

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 **Office of National Statistics (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 65% 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, 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 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 rates is highest in Fenland but 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 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 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.
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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 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 75s 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 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 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 problem areas. 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.

Item 12 – Appendix 2 – Executive Summary

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 Cams | 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 | Supressed | Supressed | 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 100,00 | 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 | Supressed | 12.7 | 9.2 | 9.7 |
| | Smoking related deaths (per 100,00 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 |  | Lower than the England value | Suppressed: removed due to small numbers |
|  | Statistically similar to the England average |  | Higher than the England value | DQ: data quality issue |
|  | Statistically significantly worse than the England average | | | !-: 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) | | | |

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

Source: Public Health England Health Profiles for 2017

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 the Figure 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/>. We will also shortly begin work on a small area JSNA Core Dataset.

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:

- 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 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 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/>.

