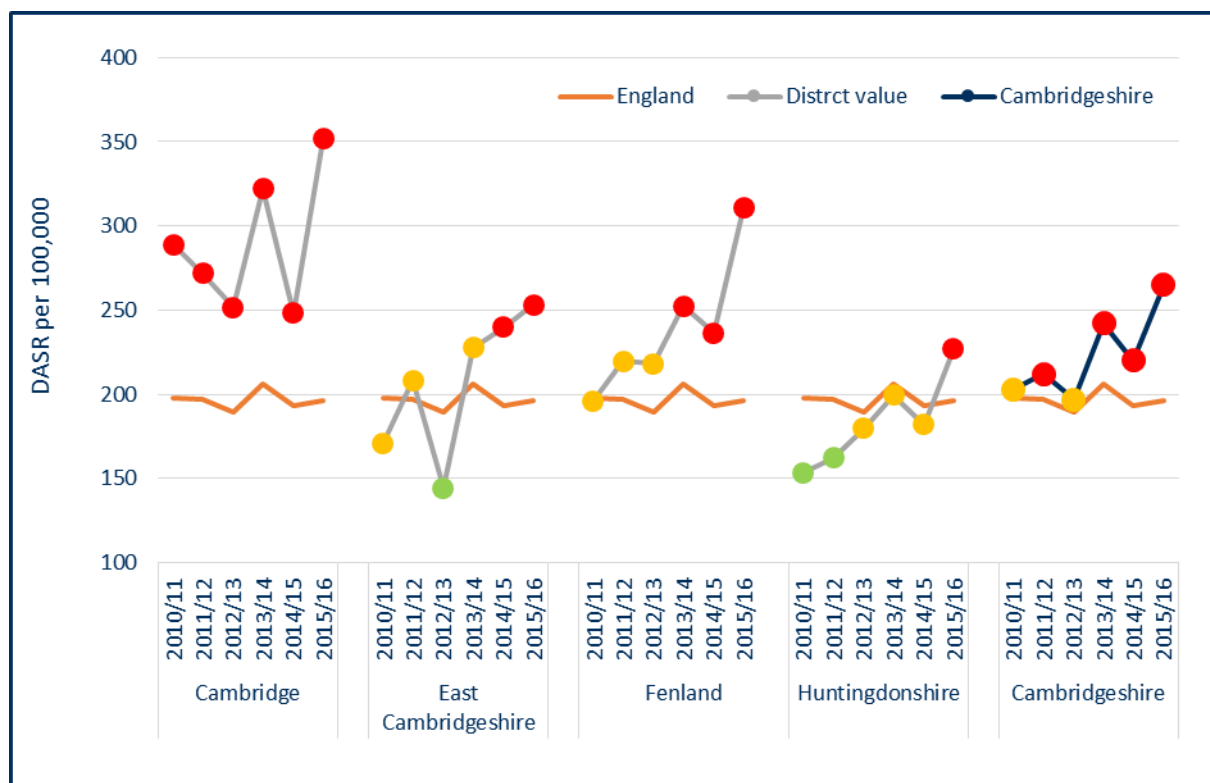
Source: Public Health England Public Health Outcomes Framework indicator 2.10ii

Key points:

- Rates of emergency admissions to hospital for self-harm are statistically significantly higher than the national average for Cambridgeshire as a whole and all districts except for South Cambridgeshire.
- Rates are higher in females, accounting for around two-thirds of admissions.
- All hospital admissions (emergency or elective) as a result of self-harm are known to be statistically significantly higher than the England average in young people aged 10-24 in Cambridgeshire [data not shown].³

³ Public Health England Children and Young People's Mental Health and Wellbeing Profiles

Figure 73. Trends in emergency hospital admission episodes for intentional self-harm, Cambridge, East Cambridgeshire, Fenland and Huntingdonshire, 2010/11 to 2015/16



DASR – Directly age-standardised rate

- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

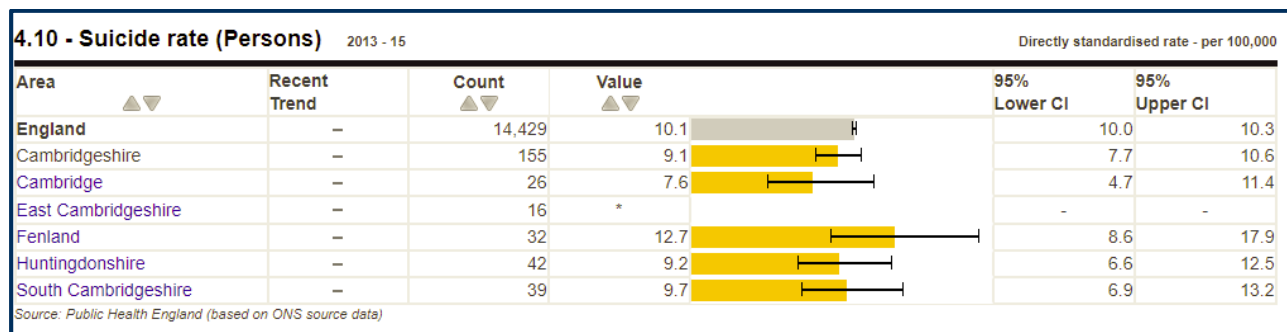
Source: Public Health England Public Health Outcomes Framework indicator 2.10ii

Key points:

- The rate of emergency admissions to hospital as a result of intentional self-harm has increased in Cambridgeshire and has been statistically significantly higher than the England average since 2013/14. These increases appear in contrast to a stable rate nationally.
- The rate is particularly high in Cambridge where rates have been consistently statistically significantly higher than the national average since 2010/11.
- Rates are also increasing in East Cambridgeshire, Fenland and Huntingdonshire.

Suicide and injury of undetermined intent

Figure 74: Suicide and injury of undetermined intent for persons, Cambridgeshire 2013 to 2015



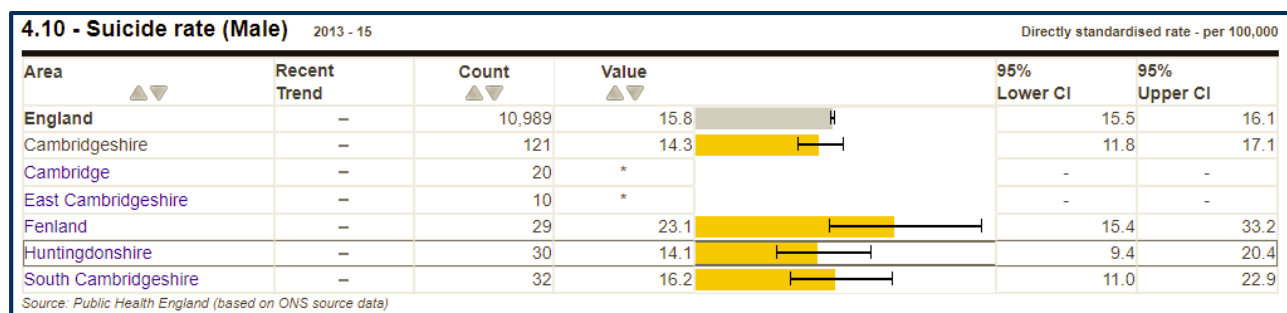
- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 4.10

Key points:

- The rates for Cambridgeshire and the districts do not differ significantly from the rate for England. Data for East Cambridgeshire are not available because the number of suicides is too small.
- Rates in males are higher than in females and the male rates are shown below.

Figure 75: Suicide and injury of undetermined intent for males, Cambridgeshire 2013 to 2015



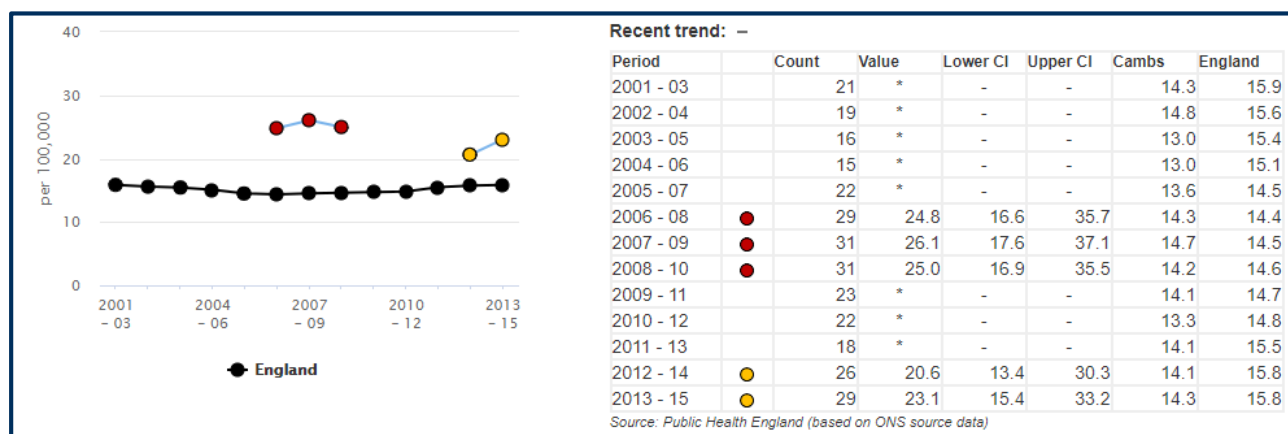
- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 4.10

Key points:

- The rates for Cambridgeshire and the districts do not differ significantly from the rate for England. Data for Cambridge and East Cambridgeshire are not available because the number of suicides is too small.
- The Fenland rate is statistically significantly higher than the rate for Cambridgeshire as a whole and the trend for Fenland is shown below.

Figure 76: Trends in suicide and injury of undetermined intent for males, Fenland and England, 2001-2023 to 2013-2015 – directly age-standardised rate per 100,000



- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 4.10

Key points:

- The rates for Fenland are consistently higher than the England and Cambridgeshire averages and, while the latest rate for 2013-2015 does not differ significantly from the England suicide rate, it is statistically significantly higher than the Cambridgeshire rate.
- The gaps in rates are where the number of suicides is too low to calculate a stable rate.

6.5 NHS hospital services

Inpatient hospital admissions




All admissions

Table 79. Hospital inpatient admission episodes by local authority of residence - all admissions, Cambridgeshire, 2015/16

Area	All ages		Under 75s		75 and over	
	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000
Cambridge	27,133	254	21,401	207	5,732	731
East Cambridgeshire	21,239	247	16,169	205	5,070	676
Fenland	33,546	325	25,462	278	8,084	808
Huntingdonshire	51,253	297	40,261	249	10,992	785
South Cambridgeshire	38,409	255	29,576	214	8,833	674
Cambridgeshire	171,580	274	132,869	228	38,711	738

DASR - directly age-standardised rate

Includes all elective, emergency, maternity and other admissions (including well babies receiving usual care)

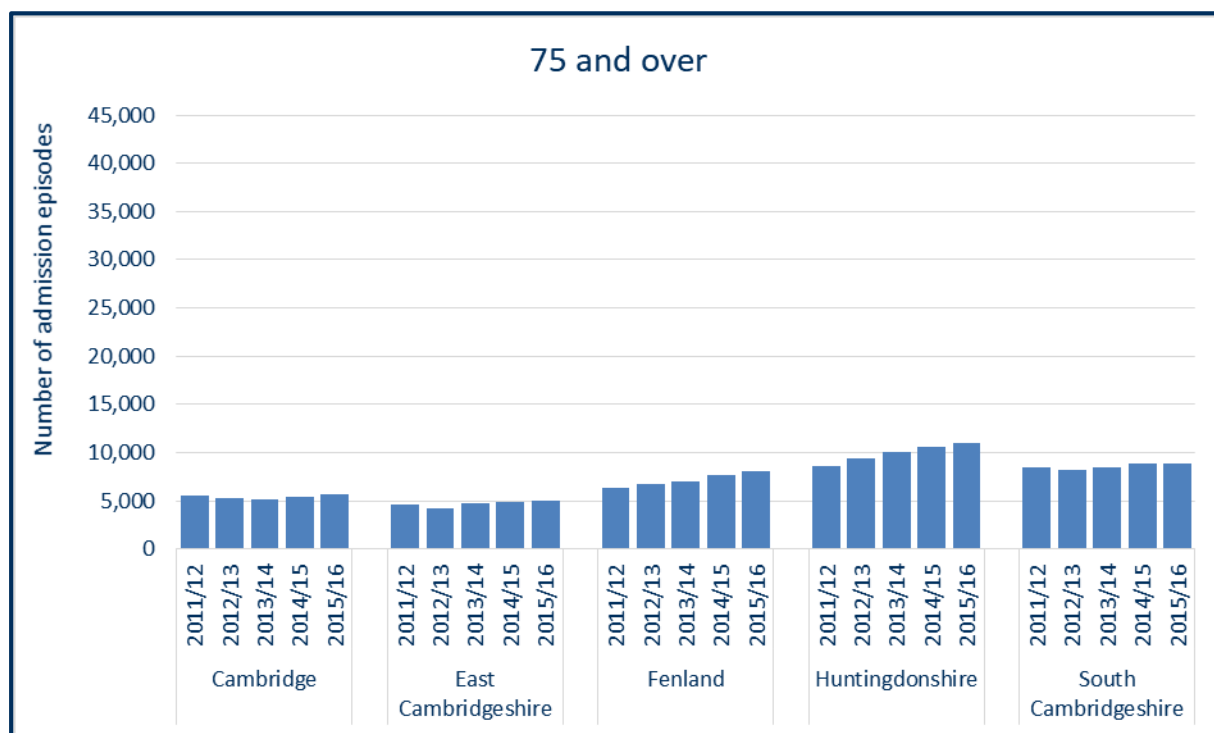
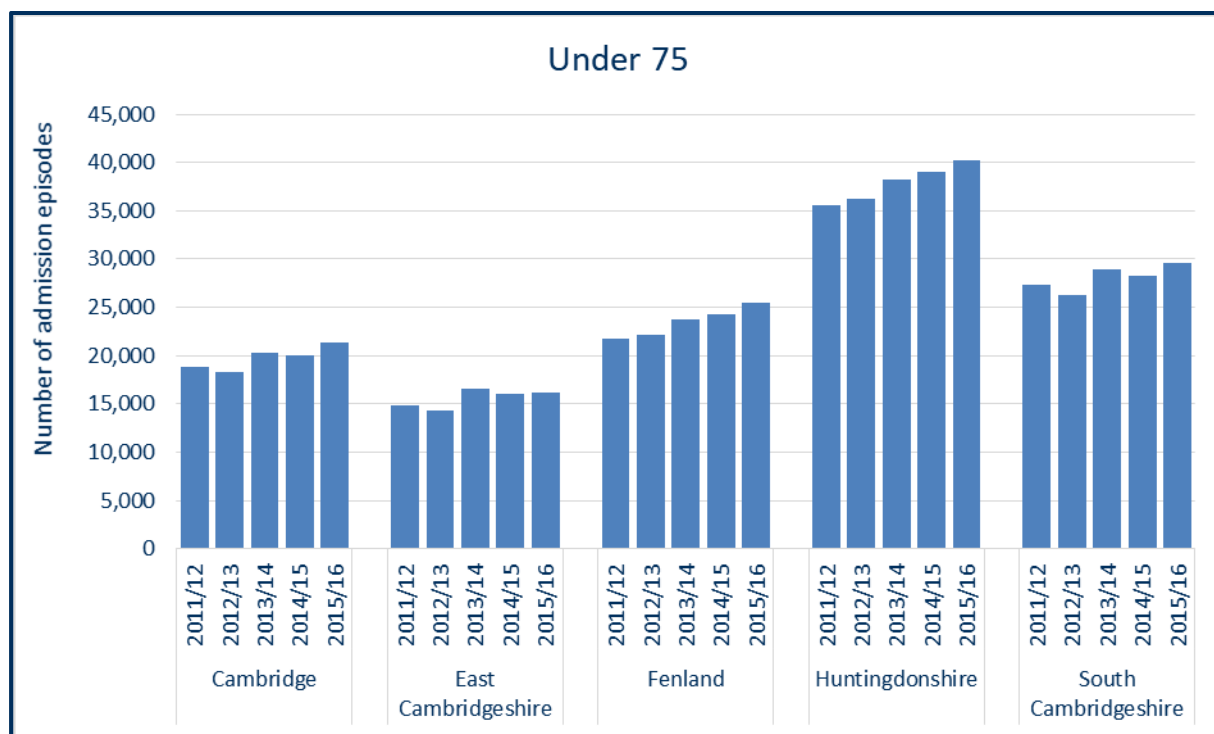
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

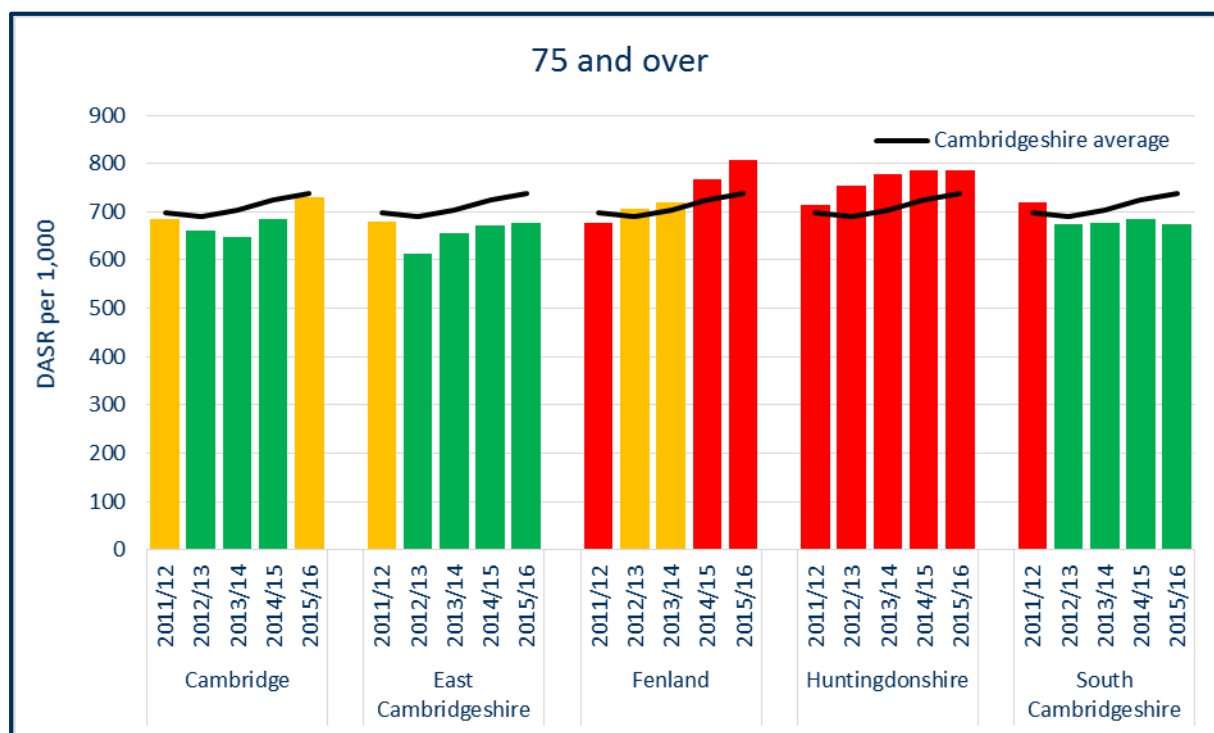
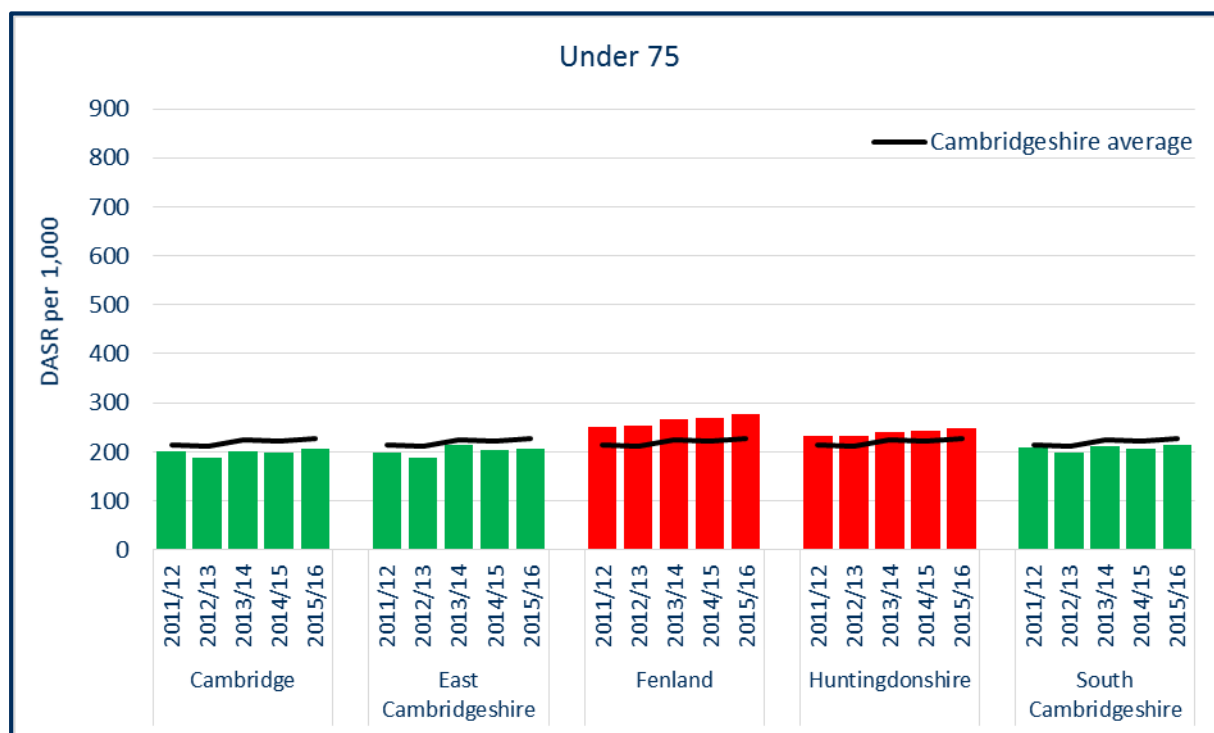
- The rate of inpatient admission episodes is statistically significantly higher than the Cambridgeshire average in Fenland and Huntingdonshire in all ages combined, under 75s and 75s and over.
- There were just over 171,500 admission episodes among Cambridgeshire's residents in 2015/16.
- 77% of episodes are in people aged under 75.
- Rates of admission are generally more than three times higher in people aged 75 and over than in under 75s.

Figure 77. Hospital inpatient admission episodes by local authority of residence - all admissions: numbers, Cambridgeshire, 2011/12 to 2015/16



Source: NHS Digital Hospital Episode Statistics

Figure 78. Rates of hospital inpatient admission episodes by local authority of residence - all admissions: directly age-standardised rates, Cambridgeshire, 2011/12 to 2015/16



- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates.

Key points:




- Numbers of inpatient hospital admission episodes have increased among residents of all districts in both under 75s and 75s and over.
- In both under 75s and 75s and over, admission rates have been statistically significantly higher than the county average in Fenland and Huntingdonshire in nearly all years since 2011/12 and appear to be increasing.
- There are also signs of increasing rates in 75s and over in Cambridge.

Elective admissions

Table 80. Hospital inpatient admission episodes by local authority of residence - elective admissions, Cambridgeshire, 2015/16

Area	All ages		Under 75s		75 and over	
	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000
Cambridge	13,460	137	10,696	114	2,764	372
East Cambridgeshire	11,752	137	9,249	117	2,503	338
Fenland	17,958	175	14,062	153	3,896	394
Huntingdonshire	28,937	168	22,952	142	5,985	430
South Cambridgeshire	21,450	143	16,918	122	4,532	351
Cambridgeshire	93,557	152	73,877	130	19,680	381

DASR - directly age-standardised rate

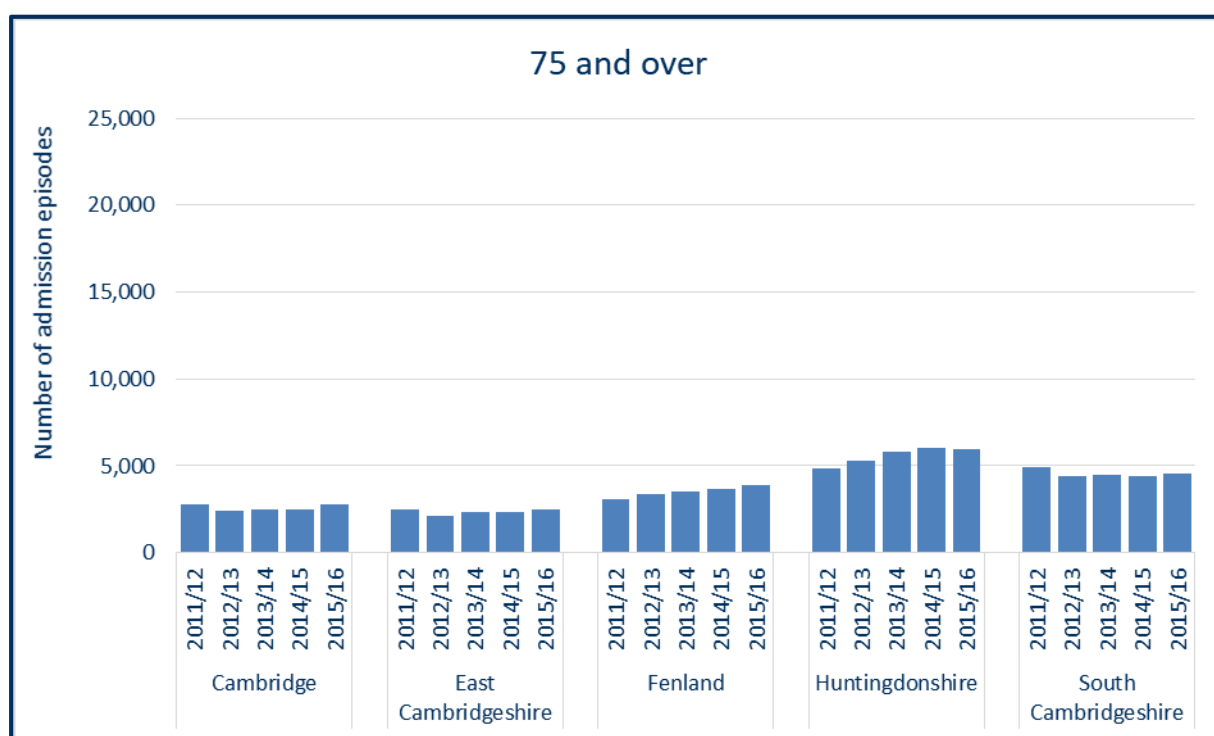
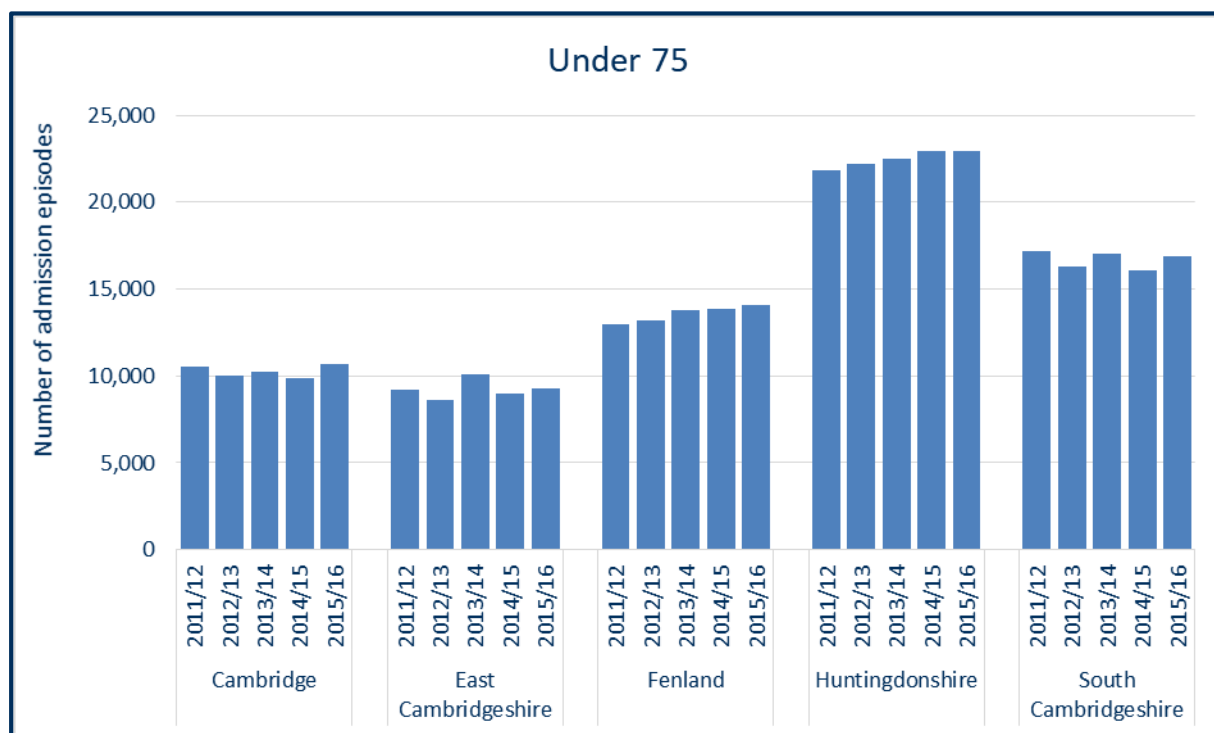
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

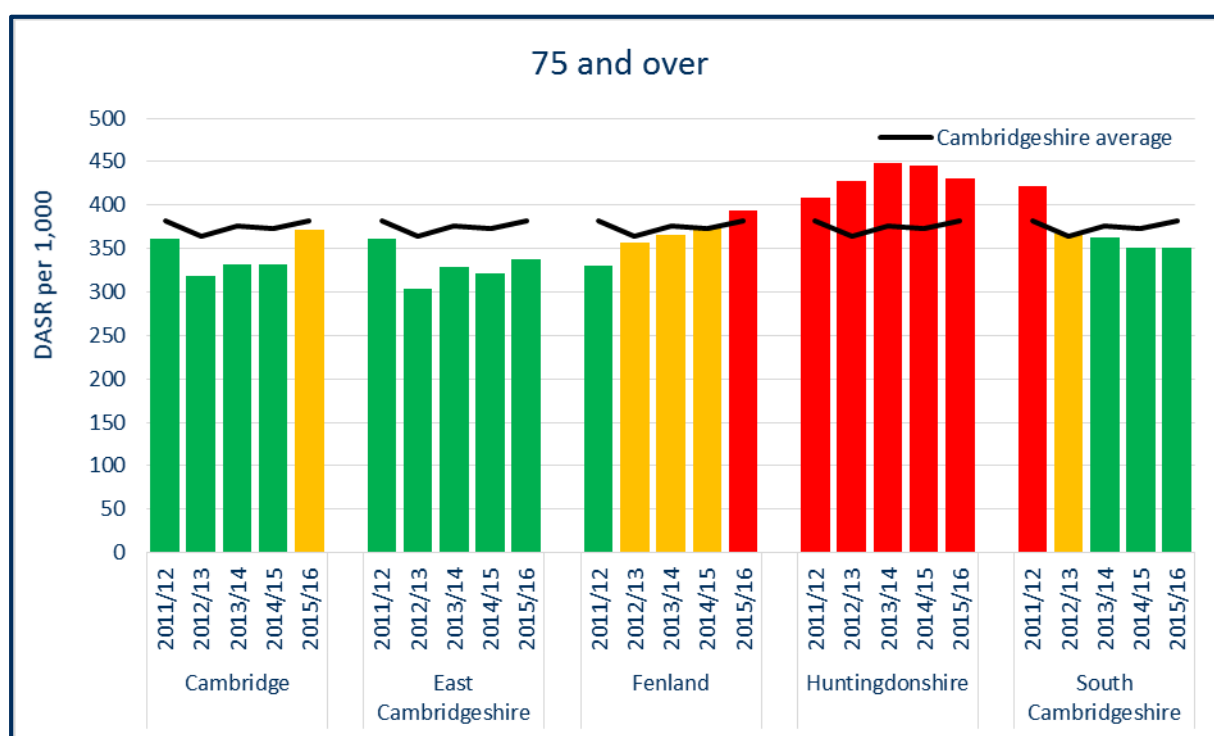
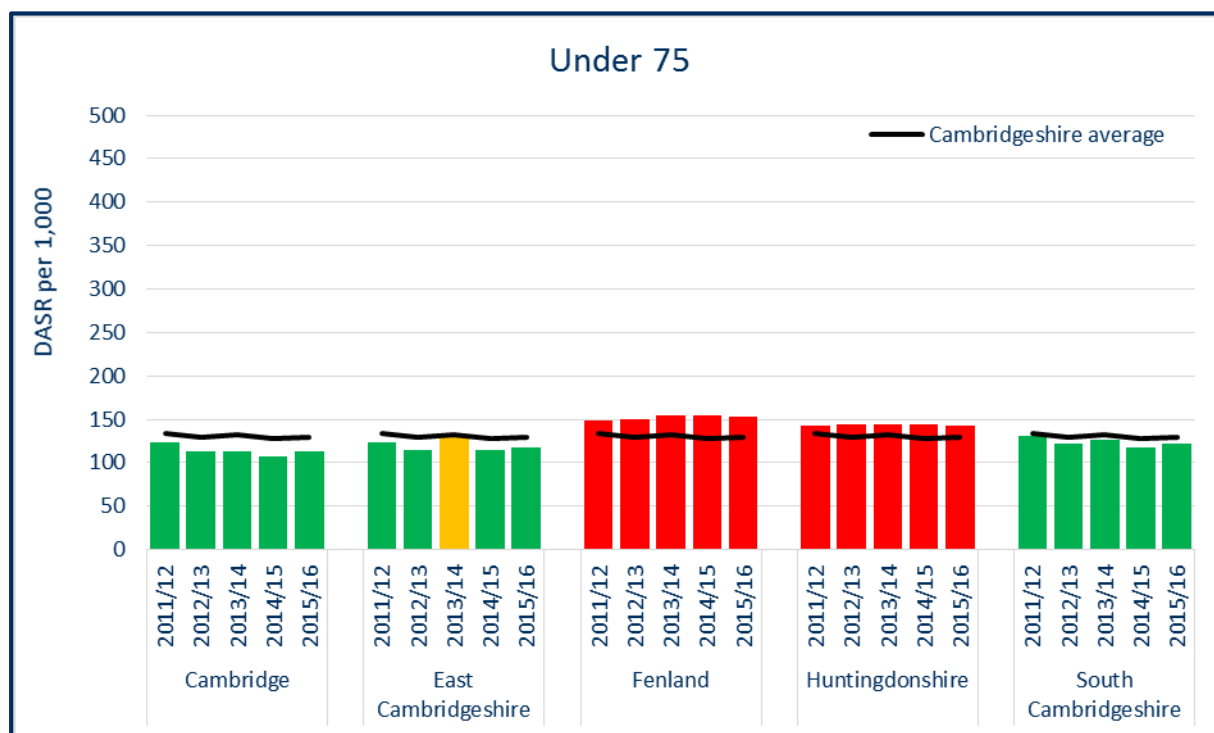
- The rate of elective inpatient admission episodes is statistically significantly higher than the Cambridgeshire average in Fenland and Huntingdonshire in all ages combined, under 75s and 75s and over.
- There were just over 93,500 elective admission episodes among Cambridgeshire's residents in 2015/16.
- 55% of all admission episodes were elective.
- 79% of episodes were in people aged under 75.
- Rates of elective admission are around three times higher in people aged 75 and over than in under 75s.

Figure 79. Hospital inpatient admission episodes by local authority of residence - elective admissions: numbers, Cambridgeshire, 2011/12 to 2015/16



Source: NHS Digital Hospital Episode Statistics

Figure 80. Rates of hospital inpatient admission episodes by local authority of residence - elective admissions: directly age-standardised rates, Cambridgeshire, 2011/12 to 2015/16



- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:




- Numbers of elective hospital admission episodes have increased among residents of Cambridge, Fenland and Huntingdonshire in both under 75s and 75s and over. Numbers are more stable in East and South Cambridgeshire.
- In under 75s, elective admission rates have been statistically significantly higher than the county average in Fenland and Huntingdonshire in all years since 2011/12. Rates appear to be relatively stable across the county.
- In 75s and over, elective admission rates have been statistically significantly higher than the county average in Huntingdonshire in all years since 2011/12. Rates have notably increased in Fenland to a level statistically significantly higher than the Cambridgeshire average but have decreased in South Cambridgeshire.

Emergency admissions

Table 81. Hospital inpatient admission episodes by local authority of residence - emergency admissions, Cambridgeshire, 2015/16

Area	All ages		Under 75s		75 and over	
	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000	Number of admission episodes	DASR per 1,000
Cambridge	10,030	93	7,129	67	2,901	350
East Cambridgeshire	6,958	81	4,485	57	2,473	326
Fenland	12,433	119	8,457	92	3,976	393
Huntingdonshire	17,416	101	12,532	77	4,884	347
South Cambridgeshire	12,299	81	8,127	58	4,172	313
Cambridgeshire	59,136	94	40,730	69	18,406	344

DASR - directly age-standardised rate

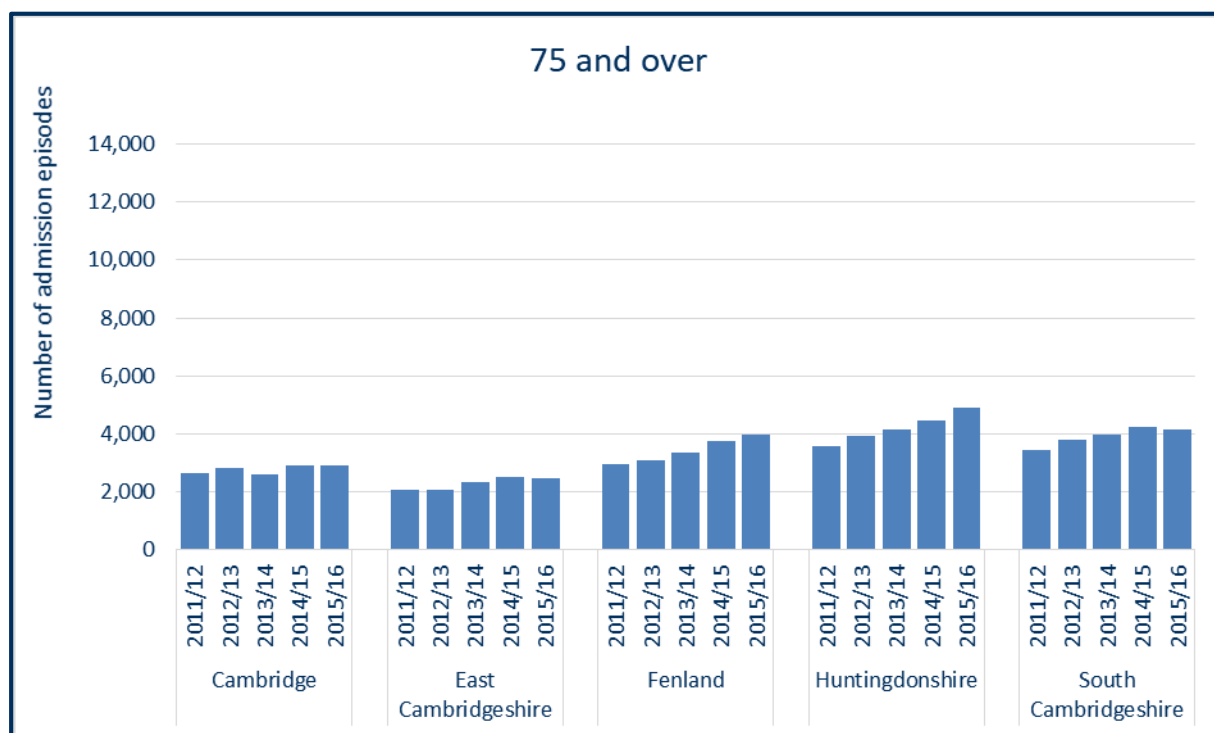
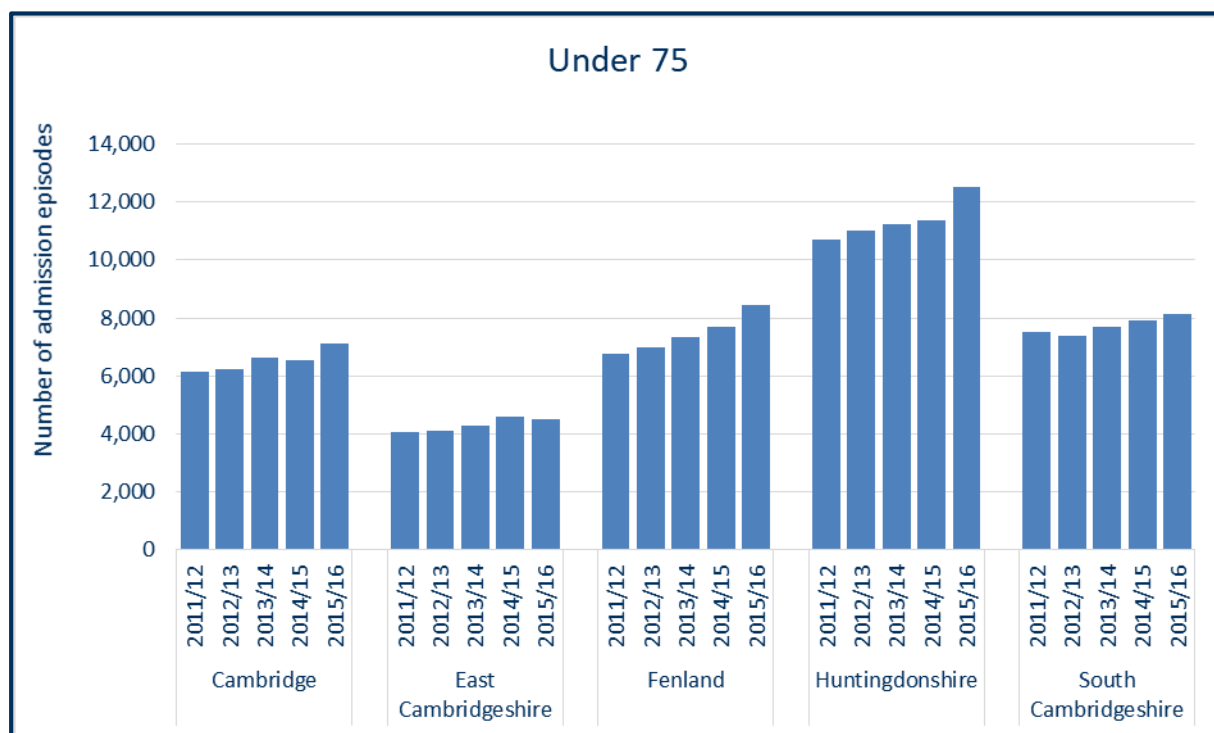
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

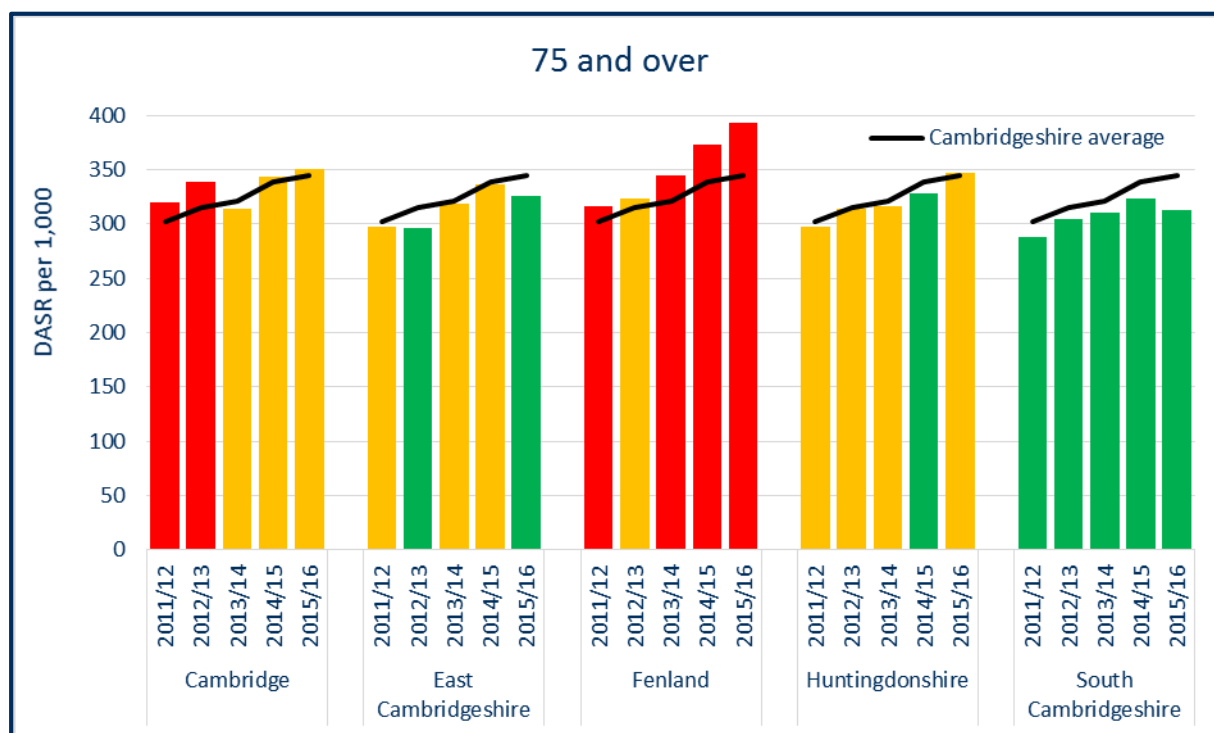
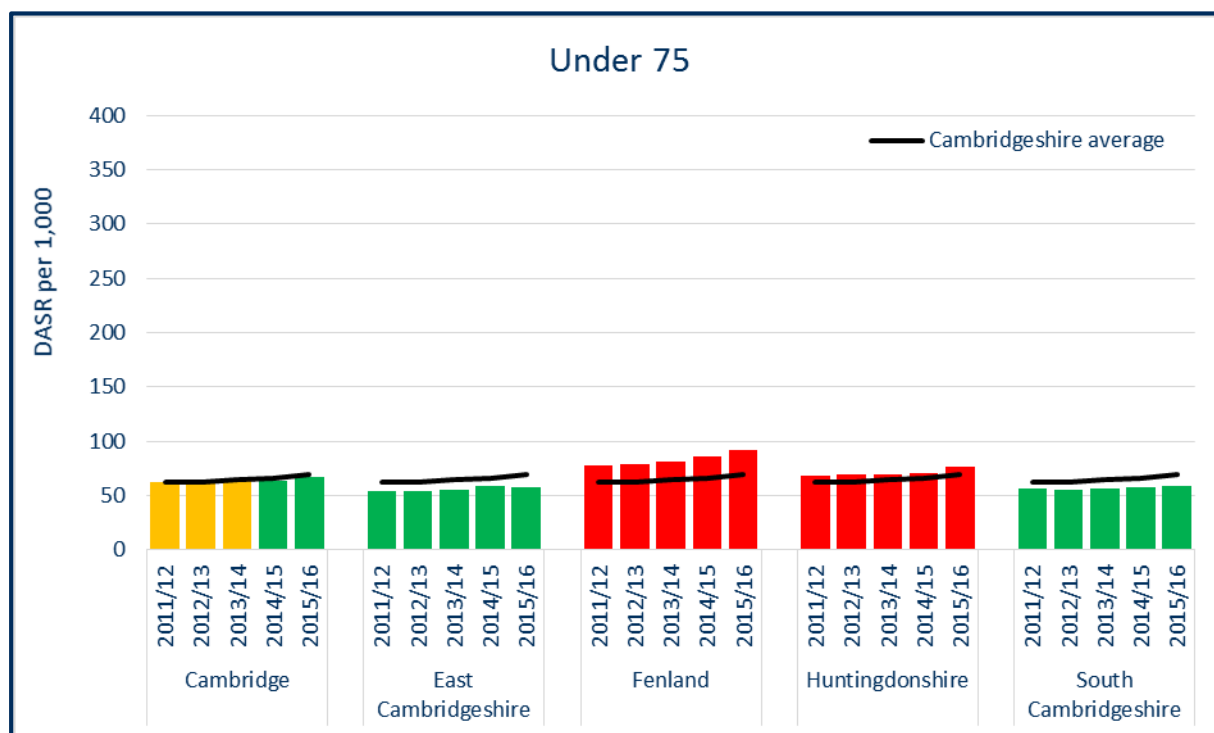
- The rate of emergency inpatient admission episodes is statistically significantly higher than the Cambridgeshire average in Fenland in all ages combined, under 75s and 75s and over; and in all ages and under 75s in Huntingdonshire.
- There were just over 59,000 emergency admission episodes among Cambridgeshire's residents in 2015/16.
- 34% of all admission episodes were emergencies.
- 69% of episodes were in people aged under 75.
- Rates of emergency admission are around five times higher in people aged 75 and over than in under 75s.

Figure 81. Hospital inpatient admission episodes by local authority of residence - emergency admissions: numbers, Cambridgeshire, 2011/12 to 2015/16



Source: NHS Digital Hospital Episode Statistics

Figure 82. Rates of hospital inpatient admission episodes by local authority of residence - emergency admissions: directly age-standardised rates, Cambridgeshire, 2011/12 to 2015/16



- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Sources: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

- Numbers of emergency hospital admission episodes have increased among residents of all districts in both under 75s and 75s and over.
- In under 75s, emergency admission rates have been statistically significantly higher than the county average in Fenland and Huntingdonshire in all years since 2011/12. Rates appear to be increasing slightly across the county.
- In 75s and over, emergency admission rates have been statistically significantly higher than the county average in Fenland in nearly all years since 2011/12. Rates appear to be generally increasing across all districts but the rate of increase appears to be faster in Fenland.




Accident and emergency attendances

Table 82. Accident and emergency attendances by local authority of residence and department type, Cambridgeshire, 2015/16

Area	All departments		24-hour consultant led		Minor injuries units	
	Number of attendances	DASR per 1,000	Number of attendances	DASR per 1,000	Number of attendances	DASR per 1,000
Cambridge	34,268	269	33,334	263.0	761	4.6
East Cambridgeshire	30,357	351	15,922	185.4	14,375	165.1
Fenland	41,864	421	23,030	228.9	18,781	192.0
Huntingdonshire	46,236	268	42,709	247.7	3,388	19.4
South Cambridgeshire	37,489	245	36,082	235.5	1,246	8.3
Cambridgeshire	190,214	292	151,077	232.3	38,551	59.0

DASR - directly age-standardised rate

'All departments' includes 24-hour consultant led departments, consultant-led single specialty services, doctor- or nurse-led minor injuries units, walk-in centres and where type is unknown.

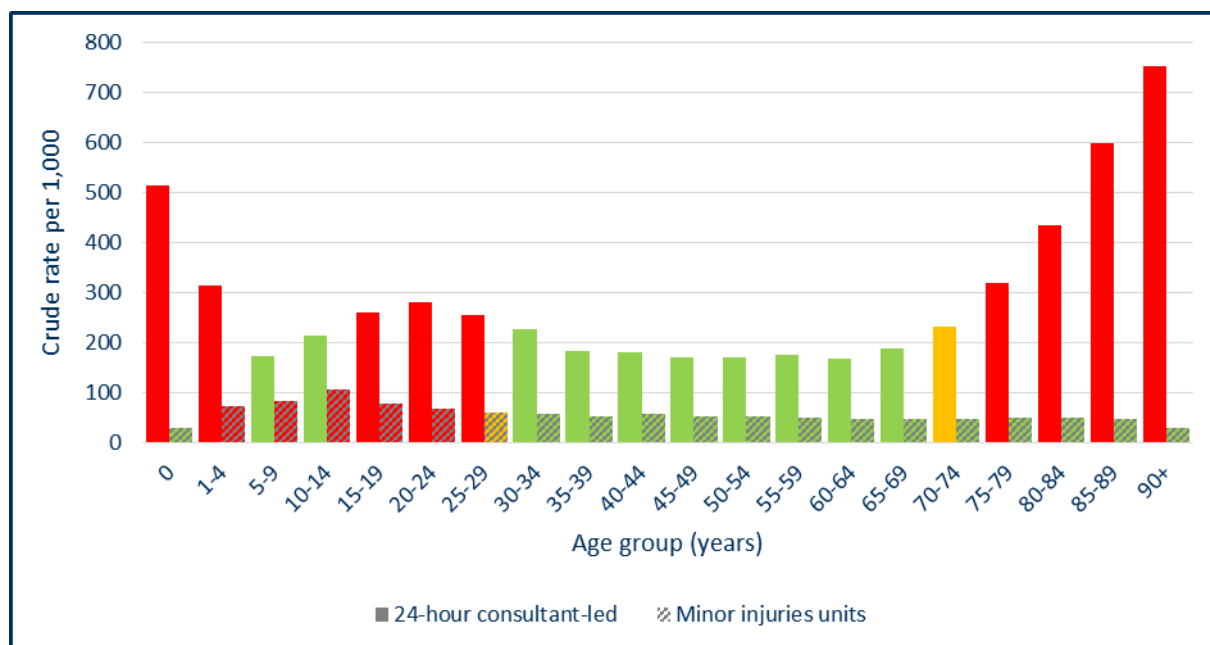
	Statistically significantly lower than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly higher than the Cambridgeshire average

Source: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

- The rate of attendance at any accident and emergency (A&E) department is statistically significantly higher than the Cambridgeshire average in East Cambridgeshire and Fenland. This may, however, reflect the presence of minor injuries units (MIUs) in these areas rather than higher levels of urgent care need; in districts without nearby MIUs, patients that might have attended an MIU may self-manage, be managed by primary care services, or attend A&E.
- Attendance rates at 24-hour consultant-led A&E department are statistically significantly higher than the county average in Cambridge, Huntingdonshire and South Cambridgeshire; while rates at minor injuries units are statistically significantly higher in East Cambridgeshire and Fenland.

Figure 83. Accident and emergency attendances by age group and department type, Cambridgeshire, 2015/16



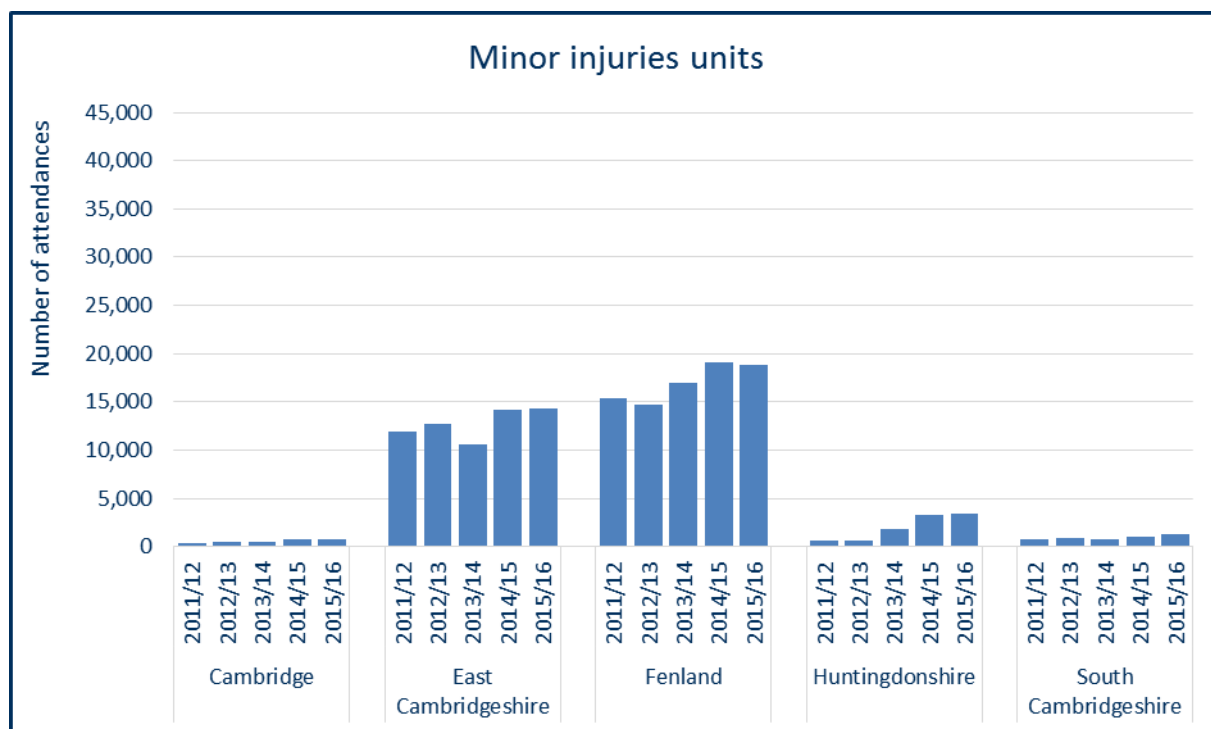
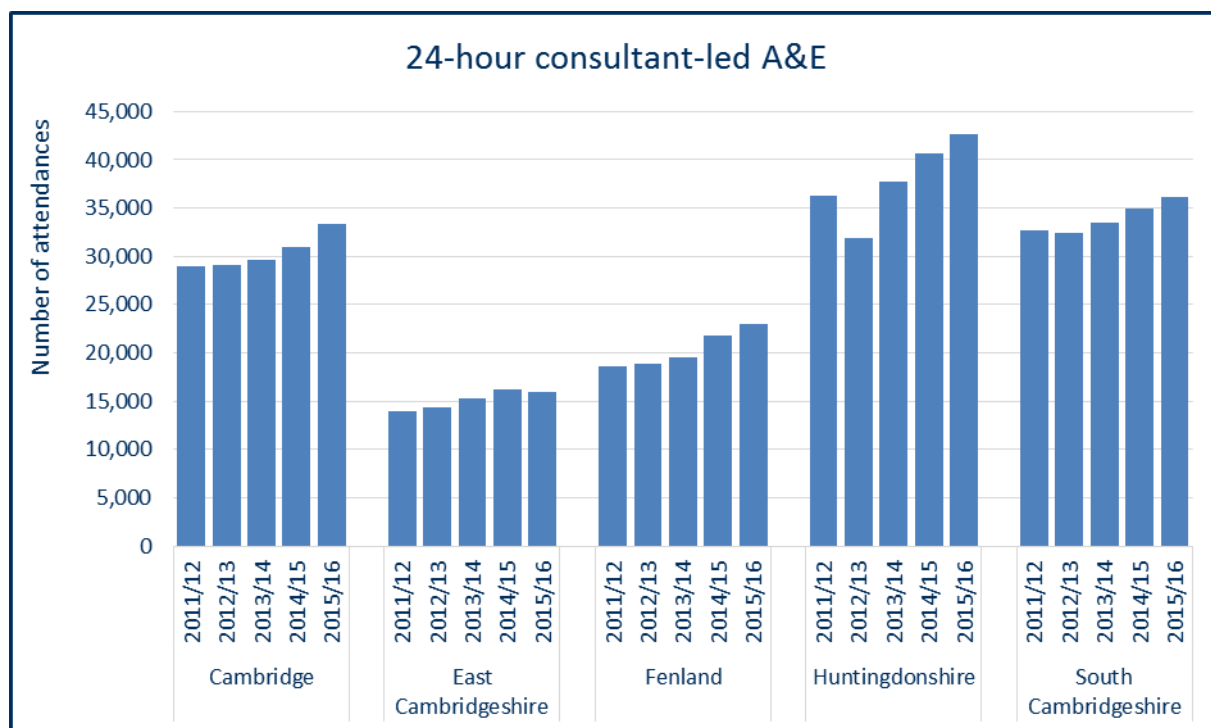
Statistically significantly lower than the all-age average
 Statistically similar to the all-age average
 Statistically significantly higher than the all-age average

Source: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates

Key points:

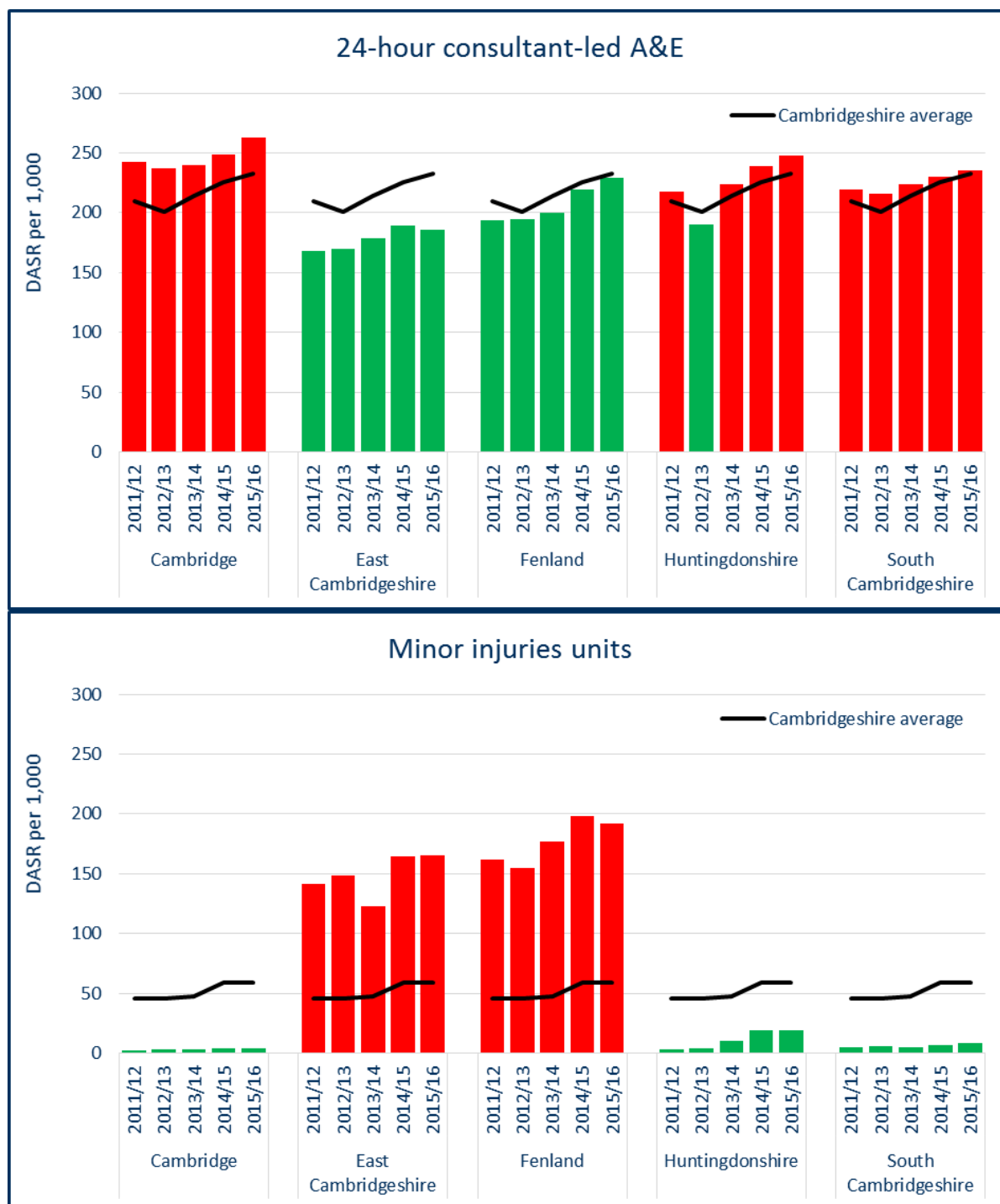
- Rates of attendance at 24-hour A&E are statistically significantly higher than the all-age average in young children aged 0 and 1-4 years, in young adults aged 15-29, and in older people aged 75 and over.
- Rates of attendance at minor injuries units are statistically significantly higher than the all-age average in children and young adults, ages 1-24.

Figure 84. Accident and emergency attendances by local authority of residence and department type: numbers, Cambridgeshire, 2011/12 to 2015/16



Source: NHS Digital Hospital Episode Statistics

Figure 85. Accident and emergency attendances by local authority of residence and department type: directly age-standardised rates, Cambridgeshire, 2011/12 to 2015/16



■ Statistically significantly lower than the Cambridgeshire average
■ Statistically similar to the Cambridgeshire average
■ Statistically significantly higher than the Cambridgeshire average

Source: NHS Digital Hospital Episode Statistics, Office for National Statistics mid-year population estimates



Key point:




- Numbers and rates of attendances have increased among residents of all districts, at both 24-hour consultant-led A&E and minor injuries units.




6.6 Social care services

Table 83. Adult social care - selected measures from Public Health England's Adult Social Care profile and measures from the Adult Social Care Outcomes Framework, England - 2015-16

Category	Indicator	Period	England value	Cambs value	Cambs recent trend
Enhancing people's quality of life	Social care-related quality of life score (%) ¹	2015/16	19.1	19.2	-
	Proportion of people who use services who have control over daily life (%) ¹	2015/16	76.6	80.0	-
	Proportion of people who use services who receive self-directed support (%) ²	2015/16	86.9	93.4	-
	Proportion of carers who receive self-directed support (%) ²	2015/16	77.7	86.5	-
	Proportion of people who use services who receive direct payments (%) ²	2015/16	28.1	23.6	-
	Proportion of carers who receive direct payments (%) ²	2015/16	67.4	86.5	-
	Proportion of adults with a learning disability in paid employment (%) ²	2015/16	5.8	2.5	-
	Proportion of adults in contact with secondary mental health services in paid employment (%) ²	2015/16	6.7	5.7	-
	Proportion of adults with a learning disability who live in their own home or with their family (%) ²	2015/16	75.4	69.9	-
	Proportion of adults in contact with secondary mental health services living independently, with or without support (%) ²	2015/16	58.6	50.3	-
	Proportion of people who use services who reported that they had as much social contact as they would like (%) ¹	2015/16	45.4	46.4	-
Delaying & reducing the need for care & Support	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population ²	2015/16	13.3	3.3	-
	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population ²	2015/16	628.2	561.0	-
	Proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (%) ²	2015/16	82.7	71.8	-
	Proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital (%) ²	2015/16	2.9	3.1	-
	Total delayed transfers of care from hospital, per 100,000 population ¹	2015/16	12.1	14.8	→6
	Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population ¹	2015/16	4.7	4.4	→6
	Outcome of short-term services: sequel to service was either no ongoing support or support of a lower level (%) ²	2015/16	75.8	93.5	-
Positive experience of care and support	Overall satisfaction of people who use services with their care and support (%) ¹	2015/16	64.4	64.7	-
	Proportion of people who use services who find it easy to find information about support (%) ¹	2015/16	73.5	72.4	-
Safeguarding vulnerable adults	Proportion of people who use services who feel safe (%) ¹	2015/16	69.2	68.9	-
	Proportion of people who use services who say that those services have made them feel safe and secure (%) ¹	2015/16	85.4	81.9	-

 Cambridgeshire lower than England (not statistically assessed)
 Cambridgeshire higher than England (not statistically assessed)

 Statistically significantly better than the England average
 Statistically similar to the England average
 Statistically significantly worse than the England average

 n Getting better - increase (number of years on which trend based)
 n No significant change (number of years on which trend based)
 n Getting worse - decrease (number of years on which trend based)

¹ Source: Public Health England - Fingertips Adult Social Care profile at <https://fingertips.phe.org.uk/profile/adultsocialcare/>

² Source: Measures from the Adult Social Care Outcomes Framework, England - 2015-16, NHS Digital, <http://content.digital.nhs.uk/catalogue/PUB21900>

Key points:

- Data from the Adult Social Care Outcomes Framework provide a broad overview of key indicators for Cambridgeshire and many of the measures are not statistically assessed or easily assessed as trends, as indicator specifications have changed over time.
- Where indicators have been formally assessed statistically, in general, Cambridgeshire's position does not differ significantly from that found in England.
- The two indicators that differ in statistical terms are the proportion of people who use services who have control over daily life where Cambridgeshire's rate is better than the England proportion and the proportion of people who use services who say that those services have made them feel safe and secure where Cambridgeshire is worse than England.
- Of the remaining indicators, though not formally assessed statistically these may warrant further attention simply by virtue of being the adverse side of the England rate: people who use services who receive direct payments; adults with a learning disability in paid employment; adults in contact with secondary mental health services in paid employment; adults with a learning disability who live in their own home or with their family; adults in contact with secondary mental health services living independently, with or without support; older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.

7. LIFE EXPECTANCY AND MORTALITY



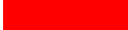
7.1 Life expectancy

Life expectancy at birth is the average number of years that a baby born in a particular area can expect to live should they experience the current age-specific mortality rates of the area throughout life. Average life expectancy represents the cumulative effect of the prevalence of risk factors, prevalence and severity of disease, and the effectiveness of interventions and treatment across the life course.

Table 84. Life expectancy at birth, Cambridgeshire, 2013-15

Area	Life expectancy (years)		Gap in LE between the least and most deprived (years)*	
	Males	Females	Males	Females
Cambridge	80.3	84.1	9.3	7.4
East Cambridgeshire	81.6	84.8	3.9	1.5
Fenland	78.6	82.6	5.9	1.0
Huntingdonshire	81.0	84.7	3.9	5.3
South Cambridgeshire	82.1	85.2	3.9	0.7
Cambridgeshire	80.9	84.4	6.0	4.7
England	79.5	83.1	n/a	n/a

* Slope index of inequality, LE – Life expectancy

	Statistically significantly better than the England average
	Statistically similar to the England average
	Statistically significantly worse than the England average




Source: Public Health England Public Health Outcomes Framework indicators 0.1ii and 0.2iii

Key points:

- Life expectancy at birth is statistically significantly lower than the England average in men in Fenland, is similar to the national average for women in Fenland and is significantly higher (better) than the England level for men and women in all other districts and Cambridgeshire as a whole.
- The gap in life expectancy between the least and most deprived areas within each district is noticeably high in Cambridge in both men and women.

Table 85. Healthy life expectancy at birth, Cambridgeshire, 2013-15

Area	Years	
	Males	Females
Cambridgeshire	65.7	67.3
England	63.4	64.1

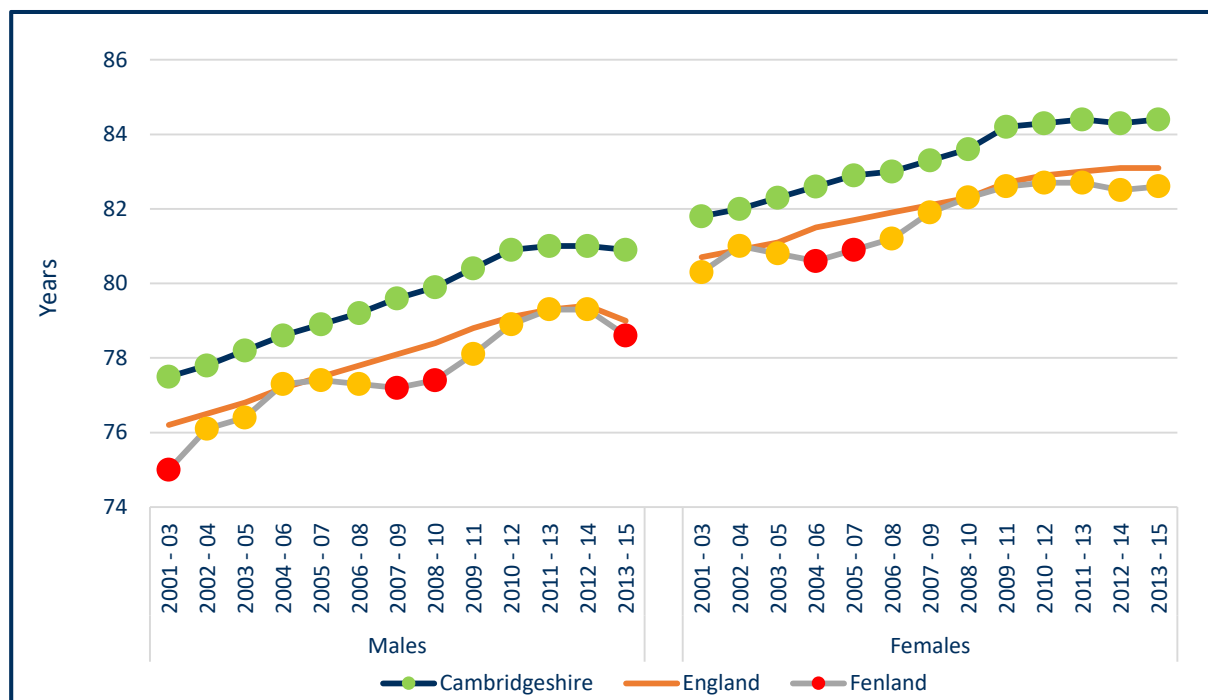
 Statistically significantly better than the England average
 Statistically similar to the England average
 Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 0.1i

Key points:

- The number of years lived in good health (health life expectancy at birth) is statistically significantly higher than the England average in both men and women in Cambridgeshire.

Figure 86. Life expectancy at birth, Fenland, 2001-03 to 2013-15



DASR – Directly age-standardised rate

- Statistically significantly better than the England average
- Statistically similar to the England average
- Statistically significantly worse than the England average

Source: Public Health England Public Health Outcomes Framework indicator 0.1ii

Key points:

- Life expectancy at birth in men and women in Fenland has generally been statistically similar to the England average since 2001-03 but notably lower than the county average.
- In men, life expectancy appears to have stabilised in Cambridgeshire but a fall in Fenland in 2013-15 brought the value down to a level statistically significantly worse than the national average.
- In women, rates appear to have stabilised.

Table 86. Wards with statistically significantly lower life expectancy than the England average*, Cambridgeshire, 2012-16

Sex	District	Ward	Deprivation quintile**	Years
Males	Fenland	Staithe	1 - Most deprived	68.0
	Fenland	Clarkson	1 - Most deprived	72.8
	Huntingdonshire	Huntingdon West	4	76.1
	Fenland	Waterlees Village	1 - Most deprived	76.2
	Cambridge	King's Hedges	1 - Most deprived	76.5
	Cambridge	East Chesterton	2	77.2
	Cambridge	Coleridge	3	77.4
Females	Fenland	Staithe	1 - Most deprived	76.7
	Fenland	Birch	1 - Most deprived	78.4
	Huntingdonshire	Huntingdon West	4	78.6
	Fenland	Benwick, Coates & Eastrea	2	78.9
	Fenland	Doddington & Wimblington	2	79.7
	East Cambridgeshire	Bottisham	4	79.8
	Cambridge	King's Hedges	1 - Most deprived	80.0
	Cambridge	Coleridge	3	80.6
	Huntingdonshire	Upwood and The Raveleys	3	80.8
	Huntingdonshire	Huntingdon East	2	81.3

*Based on 2013-15

** Deprivation quintile of the ward, where 1 is the most deprived and 5 the least deprived 20% of wards
England averages: Males - 79.5, Females - 83.1

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation)

Key points:




- Wards with statistically significantly lower than average life expectancy are located not just in Fenland but in Cambridge, East Cambridgeshire and Huntingdonshire, and are not necessarily in areas considered to be highly deprived.
- At electoral ward level, life expectancy can be influenced by locally specific factors – for example nursing homes which look after adults with severe or terminal conditions.

7.2 All-cause mortality

Table 87. All-cause mortality, Cambridgeshire, 2014-16

Area	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
Cambridge	2,558	901	686	296
East Cambridgeshire	2,136	847	644	276
Fenland	3,315	1,012	1,070	379
Huntingdonshire	4,113	855	1,277	269
South Cambridgeshire	3,535	795	970	239
Cambridgeshire	15,657	873	4,647	284

DASR - Directly age-standardised rate

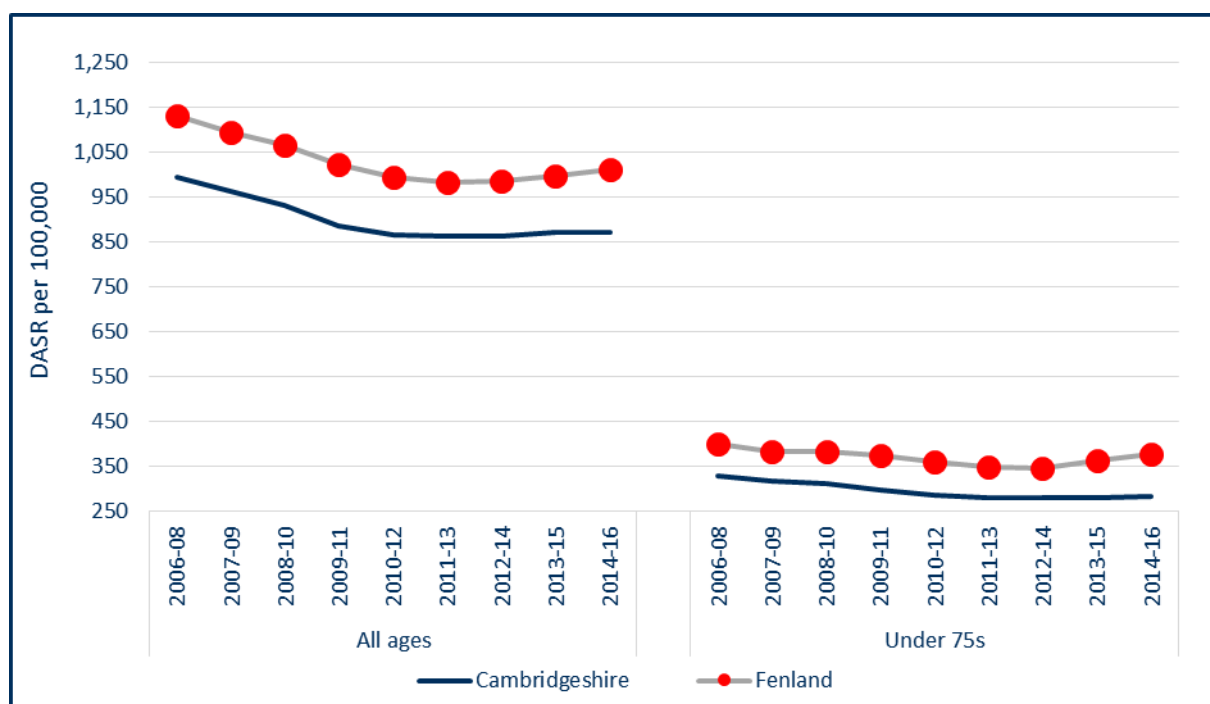
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 all-cause mortality are statistically significantly higher than the Cambridgeshire average in Fenland.
- Just over 5,200 Cambridgeshire residents died each year between 2014 and 2016.

Figure 87. All-cause mortality, Fenland, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 all-cause mortality have been consistently statistically significantly higher than the county average in Fenland since 2006-08.
- Rates declined notably in Fenland and Cambridgeshire as a whole between 2006-08 and 2010-12 but have since stabilised or increased again. Although not statistically assessed, the rates of increase in recent years appears to be faster in Fenland than for the Cambridgeshire average, particularly in under 75s.

Table 88. All-cause mortality by deprivation quintile of ward of residence, Cambridgeshire, 2014-16

Deprivation quintile	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
1 - Most deprived	3,854	1,018	1,255	384
2	3,468	913	1,003	284
3	3,161	898	931	280
4	3,020	788	854	247
5 - Least deprived	2,154	724	604	218
Cambridgeshire	15,657	873	4,647	284

DASR - Directly age-standardised rate

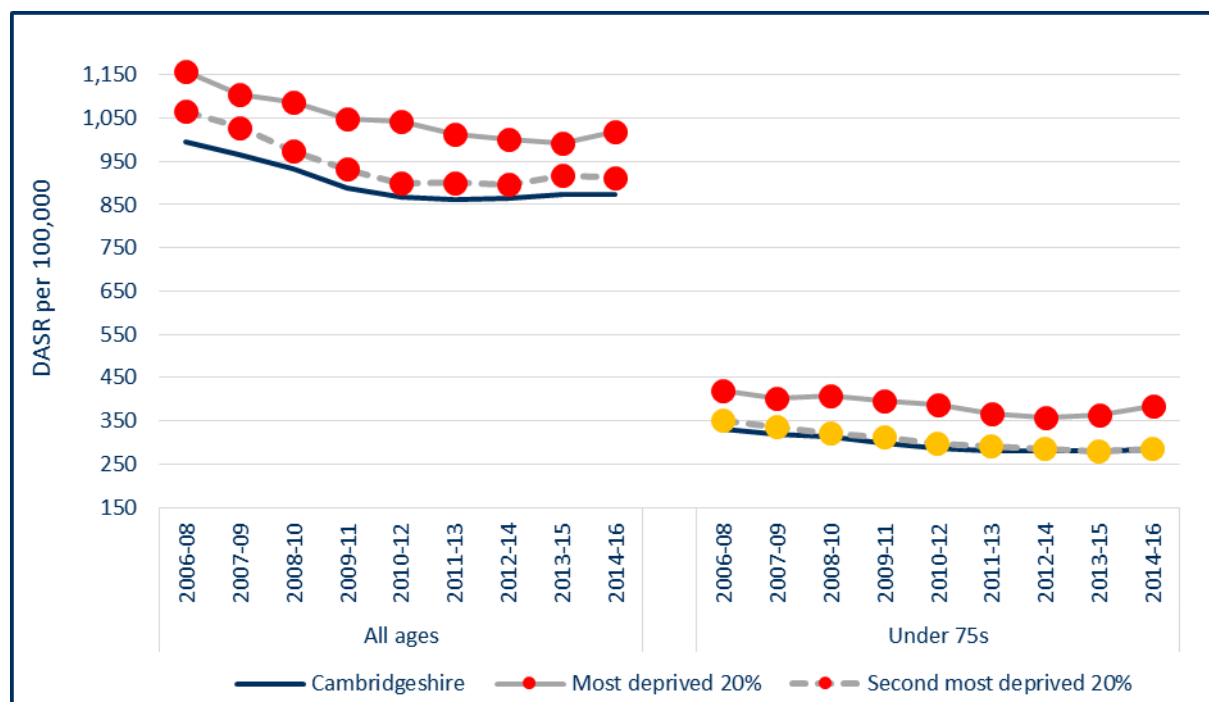
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation).

Key points:

- The rate of all-age all-cause mortality is statistically significantly higher than the Cambridgeshire average in the most deprived 40% of wards in the county.
- The rate of under 75 all-cause mortality is statistically significantly higher than the Cambridgeshire average in the most deprived 20% of wards in the county.

Figure 88. All-cause mortality by deprivation quintile of ward of residence – most deprived 40% of wards, Cambridgeshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 all-cause mortality have been consistently statistically significantly higher than the county average in the most deprived 20% of wards since 2006-08. All-age rates are also consistently statistically significantly higher than the Cambridgeshire average in the second most deprived 20% of wards.
- All-age rates declined notably in the second most deprived 20% of wards between 2006-08 and 2010-12 but then stabilised and increased again.
- All-age rates continued to decline in the most deprived 20% of wards, albeit at a slower rate, until 2013-15 but increased again in 2014-16.
- Under 75 rates in the most deprived 20% of wards declined until 2012-14 but have increased in again; rates in the second most deprived 20% have stabilised.

Table 89. Wards with statistically significantly higher than county average rates of under 75 all-cause mortality, Cambridgeshire, 2014-16

District	Ward	Number of deaths	DASR per 100,000
Fenland	Staithe	49	761
Huntingdonshire	Huntingdon West	66	558
Fenland	Waterlees Village	67	510
Fenland	Octavia Hill	71	507
Huntingdonshire	Huntingdon North	57	491
Fenland	Birch	35	481
Fenland	Clarkson	27	471
East Cambridgeshire	Bottisham	56	465
Fenland	Benwick, Coates & Eastrea	58	454
Cambridge	King's Hedges	76	453
Fenland	March North	89	431
Fenland	Medworth	31	424
Cambridge	Abbey	72	380
Fenland	March East	88	380
Huntingdonshire	Huntingdon East	93	355

Cambridgeshire average: 188 per 100,000

DASR - Directly age-standardised rate

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

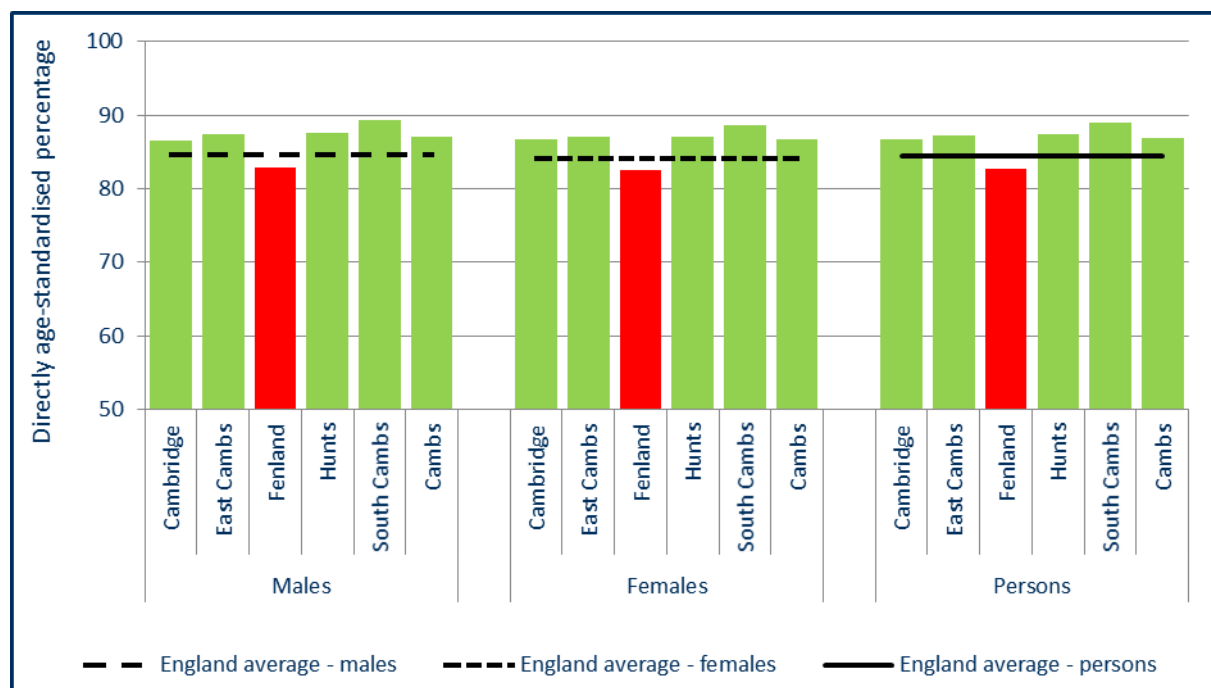
Key point:

- Many wards with statistically significantly higher than Cambridgeshire average rates of premature mortality are located in Fenland (9), but three are located in Huntingdonshire, two in Cambridge and one in East Cambridgeshire.

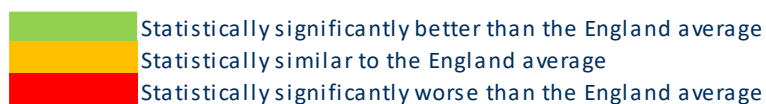
7.3 Overall health status and levels of disability

Percentage in good or very good health

Figure 89. Directly age-standardised percentage of the population reporting good or very good health, Cambridgeshire, 2011



Usual residents in households only (i.e. excluding communal establishments such as hospitals and care homes)

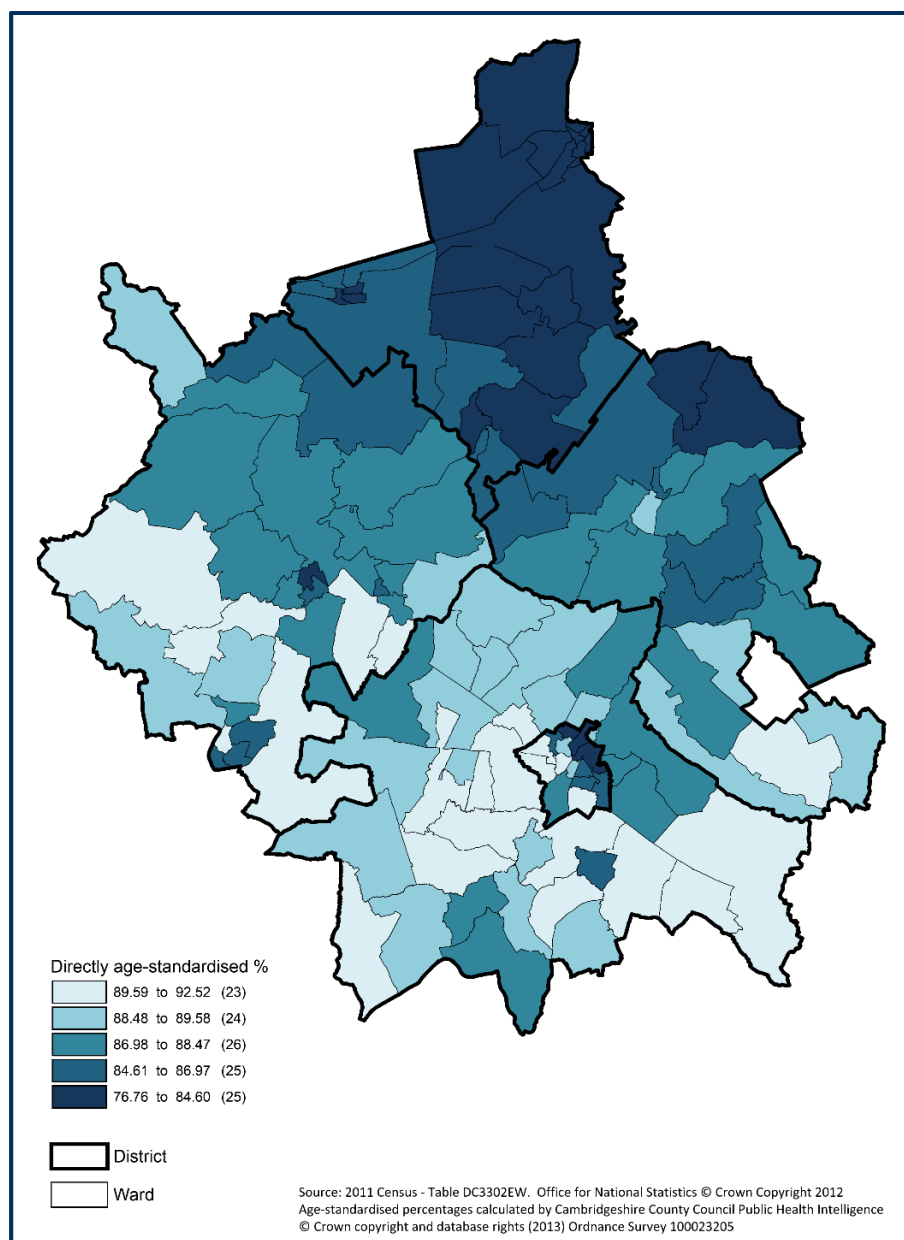


Source: Office for National Statistics Census 2011, Cambridgeshire County Council Public Health Intelligence

Key points:

- 84.2% of household residents in Cambridgeshire reported good or very good health in the 2011 Census. The percentage varied by age, from 97.7% in 0-15s to 31.1% in 85s and over, and by sex, with a slightly lower percentage in females than males [data not shown].
- After adjusting for age (as per figure 90), the percentage reporting good or very good health was statistically significantly lower than the England average in Fenland but statistically significantly higher in all the other districts and for county as a whole.

Figure 90. Directly age-standardised percentage of the population reporting good or very good health by ward, Cambridgeshire, 2011

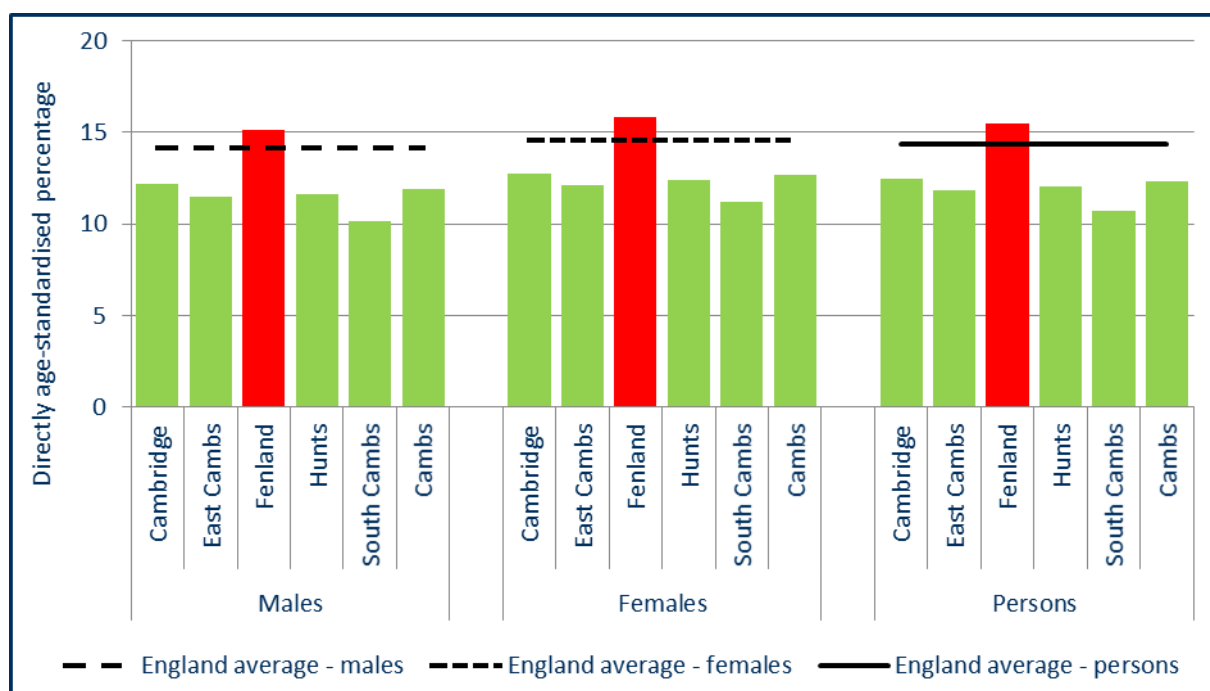


Key points:

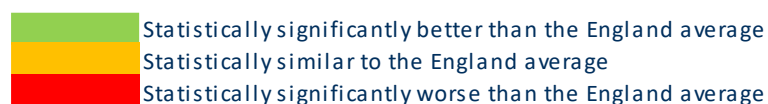
- At ward level (2011 wards), the age-standardised percentage reporting good or very good health was statistically significantly lower than the Cambridgeshire average in:
 - Abbey, East Chesterton and King's Hedges wards in Cambridge
 - Clarkson, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, Staithe and Waterlees wards in Fenland
 - Huntingdon North ward in Huntingdonshire.

Percentage with a long-term activity-limiting illness

Figure 91. Directly age-standardised percentage of the population with a long-term activity-limiting illness, Cambridgeshire, 2011



Usual residents in households only (i.e. excluding communal establishments such as hospitals and care homes)

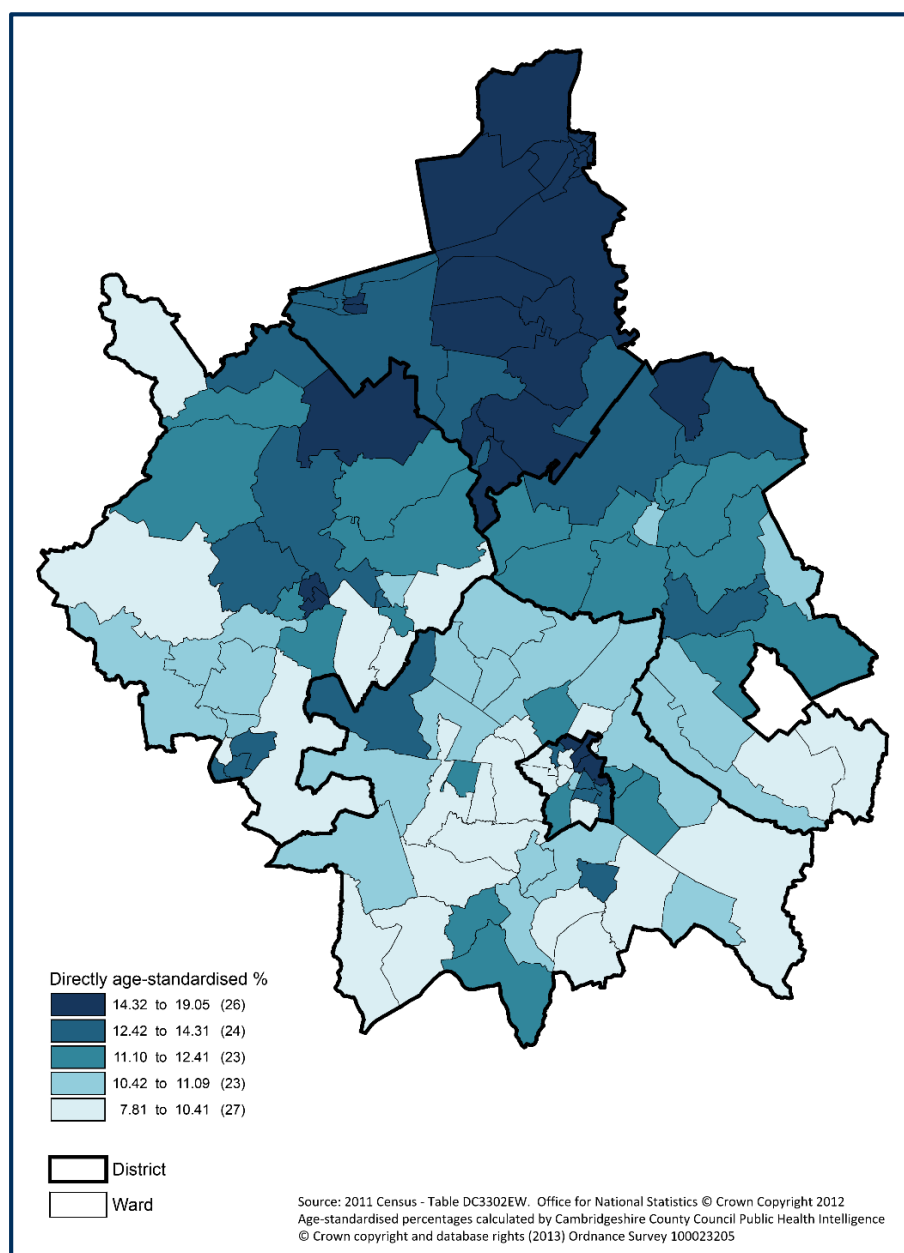


Source: Office for National Statistics Census 2011, Cambridgeshire County Council Public Health Intelligence

Key points:

- 90,420 people, 15.1% of household residents in Cambridgeshire, reported a long-term activity-limiting illness in the 2011 Census.
- 41.6% of people reporting a long-term illness described their illness as limiting their day-to-day activities a lot.
- The percentage varied by age, from 3.5% in 0-15s to 82.7% in 85s and over.
- The percentage also varied by sex, with generally higher percentages in females than males [data not shown].
- After adjusting for age (Figure 92), the percentage with a long-term activity-limiting illness was statistically significantly higher than the England average in Fenland but significantly lower in all other districts and for the county as a whole.

Figure 92. Directly age-standardised percentage of the population reporting a long-term activity-limiting illness by ward, Cambridgeshire, 2011



Key points:

- At ward level, the age-standardised percentage reporting a long-term activity-limiting illness was statistically significantly higher than the Cambridgeshire average in:
 - Abbey, Arbury, Cherry Hinton, East Chesterton, King’s Hedges and Romsey wards in Cambridge
 - Littleport West ward in East Cambridgeshire
 - Birch, Clarkson, Doddington, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, St Marys, Staithe, Waterlees, Wenneye and Wimblington wards in Fenland
 - Huntingdon East, Huntingdon North, Ramsey, St Neots Eaton Socon, St Neots Eynesbury and Yaxley and Farcet wards in Huntingdonshire.

7.4 Main causes of death

Table 90. Major causes of death, Cambridgeshire, 2014-16

Underlying cause of death	Average annual number of deaths	Percentage
Cancer	1,493	28.6
Cardiovascular disease	1,383	26.5
Respiratory disease	646	12.4
Dementia and Alzheimer's	623	11.9
Other conditions	1,074	20.6
Total	5,219	100.0

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- Around 5,200 deaths occurred each year in Cambridgeshire residents during 2014-16
- The majority of deaths were due to cancer (29%) and cardiovascular disease (27%), followed by respiratory disease (12%) and dementia and Alzheimer's (12%).
- The major causes of death in Cambridgeshire are similar to those seen nationally.⁴




⁴ <https://www.gov.uk/government/publications/health-profile-for-england/chapter-2-major-causes-of-death-and-how-they-have-changed>

Cardiovascular disease

Table 91. Mortality from cardiovascular disease, Cambridgeshire, 2014-16

Area	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
Cambridge	761	268	169	77
East Cambridgeshire	587	233	152	65
Fenland	817	249	227	80
Huntingdonshire	1,051	219	281	59
South Cambridgeshire	932	210	188	46
Cambridgeshire	4,148	231	1,017	63

DASR - Directly age-standardised rate

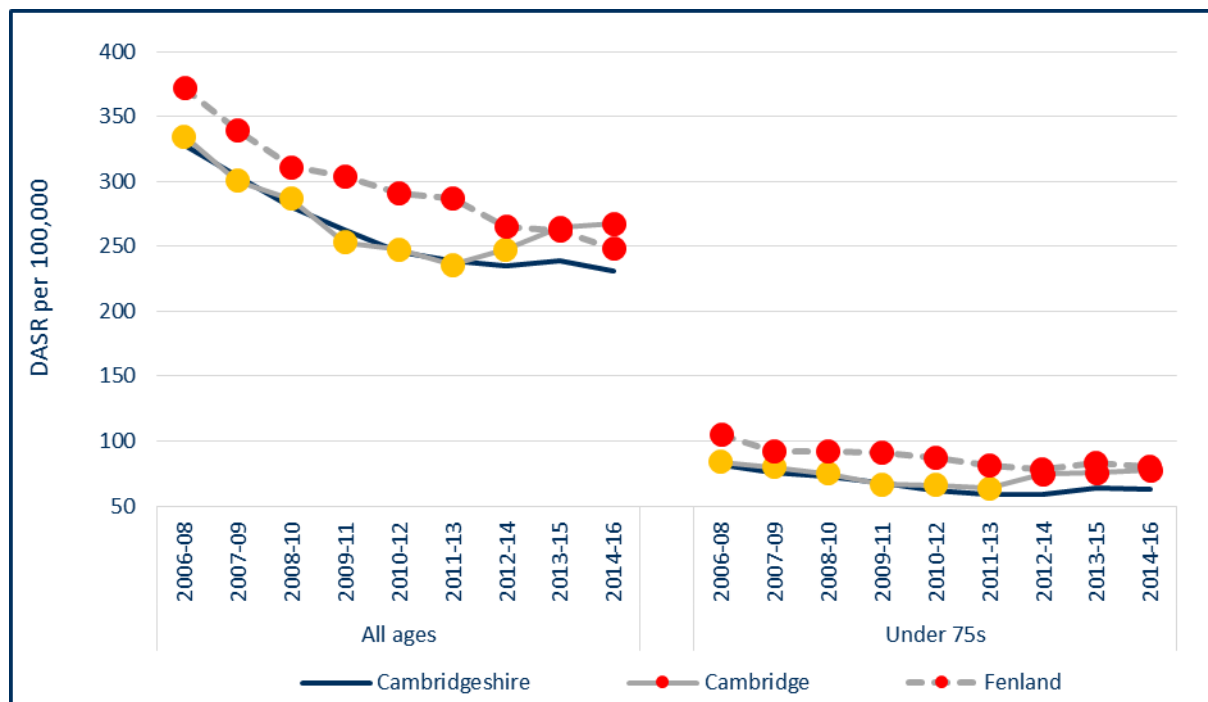
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 mortality from cardiovascular disease are statistically significantly higher than the Cambridgeshire average in Cambridge and Fenland.
- Around 1,400 Cambridgeshire residents died from cardiovascular disease each year between 2014 and 2016.

Figure 93. Mortality from cardiovascular disease, Cambridge and Fenland, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).




Key points:

- Rates of all-age and under 75 mortality from cardiovascular disease have been consistently higher than the Cambridgeshire average in Fenland but have generally continued to fall.
- In Cambridge, rates were statistically similar to the county average and falling in both all ages and under 75s up to 2011-13 but have since increased to levels statistically significantly higher than the county average.

Table 92. Mortality from cardiovascular disease by deprivation quintile of ward of residence, Cambridgeshire, 2014-16

Deprivation quintile	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
1 - Most deprived	974	257	275	85
2	913	241	209	60
3	872	249	236	73
4	817	212	177	51
5 - Least deprived	572	193	120	44
Cambridgeshire	4,148	231	1,017	63

DASR - Directly age-standardised rate

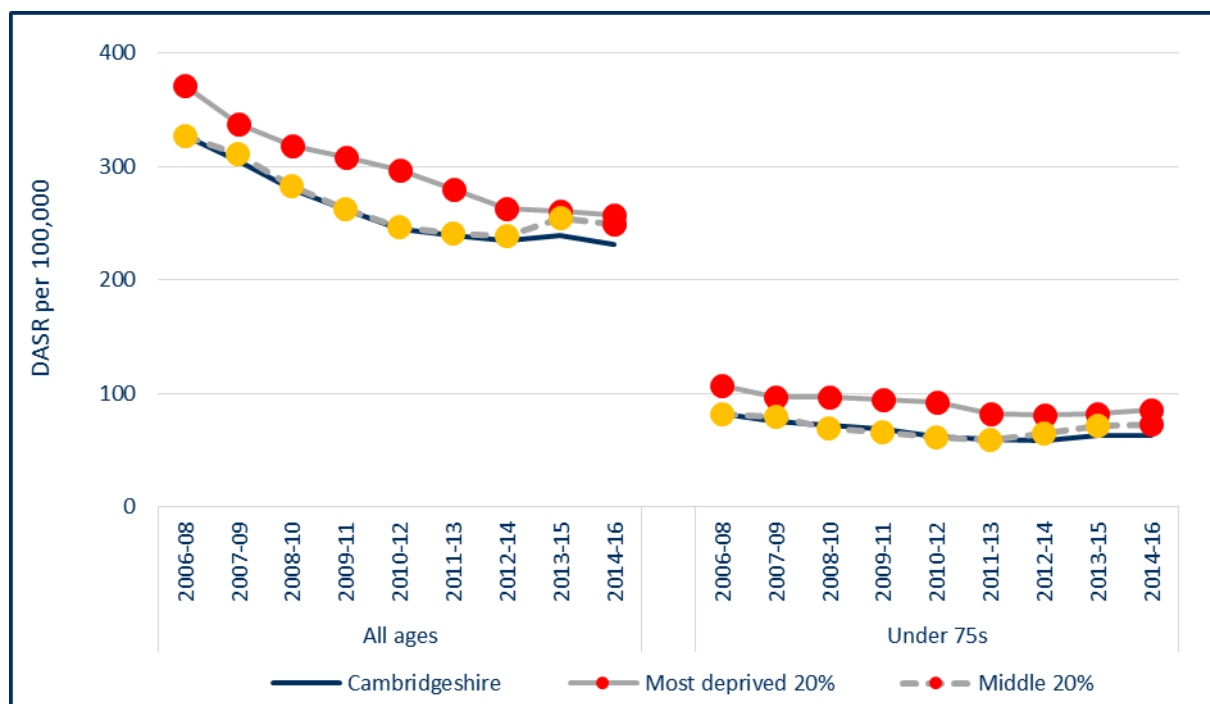
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation).

Key points:

- The rates of all-age and under 75 mortality due to cardiovascular disease are statistically significantly higher than the Cambridgeshire average in the most deprived 20% and the middle 20% of wards in the county.

Figure 94. Mortality from cardiovascular disease by deprivation quintile of ward of residence, Cambridgeshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rate of all-age cardiovascular mortality in the most deprived 20% of wards in Cambridgeshire has been consistently statistically significantly higher than the county average since 2006-08 but rates have continued to fall.
- Under 75 rates are also consistently statistically significantly higher than the Cambridgeshire average and show some decline but have stabilised in recent years.
- Rates of all-age and under 75 mortality due to cardiovascular disease have notably increased in the middle quintile of wards in recent years becoming statistically significantly higher than the county average.

Table 93. Wards with statistically significantly higher than county average rates of under 75 cardiovascular mortality, Cambridgeshire, 2014-16

District	Ward	Number of deaths	DASR per 100,000
Cambridge	East Chesterton	21	120
Cambridge	King's Hedges	21	129
Cambridge	Romsey	14	121
East Cambridgeshire	Bottisham	18	149
East Cambridgeshire	Soham South	19	107
Huntingdonshire	Huntingdon West	17	148
Fenland	Benwick, Coates & Eastrea	17	126
Fenland	Elm & Christchurch	18	107
Fenland	Octavia Hill	20	149
Fenland	Staithe	10	163
Fenland	Waterlees Village	15	115

Cambridgeshire average: 63 per 100,000

DASR - Directly age-standardised rate

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key point:




- Many wards with statistically significantly higher than Cambridgeshire average rates of premature mortality are located in Fenland (5) and Cambridge (3), but two are located in East Cambridgeshire, and one in Huntingdonshire.

Cancer

Table 94. Mortality from cancer, Cambridgeshire, 2014-16

Area	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
Cambridge	628	239	255	115
East Cambridgeshire	625	248	277	119
Fenland	943	289	424	148
Huntingdonshire	1,213	248	564	119
South Cambridgeshire	1,070	241	446	110
Cambridgeshire	4,479	252	1,966	121

DASR - Directly age-standardised rate

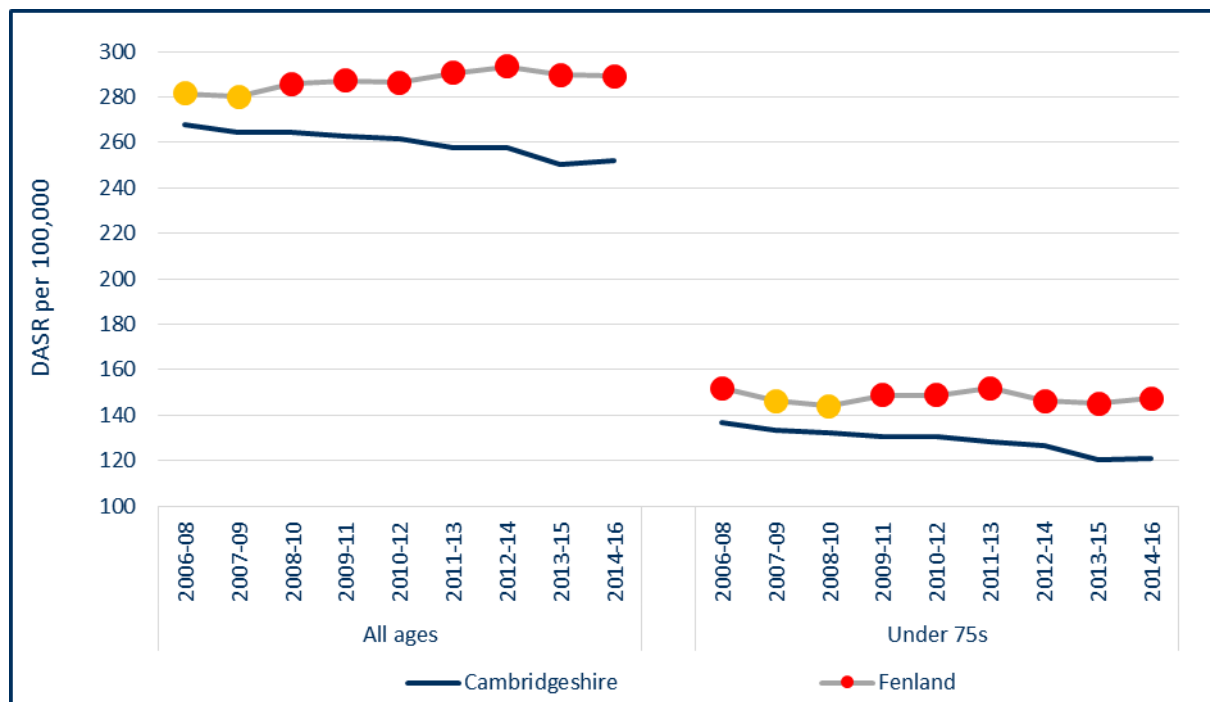
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rate of all-age and under 75 mortality from cancer is statistically significantly higher than the Cambridgeshire average in Fenland.
- Around 1,500 Cambridgeshire residents died each year from cancer between 2014 and 2016.

Figure 95. Mortality from cancer, Fenland, 2006-08 to 2014-16



DADR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).




Key points:

- The rate of all-age mortality from cancer in Fenland increased up to 2012-14, in contrast to a decline seen for the county as a whole, becoming statistically significantly higher than the Cambridgeshire average. Since then, rates have stabilised.
- Rates in under 75s have remained stable and generally statistically significantly higher than the Cambridgeshire average, in contrast to a decline seen for the county as a whole.

Table 95. Mortality from cancer by deprivation quintile of ward of residence, Cambridgeshire, 2014-16

Deprivation quintile	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
1 - Most deprived	1,051	285	474	147
2	965	255	432	123
3	852	245	379	115
4	924	243	383	111
5 - Least deprived	687	230	298	107
Cambridgeshire	4,479	252	1,966	121

DASR - Directly age-standardised rate

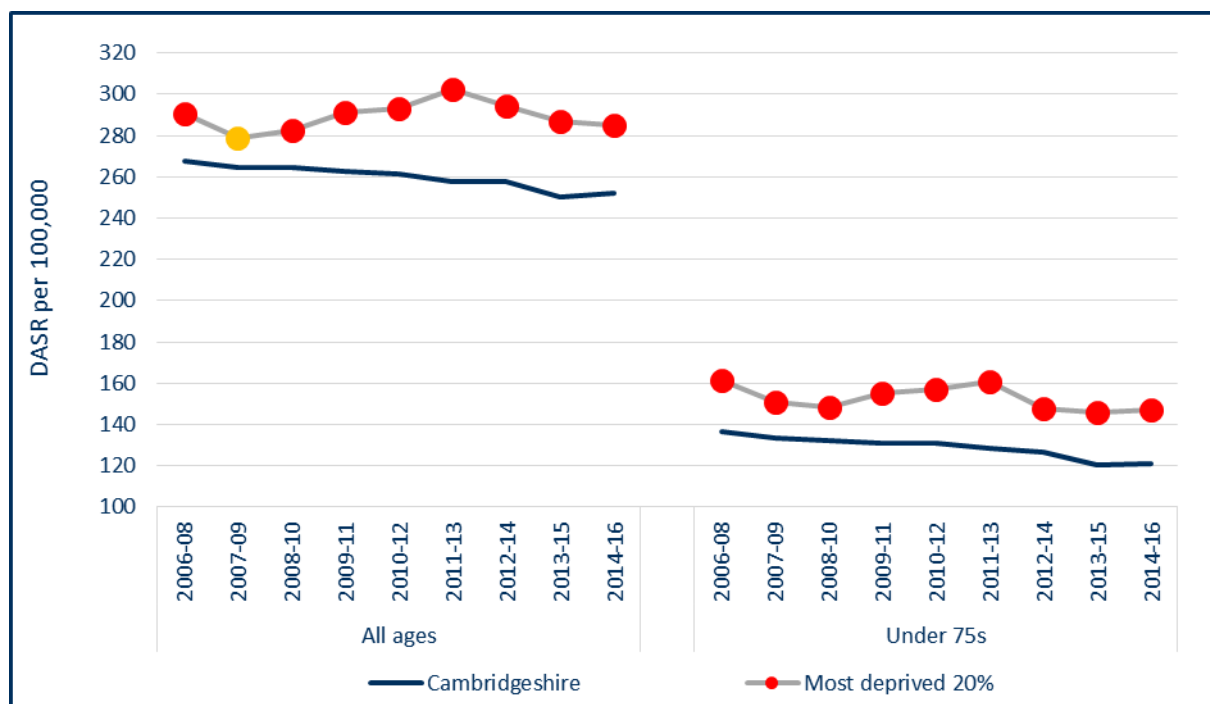
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation).

Key points:

- The rate of all-age and under 75 mortality due to cancer is statistically significantly higher than the Cambridgeshire average in the most deprived 20% of wards in the county.

Figure 96. Mortality from cancer by deprivation quintile of ward of residence, Cambridgeshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 cancer mortality have generally been statistically significantly higher than the Cambridgeshire average in the most deprived 20% of wards since 2006-08.
- Rates increased between 2007-09 and 2011-13 before falling again in recent years.

Table 96. Wards with statistically significantly higher than county average rates of under 75 cancer mortality, Cambridgeshire, 2014-16

District	Ward	Number of deaths	DASR per 100,000
Huntingdonshire	Huntingdon North	22	223
Fenland	Waterlees Village	27	216
Fenland	Roman Bank	44	180
Fenland	March North	35	174

Cambridgeshire average: 121 per 100,000

DASR - Directly age-standardised rate

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key point:




- Four wards have statistically significantly higher than county average rates of cancer mortality: three in Fenland and one in Huntingdonshire.

Respiratory disease

Table 97. Mortality from respiratory disease, Cambridgeshire, 2014-16

Area	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
Cambridge	234	81	40	19
East Cambridgeshire	235	93	56	24
Fenland	486	145	111	38
Huntingdonshire	580	122	109	23
South Cambridgeshire	403	90	71	17
Cambridgeshire	1,938	108	387	24

DASR - Directly age-standardised rate

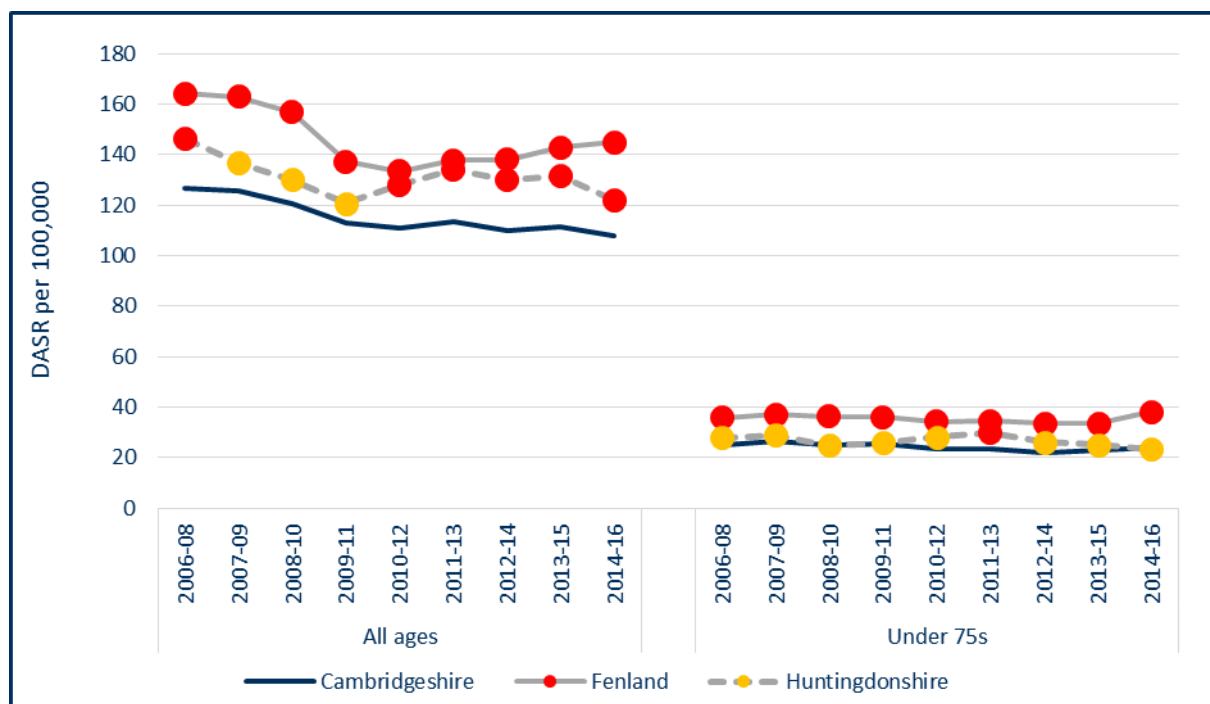
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rates of all-age and under 75 mortality from respiratory disease are statistically significantly higher than the Cambridgeshire average in Fenland. All-age rates are also statistically significantly higher in Huntingdonshire.
- Around 650 Cambridgeshire residents died from respiratory disease each year between 2014 and 2016.

Figure 97. Mortality from respiratory disease, Fenland and Huntingdonshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).




Key points:

- The rates of mortality from respiratory disease in Fenland have been consistently statistically significantly higher than the Cambridgeshire average since 2006-08 in both all ages and under 75s.
 - Rates in all ages declined up to 2010-12 but have since increased, in contrast to a continued fall for the county as a whole.
 - Rates in under 75s have been more stable but rates increased in 2014-16.
- The rate of all-age mortality from respiratory disease in Huntingdonshire was in decline up to 2009-11 but an increase in rates since then has seen the rate return to a level statistically significantly higher than the Cambridgeshire average.

Table 98. Mortality from respiratory disease by deprivation quintile of ward of residence, Cambridgeshire, 2014-16

Deprivation quintile	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
1 - Most deprived	512	134	121	37
2	442	117	89	26
3	365	106	57	18
4	366	96	77	22
5 - Least deprived	253	86	43	16
Cambridgeshire	1,938	108	387	24

DASR - Directly age-standardised rate

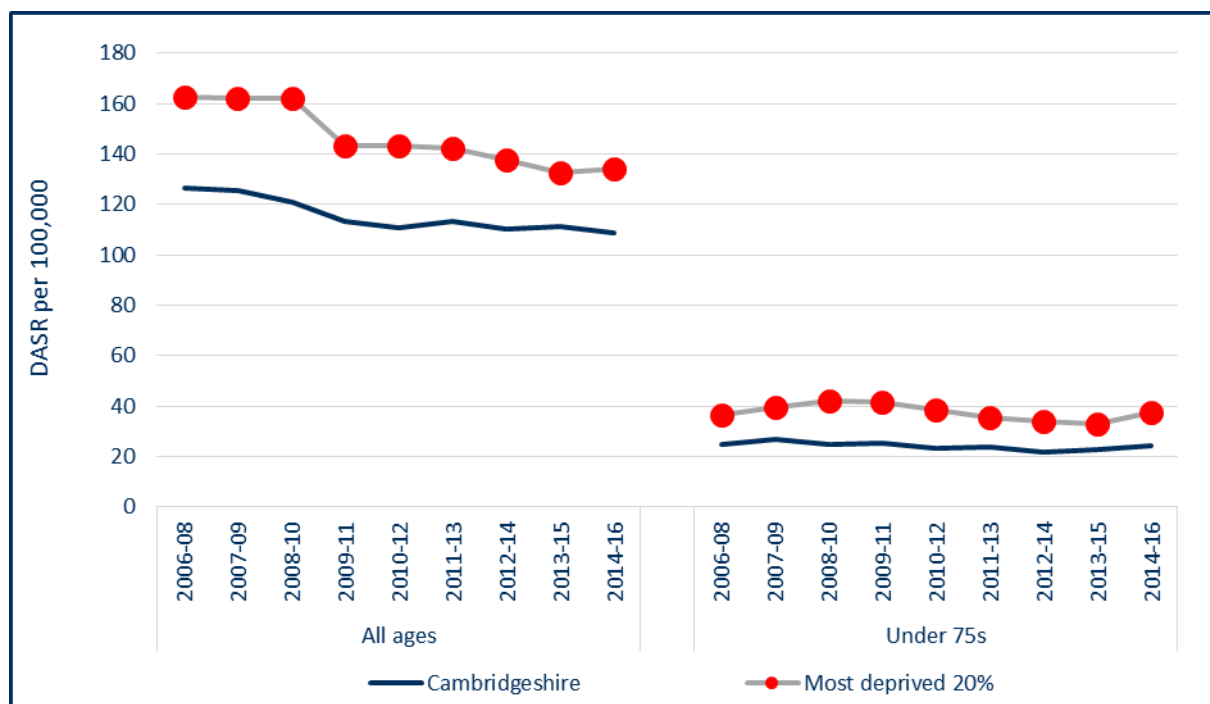
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation).

Key points:

- The rates of all-age and under 75 mortality due to respiratory disease are statistically significantly higher than the Cambridgeshire average in the most deprived 20% of wards in the county.

Figure 98. Mortality from respiratory disease by deprivation quintile of ward of residence, Cambridgeshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- Rates of respiratory disease in both all ages and under 75s have been consistently statistically significantly higher than the county average in the most deprived 20% of wards since 2006-08.
- Rates have generally declined since 2008-10 but the rate in the under 75s increased in 2014-16.

Table 99. Wards with statistically significantly higher than county average rates of respiratory mortality, Cambridgeshire, 2014-16

District	Ward	Number of deaths	DASR per 100,000
Fenland	Staithe	20	372
Fenland	Clarkson	18	234
Fenland	Slade Lode	13	234
East Cambridgeshire	Bottisham	40	221
Fenland	St Andrews	27	205
Huntingdonshire	Ramsey	50	204
Huntingdonshire	Huntingdon West	27	199
Fenland	Kirkgate	18	192
Fenland	Benwick, Coates & Eastrea	21	191
Fenland	Bassenhally	31	187
Fenland	March North	37	156

Cambridgeshire average: 108 per 100,000

DASR - Directly age-standardised rate

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key point:

- Most wards with statistically significantly higher than Cambridgeshire average rates of all-age respiratory mortality are located in Fenland (8), with two in Huntingdonshire and one in East Cambridgeshire.

Dementia and Alzheimer's

Table 100. Mortality from dementia and Alzheimer's, Cambridgeshire, 2014-16

Area	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
Cambridge	404	131.4	14	6.9
East Cambridgeshire	238	93.1	12	5.1
Fenland	346	102.6	24	8.2
Huntingdonshire	455	96.7	22	4.7
South Cambridgeshire	427	94.5	16	4.2
Cambridgeshire	1,870	102.3	88	5.5

DASR - Directly age-standardised rate

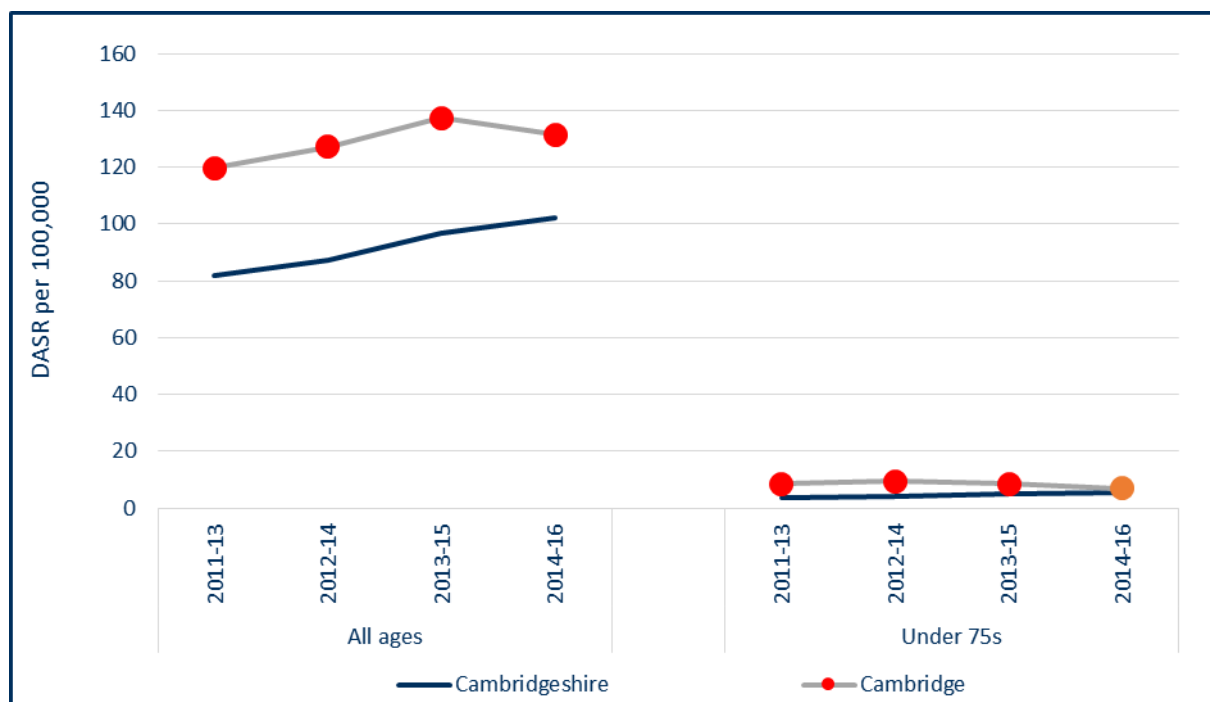
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rate of all-age mortality from dementia and Alzheimer's is statistically significantly higher than the Cambridgeshire average in Cambridge.
- Around 620 Cambridgeshire residents died each year from dementia and Alzheimer's between 2014 and 2016.

Figure 99. Mortality from dementia and Alzheimer’s, Cambridge, 2011-13 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:




- The rate of all-age mortality from dementia and Alzheimer’s in Cambridge has been consistently statistically significantly higher than the county average since 2011-13 and has increased in recent years, as it has for the county as a whole. Some of this increase is thought to be related to increased awareness and improved diagnosis and recording.⁵
- Rates in under 75s have remained more stable.

⁵ <https://www.gov.uk/government/publications/health-profile-for-england/chapter-2-major-causes-of-death-and-how-they-have-changed>

Table 101. Mortality from dementia and Alzheimer’s by deprivation quintile of ward of residence, Cambridgeshire, 2014-16

Deprivation quintile	All ages		Under 75s	
	Number of deaths	DASR per 100,000	Number of deaths	DASR per 100,000
1 - Most deprived	471	121	30	10
2	411	108	18	5
3	446	126	21	7
4	311	80	10	3
5 - Least deprived	231	78	9	3
Cambridgeshire	1,870	103	88	6

DASR - Directly age-standardised rate

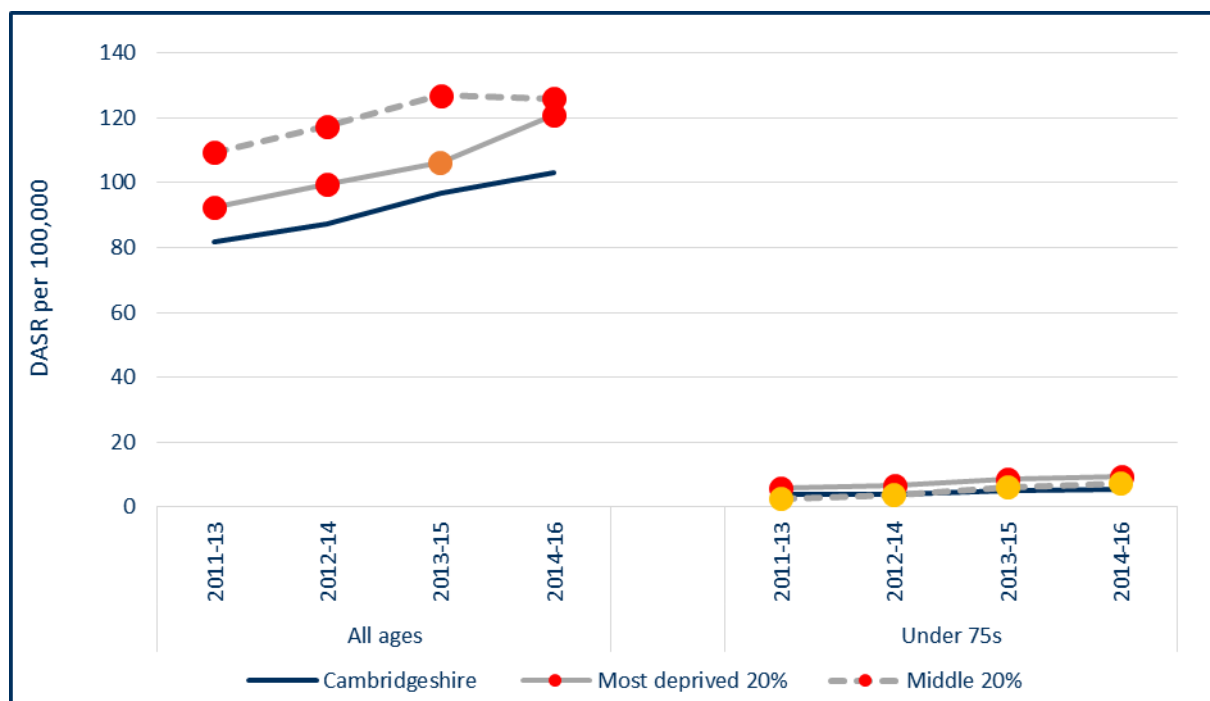
	Statistically significantly better than the Cambridgeshire average
	Statistically similar to the Cambridgeshire average
	Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates, 2015 Index of Multiple Deprivation).

Key points:

- The rates of all-age and under 75 mortality due to dementia and Alzheimer’s are statistically significantly higher than the Cambridgeshire average in the most deprived 20% of wards in the county.
- All-age rates are also statistically significantly higher than the county average in the middle 20% of wards in Cambridgeshire by deprivation.

Figure 100. Mortality from dementia and Alzheimer’s by deprivation quintile of ward of residence, Cambridgeshire, 2006-08 to 2014-16



DASR - Directly age-standardised rate

- Statistically significantly better than the Cambridgeshire average
- Statistically similar to the Cambridgeshire average
- Statistically significantly worse than the Cambridgeshire average

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key points:

- The rate of all-age mortality from dementia and Alzheimer’s has been consistently statistically significantly higher than the county average in the middle 20% of Cambridgeshire wards by deprivation since 2011-13 and higher than in the most deprived 20%.
- Rates of under 75 mortality from these conditions have been statistically significantly higher than the county average in the most deprived 20% of wards since 2011-13.

Table 102. Wards with statistically significantly higher than county average rates of dementia and Alzheimer's mortality (all ages), Cambridgeshire, 2014-16

District	Ward	Number of deaths	DASR per 100,000
Fenland	Staithe	56	1094
South Cambridgeshire	Caldecote	35	683
Huntingdonshire	Huntingdon West	59	401
East Cambridgeshire	Bottisham	77	371
Fenland	Benwick, Coates & Eastrea	32	367
Cambridge	King's Hedges	83	350
Huntingdonshire	Huntingdon East	89	265
Cambridge	Coleridge	62	243
Fenland	Kirkgate	22	226
Cambridge	West Chesterton	52	217
Cambridge	East Chesterton	60	214
South Cambridgeshire	Meldreth	20	213
South Cambridgeshire	Histon and Impington	83	208
South Cambridgeshire	Linton	37	181
South Cambridgeshire	Cottenham	57	180
Cambridge	Trumpington	49	176
Huntingdonshire	Sawtry	31	157
Fenland	March West	50	148

Cambridgeshire average: 103 per 100,000

DASR - Directly age-standardised rate

Source: Cambridgeshire County Council Public Health Intelligence (NHS Digital Primary Care Mortality Database, Office for National Statistics mid-year population estimates).

Key point:

- Wards with statistically significantly higher than county average rates of mortality from dementia and Alzheimer's are located across the county: Cambridge (5), South Cambridgeshire (5), Fenland (4), Huntingdonshire (3) and East Cambridgeshire (1).

8. CAMBRIDGESHIRE'S JOINT STRATEGIC NEEDS ASSESSMENT PROGRAMME

8.1 What is Joint Strategic Needs Assessment (JSNA)?

Joint strategic needs assessment (JSNA) is a statutory process by which Local Authorities (LAs) and Clinical Commissioning Groups (CCGs) assess and describe the current and future health, care and wellbeing needs of the local population in order to inform and guide the commissioning (buying) of preventive, health and social care services.

The primary aims of a JSNA are to:

- Provide data analyses to show the health and wellbeing status of local communities.
- Define where important differences exist.
- Provide information on local community views and evidence of effectiveness of existing interventions. which will help to shape future plans for services.
- Highlight key findings based on the information and evidence collected.

The local Health and Wellbeing Board has a statutory duty to have regard to the needs identified in the JSNA, along with stakeholder and community views, when it formulates the local population's joint Health and Wellbeing Strategy (HWBS).

Cambridgeshire's current Health and Wellbeing Strategy (HWBS) can be found at <https://www.cambridgeshire.gov.uk/residents/be-well/cambridgeshire-health-and-wellbeing-board/> and identified the following overarching priorities:

- Ensure a positive start to life for children, young people and their families.
- Support older people to be independent, safe and well.
- Encourage healthy lifestyles and behaviours in all actions and activities while respecting people's personal choices.
- Create a safe environment and help to build strong communities, wellbeing and mental health.
- Create a sustainable environment in which communities can flourish.
- Work together effectively.

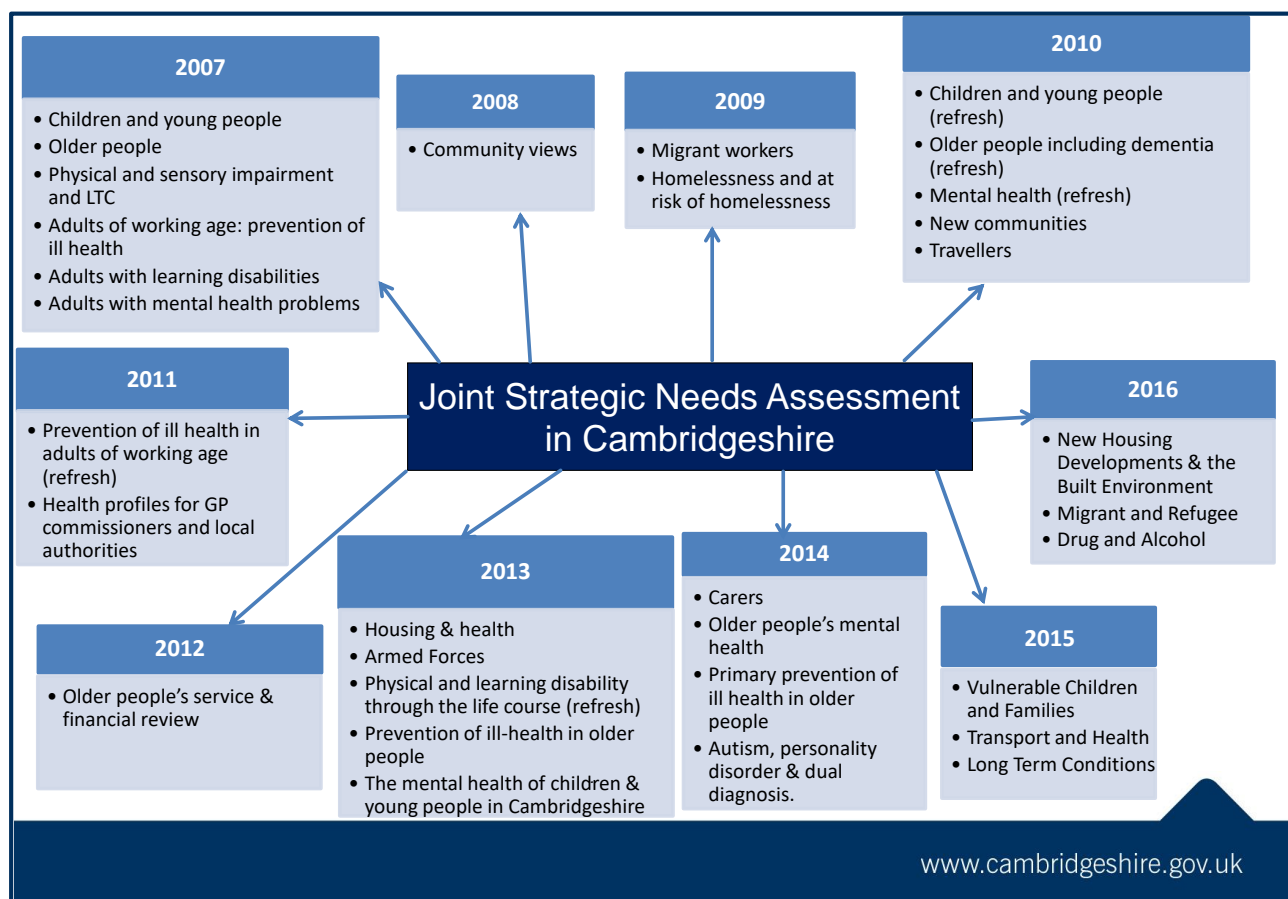
The strategy is due to be refreshed in 2018.

8.2 Overview of Cambridgeshire’s JSNA programme

The Cambridgeshire JSNA programme has produced a series of themed and topic based reports, commissioned by the Health and Wellbeing Board.

The current reports for each theme can be found at <http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports> and the figure below provides a summary.

Figure 101. Summary of Cambridgeshire’s JSNA programme



Source: Cambridgeshire Insight at <http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports>

Each JSNA theme report includes an executive summary and, annually, a **JSNA summary report** is produced that pulls together the key findings from each JSNA. The latest summary report can be found at <http://cambridgeshireinsight.org.uk/jsnasummaryreport>.

Direct links to JSNA reports completed in the last five years are as follows:

Table 103. Links to Cambridgeshire's JSNA themed reports programme, 2012 to 2017

Older people's services and financial review	http://cambridgeshireinsight.org.uk/currentreports/jsna-older-peoples-services-and-financial-revie
Housing and health	http://cambridgeshireinsight.org.uk/housing-jsna-2013
Armed forces	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/armed-forces-2013
Physical and learning disability through the life course (refresh)	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/physical-and-learning-disability-through-life
Prevention of ill-health in older people	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/prevention-ill-health-older-people-2013
Mental health of children and young people	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/mental-health-children-and-young-people
Carers	http://cambridgeshireinsight.org.uk/jsna/carers
Older people's mental health	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/older-peoples-mental-health-2014
Primary prevention of ill health in older people	http://cambridgeshireinsight.org.uk/primary-prevention-ill-health-older-people2014
Autism, personality disorder and dual diagnoses	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/autism-personality-disorders-and-dual
Vulnerable children and families	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/vulnerable-children-and-families-2015
Transport and health	http://cambridgeshireinsight.org.uk/JSNA/Transport-and-Health-2014/15
Long term conditions	http://cambridgeshireinsight.org.uk/JSNA/LTCs-across-the-lifecourse-2015
New housing developments and the built environment	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/new-housing-developments-and-built-environment
Migrant and refugee	http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports/migrant-and-refugee-2016
Drugs and alcohol	http://cambridgeshireinsight.org.uk/JSNA/Drugs-and-Alcohol-2015

Source: Cambridgeshire Insight at <http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports>

9. SOURCES OF FURTHER INFORMATION

This section provides an overview of, and key links to, the **primary local and national resources** for JSNA and public health intelligence.

Joint Strategic Needs Assessment (JSNA) website

- This Core Dataset document is located on the JSNA Programme's website at <http://cambridgeshireinsight.org.uk/jsna>.
- The current themed reports from the JSNA work programme can be found at <http://cambridgeshireinsight.org.uk/joint-strategic-needs-assessment/current-jsna-reports>

Cambridgeshire County Council's Public Health Intelligence Team (PHI)

- The local PHI team are responsible for supporting Cambridgeshire County Council, Peterborough City Council and Cambridgeshire and Peterborough Clinical Commissioning Group. Please contact David Lea at david.lea@cambridgeshire.gov.uk or PHI-team@cambridgeshire.gov.uk.
- The team has produced a guide to the local service, which includes details of team members, sources of public health data, as well as knowledge and learning resources. This can be accessed from <http://cambridgeshireinsight.org.uk/health> and directly at http://cambridgeshireinsight.org.uk/files/caminsight/Cambs_Pboro_PHI_Team_May2017_FINAL.d [OC](#).

Cambridgeshire Insight

- Cambridgeshire Insight is the Council's web based data and information platform. It contains a wealth of information, much related to health and wellbeing and the determinants of health. Cambridgeshire Insight's home page is at <http://cambridgeshireinsight.org.uk/>.
- Cambridgeshire Insight's health and wellbeing pages are at <http://cambridgeshireinsight.org.uk/health>.

Public Health Outcomes Framework

- The Public Health Outcomes Framework (PHOF) is the Government's key set of population measures for measuring and tracking progress in health and wellbeing. The local PHOF page is at <http://cambridgeshireinsight.org.uk/health/phof> and data for all areas can be found at the national site at <http://www.phoutcomes.info/>.

Public Health England data and information profiles

- Public Health England (PHE) produce a wide-range of data and information profiles at <https://fingertips.phe.org.uk/> all including local data.

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