



JOINT STRATEGIC NEEDS ASSESSMENT
FOR TORBAY 2020-2021



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Chair of the Health and Wellbeing board

I am pleased to bring to you the latest Torbay Joint Strategic Needs Assessment (JSNA). The JSNA helps us to build a picture of the needs of our communities, covering all aspects of people's lives. It highlights those areas of our population where we need to focus our efforts to tackle poorer health outcomes.

It is ten years since the Marmot Report, *Fair society, Healthy Lives* was published. The Marmot Report showed how inequalities in society led to inequalities in how long we live, and how many years we live with illness or disability. It set out a strategy to address the social determinants of health – the conditions in which we are all born, grow, live, work and age – to reduce inequalities and improve health outcomes for all.

In the intervening years the inequalities gap has not narrowed but widened. And those most adversely affected are the most vulnerable in our communities, who often live in the areas of highest deprivation. It is essential that we work together, across all sectors, to reverse this trend.

The JSNA shows us where our major challenges lie: there is a six year gap in life expectancy between different areas of the Bay. Torbay has the highest levels of deprivation in the South West. We have an ageing population facing the challenges of ill-health, loneliness and frailty. We also have high levels of children living in poverty, child and adult obesity, and suicide. Poorer environmental conditions are inevitably associated with poorer physical and mental wellbeing.

Here in Torbay we want all of our residents to thrive. We want this to be a place where inequalities are reducing, and where our children, families and older people have high aspirations, rewarding jobs, and good quality affordable housing. This is particularly challenging in a year when we have seen a global pandemic, which has had an impact on all aspects of our lives and affects our most vulnerable communities the most.

The original Marmot Report was also all about empowering and sustaining communities. Torbay has a proud history of partnership between statutory and voluntary sectors, with a strong community voice. As a Council we are determined to work alongside our communities to drive improvements in health and wellbeing by improving the conditions in which we all live, work and grow. No one organisation can bridge the inequality gap but together we can make a difference.

Councillor Jackie Stockman
Chair
Torbay Health and Wellbeing Board

Executive Summary

The Joint Strategic Needs Assessment (JSNA) provides an analysis of the current and future health and social care needs of the communities within Torbay.

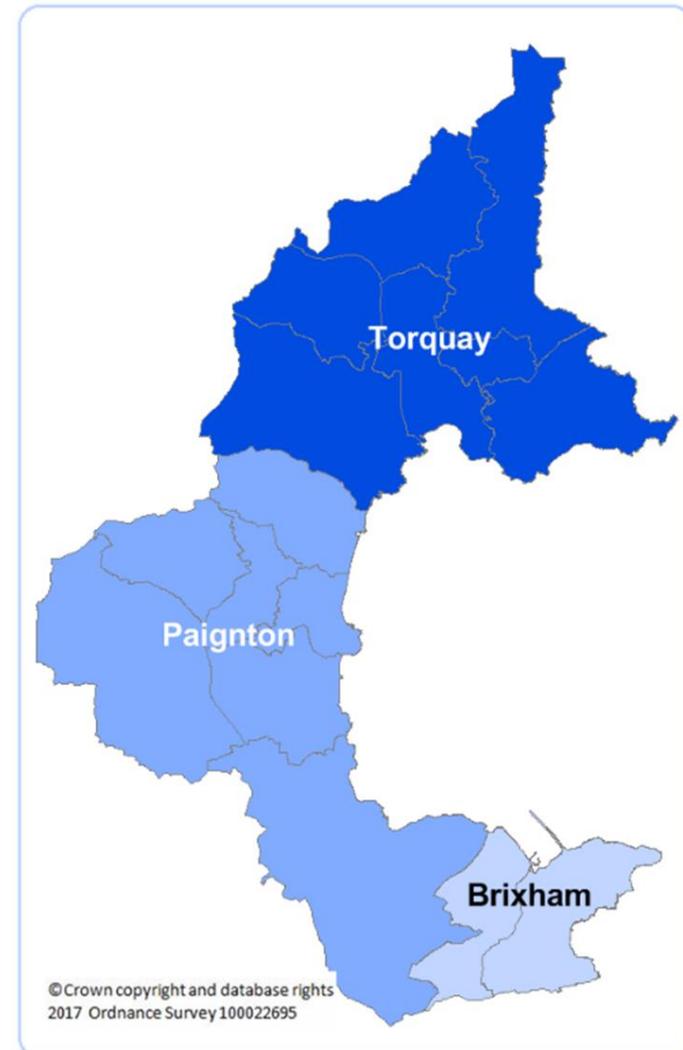
This document takes a lifecourse view of population characteristics and needs, presenting detailed analysis of needs and risks relating to health and wellbeing at different points of life: children and families, working age adults, and those aged 65 and over. Understanding the different risks and needs at the different life stages helps us to target efforts to tackle poor health and inequalities for different population groups, through the services we commission and the plans we put in place.

Figure 1: Geography & demography of Torbay

Spanning the three South Devon towns of Torquay, Paignton and Brixham, Torbay has a collective population of 135,780 (2018 mid-year population estimates). With its rich history, breathtaking natural environment and longstanding reputation as a popular tourist and retirement destination, Torbay has enormous potential to provide individuals and families with the opportunity to live a healthy and fulfilled life.

Like many other coastal towns however, Torbay has its challenges. A predominantly low-wage, low-skill economy that is over reliant on the seasonal tourism industry, it is now amongst the weakest in the country. Torbay also has pockets of significant poverty and deprivation, and is ranked as the most deprived upper-tier local authority in the South West.

Inequalities continue to widen as relative deprivation worsens, and 27% of Torbay residents live in the 20% most deprived areas in England. With high levels of vulnerability across all three towns, Torbay has the second highest rate of looked after children in England, and the highest domestic violence rate in the South West.



Key Facts

Torbay is home to
135,780 people



The average age of a
Torbay resident is **48**

Torbay is home to **42**
state schools



The average price of a
house is **£195,000**



26 out of 100
residents are 65 and over



19 out of 100
residents are children



There are **85** residential
care and nursing homes



The average full-time
salary is **£25,871**



Torbay has approximately **4.5**
million visitors each year



26 beaches to enjoy along **22**
miles of coastline



There were
1,220 births
during 2018



Torbay has **10** GP Practice
groups and **35** Pharmacies



Torbay contains over **70**
parks



Over **100 miles** of footpaths,
permissive routes and horse-riding
routes criss-crossing Torbay



The proportion of
people who live in an
area classified as
amongst the 20%
most deprived areas
of England is
27 out of 100



Torbay residents make
52,000 A&E attendances
and **20,000** emergency
admissions to hospital each
year

JSNA Key Challenges

The key challenges facing the population and the organisations that serve the population are highlighted below.

- There is significant variation in health and wellbeing across the bay. In our most affluent areas residents can expect to live on average over six years longer than those living in our more deprived communities.
- Inequalities have been widening as relative deprivation worsens; Torbay is ranked as the most deprived local authority in the South West region.
- Torbay's economy is ranked amongst the weakest in England, and has declined in recent years. With the disruption to the economy caused by COVID-19 the economy is expected to weaken further. Torbay's economy is highly dependent on tourism and unemployment is beginning to rise.
- The number of children looked after by the local authority remains amongst the highest in England and around 1 in 4 children continue to live in households where income is less than 60% of the median income (living in poverty).
- We have an ageing population with the number of people aged over 85 expected to increase by over 50% within the next decade or so. As the population ages it is also expected that we will see more people become frail and require support from health and social care services.
- There are many opportunities for the people of Torbay to be supported to improve their lifestyles. At present:
 - Around 6 out of 10 adults in Torbay are overweight or obese
 - Around 1 in 6 adults in Torbay smoke
 - There are high levels of suicide and self-harm in the population
 - There are high levels of vulnerability in the population, including groups with specialist needs and high levels of mental ill health

This document is part of the JSNA in Torbay, a large part of the JSNA is the district, town and electoral ward profiles which cover the life course. These can be found at: www.southdevonandtorbay.info/jsna

There is also a range of topic based analyses relating to different aspects of health and wellbeing. All information can be found on our webpages: <http://www.southdevonandtorbay.info/>

Introduction

Background

A Joint Strategic Needs Assessment (JSNA) is an assessment of the current and future health and social care needs of the local community.

The JSNA helps local leaders to work together to understand and agree the needs of the local population. JSNAs, along with health and wellbeing strategies enable commissioners to plan and commission more effective and integrated services to meet the needs of the population. Local Authorities and Clinical Commissioning Groups have equal and explicit obligations to prepare a JSNA, under the governance of the health and wellbeing board¹

The approach to the JSNA in Torbay is to provide a collection of narrative and data interpretation to support the community, voluntary sector and statutory organisations across Torbay. This provides a central, consistent range of data that can be accessed to support commissioning strategies and funding bids across all sectors within Torbay.

Helping people to live longer and healthier lives is not simply about NHS healthcare received through GPs or at hospital. It is also about the wider social determinants of where we live and work, things such as Crime, Income, Housing and Education. The collective action of agencies is needed today to promote the health of tomorrow's older population. Preventing ill health starts before birth, and continues to accumulate throughout individuals' lives.

Structure

This document is part of a wider suite of documents and presentations that make up the JSNA for Torbay, these include breakdowns of information to the three towns of Torbay and its constituent wards. As well as the JSNA, there are specific topic based summaries relating to fields such as smoking and dental caries. This information is collated at the following website <http://www.southdevonandtorbay.info/>

Information sources

Information that makes up this document comes from a multitude of sources, these will be credited throughout the profile. A very significant amount of information is gathered at the Public Health England website called 'Fingertips'. This site contains a large amount of information on its 'Public Health Outcomes Framework', there are also multiple useful profiles relating to subjects such as Mental Health, Alcohol and Tobacco. The site shows Torbay's position relative to other local authorities.

The following organisations have also contributed data directly to this JSNA:
Citizens Advice, Torbay & South Devon NHS Foundation Trust, Torbay Community Safety Partnership, Torbay Council Education Department.

¹ Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, Department for Health, March 2013

Document Overview

The written narrative is themed into the following chapters:

- **Population overview** shows the demography, wider determinants and Index of Multiple Deprivation (IMD) across all ages
- **Starting and developing well** is about understanding the needs of the population between 0 and 24
- **Living and working well** is about understanding the needs of the working age population
- **Ageing well** is about understanding the needs of those aged 65 and over.

Life course

A life course approach affords an understanding of needs and risks to health and wellbeing at different points of life. This is a useful differentiation as our needs as young people are often significantly different to our needs when we reach retirement. Understanding the different risks and needs at the various stages of life enables the opportunity to promote positive health and wellbeing and to prevent future ill health. Also it provides an overview of the potential issues within Torbay that need to be considered when commissioning and delivering services.

An understanding of the life course also shows how a young person's experiences from birth can influence their socioeconomic and health future. An ability to understand these influences may help to mitigate the future levels of ill-health and inequalities.

Wider determinants of health

It is not possible to change some of our individual determinants of health, such as our age, our sex at birth and genetic makeup. However, there are other factors that we can try to influence in regard to the wider determinants of health. Wider determinants of health are a diverse range of social, economic and environmental factors which influence people's mental and physical health.

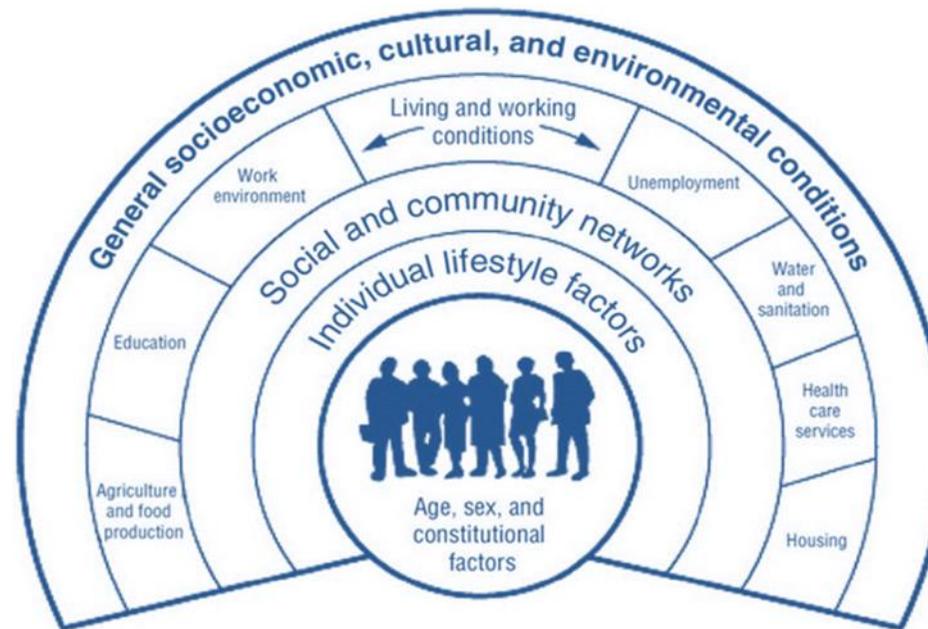
These include the following influences which are presented in Figure 2:

- **Individual lifestyle factors** – Smoking, alcohol, physical activity and diet
- **Social and community network** – Relationships with family, friends and the wider community

- **Living and working conditions** – Includes access and opportunities in relation to jobs, housing, education and welfare services
- **General socioeconomic, cultural and environmental conditions** – Includes disposable income, taxation and the availability of work

Influencing these areas, across the life course, is required to reduce inequalities such as the gaps in healthy life expectancy.

Figure 2: Wider determinants of health



Source:G.Dahlgren, M Whitehead – Policies and strategies to promote social equity in health

Inequalities

Inequalities are variances between different groups within society that are both avoidable and unfair. They develop out of the conditions that we are born, grow, live, work and age in. These conditions impact in different ways as well as in different combinations, which manifest in such a way as to be either beneficial or detrimental to people's lives, such as health behaviours, health status and wellbeing.

Inequalities can exist between population groups in a geographic community in different ways, with many individuals and groups intersecting across two or more of these (Figure 3).

Figure 3: Inequalities and intersection



- **Socio-economic groups and deprivation:** Examples include those who are unemployed, on low incomes or people living in deprived areas.
- **Protected characteristics:** The Equality Act protects people against discrimination because of the nine protected characteristics that we all have. Examples of protected characteristics are sex, race, sexual orientation, and disability.

- Vulnerable groups in society:** These are groups of people who because of certain factors mean they are more at risk than others in society and/or marginalised in society. Examples include people with a disability, people with substance misuse problems, prisoners, and homeless people. Inclusive health groups can be an alternative term that is often used for this population group.

Comparisons

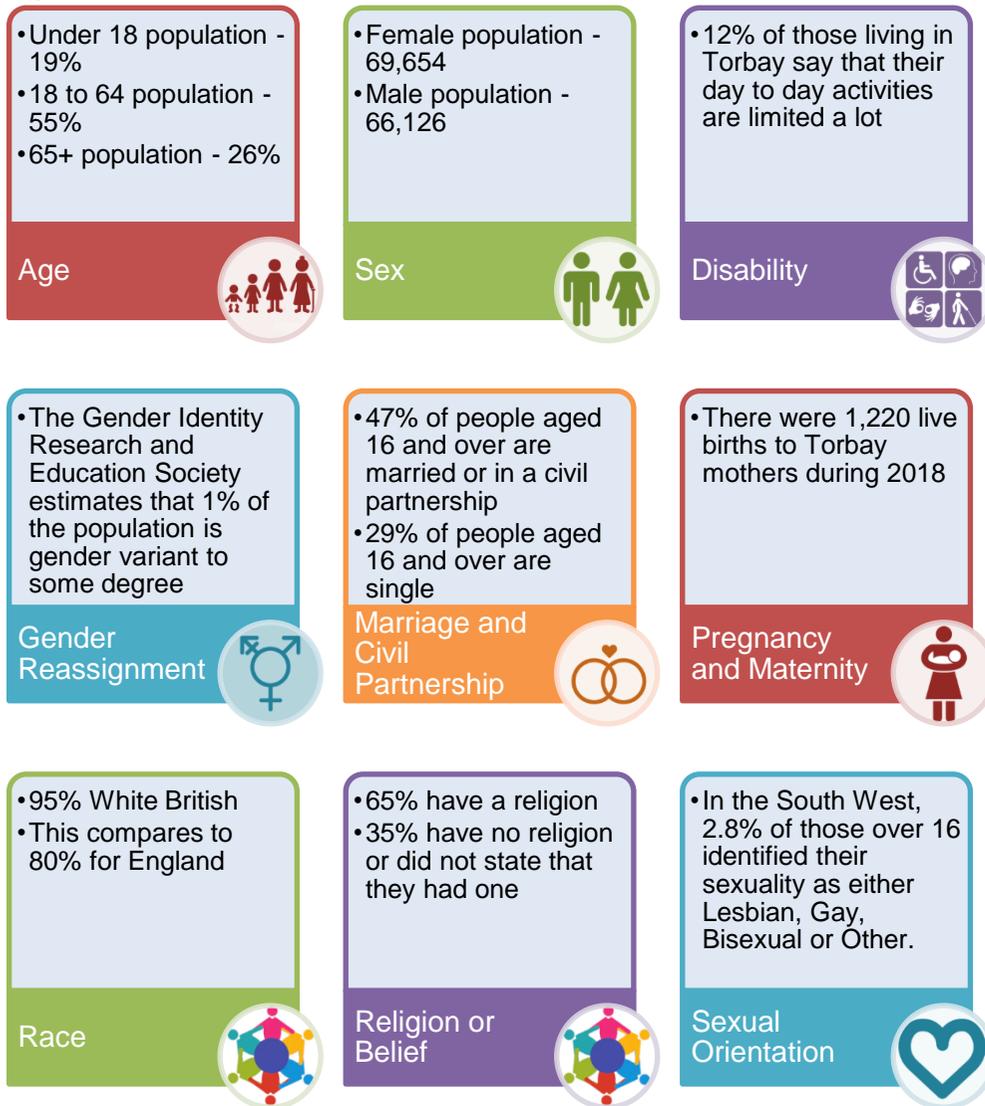
The Chartered Institute of Public Finance and Accountancy (CIPFA) has developed an approach to aid benchmarking and comparing similar local authorities. These are known as nearest neighbours. Torbay's nearest neighbours are presented below. Within this report Torbay will be compared to a 'comparator group' in data tables and graphs, the statistic shown is the average of the nearest neighbours including Torbay.

Local Authority	% of 2018 population living in 20% most deprived areas (IMD 2019)	Total Population (2018)	Aged 65 & over (2018)	% of population aged 65+
Blackpool	56.7%	139,305	28,402	20.4%
Bournemouth, Christchurch and Poole	11.6%	395,784	85,245	21.5%
Darlington	30.2%	106,566	21,588	20.3%
Dudley	28.1%	320,626	65,175	20.3%
East Riding of Yorkshire	7.8%	339,614	87,485	25.8%
Isle of Wight	13.8%	141,538	39,294	27.8%
North East Lincolnshire	36.6%	159,821	32,299	20.2%
North Tyneside	21.1%	205,985	41,165	20.0%
Northumberland	20.5%	320,274	77,725	24.3%
Redcar and Cleveland	36.0%	136,718	30,435	22.3%
Sefton	30.7%	275,396	64,032	23.3%
Southend-on-Sea	22.9%	182,463	35,097	19.2%
St. Helens	42.9%	180,049	36,788	20.4%
Stockport	17.4%	291,775	58,064	19.9%
Torbay	27.5%	135,780	35,907	26.4%
Wirral	35.8%	323,235	69,811	21.6%

Source: IMD 2019, ONS Mid-year population estimates

Protected Characteristics

Figure 4: Protected Characteristics



Protected characteristics are the nine characteristic groups protected under the Equality Act 2010, these are listed in Figure 4. Under the Act, people are not allowed to discriminate, harass or victimise another person because they have any of the protected characteristics. There is also protection against discrimination where someone is perceived to have one of the protected characteristics or where they are associated with someone who has a protected characteristic.

Population Overview

Population Overview

Torbay is home to
135,780
people



The average age of
a Torbay resident
is
48 years

Torbay's population is
projected to increase to
149,500 by 2040

There were **1,220**
births during 2018



The average life
expectancy for
females is **83**
years, for males it
is **79** years



Healthy life
expectancy for
females and males
is
62 years



Currently **26 out of 100**
Torbay residents are aged 65 and
over. By 2040 this is projected to rise
to **34 out of 100**



13 out of 100
Torbay households
are experiencing
fuel poverty

The proportion of people
who live in an area
classified as amongst the
20% most deprived areas
of England is
27 out of 100



30 out of 100
children live in the 20%
most deprived areas of
England

There were **12,241**
recorded crimes within
Torbay during 2018/19



There were **3,712**
recorded occurrences of
domestic abuse within
Torbay during 2018/19

The average price of a house in
Torbay is **8** times average full-
time earnings



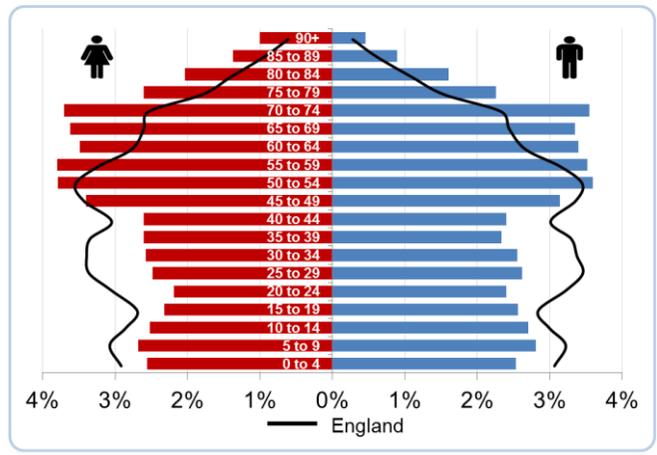
Torbay has significantly lower
levels of air pollution than the
England average.



POPULATION

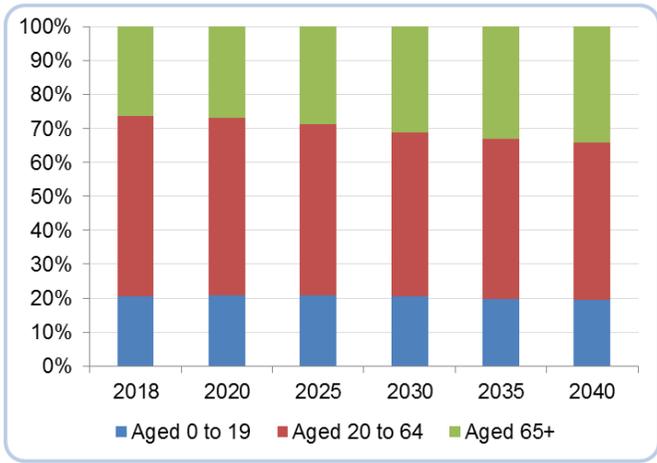
The population profile of an area can help to tell you many things about the potential needs of an area and in the case of population projections it provides a glimpse to future needs. For instance, a projected increase in the number of older people in a population will mean that a rise in demand for health & social care is likely to occur. A rise in the under 18 population would lead to increased demand for educational places, youth activities or possibly increased demand for children’s social care services.

Figure 5
Population pyramid
Torbay (2018)
Source: NOMIS



Torbay has a resident population of 135,780 (ONS Mid-Year Estimate 2018), 51.3% of the population is female and has a significantly older demographic than England, the median age of residents in Torbay is 48 years (England – 39 years). Torbay has higher rates of residents in all age quinquaries above the age of 50 than England and lower rates for all age quinquaries below 50 (Figure 5).

Figure 6
Population projections for Torbay
Source: NOMIS



Torbay’s population is currently projected to rise from 135,780 in 2018 to 149,500 by 2040. The proportion of the population aged 0 to 19 is projected to remain relatively steady, the significant changes in the demographic proportions is projected to take place in the 20 to 64 and 65+ age groups. Those aged between 20 and 64 are projected to fall from 53% to 46% by 2040, the proportion of those aged 65 and over is expected to rise from 26% in 2018 to 34% by 2040 (Figure 6). The projected rate of fall amongst the 20 to 64 age group population is steeper than the projections for England as a whole.

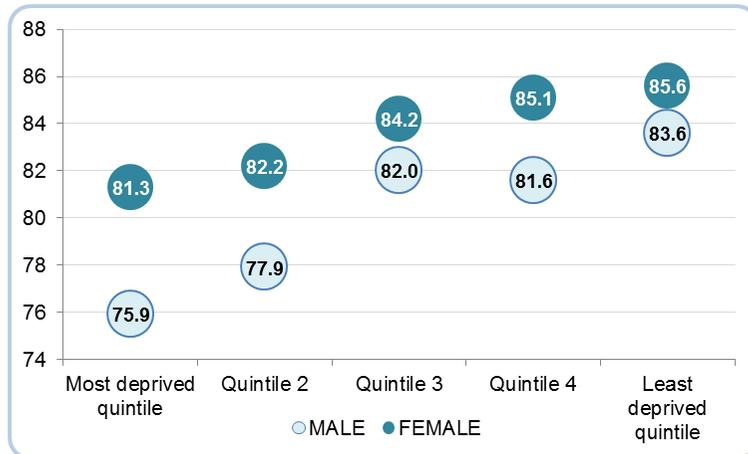
For more information, visit the Life expectancy, births and mortality pages at <http://www.southdevonandtorbay.info>

LIFE EXPECTANCY

Life expectancy and healthy life expectancy are important measures of mortality and ill health showing the trends in different sections of the community. Whilst life expectancy is an important measure, there is also the amount of someone’s life that they spend in a healthy condition and the importance of that to their wellbeing. Significant advances in medicine may well keep someone alive for longer but the quality of life enjoyed may be relatively poor.

Figure 7
Female and male life expectancy at birth by deprivation quintile Torbay (2013 to 2017)

Source: PCMD, ONS Mid-year population estimates



There has long been a relationship between income and poorer health outcomes. One of these health outcomes is life expectancy. The gap in life expectancy between the most and least deprived quintiles in Torbay is 6 years. The difference between females in most and least deprived quintiles is 4.3 years, for males this gap is 7.7 years (Figure 7). There is very little overall difference in life expectancy when compared to national and comparator groups (CIPFA).

Figure 8
Female healthy life expectancy at birth

Source: Public Health Outcomes Framework (PHOF)

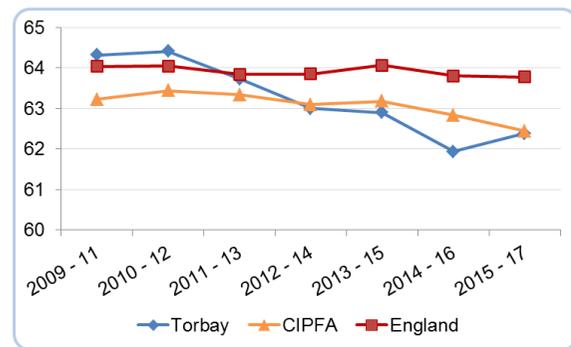
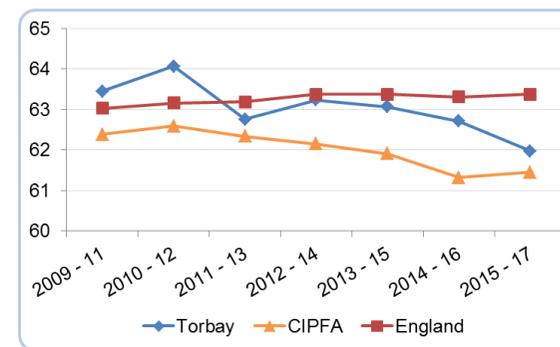


Figure 9
Male healthy life expectancy at birth

Source: Public Health Outcomes Framework (PHOF)

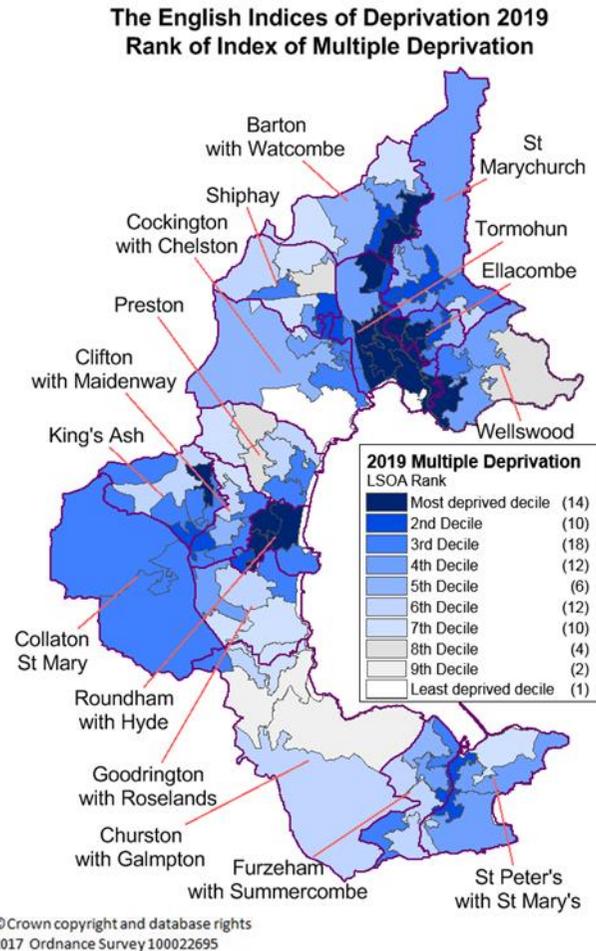


Females in Torbay would expect to live 4 years longer than their male counterparts but the numbers of years spent in good health is the same as males (Figures 8 and 9). This is not significantly different to national and CIPFA comparator rates.

[For more information, visit the Life expectancy, births and mortality pages at http://www.southdevonandtorbay.info](http://www.southdevonandtorbay.info)

DEPRIVATION

Figure 10
Rank of Index of Multiple Deprivation (IMD)



Source: Index of Multiple Deprivation (2019)

For more information, visit the Deprivation pages at <http://www.southdevonandtorbay.info>

The latest Index of Multiple Deprivation (IMD) was released in September 2019. The IMD measures **relative** levels of deprivation in small geographical areas called Lower-layer Super Output Areas (LSOA). There are 32,844 LSOAs within England of which 89 make up the area of Torbay. It should be noted that the IMD is measuring **relative** levels of deprivation, for example a better rank in crime deprivation does not mean that Crime levels are falling, simply that levels of crime used to calculate the IMD are not rising as quickly as other local authorities. It is also important to note that not everyone living in a deprived area is deprived and vice versa when applied to a non-deprived area. In general, those people who live in more deprived areas are more likely to die earlier and suffer more ill health.

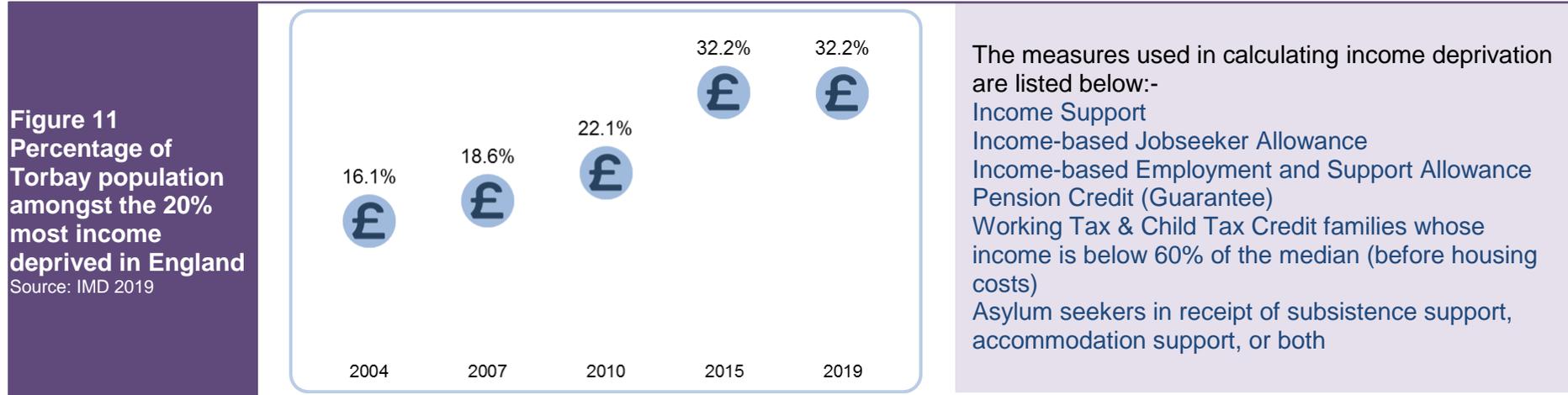
The IMD is made up of the following deprivation sub-categories (% of weighting indicated in brackets):-

- Income (22.5%)
- Employment (22.5%)
- Education, Skills and Training (13.5%)
- Health and Disability (13.5%)
- Crime (9.3%)
- Barriers to Housing and Services (9.3%)
- Living Environment (9.3%)

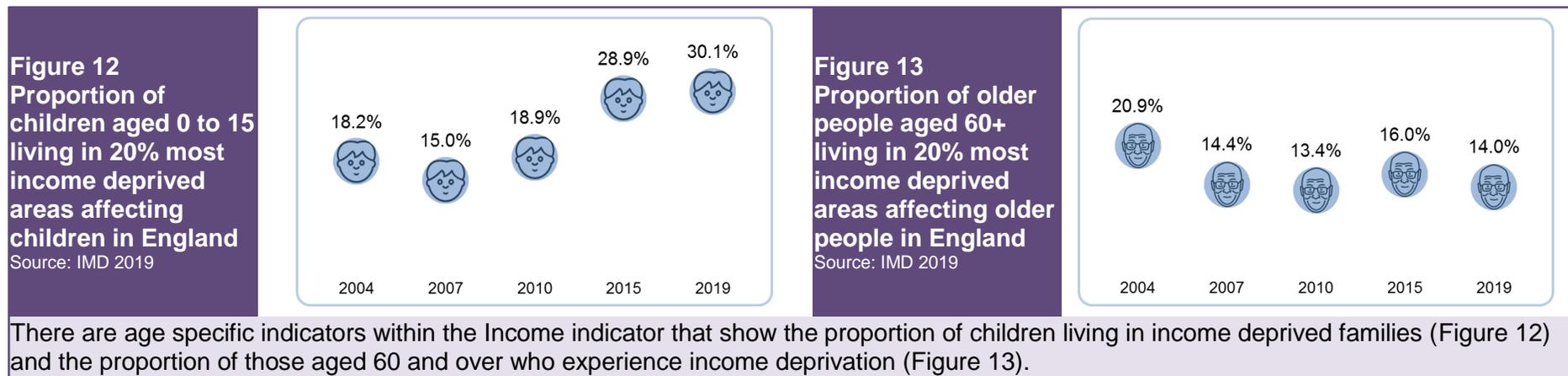
The 2019 IMD showed that 24 out of 89 LSOAs within Torbay had levels of deprivation that placed them in the 20% most deprived areas of England (Figure 10), this equates to 27% of the population. This is a small improvement on the previous incarnation of the IMD in 2015 when Torbay had 28 LSOAs in the 20% most deprived areas of England, equating to 32% of the population.

INCOME DEPRIVATION

One of the domains of deprivation is Income deprivation which accounts for 22.5% of the 2019 IMD score. Income deprivation relates to the proportion of the population experiencing deprivation related to low income.



Out of the 151 upper-tier local authorities, Torbay ranked as the 24th most deprived in relation to Income (2015 – 30th). This equates to 32% of Torbay residents living in an area amongst the 20% most deprived areas in England (2015 – 32%) (Figure 11).



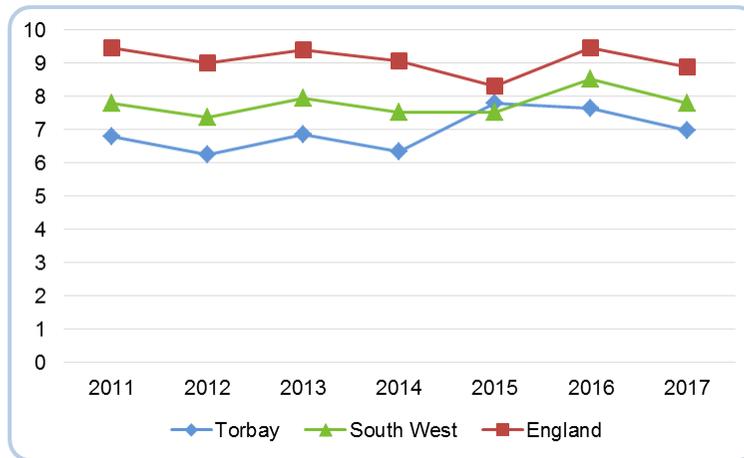
There are age specific indicators within the Income indicator that show the proportion of children living in income deprived families (Figure 12) and the proportion of those aged 60 and over who experience income deprivation (Figure 13).

[For more information, visit the Deprivation pages at http://www.southdevonandtorbay.info](http://www.southdevonandtorbay.info)

ENVIRONMENT

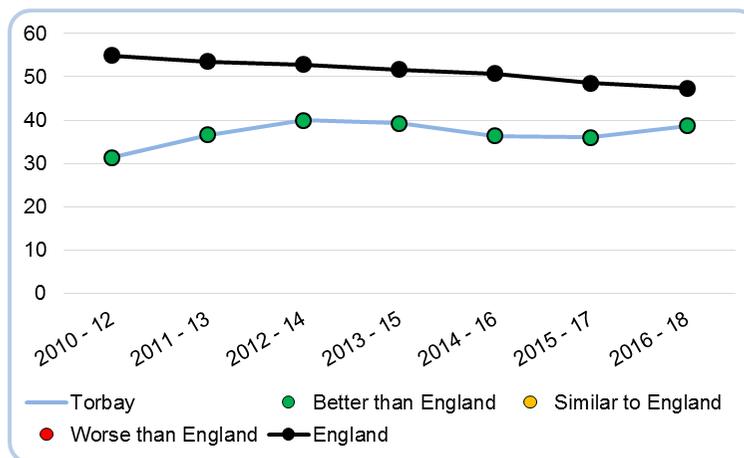
Poor air quality is a significant public health issue. There is clear evidence that high levels of fine particulate matter has a significant contributory role towards poor health in a community. Accidents involving road vehicles are significant causes of preventable deaths, particularly in younger age groups. The vast majority of road traffic collisions are preventable and can be avoided through improved education, awareness and vehicle safety.

Figure 14
Air Pollution –
Concentration of
human-made fine
particulate matter
Source: Public Health
Outcomes Framework



Concentration of human-made fine particulate matter within Torbay has been consistently below national and regional levels (Figure 14). Over the seven years shown there has been a degree of variance from year to year, there has been little overall change between 2011 and 2017.

Figure 15
Killed & seriously
injured casualties on
England's roads per
100,000 population
Source: Department for
Transport



The number of Torbay residents killed and seriously injured on England's roads has consistently been below the national rate (Figure 15). It should be noted that figures are the adjusted figures provided by the Department for Transport to take account of changes in severity reporting systems since 2016.

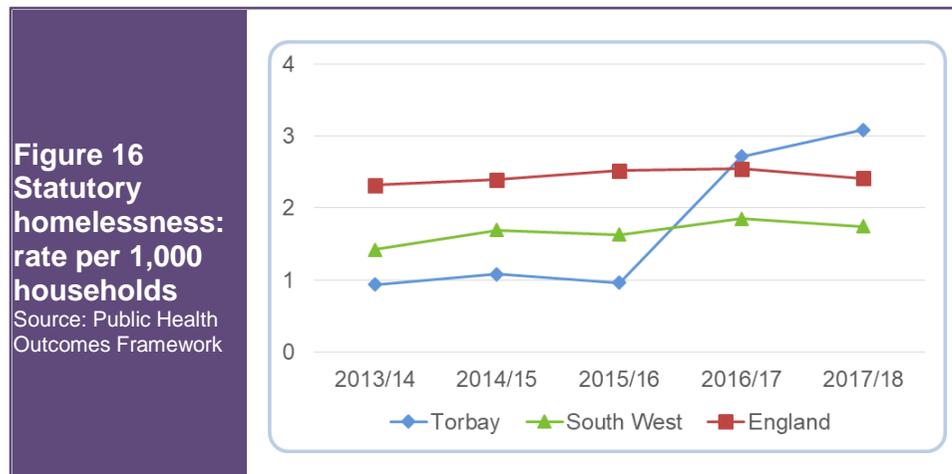
For more information, visit the Wider Determinants Of Health pages at fingertips.phe.org.uk

HOMELESSNESS

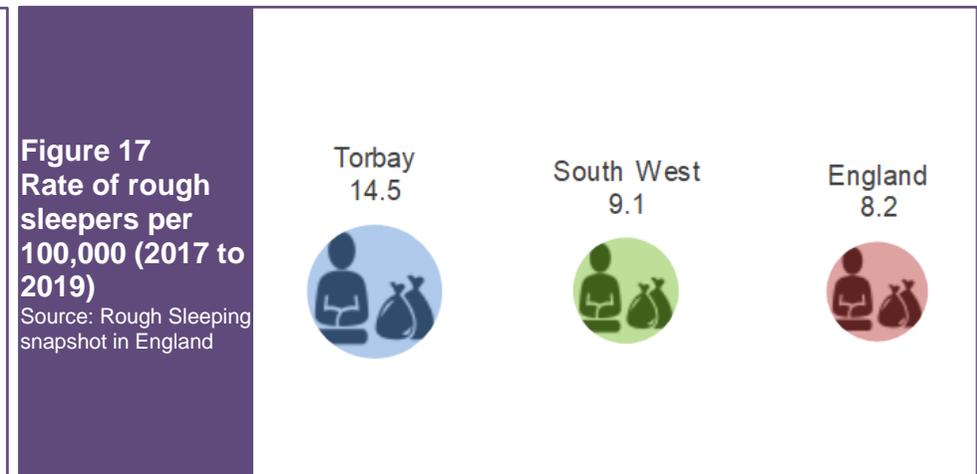
People can become homeless for various reasons including: eviction, relationship breakdown, domestic abuse, being asked to leave by family/friends, neighbour harassment and a disaster such as fire or flooding.

Some people who are homeless end up on the street. The rough sleepers count is a count/estimate by English Local Authorities of the number of people sleeping rough on one night each Autumn. There were 16 rough sleepers counted in Torbay in October 2019 compared to 19 the previous year. Rough sleeping, although a very visible sign of homelessness, is only one type. There are homeless households living in emergency temporary accommodation, placed by Torbay Council under statutory homeless legislation. There are also the hidden homeless such as sofa surfers who stay for short periods with different friends and family because they have nowhere settled to stay. Being homeless or living in poor housing has a detrimental effect on both physical and mental health. Homelessness can be caused by, or lead to, poor mental health and addiction and it is often difficult for homeless people to access health services.

For the year 2018/19, 760 Torbay residents were in treatment at specialist drug misuse services, this is part of a gradual upward trend over the last five years. 385 Torbay residents were in treatment at specialist alcohol misuse services, numbers have been steady for the last four years. These figures comes from the National Drug Treatment Monitoring System.



Torbay's rate of statutory homelessness has risen significantly since 2015/16 (Figure 16).

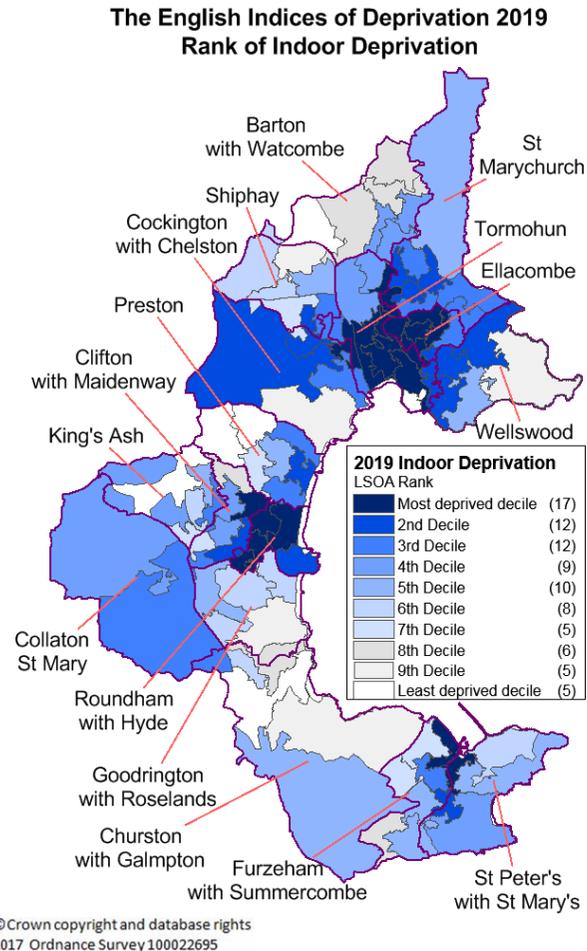


Rates of rough sleepers over the period 2017 to 2019 have been over 50% higher than national and regional rates (Figure 17).

For more information, visit <https://www.torbay.gov.uk/housing/homeless/>

INDOOR DEPRIVATION & PRE-PAID ELECTRICITY METERS

Figure 18
Rank of Indoor Deprivation



Source: Index of Multiple Deprivation (2019)

A sub-domain of the Index of Multiple Deprivation (IMD) relates to Indoor Deprivation, this is a measurement of the quality of housing stock within Torbay in reference to 1) Housing in poor condition and 2) Housing without central heating. Poor housing and heating can exacerbate poor physical and mental health and leave people more vulnerable to illness.

The 2019 IMD shows that 29 out of 89 Torbay LSOAs are classified as being in the 20% most deprived areas for Indoor deprivation in England (Figure 18), this equates to 32.9% of the population. This is a reduction when compared to 2015 (40 LSOAs equating to 45.7% of the population).

Prepayment Electricity meters are where a customer has to pay for their electricity before they use it, this is usually done by adding money to a smart card, which is then inserted into the meter. These meters are often used in rental properties where there has been a history of payment arrears and defaults. Often prepayment customers are charged more for each unit of electricity than customers on standard credit meters.

The highest rates of pre-paid electricity meters are concentrated in the most deprived areas of Torbay such as Tormohun (Central Torquay) and Roundham with Hyde (Central Paignton). These areas have rates over triple the national average. Conversely, the lowest proportions of these meters occurs in the more affluent areas of Torbay such as Churston with Galmpton with rates less than half the national average. This leads to some of the poorest members of our community having to pay higher rates per unit of energy for their electricity compared to the tariffs available to more affluent members of the community. As these people will often rent poor quality housing stock that is colder and more prone to damp, this is likely to lead them not being able to heat their property sufficiently well, which could have significant effects on their health and wellbeing. This data relates to 2017.

Population overview summary profile (Sources in Appendix)

Indicator	Measure	Torbay	CIPFA comparator group	South West	England	RAG Rating compared to England
DEMOGRAPHY						
Average Age (2018)	Years	48	44	43	39	↔
Dependency Ratio (2018)	Ratio	73.1	64.0	62.7	57.0	↑
Life expectancy at birth - Female (2015 - 17)	Years	82.8	82.5	83.7	83.1	↑
Life expectancy at birth - Male (2015 - 17)	Years	78.7	78.8	80.2	79.6	↓
Healthy life expectancy - Female (2015 - 17)	Years	62.4	62.4	65.1	63.8	↑
Healthy life expectancy - Male (2015 - 17)	Years	62.0	61.4	64.7	63.4	↓
Birth rate (2018)	Rate per 1,000	60.9	59.2	56.3	59.2	↓
Mortality rate (All ages) (2016 - 18)	DSR per 100,000	1,012	1,008	916	959	↓
Premature mortality (Under 75s) (2016 - 18)	DSR per 100,000	372	359	302	331	↑
Population living in most deprived areas (2019)	%	27.5%	25.0%	10.4%	20.0%	↓
BAME population (2011)	%	2.5%	4.2%	4.6%	14.6%	↑
WIDER DETERMINANTS						
Crime rates (2018/19)	Rate per 1,000	90.6	89.3	67.3	88.1	↑
ASB rates (2018/19)	Rate per 1,000	31.0	25.4	24.1	24.2	↓
Domestic abuse rates (2017/18)	Rate per 1,000	31.6	Unavailable	19.9	25.1	↑
Fuel Poverty (2017)	%	12.6%	11.6%	10.8%	10.9%	↑
Adult carers who have as much social contact as they would like (2016/17)	%	34.4%	37.0%	32.3%	35.5%	↓
Adult social care users who have as much social contact as they would like (2017/18)	%	43.1%	47.1%	46.0%	46.0%	↓
Smoking Prevalence (2018)	%	16.0%	14.1%	13.9%	14.4%	↑
Children in low income families (2016)	%	21.2%	18.7%	14.0%	17.0%	↑
Percentage of population living in most indoor deprived areas (2019)	%	32.9%	24.0%	30.8%	20.6%	↓
Housing Affordability (2018)	Ratio	8.0	6.5	8.9	7.3	↑
NHS						
Alcohol Admissions (2018/19)	DSR per 100,000	812	801	688	665	↑
Planned admission rate (16/17 - 18/19)	DSR per 100,000	16,514	17,632	15,426	16,109	↓
Unplanned admission rate (16/17 - 18/19)	DSR per 100,000	13,709	12,401	10,392	11,049	↑
A&E attendances rate (16/17 - 18/19)	DSR per 100,000	38,571	40,925	33,186	37,590	↑

Direction of arrow relates to direction of travel since the previous period

Colour of arrow relates to RAG rating relative to England (Red – Significantly worse, Amber – Not significantly different, Green – Significantly better than England, Black – Not compared to England)

Starting and Developing Well

Starting and Developing Well Overview

Torbay is home to
25,423 children



13 out of 100 babies
are born to mothers who were
smokers at the time of delivery



There were **51** pregnancies to
women aged under 18, **less
than half** the rate for 2011



18 out of 100 children
have Special Educational
Needs



There were **1,220**
births during 2018



42 out of 100 infants
are breastfed at 6-8 weeks

71 out of 100 children
are 'school ready' by the end
of reception.
For those children eligible for free
school meals this falls to **53 out
of 100**



94 out of 100 16 &
17 year olds are in
education, employment or
training

In Reception **25 out of 100**
children are overweight or obese.
By Year 6 this rises to **35 out
of 100**



35 out of 100 children
aged 5 have one or more
decayed or filled teeth

64 out of 100 school
children are physically
active or fairly active



21 out of 100
children are part of a
low income family

As of 31 March 2019
Looked After Children - **362**
Children subject to Child Protection
Plans - **179**
Children in Need - **1,067**



821 recorded occurrences
of domestic abuse where
children were present during
2018/19



93 out of 100 5 year
olds have had their MMR
vaccination (2 doses)



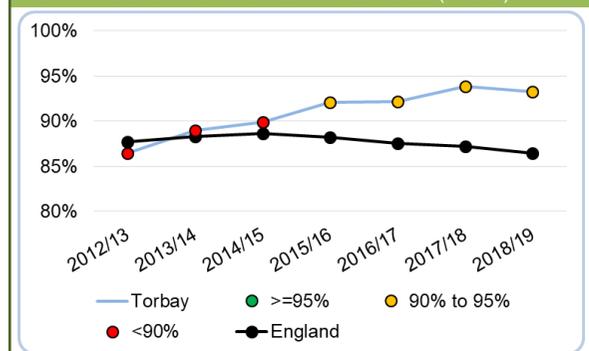
44 out of 100
admissions for self-harm
relate to 10 to 24 year olds

This section brings together information around Torbay's 0 to 24 year old population relating to fields such as Health, Education and Social Care. This aims to be an overview of key indicators that indicate the position and experiences of children and younger people in Torbay.

SCREENING AND IMMUNISATIONS

Figure 19
MMR Vaccination coverage for 5 year olds (2 doses)

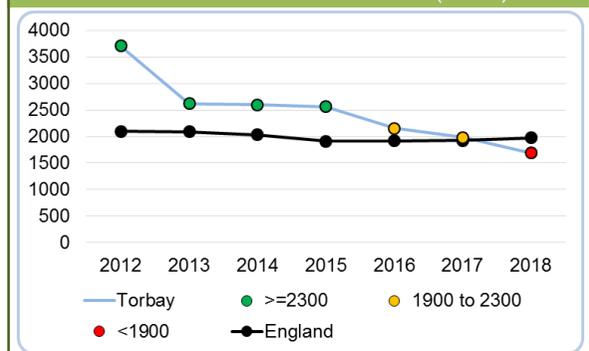
Source: Public Health Outcomes Framework (PHOF)



The **MMR** vaccine provides a safe and effective vaccine that protects against measles, mumps and rubella. The target for this vaccination rate is 95%. Torbay is rated as amber with a 2018/19 rate of 93.3%, this is significantly above the regional rate and the English rate for 2018/19 of 86.4% (Figure 19).

Figure 20
Chlamydia detection rate for 15 to 24 year olds per 100,000

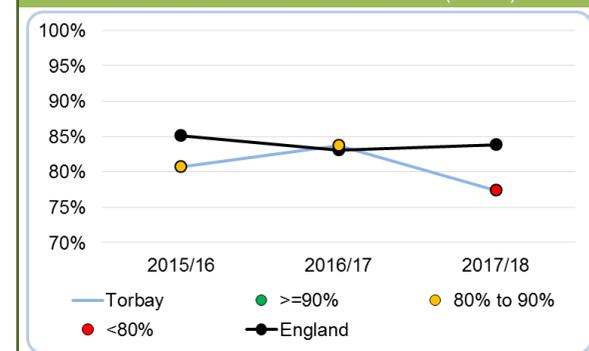
Source: Public Health Outcomes Framework (PHOF)



Chlamydia is the most commonly diagnosed bacterial STI in England, with sexually active young people at highest risk. The chlamydia detection rate amongst under 25 year olds is a measure of chlamydia control activity. An increased detection rate is not a measure of chlamydia rates increasing in the community. The target for chlamydia detection is 2,300 per 100,000 15 to 24 year olds, Torbay's rate has fallen under this since 2016, for 2018 it is significantly lower than England (Figure 20).

Figure 21
HPV vaccination coverage for 13 to 14 year old females (2 doses)

Source: Public Health Outcomes Framework (PHOF)



The **HPV** immunisation programme was introduced to protect against the main causes of cervical cancer. The first dose is usually offered in Year 8 (aged 12-13) and the second dose in Year 9 (aged 13-14). The target for this vaccination rate is 90%. Torbay is rated as red with a 2017/18 rate of 77.4%, this is significantly below the regional rate and the English rate for 2017/18 of 83.8% (Figure 21).

For more information, visit the Health Needs Assessment pages at <http://www.southdevonandtorbay.info>

PHYSICAL ACTIVITY AND WEIGHT

Attitudes towards sport and physical activity are often shaped by experiences in childhood. In adults, those with a physically active lifestyle have a 20-35% lower risk of cardiovascular disease, coronary heart disease and stroke compared to those who have a sedentary lifestyle. Studies tracking child obesity into adulthood have found that the probability of overweight or obese children becoming overweight or obese adults increases with age. This will lead to additional numbers of adults in the future suffering health complications due to excess weight.

Figure 22
Sport and Physical Activity levels in Torbay 2017/18 (5 to 16 year olds)
Source: Active Lives Children and Young People Survey 2017/18

Active 41%	Fairly active 23%	Less active 36%
Active – Active for average of 60 minutes or more a day	Fairly active – Active for an average of 30 to 59 minutes a day	Less active – Active for an average of less than 30 minutes a day

The Chief Medical Officer guidelines state that children should take part in sport and physical activity for at least 60 minutes a day. During 2017/18, Sport England undertook their first ‘Active Lives Children and Young People’ survey. One measurement related to Sport and Physical Activity levels of children and young people between the ages of 5 and 16. Torbay figures were in line with national figures (Figure 22).

Beat the Street is a game that for 6 weeks in Autumn 2018 turned Torbay into a game where children and adults could walk, cycle and run from point to point tapping their ‘Beat the Street’ card on sensors (Beat Boxes) placed on lamp posts. By the end of the 6 week period, 51% of school children in the 30 state primary schools within Torbay had participated in the event.

Figure 23
Prevalence of overweight children
Source: Public Health Outcomes Framework (PHOF)

Year Group	2012/13 to 14/15	2013/14 to 15/16	2014/15 to 16/17	2015/16 to 17/18	2016/17 to 18/19
Year 6 (Torbay)	35.2%	33.8%	33.5%	34.1%	34.5%
Year 6 (England)	33.2%	33.5%	33.8%	34.2%	34.5%
Reception (Torbay)	25.5%	24.5%	24.2%	24.3%	24.8%
Reception (England)	22.2%	22.5%	22.8%	23.1%	23.5%

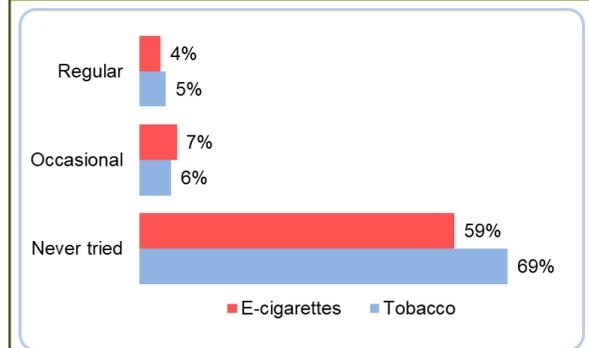
2012/13 was the peak prevalence of overweight (including obese) children in Reception (27.8%) and Year 6 (38.4%). For both age groups there was a fall, followed by a plateauing of the rates with Reception rates remaining consistently above national rates (Figure 23).

[For more information, visit the NCMP and Child Obesity Profile at fingertips.phe.org.uk](http://fingertips.phe.org.uk)

TOBACCO AND ALCOHOL

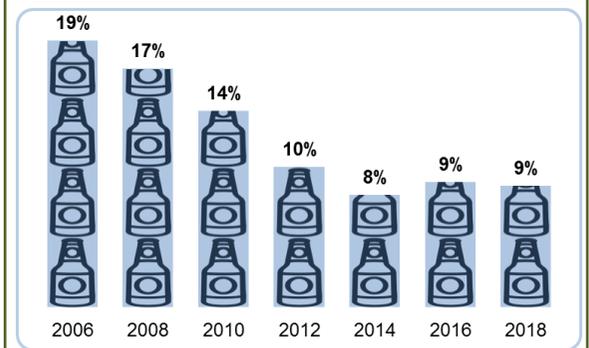
The Tobacco Control Plan <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england> stresses the importance of reducing the number of young people who take up smoking. One of the national ambitions was to reduce rates of 15 year old regular smokers to 3% by 2022. Alcohol consumption contributes to hospital admissions and deaths in relation to a large range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually.

Figure 24
Tobacco & E-cigarette status of 15 year olds – England (2018)
Source: Smoking, Drinking & Drug Use among Young People in England survey (SDD)



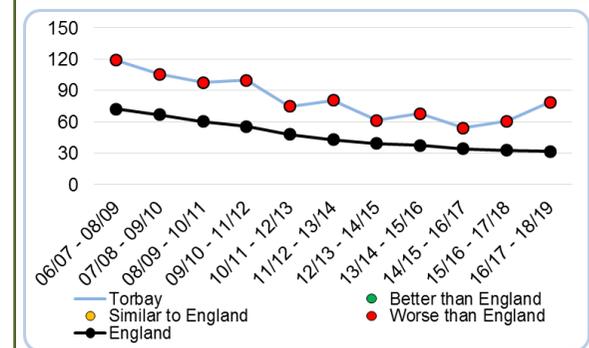
The SDD survey for 2018 shows the proportion of **15 year olds** who are regular smokers stands at 5%, this is down from 14% in 2008. In the 2018 survey, 84% of **11 to 15** year olds have never smoked (2008 – 68%). The survey also looks at E-cigarettes, the number of 15 year olds who have never tried tobacco is higher than those who have never tried e-cigarettes (Figure 24). Graph does not include ex-smokers or those who tried once.

Figure 25: Percentage of 11 to 15 year olds who have been drunk in the last 4 weeks - England
Source: SDD



The SDD report results from a biennial survey of secondary school pupils in England in years 7 to 11. This report indicates a fall in the number of secondary school pupils consuming alcohol, and in particular a fall in those getting drunk since 2006 (Figure 25).

Figure 26: Rate of admission episodes for alcohol specific conditions per 100,000 – Under 18s
Source: Public Health Outcomes Framework



The rate of admissions of under 18s for alcohol specific conditions within Torbay has consistently been above national rates (Figure 26) although they have been generally on a downward trend. It is noticeable that rates have begun to steadily increase over the last couple of periods.

For more information, visit the Topic Based Overviews pages at <http://www.southdevonandtorbay.info>

MENTAL HEALTH AND WELLBEING

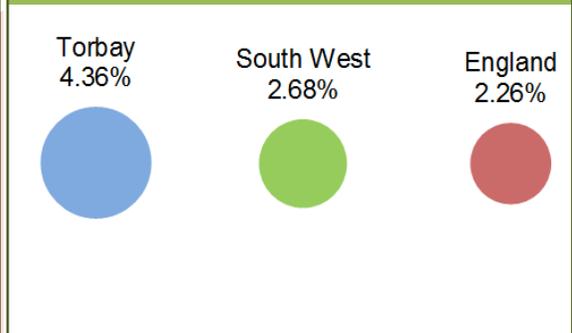
Mental wellbeing is of particular importance to children and young people as it is thought to influence the way in which an individual copes with key life events such as stress, trauma and physical ill-health. 1 in 10 children will have a clinically diagnosed mental disorder at any one point during childhood (*Measuring mental wellbeing in children and young people – PHE (2015)*).

Figure 27
Domestic Abuse where children present - Torbay
Source: Torbay Community Safety Partnership

	2015/16	2016/17	2017/18	2018/19	Total
Domestic Abuse (Crimes & Incidents)	3,413	3,268	3,535	3,712	13,928
Domestic Abuse where children present	1,171	1,023	1,038	821	4,053
Percentage of Domestic Abuse where children present	34.3%	31.3%	29.4%	22.1%	29.1%

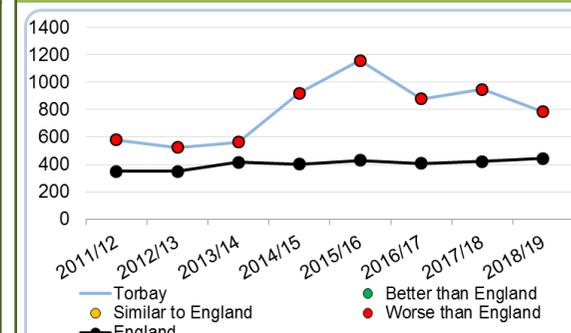
Domestic abuse has a devastating impact on children and young people that can last into adulthood. Over the last four years (2015/16 to 2018/19), there have been 13,928 recorded crimes and incidents which have been flagged as domestic abuse. In 29% of these cases, the police have recorded a child as being present (Figure 27).

Figure 28: Percentage of school pupils with social, emotional and mental health needs as a primary need (2015 – 2018)
Source: Public Health Outcomes Framework



Torbay schools have a significantly higher rate of pupils recognised as having a primary need of social, emotional and mental health (Figure 28). It should be noted that this is a measure of recognised primary need and is likely to be an understatement of the number of school pupils who actually have these needs.

Figure 29: Hospital admissions as a result of self-harm (10 – 24 years)
Source: Hospital Episode Statistics (HES)



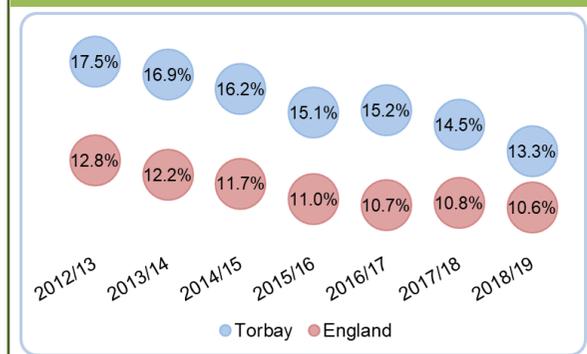
Hospital admissions as a result of self-harm amongst 10 to 24 year olds in Torbay have been significantly higher than England. It should be noted that because of the numbers involved (less than 200 admissions on average per year in Torbay), it is possible for a handful of individuals with significant levels of admissions to skew the figures. However, the pattern for Torbay having significantly higher rates than England is significant (Figure 29).

[For more information, visit the Children and Young People’s Mental Health and Wellbeing Profile at fingertips.phe.org.uk](http://fingertips.phe.org.uk)

CHILD AND MATERNAL HEALTH

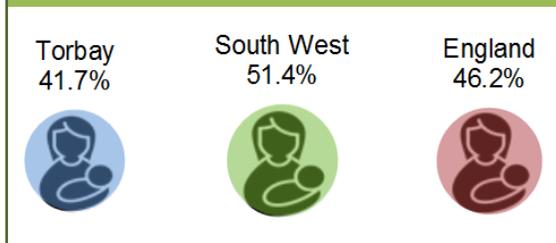
This section has 3 different measures. Firstly, **Smoking at time of delivery**: smoking during pregnancy has significant well known detrimental effects for the growth of the baby and health of the mother. Secondly, **Breastfeeding prevalence**: breast milk provides the ideal nutrition for infants in the first stages of life. Thirdly, **Hospital admissions for dental caries** (tooth decay) which shows not only an indicative rate of tooth decay but also may indicate issues with accessing high street dental services.

Figure 30
Percentage of women smoking at time of delivery
Source: Public Health Outcomes Framework



Torbay has consistently had significantly higher smoking at time of delivery rates than England throughout the decade although the gap has closed (Figure 30).

Figure 31
Breastfeeding prevalence at 6-8 weeks after birth (2018/19)
Source: Public Health Outcomes Framework



Within Torbay, the percentage of women breastfeeding 48 hours after delivery is approximately 72%, this is below the national rate of 74.5%. The prevalence of breastfeeding 6 to 8 weeks after birth during 2018/19 was 41.7%, this is below national and regional rates (Figure 31).

Figure 32: Hospital admissions for dental caries per 100,000 population – 0 to 17 years (2016/17 to 2018/19)
Source: Public Health Outcomes Framework



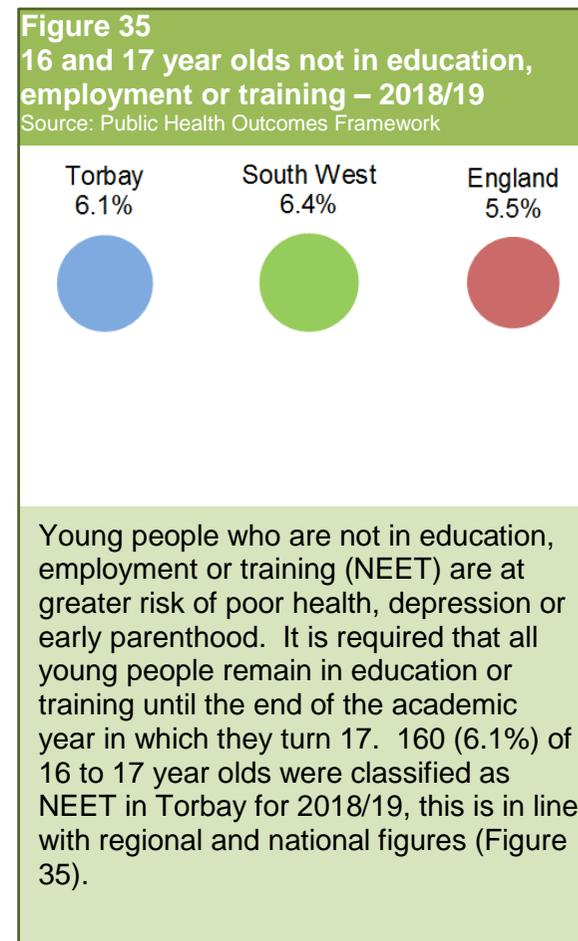
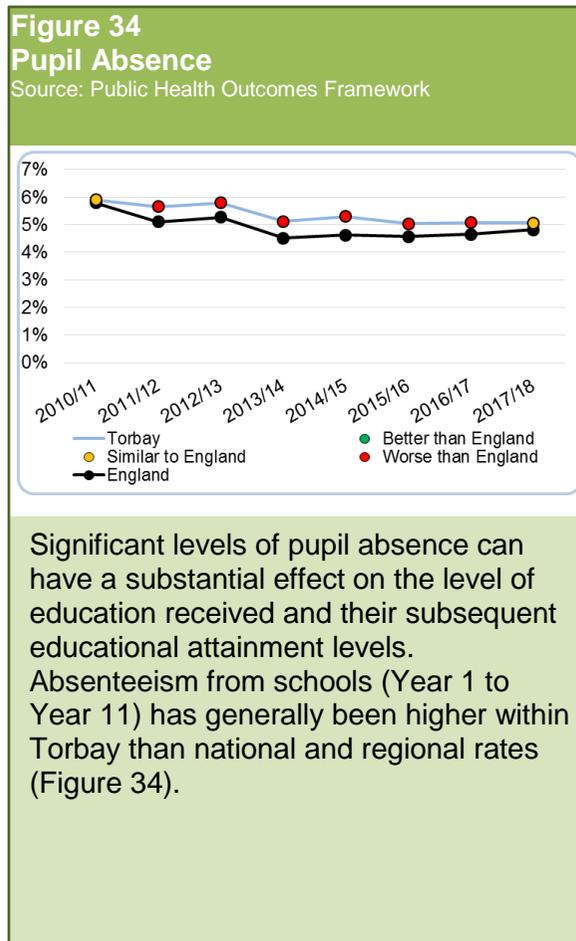
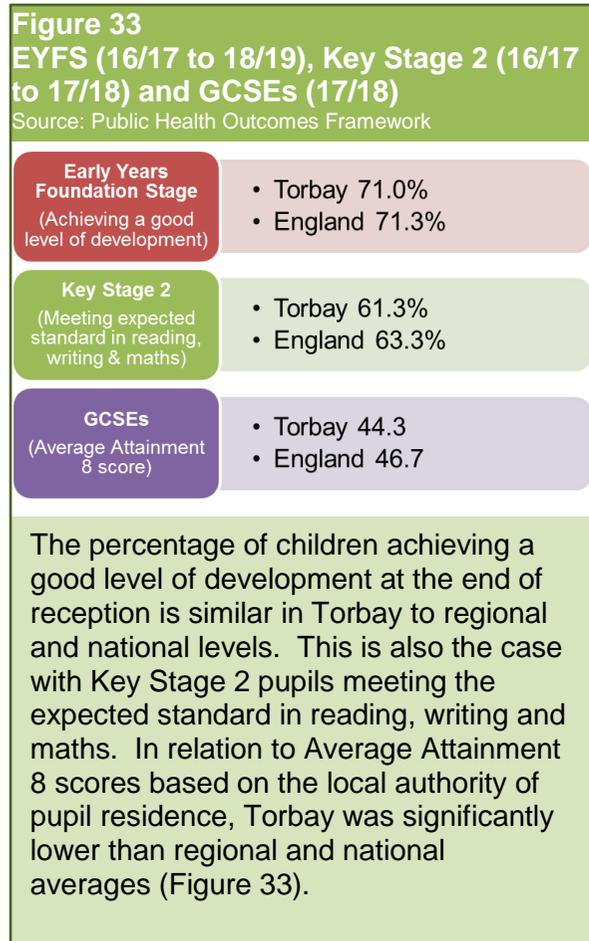
Hospital admissions for dental caries (tooth decay) in Torbay have been consistently more than double the English average (Figure 32). Extractions with High Street dentists in Torbay are similar to English levels although not all these extractions will be due to caries. The consistently high rates of hospital admissions for dental caries could indicate an issue with children not accessing high street dental services or being unable to access them quickly when emergencies arise.

In the latest 2016/17 oral health survey of 5 year old children by the Dental Public Health Epidemiology Programme for England, one in three 5 year olds in Torbay had experience of visually obvious dental decay.

[For more information, visit the Child and Maternal Health Profile at fingertips.phe.org.uk](http://fingertips.phe.org.uk)

EDUCATION

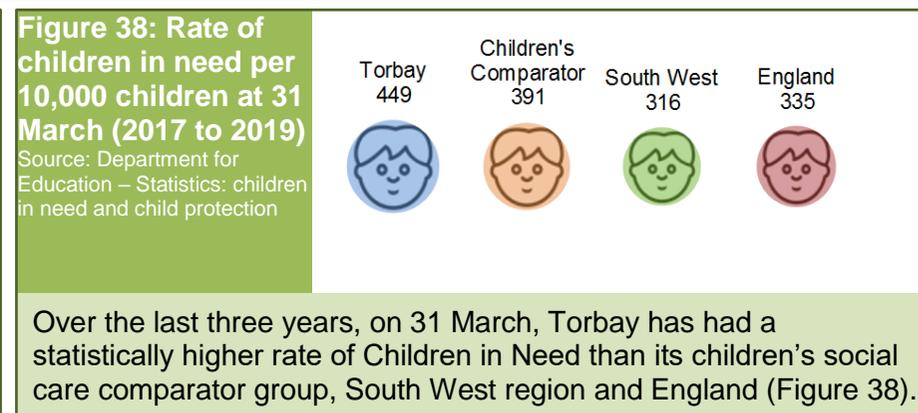
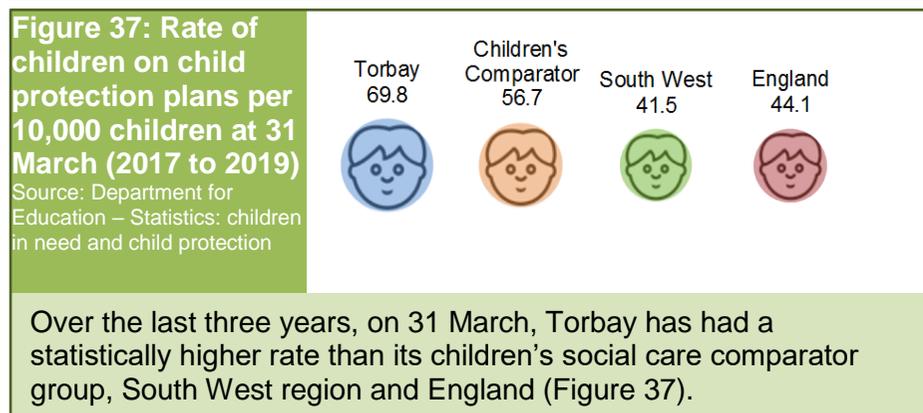
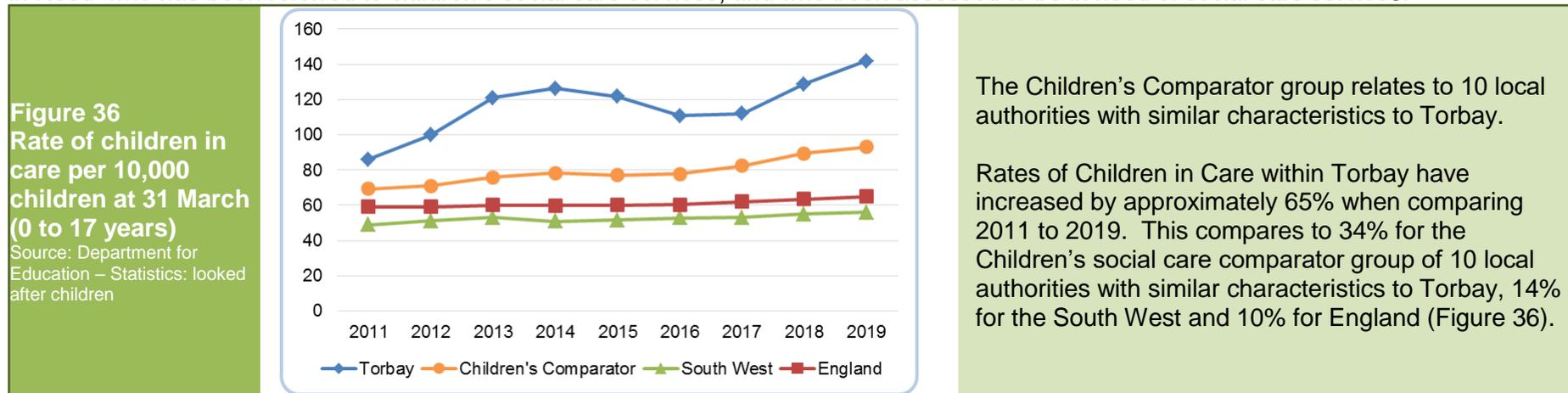
Education is a key determinant of a child’s future life, a good education increases the likelihood of higher earnings, better housing and material resources. These are related to better health outcomes.



For more information, visit www.gov.uk/government/organisations/department-for-education/about/statistics

SOCIAL CARE

Social Services come into contact with the most vulnerable children in our society. The most serious cases are ‘Looked After Children’ (Children in care) who are in the care of the local authority, these children may be living with foster parents, in residential children’s homes or in residential schools/secure units. The level below this is when a child protection plan is drawn up by the local authority. It sets out how the child can be kept safe, how things can be made better for the family and what support they will need. Finally, below a child protection plan is a ‘Child in Need’ who has been referred to children’s social care services, and who been assessed to be in need of social care services.



For more information, visit www.gov.uk/government/collections/statistics-looked-after-children

Starting and developing well summary profile (Sources in Appendix)

Indicator	Measure	Torbay	Children's comparator group	South West	England	RAG Rating compared to England
DEMOGRAPHY						
Birth rate (2018)	Rate	60.9	59.0	56.3	59.2	↓
Infant mortality (2015 - 17)	Rate	3.2	3.7	3.3	3.9	↓
BABIES						
Smoking at time of delivery (2018/19)	%	13.3%	15.7%	10.9%	10.6%	↓
Breastfeeding initiation (2016/17)	%	72.0%	66.1%	79.5%	74.5%	↑
Breastfeeding prevalence (2018/19)	%	41.7%	37.3%	51.4%	46.2%	↑
YOUNGER CHILDREN						
MMR vaccination rates (2018/19)	%	93.3%	90.6%	90.7%	86.4%	↓
5 year olds with one or more decayed, missing or filled teeth (2016/17)	%	34.7%	23.2%	20.2%	23.3%	↑
EYFS - Good level of development (2018/19)	%	70.8%	70.8%	72.0%	71.8%	↑
EYFS - Good level of development of those with Free School Meal status (2018/19)	%	53.3%	55.5%	53.0%	56.5%	↑
Classified as overweight or obese (Reception) (2018/19)	%	25.1%	24.7%	22.0%	22.6%	↑
Classified as overweight or obese (Year 6) (2018/19)	%	35.2%	34.6%	29.9%	34.3%	↑
Key Stage 2 pupils meeting the expected standard in reading, writing & maths (2018)	%	62.7%	63.4%	62.9%	64.9%	↑
OLDER CHILDREN						
Alcohol admissions to hospital (2016/17 - 18/19)	Rate	78.7	38.8	44.0	31.5	↑
Teenage Conceptions (2015 - 2017)	Rate	24.8	24.1	15.9	19.1	↓
Chlamydia detection rates (2018)	Rate	1692.7	1985.1	1917.7	1974.9	↓
Average Attainment 8 score (GCSEs) (2017/18)	Score	44.3	44.1	46.7	46.7	↓
Not in employment, education or training (2018/19)	%	6.1%	5.7%	6.4%	5.5%	↑
ALL CHILDREN						
Hospital admissions for unintentional & deliberate injuries (2016/17 - 2018/19)	Rate	128.6	117.1	114.7	104.9	↓
Children with Special Educational Needs (2019)	%	17.6%	16.1%	15.5%	14.8%	↓
Children in low income families (2016)	%	21.2%	19.1%	14.0%	17.0%	↑
Looked After Children (2019)	Rate	142.4	93.0	55.7	65.4	↑
Children in Need (2019)	Rate	420	393	323	334	↓
Children with Child Protection Plans (2019)	Rate	70	57	42	44	↑
Pupil Absence (2017/18)	%	5.1%	5.0%	5.0%	4.8%	↓

Direction of arrow relates to direction of travel since the previous period

Colour of arrow relates to RAG rating relative to England (Red – Significantly worse, Amber – Not significantly different, Green – Significantly better than England, Black – Not compared to England)

Living and Working Well

Living and Working Well Overview

Torbay is home to **74,450** people aged 18 to 64



20 out of 100

working age people are smokers



7,558 issues raised with Citizens Advice by those under 65 years old



13 out of 100

adults suffering from depression



The average full-time salary is **£25,871**



13 out of 100

households experience fuel poverty



The average price of a house in Torbay is **8** times average full-time earnings



The typical rent for a 2 bedroom property is **37%** of a full-time wage

60 out of 100

adults are overweight or obese



8 out of 100 adults have been diagnosed with Diabetes

61 out of 100 adults state that they eat at least 5 portions of fruit or vegetables a day



71 out of 100 adults define themselves as physically active



There were **12,241** recorded crimes and **4,210** recorded anti-social behaviour incidents during 2018/19



There were **3,712** recorded occurrences of domestic abuse during 2018/19



There were **26,526** A&E attendances for Torbay residents aged 20 to 64



There were **8,650** emergency admissions to hospital for Torbay residents aged 20 to 64

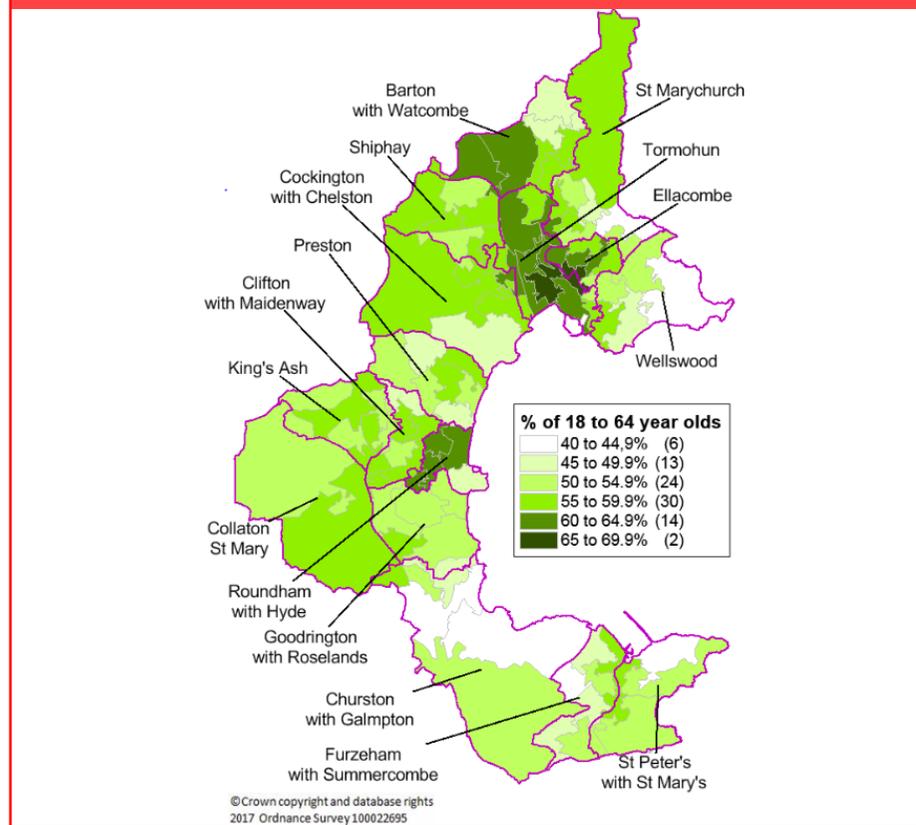
This section relates to Torbay's working age population. This aims to be an overview of key indicators that indicate the position and experiences of working age people in Torbay.

18 TO 64 YEAR OLD DEMOGRAPHICS

Figure 39

Proportion of 18-64 year olds

Source: ONS Mid-year population estimate (2018)

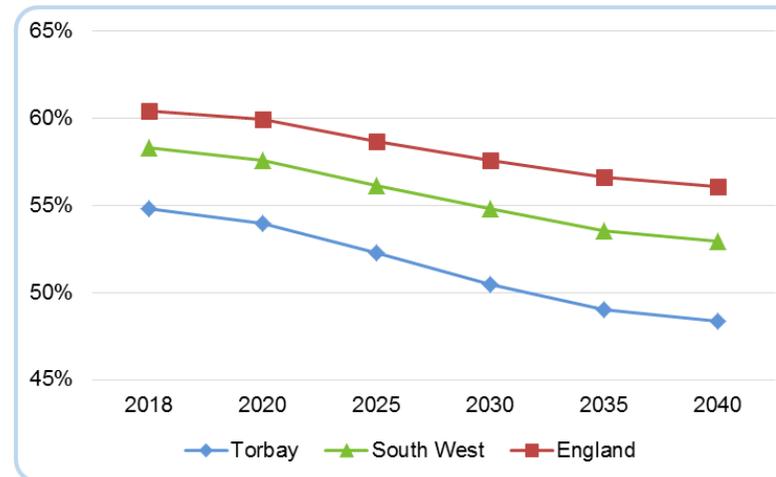


Central Torquay and Paignton have proportions of 18 to 64 year olds that are higher than Torbay in general (Figure 39). These areas are broadly the same as the most deprived areas in our community.

Figure 40

18 to 64 year old population (2018) and projected population (2020 to 2040)

Source: NOMIS



18 to 64 year olds currently make up 55% of the Torbay population, this is lower than England (60.5%) and the South West (58%) (Figure 40). Current projections are for this proportion to fall by 2040 to 48% for Torbay (England – 56%, South West – 53%). This fall in the working age population could lead to significant additional financial pressures across the country as the numbers contributing tax through working will fall. The Business rates retention scheme aims for councils to retain 100% of their business rates. This may be advantageous for areas with high concentrations of active businesses but could leave areas that are struggling, with shortfalls in income as well as bearing the fluctuation in income arising from rises and falls in the local economy.

For more information, visit the Topic Based Overviews pages at <http://www.southdevonandtorbay.info>

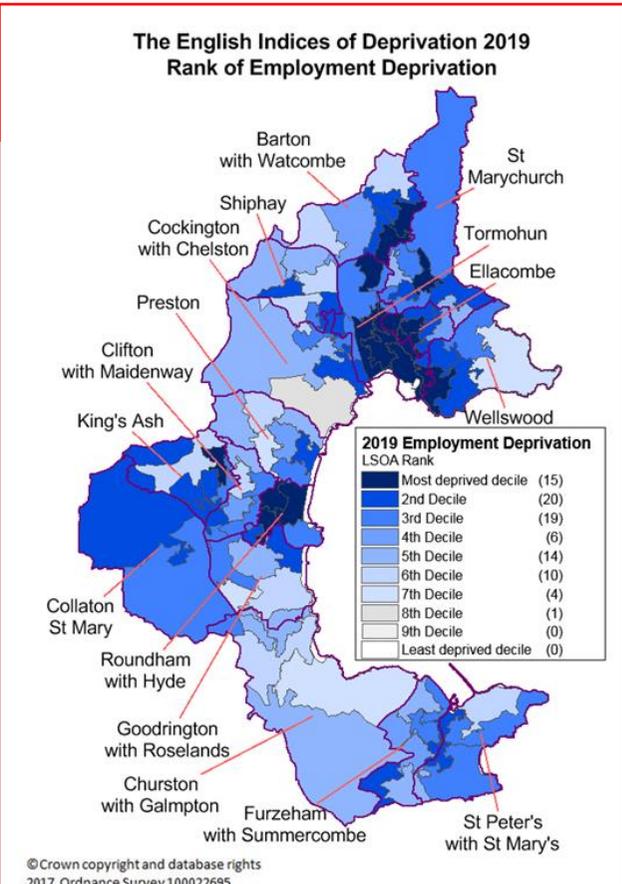
EMPLOYMENT AND INCOME

Levels of employment and pay underpin a community. A person who cannot find adequate employment which pays them enough to live without overwhelming financial worries is likely to have an increased risk of physical and mental ill health. Those with higher incomes can expect to have a higher life expectancy and more of that will be in good health. Lower incomes can sometimes affect a person’s ability to afford to actively participate in many activities.

Figure 41
Rank of Employment Deprivation – Torbay 2019
Source: Index of Multiple Deprivation (2019)

Employment deprivation measures the proportion of the working age population involuntarily excluded from the labour market. This can be due to unemployment, sickness, disability or caring responsibilities.

Torbay was ranked as the 11th most deprived upper-tier local authority out of 151 for the 2019 Index of Multiple Deprivation (2015 – 12th). It was also ranked the most deprived in the South West. 15% of the working age population within Torbay are classified as Employment deprived, this is an improvement on the 2015 figure of 17.6% (Figure 41).



For more information, visit the Deprivation pages at <http://www.southdevonandtorbay.info>

Figure 42
Average (Median) Full-time Salary (2019)
Source: NOMIS



Torbay has consistently had lower average salaries than the national and regional average. The results of the 2019 annual survey of hours and earnings showed that median full-time annual salaries in England were 18.5% higher than those in Torbay, the South West average was 13% higher (Figure 42).

According to the Annual Population Survey (2015 to 2018), approximately 28% of the working-age population (16 to 64) had a degree level or above qualification. This compares to 38% for England and the South West. Unemployment rates are comparable with national figures.

HOUSING

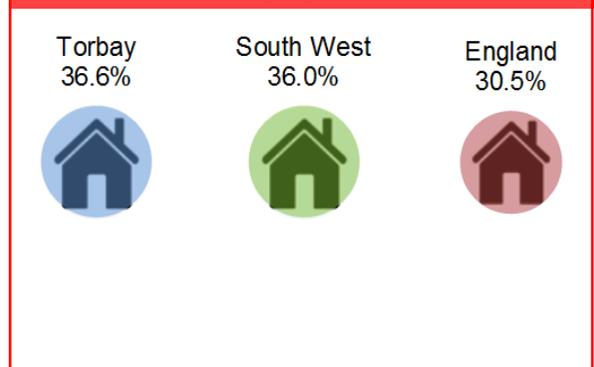
The affordability and quality of housing is one of the most significant issues across the country. The 2019 IMD showed that 29 out of 89 Torbay LSOAs were classified as being in the 20% most deprived areas for Indoor deprivation in England, this equated to 32.9% of the population. This is a reduction when compared to 2015 (40 LSOAs equating to 45.7% of the population).

Figure 43
Housing affordability ratio (Lower quartile house price & salary)
Source: Office for National Statistics



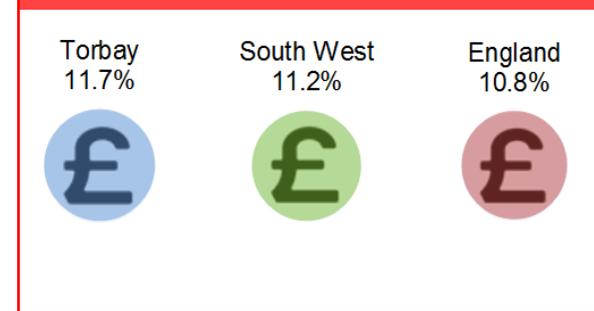
Housing affordability data for 2018 shows the lower quartile house price in Torbay is 8 times the lower quartile earnings. This is a lower ratio than the South West (8.94) but higher than England (7.29). Torbay's ratio peaked in 2007 at 9.49, over the period shown Torbay's affordability relative to England and the South West has improved but is still significantly above average (Figure 43).

Figure 44
Percentage of salary needed for 2 bed rent (based on lower quartile full-time earnings & rent) - 2018/19
Source: Valuation Office Agency



Lower quartile rents for a 2 bedroom property in Torbay are slightly higher than the national average, but the difference in affordability relates primarily to higher earnings in England when compared to Torbay (Figure 44).

Figure 45
Percentage of households in fuel poverty (2013 to 2017)
Source: Public Health Outcomes Framework



Households are considered to be fuel poor if they have residual income **after** fuel costs below the official poverty line. The [Annual Fuel Poverty Statistics report for 2019](#) shows that those living in properties with uninsulated walls are more likely to be in fuel poverty. The most fuel inefficient properties are larger properties and converted flats.

Torbay has a higher percentage than the regional and national rates over the five year period 2013 to 2017 (Figure 45).

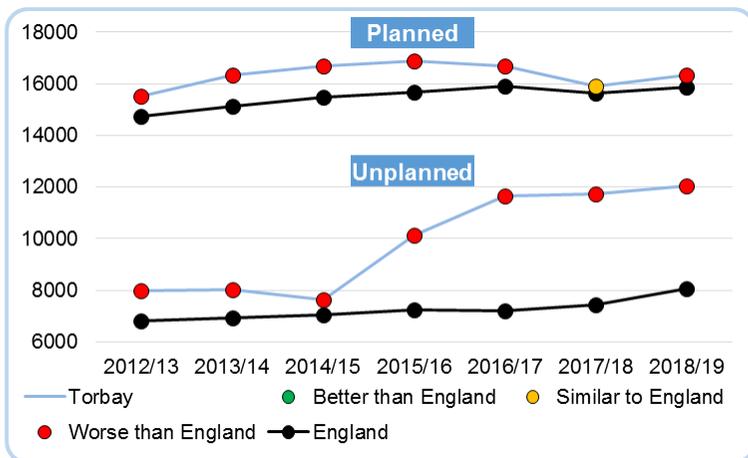
[For more information, visit the Housing Strategy pages at www.torbay.gov.uk/housing-strategy](http://www.torbay.gov.uk/housing-strategy)

HEALTH – ADMISSIONS TO HOSPITAL AND A&E ATTENDANCES

Admissions to hospital are classified as either planned or unplanned (emergency) admissions, an unplanned admission is expensive and frequently preventable through better care outside of hospital. Significant increases in unplanned admissions and A&E attendances among the 20 to 64 age group could occur because of issues accessing adequate medical services to help prevent or manage their conditions in the community. There are also significant links between those with lower incomes and poor health.

Figure 46
Planned and unplanned admissions to hospital for those aged 20 to 64 per 100,000 population (Age standardised)

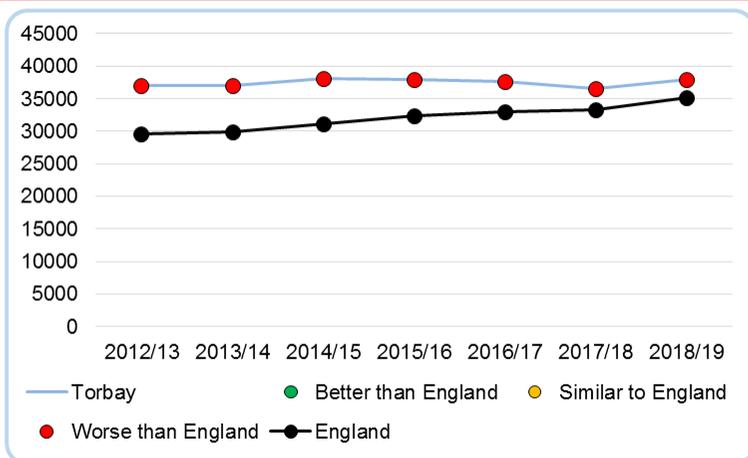
Source: Hospital Episode Statistics



For both planned and unplanned admissions, Torbay has consistently been significantly higher than the national average. From 2014/15 onwards, unplanned admissions have increased markedly in comparison with England (Figure 46). Rates have increased in the 65+ age bracket but not by such a large proportion. Planned admissions have remained relatively steady. These rates are age standardised, this technique allows areas with significantly different age profiles to be compared.

Figure 47
A&E attendances for those aged 20 to 64 per 100,000 population (Age standardised)

Source: Hospital Episode Statistics

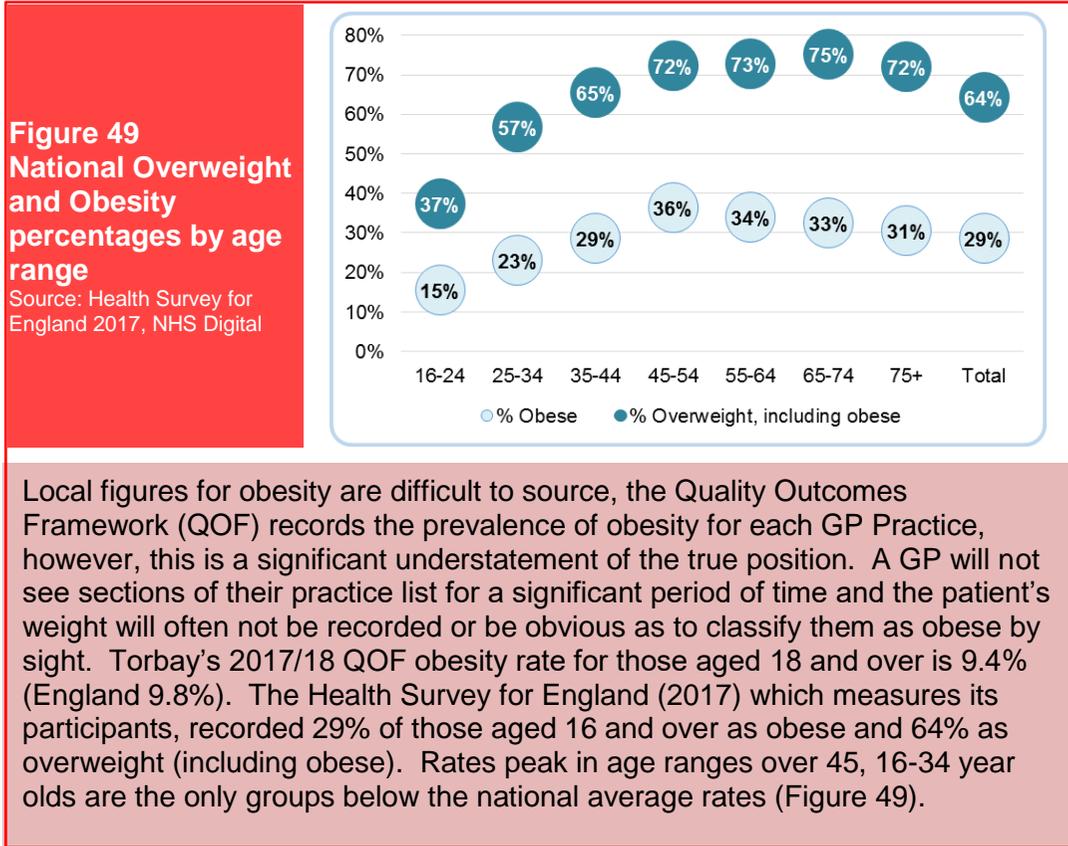
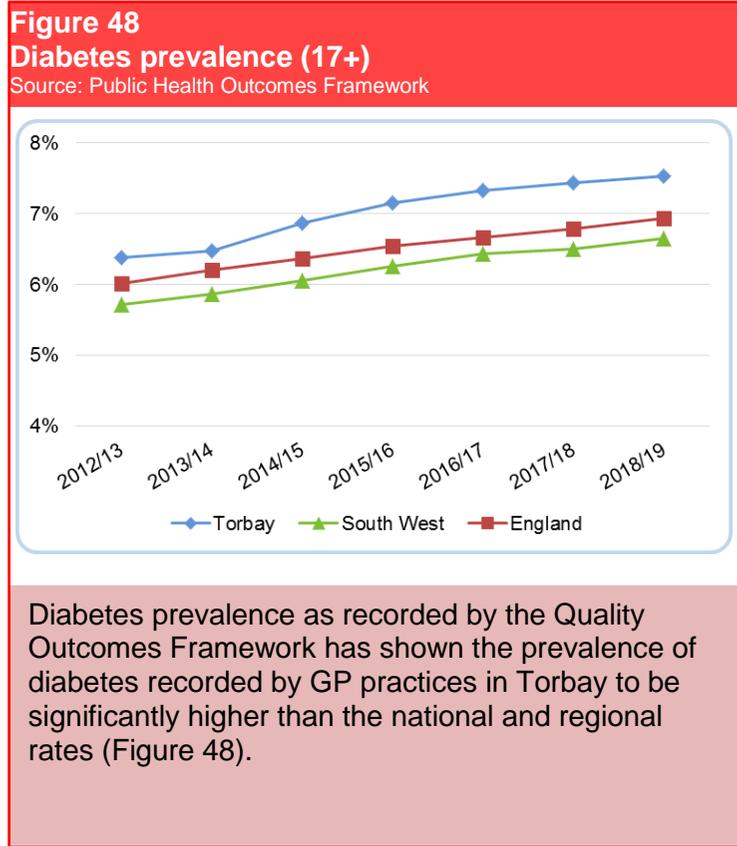


Accident & Emergency attendance rates (age standardised) for Torbay 20 to 64 year olds have been significantly worse than England although the rate has remained steady from 2012/13 to 2018/19. The rise in unplanned admissions is not reflected in emergency attendances. The gap between Torbay and England has narrowed (Figure 47).

For GP Practice Profiles, visit the National General Practice Profiles at fingertips.phe.org.uk

HEALTH – OBESITY AND DIABETES

Obesity is a major contributor towards the rise in rates of Diabetes and the accelerated onset of cardiovascular disease. Obesity is defined in adults who have a Body Mass Index (BMI) of 30 or more. A BMI of 25 and over is regarded as overweight. Diabetes is a lifelong condition that causes a person’s blood sugar level to become too high as your body is unable to break down glucose into energy. Over a period of time these high glucose levels can seriously damage your heart, eyes, feet and kidneys. There are two main type of diabetes, for Type 1 diabetes there are no lifestyle changes that you can make to lower your risk. For Type 2 diabetes which accounts for around 90% of cases in the UK, you can help reduce your risk by controlling your weight, exercising regularly, stopping smoking, limiting alcohol and eating a balanced, healthy diet.



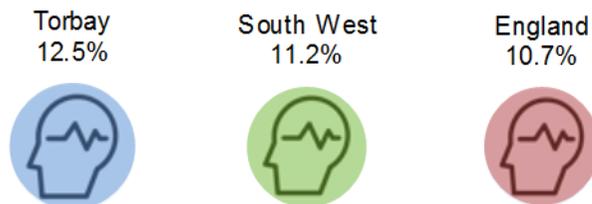
For more information, visit <https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2017>

MENTAL HEALTH

Mental health issues are a significant public health concern. Depression has been a condition that had not been diagnosed for a significant proportion of individuals who had the condition. Rates for England as measured by the Quality Outcomes Framework have been increasing nationally since 2012/13 when 5.8% of patients aged 18+ were diagnosed with depression. The latest rates for 2018/19 are 10.7%, this is a result of increased awareness and recording of those with depression by GPs. Suicide is a significant cause of death in young adults, and is seen as an indicator of underlying rates of mental ill-health.

Figure 50
Depression –
Recorded
Prevalence (aged
18+)

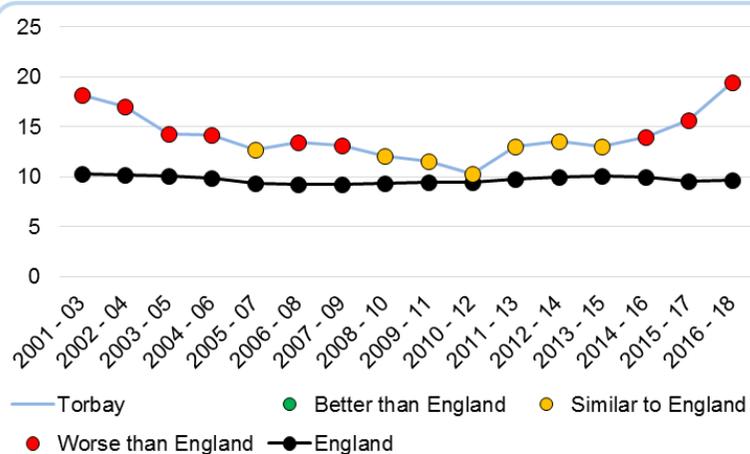
Source: Public Health
Outcomes Framework



1 in 8 (12.5%) adult patients on Torbay GP registers are diagnosed with depression (Figure 50). This rate is slightly higher than the national and regional rates of approximately 1 in 9 patients. Although recognition and recording of depression is increasing there is still a significant likelihood that these figures are underestimates of the true prevalence.

Figure 51
Suicide rate per
100,000 population
(Age standardised
rate)

Source: Public Health
Outcomes Framework

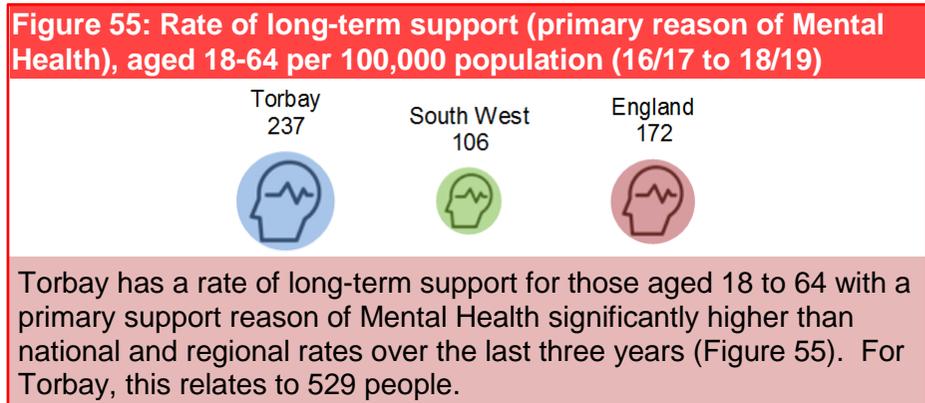
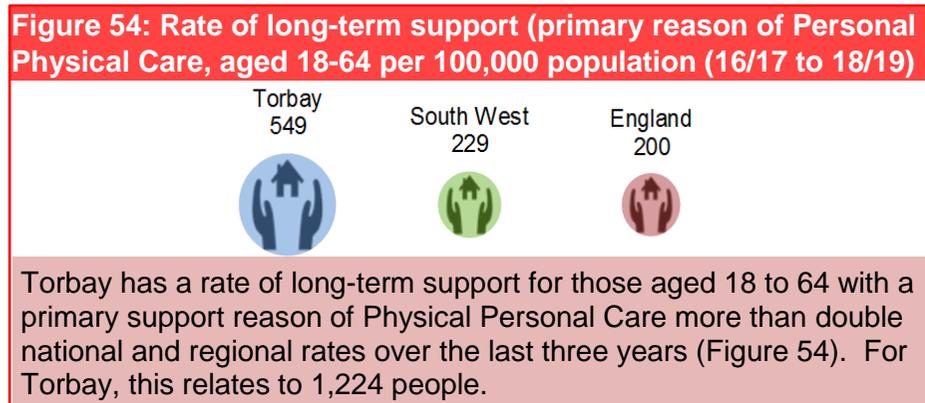
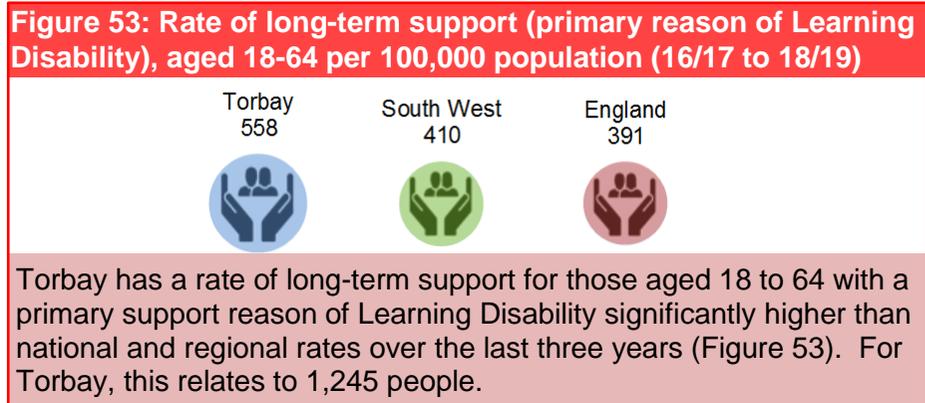


Suicides are not common occurrences and there will be an inherent volatility to the data at Torbay level, but there is an upward trend in the number of suicides recorded. For the last three last periods, Torbay's suicide rate has been significantly higher than England (Figure 51) and for the period 2016-18 was the largest of any upper-tier local authority in England. The total number of suicides for Torbay residents for the period 2016-18 was 67.

For more information, visit the Mental Health and Wellbeing JSNA pages at fingertips.phe.org.uk

SOCIAL CARE

Adult social care is support provided to adults with physical, mental and learning difficulties. This can be provided through helping someone to wash, get dressed or cleaning the living areas. This could be provided in the home or in residential care and nursing homes. For those aged under 65, a significant proportion will relate to those with learning disabilities, this is different to those aged 65 and over where those with learning disabilities make up a small proportion of those receiving social care.



Figures 50 to 53 - Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (South West, England)

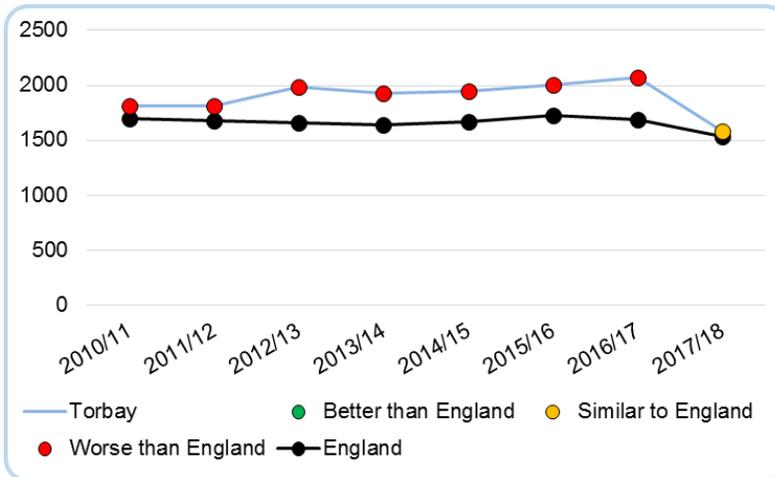
[For more information, visit torbayandsouthdevon.nhs.uk/services/adult-social-care](http://torbayandsouthdevon.nhs.uk/services/adult-social-care)

TOBACCO AND ALCOHOL

Smoking is the biggest cause of preventable ill-health and premature mortality in the UK. It is a major risk factor for many diseases including lung cancer, heart disease and chronic obstructive pulmonary disease. Alcohol consumption is a significant contributing factor to hospital admissions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually (Public Health England).

Figure 56
Rate of smoking attributable hospital admissions per 100,000 population (Age Standardised Rate)

Source: Public Health Outcomes Framework



The rate of smoking attributable hospital admissions for Torbay has consistently been above England except for 2017/18. The fall in admissions is substantial but we are unable to ascertain whether this is a statistical outlier until we receive future data (Figure 56).

The 2018 Annual Population Survey showed a smoking prevalence amongst 18 to 64 year olds within Torbay of 20%, this is slightly higher than England but the difference is not statistically significant. There is volatility from year to year but the general trend is downwards.

Figure 57
Alcohol admissions (Narrow), aged 20 to 64 per 100,000 population - 2014/15 to 2018/19 (Age Standardised Rate)

Source: Hospital Episode Statistics



Alcohol admission rates for Torbay have been significantly above those of England over the previous five years (Figure 57).

For 2017/18, 378 individuals within Torbay received treatment at a specialist alcohol misuse service (National Drug Treatment Monitoring System). For 2017, the successful completion of alcohol treatment rate was 45.7%, this was significantly higher than the national rate of 38.9%.

For more information, visit the Topic Based Overviews pages at <http://www.southdevonandtorbay.info>

Living and working well summary profile (Sources in Appendix)

Indicator	Measure	Torbay	CIPFA comparator			RAG Rating compared to England
			group	South West	England	
WIDER DETERMINANTS						
Smoking Prevalence (2018)	%	20.0%	16.6%	16.8%	16.5%	↑
Depression Prevalence (2018/19)	%	12.5%	12.5%	11.2%	10.7%	↑
Crime - Violent offences (2018/19)	Rate per 1,000	37.4	29.5	22.9	27.8	↑
Crime - Sexual offences (2018/19)	Rate per 1,000	3.1	2.5	2.3	2.5	↓
Suicide rate (2016 - 18)	DSR per 100,000	19.5	11.5	11.1	9.6	↑
Unemployment (2018)	%	3.6%	4.1%	3.1%	4.1%	↓
Those with no qualifications (2016 - 18)	%	7.1%	8.5%	5.1%	7.7%	↓
Housing affordability (2018)	Ratio	8.0	6.5	8.9	7.3	↑
Rental affordability (2018/19)	%	36.6%	31.5%	36.0%	30.5%	↑
Fuel Poverty (2017)	%	12.6%	11.6%	10.8%	10.9%	↑
Domestic Abuse rates (2017/18)	Rate per 1,000	31.6	Unavailable	19.9	25.1	↑
SOCIAL CARE						
Requests for ASC support for new clients (2016/17 - 2018/19)	Rate per 100,000	2228	2210	1520	1565	↑
Long-term support for Learning Disabilities (2016/17 - 2018/19)	Rate per 100,000	558	485	410	391	↑
Long-term support for Physical Personal Care (2016/17 - 2018/19)	Rate per 100,000	549	246	229	200	↑
Long-term support for Mental Health (2016/17 - 2018/19)	Rate per 100,000	237	214	106	172	↑
Long-term support through admission to residential & nursing homes (2016/17 - 2018/19)	Rate per 100,000	20.6	17.8	15.1	13.6	↑
HEALTH						
Preventable mortality (2016 - 18)	DSR per 100,000	215	200	167	181	↑
Obesity Prevalence (2017/18)	%	9.4%	11.3%	9.4%	9.8%	↓
Diabetes Prevalence (2018/19)	%	7.5%	7.4%	6.6%	6.9%	↑
Hypertension Prevalence (2017/18)	%	17.6%	16.4%	14.9%	13.9%	↑
Alcohol related admissions (2018/19)	DSR per 100,000	951	936	777	730	↓
Smoking attributable admissions (2017/18)	DSR per 100,000	1580	1700	1409	1530	↓
Emergency admissions for ACS conditions (2016/17 to 2018/19)	DSR per 100,000	657	607	420	479	↓

Direction of arrow relates to direction of travel since the previous period

Colour of arrow relates to RAG rating relative to England (Red – Significantly worse, Amber – Not significantly different, Green – Significantly better than England, Black – Not compared to England)

Ageing Well

Ageing Well Overview

Torbay is home to **35,907** people aged 65 and over



The proportion of those aged 65 and over is predicted to increase from the current level of 26 out of 100 to **34 out of 100** in 2040

A 65 year old woman would be expected to live until **86**



A 65 year old man would be expected to live until **84**

52 out of 100 social care users aged 65 and over have as much social contact as they would like



34 out of 100 carers aged 65 and over have as much social contact as they would like



18 out of 100 of those aged 65 and over are claiming pension credit

1,524 people aged 65 and over registered by GP with dementia



There were **14,411** A&E Attendances made by those aged 65 and over



There were **9,283** emergency hospital admissions made by those aged 65 and over



Those aged 65 and over had **715** emergency hospital admissions for falls

71 out of 100 people aged 65 and over received a flu vaccination



176 local authority funded permanent admissions to residential and nursing care homes for those aged 65+ during 2018/19



4,650 requests for adult social care support for new clients aged 65 and over during 2018/19

1,211 of those aged 65 and over received funded long-term support for Physical Personal Care during 2018/19

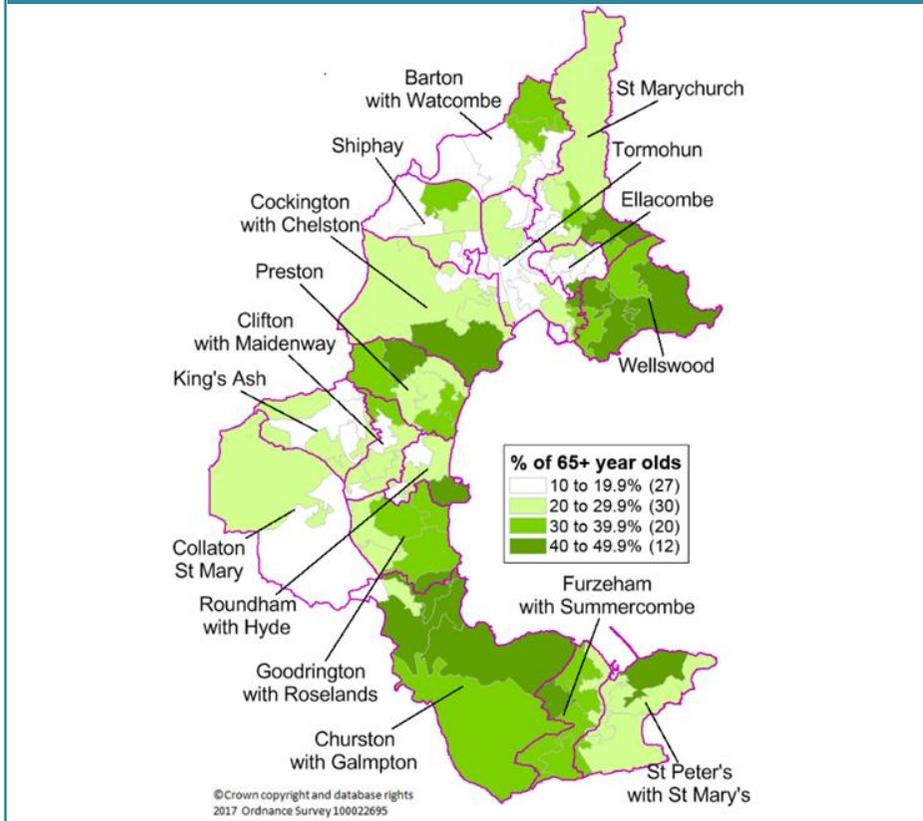


There are approximately **1,750** unpaid carers aged 65 and over

This section relates to Torbay's population which is aged 65 and over. This aims to be an overview of key indicators that indicate the position and experiences of older people in Torbay.

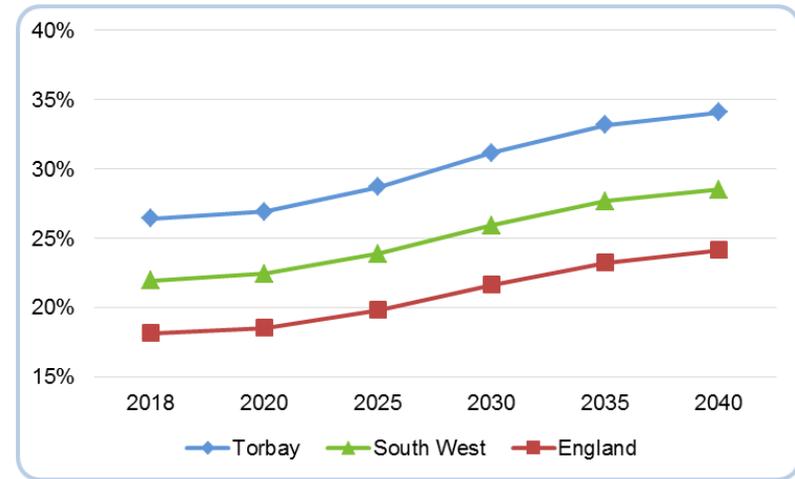
AGED 65 AND OVER DEMOGRAPHICS

Figure 58
Proportion of those aged 65 and over
Source: ONS Mid-year population estimate (2018)



Central Torquay and Paignton have proportions of those aged 65 and over that are smaller than Torbay in general (Figure 58). These areas are broadly the same as the most deprived areas in our community.

Figure 59
65 and over population (2018) and projected population (2020 to 2040)
Source: NOMIS



Those aged 65 and over currently make up 26% of the Torbay population, this is higher than England (18%) and the South West (22%) (Figure 59). Current projections are for this proportion to rise by 2040 to 34% for Torbay (England – 24%, South West – 28.5%). This rise in the 65 and over population will lead to significant additional demands on health and social care services as approximately a third of Torbay's population will be over 65. In 2018, Torbay's 65 and over population is approximately half the size of the 18-64 year old population. By 2040, Torbay's 65 and over population is projected to be 70% of the 18-64 year old population.

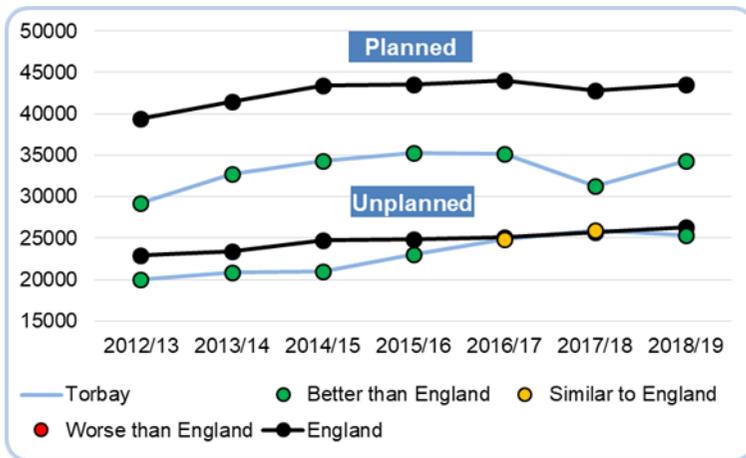
For more information, visit the Topic Based Overviews pages at <http://www.southdevonandtorbay.info>

HEALTH – ADMISSIONS TO HOSPITAL AND A&E ATTENDANCES

Admissions to hospital are classified as either planned or unplanned (emergency) admissions, an unplanned admission is expensive and frequently preventable through better care outside of hospital. Significant increases in unplanned admissions and A&E attendances among the 65 and over age group could occur because of issues accessing adequate medical services to help prevent or manage their conditions in the community. There are also significant links between those with lower incomes and poor health.

Figure 60
Planned and unplanned admissions to hospital for those aged 65 & over per 100,000 population (Age standardised)

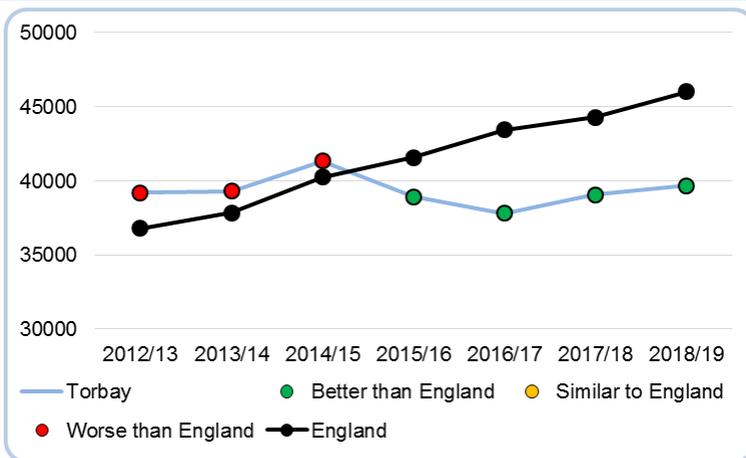
Source: Hospital Episode Statistics



For planned admissions, Torbay has consistently been significantly lower than the national average. From 2014/15 onwards, unplanned admissions have increased in comparison with England (Figure 60). These rates are age standardised, this technique allows areas with significantly different age profiles to be compared.

Figure 61
A&E attendances for those aged 65 & over per 100,000 population (Age standardised)

Source: Hospital Episode Statistics

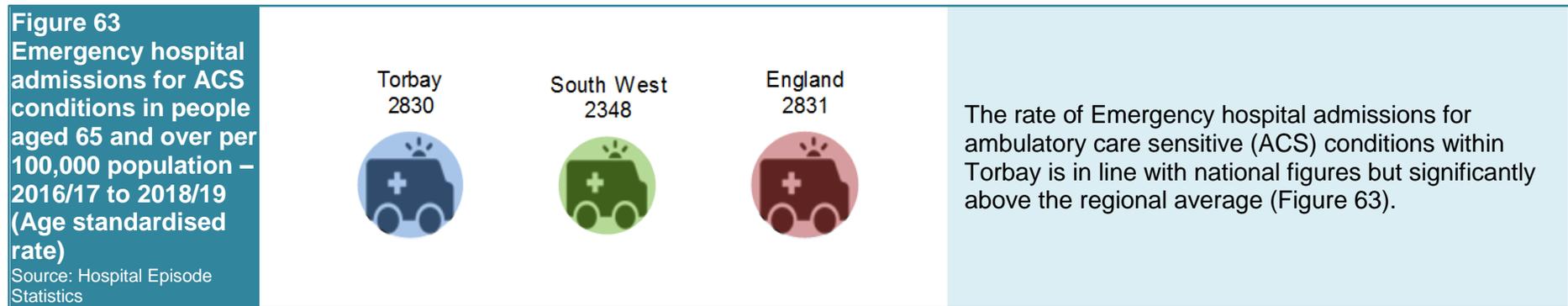
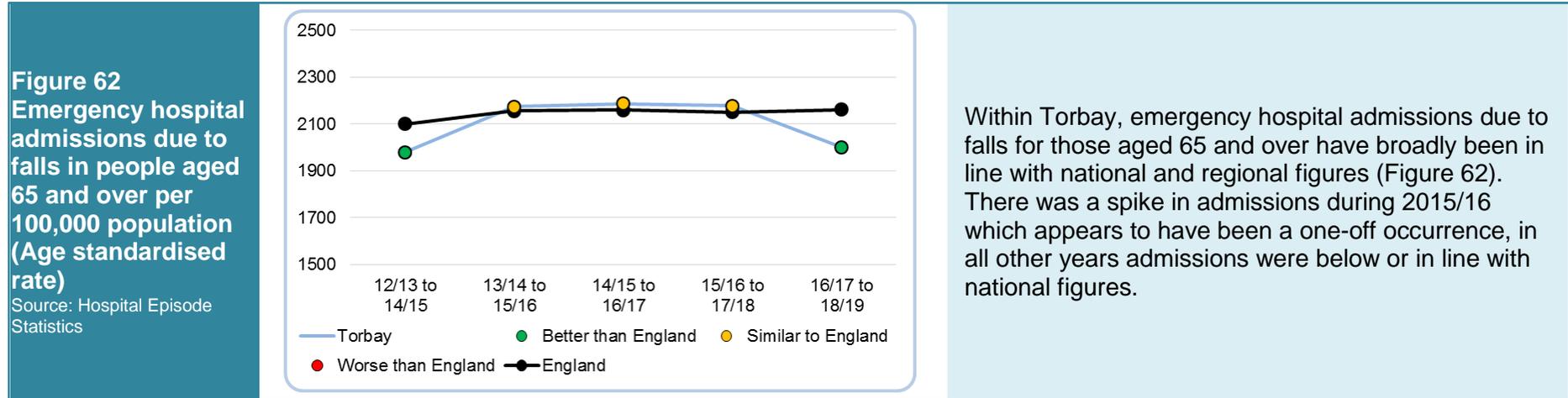


Accident & Emergency admission rates (age standardised) for those aged 65 and over in Torbay have been significantly better than England since 2015/16. Overall, the rate has not increased in Torbay between 2012/13 and 2018/19, this is in marked contrast to the national picture which has seen significant rise in the same period (Figure 61).

For GP Practice Profiles, visit the National General Practice Profiles at fingertips.phe.org.uk

HEALTH – ADMISSIONS FOR FALLS AND AMBULATORY CARE SENSITIVE (ACS) CONDITIONS

Falls are the largest cause of emergency hospital admissions for older people. The highest risk of falls is in those aged 65 and over, it is estimated that about 30% of people older than 65 and 50% of people older than 80 fall at least once a year (Falls in older people: assessing risk and prevention - NICE, 2013). Ambulatory care sensitive (ACS) conditions are conditions where hospital admissions may be prevented by interventions in primary care. Common types of ACS conditions are Influenza, Diabetes complications, COPD and Asthma.



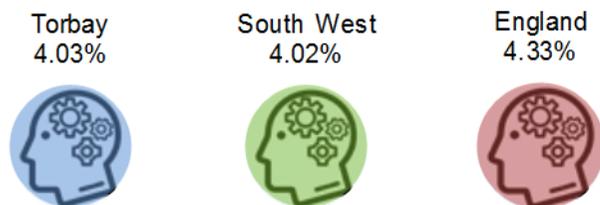
For more information, visit the Topic Based Overviews pages at <http://www.southdevonandtorbay.info>

HEALTH – DEMENTIA AND FLU VACCINATIONS

Dementia is a syndrome characterised by a progressive deterioration in intellectual function and is a main cause of late-life disability. The prevalence of dementia increases with age. A flu vaccination is offered each year to high risk groups at greater risk of developing serious complications if they catch flu, amongst those high risk groups are people aged 65 and over. An increase in the uptake of the flu vaccine should contribute to easing winter pressure on primary care services and hospital admissions.

Figure 64
Recorded Prevalence of Dementia for those aged 65 and over

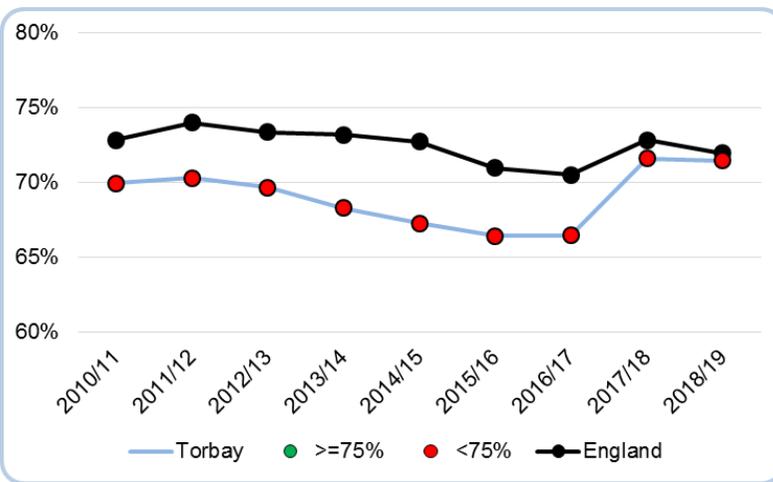
Source: Public Health Outcomes Framework



Dementia rates for those aged 65 and over are recorded by GP practices, prevalence rates within Torbay are largely in line with national and regional rates at approximately 4% (Figure 64). It should be noted that these are cases where dementia has been diagnosed, the figure of 4% will be an underestimate. As the population ages, these numbers will rise from the current level of 1,524 (December 2018) requiring an increase in the scale of services needed to provide treatment and support.

Figure 65
Population vaccination coverage – Flu (aged 65+)

Source: Public Health Outcomes Framework



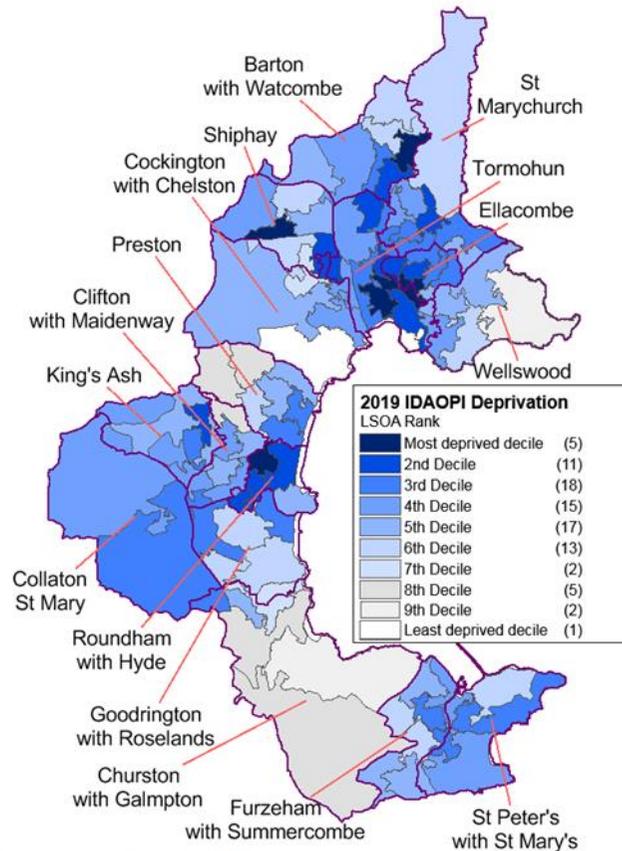
The target for flu vaccinations is 75% amongst those aged 65 and over. Rates in Torbay have consistently not met these targets although rates have improved for the last two years to 71.5% (Figure 65). Rates have been below regional and national averages, it should be noted that national and regional rates have not reached the target of 75% in any of the years since 2010/11.

For GP Practice Profiles, visit the National General Practice Profiles at fingertips.phe.org.uk

INCOME DEPRIVATION AFFECTING OLDER PEOPLE

Income deprivation affecting older people measures the proportion of the population aged 60 and over who are in income deprived families. The measure is based upon the proportion of families with a member over 60 who receive either pension credit, income support, income-based Jobseeker’s Allowance or income-based Employment and Support Allowance.

**The English Indices of Deprivation 2019
Rank of Income Deprivation Affecting Older People**



**Figure 66
Rank of Income
Deprivation Affecting
Older People – Torbay
2019**

Source: Index of Multiple Deprivation (2019)

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2017 Ordnance Survey 100022695

Torbay was ranked as the 42nd most deprived upper-tier local authority out of 151 for the 2019 Index of Multiple Deprivation (2015 – 44th). It was also ranked the most deprived in the South West ahead of Bristol (53rd) and Cornwall (76th).

17.4% of the 60 and over population within Torbay are classified as income deprived, this is an improvement on the 2015 figure of 19.8%. Despite this improvement, Torbay’s rank did not improve as this is a relative measure which implies that other authorities had similar or better improvements (Figure 66).

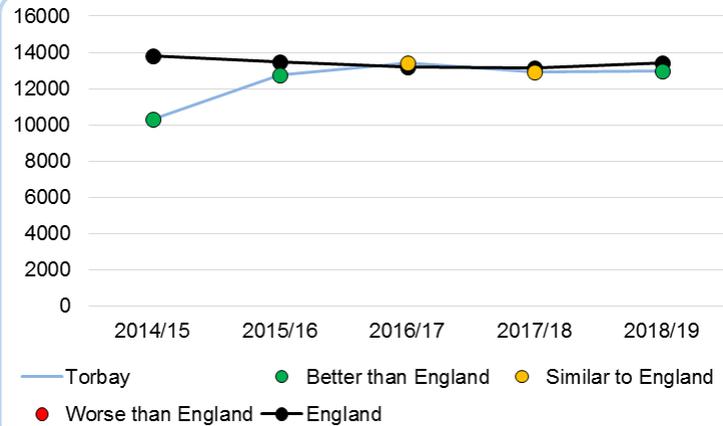
For more information, visit the Deprivation pages at <http://www.southdevonandtorbay.info>

SOCIAL CARE – NEW CLIENTS AND REABLEMENT/REHABILITATION

Adult social care is support provided to adults with physical, mental and learning difficulties. This can be provided through helping someone to wash, get dressed or cleaning the living areas. This could be provided in the home or in residential care and nursing homes. The ageing population is likely to lead to increased levels of demand for these services in the future.

Figure 67
Rate of requests for adult social care support for new clients aged 65 and over per 100,000 population

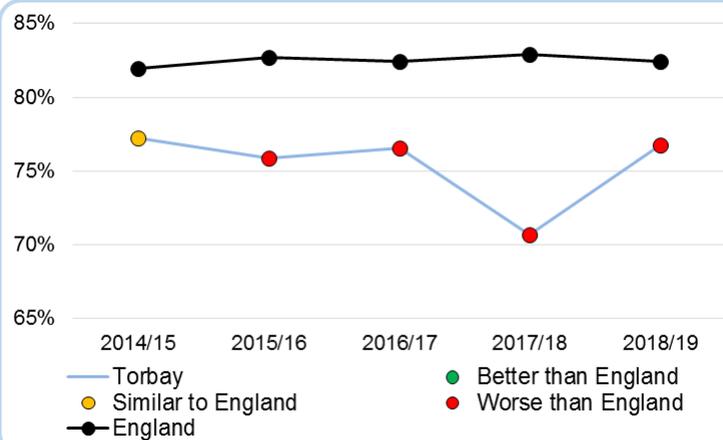
Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (England)



Over the last three years, Torbay has had a similar rate of requests for adult social care support for new clients compared to England (Figure 67), figures were significantly higher than the South West average. For 2018/19, there were 4,650 requests for those aged 65 and over. A new client is defined as an individual who was not in receipt of long-term support at the time of the request.

Figure 68:
Percentage still at home 91 days after discharge from hospital into reablement/rehabilitation services, aged 65 and over

Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (England)



Over the last three years, Torbay has had significantly lower rates of older people (65 and over) still at home 91 days after discharge from hospital into reablement and rehabilitation services than England (Figure 68). Rates are also significantly lower than the regional average. For 2018/19, of the 331 older people offered rehabilitation following discharge from a hospital, 254 remained at home 91 days later (76.7%).

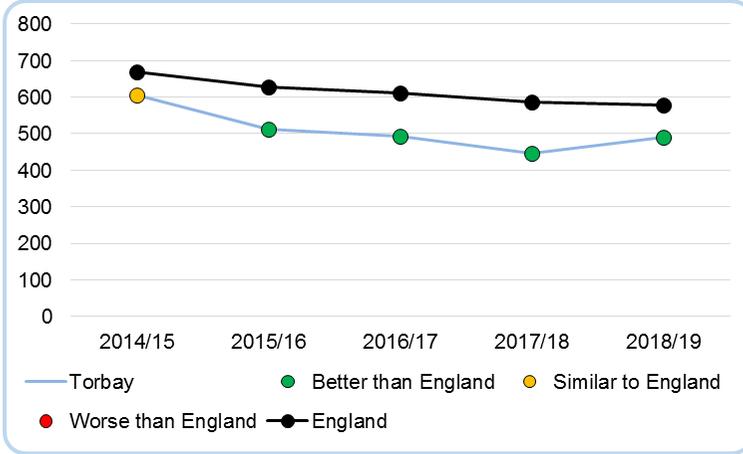
[For more information, visit torbayandsouthdevon.nhs.uk/services/adult-social-care](http://torbayandsouthdevon.nhs.uk/services/adult-social-care)

SOCIAL CARE – RESIDENTIAL/NURSING HOMES AND PERSONAL PHYSICAL CARE

Adult social care is support provided to adults with physical, mental and learning difficulties. This can be provided through helping someone to wash, get dressed or cleaning the living areas. This could be provided in the home or in residential care and nursing homes. The ageing population is likely to lead to increased levels of demand for these services in the future.

Figure 69: Long-term support met by permanent admission to residential and nursing care homes, aged 65 and over per 100,000 population

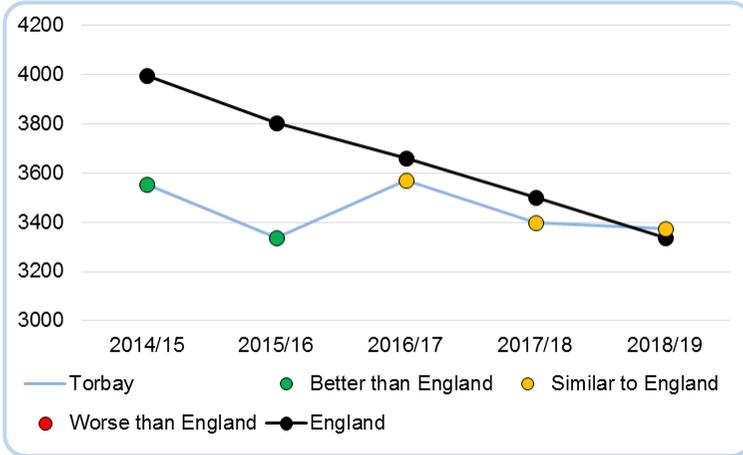
Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Outcomes Framework (England)



Over the last three years, Torbay has had significantly lower rates of older people (65 and over) whose long-term support needs were met by permanent admission to a residential or nursing home than England (Figure 69). Rates were also significantly lower than the regional average. For 2018/19, 176 older people were permanently admitted to residential and nursing homes.

Figure 70: Rate of long-term support for those with a primary support reason of Personal Physical Care, aged 65 and over per 100,000 population

Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (England)



Over the last three years, Torbay’s rate of long-term support for those with a primary support reason of Physical Personal Care has been in line with England (Figure 70) and higher than the regional average. For 2018/19, there were 1,211 cases with a primary support reason of Physical Personal Care for those aged 65 and over.

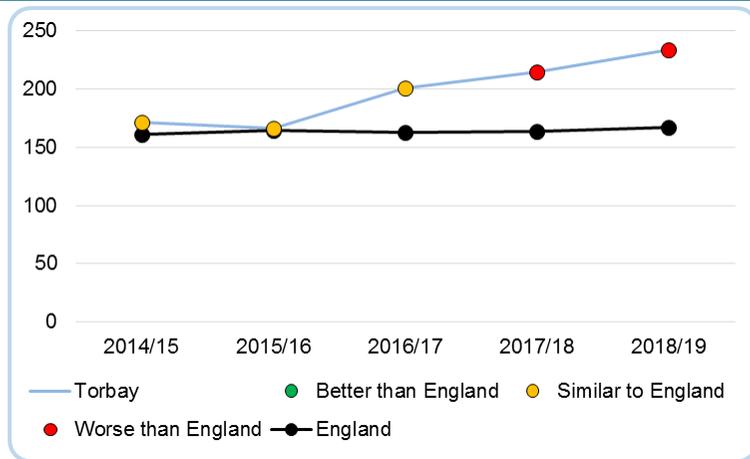
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SOCIAL CARE – LEARNING DISABILITY AND MENTAL HEALTH

Adult social care is support provided to adults with physical, mental and learning difficulties. This can be provided through helping someone to wash, get dressed or cleaning the living areas. This could be provided in the home or in residential care and nursing homes. The ageing population is likely to lead to increased levels of demand for these services in the future.

Figure 71: Rate of long-term support for those with a primary support reason of Learning Disability, aged 65 and over per 100,000 population

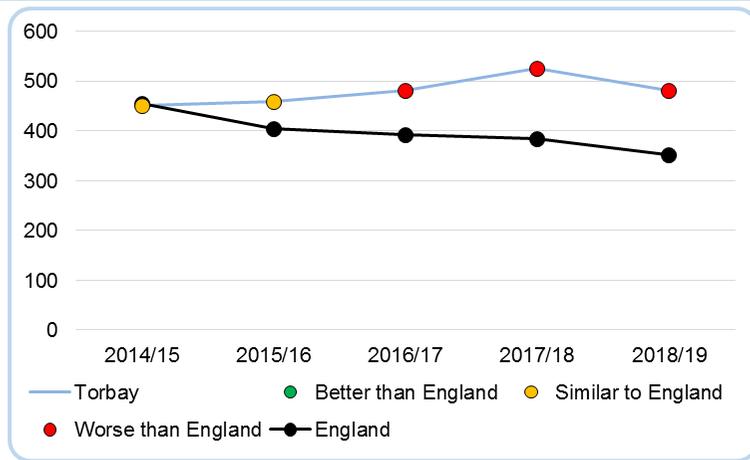
Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (England)



Over the last three years, Torbay's rate of long-term support for those with a primary support reason of Learning Disability has been significantly higher than England (Figure 71) and the regional average. For 2018/19, there were 84 cases with a primary support reason of Learning Disability for those aged 65 and over.

Figure 72: Rate of long-term support for those with a primary support reason of Mental Health, aged 65 and over per 100,000 population

Source: Torbay and South Devon Healthcare Trust (Torbay), Adult Social Care Activity & Finance Report (England)



Over the last three years, Torbay's rate of long-term support for those with a primary support reason of Mental Health has been significantly higher than England (Figure 72) and close to double the regional average. For 2018/19, there were 173 cases with a primary support reason of Mental Health for those aged 65 and over.

[For more information, visit torbayandsouthdevon.nhs.uk/services/adult-social-care](http://torbayandsouthdevon.nhs.uk/services/adult-social-care)

Ageing well summary profile (Sources in Appendix)

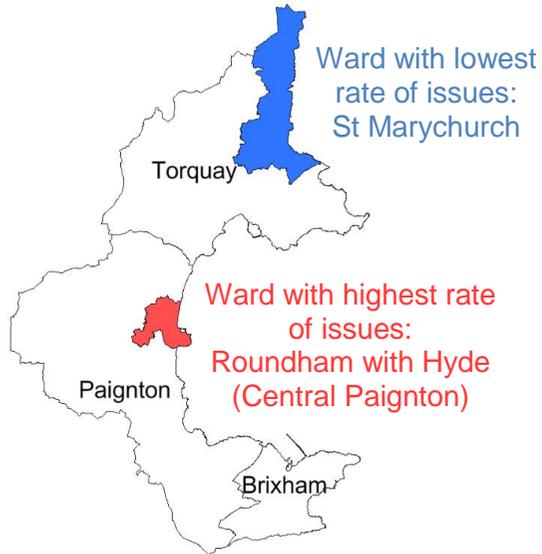
Indicator	Measure	CIPFA comparator			England	RAG Rating compared to England
		Torbay	group	South West		
DEMOGRAPHY						
Dependency ratio (2018)	Ratio	73.1	64.0	62.7	57.0	↑
Life expectancy at age 65 - Female (2015 - 17)	Years	20.8	20.7	21.6	21.1	↓
Life expectancy at age 65 - Male (2015 - 17)	Years	18.6	18.4	19.2	18.8	↑
Excess Winter Deaths - Female (Aug 2015 - Jul 2018)	%	25.8%	25.4%	24.5%	25.0%	↓
Excess Winter Deaths - Male (Aug 2015 - Jul 2018)	%	23.0%	17.6%	17.6%	19.5%	↓
FINANCE						
Pension Credit claimants (2016/17 - 2018/19)	%	17.6%	15.7%	12.1%	14.9%	↓
SOCIAL CARE						
Long-term support for Learning Disabilities (2016/17 - 2018/19)	Rate per 100,000	217	169	143	165	↑
Long-term support for Mental Health (2016/17 - 2018/19)	Rate per 100,000	496	531	259	376	↑
Long-term support for Physical Personal Care (2016/17 - 2018/19)	Rate per 100,000	3447	3466	3019	3499	↑
Requests for ASC support for new clients (2016/17 - 2018/19)	Rate per 100,000	13083	14618	11982	13259	↑
Long-term support for Social Isolation/Other (2016/17 - 2018/19)	Rate per 100,000	61	70	112	112	↓
Still at home 91 days after discharge from hospital into reablement/rehabilitation service (2016/17 - 2018/19)	%	74.4%	82.2%	81.6%	82.6%	↑
Permanent admissions to nursing or residential care (2016/17 - 2018/19)	Rate per 100,000	477	727	546	592	↓
HEALTH						
Prevalence of Dementia (Dec 18)	%	4.0%	4.4%	4.0%	4.3%	↓
Prevalence of Strokes (2018/19)	%	2.7%	2.3%	2.2%	1.8%	↑
Flu vaccination coverage (2018/19)	%	71.5%	73.0%	73.4%	72.0%	↓
Admissions due to falls (16/17 to 18/19)	DSR per 100,000	2001	2299	2060	2162	↓
A&E attendances (16/17 to 18/19)	DSR per 100,000	38847	45863	37579	44579	↑
Emergency admissions for ACS conditions (16/17 to 18/19)	DSR per 100,000	2830	3158	2348	2831	↑
Elective admissions (16/17 to 18/19)	DSR per 100,000	33580	45682	44090	43455	↓
Non-Elective admissions (16/17 to 18/19)	DSR per 100,000	25402	26662	22719	25706	↑
Delayed Transfers of Care (2016/17 to 2018/19)	Rate per 100,000	8.2	10.5	16.1	12.5	↑

Direction of arrow relates to direction of travel since the previous period

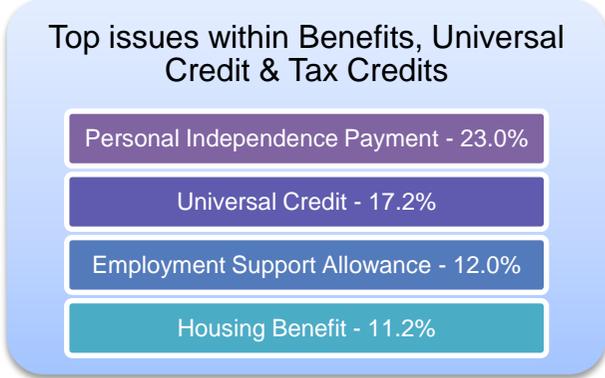
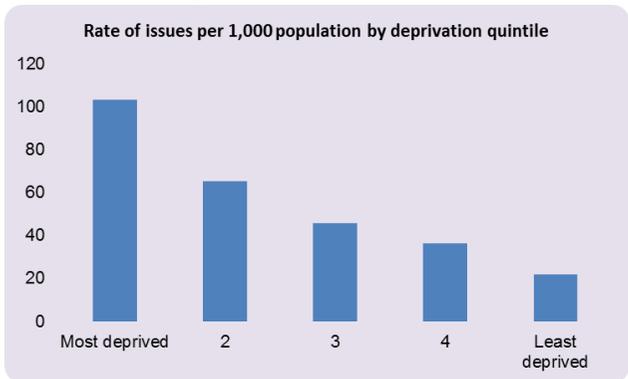
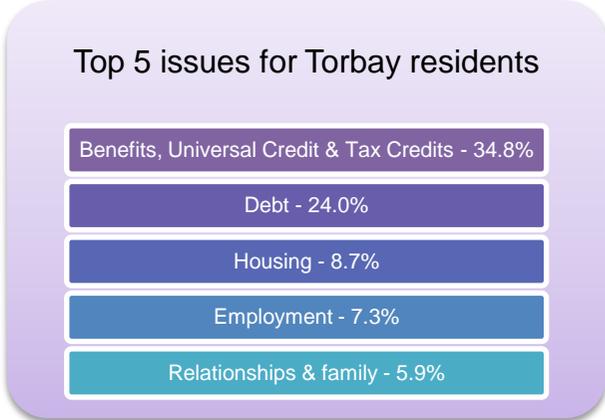
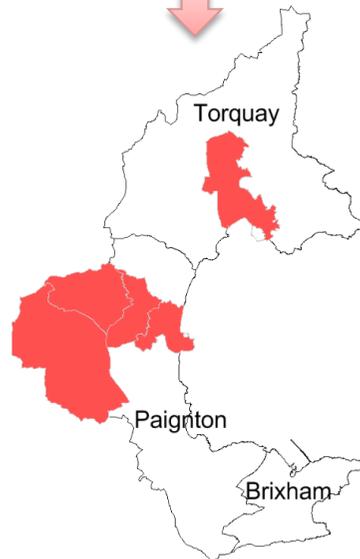
Colour of arrow relates to RAG rating relative to England (Red – Significantly worse, Amber – Not significantly different, Green – Significantly better than England, Black – Not compared to England)

CITIZENS ADVICE

Citizens Advice offers confidential advice online, over the phone, and in person for millions of people across the country. The following data is sourced from Paignton Citizens Advice (Torbay) and Torquay Debt Advice Unit (Torbay). Of the issues raised at these two places during 2018/19, 8,936 issues related to individuals who were Torbay residents (7,558 aged under 65, 1,306 aged 65 and over, 72 had no recorded age). This relates to separate issues and they are counted once regardless of the number of phone calls/visits.



- Wards with rate of issues above Torbay average:
- 1) Roundham with Hyde
 - 2) King's Ash
 - 3) Collaton St Mary
 - 4) Tormohun (Central Torquay)
 - 5) Clifton with Maidenway



For more information, visit www.citizensadvicetorbay.org.uk

CARER PROFILE

A carer provides help to someone, usually an adult relative or friend, as part of their normal daily life. These are not professional carers or those who work for a voluntary organisation.

Carers need support and the Care Act 2014 recognises unpaid (mainly) adult carers in law in the same way as those they care for. This relates to rights to a carers assessment of support needs, support planning, and access to information and advice to enable choice about the support they need. Many carers are ‘hidden’ as they do not think of themselves as carers or have not been identified in this way by the health and social care system, meaning they miss out on the support available. Information below relates to a snapshot of unpaid carers on the Torbay carers register during January 2020, the overwhelming majority but not all of these unpaid carers live in Torbay.



There are **4,274** unpaid carers on the Torbay carers register

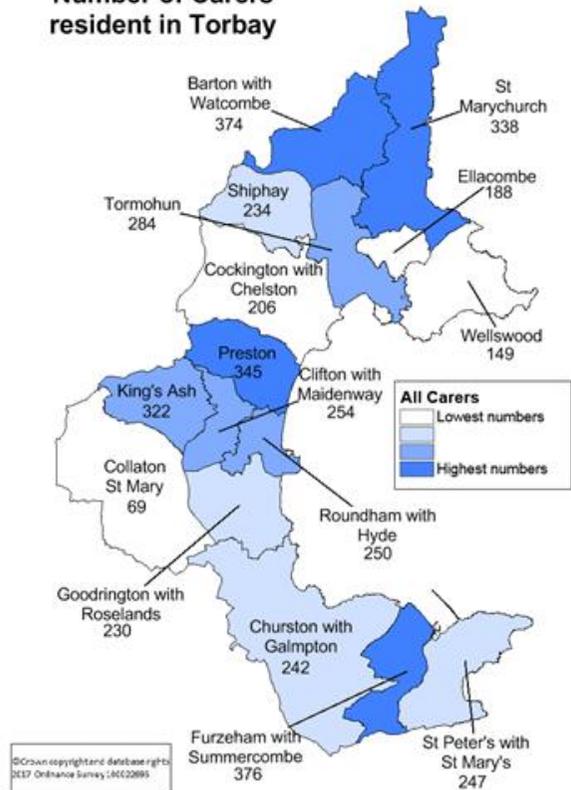


32 out of 100 carers aged 18 and over have as much social contact as they would like



52 out of 100 social care users aged 18 and over have as much social contact as they would like

Number of Carers resident in Torbay



68 out of 100 unpaid carers are female



42 out of 100 unpaid carers are aged 65 and over

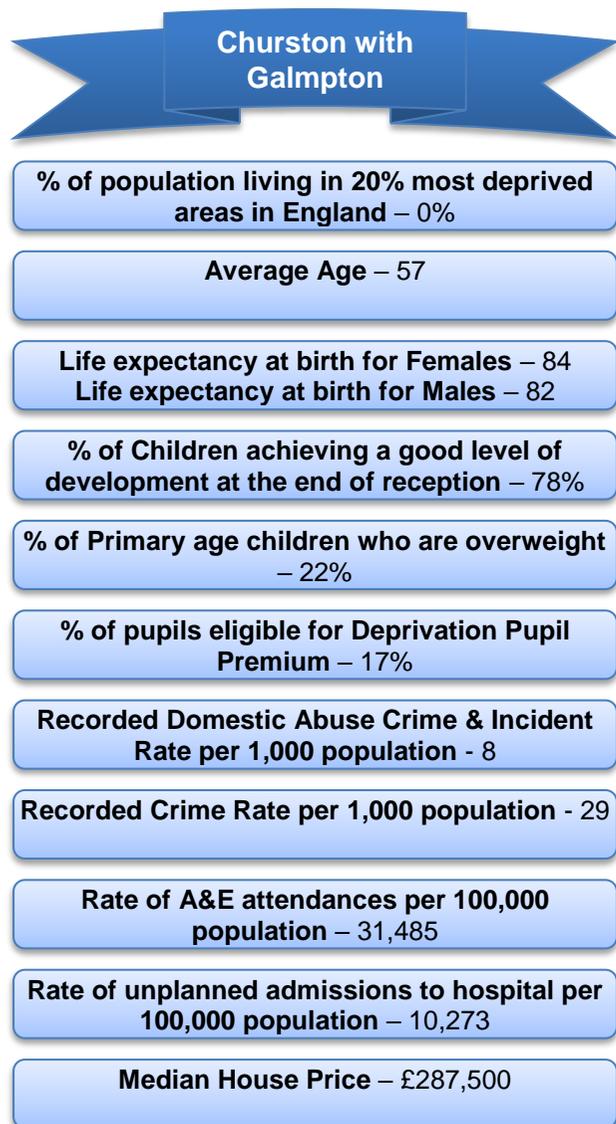


The most common reason for someone requiring care from an unpaid carer is Physical Disability



For more information, visit www.torbayandsouthdevon.nhs.uk/services/care-service

RELATIVE DEPRIVATION ACROSS THE BAY



The latest Index of Multiple Deprivation (IMD) was released in September 2019. The IMD measures **relative** levels of deprivation in small geographical areas called Lower-layer Super Output Areas (LSOA). There are 32,844 LSOAs within England of which 89 make up the area of Torbay. The IMD showing that Churston with Galmpton was the least deprived ward within Torbay and Roundham with Hyde was the most deprived.

For more information, visit the [Deprivation pages at http://www.southdevonandtorbay.info](http://www.southdevonandtorbay.info)

CANCER – FACTS ACROSS THE LIFE COURSE

Cancer is a condition where cells in a specific part of the body grow and reproduce uncontrollably. The cancerous cells can invade and destroy surrounding healthy tissue, including organs. 1 in 2 people will develop some form of cancer during their lifetime.

In the UK, the 4 most common types of cancer are Breast, Lung, Prostate and Bowel. Cancer is the highest cause of death in England for those under 75. All statistics were obtained from the Public Health Outcomes Framework.

74 out of 100 women eligible for breast cancer screening had a test in the past 3 years. This is in line with the English average



Under 75 mortality from breast cancer for the six year period 2013 – 2018 is **27% lower** than the period 2003 - 2008



62 out of 100 people who were invited to bowel cancer screening had a test in the past 30 months. This is slightly higher than the English average



611 people under 75 died from cancer in the 3 year period 2016 to 2018. Of these **344** were male and **267** were female.

74 out of 100 women eligible for cervical screening had a test in the past 5½ years. This is slightly higher than the English average



76 people were newly diagnosed with oral cancer in the 3 year period 2015 to 2017



278 people died from lung cancer in the 3 year period 2016 to 2018. Of these **175** were male and **103** were female.



389 people were newly diagnosed with lung cancer in the 3 year period 2015 to 2017

366 people under 75 died from cancers considered preventable in the 3 year period 2016 to 2018. Of these **204** were male and **162** were female.



[For more information, visit www.nhs.uk/conditions/cancer](http://www.nhs.uk/conditions/cancer)

The following shows the sources of data for summary pages where there was not room to quote those sources.

Key Facts (Page 4)

Torbay population: ONS Mid-year population estimates (2018).
Average Age: ONS Mid-year population estimates (2018).
Residents 65 and over: ONS Mid-year population estimates (2018).
Residents who are children: ONS Mid-year population estimates (2018).
State Schools: www.compare-school-performance.service.gov.uk (2020).
Residential and Care Homes: Torbay Adult Social Care (2020).
Average House Price: Median House Price by local authority, Year ended September 2018.
Average Full-time Salary: Median Full-time salary, Annual Survey of hours and earnings – residents (2019).
No of visitors: Torbay Council Destination Management Plan 2017-2021.
No of parks: www.enjoytorbay.co.uk/parks
No of beaches: www.enjoytorbay.co.uk/beaches
Walks: <https://www.torbay.gov.uk/leisure-sports-and-community/parks/walks/>
Births: Live Births, NOMIS (2018).
Deprivation: Index of Multiple Deprivation (2019).
No of GPs: Healthwatch Torbay (2020).
No of Pharmacies: PHE Shape Tool (2020).
A&E Attendances: Hospital Episode Statistics (Provisional) (2019/20).
Emergency admissions: Hospital Episode Statistics (Provisional) (2019/20).

Protected Characteristics (Page 12)

Age: ONS Mid-year population estimates (2018).
Sex: ONS Mid-year population estimates (2018).
Disability: Census (2011).
Gender Reassignment: Gender Identity Research and Education Society (2011).
Marriage and Civil Partnership: Census (2011).
Pregnancy and Maternity: Live Births, NOMIS (2018).
Race: Census (2011).
Religion or Belief: Census (2011).
Sexual Orientation: ONS (2017).

Population Overview infographic (Page 14)

Torbay population: ONS Mid-year population estimates (2018).
Average Age: ONS Mid-year population estimates (2018).
Average Life expectancy: Public Health Outcomes Framework (PHOF) Indicator – Life expectancy at birth (2015-17).
Healthy Life expectancy: PHOF Indicator – Healthy life expectancy at birth (2015-17).
2040 population: ONS population projections (2016).
Births: Live Births, NOMIS (2018).
65 and over resident population: ONS Mid-year population estimates (2018), ONS population projections (2016).
Fuel Poverty: % of households that experience fuel poverty. PHOF Indicator – Fuel Poverty (2017).
Electricity Meter concentration: Department for Business, Energy & Industrial Strategy – LSOA prepayment electricity meter consumption (2017).

Deprivation: Index of Multiple Deprivation (2019).

Crimes/Domestic Abuse: Torbay Community Safety Partnership (2018/19).

Housing Affordability: Ratio of lower quartile house price to lower quartile full-time salary. House prices: ONS-Land Registry. **Salaries:** ONS- Annual Survey of Hours and Earnings.

Pollution: PHOF Indicator-Air pollution fine particulate matter.

Population Overview profile (Page 22)

Average Age: Median age, ONS Mid-year population estimates.

Dependency Ratio: Ratio of those aged under 15 & over 64 divided by number of 15 to 64 year olds, ONS Mid-year population estimates (2018).

Life expectancy at birth: Public Health Outcomes Framework (PHOF) Indicator – Life expectancy at birth.

Healthy life expectancy: PHOF Indicator – Healthy life expectancy at birth.

Birth rate: NOMIS - Live Births, ONS Mid-year population estimates for female population aged 15 to 44 (per 1,000).

Mortality rate: NOMIS – Mortality statistics – All ages & causes, ONS Mid-year population estimates (Age standardised Rate per 100,000).

Premature mortality: NOMIS – Mortality statistics – Under 75 & all causes, ONS Mid-year population estimates (Age standardised Rate for under 75s per 100,000).

Population living in most deprived areas: Index of Multiple Deprivation (2019) - % of population living in 20% most deprived areas in England.

BAME population: NOMIS (Census 2011) % of population not categorised as White.

Crime Rate: Torbay – Torbay Community Safety Partnership. England & South West – ONS Police force area data tables. CIPFA – Home Office Police recorded crime by Community Safety Partnership. Population – ONS Mid-year population estimates. Rate per 1,000 population.

ASB Rate: Torbay – Torbay Community Safety Partnership. England & South West – ONS Police force area data tables. CIPFA – data.police.uk. Population – ONS Mid-year population estimates. Rate per 1,000 population.

Domestic abuse rates: Torbay – Torbay Community Safety Partnership. England & South West – PHOF Indicator - Domestic abuse-related incidents & crimes current method. Population - ONS Mid-year population estimates for 16+. Rate per 1,000 population 16+.

Fuel poverty: % of households that experience fuel poverty. PHOF Indicator – Fuel Poverty.

Adult carers who have as much social contact as they would like: PHOF Indicator – Social Isolation: % of adult carers who have as much social contact as they would like (18+).

Adult social care users who have as much social contact as they would like: PHOF Indicator – Social Isolation: % of adult social care users who have as much social contact as they would like (18+).

Smoking Prevalence: PHOF Indicator – % Smoking Prevalence in adults (18+) – current smokers (APS).

Children in low income families: PHOF Indicator - % of Children in low income families (under 16s).

Percentage of population living in most deprived areas: Proportion of population who live in areas classified as the most deprived 20% for indoor deprivation in England (Index of Multiple Deprivation (2019)).

Housing Affordability: Ratio of lower quartile house price to lower quartile full-time salary. House prices: ONS-Land Registry. Salaries: ONS- Annual Survey of Hours and Earnings.

Alcohol Admissions: Age standardised alcohol attributable admissions (per 100,000) – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Planned admission rate: Age standardised elective admissions (per 100,000) – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Unplanned admission rate: Age standardised non-elective admissions rate (per 100,000) - Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

A&E attendances rate: Age standardised A&E attendance rate (per 100,000) - Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Starting and developing well profile infographic (Page 24)

Child population: ONS Mid-year population estimates (2018).

Births: Live Births, NOMIS (2018).

Smoking at time of delivery: % of mothers known to be smokers at time of birth. PHOF Indicator – Smoking status at time of delivery.

Breastfeeding prevalence: % of infants totally or partially breastfed at age 6 to 8 weeks. PHOF Indicator – Breastfeeding prevalence at 6-8 weeks after birth (current method).

Under 18 pregnancies: Conceptions in women aged under 18 per 1,000 females aged 15 to 17. PHOF Indicator – Under 18s conception rate/1000.

School ready children: Children defined as having reached a good level of development at the end of the Early Years Foundation Stage (EYFS) as a percentage of all eligible children – Department for Education (2018/19).

School ready children with Free School Meal status: Children with Free School Meal status defined as having reached a good level of development at the end of the Early Years Foundation Stage (EYFS) as a percentage of all eligible children – Department for Education (2018/19).

Children with Special Educational Needs: % of state-funded pupils with special educational needs, based on where pupil attends school – Department for Education (2019).

Not in employment, education or training: % of 16 & 17 years olds not in employment, education or training or whose activity is not known – Department for Education (2018/19).
Overweight children: PHOF Indicator – Reception: Prevalence of overweight (including obesity). PHOF Indicator – Year 6: Prevalence of overweight (including obesity).
Physically active: Children active for 30 mins a day or more on average. Active Lives Children and Young People Survey (2017/18).
Children in low income families: % of under 16s in low income families. PHOF Indicator – Children in low income families (under 16s) - 2016.
Looked After Children/CPP/CIN: Children looked after at 31 March per 10,000 children, by local authority – Department for Education. Children subject to a child protection plan at 31 March, by local authority – Department for Education. Children in need at 31 March per 10,000 children, by local authority – Department for Education.
Self-harm admissions: Hospital Episode Statistics (16/17 to 18/19)
Domestic Abuse where children present: Torbay Community Safety Partnership (2018/19)
MMR vaccination rates: % of children who received two doses of MMR on or after their first birthday up to their fifth birthday. PHOF Indicator – Population vaccination coverage MMR for two doses (5 years old) – 2018/19.

Starting and developing well profile (Page 32)

Birth rate: NOMIS - Live Births, ONS Mid-year population estimates for female population aged 15 to 44 (per 1,000).
Infant mortality: Infant deaths under 1 year of age per 1,000 live births. PHOF Indicator – Infant mortality rate.
Smoking at time of delivery: % of mothers known to be smokers at time of birth. PHOF Indicator – Smoking status at time of delivery.
Breastfeeding initiation: % of mothers who gave their babies breast milk in the first 48 hours after delivery. PHOF Indicator – Breastfeeding initiation.
Breastfeeding prevalence: % of infants totally or partially breastfed at age 6 to 8 weeks. PHOF Indicator – Breastfeeding prevalence at 6-8 weeks after birth (current method).
MMR vaccination rates: % of children who received two doses of MMR on or after their first birthday up to their fifth birthday. PHOF Indicator – Population vaccination coverage MMR for two doses (5 years old).
5 year olds with one or more decayed, missing or filled teeth: PHOF Indicator – Children with one or more decayed, missing or filled teeth.
EYFS – Good level of development: Children defined as having reached a good level of development at the end of the Early Years Foundation Stage (EYFS) as a percentage of all eligible children – Department for Education.
EYFS – Good level of development of those with Free School Meal status: Children with Free School Meal status defined as having reached a good level of development at the end of the Early Years Foundation Stage (EYFS) as a percentage of all eligible children – Department for Education.
Classified as overweight or obese (Reception): PHOF Indicator – Reception: Prevalence of overweight (including obesity).
Classified as overweight or obese (Year 6): PHOF Indicator – Year 6: Prevalence of overweight (including obesity).
Key Stage 2 pupils meeting the expected standard in reading, writing & maths: Key Stage 2 pupils meeting the expected standard in reading, writing & maths – Department for Education.
Alcohol admissions to hospital: Admission episodes for alcohol-specific conditions (per 100,000) – Under 18s – Hospital Episode Statistics (HES).
Teenage Conceptions: Conceptions in women aged under 18 per 1,000 females aged 15 to 17. PHOF Indicator – Under 18s conception rate/1000.
Chlamydia detection rates: PHOF Indicator – Chlamydia detection rate/100,000 aged 15-24.
Average Attainment 8 score (GCSEs): Average Attainment 8 score for all pupils in state-funded schools, based on local authority of pupil residence. PHOF Indicator – Average Attainment 8 score.
Not in employment, education or training: % of 16 & 17 years olds not in employment, education or training or whose activity is not known – Department for Education.
Hospital admissions for unintentional & deliberate injuries: Hospital admissions caused by unintentional & deliberate injuries in children aged 0 to 17 years – Hospital Episode Statistics (HES).
Children with Special Educational Needs: % of state-funded pupils with special educational needs, based on where pupil attends school – Department for Education.
Children in low income families: % of under 16s in low income families. PHOF Indicator – Children in low income families (under 16s).
Looked After Children: Children looked after at 31 March per 10,000 children, by local authority – Department for Education.
Children in Need: Children in need at 31 March per 10,000 children, by local authority – Department for Education.
Children with Child Protection Plans: Children subject to a child protection plan at 31 March, by local authority – Department for Education.
Pupil Absence: % of half days missed by pupils due to overall absence (including authorised and unauthorised absence). PHOF Indicator – Pupil Absence.

Living and working well profile infographic (Page 34)

Torbay working age population: ONS Mid-year population estimates (2018).
Working age smokers: PHOF Indicator – Smoking Prevalence in adults (18-64) current smokers (APS) (2018).
Citizens Advice issues: Torbay Citizens Advice (2018/19)
Depression Prevalence: PHOF Indicator – Depression: Recorded prevalence (18+) (2018/19).
Salaries: ONS- Annual Survey of Hours and Earnings Median Salary (2019).

Fuel Poverty: % of households that experience fuel poverty. PHOF Indicator – Fuel Poverty (2017).
Housing Affordability: Ratio of lower quartile house price to lower quartile full-time salary. House prices: ONS-Land Registry.
Rental affordability: Lower quartile 2 bedroom monthly rent (Valuation Office Agency) divided by lower quartile gross monthly pay for Full-time workers (Annual Survey of Hours & Earnings - residents) (2018/19).
Overweight or obese adults: PHOF Indicator – Percentage of adults (aged 18+) classified as overweight or obese (2017/18).
Diabetes Prevalence: PHOF Indicator – Diabetes: QOF prevalence (17+) (2018/19).
5 portions of fruit or vegetables: PHOF Indicator – Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults) (2017/18)
Physically active adults: PHOF Indicator – Percentage of physically active adults (2017/18)
Crimes/Anti-social behaviour: Torbay Community Safety Partnership (2018/19)
Domestic Abuse: Torbay Community Safety Partnership (2018/19)
A&E Attendances: Hospital Episode Statistics (2018/19)
Emergency Admissions: Hospital Episode Statistics (2018/19)

Living and working well profile (Page 43)

Smoking Prevalence: PHOF Indicator – Smoking Prevalence in adults (18-64) current smokers (APS).
Depression Prevalence: PHOF Indicator – Depression: Recorded prevalence (18+).
Crime – Violent offences: PHOF Indicator – Violent Crime – violence offences per 1,000 population (All ages).
Crime – Sexual offences: PHOF Indicator – Violent Crime – sexual offences per 1,000 population (All ages).
Suicide Rate: PHOF Indicator – Suicide Rate (Persons) per 100,000 population (Age Standardised), Aged 10+.
Unemployment: PHOF Indicator – Unemployment (model-based), Aged 16+.
Those with no qualifications: % of those with no qualifications aged 16 to 64 – Annual Population Survey.
Housing affordability: Ratio of lower quartile house price to lower quartile full-time salary. House prices: ONS-Land Registry. Salaries: ONS- Annual Survey of Hours and Earnings.
Rental affordability: Lower quartile 2 bedroom monthly rent (Valuation Office Agency) divided by lower quartile gross monthly pay for Full-time workers (Annual Survey of Hours & Earnings - residents).
Fuel Poverty: % of households that experience fuel poverty. PHOF Indicator – Fuel Poverty.
Domestic Abuse rates: Torbay – Torbay Community Safety Partnership. England & South West – PHOF Indicator - Domestic abuse-related incidents & crimes current method. Population - ONS Mid-year population estimates for 16+. Rate per 1,000 population 16+.
Requests for ASC support for new clients: Rate per 100,000 population of requests for adult social care support for new clients aged 18 to 64. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.
Long-term support for Learning Disabilities: Rate per 100,000 population of Long-term support for Learning Disabilities aged 18 to 64. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.
Long-term support for Physical Personal Care: Rate per 100,000 population of Long-term support for Physical Personal Care aged 18 to 64. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.
Long-term support for Mental Health: Rate per 100,000 population of Long-term support for Mental Health aged 18 to 64. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.
Long-term support through admission to residential & nursing homes: Rate per 100,000 population of Long-term support through admission to residential & nursing homes aged 18 to 64. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Outcomes Framework.
Preventable mortality: PHOF Indicator – Mortality rate from causes considered preventable (per 100,000, Age Standardised).
Obesity Prevalence: PHOF Indicator – Obesity: QOF prevalence (18+).
Diabetes Prevalence: PHOF Indicator – Diabetes: QOF prevalence (17+).
Hypertension Prevalence: PHOF Indicator – Hypertension: QOF prevalence (all ages).
Alcohol related admissions: Age standardised admissions for alcohol-related conditions (Narrow) (per 100,000) aged 20 to 64 – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.
Smoking attributable admissions: PHOF Indicator – Smoking attributable hospital admissions (Aged 35+, per 100,000, Age Standardised).
Emergency admissions for ACS conditions: Age standardised emergency admissions for Ambulatory Care Sensitive conditions (per 100,000) aged 20 to 64 – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Ageing well infographic (Page 45)

Torbay 65+ population: ONS Mid-year population estimates (2018).

2040 population: ONS population projections (2016).

Life expectancy: PHOF Indicator – Life expectancy at 65 (2015-17).

Social care users social contact: PHOF Indicator – Social isolation: percentage of adult social care users who have as much social contact as they would like (2018/19).

Carers social contact: PHOF Indicator – Social Isolation: percentage of adult carers who have as much social contact as they would like (2018/19).

Pension Credit: Pension Credit Claimants as a percentage of the 65+ population. Stat Xplore (Department for Work & Pensions) (2016/17 to 2018/19).

Prevalence of Dementia: PHOF Indicator – Dementia recorded prevalence (aged 65 years and over).

A&E Attendances: Hospital Episode Statistics (2018/19)

Emergency Admissions: Hospital Episode Statistics (2018/19)

Emergency hospital admissions for falls: Hospital Episode Statistics (2018/19)

Flu vaccination coverage: PHOF Indicator – Population vaccination coverage – Flu (aged 65+) (2018/19).

Funded admissions to residential and nursing homes: Torbay and South Devon NHS Foundation Trust (2018/19)

Requests for adult social care support for new clients: Torbay and South Devon NHS Foundation Trust (2018/19)

Long-term support for Physical Personal Care: Torbay and South Devon NHS Foundation Trust (2018/19)

Unpaid Carers: Torbay and South Devon NHS Foundation Trust (Jan 2020)

Ageing well profile (Page 54)

Dependency ratio: Ratio of those under 15 and those over 64 divided by those aged between 15 and 64. ONS Mid-year population estimates.

Life expectancy at age 65: PHOF Indicator – Life expectancy at 65.

Excess Winter Deaths: PHOF Indicator – Excess winter deaths index.

Pension Credit claimants: Pension Credit Claimants as a percentage of the 65+ population. Stat Xplore (Department for Work & Pensions).

Long-term support for Learning Disabilities: Rate per 100,000 population of Long-term support for Learning Disabilities aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Long-term support for Mental Health: Rate per 100,000 population of Long-term support for Mental Health aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Long-term support for Physical Personal Care: Rate per 100,000 population of Long-term support for Physical Personal Care aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Requests for ASC support for new clients: Rate per 100,000 population of requests for adult social care support for new clients aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Long-term support for Social Isolation/Other: Rate per 100,000 population of Long-term support for Social Isolation/Other aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Still at home 91 days after discharge from hospital into reablement/rehabilitation service: % of those still at home 91 days after discharge from hospital into reablement/rehabilitation services aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Activity and Finance Report.

Permanent admissions to nursing or residential care: Rate per 100,000 population of Long-term support through admission to residential & nursing homes aged 65+. Torbay – Torbay and South Devon NHS Foundation Trust, CIPFA, South West, England – Adult Social Care Outcomes Framework.

Prevalence of Dementia: PHOF Indicator – Dementia recorded prevalence (aged 65 years and over).

Prevalence of Strokes: PHOF Indicator – Stroke: QOF prevalence (all ages).

Flu vaccination coverage: PHOF Indicator – Population vaccination coverage – Flu (aged 65+).

Admissions due to falls: Age standardised rate (per 100,000) of emergency hospital admissions due to falls in people aged 65+. Admissions - Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates..

A&E Attendances: Age standardised rate (per 100,000) of A&E Attendances for those aged 65 and over. Attendances – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates..

Emergency admissions for ACS conditions: Age standardised emergency admissions for Ambulatory Care Sensitive conditions (per 100,000) aged 65+ – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Elective admissions: Age standardised rate (per 100,000) of planned admissions for those aged 65 and over – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Non-Elective admissions: Age standardised rate (per 100,000) of unplanned admissions for those aged 65 and over – Hospital Episode Statistics (HES), Population – ONS Mid-year population estimates.

Delayed Transfers of Care: Average number of delayed transfers of care on a particular day taken over the year (aged 18 and over) - this is the average of the 12 monthly snapshots collected in the monthly Situation Report (SitRep). Rate is per 100,000 population (18+). Sourced from Adult Social Care Outcomes Framework.

Most and Least deprived wards (Page 57)

% of population living in 20% most deprived areas in England: Index of Multiple Deprivation (2019).

Average Age: Median age, ONS Mid-year population estimates (2018).

Life expectancy at birth: Deaths – PCMD, Population - ONS Mid-year population estimates. (2013 – 17).

EYFS – Good level of development: Children defined as having reached a good level of development at the end of the Early Years Foundation Stage (EYFS) as a percentage of all eligible children – Department for Education (2015 to 2019).

% of Primary age children who are overweight: National Child Measurement Programme (2013 to 2019).

% of pupils eligible for Deprivation Pupil Premium: Torbay Education Department (15/16 to 18/19).

Recorded Domestic Abuse Crime & Incident Rate per 1,000 population: Torbay Community Safety Partnership (16/17 to 18/19).

Recorded Crime Rate per 1,000 population: Torbay Community Safety Partnership (16/17 to 18/19).

Rate of A&E attendances per 100,000 population: Hospital Episode Statistics (16/17 to 18/19).

Rate of unplanned admissions to hospital per 100,000 population: Hospital Episode Statistics (16/17 to 18/19).

Median House Price: ONS Median House price paid by ward, Year ended June 2019.

Written and compiled by the Torbay Knowledge and Intelligence Team

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Dr Gemma Hobson, Simon Baker, Claire Truscott, Allan Macfadyen, Julia Chisnell, Citizens Advice, Torbay & South Devon NHS Foundation Trust, Torbay Community Safety Partnership, Torbay Council Education Department and Torbay Public Health Team

For further information, please contact the Torbay Knowledge and Intelligence team at Statistics@torbay.gov.uk