

Map of CCG boundary



BRACKNELL & ASCOT CLINICAL COMMISSIONING GROUP

LOCALITY PROFILE 2013

DRAFT v0.1 (19.7.13)

Public Health Services for Berkshire

Working together for the health and wellbeing of Berkshire

Title	Bracknell & Ascot Clinical Commissioning Group: Locality Profile 2013
Purpose of Document	To provide information about the health needs of the local population in order to support GP commissioners to develop their commissioning priorities. This has been produced as part of the Joint Strategic Needs Assessments for Berkshire.
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1. What is a Clinical Commissioning Group Locality Profile?

The Clinical Commissioning Group (CCG) locality profile has been produced to provide information about the health needs of the local population, as part of the Joint Strategic Needs Assessment for Bracknell Forest Council and the Royal Borough of Windsor & Maidenhead. This will support GP commissioners to identify the priorities for the local area and develop their commissioning priorities accordingly.

The profile will incorporate information from a variety of different national and local sources to:

- illustrate the demography of the area
- summarise key aspects of ill health
- assess variations in health needs between practices in the locality, as well as comparing the CCG with the Berkshire region and England as a whole

1.1 Who is included in the Bracknell & Ascot CCG profile?

This profile will include information about people who are:

- **Registered** with one of the 15 GP practices who belong to the CCG group (135,934 people as at 1/4/2011)

Binfield Surgery	Boundary House Surgery	Crown Wood Medical Centre	Easthampstead Surgery
Evergreen Practice	Forest End Medical Practice	Great Hollands Practice	Green Meadows Partnership
Heath Hill Surgery	Kings Corner Surgery	Magnolia House Surgery	Ringmead Medical Practice
The Gainsborough Practice	The Sandhurst Group Practice	The Waterfield Practice	

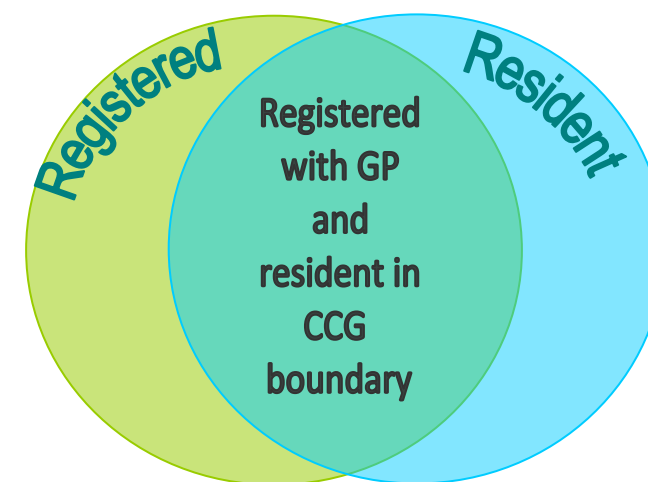
- **Resident** within the Bracknell & Ascot CCG boundary (approximately 131,296 people at Census 2011)

This resident group includes the population covered by Bracknell Forest Council and 2 wards in the Royal Borough of Windsor & Maidenhead (Ascot and Cheapside, Sunningdale).

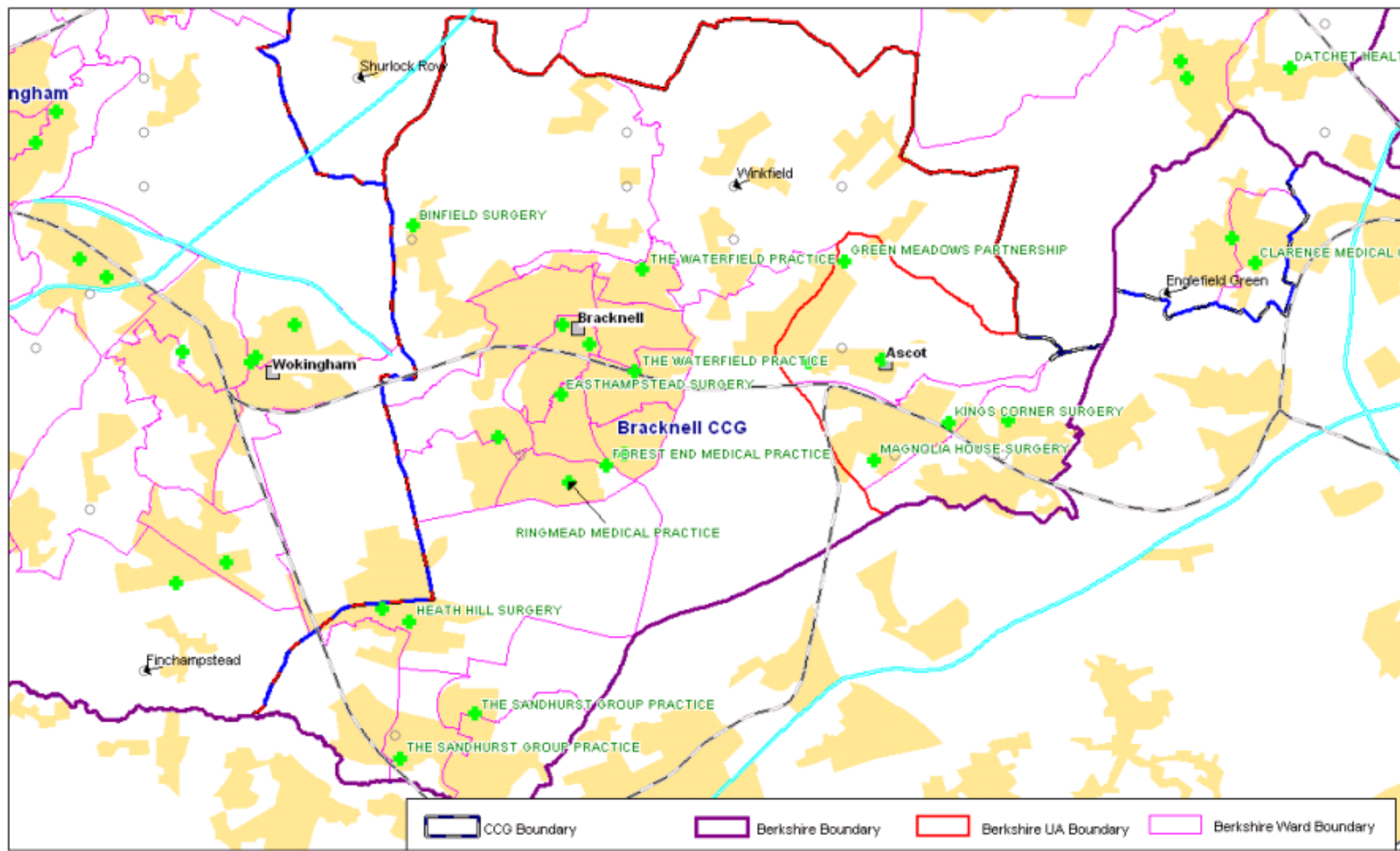
A large proportion of people will be included in both the 'registered' and 'resident' population groups, as shown in the diagram to the left. However, there will be a number of people who live inside the geographical boundary covered by the CCG who are not registered to a Bracknell & Ascot GP, as well as those who are registered with a Bracknell & Ascot GP who are not resident within the CCG boundary.

Wherever possible the 'registered' population information will be used in this profile, as this will directly link to the people who are being supported by Bracknell & Ascot CCG. However, some information may not be available at this level, so the resident population will be used instead. Each data source and table/chart shown included in this profile will be clearly labelled to show what population group is being used.

This locality profile has focussed on providing information that is available at a CCG level. As the Berkshire CCG boundaries are not coterminous with the different Local Authorities this does mean that some information is not currently available.



Bracknell CCG



Bracknell_CCG.WOR

23/3/2012

Sid Beauchant

BPHN/BHIS

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2. Summary of Bracknell & Ascot CCG Profile

Population

- Bracknell & Ascot CCG resident population is estimated to be 131,296 (Census 2011) and the registered population is 135,934.
- The population profile is similar to the national average; with a slightly smaller proportion of adults aged 20 to 29 and a higher proportion aged 35 to 54.
- The most deprived areas within the CCG boundary are Wildridings and Central, Crowthorne and Great Hollands North. These are all in the 20% most deprived neighbourhoods in Berkshire.

Health Behaviour

- Obesity: 9,372 people aged 16 and over are on the CCG's Obesity Register (8.6% of population). The highest prevalence for obesity is in Great Hollands North ward of Bracknell Forest Council.
- Obesity: 7.7% of children aged 4-5 and 14.7% of children aged 10-11 are obese.
- Binge drinking: Nearly 22% of people who live in specific neighbourhoods within Crown Wood and Hanworth are defined as binge drinkers
- Health eating: Neighbourhoods in the Priestwood and Garth ward had the lowest proportion of healthy eaters in the CCG at 21.7%.

Health

- There were 25,180 emergency admissions into hospital over a three year period (2006-2008).
- The prevalence of cardiovascular disease, cancer, respiratory disease and diabetes in Bracknell & Ascot CCG is very similar to prevalence profile of Berkshire. These are all lower than the national prevalence rate.

Patient Satisfaction

- In the latest GP Survey, Bracknell & Ascot CCG performed significantly better than the Berkshire CCG average in the proportion of people that would recommend their GP surgery to someone moving into the area and with the proportion of people who found it easy to contact the out-of-hours GP services by phone.
- The CCG scored significantly lower than the Berkshire CCG average in the percentage of people who felt they were overheard in the GP reception and also in the overall experience of making an appointment at the surgery.

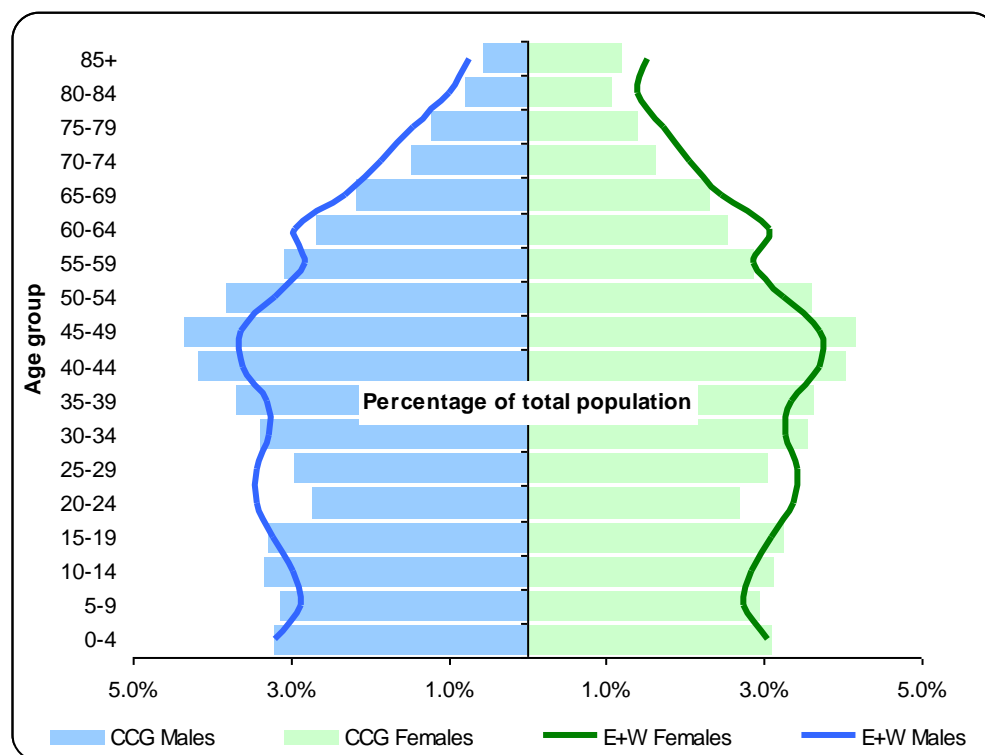
3. Demography

3.1 Population

The 2011 ONS Census reported that the resident population for the Bracknell & Ascot CCG locality is 131,296. The population profile is similar to the national average, with a slightly smaller proportion of adults aged 20 to 29 and a higher proportion aged 35 to 54.

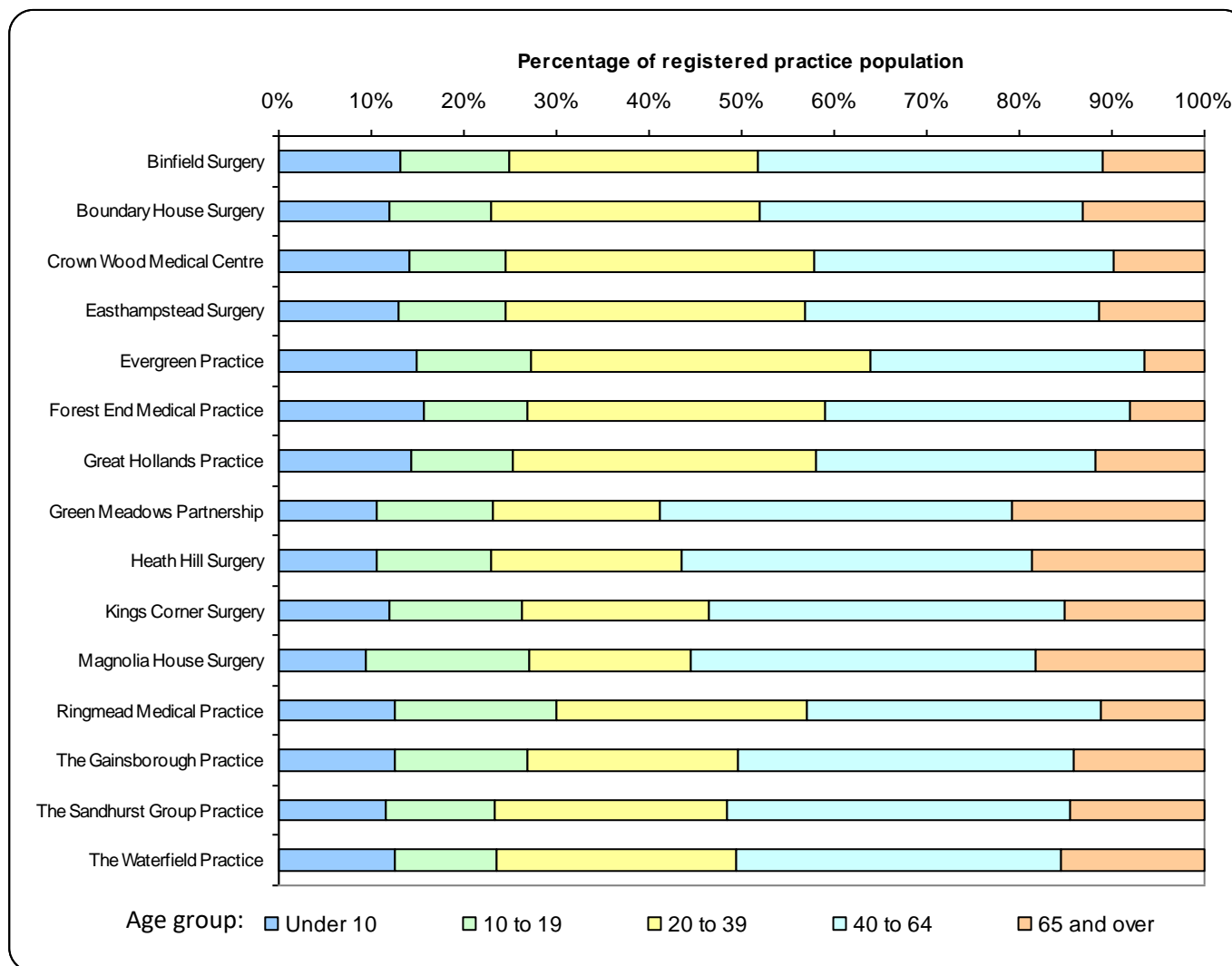
The registered population for Bracknell & Ascot CCG is higher at 135,934. This discrepancy will be made up of people who live outside of the CCG boundary. Figure 2 shows the registered population profile of Bracknell & Ascot CCG compared with the national profile.

Figure 2: Registered population pyramid for Bracknell & Ascot CCG compared with England and Wales (Attribution Dataset 2012)



Age Group	Male	Female	People
0-4	4341	4221	8562
5-9	4241	3985	8226
10-14	4529	4259	8788
15-19	4453	4433	8886
20-24	3676	3653	7329
25-29	4017	4148	8165
30-34	4592	4824	9416
35-39	4999	4924	9923
40-44	5647	5489	11136
45-49	5910	5663	11573
50-54	5159	4901	10060
55-59	4180	3890	8070
60-64	3639	3457	7096
65-69	2939	3133	6072
70-74	1984	2215	4199
75-79	1646	1892	3538
80-84	1080	1451	2531
85+	751	1613	2364
Total	67,783	68,151	135,934

Figure 3: Registered population by GP practice with an age group breakdown (Attribution Dataset 2012)



GP Practice	Total registered population
Binfield Surgery	9458
Boundary House Surgery	8128
Crown Wood Medical Centre	4484
Easthampstead Surgery	4857
Evergreen Practice	3346
Forest End Medical Practice	11533
Great Hollands Practice	3661
Green Meadows Partnership	10231
Heath Hill Surgery	7225
Kings Corner Surgery	7201
Magnolia House Surgery	9445
Ringmead Medical Practice	15343
The Gainsborough Practice	9961
The Sandhurst Group Practice	19646
The Waterfield Practice	11415

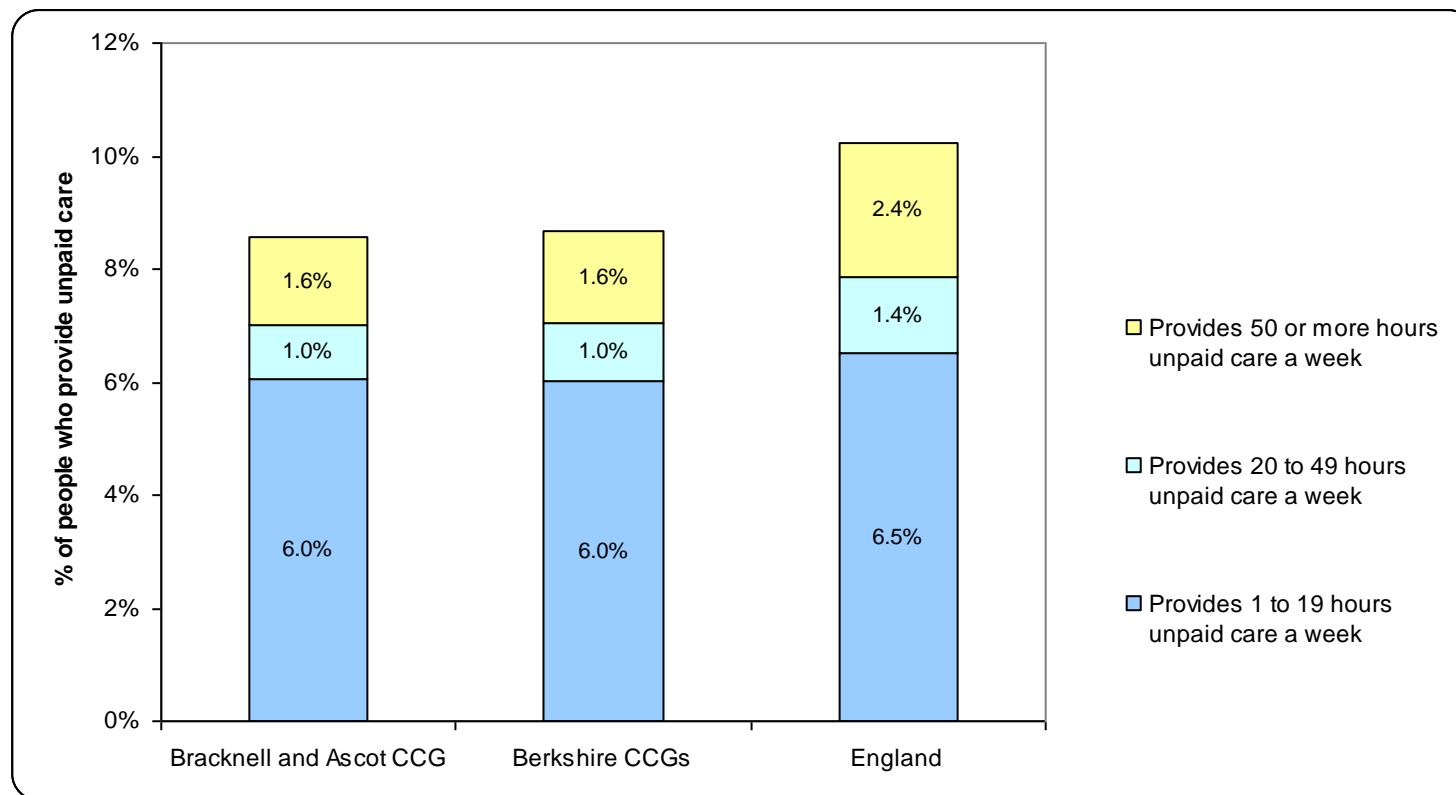
3.11 Specific population groups

The 2011 census has provided some more detailed information about specific population groups.

3.111 People providing unpaid care (Carers)

11,269 people identified themselves as a carer in the 2011 census, which is 8.6% of the CCG’s resident population.

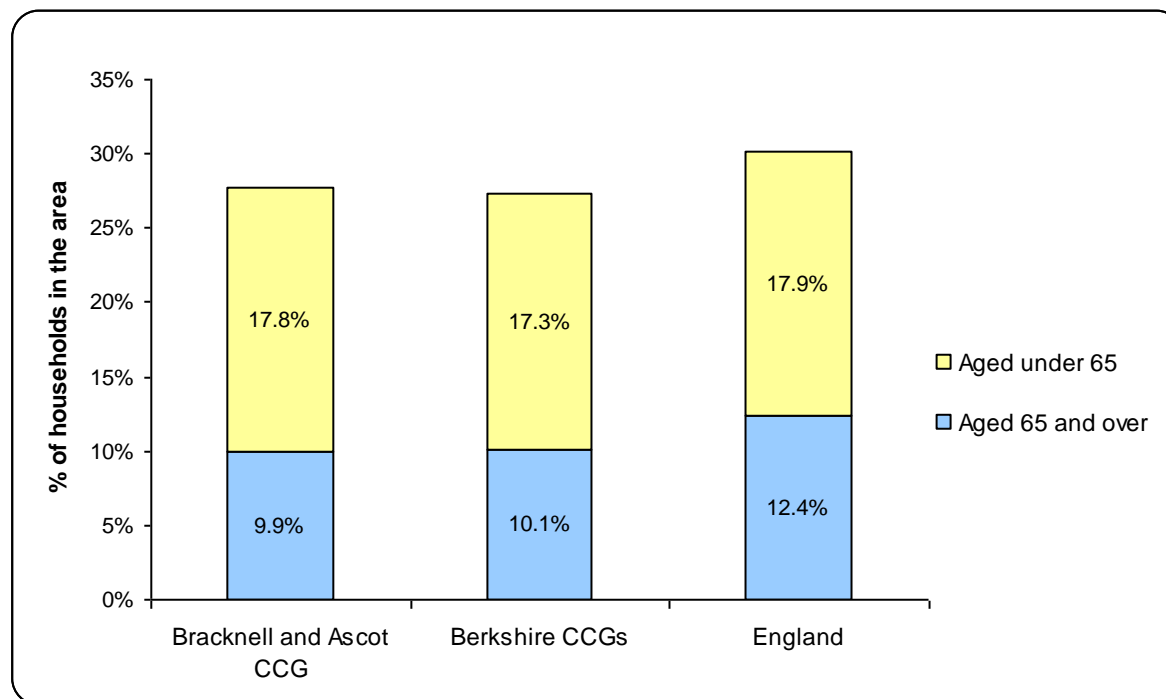
Figure 4: Percentage of resident population who provide unpaid care, compared with Berkshire and England (ONS Census 2011)



3.112 People who live alone

There are 52,882 households in the CCG boundary and 27.8% of these are occupied by people who live alone. 5,259 people aged 65 and over are living on their own, which is over 30% of people in this age group.

Figure 5: Percentage of households occupied by one person compared with Berkshire and England (ONS Census 2011)



% of people aged 65 and over who are living alone (ONS Census 2011)	
Bracknell & Ascot CCG	30.45%
Berkshire CCGs	29.61%
England	31.47%

3.113 People’s view of their own health

People were asked to comment on their level of health in the Census 2011 and whether this affected their day-to-day activities. More people in the Bracknell & Ascot CCG boundary felt that they had a good or very good level of health, compared with the Berkshire or England response. 975 people stated that they had a very bad level of health, which is 0.7% of the population.

Figure 6: People’s self-reported statement about their level of health compared with Berkshire and England (ONS Census 2011)

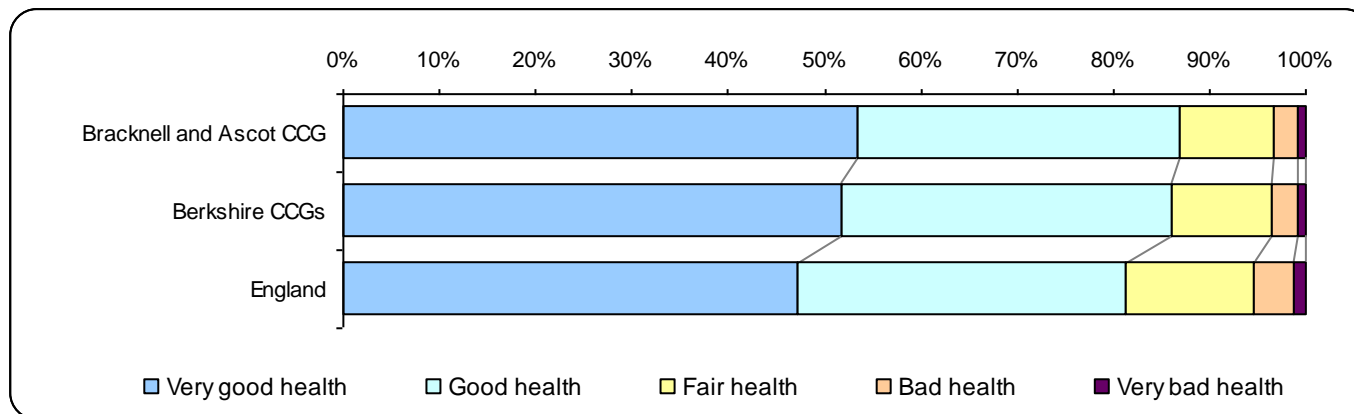
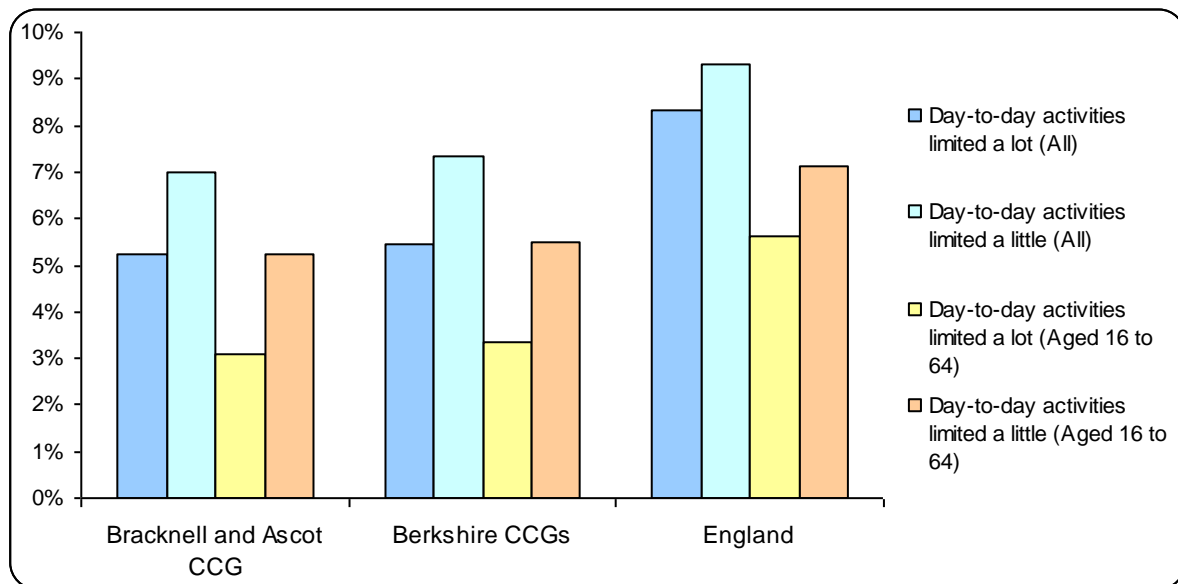


Figure 7: People’s self-reported statement about how their health affects their day to day activities compared with Berkshire and England (ONS Census 2011)

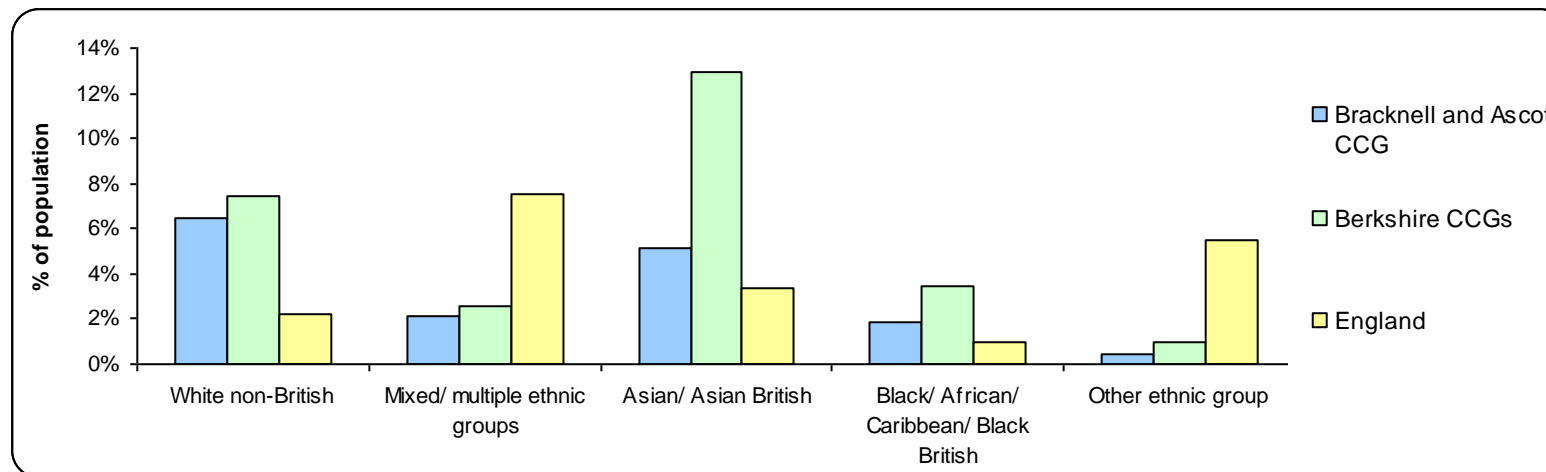


Number of people living in the Bracknell & Ascot CCG boundary who felt that their day to day activities were limited by their health (ONS Census 2011)		
All ages	Activities limited a lot	6864
	Activities limited a little	9183
Aged 16 to 64	Activities limited a lot	2666
	Activities limited a little	4515

3.2 Ethnicity

The 2011 census shows that 9.5% of the resident population of Bracknell & Ascot CCG are from a Black and Minority Ethnic (BME) group. An additional 6.4% are from a White non-British background, such as White Irish, Gypsy, Irish Traveller or European.

Figure 8: Ethnicity breakdown for the non White-British resident population of Bracknell & Ascot CCG (ONS Census 2011)



18,466 (14.1%) of the resident population were born outside of the UK and 2,187 (1.7%) have been resident in the UK for less than 2 years.

3.3 Employment

71.2% of the resident population were in employment during the 2011 census (aged 16-74). This compares with 67.9% across Berkshire and 61.9% nationally.

In total 3,137 people were registered as unemployed at the point of the census and 38% of these were long-term unemployed. 1,958 people were also economically inactive due to being long-term sick or disabled.

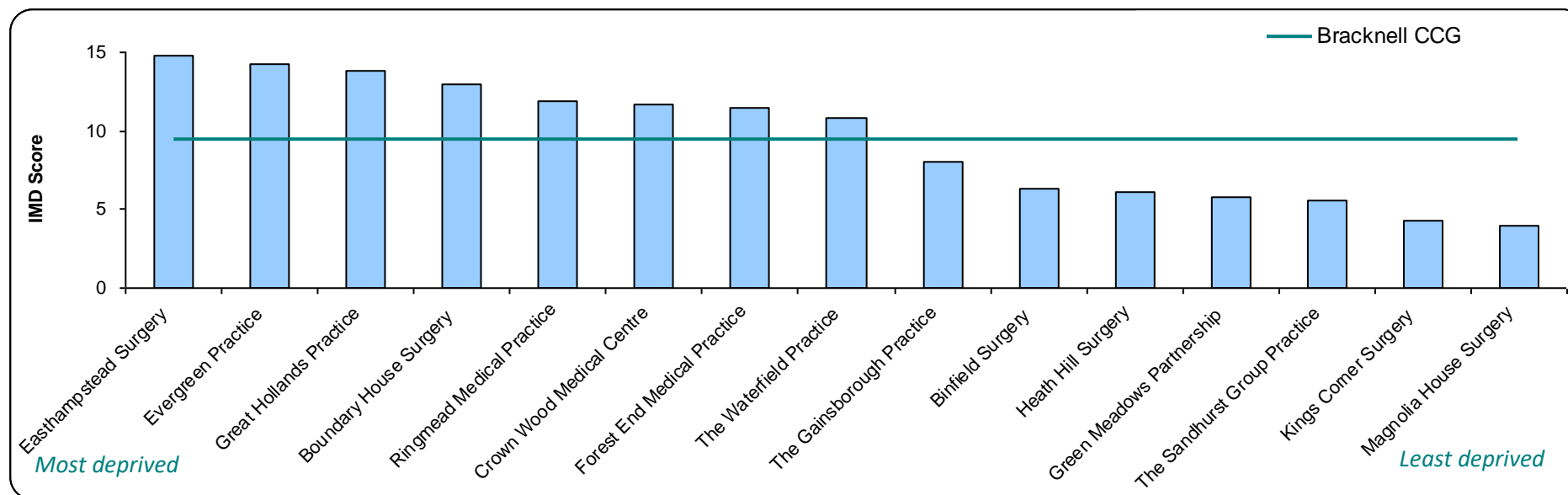
3.4 Deprivation

The Index of Multiple Deprivation (IMD) combines a number of indicators to measure the level of deprivation in an area. These cover seven different domains, including crime, health deprivation and disability, employment, education, skills and training, barriers to housing and services and living environment. The IMD enables neighbourhoods, or Super Output Areas (LSOAs), to be ranked against each other according to their level of deprivation. Each LSOA covers a population of 1000-3000 people and an area with a higher IMD score will be more deprived than another.

The Bracknell and Ascot CCG area is made up of 80 LSOAs. 48 (60%) of these are in the 20% least deprived areas in the country and none of them are in the 20% most deprived nationally. 3 LSOAs within the Bracknell and Ascot CCG boundary are in the 20% most deprived LSOAs in Berkshire. These include neighbourhoods in 3 Bracknell Forest Council wards (Wildridings and Central, Crowthorne and Great Hollands North).

GP practices can also have an IMD score, which is based on the weighted average of the IMD scores for each LSOA they have registrations in.

Figure 9: IMD deprivation scores by GP Practice, compared with the overall Bracknell and Ascot CCG score (IMD 2010, NHS Information Centre)



The IMD scores can also be broken down to focus on deprivation that affects certain groups, such as children and older people.

Figure 10: IMD deprivation scores for Older People by GP Practice (IMD 2010, NHS Information Centre)

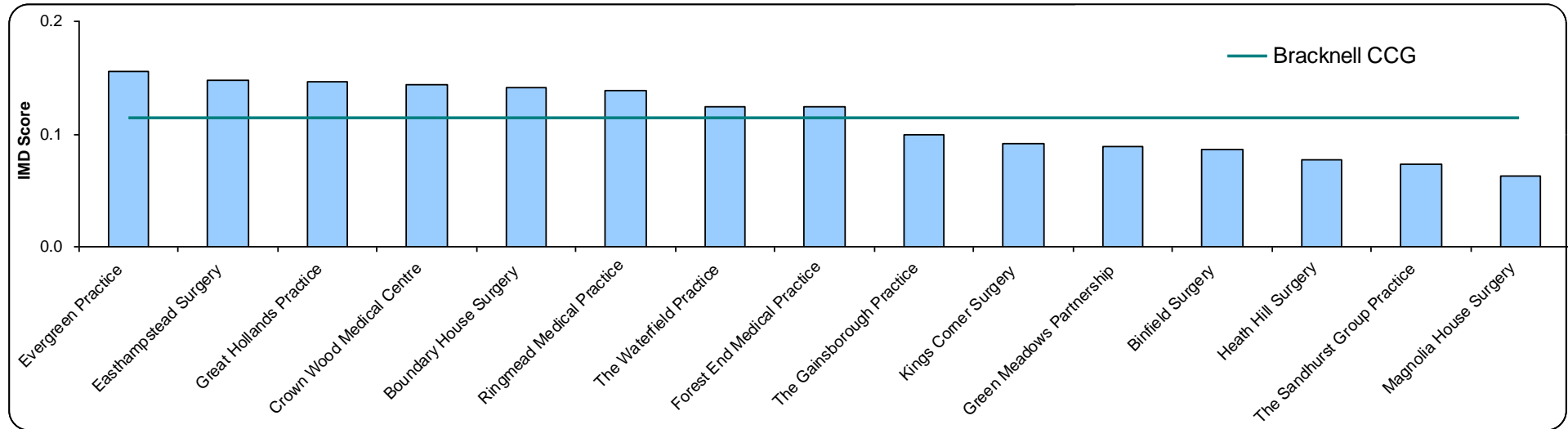
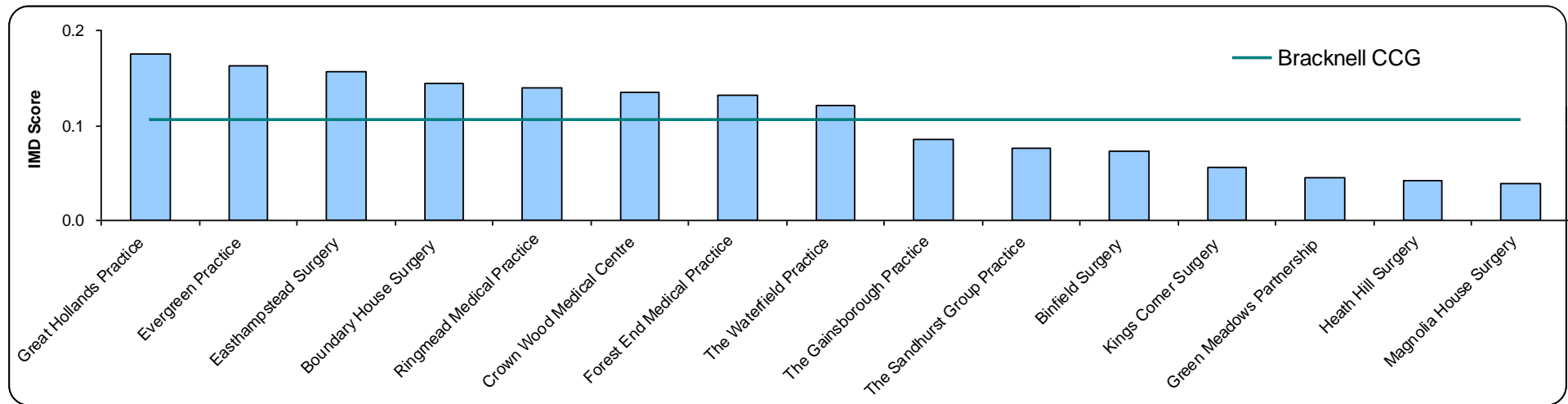


Figure 11: IMD deprivation scores for Children by GP Practice (IMD 2010, NHS Information Centre)



4. Health Behaviour

4.1 Smoking

****To be added****

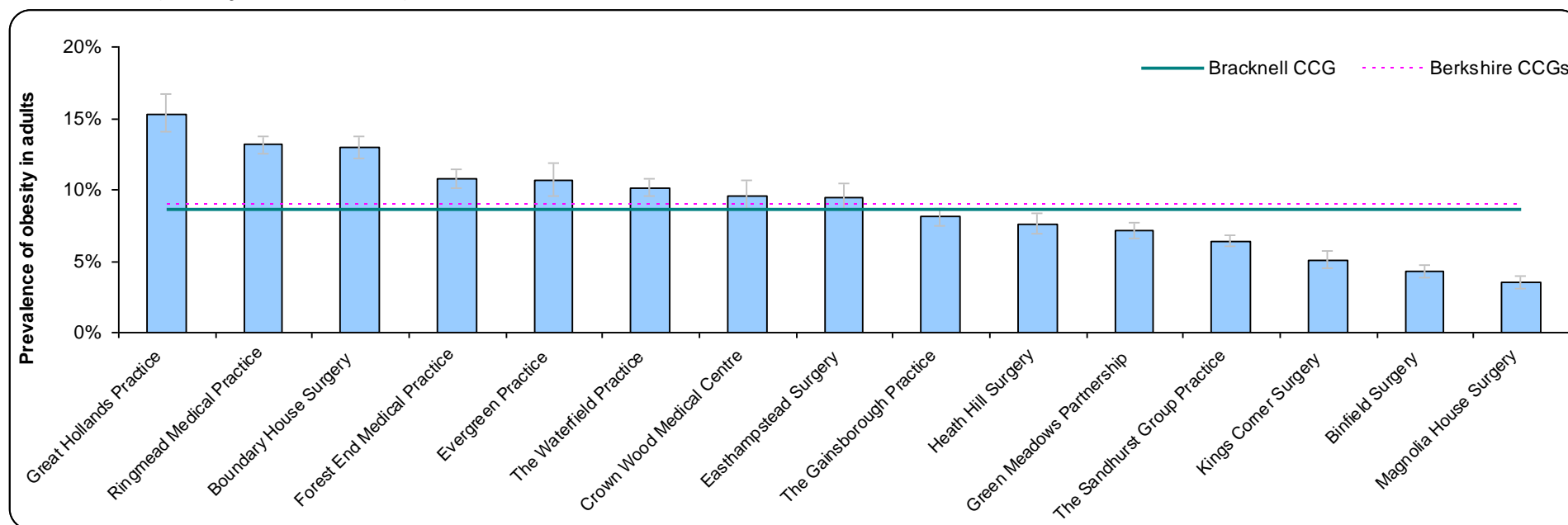
4.2 Lifestyle

4.2.1 Obesity

Obesity is indicated when an individual’s BMI is over 30. It increases the risk of heart disease, diabetes, stroke, depression, bone disease and joint problems and decreases life expectancy by up to nine years.

The Bracknell & Ascot CCG area have an obesity prevalence rate of 8.6% in the aged 16+ registered population. This is approximately 9,372 people. This prevalence rate is lower than both the Berkshire CCG area of 8.9% and the national prevalence rate of 10.7%.

Figure 13: Obesity prevalence for people aged 16 and over by GP Practice compared with the overall prevalence rate for Bracknell & Ascot CCG and all Berkshire CCGs (NHS Information Centre)



The National Child Measurement Programme measures the prevalence of obesity in 4-5 year olds (Reception) and 10-11 year olds (Year 6). Data from 2008/09 to 2010/11 shows that Bracknell & Ascot CCG have a lower prevalence rate in both age groups compared with the overall Berkshire CCG and national prevalence rates.

Figure 14: Obesity prevalence for children aged 4 to 5 years old, 2008/09 to 2010/11 (NCMP, NHS Information Centre)

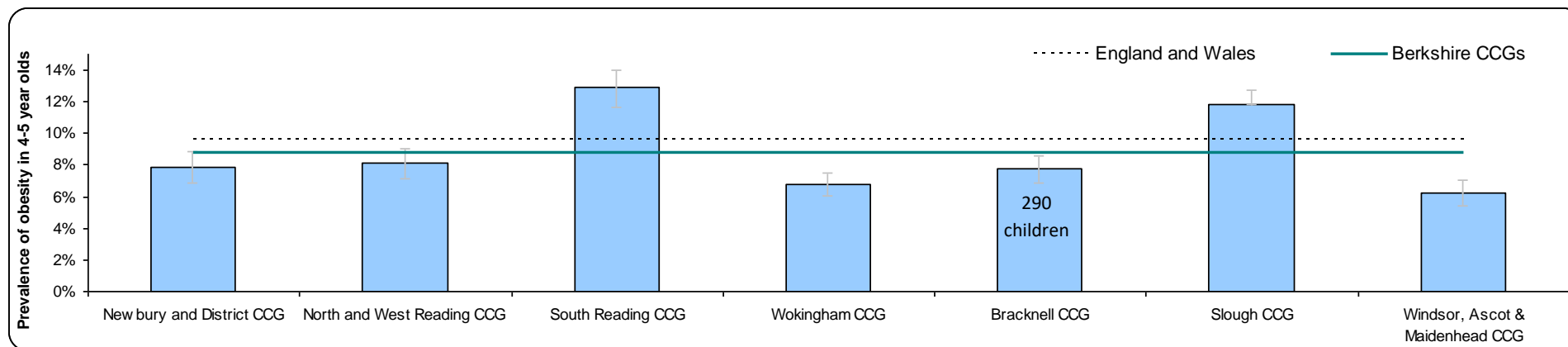
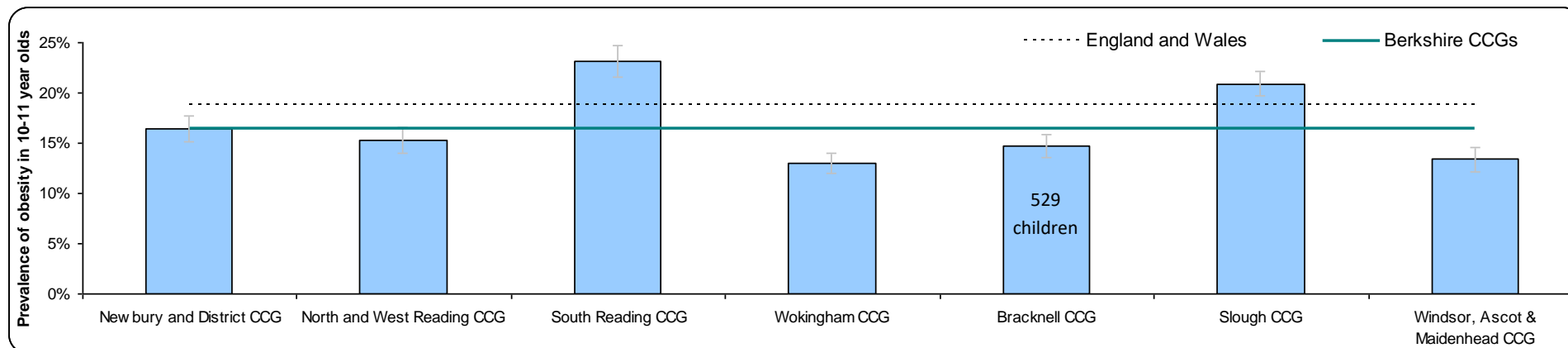


Figure 15: Obesity prevalence for children aged 10 to 11 years old, 2008/09 to 2010/11 (NCMP, NHS Information Centre)



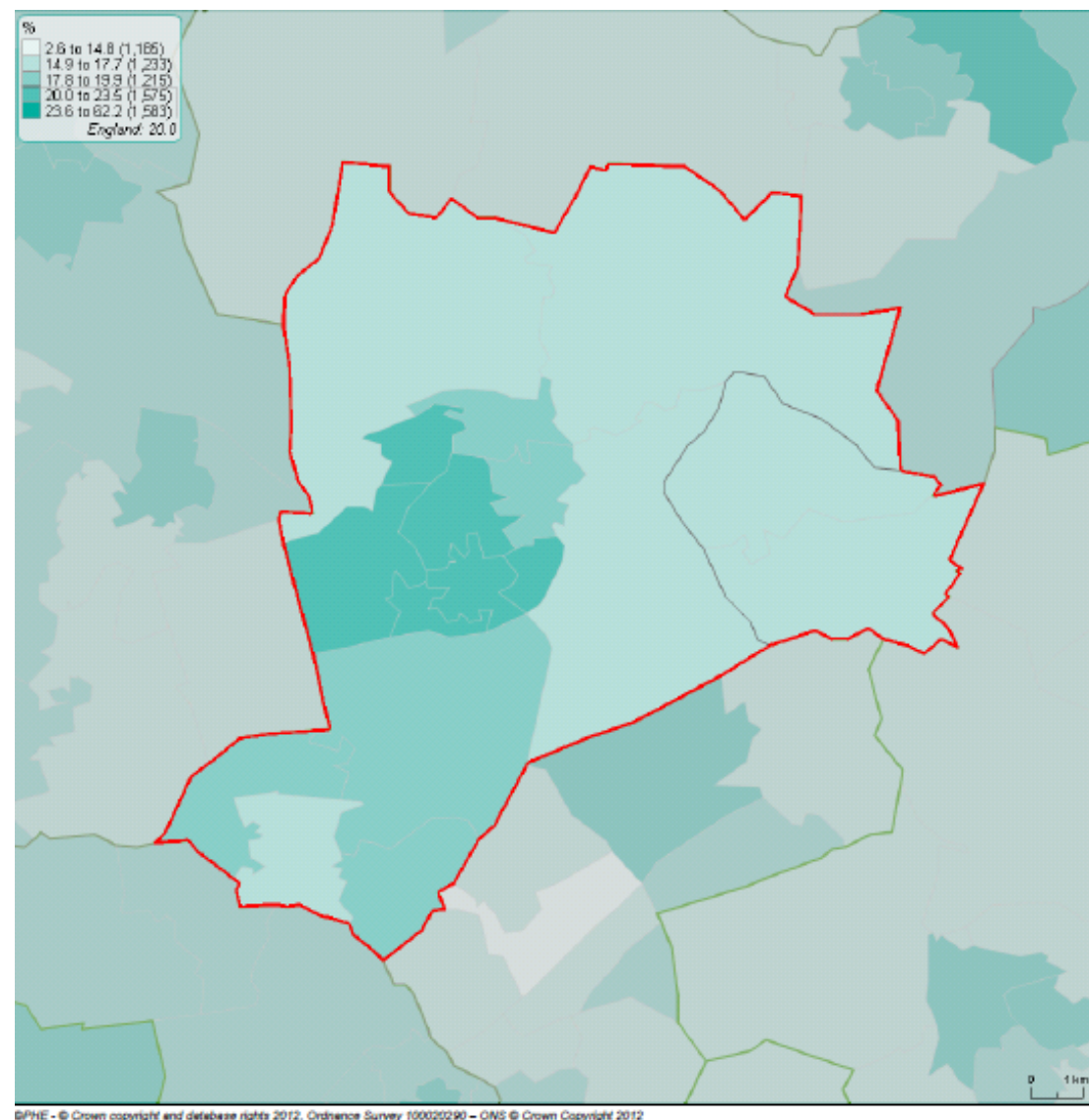
4.22 Binge drinking

Harmful drinking is a significant public health problem in the UK and is associated with a wide range of health problems, including brain damage, alcohol poisoning, chronic liver disease, breast cancer, skeletal muscle damage and mental health. Alcohol can also play a role in accidents, acts of violence, criminal behaviour and other social problems.

Binge drinking is defined separately for men and woman. Men are defined as having indulged if they have consumed 8 or more units of alcohol on the heaviest drinking day in the previous seven days and for women this is 6 or more units. The 2007/08 Health Survey indicated that the English prevalence for binge drinking was at 20.1%.

The map in figure 16 shows the level of binge drinking across the Bracknell & Ascot CCG from 2006-08 modelled data. The areas in dark green show Middle Super Output Areas (MSOAs) that have a higher level of binge drinking. Neighbourhoods in Crown Wood and Hanworth have the highest prevalence of binge drinking in the CCG with 21.9% and 21.6% respectively.

Figure 16: Percentage of the Bracknell & Ascot CCG population aged 16+ that binge drink, modelled estimate for 2006-08 (PHOs, NHS Information Centre)



4.23 Healthy Eating

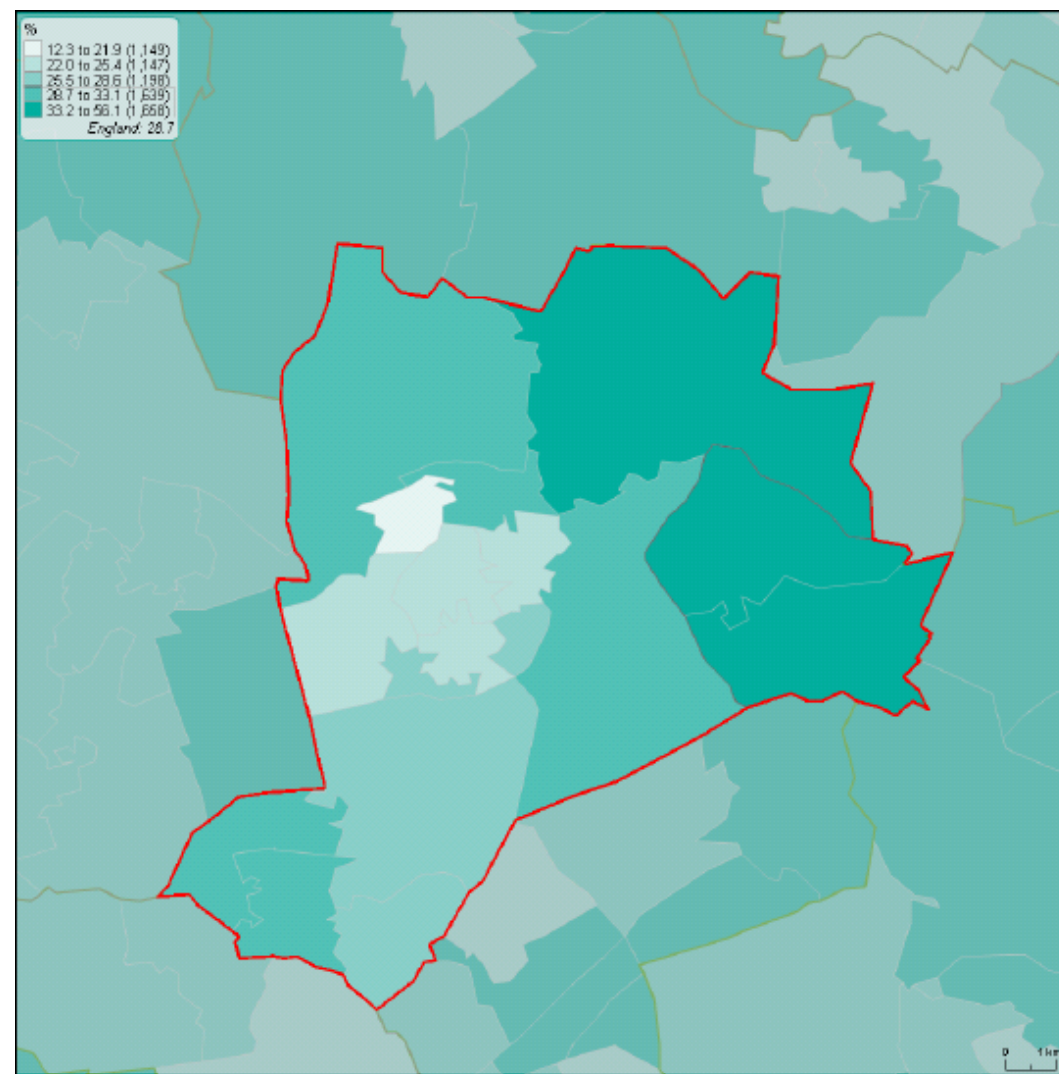
A diet rich in fruit and vegetables can help to protect against the development of heart disease and certain cancers. It is estimated that eating at least 5 portions of a variety of fruit and vegetables each day could reduce the risk of death from chronic diseases by up to 20%

The Healthy eating indicator is defined as the percentage of people that eat 5 portions of fruit and vegetables every day. A portion is defined as an 80g serving.

The modelled data from the 2006-08 Health Surveys indicated that 28.7% of people were 'healthy eaters' in England.

The map in figure 17 shows the level of healthy eating across the Bracknell & Ascot CCG from 2006-08 modelled data. Darker green sections show Middle Super Output Areas (MSOAs) that have a higher level of healthy eating and lighter greens show areas that have fewer 'healthy eaters'. Neighbourhoods in the Priestwood and Garth ward had the lowest proportion of healthy eaters in the CCG at 21.7%.

Figure 17: Percentage of the Bracknell & Ascot CCG population aged 16+ that consume 5 or more portions of fruit and vegetables per day, modelled estimate for 2006-08 (PHOs, NHS Information Centre)



5. Health

5.1 Cardiovascular Disease (CVD)

Cardiovascular disease (CVD) is the second largest cause of death in England, accounting for 29% of all deaths in 2011. Around 46% of all deaths from CVD are from coronary heart disease (CHD) and almost a fifth from stroke (18%). Most deaths caused by cardiovascular disease are premature and could easily be prevented by making lifestyle changes, such as eating a healthy diet and stopping smoking. With an ageing population and the current levels of obesity and diabetes in the region, preventative work is essential in reducing mortality and morbidity and narrowing inequalities.

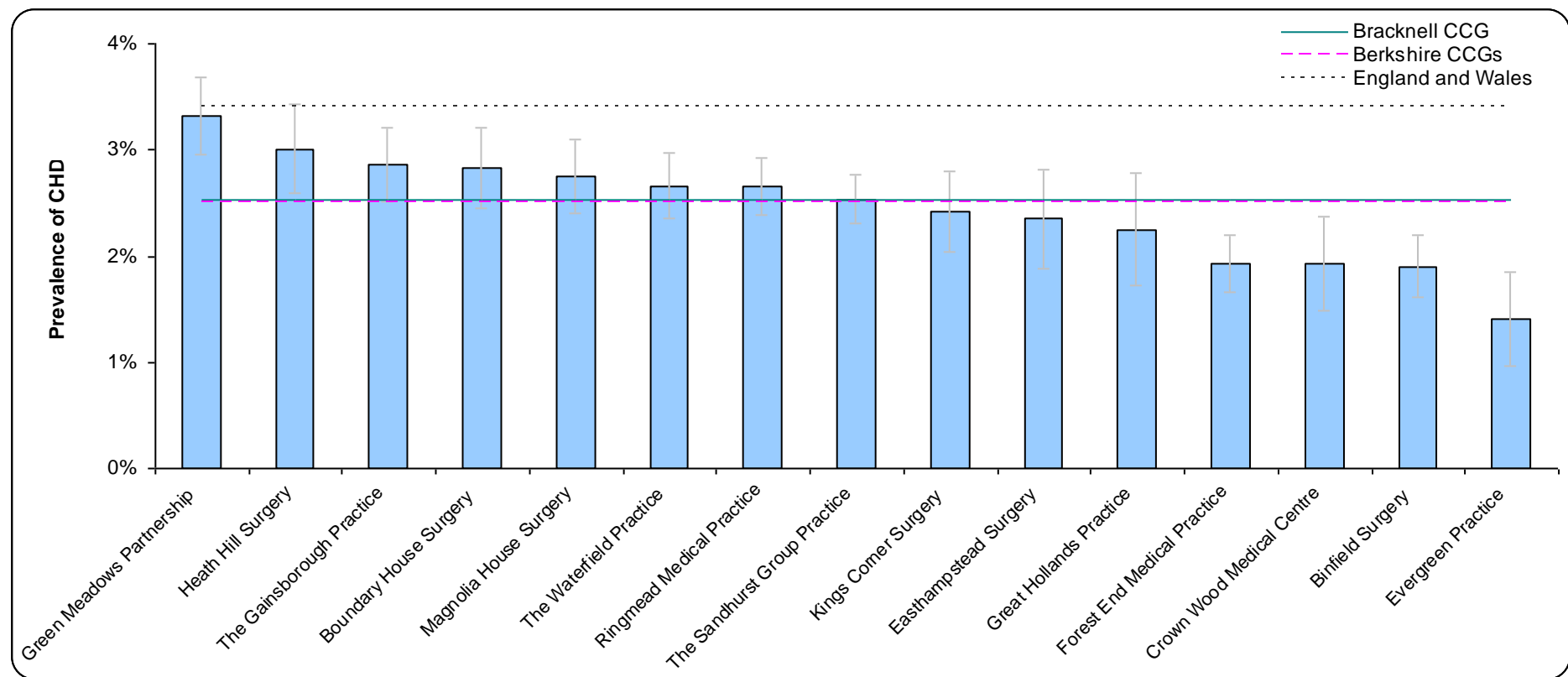
5.11 Cardiovascular Disease prevalence profile for Bracknell & Ascot CCG

Prevalence is a measure of the burden of a disease in the population at a particular point in time. This section provides information about the prevalence of different Cardiovascular diseases in the CCG area, compared with the national and regional prevalence rates. This is taken from the Quality and Outcomes Framework for 2011/12. The figures shown here are based on the total registered population of the CCG and GPs and will not take the demographic profile of an area into account.

5.111 Coronary Heart Disease

Number of people on Coronary Heart Disease Register: 3,452
 Prevalence in CCG area: 2.5%
 Comparison of prevalence: ⇔ than the Berkshire CCG rate of 2.5%
 ↓ than the national rate of 3.4%

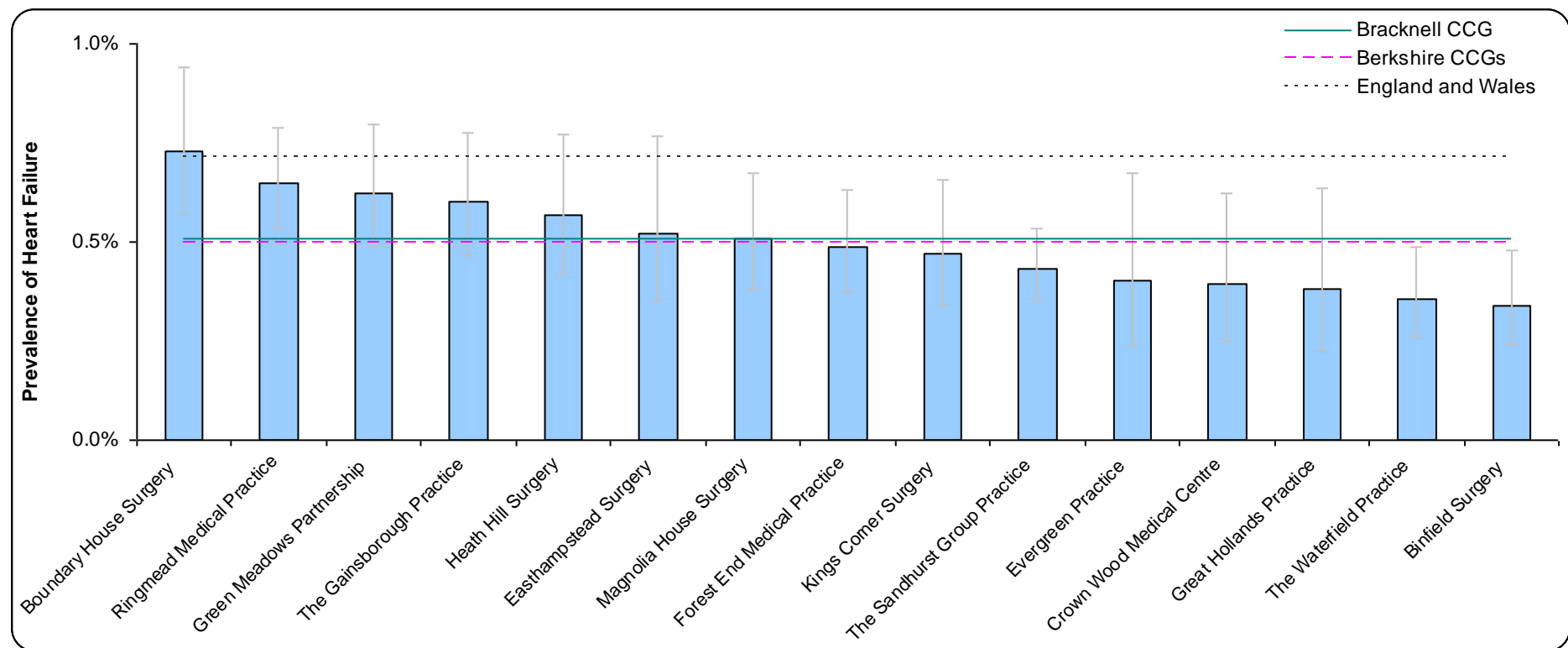
Figure 18: Prevalence of CHD at a GP Practice level (QOF 2011/12)



5.112 Heart Failure

Number of people on Heart Failure Register:	690
Prevalence in CCG area:	0.51%
Comparison of prevalence:	↑ than the Berkshire CCG rate of 0.49% ↓ than the national rate of 0.71%

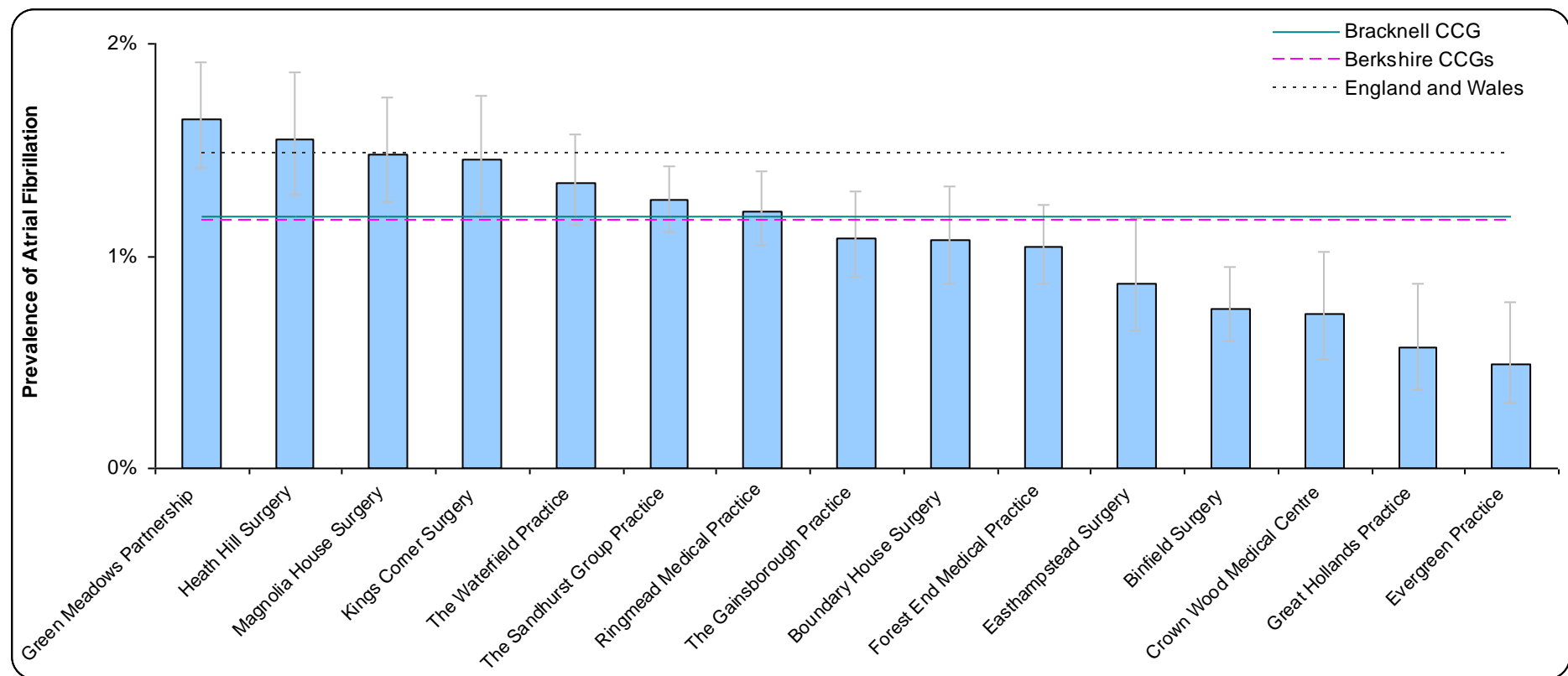
Figure 19: Prevalence of Heart Failure at a GP Practice level (QOF 2011/12)



5.113 Atrial Fibrillation

Number of people on Atrial Fibrillation Register:	1,612
Prevalence in CCG area:	1.2%
Comparison of prevalence:	↔ than the Berkshire CCG rate of 1.2% ↓ than the national rate of 1.5%

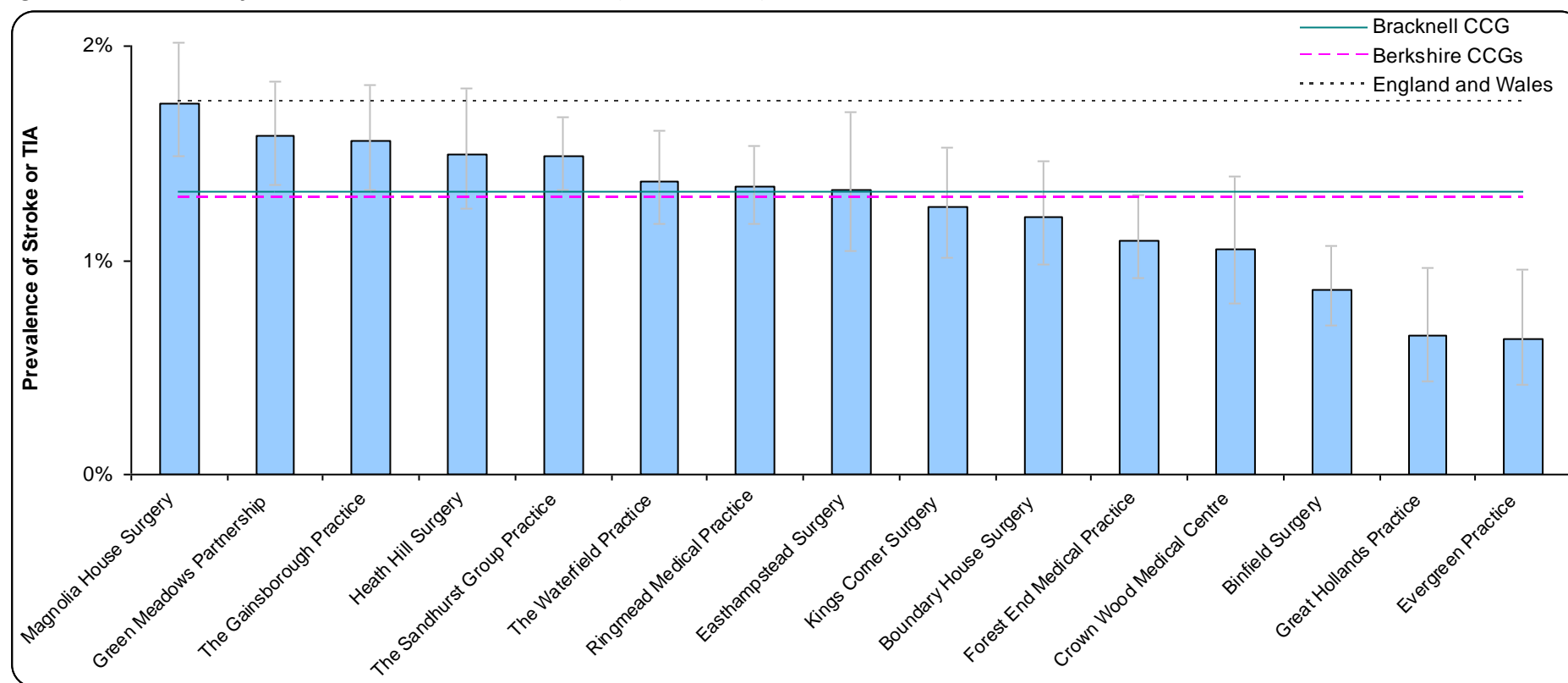
Figure 20: Prevalence of Atrial Fibrillation at a GP Practice level (QOF 2011/12)



5.114 Stroke or Transient Ischaemic Attacks (TIA) Prevalence

Number of people on Stroke or TIA Register:	1,796
Prevalence in CCG area:	1.3%
Comparison of prevalence:	↔ than the Berkshire CCG rate of 1.3% ↓ than the national rate of 1.7%

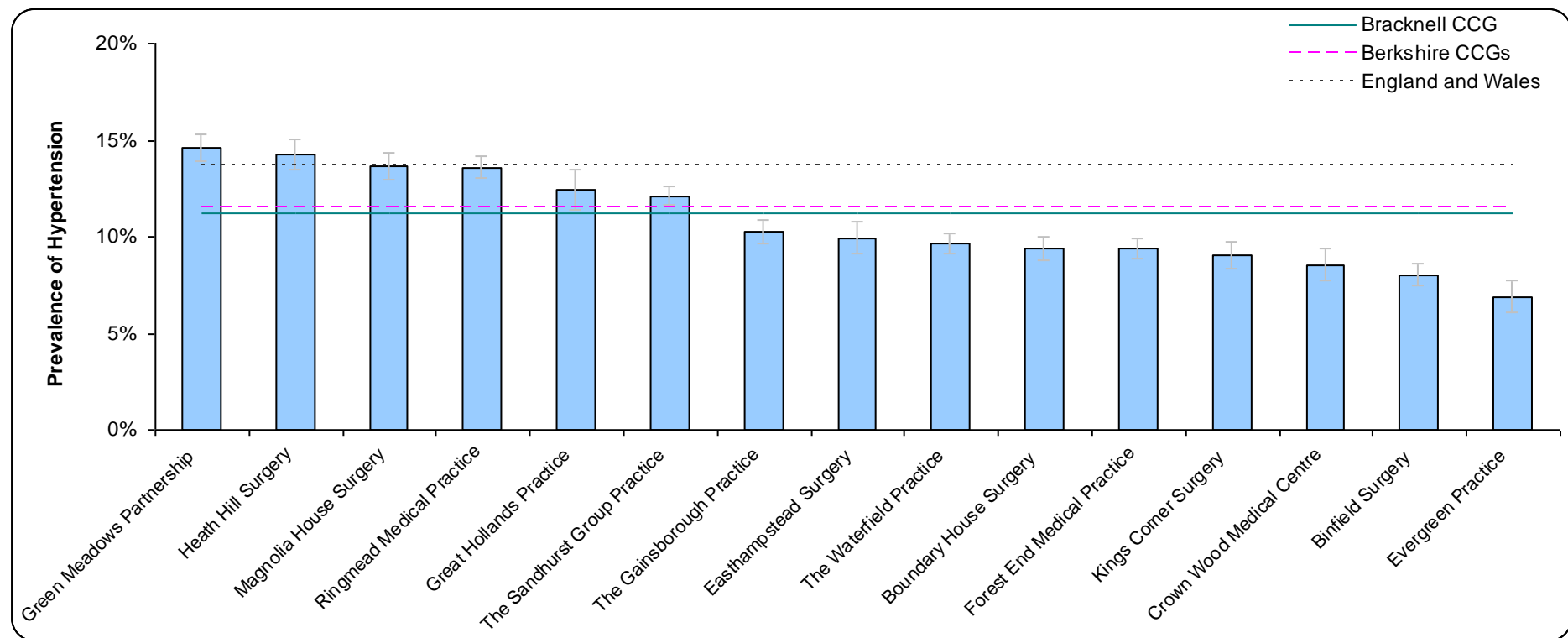
Figure 21: Prevalence of Stroke or TIA at a GP Practice level (QOF 2011/12)



5.115 Hypertension

Number of people on Hypertension Register:	15,221
Prevalence in CCG area:	11.2%
Comparison of prevalence:	↓ than the Berkshire CCG rate of 11.5% ↓ than the national rate of 13.6%

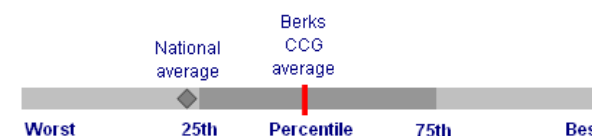
Figure 22: Prevalence of Hypertension at a GP Practice level (QOF 2011/12)



5.12 Quality of Care

The Quality Outcomes Framework (QOF) is a system to remunerate GP practices for providing good quality care to their patients and to help fund work to further improve the quality of care delivered. The QOF indicators that are used to monitor care for Cardiovascular Diseases are included below and come from the 2011/12 dataset. These show Bracknell & Ascot CCG’s performance compared with all of the Berkshire CCGs and the national average. Additional graphs have also been included where Bracknell & Ascot CCG’s performance is significantly lower than the Berkshire CCG average.

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



5.121 Coronary Heart Disease

Indicator	CCG Value	Berks Avg	Eng Avg	Berks Worst	Berkshire Range	Berks Best
CHD06 Blood Pressure reading (measured in the last 15 months) is <=150/90	89%	91%	90%	82%		100%
CHD08 Total cholesterol (measured in the last 15 months) is <=5mmol/l	78%	80%	80%	62%		100%
CHD09 Aspirin, alternative anti-platelet therapy, or an anti-coagulant is being taken	92%	94%	93%	87%		100%
CHD10 Currently treated with a beta-blocker	72%	77%	74%	61%		100%
CHD12 Influenza immunisation in the last 1 Sept - 31 Mar	92%	94%	93%	79%		100%
CHD13 Patients with angina referred for specialist assessment.	100%	100%	98%	90%		100%
CHD14 History of MI: Treated with ACE inhibitor	91%	97%	91%	75%		100%

Figure 23: GP practice performance for CHD 06: Blood Pressure reading (measured in the last 15 months) is $\leq 150/90$ (QOF 2011/12)

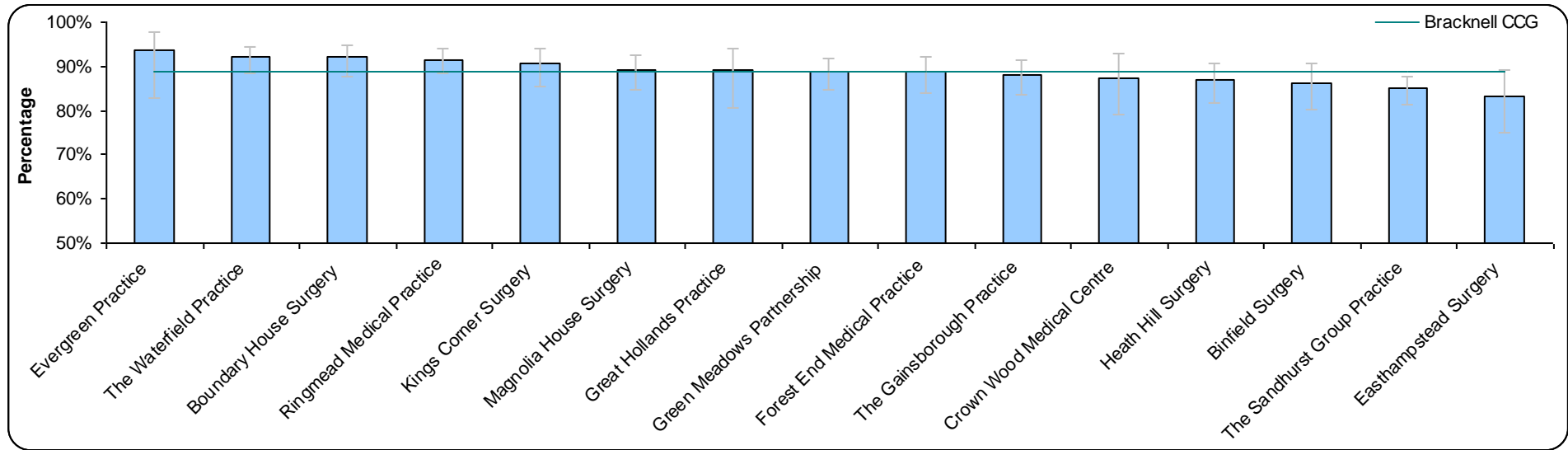


Figure 24: GP practice performance for CHD 08: Total cholesterol (measured in the last 15 months) is $\leq 5\text{mmol/l}$ (QOF 2011/12)

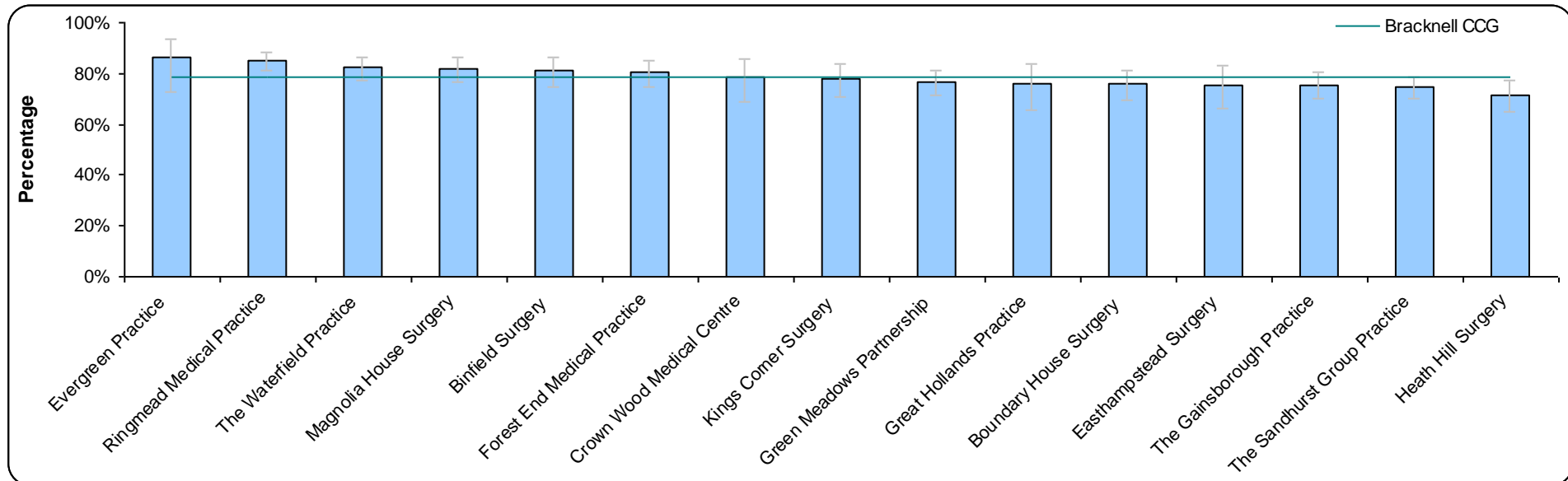


Figure 25: GP practice performance for CHD 09: Aspirin, alternative anti-platelet therapy or an anti-coagulant is being taken (QOF 2011/12)

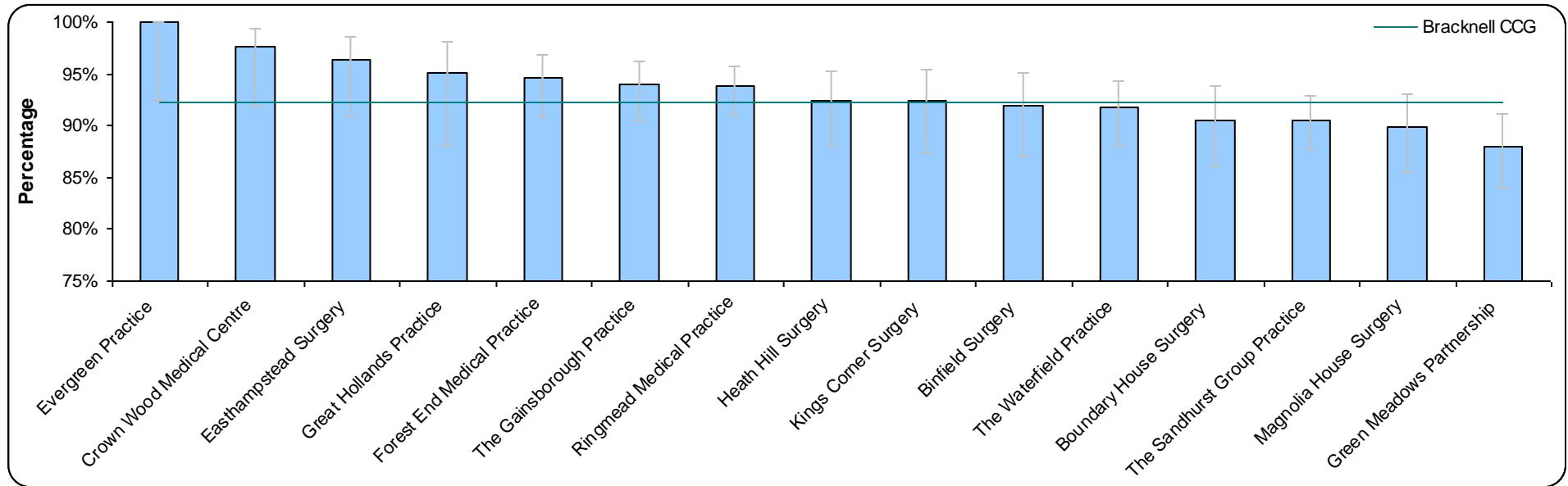


Figure 26: GP practice performance for CHD 10: Currently treated with a beta blocker (QOF 2011/12)

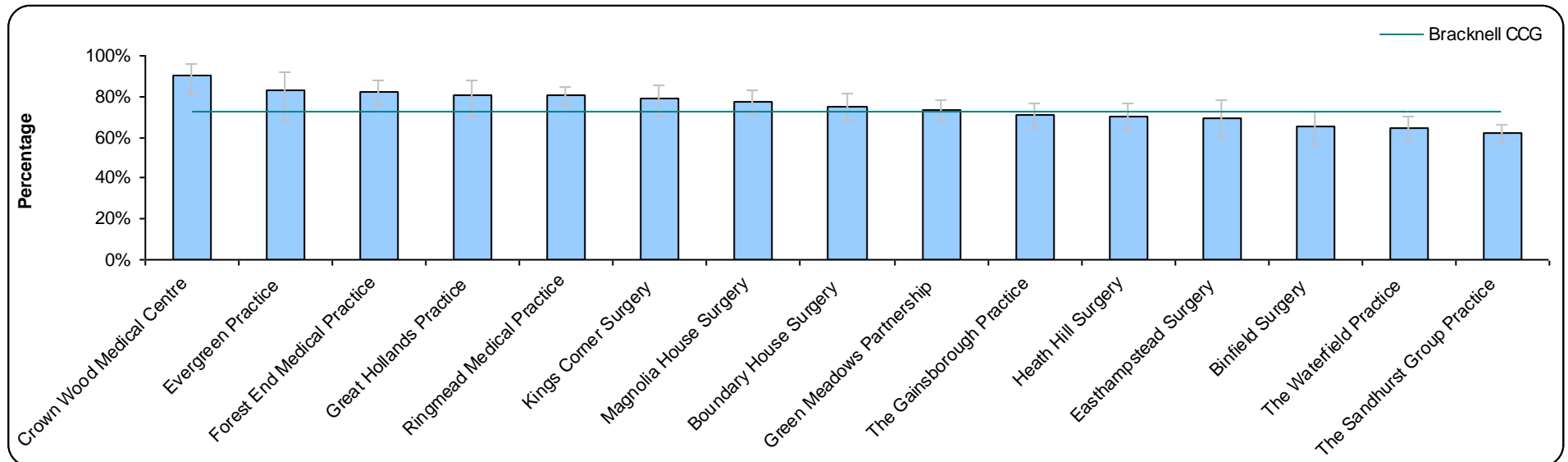


Figure 27: GP practice performance for CHD 12: Influenza immunisation in the last 1 Sep – 31 Mar (QOF 2011/12)

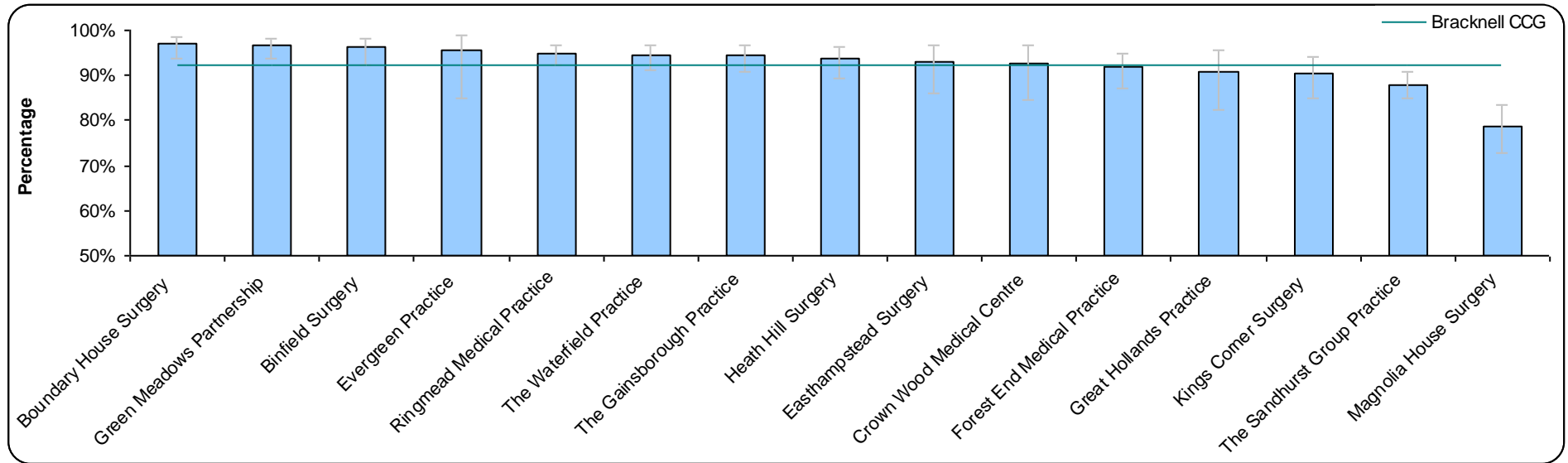
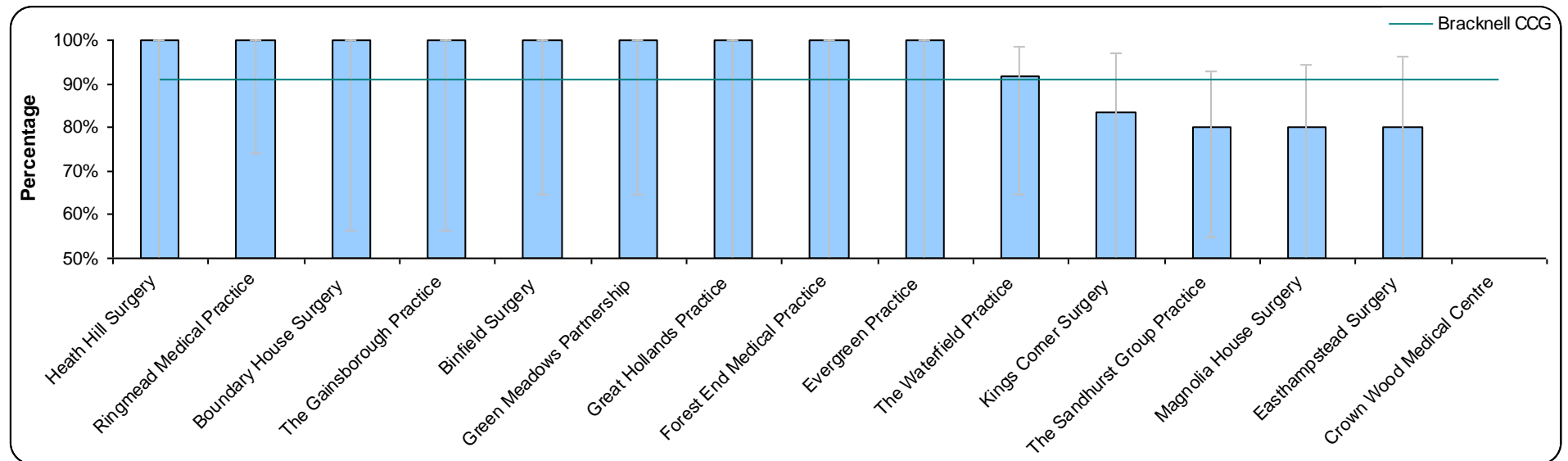


Figure 28: practice performance for CHD 14: History of MI: treated with ACE inhibitor (QOF 2011/12)



5.122 Heart Failure

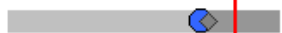

Indicator		CCG Value	Berks Avg	Eng Avg	Berks Worst	Berkshire Range	Berks Best
HF02	Diagnosis of heart failure confirmed by an ECG or by specialist assessment	95%	97%	96%	83%		100%
HF04	Treated with an ACE inhibitor or ARB and additionally treated with a beta-blocker	80%	87%	84%	60%		100%

Figure 29: GP practice performance for HF02: Diagnosis of heart failure confirmed by an ECG or by specialist assessment (QOF 2011/12)

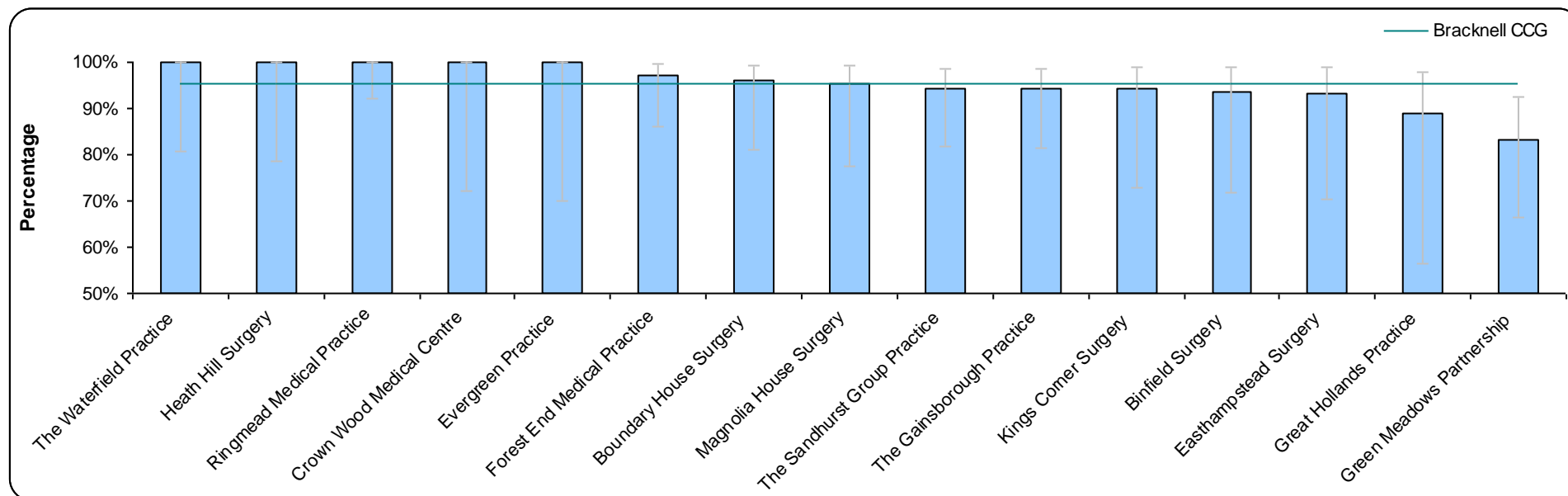
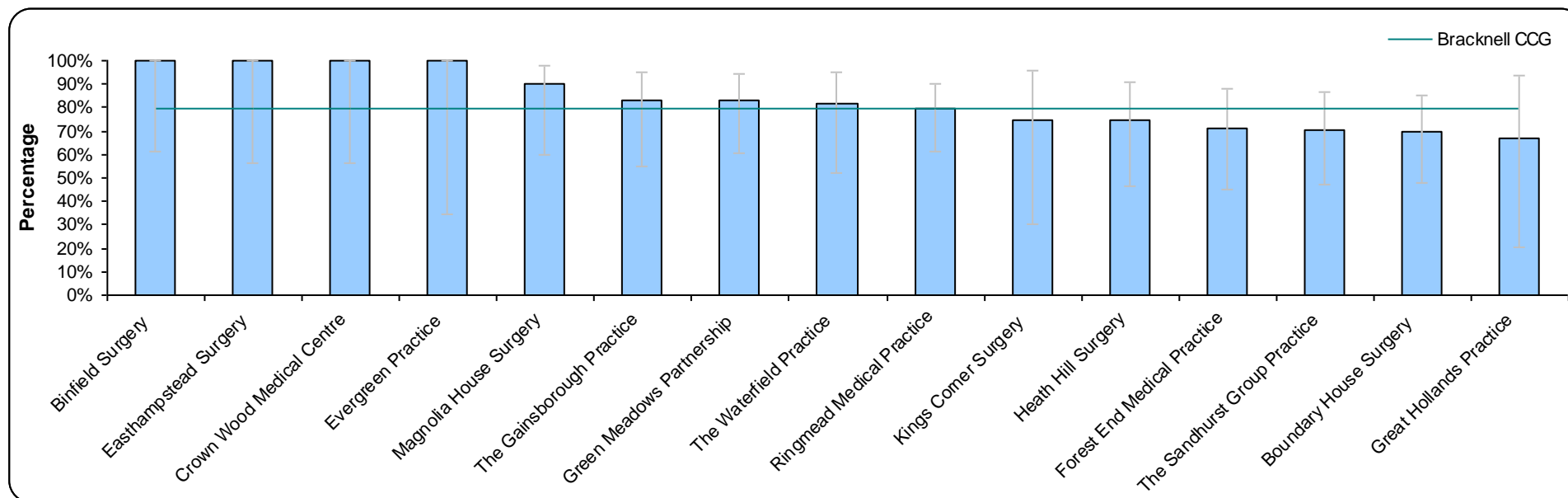


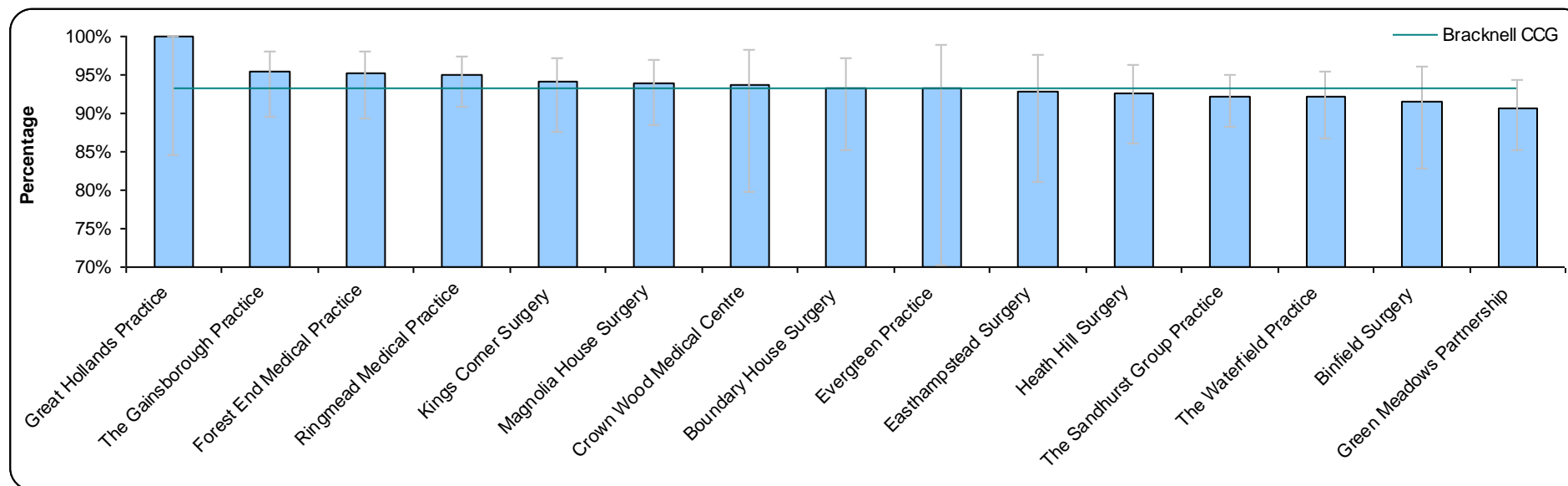
Figure 30: GP practice performance for HF04: Treated with an ACE-I or ARB, who are additionally treated with a beta blocker (QOF 2011/12)



5.123 Atrial Fibrillation

Indicator		CCG Value	Berks Avg	Eng Avg	Berks Worst	Berkshire Range	Berks Best
AF03	Patients currently treated with anti-coagulation drug therapy or an anti-platelet therapy	93%	95%	94%	86%		100%
AF04	Patients with ECG or specialist confirmed diagnosis	98%	97%	96%	80%		100%

Figure 31: GP practice performance for AF03: Patients currently treated with anti-coagulation drug therapy or anti-platelet therapy (QOF 2011/12)



5.124 Stroke

Indicator	CCG Value	Berks Avg	Eng Avg	Berks Worst	Berkshire Range	Berks Best
STROKE06 Blood Pressure reading (measured in the last 15 months) is <=150/90	87%	89%	89%	67%		100%
STROKE07 Record of total cholesterol in the last 15 months	91%	92%	91%	71%		100%
STROKE08 Total cholesterol (measured in the last 15 months) is <=5mmol/l	76%	77%	77%	52%		93%
STROKE10 Influenza immunisation in the last 1 Sept - 31 Mar	89%	91%	90%	76%		100%
STROKE12 Record that an anti-platelet agent or an anti-coagulant is being taken	93%	95%	94%	83%		100%
STROKE13 New patients with a stroke or TIA who have been referred for further investigation	87%	92%	90%	65%		100%

Figure 32: GP practice performance for STROKE06: Blood Pressure reading (Measured in the last 15 months) is \leq 150/90 or less (QOF 2011/12)

Graph to be added

Figure 33: GP practice performance for STROKE10: Influenza immunisation in the last 1 Sep – 31 Mar (QOF 2011/12)

Graph to be added

Figure 34: GP practice performance for STROKE12: Record that an anti-platelet agent or an anti-coagulant is being taken (QOF 2011/12)

Graph to be added

Figure 35: GP practice performance for STROKE13: New patients with a stroke or TIA who have been referred for further investigation (QOF 2011/12)

Graph to be added

5.125 Risk factors for Cardiovascular Disease

Indicator		CCG Value	Berks Avg	Eng Avg	Berks Worst	Berkshire Range	Berks Best
PP01	CV risk assessment for new hypertension cases	82%	81%	80%	17%		100%
PP02	Patients given lifestyle advice in the last 15 months	83%	83%	82%	48%		100%
BP04	Patients with hypertension who have a record of BP in the last 9 months	90%	92%	91%	78%		99%
BP05	Patients with hypertension whose BP (measured in last 9 months) is \leq 150/90	78%	81%	80%	62%		94%

Figure 36: GP practice performance for BP04: Record of BP in last 9 months (QOF 2011/12)

Graph to be added

Figure 35: GP practice performance for BP05: Last blood pressure \leq 150/90 (QOF 2011/12)

Graph to be added

5.13 Hospital Admissions and Activity

During 2009-2011 there were 1,572 emergency admissions for Cardiovascular Diseases in Bracknell & Ascot CCG. This accounts for 6.2% of all emergency admissions over that time.

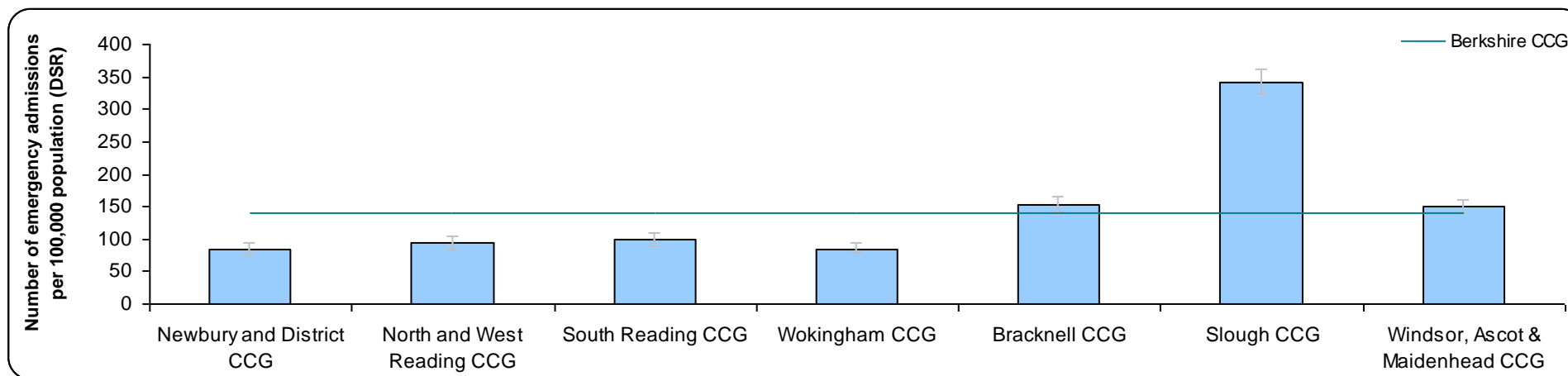
The main reasons for emergency admission for Cardiovascular Disease were Coronary Heart Disease, Atrial Fibrillation and Stroke.

5.131 Coronary Heart Disease Emergency Admissions (2009-2011)

Number of emergency admissions for CHD:	679	
% of admissions that were	Male: 66%	Female: 34%
% of all Cardiovascular Disease emergency admissions:	43%	

Figure 36 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was slightly higher than the Berkshire average.

Figure 36: Emergency admissions for Coronary Heart Disease in 2009-2011 per 100,000 population (Directly Standardised rate)

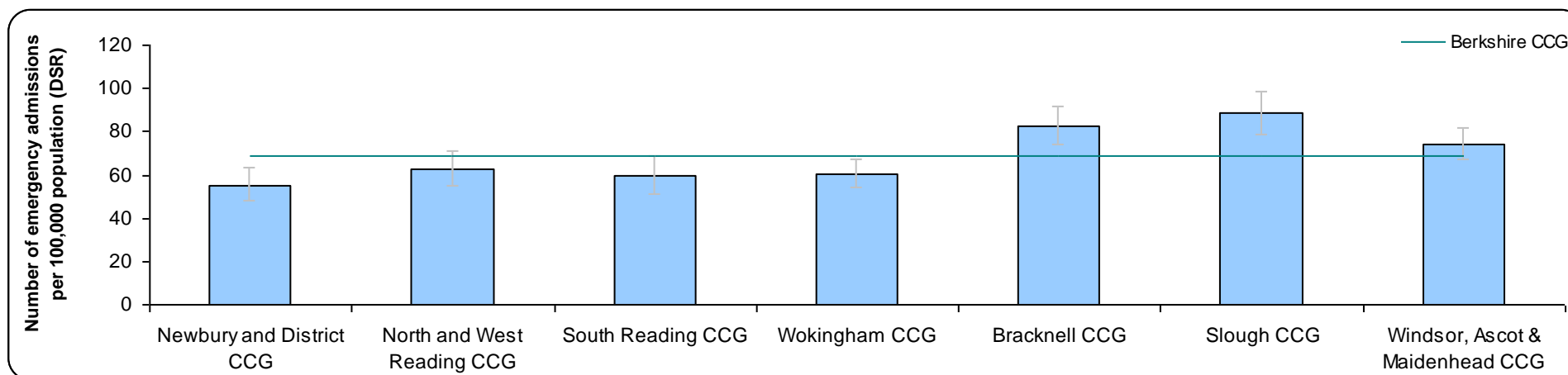


5.132 Atrial Fibrillation Emergency Admissions (2009-2011)

Number of emergency admissions for Atrial Fibrillation:	380
% of admissions that were	Male: 49% Female: 51%
% of all Cardiovascular Disease emergency admissions:	23%

Figure 37 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG’s admission rate was higher than the Berkshire average.

Figure 37: Emergency admissions for Atrial Fibrillation in 2009-2011 per 100,000 population (Directly Standardised rate)

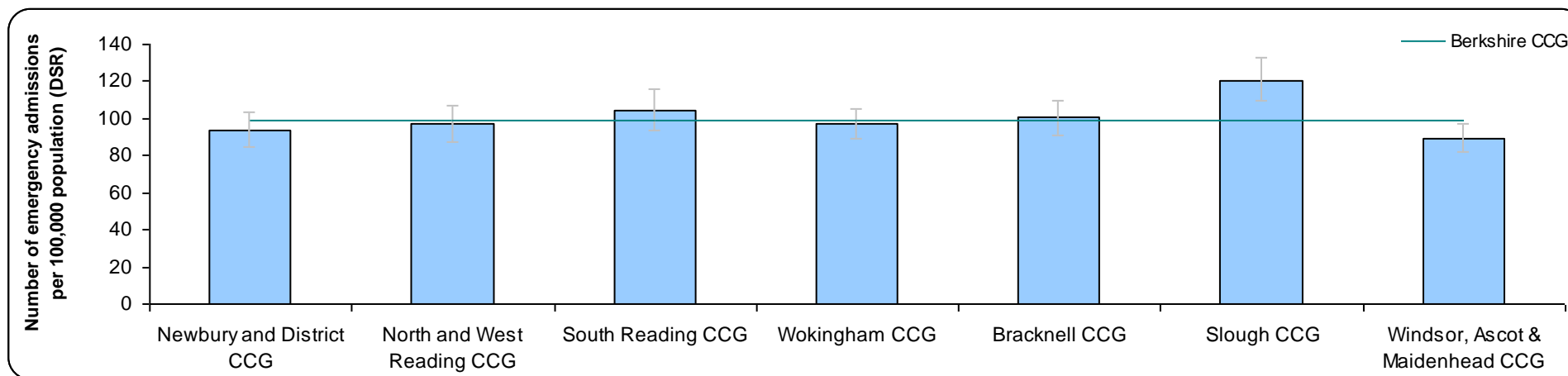


5.133 Stroke Emergency Admissions (2009-2011)

Number of emergency admissions for Stroke:	494
% of admissions that were	Male: 49% Female: 51%
% of all Cardiovascular Disease emergency admissions:	31%

Figure 38 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG’s admission rate was similar to the Berkshire average.

Figure 38: Emergency admissions for Stroke in 2009-2011 per 100,000 population (Directly Standardised rate)

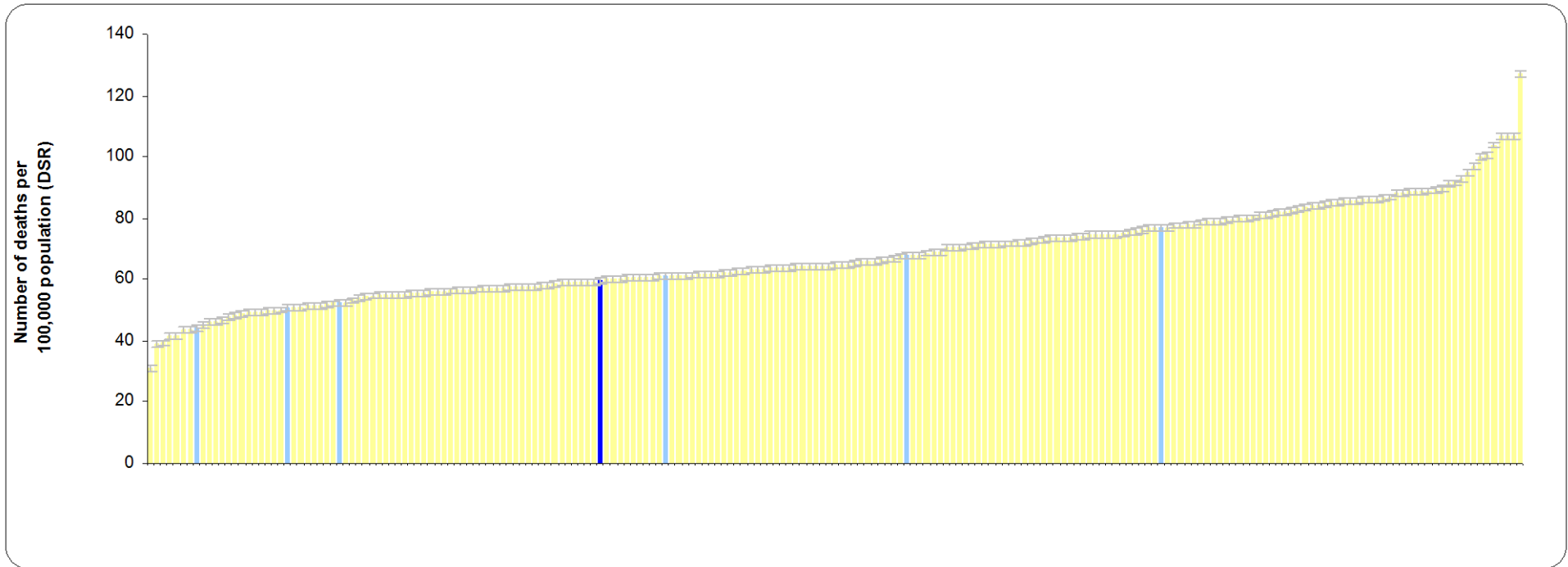


5.14 Mortality

In 2011, 59 people under the age of 75 died from cardiovascular disease in Bracknell & Ascot CCG. The graph in figure 39 shows this mortality rate against the rest of the country.

It is worth noting that this information cannot be directly compared with previous 3-year mortality data. This is not currently available at CCG level, so that is why a single year's data has been used here.

Figure 39: Under 75 mortality for cardiovascular disease per 100,000 population – directly standardised rate (Health & Social care Information Centre 2013)



5.2 Cancer

Whilst the rate of cancer deaths is now decreasing, cancer is still a key cause of early death in the UK and across Berkshire. The incidence in those aged under 75 is increasing and more than one in three people will develop some form of cancer during their lifetime. In the UK, the most common types of cancer are breast, prostate, lung, bowel, bladder and uterine (womb).

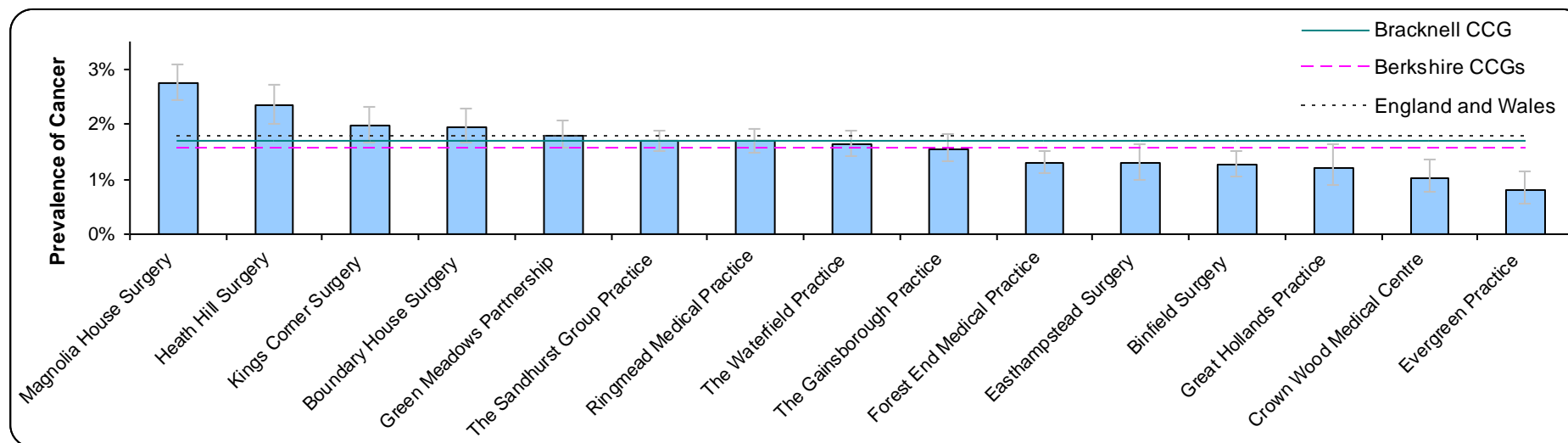
Up to a third of cancer cases are preventable and are linked to lifestyle and health behaviours, such as smoking, obesity, diet and alcohol.

5.21 Cancer prevalence profile for Bracknell & Ascot CCG

This section provides information about the prevalence of Cancer in the CCG area and is taken from the Quality and Outcomes Framework for 2011/12. The figures shown here are based on the total registered population of the CCG and GPs and do not take the demographic profile of an area into account.

Number of people on Cancer Register:	2,305
Prevalence in CCG area:	1.7%
Comparison of prevalence:	↑ than the Berkshire CCG rate of 1.6% ↓ than the national rate of 1.8%

Figure 32: Prevalence of Cancer at a GP Practice level (QOF 2011/12)

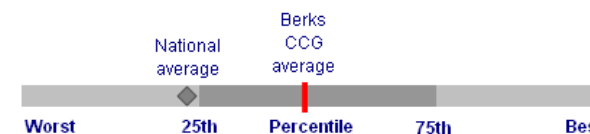


5.22 Quality of Care

The Quality Outcomes Framework (QOF) indicators that are used to monitor care for Cancer are included below and come from the 2011/12 dataset. These show Bracknell & Ascot CCG's performance compared with all of the Berkshire CCGs and the national

average. Additional graphs are included for indicators where Bracknell & Ascot CCG’s performance is significantly lower than the Berkshire CCG average.

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



****QOF indicators and spine charts to be added to each section****

5.221 Cancer

5.222 Risk factors for Cancer

Figure 33: GP practice performance for SMOKE03 (QOF 2011/12)
 Graph to be added

5.23 Hospital Admissions and Activity

5.231 Cancer Emergency Admissions (2011/12)

During 2011/12, there were 585 emergency admissions for Cancer in Bracknell & Ascot CCG. This is 429 per 100,000 population.

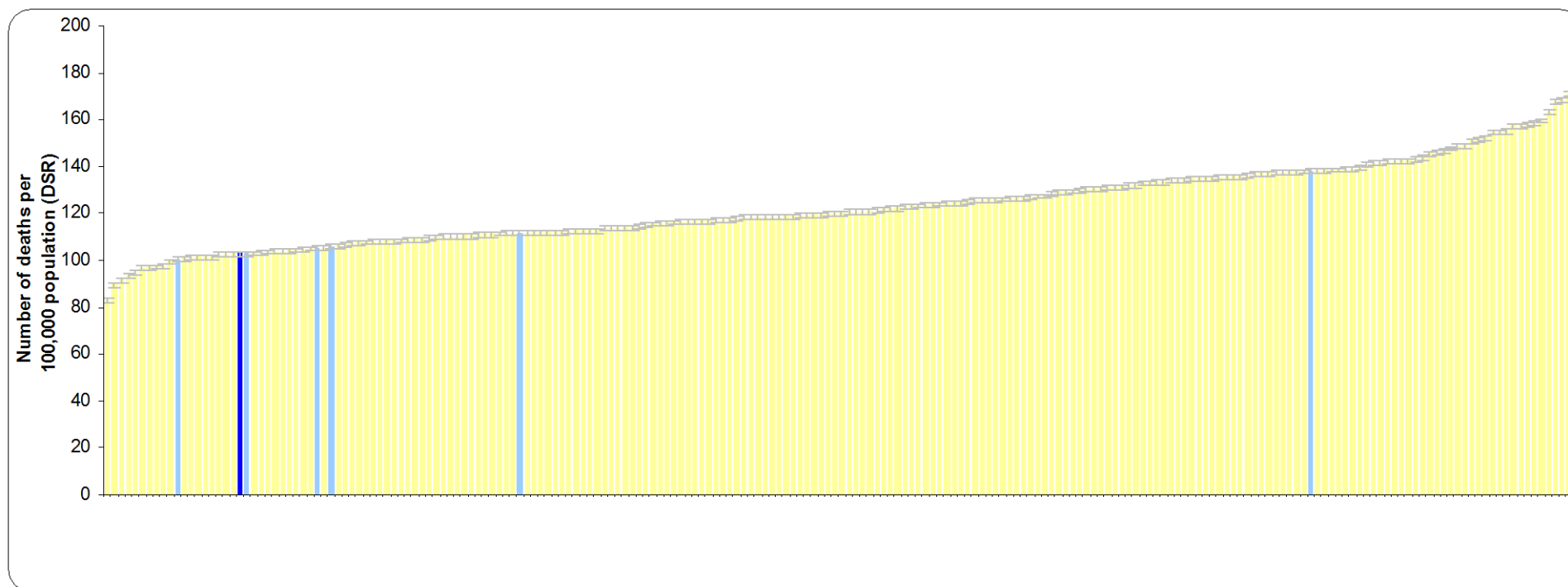
(It is worth noting that this information about cancer admissions cannot be directly compared with the other admissions data included in the profile. This data only covers 1 year, compared with the 3-year directly standardised data shown for other conditions).

5.24 Mortality

In 2011, 123 people under the age of 75 died from cancer in Bracknell & Ascot CCG. The graph in figure 34 shows this mortality rate against the rest of the country.

Please note that this information cannot be directly compared with previous 3-year mortality data. This is not currently available at CCG level, so that is why a single year's data has been used here.

Figure 34: Under 75 mortality for cancer per 100,000 population – directly standardised rate (Health & Social care Information Centre 2013)



5.3 Respiratory Disease

Chronic Obstructive Pulmonary Disease (COPD) is one of the most common respiratory diseases in the UK and is the second most common cause of emergency admissions to hospital. It usually affects people over the age of 35, although most people are not diagnosed until they are in their fifties. It is thought there are over 3 million people living with the disease in the UK, of which only about 900,000 have been diagnosed.

The prevalence of asthma in England is amongst the highest in the world. Asthma is responsible for a large number of emergency admissions to hospital each year. Deaths from asthma have remained at 1000-1200 each year since 2000, but it is estimated that 90% of these are associated with preventable factors.

In July 2011 the National Outcomes Framework for COPD and Asthma was published and includes a strategy for improving outcomes for COPD and asthma through high-quality prevention, detection and treatment and care services.

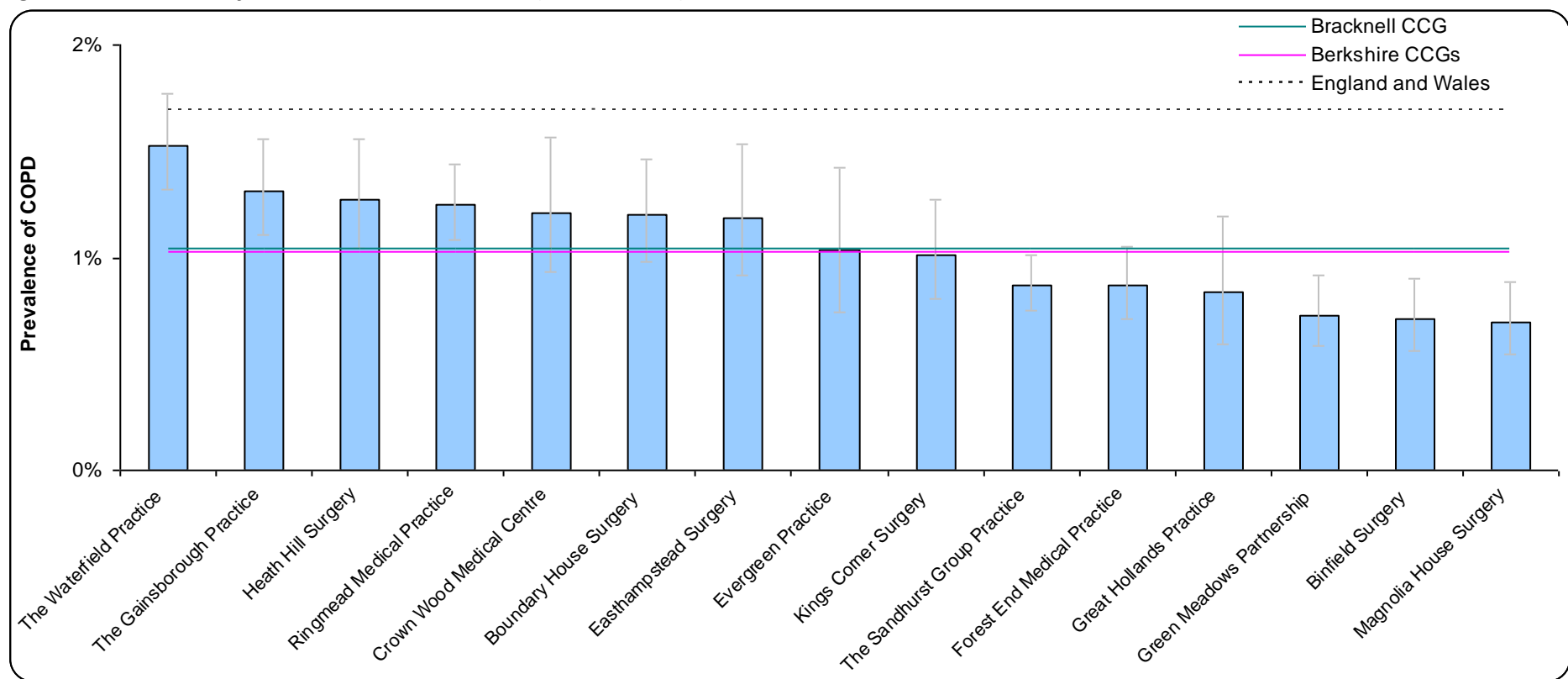
5.31 Respiratory Disease prevalence profile for Bracknell & Ascot CCG

This section provides information about the prevalence of Chronic Obstructive Pulmonary Disease (COPD) and Asthma in the CCG area and is taken from the Quality and Outcomes Framework for 2011/12. The figures shown here are based on the total registered population of the CCG and GPs and will not take the demographic profile of an area into account.

5.311 Chronic Obstructive Pulmonary Disease

Number of people on COPD Register:	1,417
Prevalence in CCG area:	1.04%
Comparison of prevalence:	↑ than the Berkshire CCG rate of 1.03% ↓ than the national rate of 1.69%

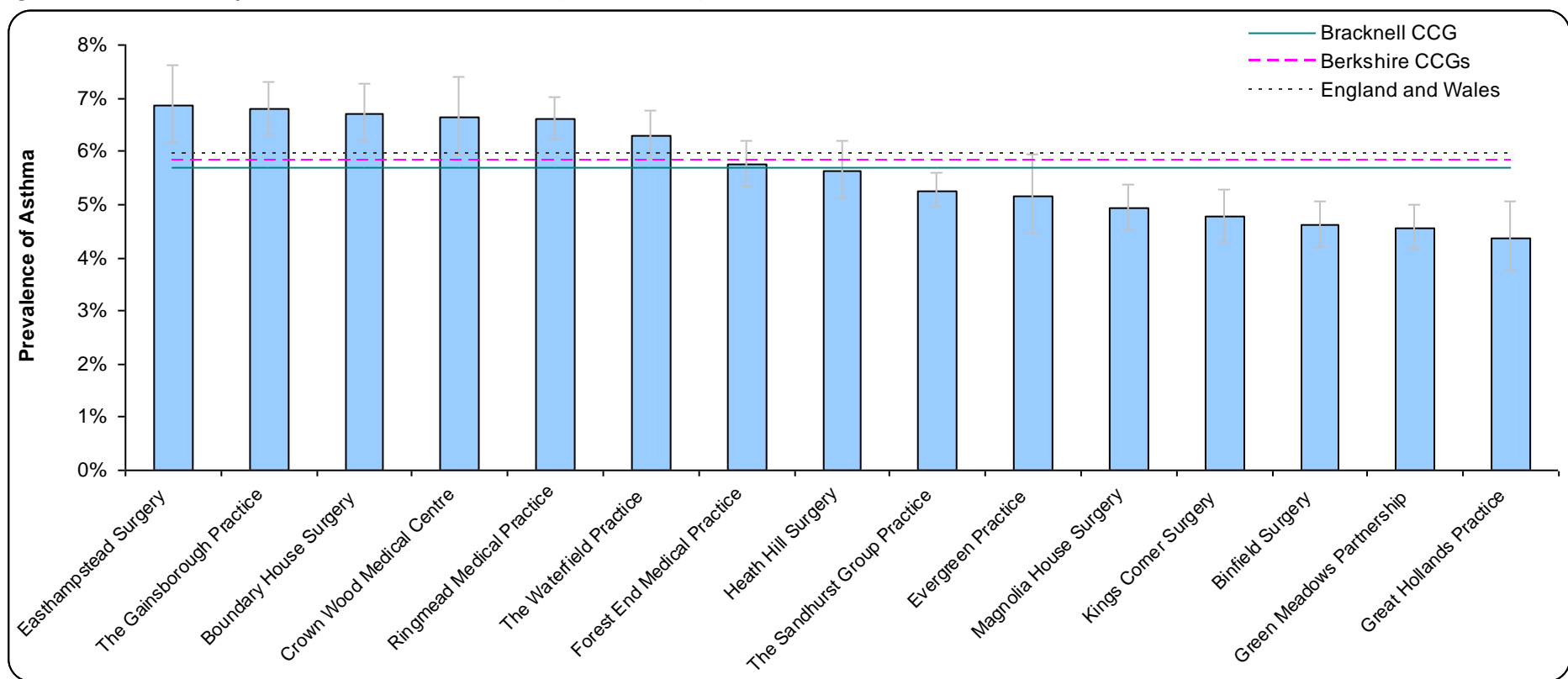
Figure 35: Prevalence of COPD at a GP Practice level (QOF 2011/12)



5.312 Asthma

Number of people on Asthma Register:	7,745
Prevalence in CCG area:	5.7%
Comparison of prevalence:	↓ than the Berkshire CCG rate of 5.8% ↓ than the national rate of 5.9%

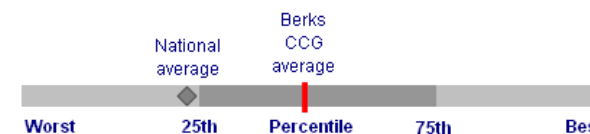
Figure 36: Prevalence of Asthma at a GP Practice level (QOF 2011/12)



5.32 Quality of Care

The Quality Outcomes Framework (QOF) indicators that are used to monitor care for Respiratory Disease are included below and come from the 2011/12 dataset. These show Bracknell & Ascot CCG's performance compared with all of the Berkshire CCGs and the national average. Additional graphs are included for indicators where Bracknell & Ascot CCG's performance is significantly lower than the Berkshire CCG average.

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



*****QOF indicators and spine charts to be added to each section*****

5.321 COPD

5.322 Asthma

5.323 Risk factors for Respiratory Disease

A graph for SMOKE 03 is included in the Risk factors for Cardiovascular Disease section on page ?

5.33 Hospital Admissions and Activity

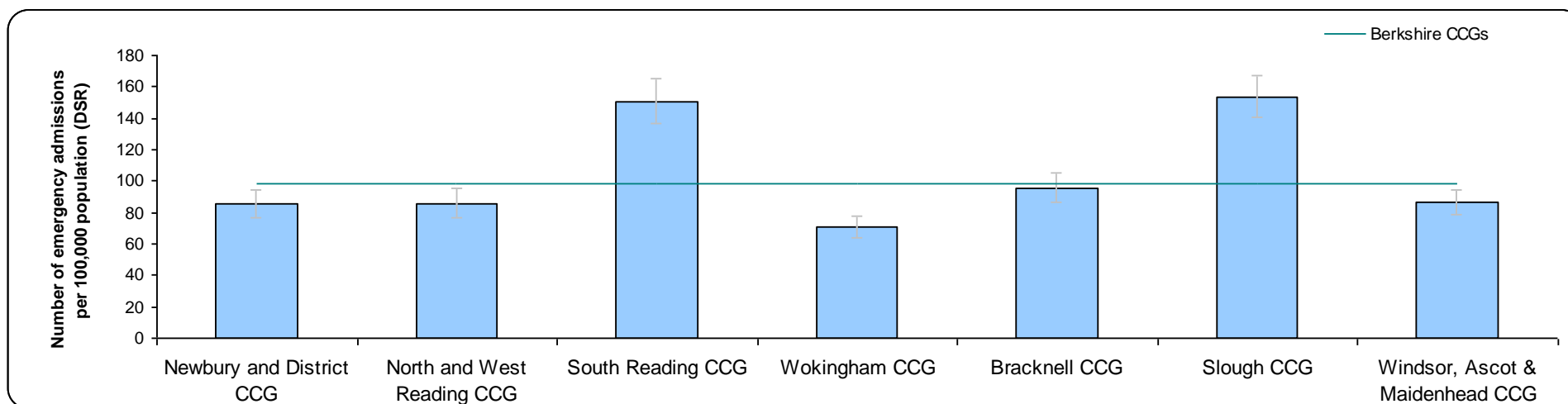
During 2009-2011, there were 2,642 emergency admissions for Respiratory Diseases in Bracknell & Ascot CCG. This accounts for 10.5% of all emergency admissions over that time.

5.331 COPD Emergency Admissions (2009-2011)

Number of emergency admissions for COPD:	423	
% of admissions that were	Male: 44%	Female: 56%
% of all Respiratory Disease emergency admissions:	16%	

Figure 37 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was lower than the Berkshire average.

Figure 37: Emergency admissions for COPD in 2009-2011 per 100,000 population (Directly Standardised rate)

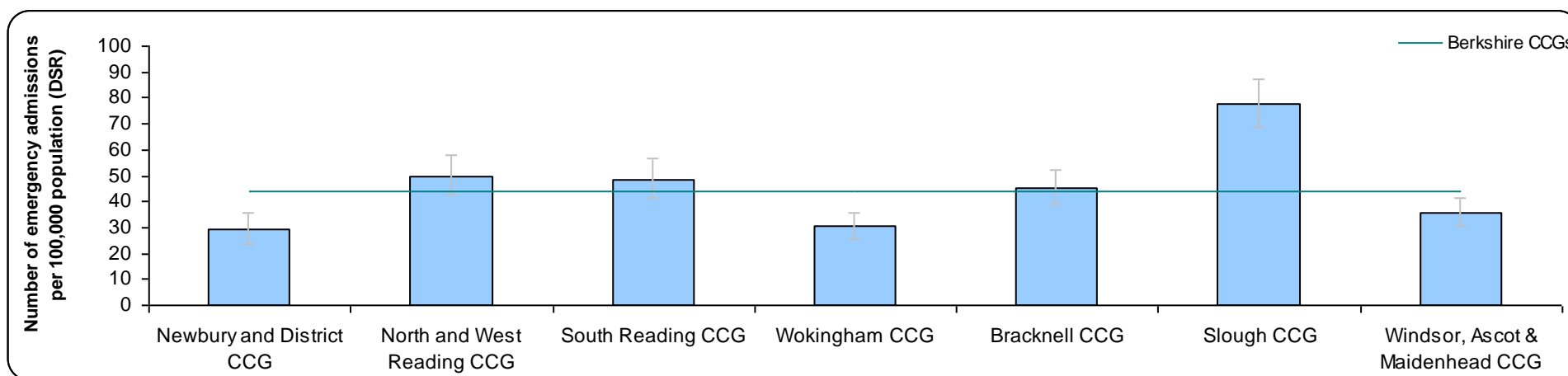


5.332 Asthma Emergency Admissions (2009-2011)

Number of emergency admissions for Asthma (18+):	189	
% of admissions that were	Male: 23%	Female: 77%
% of all Respiratory Disease emergency admissions:	7%	

Figure 38 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was slightly higher than the Berkshire average.

Figure 38: Emergency admissions for Asthma in 2009-2011 per 100,000 population (Directly Standardised rate)

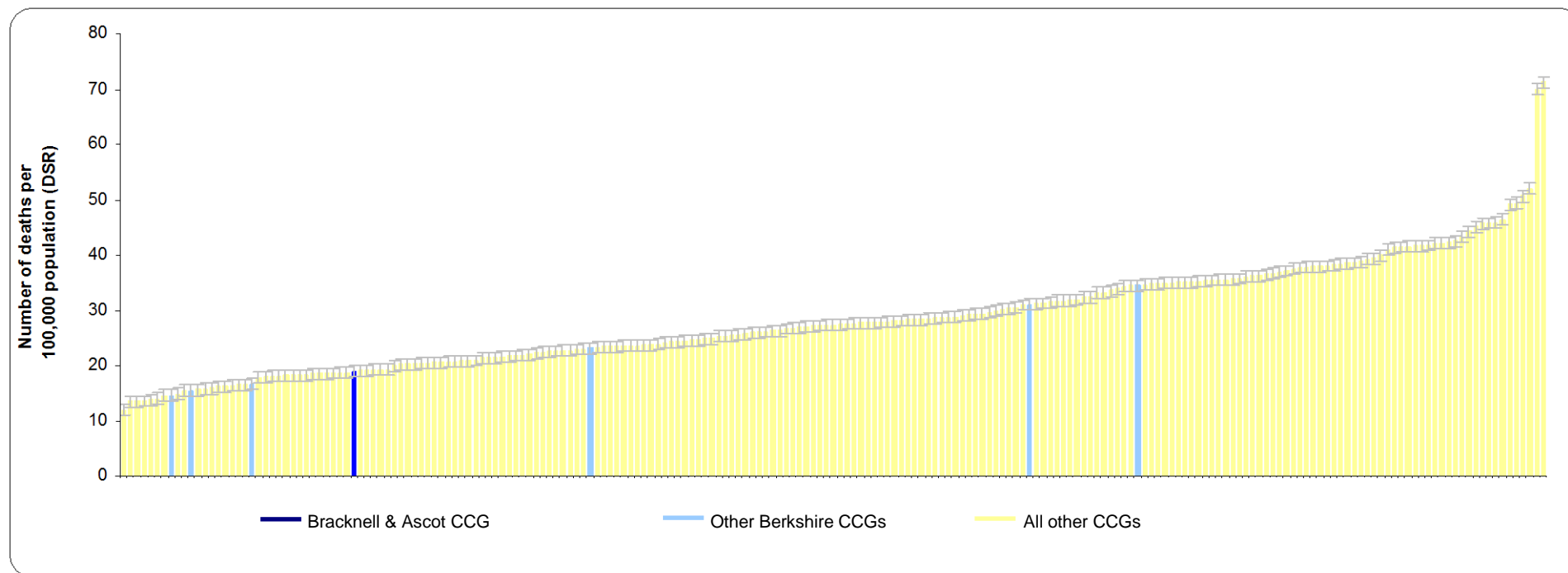


5.3.4 Mortality (2011/12)

In 2011, 21 people under the age of 75 died from a respiratory disease in Bracknell & Ascot CCG. The graph in figure 39 shows this mortality rate against the rest of the country.

It is worth noting that this information cannot be directly compared with previous 3-year mortality data. This is not currently available at CCG level, so that is why a single year's data has been used here.

Figure 39: Under 75 mortality from respiratory disease per 100,000 population – directly standardised rate (Health & Social care Information Centre 2013)



5.4 Diabetes

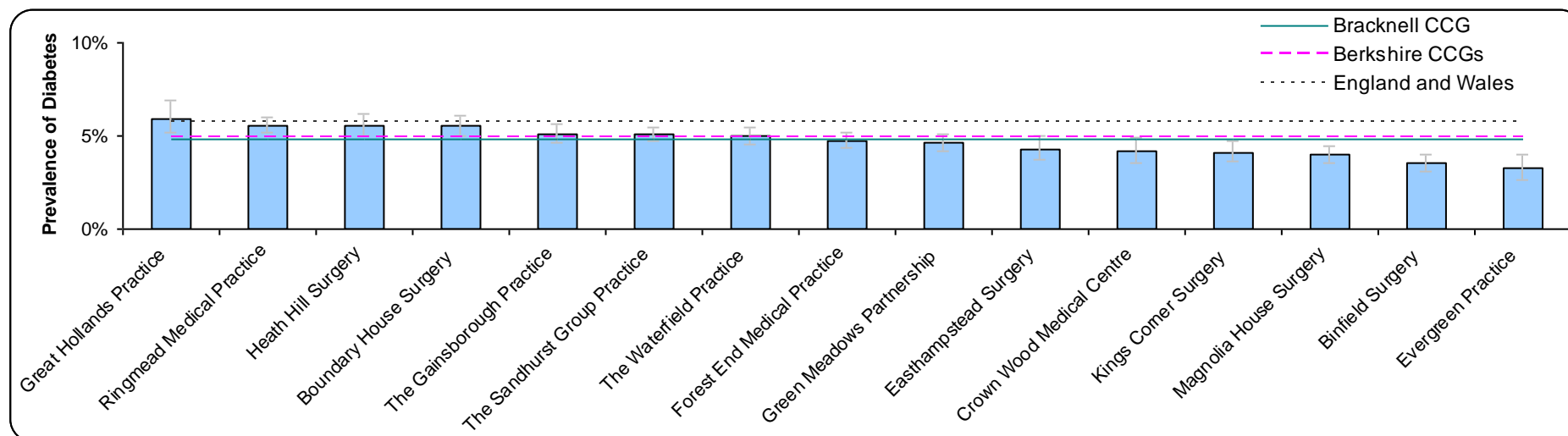
Diabetes is one of the key local priorities for Berkshire’s CCGs, public health and adult social care, as it is a long term disease with significant morbidity and mortality. It is estimated that nearly 1 in 5 cases still remain undiagnosed.

5.4.1 Diabetes prevalence profile for Bracknell & Ascot CCG

This section provides information about the prevalence of Diabetes in the CCG area, compared with the national and regional prevalence rates. This is taken from the Quality and Outcomes Framework for 2011/12. The figures shown here are based on the total registered population of the CCG GPs that are aged 17 or over. The indicator does not take the demographic profile of an area into account.

Number of people on Diabetes Register (17+):	5,161
Prevalence in CCG area:	4.8%
Comparison of prevalence:	↓ than the Berkshire CCG rate of 4.9% ↓ than the national rate of 5.8%

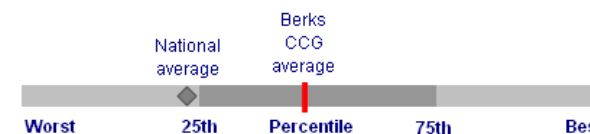
Figure 40: Prevalence of Diabetes at a GP Practice level (QOF 2011/12)



5.42 Quality of Care

The Quality Outcomes Framework (QOF) indicators that are used to monitor care for Diabetes are included below and come from the 2011/12 dataset. These show Bracknell & Ascot CCG's performance compared with all of the Berkshire CCGs and the national average. Additional graphs are included for indicators where Bracknell & Ascot CCG's performance is significantly lower than the Berkshire CCG average.

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



*****QOF indicators and spine charts to be added to each section*****

5.421 Diabetes

Figure 41: GP practice performance for DM30 (QOF 2011/12)

Graph to be added

Figure 42: GP practice performance for DM31 (QOF 2011/12)

Graph to be added

5.422 Risk factors for Diabetes

A graph for SMOKE 03 is included in the Risk factors for Cardiovascular Disease section on page ?

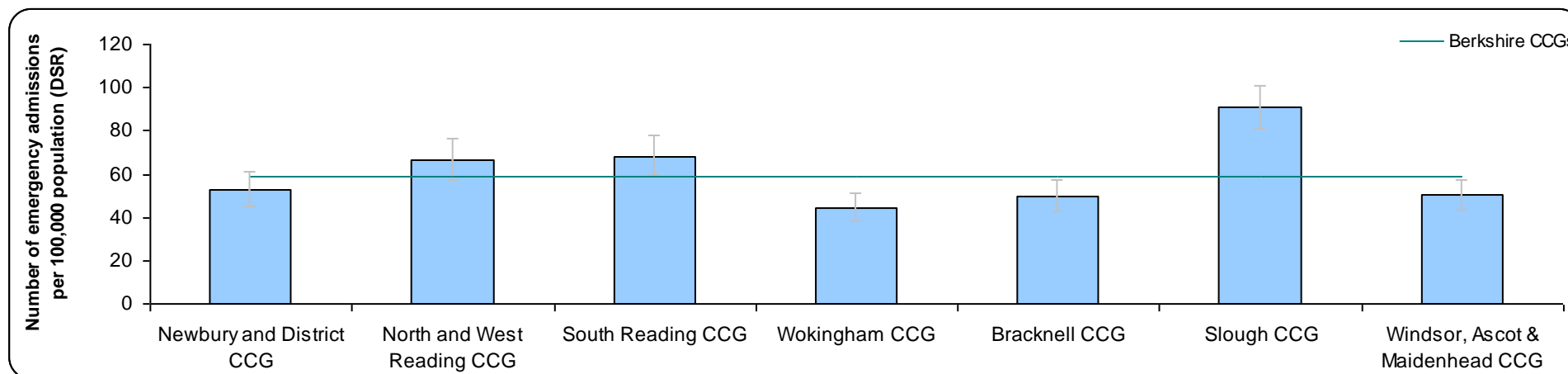
5.43 Hospital Admissions and Activity

5.431 Diabetes Emergency Admissions (2009-2011)

During 2009-2011, there were 191 emergency admissions for Diabetes in Bracknell & Ascot CCG. 45% of these admissions were for women and 55% were for men.

Figure 43 shows the standardised admission rate for the Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was lower than the Berkshire average.

Figure 43: Emergency admissions for Diabetes in 2009-2011 per 100,000 population (Directly Standardised rate)



5.5 Mental Health

Mental illness is the single largest cause of disability in the UK. At least one in four people will experience a mental health problem at some point in their life and one in six adults have a mental health problem at any one time. Approximately 1% of the UK population has a severe mental health problem and many will have begun to suffer from this in their teens or early twenties.

A new Mental Health Outcomes Framework was published in 2011, which aims to provide better mental health for all and to increase the numbers of people recovering from mental illness. The NHS Outcomes Framework 2012/13 also contains three improvement areas relating specifically to mental health, which includes premature mortality in people with serious mental illness, employment of people with mental illness and patient experience of community mental health services.

According to the Alzheimer's Society, there are around 800,000 people in the UK with dementia. One in three people over 65 will develop dementia and two-thirds of people with dementia are women. The number of people with dementia is increasing because people are living longer. It is estimated that by 2021, the number of people with dementia in the UK will have increased to around 1 million.

5.51 Mental Health profile for Bracknell & Ascot CCG

This section provides information about the prevalence of different Mental Health problems in the CCG area and is taken from the Quality and Outcomes Framework for 2011/12. The figures shown here are based on the total registered population of the CCG and GPs and do not take the demographic profile of an area into account.

5.511 Mental Health (with schizophrenia, bipolar disorder or other psychoses)

Number of people on Mental Health Register:	<i>to be added</i>
Prevalence in CCG area:	<i>to be added</i>
Comparison of prevalence:	<i>to be added</i>

Figure 44: Prevalence of specific Mental Health problems at a GP practice level (QOF 2011/12)

Graph to be added

5.512 Depression

Number of people on Depression Register (aged 18+):	<i>to be added</i>
Prevalence in CCG area:	<i>to be added</i>
Comparison of prevalence:	<i>to be added</i>

Figure 45: Prevalence of Depression in population aged 18 and over at a GP practice level (QOF 2011/12)

Graph to be added

5.513 Dementia

Number of people on Dementia Register:	<i>to be added</i>
Prevalence in CCG area:	<i>to be added</i>
Comparison of prevalence:	<i>to be added</i>

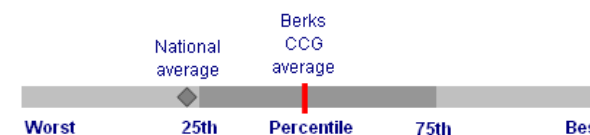
Figure 46: Prevalence of Dementia at a GP practice level (QOF 2011/12)

Graph to be added

5.52 Quality of Care

The Quality Outcomes Framework (QOF) indicators that are used to monitor care for Mental Health, Depression and Dementia are included below and come from the 2011/12 dataset. These show Bracknell & Ascot CCG's performance compared with all of the Berkshire CCGs and the national average. Additional graphs are included for indicators where Bracknell & Ascot CCG's performance is significantly lower than the Berkshire CCG average.

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



*****QOF indicators and spine charts to be added to each section*****

5.521 Mental Health

5.522 Depression

5.523 Dementia

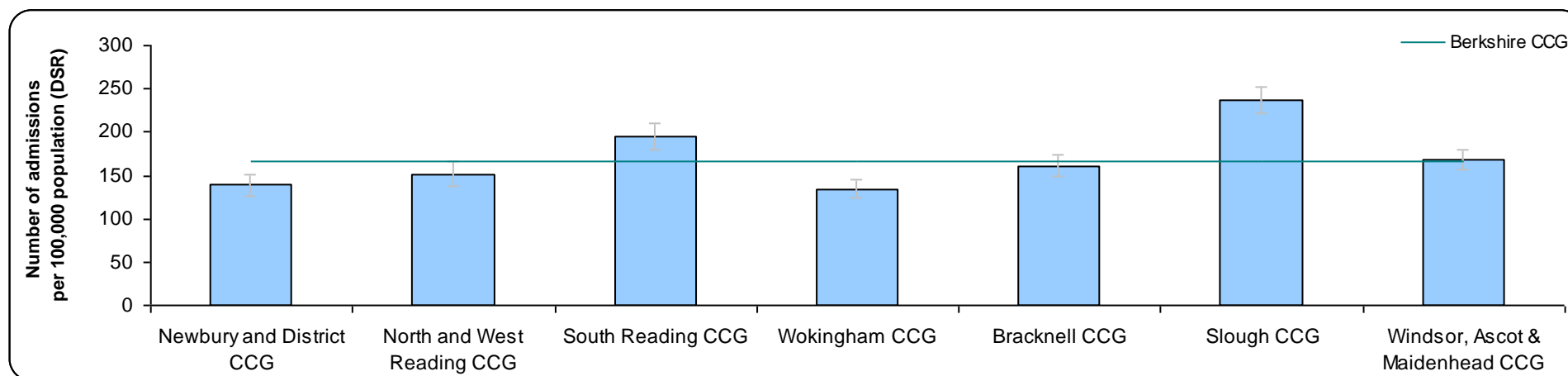
5.53 Hospital Admissions and Activity

5.531 Hospital Admissions for Mental or Behavioural Disorders (2009-2011)

Number of hospital admissions for mental or behavioural disorders:	667	
% of admissions that were	Male: 40%	Female: 60%

Figure 47 shows the standardised admission rate for Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was slightly lower than the Berkshire average.

Figure 47: Hospital admissions for people with Mental or Behavioural Disorders in 2009-2011 per 100,000 population (Directly Standardised rate)

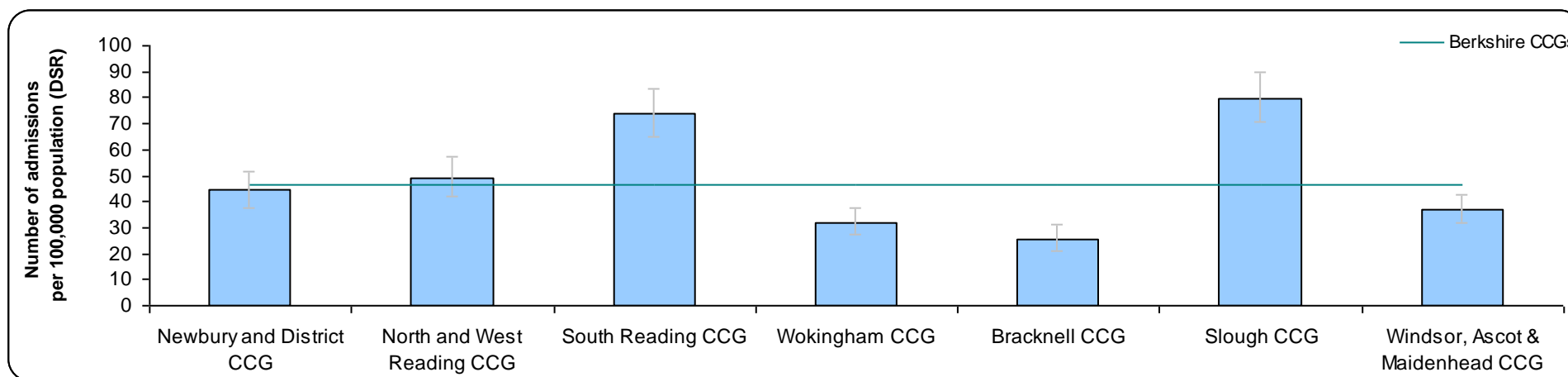


5.532 Hospital Admissions for people with Psychoses (2009-2011)

Number of hospital admissions for people with Psychoses:	167	
% of admissions that were	Male: 65%	Female: 35%

There were 167 admissions into hospital for people with psychoses during 2009-2011. 81 of these admissions had Psychoses recorded as the primary reason for the admission. Figure 48 shows the standardised admission rate for Berkshire CCGs over the three year period. Bracknell & Ascot CCG's admission rate was lower than the Berkshire average.

Figure 48: Hospital admissions for people with Psychoses in 2009-2011 per 100,000 population (Directly Standardised rate)

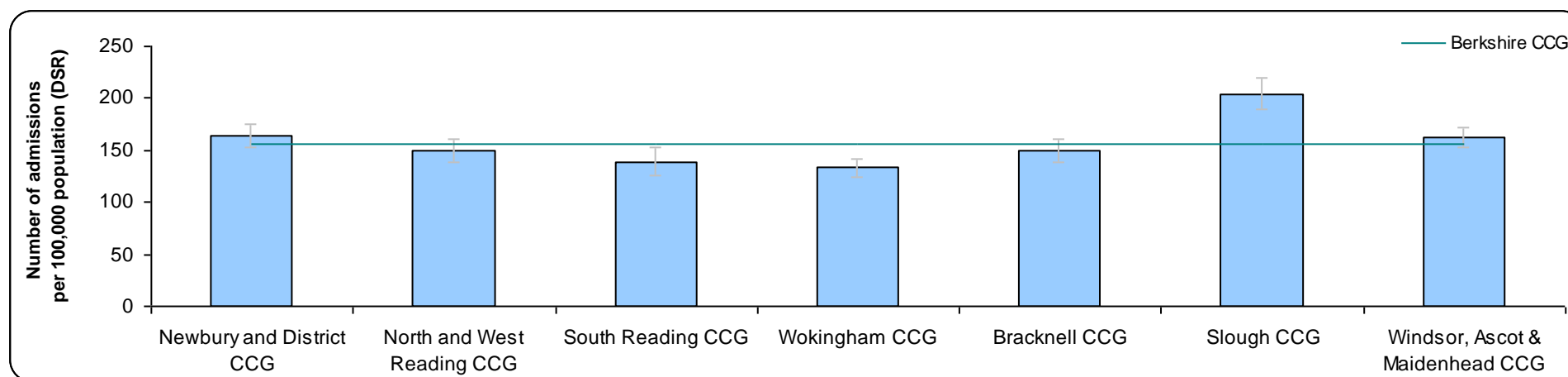


5.533 Hospital Admissions for people with Dementia (2009-2011)

Number of hospital admissions for people with Dementia:	721	
% of admissions that were	Male: 61%	Female: 39%

There were 721 admissions into hospital for people with dementia during 2009-2011. 50 of these admissions had dementia recorded as the primary reason for the admission. Figure 49 shows the standardised admission rate for Berkshire CCGs over the three year period. Bracknell & Ascot CCG’s admission rate was slightly lower than the Berkshire average.

Figure 49: Hospital admissions for people with Dementia in 2009-2011 per 100,000 population (Directly Standardised rate)

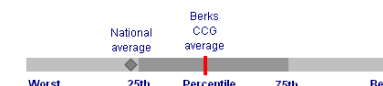


6. GP Survey 2012/13 – a local view of services

The GP Survey is sent out twice a year and is used to assess patients' experience of the quality of care they receive from their local GP, as well as how easy it is to access services. The table below provides a summary of the latest GP Survey results for Bracknell & Ascot CCG, which was sent out between July 2012 and March 2013. This compares the CCG's performance against the national and Berkshire CCG averages.

Indicator	CCG Value	Berks CCG Avg	Eng Avg	Berks CCG Worst	Berkshire Range	Berks CCG Best
GPS03 Ease of getting through to someone at GP surgery on the phone - Easy (total)	76%	77%	75%	16%		99%
GPS04 Helpfulness of receptionists at GP surgery - Helpful (total)	86%	87%	88%	70%		98%
GPS05 Overheard in reception area - Yes (total)	88%	84%	83%	99%		57%
GPS09 Frequency of seeing preferred GP - always, almost always or a lot of the time (total)	61%	60%	63%	13%		90%
GPS12 Able to get an appointment to see or speak to someone - Yes (total)	86%	86%	86%	67%		100%
GPS15 Convenience of appointment - Convenient (total)	91%	90%	92%	71%		100%
GPS18 Overall experience of making an appointment - Good (total)	72%	75%	76%	37%		98%
GPS21a Rating of GP giving you enough time - Good (total)	85%	84%	86%	68%		95%
GPS21b Rating of GP listening to you - Good (total)	87%	86%	88%	70%		96%
GPS21c Rating of GP explaining tests and treatments - Good (total)	82%	81%	83%	60%		94%
GPS21d Rating of GP involving you in decisions about your care - Good (total)	75%	73%	75%	58%		88%
GPS21e Rating of GP treating you with care and concern - Good (total)	82%	81%	83%	66%		97%
GPS22 Confidence and trust in GP - Yes (total)	91%	92%	93%	76%		99%
GPS23a Rating of nurse giving you enough time - Good (total)	81%	81%	81%	44%		93%
GPS23b Rating of nurse listening to you - Good (total)	79%	80%	80%	43%		96%
GPS23c Rating of nurse explaining tests and treatments - Good (total)	76%	77%	78%	44%		92%
GPS23d Rating of nurse involving you in decisions about your care - Good (total)	66%	66%	68%	28%		83%
GPS23e Rating of nurse treating you with care and concern - Good (total)	80%	78%	79%	45%		94%
GPS24 Confidence and trust in nurse - Yes (total)	87%	86%	87%	56%		96%
GPS25 Satisfaction with opening hours - Satisfied (total)	78%	78%	80%	59%		98%
GPS28 Overall experience of GP surgery - Good (total)	86%	85%	87%	57%		98%
GPS29 Recommending GP surgery to someone who has just moved to local area - Yes (total)	80%	77%	80%	51%		96%
GPS32 Last 6 months, enough support from local services to help manage LTC - Yes (total)	60%	61%	64%	40%		77%
GPS33 Confidence in managing own health - Confident (total)	94%	93%	93%	82%		98%
GPS35 Activities limited today due to recent illness or injury - Yes (total)	18%	18%	18%	28%		6%
GPS38 Ease of contacting the out-of-hours GP service by telephone - Easy (total)	87%	83%	79%	54%		100%
GPS40 Confidence and trust in out-of-hours clinician - Yes (total)	84%	85%	81%	50%		100%
GPS41 Overall experience of out-of-hours GP services - Good (total)	72%	73%	70%	45%		100%

- Significantly better than Berkshire CCGs average
- Significantly worse than Berkshire CCGs average
- Not significantly different from Berkshire CCGs average



The 2012/13 GP Survey was sent out to 4,958 registered patients in the Bracknell & Ascot CCG region. 37% of people responded to the survey.

6.1 Significantly better than Berkshire CCG average

Bracknell & Ascot CCG performed significantly better in two of the questions. The first was the proportion of people that would recommend their GP surgery to someone moving into the area (GPS29) and the second was the proportion of people who find it easy to contact the out-of-hours GP services by phone (GPS38).

6.2 Significantly worse than Berkshire CCG average

The CCG performed significantly worse than the Berkshire CCG average in 2 of the questions. Charts to show the individual practice scores are included below.

Figure 50: GP practice performance for GPS05: Overheard in GP reception (GP Survey 2012/13)

Graph to be added

Figure 51: GP practice performance for GPS18: Overall experience of making an appointment at surgery (GP Survey 2012/13)

Graph to be added