Sussex Health&Care

Brighton & Hove West Integrated Community Team Population Profile Pack

November 2023

Brighton and Hove West Integrated Community Team



LSOA (2021) based ICT boundaries. © Stadia Maps; © OpenStreetMap contributors



Introduction

16 geographically based Integrated Community Teams (ICTs) across Brighton and Hove, West and East Sussex have now been agreed.

The ICT Programme Team have since implemented an ICT Data Group, enabling ICB, Public Health, Local Authority, VCSE and wider stakeholders to meet and collaborate regularly in the development and design of Sussex ICT data core profiles.

The Sussex ICT model, will be driven by data and reflective of population needs. To do this effectively we need to access a variety of data sets that enable us to understand each of the ICTs' local demographics, health needs, social determinants and wider determinants of health.

Different data sources complimented by Local Knowledge and Community Insight will be key in highlighting specific needs and challenges faced by each ICTs population. This will allow us to construct the core offer that will be delivered by ICT delivery teams, design how these teams need to be configured and what might need further local tailoring due to marked differences in population need.

These opening ICT data packs are intended to set the scene for the ICTs. Whilst they alone will not provide the final answer, they are designed to help stimulate the questions which will. After initial release in December, the packs will develop further in response to feedback to help support the ICTs in their development.

Headline findings

- Important to note the high percentage of the data only available at Brighton & Hove level which provided limited insight at an ICT level
- Population and demographics Brighton & Hove West ICT neighbourhood has population size of 60,500. The West ICT is the most like the national
 average of all the city's four neighbourhoods in terms of age profile. It has seen increases in its population aged 50-59 years over the last decade but falls
 in most other age groups. Qualification and employment levels are some of the highest in the city.
- Deprivation as an overall average, the West ICT has the lowest levels of deprivation in the city with 5 out of 38 local neighbourhoods featuring the CORE20 deprived neighbourhoods or 12.4% of the local population living in the most deprived neighbourhoods. However, there is a notable inequalities across the ICT area, with some significant deprivation in the north around the Knoll and Mile Oak estates and up to a third of children and almost half of older people in some areas living in income deprivation.
- Health services- the West ICT area includes 5 primary care practices spread across 2 different PCNs. This the closest match between PCN geography and the new ICT neighbourhoods in the city. The West neighbourhood is known for its strong community health partnerships and their work in the north of the neighbourhood area in tackling health inequalities. There are lower proportions of people on disease registers in primary care but when patients are admitted to hospital, they stay longer on average which might warrant consideration of whether there is less early identification of long-term conditions. Brighton & Hove has a higher proportion of adult mental health admissions in which there was no prior contact with services.
- Population health- the standout health statistics for the west neighbourhood is the prevalence of poor mental health. Local self-harm and suicide figures are a lot higher than the national figure and for 10-24 years olds self-harm admission rates are over double the national figure. This is consistent with the other ICT areas in the city. Where health outcomes are measured at a neighbourhood level the West area population generally has better health outcomes than the other three neighbourhoods, though the variation in these across the ICT is known to be significant. Brighton & Hove wide population health figures that standout are poorer immunisation and cancer screening rates, alcohol and drug misuse and adults with serious mental illness taking up a physical health check.
- Health inequalities- local health professionals have highlighted specific estates set out above in terms of health inequalities, recognising particularly inequalities faced by non-English speakers. There are strong local community health partnerships supporting these communities.

These headlines were developed through the B&H ICT Steering Group which supports the work of the B&H Community Oversight Board

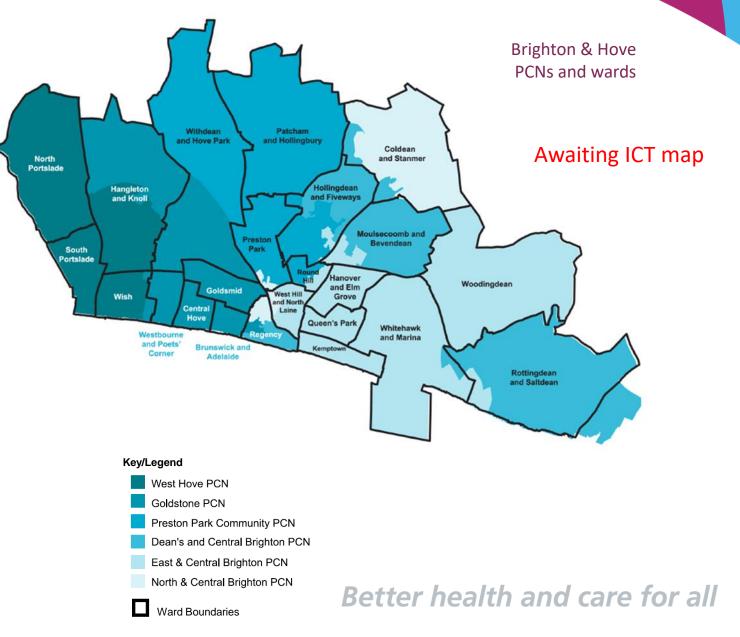
Brighton & Hove West ICT Geography



The geography of the ICT is not an exact match with NHS practice/PCN catchment.

By general rule the slides on the health of the population will be split by ICT residents and those slides on use of healthcare services split by GP/PCN registered population.

Where slides deviate from this it is noted



Summary Contents 1

Section	Slide	Contents	
Who lives here	Who lives in the ICT	Population, increases, reductions, broad age band %s	
	Key Demographics Key demographic groups within the ICT		
	Population change	ange Age-sex profile and expected increase, including households	
	Population Projections	An ageing population	
Building blocks of healthIntroduction		What do we mean by the building blocks of health	
	Deprivation	IMD, Core20, Child poverty, Benefits, Poverty, Earnings	
	Building blocks of health	Housing, Education, Employment, Crime	
What services are within the ICT	Map of services	Location of services within the ICT geography	

Summary Contents 2

Section	Slide	Contents	
		Headline summary of key indicators which are covered in more detail in the next 3 slides	
	Main Causes of ill health, life expectancy and inequalities	Life expectancy, mortality and inequality	
	Main Causes contributing to the gap in life expectancy	Causes of inequality in life expectancy	
	Key risk factors for main causes of death	Risk factors are behind the main causes of death	
Starting Well		Outcomes and factors affecting people at the start of life	
	Living Well	Outcomes and factors affecting people during Adult life	
	Ageing Well	Outcomes and factors affecting people in older age	
	Dying well	Palliative Care and deaths	

Summary Contents 3

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Section	Slide	Contents
Healthcare services - Primary Care	Primary Care services	Size and number of GP Practices, Enhanced Services
	Long Term Conditions (Disease Burden)	Disease Registers and QOF
	Other Primary care in the ICT	Dental Activity, vaccination levels and medicines use
Healthcare services – MHLDA	Mental Health and Learning Difficulties	Dementia Diagnosis Rate, Learning Disabilities AHC, Talking therapies,
Healthcare services - Community	Community Health Services	Community Nursing, Community Beds, Community Services
Healthcare services - Non Urgent CarePlanned Care alternatives and CancerAdvice and Guidance, DNA rates, PIFU, Cancer waiting time Cancer		Advice and Guidance, DNA rates, PIFU, Cancer waiting times, FIT testing
	Planned Care	New Outpatients, Follow Up Outpatients, Outpatients with Procedures, Daycase and Elective Inpatients, OPProc:DC:EL ratio
Healthcare Services - UEC	Urgent and Emergency Care	111 calls, 999 calls, Ambulance Mobilisations
	Acute Urgent Care	Emergency Inpatients, Long stay patients
	Care Homes: Urgent Healthcare use	Carehome numbers, 999 call rates, A&E and emergency admission rates
Adult Social Care	Adult Social Care	Contacts, patients receiving Long Term Support, Reported Quality of Life, Safeguarding concerns
Appendix	Links to useful sites	For more detail on the headlines in this pack

care for all

Who lives in Brighton & Hove West ICT

Around 60,500 people live in Brighton and Hove West ICT (2021 Census), an increase of 2.8% since 2011

For the **whole of Brighton & Hove** Between 2011 and 2020 there have been

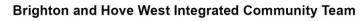
25,374 Births

19,227 Deaths

10,430 estimated **decrease** from internal UK migration 22,980 estimated increase from international migration

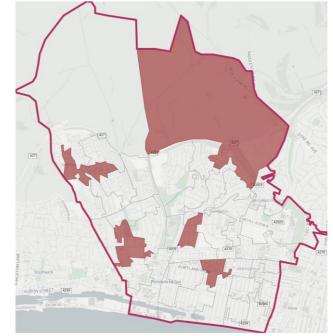
Census 2021 data for the ICT: 24% of the population is under 20, compared to 23% for England 16% of the population is 65 or over, compared to 18% for England 2.4% of the population is 85 or over, compared to 2.4% for England

1,014 residents aged 65+ live in a care home (with or without nursing) in the whole of Brighton and Hove





Brighton and Hove West ICT Core20 areas;



LSOA (2021) based ICT boundaries. © Stadia Maps; © OpenStreetMap contributors

Of the 38 neighbourhoods (2011 based LSOAs) in the Brighton and Hove West ICT, there are **5 Core20 neighbourhoods** (representing the most deprived 20% of neighbourhoods nationally) with a population of approximately 7,500 residents (Census 2021).

Core 20 neighbourhood

LSOA (2011) based boundaries. © Stadia Maps; © OpenStreetMap contributors

Key Demographic Groups within Brighton & Hove West ICT

Brighton & Hove West ICT has a younger age structure to England.

Relatively fewer residents are Black or racially minoritised than England at just over 1 in 5 people compared to over 1 in 4 people for England. Fewer people have English not as their main language, and a lower proportion do not speak English well.

Residents are more likely, than across England, to be lesbian, gay, bisexual or other minority sexual orientations than England, but the ICT has the lowest proportion in the city.

Residents are also more likely to have no religion or belief than England.

For other population groups, Brighton & Hove West ICT is similar to England.

Brighton & Hove West ICT population groups

Age	Ethnicity	Religion	Pregnancy & maternity
Brighton & Hove West has a younger age structure than England:	21.8% of people are Black or racially minoritised* (27%): • 4.0% Asian or Asian British (10%)	50.3% of people have no religion or belief (37%):	There were 521 live births in 2021 ²
J. J	 1.5% Black or Black British (4%) 4.3% Mixed or multiple ethnic group (3%) 	• 37.1% Christian (46%) • 0.5% Hindu (1.8%) • 3.5% Muslim (6.7%) • 0.1% Sikh (0.9%)	Sex
 24.0% of people are aged under 20 (23%) 60.1% aged 20-64 (58%) 15.9% aged 65+ (18%) 	 1.4% Arab (0.6%) 8.3% White Irish or White other (8%) 	 1.0% Jewish (0.5%) 0.6% Other religion 0.5% Buddhist (0.5%) (0.6%) 	Female 52.0% (51%) Male 48.0% (49%)
Gender identity	Sexual orientation	Language	Disability
0.5% of adults aged 16+ identified as Trans in the 2021 Census (0.5%)	6.2% of those aged 16+ identified as LGB+ (gay or lesbian, bisexual or other minority sexual orientation) (3%)	For 7.4% of people, English is not their main language (9%) 1.1% do not speak English well (1.6%)	18% of residents are disabled under the Equality Act (17%)
Children in care	Veterans	Marriage / civil partnership	Carers
At the end of March 2022, there were 382 children aged 0-17, 82 per 10,000, living in care in Brighton & Hove (England 70 per 10,000) ¹ UTLA	2.8% of people aged 16+ stated on the 2021 Census that they had previously served in the armed forces (3.8%)	42.1% of people aged 16+ are married or in a civil partnership (45%) 40.5% Never married/civil partnership (38%) 2.2% Separated (2%) 9.6% divorced/civil partnership dissolved (9%) 5.5% widowed / surviving civil partnership partner (6%)	8.8% of people provide unpaid care (9%) England figure in brackets Source: Census 2021 unless otherwise stated ¹ Department for Education, ² ONS * Non White UK/British UTLA: Only available at UTLA level

UTLA: Upper tier local authority

Current population & change over the last 10 years

In Brighton & Hove West ICT:

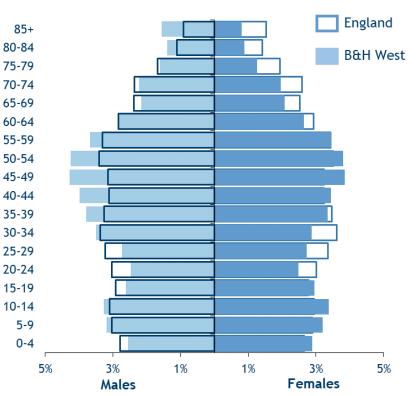
- There are relatively more children and young people aged 0-14 years than for England (the only ICT in the city where this is the case)
- There are relatively more people aged 35-59 years and relatively fewer people from the ages of 60-80 years

Between 2011 and 2021:

- The total population has increased by 2.8% which was lower than England (6.6%)
- The largest % increase was in 50-59 year olds, which has increased by 2,389 (35.2%) since 2011.
- There were decreases in most age groups up to 50 years.

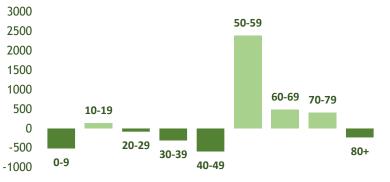
Total population 60,454

Brighton and Hove West population profile 2021



Increase in population 1,672

Brighton and Hove West change in population between 2011 and 2021 Census, in 10 year age groups



	2021	2011	B&H West		England
			change	%	%
0-19	14,536	14,916	-380	-2.5%	2.7%
20-64	36,300	34,653	1,647	4.8%	4.4%
65+	9,618	9,213	405	4.4%	20.1%
All ages	60,454	58,782	1,672	2.8%	6.6%

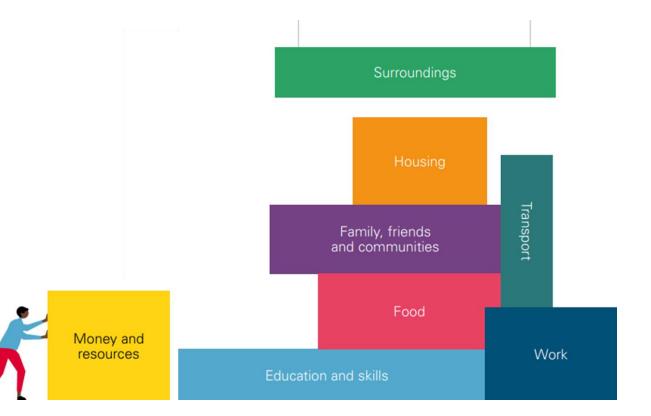
How is the population expected to change over the next ten years?

PLACEHOLDER SLIDE

Please note – population projections rebased for 2021 Census will not be published until 2025

The building blocks of Health

- When we don't have the things we need, like warm homes and healthy food, and are constantly worrying about making ends meet, it puts a strain on our physical and mental health. This results in poorer physical and mental health, earlier onset of conditions and earlier death.
- Almost every aspect of our lives impacts our health and ultimately how long we will live – our jobs and homes, access to education and public transport and whether we experience poverty or discrimination. These are the building blocks of health.
- To create a city where everybody can thrive, we need all of the right building blocks in place:



Source: <u>How to talk about the building blocks of health - The Health Foundation</u>

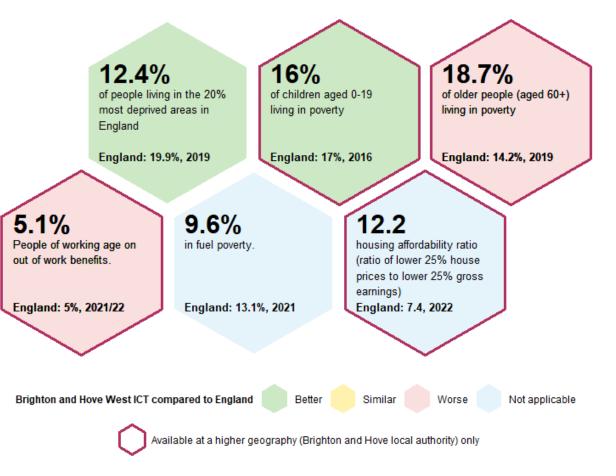
Building blocks of health in Brighton & Hove West ICT

There are relatively fewer people living in more deprived areas in Brighton & Hove West ICT than across England – at 1 in 8 people in West ICT compared to 1 in 5 in England living in the 20% most deprived areas.

Relatively fewer people are estimated to live in fuel poverty.

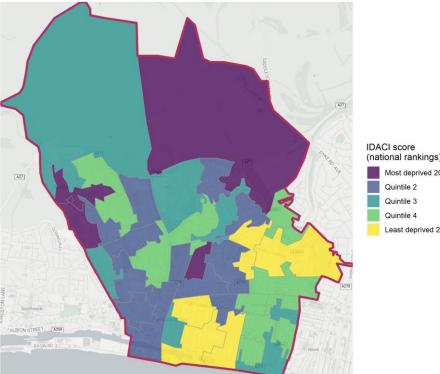
Across Brighton & Hove, there are fewer children living in poverty than England, but relatively more people are on out of work benefits and more older people live in poverty than England.

Housing cost is a significant issue in Brighton & Hove – with those on the lowest 25% of earnings requiring 12.2 times their earning to afford the lowest 25% of housing prices, compared to 7.4 times across England.



Building blocks in Brighton & Hove West ICT

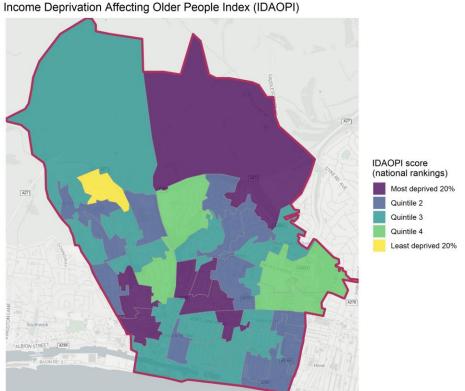
Income deprivation is defined as receiving Income Support or income-based Jobseekers Allowance or income-based Employment and Support Allowance or Pension Credit (Guarantee) or Universal Credit (in the 'Searching for work', 'No work requirements', 'Planning for work', 'Working – with requirements' and 'Preparing for work' conditionality groups) or families not in receipt of these benefits but in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs Income Deprivation Affecting Children Index (IDACI)



Most deprived 20% Quintile 2 Quintile 3 Quintile 4 Least deprived 20%

LSOA (2011) based boundaries. © Stadia Maps; © OpenStreetMap contributors

In Brighton & Hove West ICT, four of its 38 neighbourhoods had an IDACI score (proportion of 0-15s living in income deprived families) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 31.5% or one in three children experiencing income deprivation.



LSOA (2011) based boundaries. © Stadia Maps: © OpenStreetMap contributors

There were six neighbourhoods in the Brighton & Hove West ICT with an IDAOPI score (proportion of 60+ year olds living experiencing income deprivation) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 46% re for all or almost half of older people.

Building blocks of health in Brighton & Hove West ICT

Brighton & Hove West ICT is more densely populated than England.

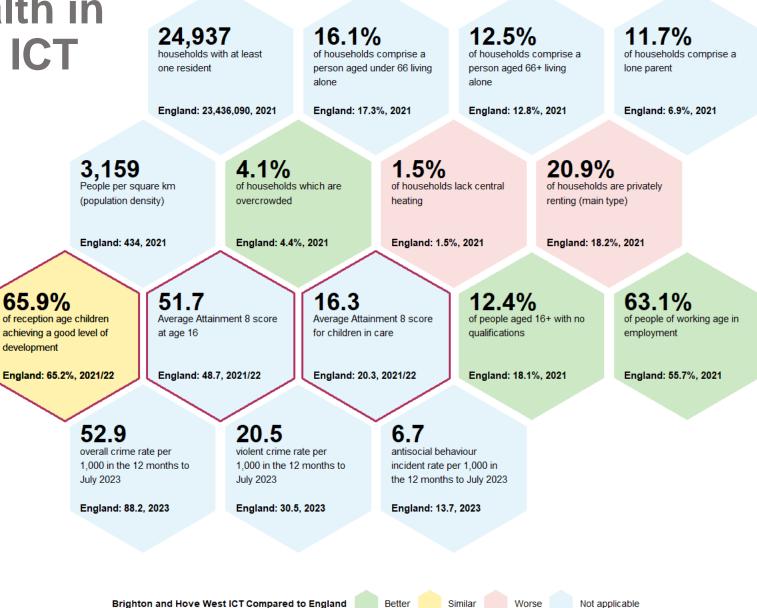
More households are privately rented, when compared to England, but West ICT has the lowest % within the city.

1 in 9 households are made up of lone parents, higher than England and the highest of any Sussex ICT area.

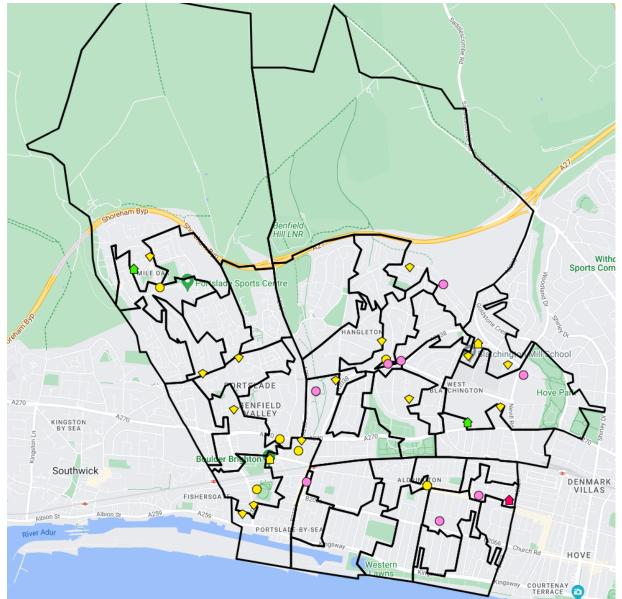
Lack of central heating is significantly higher in Brighton & Hove West ICT but overcrowding is lower.

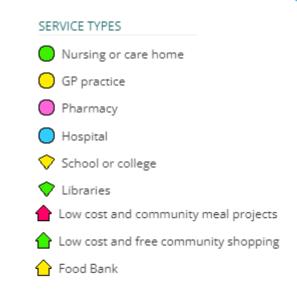
The population is relatively more educated and relatively more people are in employment.

The overall crime rate and violent crime rate and anti-social behaviour incident rate are all lower than England.

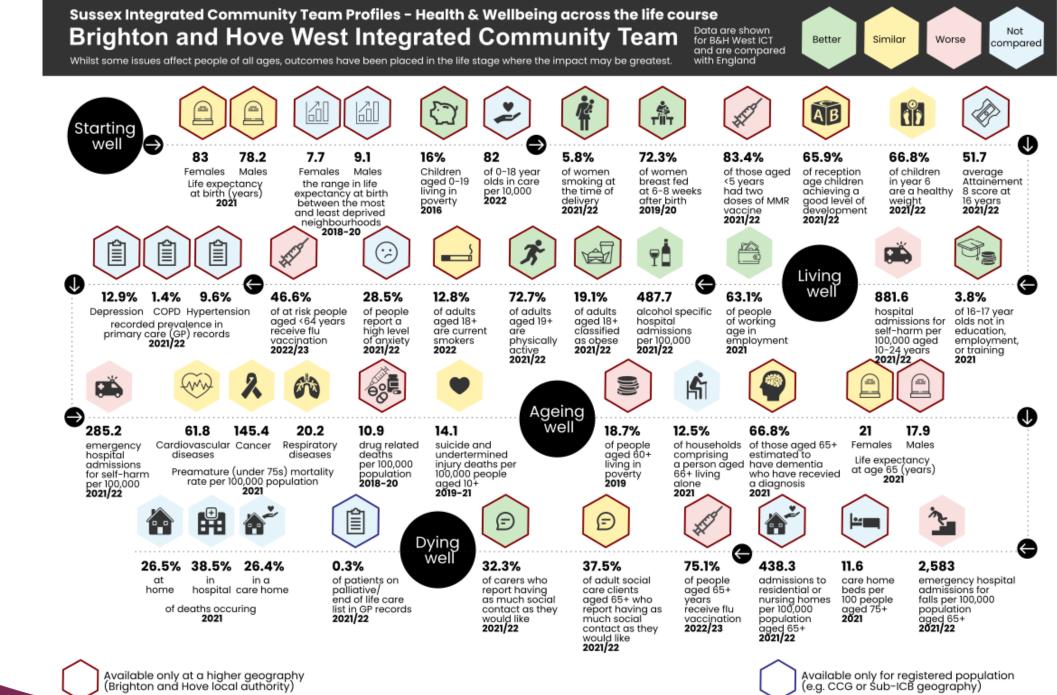


Services within Brighton & Hove West ICT





Local Insight (communityinsight.org)



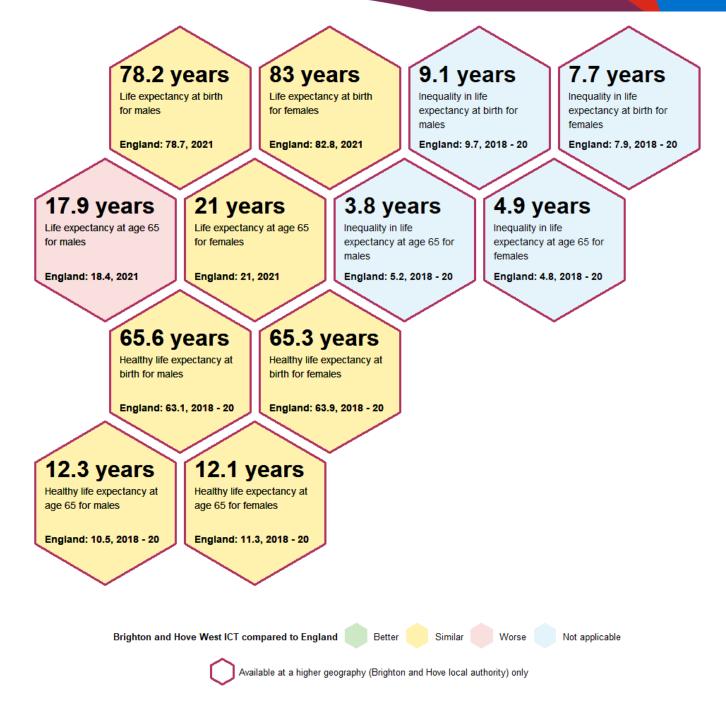
Life expectancy and inequalities – Brighton and Hove

Life expectancy and healthy life expectancy figures are only available for the whole of Brighton & Hove.

Life expectancy at birth in Brighton & Hove, for both males and females, is similar to England.

There is a gap of 9.1 years for men in life expectancy in Brighton & Hove (England 9.7 years) and 7.7 for women (England 7.9 years).

Life expectancy at age 65 for males in Brighton & Hove is significantly lower for males than for England. For females it is the same as England.



Main causes contributing to the gap in life expectancy – Brighton & Hove

These figures are only available for the whole of Brighton & Hove.

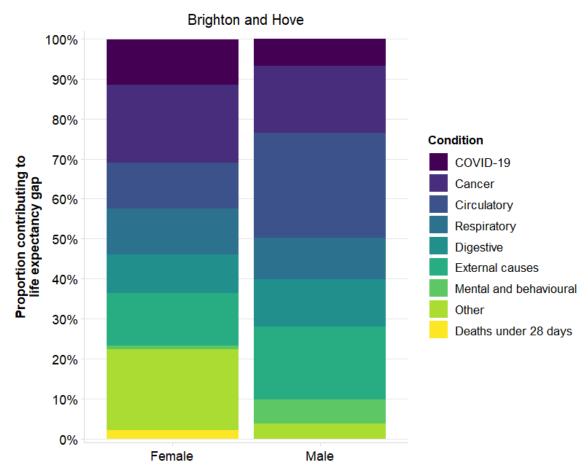
The causes of death which contribute the most to inequalities in life expectancy in Brighton & Hove are:

- For males circulatory, external causes (injury, poisoning and suicide) and cancer
- For females cancer, external causes, circulatory and respiratory diseases
- The contribution of external causes and digestives diseases (includes alcohol-related conditions, chronic liver disease, cirrhosis) is greater in Brighton & Hove than across England

Source: Segment Tool (phe.gov.uk)

Causes of death contributing most to inequalities in life expectancy between the most and least deprived quintiles (20%) of each area.

Brighton and Hove; data for 2020 and 2021 combined.



Data for lower tier local authorities has been included for 2014 to 2016 and 2017 to 2019, but have not been included for 2020 to 2021 as the breakdowns based on 2 years of data are not robust due to small numbers.

Key risk factors and greatest burden of disease – Brighton & Hove

If we want to improve population health, we need to understand what the risk factors are for Brighton & Hove's population and whether, and how, we can modify them. These figures are only available for the whole of Brighton & Hove.

Top 20 causes of the greatest burden of ill health

	the Breatest Barach
1 Ischemic heart disease	
2 Low back pain	
3 COPD	
4 Lung cancer	
5 Diabetes	
6 Depressive disorders	
7 Stroke	
8 Headache disorders	
9 Drug use disorders	
10 Falls	
11 Neck pain	
12 Alcohol use disorders	
13 Other musculoskeletal	
14 Colorectal cancer	
15 Lower respiratory infect	
16 Alzheimer's disease	
17 Self-harm	
18 Cirrhosis	
19 Anxiety disorders	
20 Endo/metab/blood/immur	ie

Communicable, maternal, neonatal, and nutritional diseases Non-communicable diseases Injuries Top 20 risk factors

	-
1 9	Smoking
2 I	High body-mass index
3 I	ligh fasting plasma glucose
4 /	Alcohol use
5 I	High blood pressure
6 [Drug use
7 I	High LDL
8 I	.ow temperature
9 l	ow whole grains
10	Occupational carcinogens
11	Kidney dysfunction
12	Particulate matter
13	Low physical activity
14	Occupational ergonomic
15	High processed meat
16	Low bone mineral density
17	High red meat
18	Secondhand smoke
19	Low fruit
20	Low birth weight & short gestation

Metabolic risks Environmental/occupational risks Behavioral risks To improve life expectancy, healthy life expectancy, inequalities in both life expectancy and healthy life expectancy:
Tackle major behavioural risks – tobacco, diet, exercise, alcohol and drugs
Diabetes is a rising concern
CVD reduction – including controlling blood pressure key and has

considerable population impact

•Cancer major cause of ill health, importance of behaviours and screening •Mental health

•Immunisation

•Air quality and cold homes

In addition, for healthy life expectancy and inequalities in healthy life expectancy tackle:

•MSK and pain management

•Sensory impairment

Source: Global Burden of Disease Visualisations: Compare (thelancet.com)

Starting well in life in Brighton & Hove West ICT

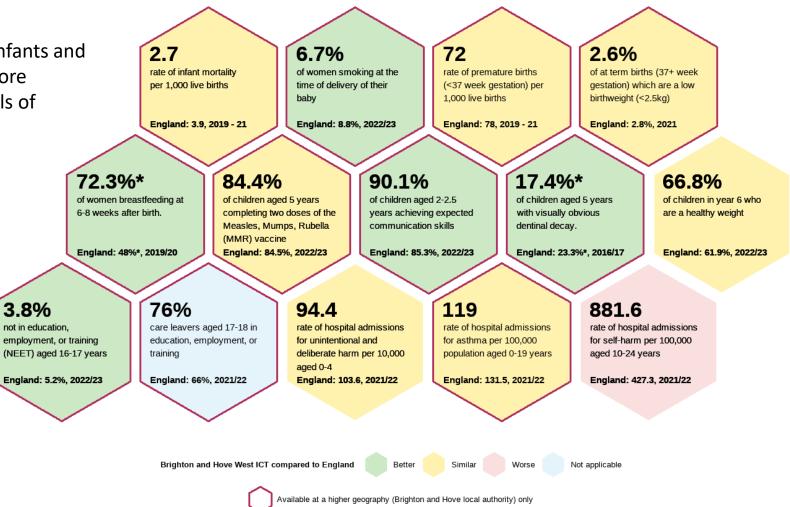
Many of these figures are only available for the whole of Brighton & Hove.

Brighton & Hove does well in some areas for infants and very young children: fewer mothers smoke; more breastfeed; more children meet expected levels of communication skills at age 2-2.5 years.

However, MMR immunisation uptake is worse than England.

Brighton & Hove has significantly higher rates of smoking, drinking and drugs use in young people and poorer emotional wellbeing impacting young people's current & future wellbeing.

Hospital admissions for self-harm are worse than England in Brighton & Hove West ICT – and it is the highest of any Sussex ICT.



* Note: due to data quality issues for these indicators in recent years, data are shown for an older time period than is currently available for higher geographies (e.g. regionally and nationally)

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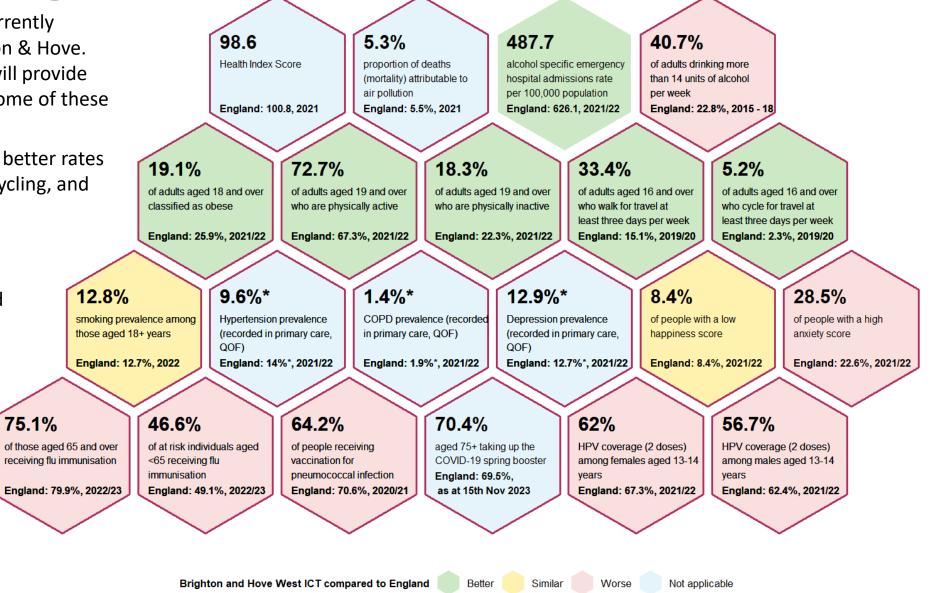
Living well in Brighton & Hove West ICT

Most of these figures are only currently available for the whole of Brighton & Hove. The 2024 Health Counts survey will provide information at ICT level around some of these indicators.

Brighton & Hove has significantly better rates of physical activity, walking and cycling, and obesity in adults.

However, relatively more adults have a high anxiety score, more adults drink above recommended level. The rate of alcohol specific admissions to hospital is significantly lower in the ICT than for England. 75.1%

Immunisation rates are low across most adult immunisation programmes for Brighton & Hove.



Available at a higher geography (Brighton and Hove local authority) only

Living well in Brighton & Hove West ICT

Brighton & Hove West ICT has significantly worse rates of emergency admissions for self-harm than England.

The ICT does not have higher rates of premature mortality for cardiovascular diseases, respiratory diseases or cancer than England.

Many of these figures are only currently available for the whole of Brighton & Hove.

Across Brighton & Hove there are worse rates of:

- Drug related deaths
- Cancer screening coverage and adults with serious mental illness taking up a physical health check.

61.8

premature (under 75s)

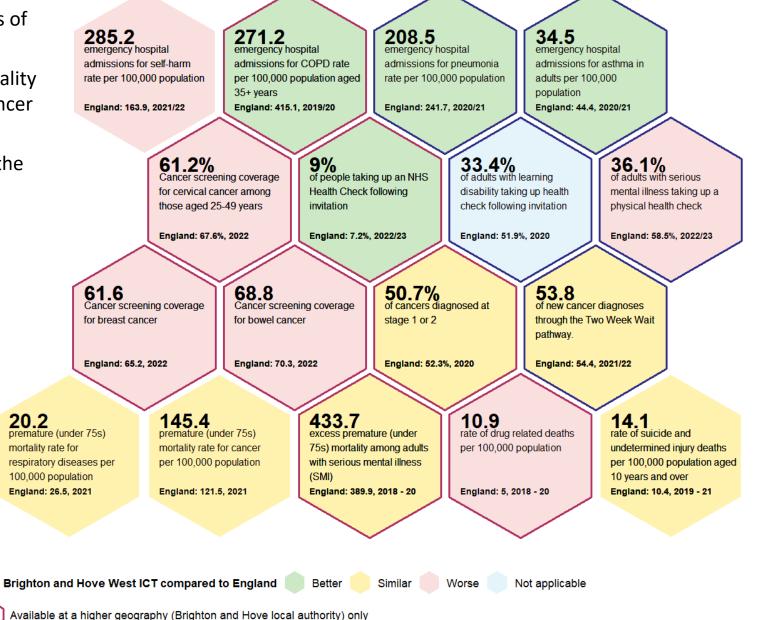
cardiovascular diseases per

mortality rate for

100,000 population

England: 76, 2021

However, there are relatively fewer emergency admissions for COPD, pneumonia and asthma for adults than for England. And relatively more people take up an NHS Health Check.



Indicators are published at primary care or other organisation level (NHS Brighton And Hove CCG and Sussex ICB - 09D) representing registered patients rather than residents

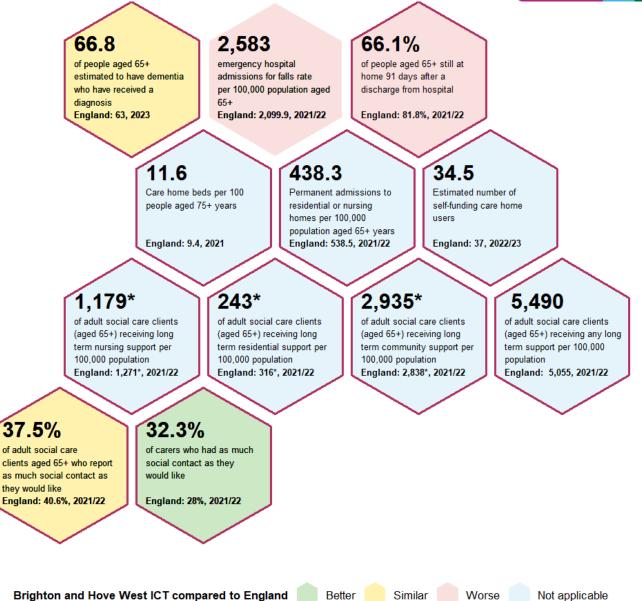
Ageing well – Brighton & Hove West ICT

Within Brighton & Hove West ICT there is a significantly higher rate of emergency hospital admissions for falls, as is the case for many ICTs in Sussex.

Many of these figures are only available for the whole of Brighton & Hove.

In Brighton & Hove:

- Relatively fewer people aged 65+ are still at home 91 days after discharge than for England.
- More carers said that they had as much social contact as they would like
- There are relatively more adults aged 65 or over receiving any adult social care long term support than England

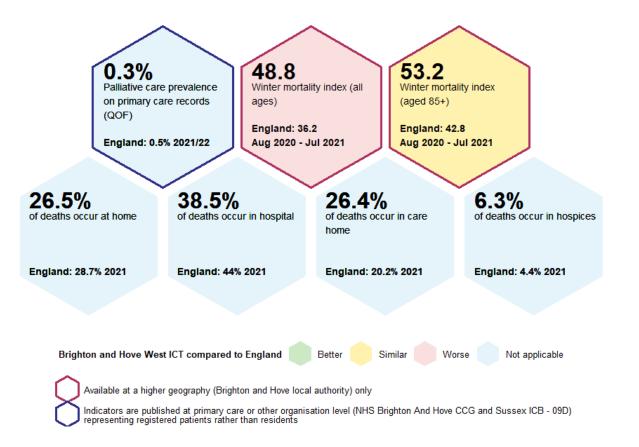


Dying well in Brighton & Hove West ICT

There are a limited set of indicators available around dying well.

Within Brighton & Hove West ICT in 2021, a similar proportion of deaths occurred at home compared to England, with a lower proportion in hospital and a higher proportion in a care home when compared with England. The Covid19 pandemic affected the place of death figures in 2021.

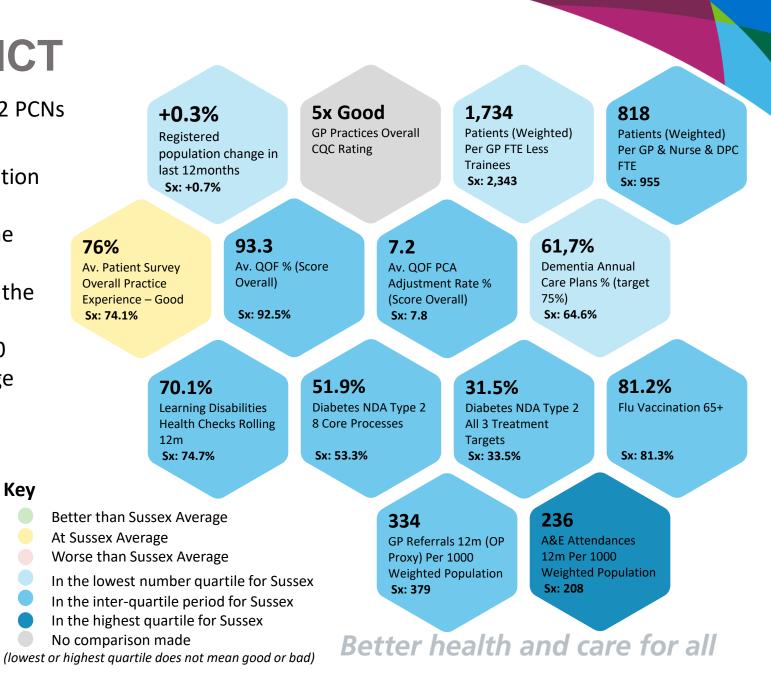
Some of these figures are only available for the whole of Brighton & Hove. In Brighton & Hove there is a higher winter mortality index than for England.



GP Primary Care in **Brighton & Hove West ICT**

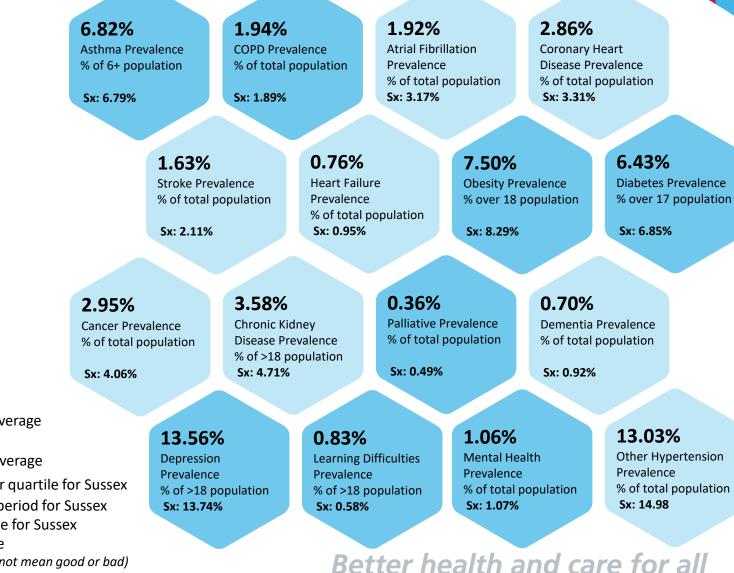
- Within Brighton & Hove West ICT there are 2 PCNs with 5 GP Practices
- There was a lower registered patient population • increase than the Sussex average
- There are fewer patients per GP, FTE than the Sussex average (less trainees)
- Annual Dementia Care plans are lower than the Sussex average and below the target of 75%
- There are higher A&E Attendances per 1,000 • weighted population than the Sussex average

Key



Long term conditions : QOF registers – Brighton & Hove West ICT

- Brighton & Hove West ICT has lower QOF prevalence than the Sussex average for:
 - Atrial fibrillation
 - Coronary heart disease
 - Stroke
 - Heart failure
 - Cancer
 - Chronic kidney disease
 - Dementia
 - Other hypertension

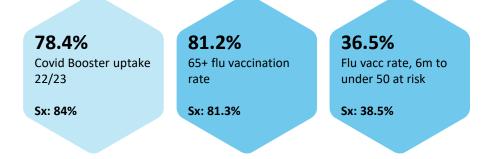


Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made
- (lowest or highest quartile does not mean good or bad)

Primary Care 2 – Brighton & Hove West ICT

- Brighton & Hove West ICT has lower immunisation uptake for:
 - Covid booster



Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

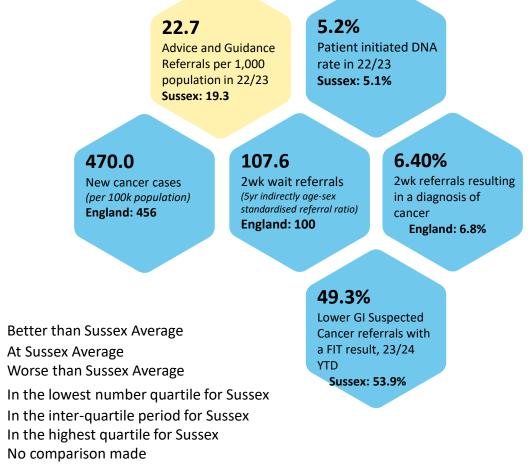
Mental health – Brighton & Hove Figures are only available at East Sussex, West Sussex and Brighton Areas

- Brighton and Hove has a lower recovery rate from Talking Therapies than the Sussex average
- Dementia Care planning, support are higher than the Sussex average
- Diagnosis rate against the expected level are higher than the Sussex average
- Brighton and Hove has a higher proportion of adult mental health admissions in which there was no prior contact with services
- A slightly lower proportion of mental health adult discharges were followed up within 72 hours
- Access rate to specialist perinatal care is lower than the Sussex average

6.415 45.2% 67.4% 69.1% 68.1% **NHS Talking Therapies** EIP: % of people starting Dementia Care Planning **NHS Talking Therapies** Dementia Diagnosis treatment within 2 wks and Post Diagnostic recovery rate Access rate Rate (22 - 23)Support (Av Apr-Aug 23) (22-23)(Av Apr-Aug 23) Sx: 67.7% (Av Apr-Aug 23) Sx: 51.0% Sx: 38,072 Sx: 63% Sx: 66.4% 14.0% 82.9% 33,405 1,462 Adult MH Admissions **Community Mental** Physical Health Adult Discharges Health Access rate with no prior contact Checks for people followed up within 72 (2+ contacts) (22-23)hrs (Av Oct22-Jun23) with SMI (YTD Jun-23) (Jul22-Jun23) Sx: 7,166 Sx: 5.7% Sx: 88.3% Sx: 45,890 35.675 3.920 1,098 CYP Access CYP Access Learning Disability **Registers and AHCs** (1+ contact) 18-25 vr olds delivered by GPs (22-23)(22-23)(22-23)Sx: 237.410 Sx: 15.741 Sx: xx Better than Sussex Average 250 8.7% At Sussex Average Perinatal mental Perinatal mental Worse than Sussex Average health: Access rate to health: Access rate to specialist Perinatal specialist Perinatal In the lowest number quartile for Sussex MH (22-23) MH (YTD 23) In the inter-quartile period for Sussex Sx: 780 Sx: 10.0% In the highest quartile for Sussex No comparison made Better health and care for all (lowest or highest quartile does not mean good or bad)

Planned Care Alternatives and Cancer Care – Brighton & Hove West ICT

- Brighton & Hove West ICT is similar to the Sussex average for all indicators presented on planned care alternatives and cancer care
- The four Brighton ICTs have the four lowest rate of 2week rule referrals which result in a cancer diagnosis

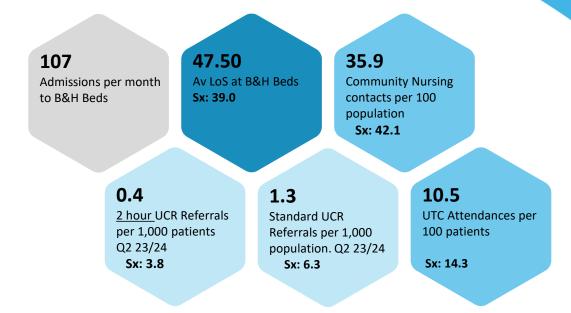


(lowest or highest quartile does not mean good or bad)

Key

Community Health Services – Brighton & Hove West ICT

- Brighton Community Beds have the highest length of stay of community beds in Sussex
- Brighton & Hove ICTs all had a significantly low rate of both 2 hour and standard Urgent Community Response



Figures above are for the full year 22/23 unless stated otherwise

Key

Better than Sussex Average
At Sussex Average
Worse than Sussex Average
In the lowest number quartile for Sussex
In the inter-quartile period for Sussex
In the highest quartile for Sussex
No comparison made
(lowest or highest quartile does not mean good or bad)

Acute Planned Care – **Brighton & Hove West ICT**

- Key Hospital Sites in Brighton have a significantly higher level of patients waiting both over 52 weeks and 65 weeks for Elective Acute care
- Brighton & Hove West ICT has lower rates, compared to Sussex average for:
 - New outpatient appointments
 - Outpatient procedures
 - Daycase inpatient admissions



5,254 (14.2%) Patients waiting 52+ weeks for all patients at RSxCH Sussex: 9.4%

2,025 (5.5%)

Patients waiting 65+ weeks for all patients at RSxCH Sussex: 2.8%

16,007

Total RTT Waiting List for all patients at other Brighton UHSx sites

1,949 (12.2%) Patients waiting 52+ at other Brighton UHSx sites

636 (4.0%)

weeks for all patients Sussex: 9.4%

Patients waiting 65+ weeks for all patients at other Brighton

UHSx sites Sussex: 2.8%

101.15

New Outpatient Appointments (per 100 population) Sussex: 124.56

244.45 Follow Up Outpatient Appointments

(per 100 population) Sussex: 271.98

2.00

Admissions

Sussex: 2.00

63.97 **Outpatient Procedures** (per 100 population)

Sussex: 78.38

23.62 Daycase Inpatient Admissions (per 100 population) Sussex: 27.49

32:12:1

Overnight Inpatient Ratio of Outpatient: Daycase: Overnight (per 100 population) Procedures (of available activity types) Sussex: 39:14:1

Figures above are for the full year 22/23 unless stated otherwise Better health and care for all

Key

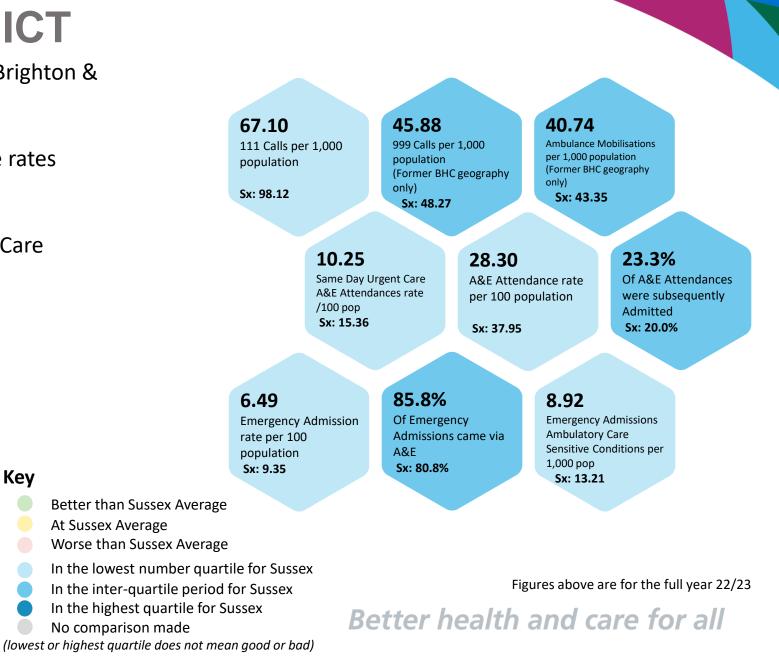
- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

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Urgent and Emergency Care – **Brighton & Hove West ICT**

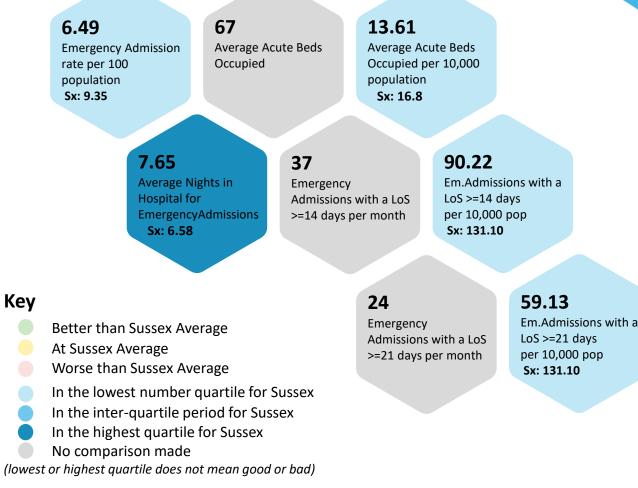
- The rates for the following are all lower in Brighton & • Hove West ICT than the Sussex average:
 - 111 calls •
 - Same day urgent care A&E attendance rates
 - A&E attendance rate •
 - **Emergency admission** ٠
 - Emergency admission for Ambulatory Care Sensitive conditions

Key



Acute Inpatient Emergency Care – Brighton & Hove West ICT

- The emergency admission rate and the rate of acute beds occupied by Brighton & Hove West ICT patients is lower than the Sussex ICT average
- When they are admitted, the number of nights patients spend in hospital is comparatively high
- But the rate of Emergency Admissions which stay for more than 14 or 21 days is significantly lower than the Sussex average
- This suggests a low level of very short and very long admissions



Figures above are for the full year 22/23 unless stated otherwise

Care homes: Urgent Healthcare use – Brighton & Hove West ICT

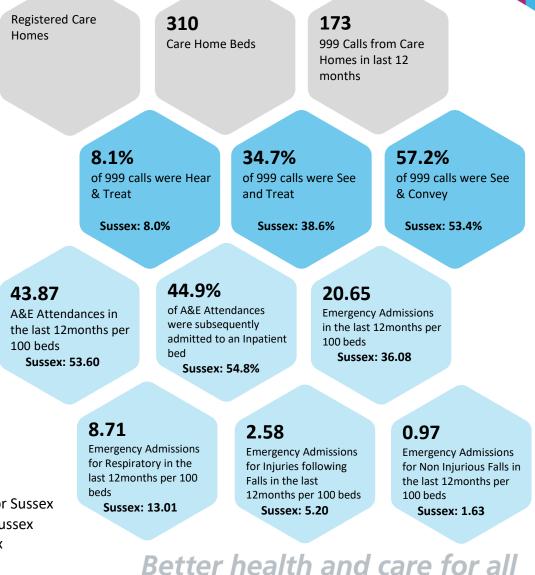
- Brighton & Hove West ICT is lower than Sussex average for:
 - A&E attendances from care homes
 - A&E attendances from care homes subsequently admitted to an inpatient bed
 - Emergency admissions from care homes •
 - Emergency admissions from care homes for respiratory condition
 - Emergency admissions from care homes for injuries following falls and for non-injurious falls



Key

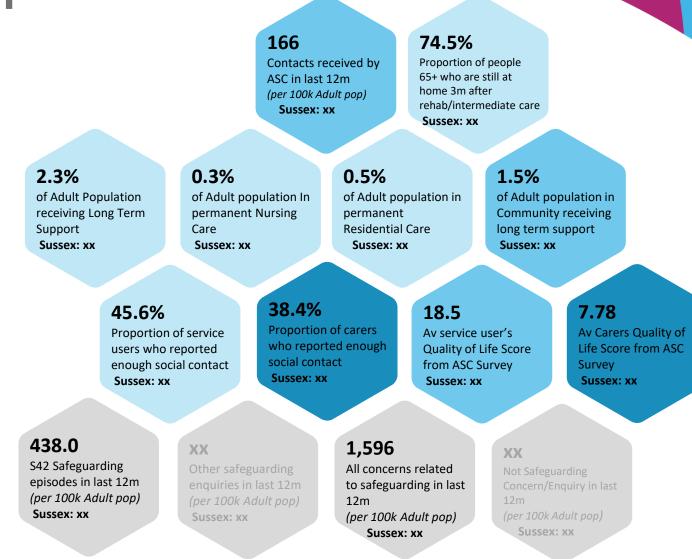
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)



Adult Social Care – Brighton & Hove West ICT

- The number of contacts received by Adult Social Care (ASC) is reported differently across the three areas of Sussex.
- Within Brighton & Hove, Brighton & Hove West ICT has a lower proportion of people aged 65+ who are still at home 3 months after rehab/intermediate care
- A lower proportion of the adult population in Brighton North ICT are:
 - Receiving long term support
 - In permanent Nursing care
 - In permanent Residential care
- The proportion of service users who reported enough social contact is lower than the average for Brighton & Hove and East Sussex (47%)
- More carers reported having enough social support and carers quality of life score is higher than the Brighton & Hove and East Sussex Average (7.5)



Better health and care for all

Кеу

In the lowest Quartile for Sussex

- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

Links to key resources

Local mappings sites

- Community insight Brighton & Hove Local Insight (communityinsight.org)
- East Sussex in figures <u>Welcome to ESiF (eastsussexinfigures.org.uk)</u>
 JSNAs
- Brighton & Hove Joint Strategic Needs Assessment (JSNA) (brighton-hove.gov.uk)
- East Sussex East Sussex Joint Strategic Needs Assessment | (eastsussexjsna.org.uk)
- West Sussex <u>Welcome to the West Sussex JSNA West Sussex JSNA Website</u>
- National tools with local area data
- SHAPE tool <u>SHAPE Shape (shapeatlas.net)</u> (registration required)
- Fingertips Public Health Profiles <u>Public health profiles OHID (phe.org.uk)</u>
- Census area profile builder <u>Build a custom area profile Office for National Statistics (ons.gov.uk)</u>
 NHS Sussex ICB
- Sussex Insight bank <u>https://int.sussex.ics.nhs.uk/nhs-sussex/tools-for-your-work/insight-bank/</u>
- ICB Information Station