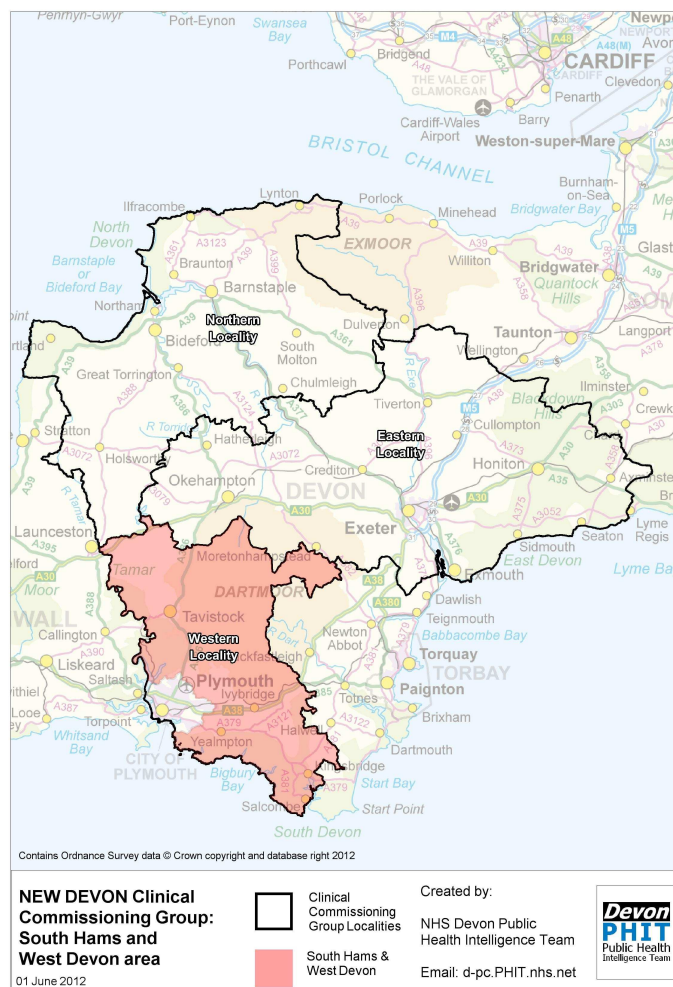


Locality Health Improvement Plan

South and West Devon

2012/13



Public Health Annual Report 2011-12

The South and West Devon Locality health improvement and tackling health inequalities plan is a mechanism for monitoring and prioritising health and wellbeing issues across South and West Devon, part of the Western Locality

Executive Summary

The priorities for improving the health and wellbeing of the Devon population are:

1. To target preventative interventions in those people whose health is poorer and where health inequalities exist.
2. To prioritise health-promoting interventions such as smoking cessation, healthy eating, the promotion of physical activity, prevention of skin cancer, mental health and emotional health and wellbeing and sexual health.
3. To promote early detection of cancer through screening programmes or awareness-raising amongst the public.
4. To prevent falls in vulnerable populations and to ensure effective treatment if injuries occur.
5. To reduce the harm from alcohol and drugs by public protection, promoting self-help and providing accessible treatment options.
6. To encourage self-care and independence in older people.
7. To support carers, including safeguarding their wellbeing.
8. To build community resilience through social networks and increasing opportunities for volunteering.
9. To continue to work with schools, academies and communities to promote health and wellbeing.
10. To commission evidence-based services for vulnerable groups, for example children and families with complex needs, or offenders or those who experience domestic and sexual violence and abuse.

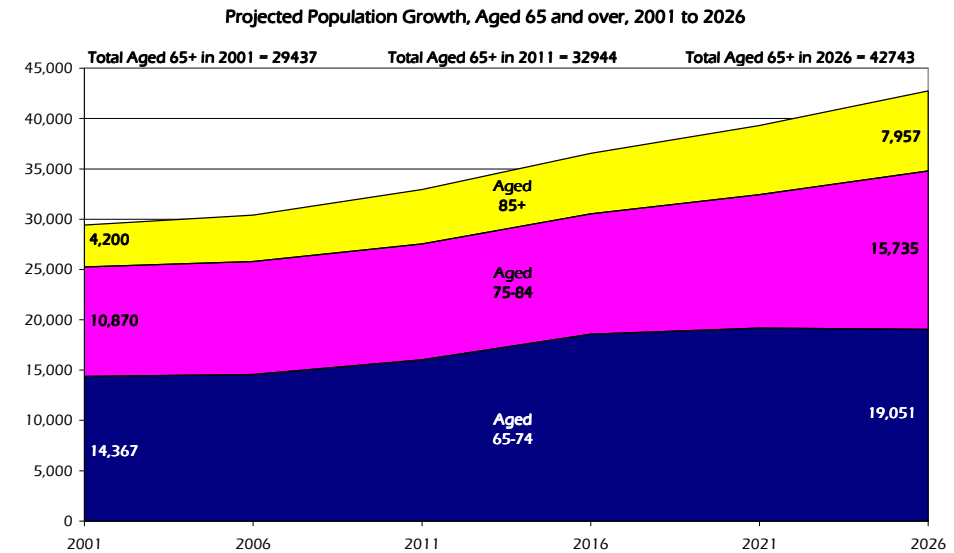
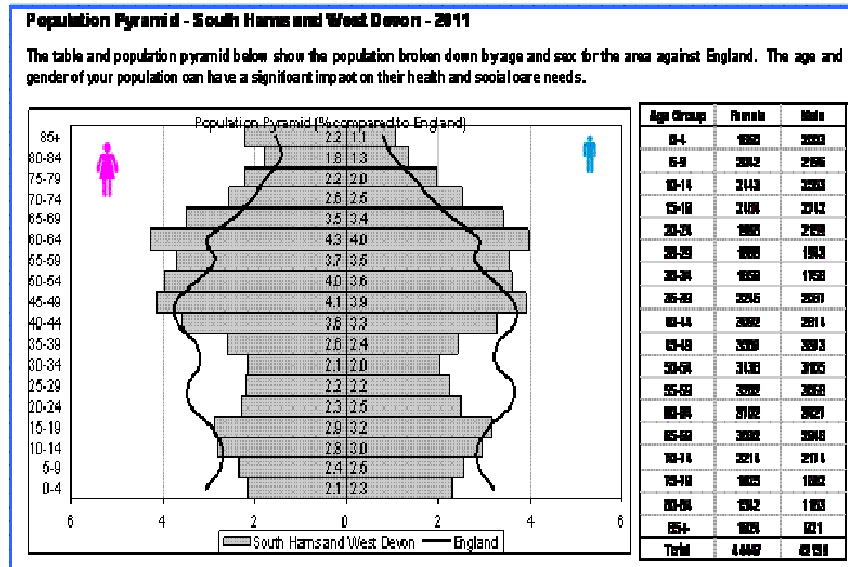
The priorities for improving the health and wellbeing of the South and West Devon population are:

PRIORITY ISSUES: 1. Skin cancer prevention and early diagnosis. 2. Healthy Weight (including healthy eating and physical activity) 3. Smoking in routine and manual groups. 4. Alcohol. 5. Childhood immunisation. 6. Falls prevention. 7. Rural deprivation and isolation. 8. Emotional health and wellbeing

PRIORITY GROUPS & COMMUNITIES: 1. Children. 2. Rural deprivation and Princetown. 3. Carers

Demographics

South and West Devon has a population c82,500. The older population is predicted to increase significantly over the next 15 years which will have a significant impact on service design and delivery.



The area has a lower proportion of 20-39 year olds but greater proportion of 40-59 year olds. Life expectancy is high when compared nationally and to Devon but there are rural areas which are more deprived when compared to England and Devon.

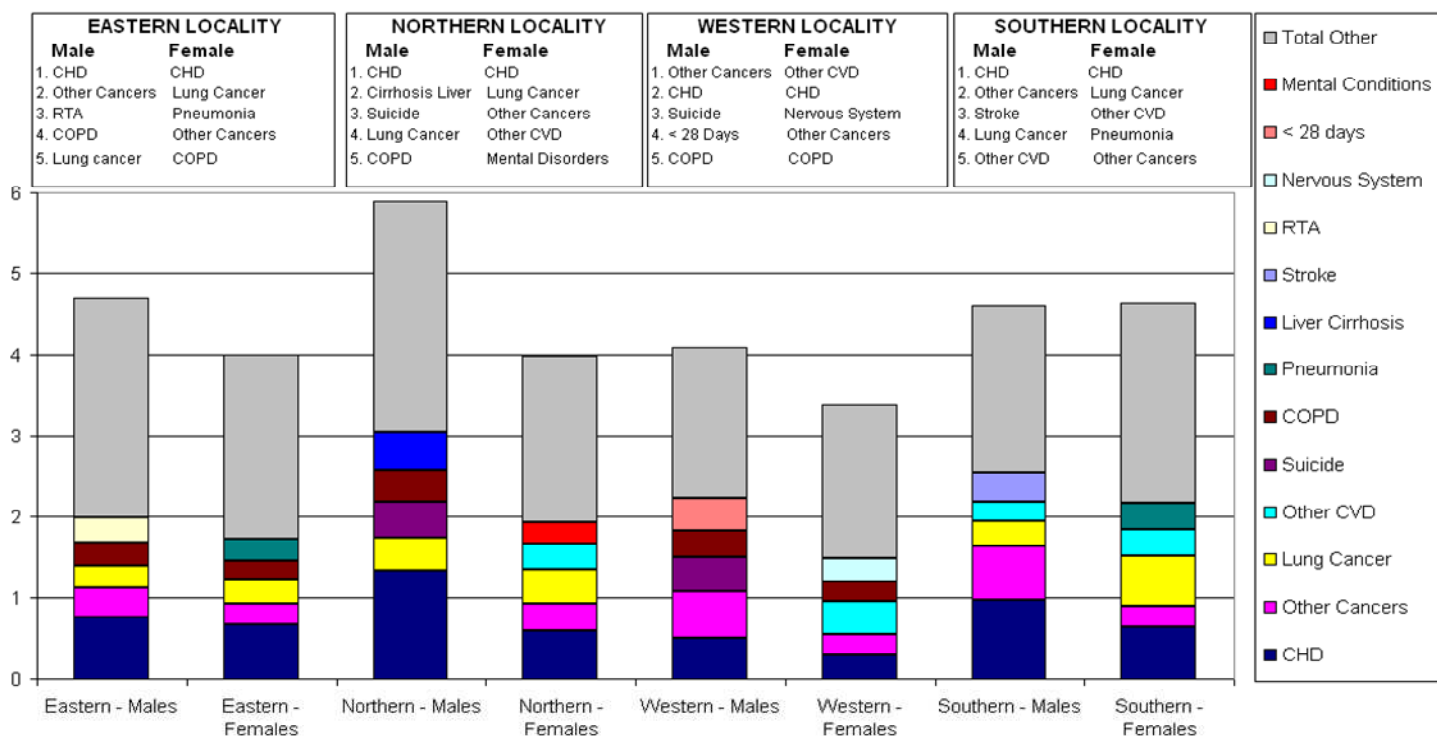
The Health Profile for South Hams and West Devon 2012 highlights skin cancer (malignant melanoma) as where the area is significantly worse than the England rate. Link: [Health Profiles](#)

The Devon health and wellbeing pages provide further information in the Joint Strategic Needs Assessments for the Southern Locality and District Council Areas as well as GP practice profiles. Link: [Devon Health and Wellbeing Pages -JSNA](#)

Health Inequalities

To address the health inequalities gap in South and West Devon health and partner based interventions should focus on prevention and early intervention for the top five conditions in males and females which contribute to the gap including: other cancers, other cardiovascular disease (CVD), coronary heart disease (CHD), suicide, lung cancer and chronic obstructive pulmonary disorder (COPD). Interventions would include those to ensure early diagnosis and lifestyle interventions such as stopping smoking, eating healthily and being more active. The Health Profile 2012 reveals smoking prevalence was 19.2% in South Hams and 14.5% in West Devon compared to 20.7% for England and 18.1 for Devon reducing prevalence will impact on health inequality and improve health.

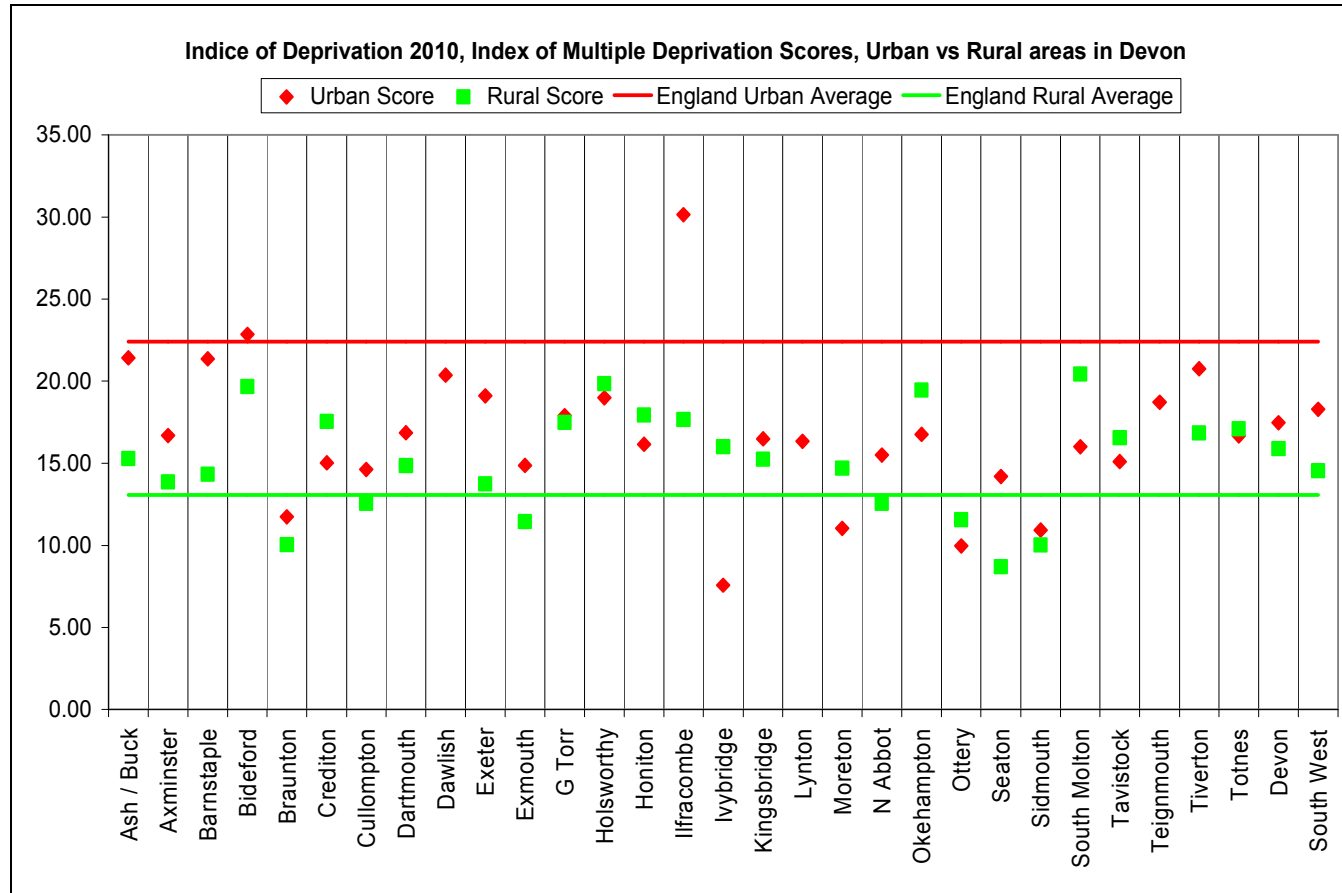
The Gap in Life Expectancy in Years - Top Five Conditions by Locality Area, 2010



N.B. Other Cancers include prostate, pancreatic, bladder, leukaemia, cervical cancer and others; Other CVD includes Aortic aneurysm, phlebitis & thrombolisis, pulmonary embolism and others.

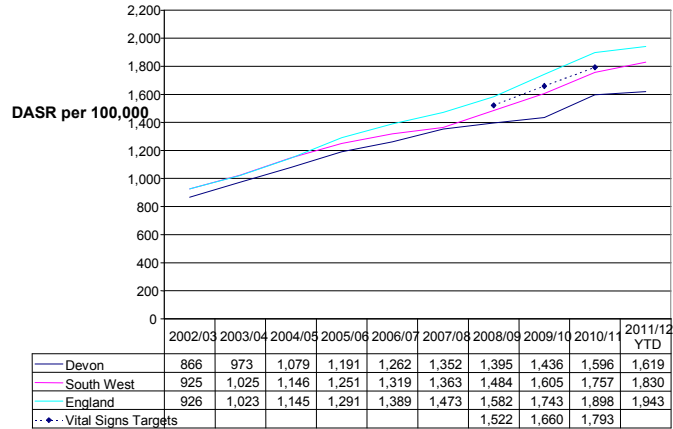
Urban and Rural Deprivation

Some of the South and West rural areas are more deprived than the England average, in particular some of the Tavistock areas notably around Princetown.

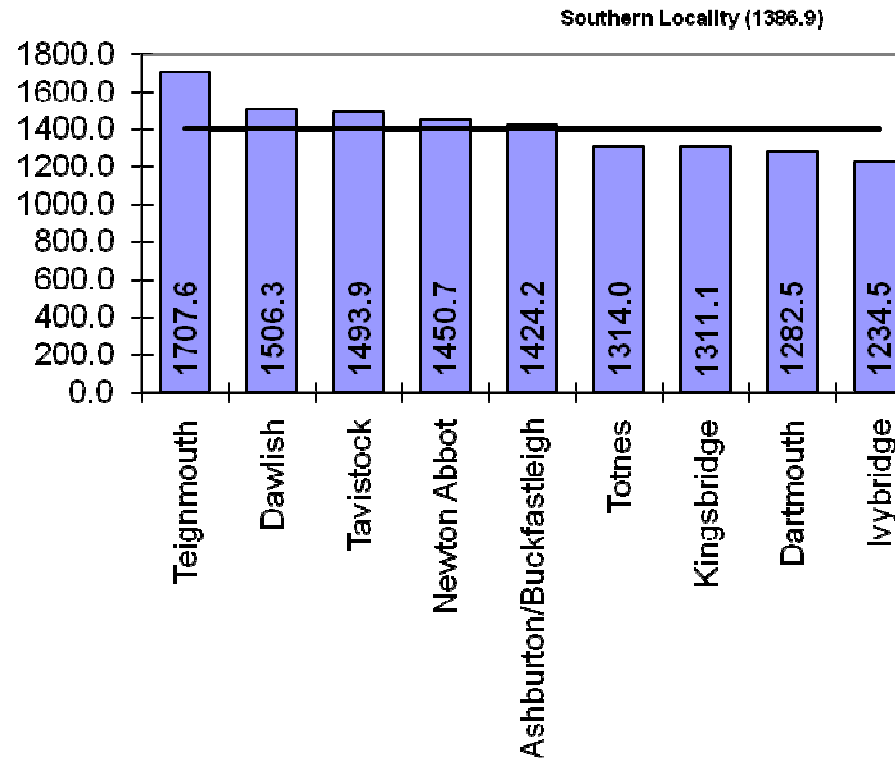


Alcohol related hospital admissions

Alcohol related admissions Direct Age Standardised Rate 2008-10

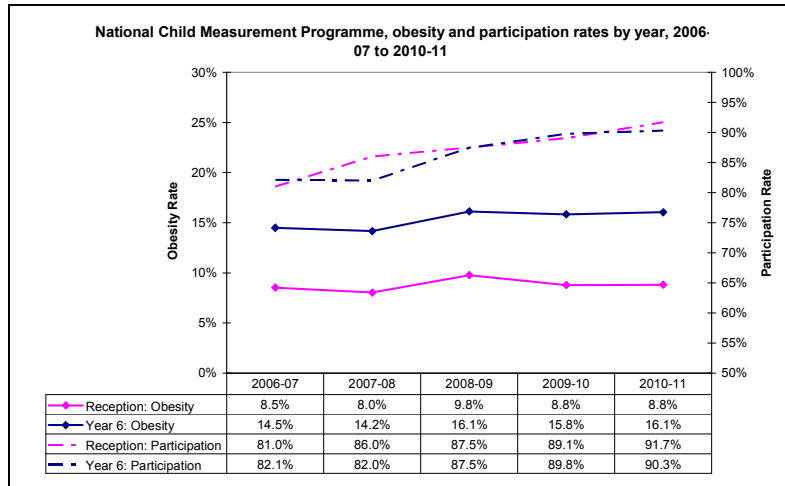


Alcohol related admissions by locality and South Devon town. Direct Age Standardised Rate 2008-10



Alcohol related hospital admissions in Devon are falling against a national trend and Devon's rank is improving nationally. There is variance across the South Devon area with higher admission rates in the Tavistock area

Obesity

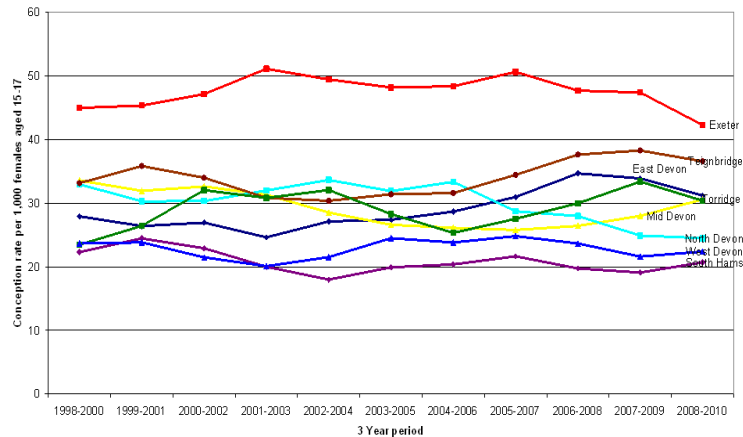


The graph shows that although the participation has steadily increased over time, the prevalence of obesity has remained relatively stable.

In 2010-11 Kingsbridge North was statistically higher for overweight and very overweight children at year 6. The rate fluctuates by area.

Under 18 conception rates for Devon

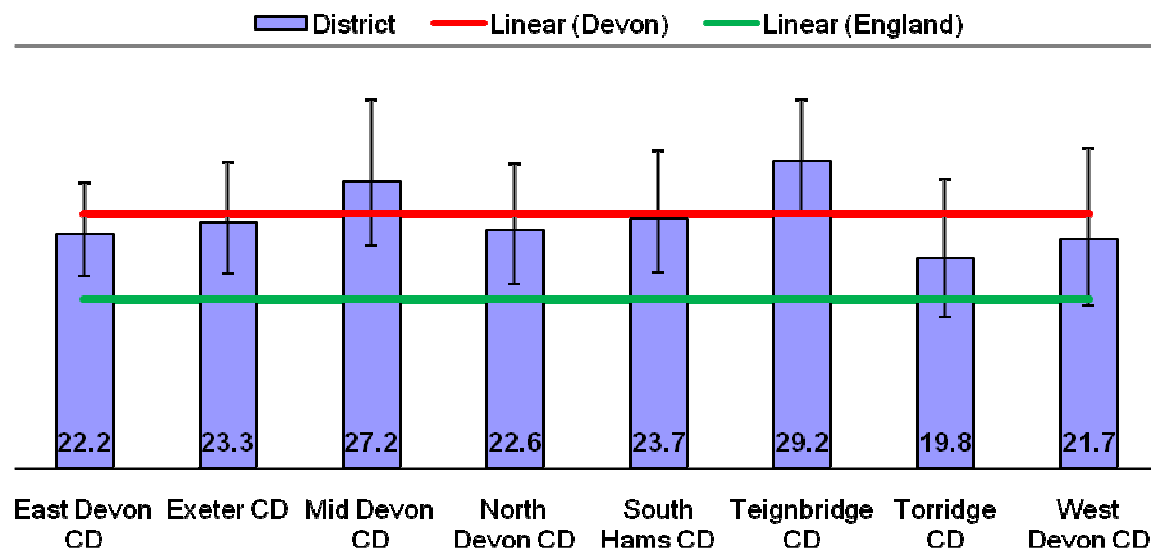
Trend in Under 18 Conception Rate, 1998 to 2010, by Devon District



Teenage conception rates in South and West Devon are lower than the Devon average

Malignant melanoma

Devon Local Authority Districts Incidence of Malignant Melanoma, DASR per 100,000, 2007-09



Based on the population and indices of skin cancer, the Devon Skin Cancer Prevention Strategy 2011-14 has two priority groups: teenagers and older people (early diagnosis). Planned interventions focus on behaviour change rather than just awareness raising, using a mixture of evidence-based methods to tailor messages to the target audiences.

LOCALITY BUDGET: The locality health improvement budget in 2012/13 has been allocated to alcohol misuse work of the community safety partnership, to support community led projects in the most deprived ward and to develop a local hub of physical activity opportunities.

PRIORITY ACTIONS FOR 2012/13 - *Reduce inequalities in all domains*

Domain	Action	Pathways and groups	Public Health Outcomes
Wider Determinants of Health			
Priority Communities	Princetown and rurally isolated and deprived areas		Increased healthy life expectancy and reduce health inequalities
Fuel poverty	Increase uptake of support for measures to improve energy efficiency in vulnerable groups and older people in rural areas	Virtual wards/community services development	Fuel poverty
Health Improvement			
Childhood obesity and activity	Roll out of HENRY programme and food for life partnership (FFL)		Excess weight 4-5 and 10-11 year olds
Sexual health	Review tier 1 and 2 sexual health offer in South and West Devon and promote existing services		Under 18 conceptions
Nutrition, physical activity, alcohol, smoking	Obesity tier 2 pathways, review Tier 3 for South and West Devon, tier 2 under development, Let's Get moving - primary care training, FFL partnership Stop smoking support including Derriford hospital pathways Development of a health and wellbeing hub and physical activity pathway Carers health and wellbeing checks	Community Life Strategy Active South Hams and West Devon West Devon Children and Young Peoples Partnership Crime and Disorder Partnership Locality carers group	Breastfeeding. Diet. Excess weight Physical activity Alcohol related hospital admissions Smoking status at time of delivery, smoking prevalence in adults and children

Health Protection			
Increase childhood immunisation uptake rate	Childhood immunisation (CHIP) project in South Devon practices including South Brent		Vaccination coverage
Screening priorities	Reviewed process for opt in or out of screening for individuals with a learning disability		
Health care Public health and Preventing Premature Mortality			
Falls prevention	Establish falls pathway regarding fracture liaison service and implement increased evidence based strength and balance classes.	Care of the Elderly CPG	Hip fractures over 65's
Early diagnosis - skin cancer, carers health checks	'Know Your Skin' Pharmacy campaign for Over 50's in South Devon and 'Love Your Skin' campaign in colleges		Mortality from causes considered preventable
Emotional health and well-being Mental health - suicide prevention	Access to evidence based interventions in South and West Devon		Self reported wellbeing Suicide
Dementia	Devonwide priority		Dementia and its impacts

Appendix 1 Clinical Commissioning Group, Locality and Local Authority Performance Summary May 2012 (updated monthly)

Measure	Eastern Locality					Western Locality			CCG	Target
	Exeter	Mid Devon	Wakley	WEB	Total	SH&WD	Plymouth	Total		
Total GP Registered Population	142,700	114,800	71,500	48,700	377,600	79,900	275,300	355,200	897,300	-
% of population income deprived	10.7%	10.2%	8.7%	10.2%	10.1%	9.4%	15.4%	13.9%	12.1%	-
Breastfeeding at 6-8 weeks (recording)	99.0%	98.6%	99.2%	98.1%	98.8%	96.5%	95.3%	95.5%	97.5%	95.0%
Breastfeeding at 6-8 weeks (prevalence)	61.0%	50.0%	52.4%	51.4%	55.3%	54.0%	31.8%	36.0%	45.5%	on p.21
DTaP/IPV/Hib, Aged 1 (COVER)	97.1%	93.6%	95.1%	97.8%	95.8%	94.5%	96.8%	96.5%	96.3%	95.0%
PCV Booster, Aged 2 (COVER)	94.7%	95.1%	96.7%	98.1%	95.5%	91.1%	93.1%	92.8%	93.4%	95.0%
Hib/MenC, Aged 2 (COVER)	93.4%	92.4%	96.0%	98.1%	94.1%	94.3%	90.5%	91.1%	92.1%	95.0%
MMR First Dose, Aged 2 (COVER)	94.5%	93.5%	98.0%	98.1%	95.2%	93.0%	92.0%	92.2%	92.7%	95.0%
DTaP/IPV, Aged 5 (COVER)	96.1%	93.2%	94.8%	92.7%	94.4%	85.6%	90.2%	89.3%	90.6%	95.0%
MMR Second Dose, Aged 5 (COVER)	94.4%	89.8%	90.9%	91.7%	91.8%	81.1%	87.6%	86.2%	87.6%	95.0%
NCMP, Reception Year, % obese	9.27%	9.64%	6.81%	9.56%	9.04%	8.69%	9.41%	9.26%	9.06%	on p.21
NCMP, Reception Year, % coverage	85.7%	96.0%	81.9%	94.2%	91.1%	88.0%	93.3%	92.2%	92.4%	90.0%
NCMP, Year Six, % obese	17.28%	16.45%	13.47%	18.98%	16.44%	14.50%	18.85%	17.81%	17.10%	on p.21
NCMP, Year Six, % coverage	90.4%	89.9%	93.3%	91.9%	91.4%	84.0%	90.6%	89.0%	90.7%	90.0%
Alcohol-Related Admissions, DASR/100k	1586.4	1327.6	1277.8	1351.9	1417.5	1607.8	2381.4	2194.5	1838.5	on p.21
Smoking, NHS Assisted Quits	488	334	182	200	1204	259	1629	1888	3602	on p.21
Smoking, % Quits CO Validated	76.4%	75.4%	79.7%	87.5%	78.5%	80.3%	76.5%	77.0%	77.2%	85.0%
Smoking, Quit Rate	47.8%	58.3%	63.4%	55.7%	53.8%	45.1%	43.2%	43.4%	47.1%	35-70%
Chlamydia Diagnosis Rate, 15 to 24	2305.2	1677.3	2597.7	2597.7	2079.1	1403.3	2304.7	2158.2	2079.1	2,400
Under 18 Conception Rate per 1,000	41.1	29.3	31.2	31.2	33.9	21.3	45.8	39.3	34.7	on p.21
Clostridium Difficile, acute trust	N/A	N/A	N/A	N/A	82	N/A	N/A	38	135	on p.21
MRSA Bacteraemia, acute trust	N/A	N/A	N/A	N/A	1	N/A	N/A	6	7	on p.21
Clostridium Difficile, acute & community	98	76	65	67	306	29	54	83	443	on p.21
MRSA Bacteraemia, acute & community	1	2	1	1	5	0	7	7	16	on p.21
Death Rates, All Age All Cause, Male	576.4	559.4	479.6	521.4	545.3	532.4	683.8	646.0	594.3	on p.21

Death Rates, All Age All Cause, Female	430.8	406.5	364.8	403.1	406.7	404.2	495.2	472.2	429.9	on p.21
Death Rates, Cancer, under 75	113.1	100.4	81.6	86.3	99.6	86.8	121.4	112.7	104.2	on p.21
Death Rates, Circulatory, under 75	40.7	53.1	34.3	34.1	42.3	44.4	72.2	65.3	52.4	on p.21

Measure	E Devon	Exeter	M Devon	N Devon	S Hams	Teign	Torridge	W Devon	Devon	Target
Total GP Registered Population (000s)	132.9	119.6	76.1	91.5	83.7	127.3	65.8	53.1	749.9	-
% of population income deprived	9.1%	11.2%	10.4%	13.1%	10.1%	11.3%	12.7%	10.3%	10.9%	-
Breastfeeding at 6-8 weeks (recording)	98.4%	98.8%	98.6%	100.0%	97.0%	98.0%	100.0%	97.3%	98.8%	95.0%
Breastfeeding at 6-8 weeks (prevalence)	51.6%	59.2%	47.7%	47.8%	60.7%	59.1%	51.2%	54.9%	53.8%	45.2%
DTaP/IPV/Hib, Aged 1 (COVER)	96.4%	97.0%	93.4%	96.8%	92.6%	96.3%	97.6%	92.9%	95.5%	95.0%
PCV Booster, Aged 2 (COVER)	97.2%	94.6%	94.9%	87.5%	85.4%	94.2%	95.8%	95.1%	93.2%	95.0%
Hib/MenC, Aged 2 (COVER)	96.8%	92.9%	91.8%	87.5%	87.9%	94.2%	95.2%	97.1%	92.7%	95.0%
MMR First Dose, Aged 2 (COVER)	98.0%	94.3%	92.9%	86.5%	86.6%	93.2%	93.9%	96.1%	92.7%	95.0%
DTaP/IPV, Aged 5 (COVER)	93.9%	96.2%	92.9%	81.3%	84.0%	87.8%	94.2%	89.0%	89.5%	95.0%
MMR Second Dose, Aged 5 (COVER)	91.3%	94.2%	90.0%	78.1%	78.3%	85.3%	89.9%	83.6%	86.2%	95.0%
NCMP, Reception Year, % obese	8.08%	9.43%	9.93%	8.65%	8.38%	8.46%	8.72%	9.17%	8.81%	8.75%
NCMP, Reception Year, % coverage	91.3%	84.4%	97.1%	96.0%	84.5%	93.9%	94.6%	93.5%	91.7%	90.0%
NCMP, Year Six, % obese	15.68%	17.68%	16.88%	17.38%	13.99%	14.95%	16.46%	15.44%	16.05%	15.80%
NCMP, Year Six, % coverage	93.8%	90.1%	90.3%	92.1%	82.7%	90.7%	92.9%	86.4%	90.3%	90.0%
Alcohol-Related Admissions, DASR/100k	1306.3	1606.6	1238.3	2144.7	1621.8	1537.7	1936.2	1584.9	1582.8	1793.0
Smoking, NHS Assisted Quits	382	464	262	241	193	586	269	194	2598	on p.21
Smoking, % Quits CO Validated	83.8%	76.7%	75.2%	73.0%	59.1%	85.3%	75.8%	83.5%	78.1%	85.0%
Smoking, Quit Rate	59.1%	48.8%	61.2%	50.2%	44.2%	54.9%	46.3%	48.7%	51.7%	35-70%
Chlamydia Diagnosis Rate, 15 to 24	2597.7	2311.4	1515.7	1494.2	1161.9	2023.4	1178.7	1881.9	2043.0	2,400
Under 18 Conception Rate per 1,000	31.2	42.3	30.6	24.5	20.7	36.6	30.4	22.4	30.8	30.0
Clostridium Difficile, acute trust	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
MRSA Bacteraemia, acute trust	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Clostridium Difficile, acute & community	142	82	46	32	27	64	22	31	446	on p.21
MRSA Bacteraemia, acute & community	3	0	1	2	0	3	2	0	11	on p.21

Death Rates, All Age All Cause, Male	495.6	582.8	576.2	603.4	539.2	554.9	580.8	520.5	551.4	568.0
Death Rates, All Age All Cause, Female	379.6	435.4	403.0	409.6	392.4	413.8	367.1	425.0	401.4	402.0
Death Rates, Cancer, under 75	83.4	117.9	103.8	101.3	79.6	80.3	88.8	99.5	92.0	101.1
Death Rates, Circulatory, under 75	34.2	39.4	56.2	46.0	43.1	58.4	50.7	46.7	46.2	47.5