

# Public Document Pack



**WOKINGHAM**  
**BOROUGH COUNCIL**

Civic Offices  
Shute End  
Wokingham  
RG40 1BN

Tel: 0118 974 6319  
E-mail: [democratic.services@wokingham.gov.uk](mailto:democratic.services@wokingham.gov.uk)

To:- All Board Members

## **HEALTH AND WELLBEING BOARD - THURSDAY 13TH AUGUST, 2015**

I am now able to enclose, for consideration at the next Thursday 13th August 2015 meeting of the Health and Wellbeing Board, the following draft CCG Cluster profiles which are Item 32 of the agenda sent out recently.

<b>Agenda No</b>	<b>Item</b>
------------------	-------------

32.	<b><u>CCG Cluster Profiles</u> (Pages 3 - 100)</b>
-----	--

To receive an update on the CCG Cluster Profiles. (10 mins)

Yours sincerely

Andy Couldrick  
Chief Executive

**This page is intentionally left blank**

**Wokingham CCG**

**East Cluster Profile**

**July 2015**

## Contents

Introduction .....	1
Who is included in the East Cluster? .....	1
Summary .....	2
Population profile .....	3
Ethnicity .....	5
Employment Status .....	6
Caring Responsibilities .....	7
Deprivation Profile .....	8
Lifestyle and Health Behaviour .....	9
Smoking Status .....	9
Obesity Prevalence .....	10
Depression .....	11
4 Prevalence of Long Term Conditions for Children .....	12
Asthma .....	12
Diabetes .....	12
Chronic Obstructive Pulmonary Disease .....	13
Epilepsy .....	13
Prevalence of Long Term Conditions for Adults .....	14
Atrial Fibrillation .....	15
Cancer .....	16
Chronic Obstructive Pulmonary Disease .....	17
.....	17
Coronary Heart Disease .....	18
Dementia .....	19
Diabetes .....	20

---

Heart Failure .....	21
Hypertension.....	22
Mental Health.....	23
Stroke or Transient Ischaemic Attack (TIA) .....	24
GP Patient Survey .....	25
Support to Manage LTC.....	25
Confidence Managing Own Health.....	26
Satisfaction with Opening Hours .....	27
Additional opening hours that would make it easier to see or speak to someone .....	28

## Introduction

Wokingham CCG's East Cluster Profile has been produced to inform the work surrounding the Better Care Fund and the subsequent GP Cluster work that has emerged. This Profile, in conjunction with the North and West Cluster Profiles, can be used to inform the work going forward and help inform the services offered in each cluster.

Wokingham CCG Locality Profiles are produced on an annual basis by Public Health Services from Berkshire. The Cluster Profiles are based on these and include available GP Practice-level data, however not all data is available at this level. Data based on a geographical level, such as Middle Super Output Areas (MSOAs) or wards, also cannot be included as these boundaries are not coterminous with GP Practice populations.

This profile includes information from three main sources;

- The GP Patient Survey 2015
- Health and Social Care Information Centre
- Quality Outcomes Framework 2013-14

These are the most robust data sources available for GP Practice level data. The GP Patient Survey is a national survey that is standardised across the country to produce detailed information at a GP Practice level. The results from the Survey are included in the CCG Outcomes Framework. However, as with all surveys, the data is self-reported and is based on the sample size and response rate of the individual Practice's patients. These figures will therefore have wider confidence intervals than other sources, than other data sources, such as GP registers, Patient records and the subsequent Quality Outcomes Framework (QOF).

In relation to the graphs and data within this profile it has been highlighted if there are significant differences. These are significant in a statistical sense, which means that there is a statistically significant difference between two or more data sets and this can be stated with absolutely certainty, there is no potential that this difference has occurred due to chance.

## Who is included in the East Cluster?

The East Cluster consists of 5 GP practices;

- Woosehill Surgery
- Wokingham Medical Centre
- Burma Hills Surgery
- Finchampstead Surgery
- New Wokingham Road Surgery

It is important to note that GP Practice information is based on people registered with each Practice. This means that there will be some Wokingham residents that are not included in the CCG Locality Profile, or Cluster Profiles, as they are registered to GP Practices outside the Borough. In contrast, there will also be some non-Wokingham residents that are registered to Wokingham GP Practices and therefore included in these figures.

## Summary

### Population

- Wokingham CCG's East Cluster had a registered population of 58,737, this was 37% of Wokingham CCG's total registered population
- There was a higher percentage of people retired, looking after home or doing something else than compared to the Wokingham CCG

### Deprivation

- One of the 'most deprived' GP Practices, based on registered population, within Wokingham CCG, Burma Hills, is based in the East Cluster – Burma Hills

### Lifestyle and Behaviour

- Smoking: 60.3% were estimated to have never smoked compared with 58.8% in Wokingham CCG, therefore there was a lower risk of poor health outcomes
- Obesity: There were significantly fewer (7.7%) residents within the East Cluster registered as obese when compared with Wokingham CCG (8.3%)

### Children and Young People

- 11.7% of all children aged 19 years and under were estimated to have Asthma
- 0.34% of all children were estimated to have Diabetes
- 0.42% of children were estimated to have COPD
- 0.41% of children were estimated to have epilepsy

### Adults

- The prevalence of Asthma, Atrial Fibrillation, Chronic Obstructive Pulmonary Disease, Coronary Heart Disease, Dementia, Heart Failure, Hypertension, Mental Health and Stroke/Transient Ischemic Attack had no significant difference between the East Cluster and Wokingham CCG
- The prevalence of Cancer in the East Cluster was significantly higher than the Wokingham CCG
- The prevalence of Diabetes in the East Cluster was significantly lower than the Wokingham CCG

### GP Patient Survey

- Support to manage Long Term Conditions: 42.5% of the East Cluster respondents were definitely happy with the support they received, compared to 40.7% of Wokingham CCG respondents
- Confidence managing own health: 45.51% of the East respondents were very confident managing their own health compared to 46.6% of the Wokingham CCG respondents
- Opening hours: 35.53% of the East respondents were very satisfied with the opening times at their GP
- When given the choice East Cluster respondents felt that opening on a Saturday and after 6.30pm would be most useful

## Population profile

The 2013 mid-year estimates indicate that the resident population for the Wokingham CCG locality was 157,866. The latest registered population figure for Wokingham CCG was higher at 158,339 on 31<sup>st</sup> March 2015. This discrepancy will be made up of people who live outside of the CCG boundary and also a percentage of people on GP patient lists that no longer live in the area.

Wokingham CCG's East cluster had a registered population of 58,737 on 31<sup>st</sup> March 2015. This is 37% of Wokingham CCG's total registered population and is shown in Figure 1.

**Figure 1: Registered population for Wokingham CCG's East Cluster at 31-Mar-15**

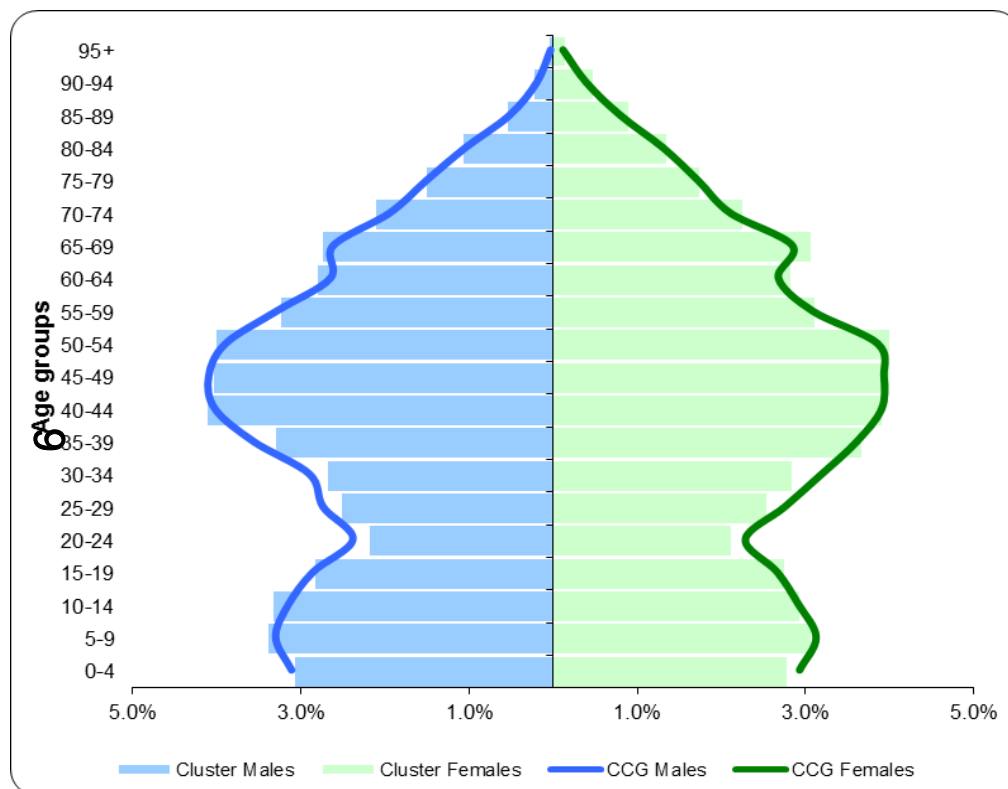
Age Group	Male	Female	People
0-4	1,804	1,628	3,432
5-9	1,992	1,795	3,787
10-14	1,949	1,715	3,664
15-19	1,663	1,609	3,272
20-24	1,282	1,242	2,524
25-29	1,475	1,490	2,965
30-34	1,569	1,661	3,230
35-39	1,937	2,154	4,091
40-44	2,414	2,290	4,704
45-49	2,365	2,344	4,709
50-54	2,354	2,342	4,696
55-59	1,897	1,822	3,719
60-64	1,646	1,658	3,304
65-69	1,610	1,801	3,411
70-74	1,235	1,320	2,555
75-79	885	1,019	1,904
80-84	626	789	1,415
85-89	316	528	844
90-94	133	277	410
95+	23	78	101
<b>Total</b>	<b>29,175</b>	<b>29,562</b>	<b>58,737</b>

Source: Health and Social Care Information Centre (April 2015)



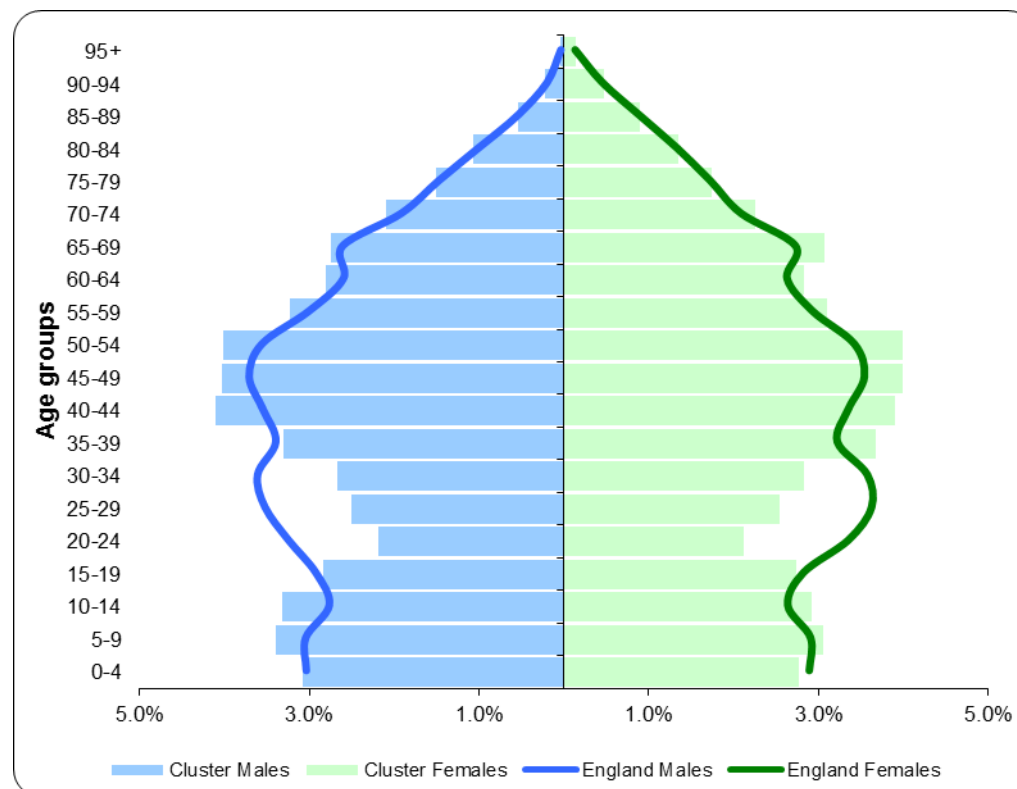
The graphs below show the registered population profile for Wokingham CCG's East cluster compared with the full Wokingham CCG profile (Figure 2) and also the national picture (Figure 3).

**Figure 2: Registered population pyramid for the East cluster compared with Wokingham CCG at 31-Mar-15**



Source: Health and Social Care Information Centre (April 2015)

**Figure 3: Registered population pyramid for the East cluster compared with compared with England at 31-Mar-15**



Source: Health and Social Care Information Centre (April 2015)

The East Cluster population profile differs slightly from Wokingham CCG's picture with a smaller proportion of young adults (aged 20 to 39) and a larger proportion of male adults (aged 65 to 69).

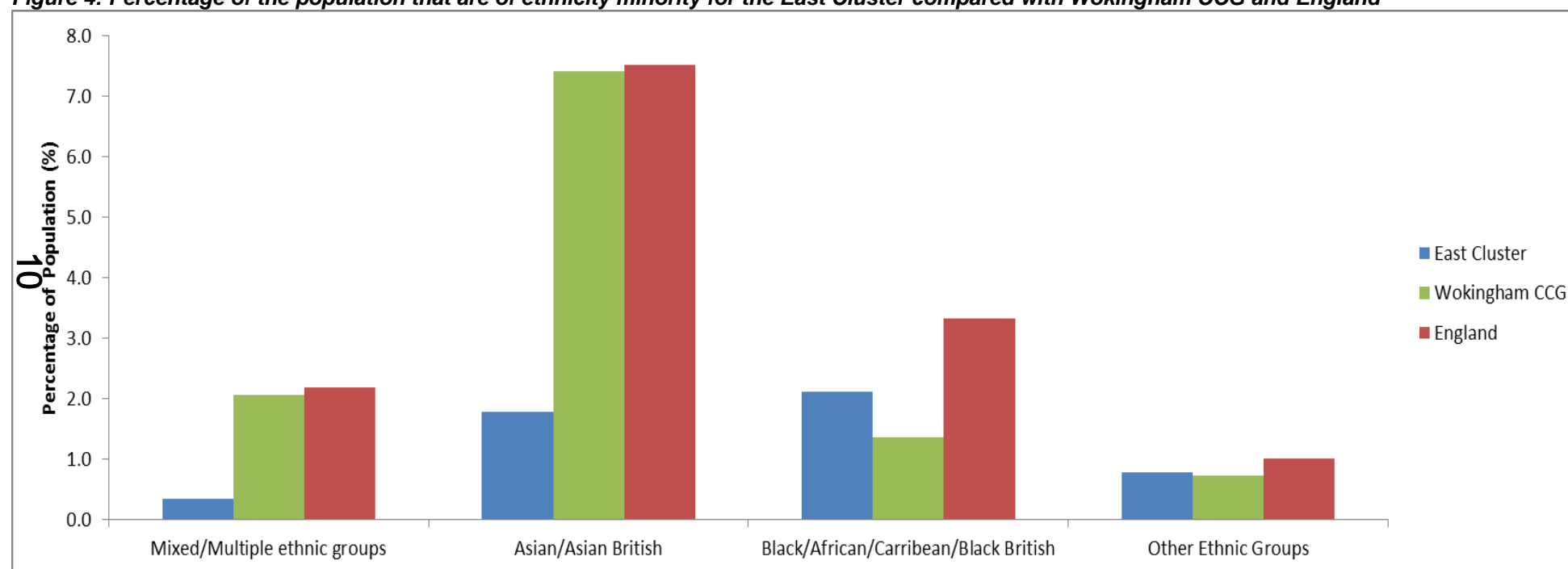
The East Cluster population profile differs more significantly from the national picture with a larger proportion of adults aged 40 to 54, but smaller proportion of younger adults (aged 20 to 39).

## Ethnicity

The majority of people registered within the East Cluster were White – English/ Welsh/ Scottish/ Northern Irish / British/ Irish/ Gypsy or Irish Traveller/ Any other white background with 95%. This was higher than both the Wokingham CCG and England levels, with 88.4% and 86% respectively.

Figure 4 clearly displays that the East Cluster had a lower level of all ethnic minorities when compared with England levels and a higher proportion of Black/African/Caribbean/Black British and other ethnic groups when compared with Wokingham CCG.

**Figure 4: Percentage of the population that are of ethnicity minority for the East Cluster compared with Wokingham CCG and England**

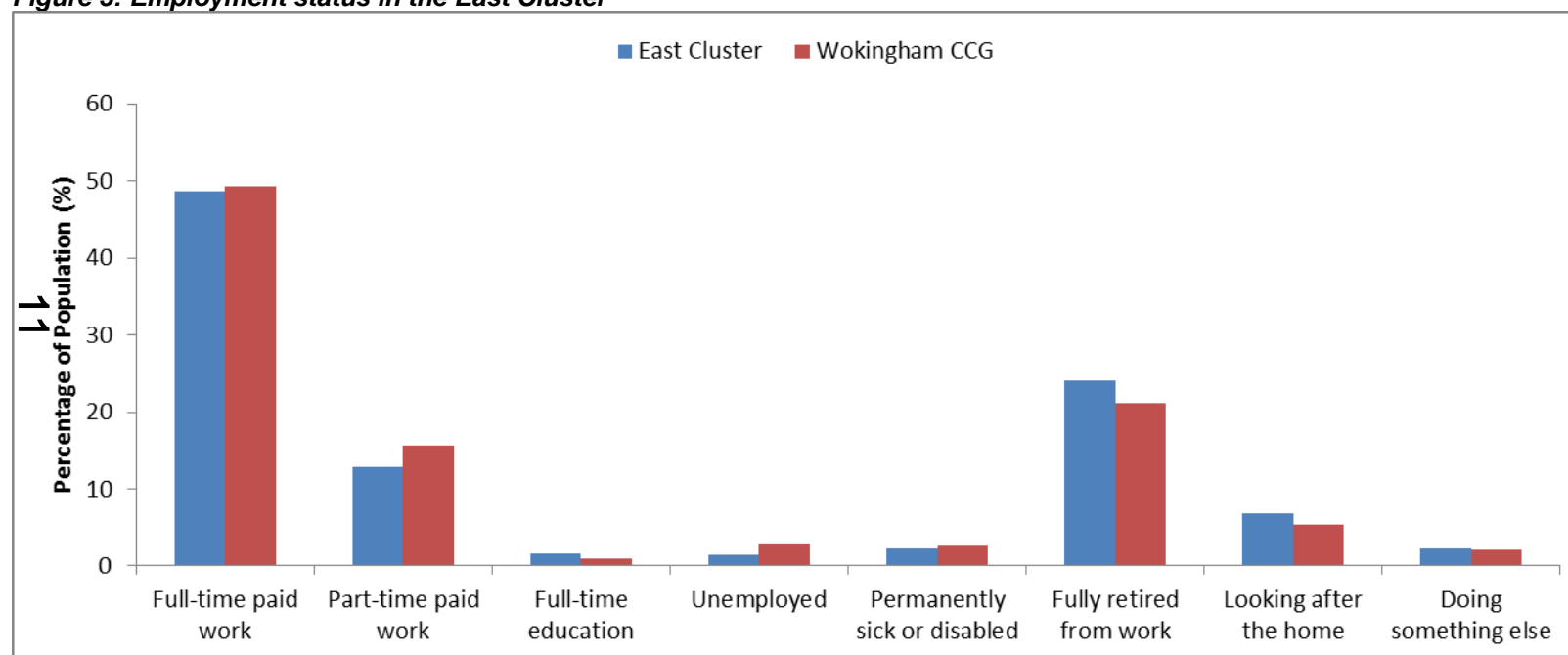


Source: GP Patient Survey January 2015

## Employment Status

When looking at the employment status the highest percentage of people (48.7%) within the East Cluster was in full time paid work. There were a lower proportion of people unemployed or permanently sick or disabled 1.5% and 2.3% respectively when compared with the Wokingham CCG, 2.9% and 2.7% respectively and a higher proportion of people that are fully retired from work 24.1% compared with 21.1% for Wokingham CCG.

**Figure 5: Employment status in the East Cluster**



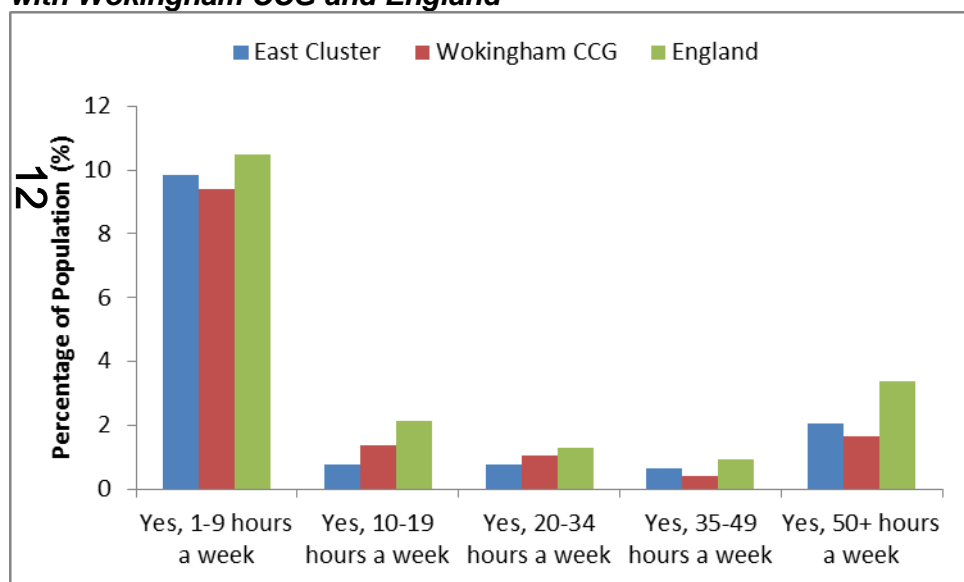
Source: GP patient survey January 2015

## Caring Responsibilities

The data from the GP Patient Survey published in January 2015 stated that 14.1% of the East Cluster identified themselves as a carer, this is slightly higher compared with the Wokingham CCG level data (13.9%). Figure 6 below shows the breakdown of how long those who identified themselves as a carer spent providing care; they were asked how long they spent providing the care in the last week.

This figure for Wokingham CCG of 13.9% was very different from the 9% figure reported in the 2011 census. The difference between these two figures could be due to many factors, such as sample size, time of question and response rate. The preferred data source would be Census level data due to its large sample size and validity; however this is not available at a GP Practice level and cannot be broken down into Clusters.

**Figure 6: Self-reported number of hours spent providing care per week (excluding hours spent as part of their job) in the East Cluster compared with Wokingham CCG and England**



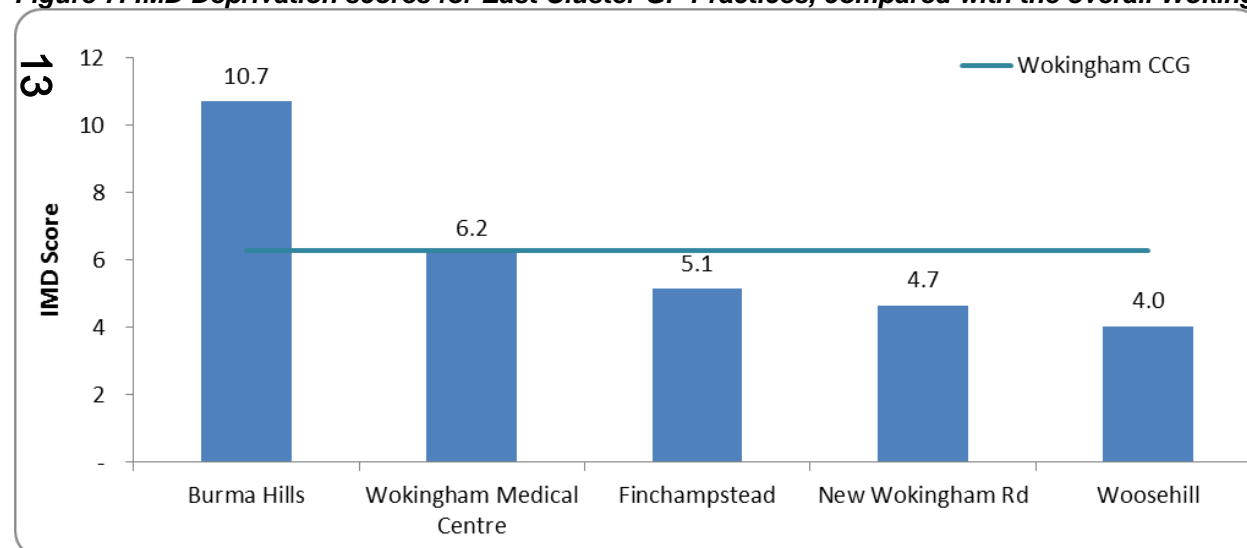
Source: GP Patient Survey January 2015

## Deprivation Profile

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 and disability, employment, education, skills and training, barriers to housing and services and living environment. The IMD enables neighbourhoods, or Lower Super Output Areas (LSOAs), to be ranked against each other according to their level of deprivation. Each LSOA covers a population of 1,000-3,000 people and an area with a higher IMD score will be more deprived than another.

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. The 'most deprived' GP practices in Wokingham CCG are Burma Hills, Wilderness Road and Parkside surgeries. One of these GP Practices is in the East Cluster. Burma Hills is based within the Norreys ward, which is the third most deprived ward in Wokingham Borough, this would explain why it is one of the most deprived GP surgeries. However, it is important to note that all of the GP Practices in Wokingham CCG are in the least deprived quartile of GP Practices nationally.

**Figure 7: IMD Deprivation scores for East Cluster GP Practices, compared with the overall Wokingham CCG score**



Source: Network of Public Health Observatories, Index of Multiple Deprivation 2010

## Lifestyle and Health Behaviour

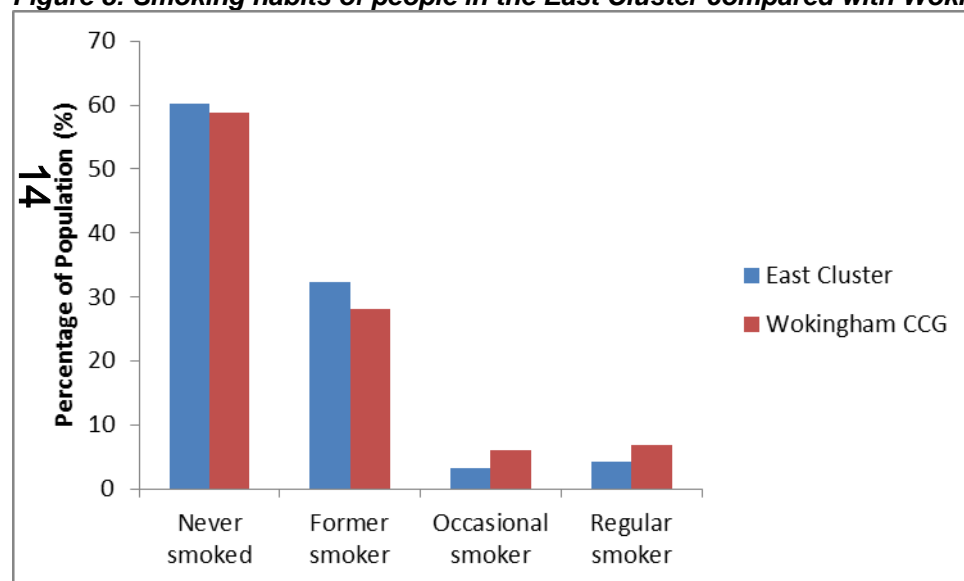
The lifestyle choices that people make can greatly affect people's health, both positively and negatively. Whilst these ultimately fall to the individual to change they are modifiable and with the right support these can be influenced.

This section looks at Smoking status, Obesity and Depression.

### Smoking Status

The GP Patient Survey asked people to describe their smoking habits, in total 901 people responded for the East Cluster. Of these 60.3% of people in the East Cluster identified themselves as never having smoked compared with 58.8% in Wokingham CCG. Figure 8 shows the East Cluster had a lower proportion of regular and occasional smokers (7.4%) than when compared with Wokingham CCG (12.9%).

**Figure 8: Smoking habits of people in the East Cluster compared with Wokingham CCG**



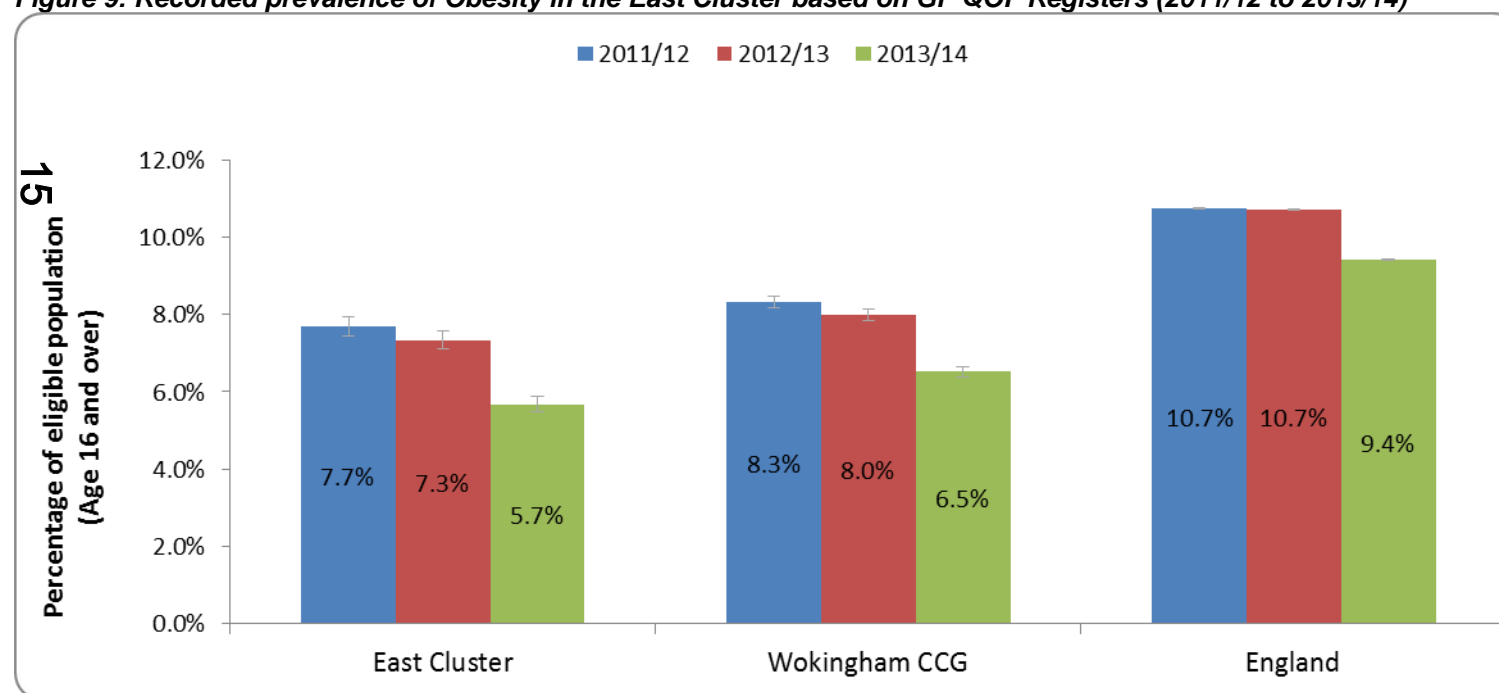
Data Source: GP Patient Survey January 2015

## Obesity Prevalence

Obesity is calculated by measuring a person's Body Mass Index (BMI). An adult aged 16 or above is classed as Obese if their BMI is equal to or above 30 in the preceding 12 months. It must be noted that BMI is calculated differently for children and the category boundaries can vary depending on ethnicity, for example if you are calculating the BMI of a Asian adult they would be classified as obese if their BMI was 27 or above.

Obesity within the East Cluster and Wokingham CCG was lower than the national average; Figure 9 shows that Wokingham CCG and the East Cluster followed the national trend of decreasing year-by-year for adults aged 16 years and over. The QOF does not collect data for children under 16 years of age, so the profile cannot give these figures, however modelled estimates are provided later in the profiles.

**Figure 9: Recorded prevalence of Obesity in the East Cluster based on GP QOF Registers (2011/12 to 2013/14)**



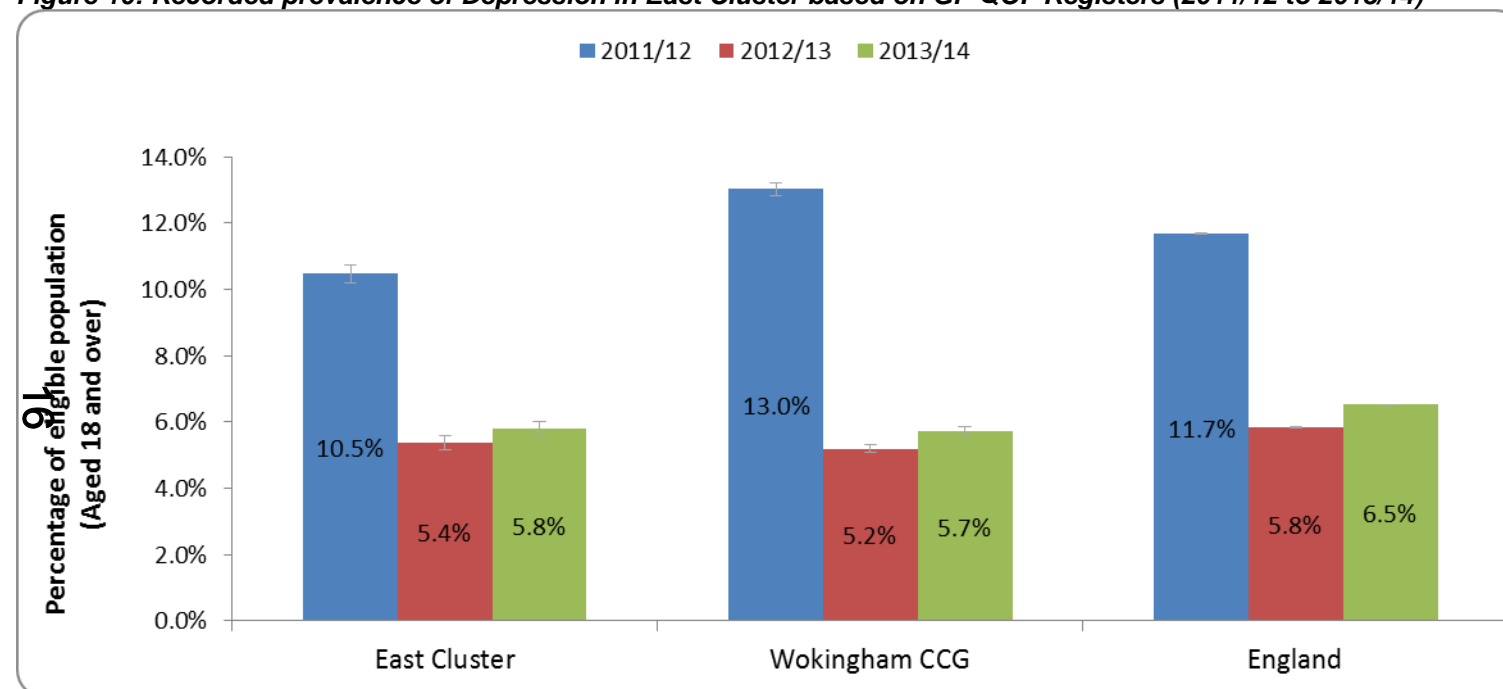
Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)

## Depression

The prevalence of depression decreased significantly in the East Cluster from 2011/12 to 2013/14.

However, it is important to point out that whilst figure 10 suggests that there was a large fall between 2011/12 and 2012/13 this was mainly due to the change in the definition for the depression register. Therefore we cannot directly compare these figures with 2011/12.

**Figure 10: Recorded prevalence of Depression in East Cluster based on GP QOF Registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)



## Prevalence of Long Term Conditions for Children

This section focuses on the health of children in the East Cluster, specifically looking at Long Term Conditions. The prevalence data children, unlike for adults, is not included in the QOF. For this reason national models need to be used to estimate the level of disease in local child populations. These agreed prevalence models can be found on the NHS comparators website. It is important to note that these models do not take into account local demographics or deprivation levels and therefore can only be used as a guide for the level of childhood disease in the local area.

### Asthma

The model suggests that 10.8% of all children aged 19 and under in the East cluster had asthma, this equates to approximately 14,155 children. An age and sex breakdown can be found in Figure 11. From this breakdown it is also possible to infer that a higher proportion of boys had asthma than girls, 11.7% compared with 9.9% respectively.

**Figure 11: Table displaying modelled age break down of Asthma in the East Cluster based on March 2015 population data, per 1,000 population, figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	166	278	272	151	867
Girls	92	203	194	177	667
<b>All</b>	<b>258</b>	<b>481</b>	<b>466</b>	<b>328</b>	<b>1533</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

### Diabetes

Approximately 48.1 children in the East cluster had diabetes, this equates to 0.34% which is based on modelled estimates. An age and sex breakdown can be found in Figure 12.

**Figure 12: Modelled estimates of diabetes prevalence in children aged 0-19 in the East Cluster based on March 2015 population data, per 100 population, figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	6	7	7	6	25
Girls	6	6	6	6	23
<b>All</b>	<b>12</b>	<b>13</b>	<b>12</b>	<b>11</b>	<b>48</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Chronic Obstructive Pulmonary Disease

The NHS comparators website does not give a definition of COPD, but is modelled with the use of Quality Outcome Framework (QOF) data. The QOF defines COPD as 'the name for a collection of lung diseases including chronic bronchitis and emphysema. People with COPD have difficulties breathing and the most common symptoms are increasing breathlessness when active and a persistent cough with phlegm.' Within the East Cluster the percentage of children modelled to have COPD was 0.42%. The age and sex break down below suggests that there were a higher proportion of boys, 0.44% with COPD than girls 0.39%.

**Figure 13: Modelled estimates of COPD prevalence in children aged 0-19 in the East Cluster based on March 2015 population data, per 100 population, figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	20	4	4	5	33
Girls	15	4	3	5	27
<b>All</b>	<b>34</b>	<b>8</b>	<b>7</b>	<b>10</b>	<b>59</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Epilepsy

The model suggested that 0.41% of the registered patients aged 19 years and under in the East Cluster were estimated as having Epilepsy. This is very similar to the CCG level modelled estimates. Figure 14 gives a sex and age breakdown.

**Figure 14: Modelled estimates of Epilepsy prevalence in children aged 0-19 in the East Cluster based on March 2015 population data, per 1,000 population, figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	3	9	9	10	31
Girls	3	7	7	10	28
<b>All</b>	<b>6</b>	<b>16</b>	<b>16</b>	<b>20</b>	<b>59</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Prevalence of Long Term Conditions for Adults

### Asthma

Number of people on the Asthma Register: 3,589  
Prevalence of Asthma: 6.16%

Asthma prevalence did not change significantly between 2011/12 and 2013/14 according to the QOF register. There were 3,589 people on the Asthma register however, according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 5,386 adults living with Asthma, which means there were 1,797 people potentially "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

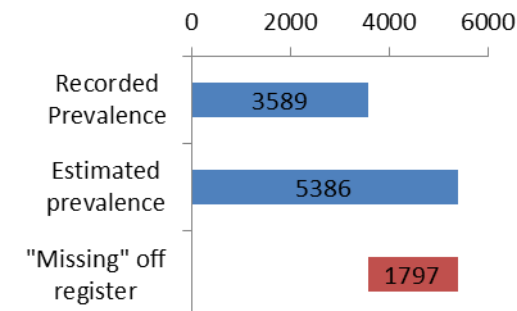
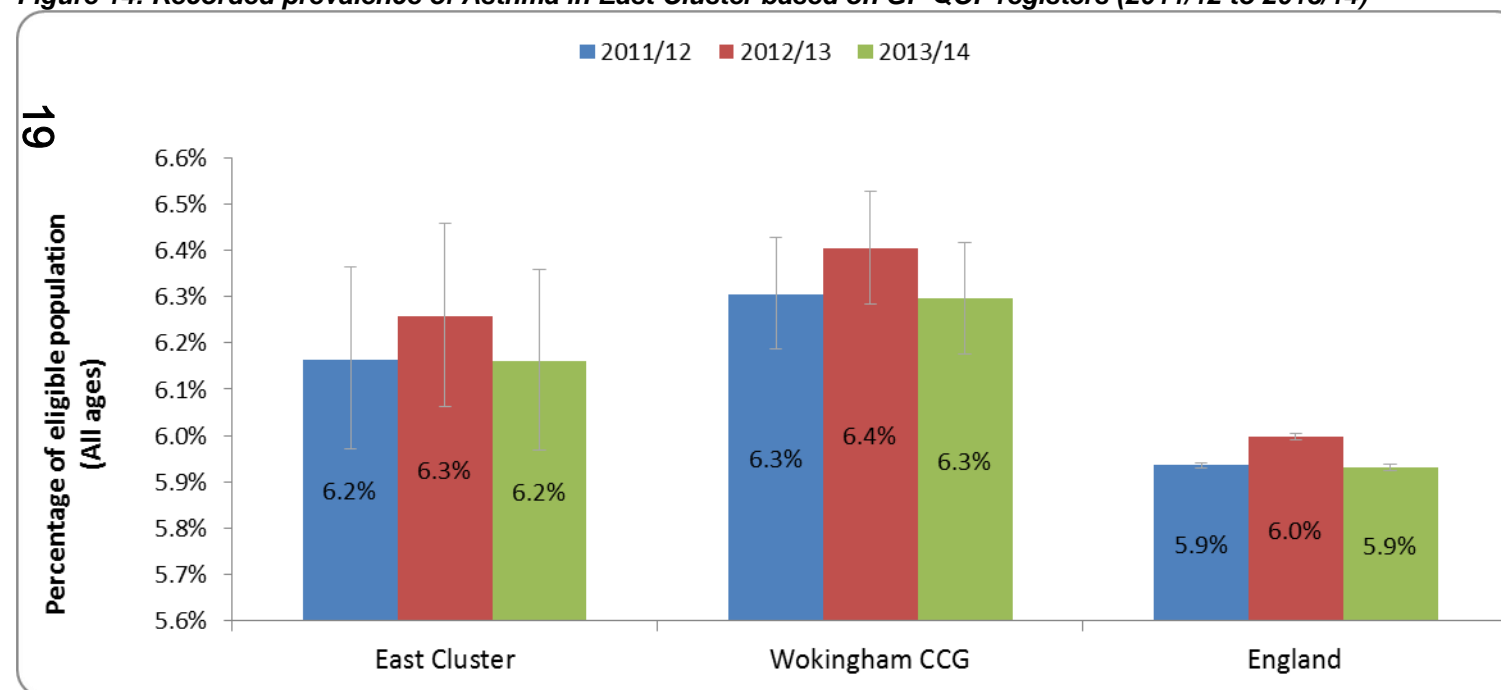


Figure 14: Recorded prevalence of Asthma in East Cluster based on GP QOF registers (2011/12 to 2013/14)



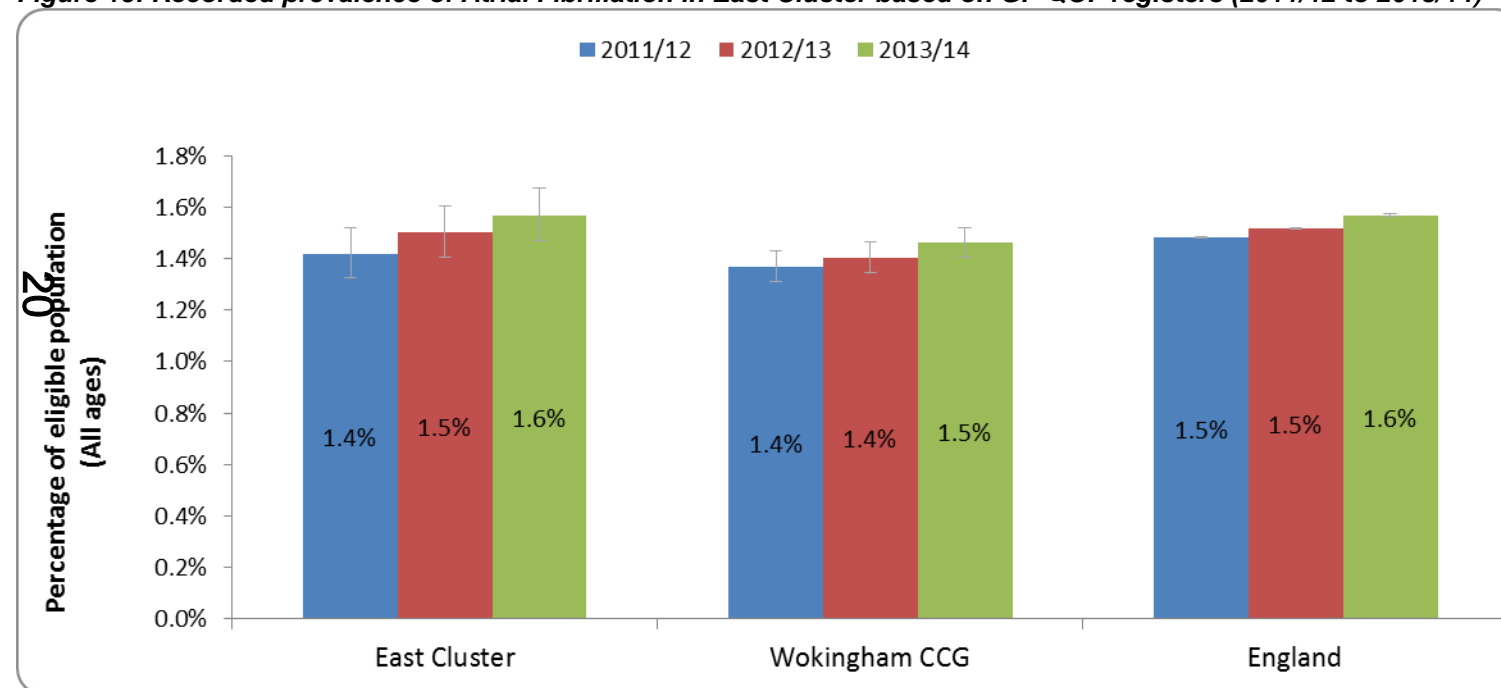
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Atrial Fibrillation

Number of people on the Atrial Fibrillation register: 914  
Prevalence of Atrial Fibrillation: 1.57%

The prevalence of Atrial Fibrillation in the East Cluster as of 2013/14 was 1.57%, which was the same as England. Neither the East Cluster nor the Wokingham CCG had changed significantly between 2011/12 and 2013/14. England significantly increased by 0.09% from 2011/12 to 2013/14.

**Figure 15: Recorded prevalence of Atrial Fibrillation in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



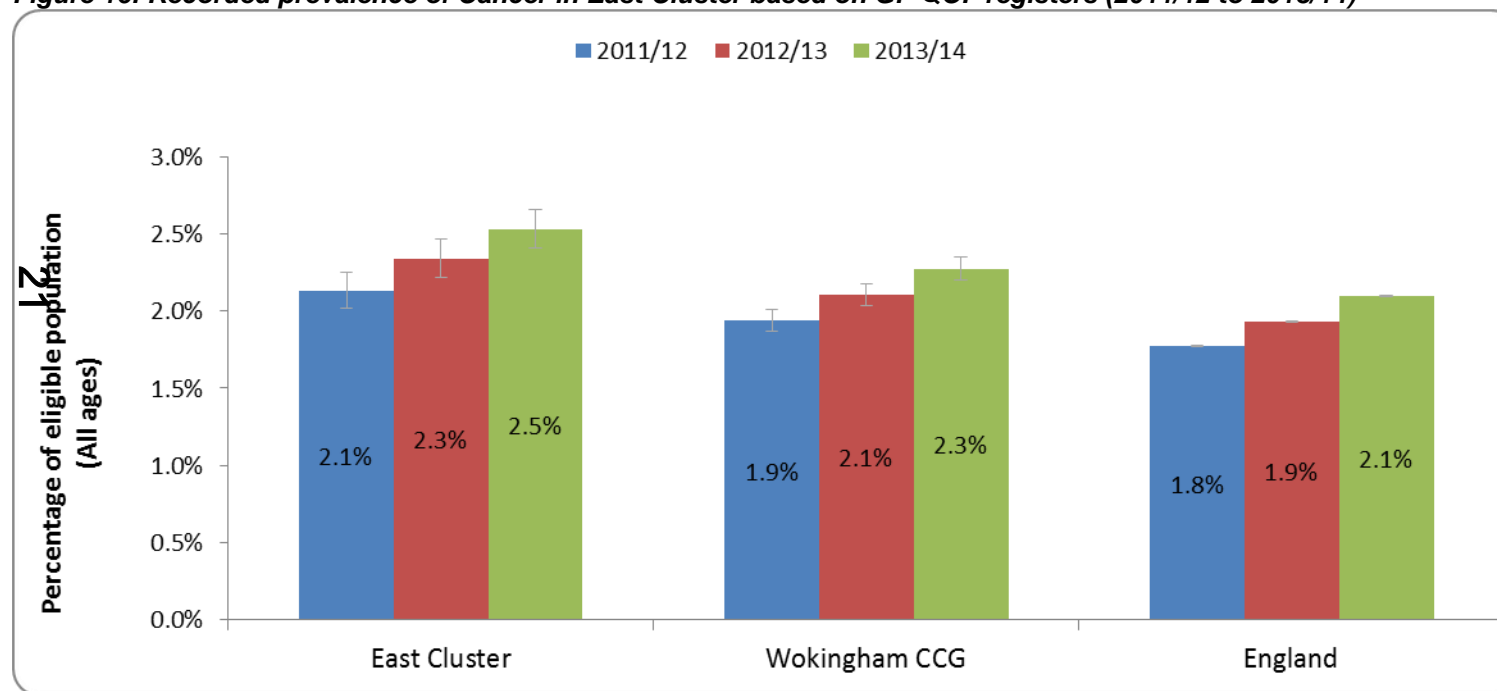
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Cancer

Number of people on the Cancer register: 1,474  
Prevalence of Cancer: 2.53%

The prevalence of cancer in the East cluster was 2.53% in 2013/14, which was a significant increase on 2011/12's figures. This is a trend that was seen both nationally and locally, with significant increases in both Wokingham CCG and England.

**Figure 16: Recorded prevalence of Cancer in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Chronic Obstructive Pulmonary Disease

Number of people on the COPD register: 552  
Prevalence of COPD: 0.95%

The Prevalence of COPD in the East Cluster did not significantly change from 2011/12 to 2013/14. In the East Cluster prevalence was 0.95% which was similar to Wokingham CCG with 0.97%. Nationally, England had a much higher prevalence at 1.78% and this significantly increased from 2011/12 to 2013/14. There were 552 people on the COPD register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 1056 people living with COPD within the East Cluster. This means there were potentially 504 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

East Cluster Profile 2015

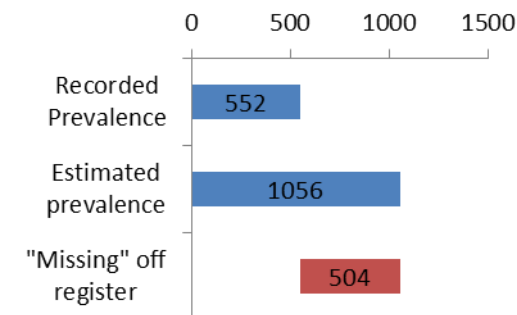
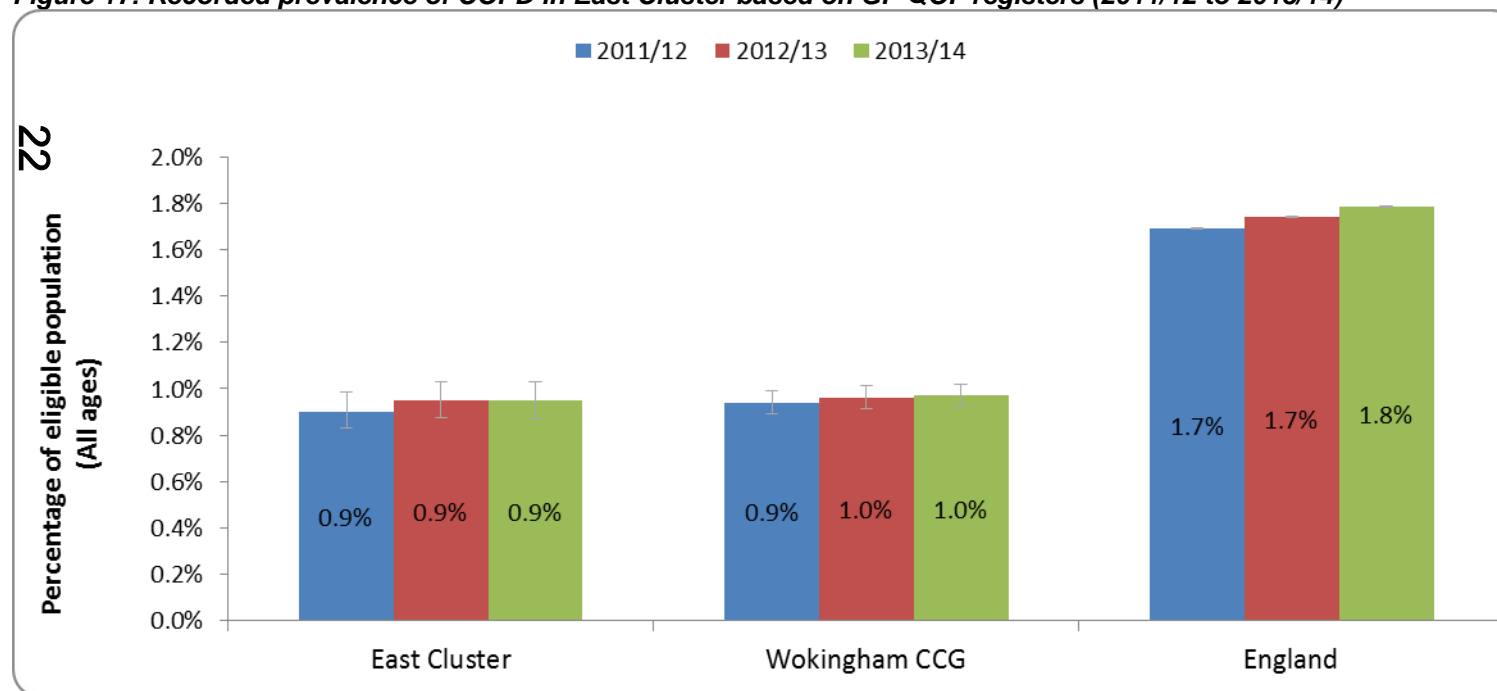


Figure 17: Recorded prevalence of COPD in East Cluster based on GP QOF registers (2011/12 to 2013/14)



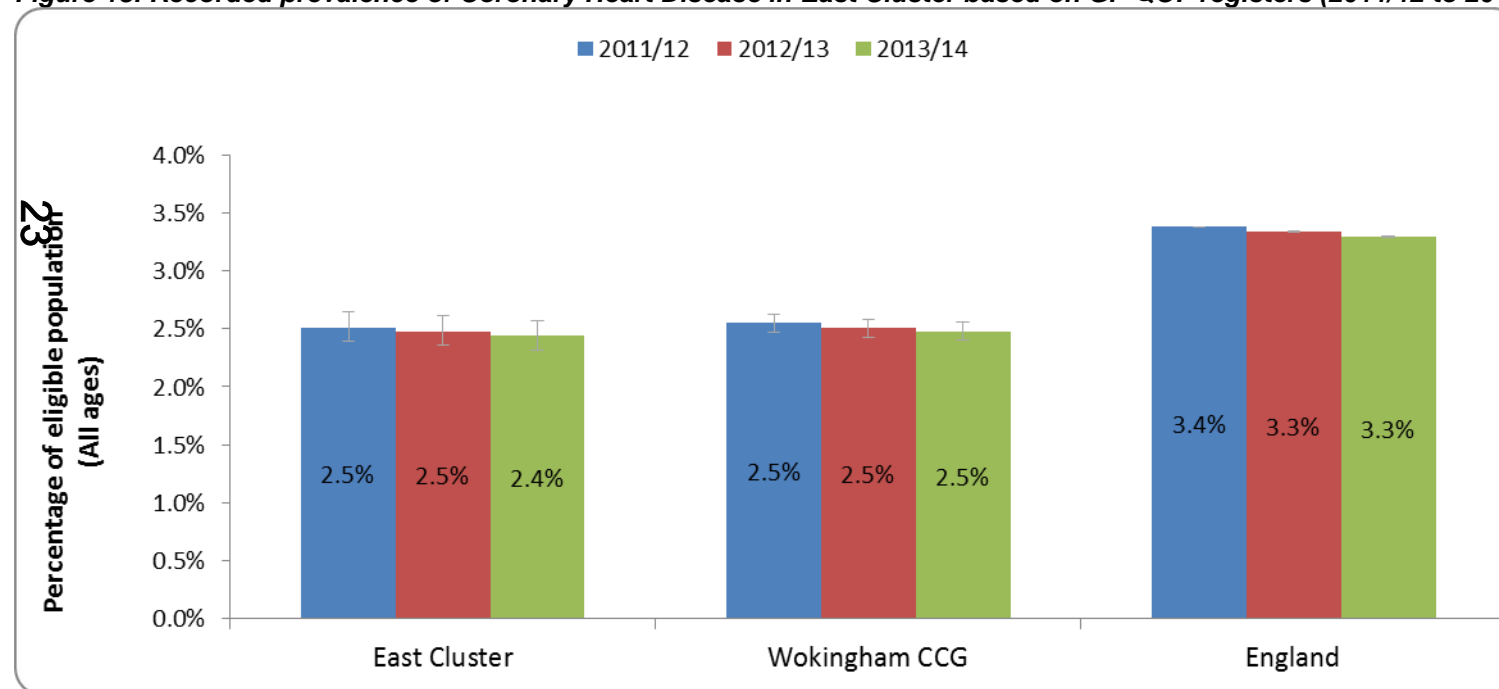
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Coronary Heart Disease

Number of people on the Coronary Heart Disease register: 1,423  
Prevalence of Coronary Heart Disease: 2.44%

In 2013/14, Coronary Heart Disease had a prevalence of 2.44% in the East Cluster compared with 2.48% in Wokingham CCG. Neither the East Cluster nor Wokingham CCG had significantly changed from 2011/12 to 2013/14. The England prevalence had significantly decreased from 2011/12 to 2013/14 from 3.38% to 3.29% but still remained greater than the East and Wokingham CCG prevalence rates.

**Figure 18: Recorded prevalence of Coronary Heart Disease in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

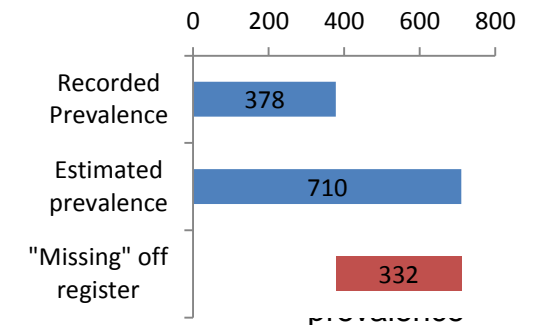
## Dementia

Number of people on the Dementia register: 378  
Prevalence of Dementia: 0.65%

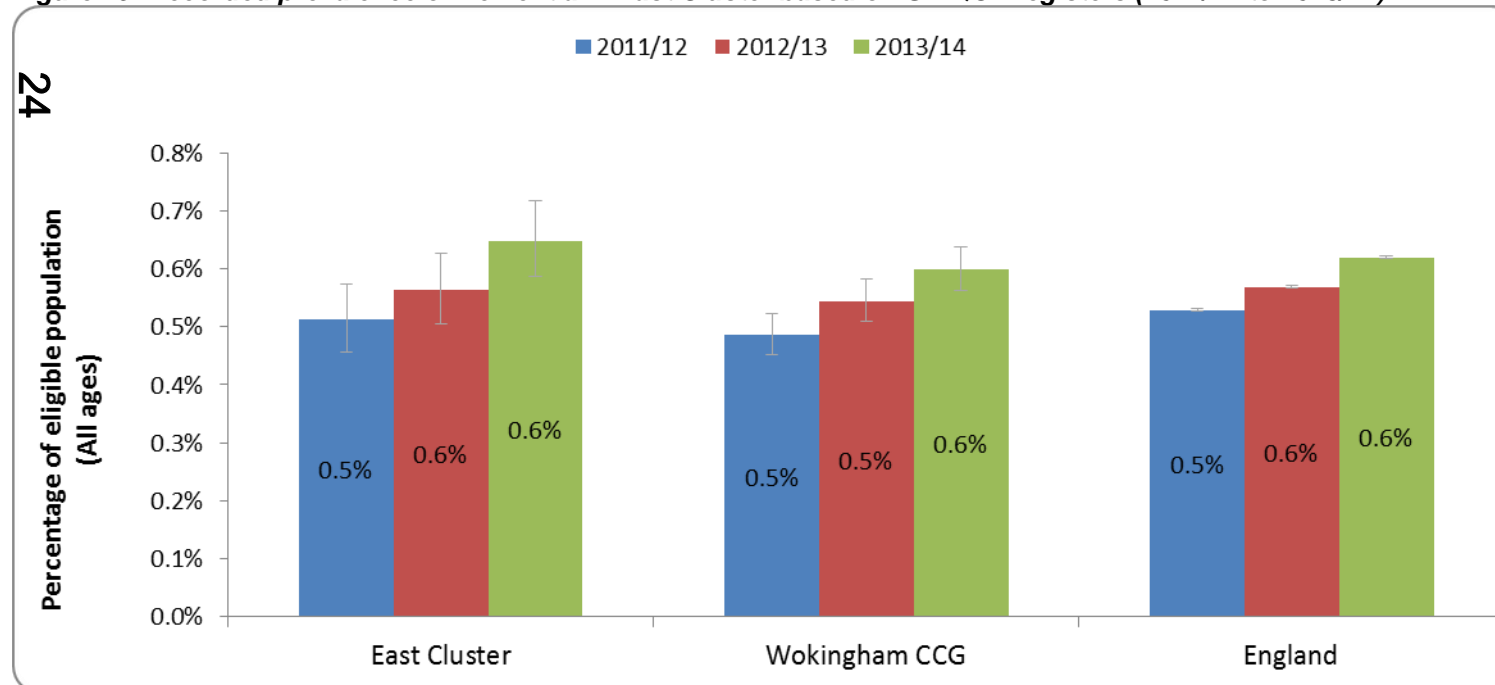
The prevalence of Dementia in the East Cluster was 0.65% and this significantly increased from 2011/12 to 2013/14. This is same with both the Wokingham CCG and England prevalence, both significantly increased. Wokingham CCG increased to 0.60% and England increased to 0.62%. It is worth noting that the Dementia could change in the future with the introduction the new QOF indicator for 2015/16 that looks at the percentage of patients with a new diagnosis of Dementia.

There were 378 people on the Dementia register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 710 people living with Dementia within the East Cluster. This means there were potentially 332 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

### East Cluster Profile 2015



**Figure 19: Recorded prevalence of Dementia in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

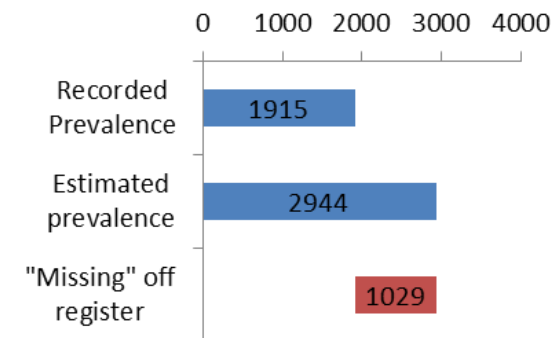


## Diabetes

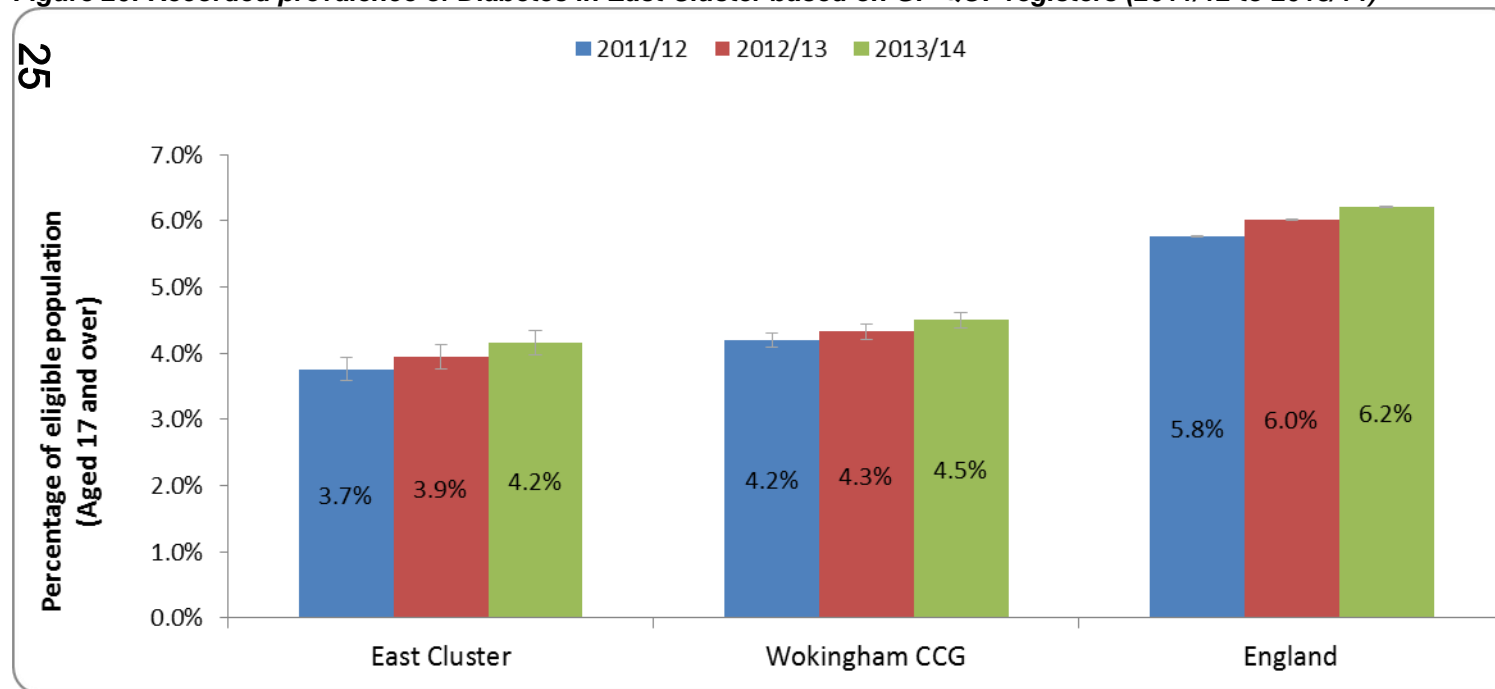
Number of people on the Diabetes register: 1,915  
Prevalence of Diabetes: 4.16%

The prevalence of Diabetes in the East cluster increased significantly from 2011/12 to 2013/14, and was 4.16% in 2013/14. This is a trend that has been seen both locally and nationally, with both the Wokingham CCG and England experiencing significant increases by 0.31% and 0.45% respectively. Both the East Cluster and Wokingham CCG had a lower prevalence of Diabetes than the national picture in England of 6.21%. There were 1,915 people on the Diabetes register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 2,944 people living with Diabetes within the East Cluster, this means there were potentially 1,029 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

### East Cluster Profile 2015



**Figure 20: Recorded prevalence of Diabetes in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



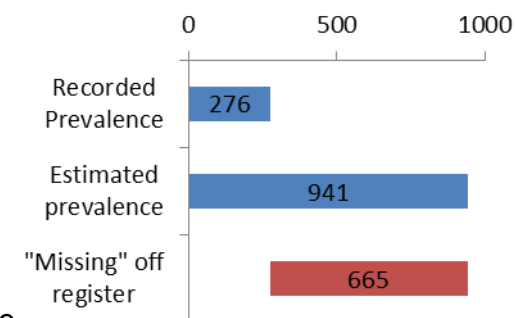
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Heart Failure

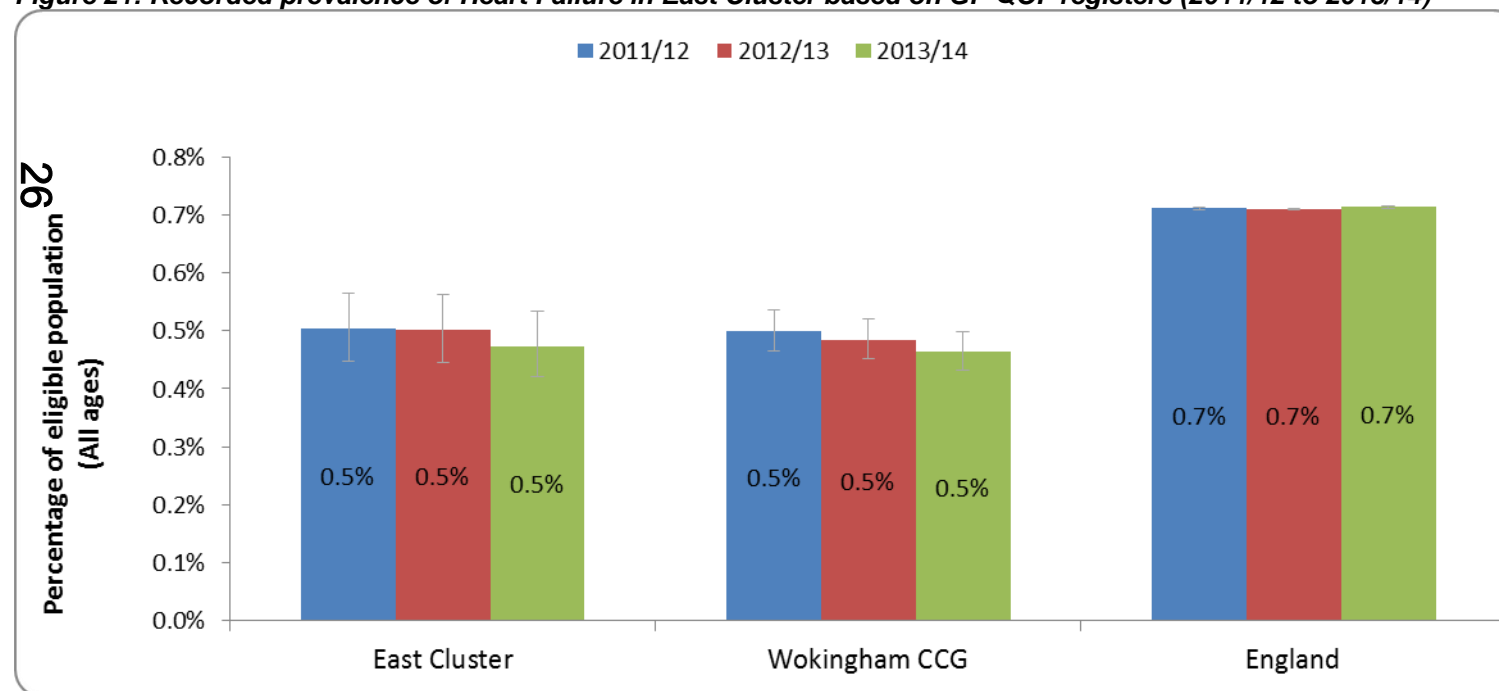
Number of people on the Heart Failure register: 276  
Prevalence of Heart Failure: 0.47%

The prevalence of Heart Failure in the East Cluster was 0.47%. The prevalence of Heart Failure both locally and nationally did not significantly changed from 2011/12 to 2013/14.

There were 276 people on the Heart Failure register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 941 people living with Heart Failure within the East Cluster, this means there were potentially 665 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 21: Recorded prevalence of Heart Failure in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



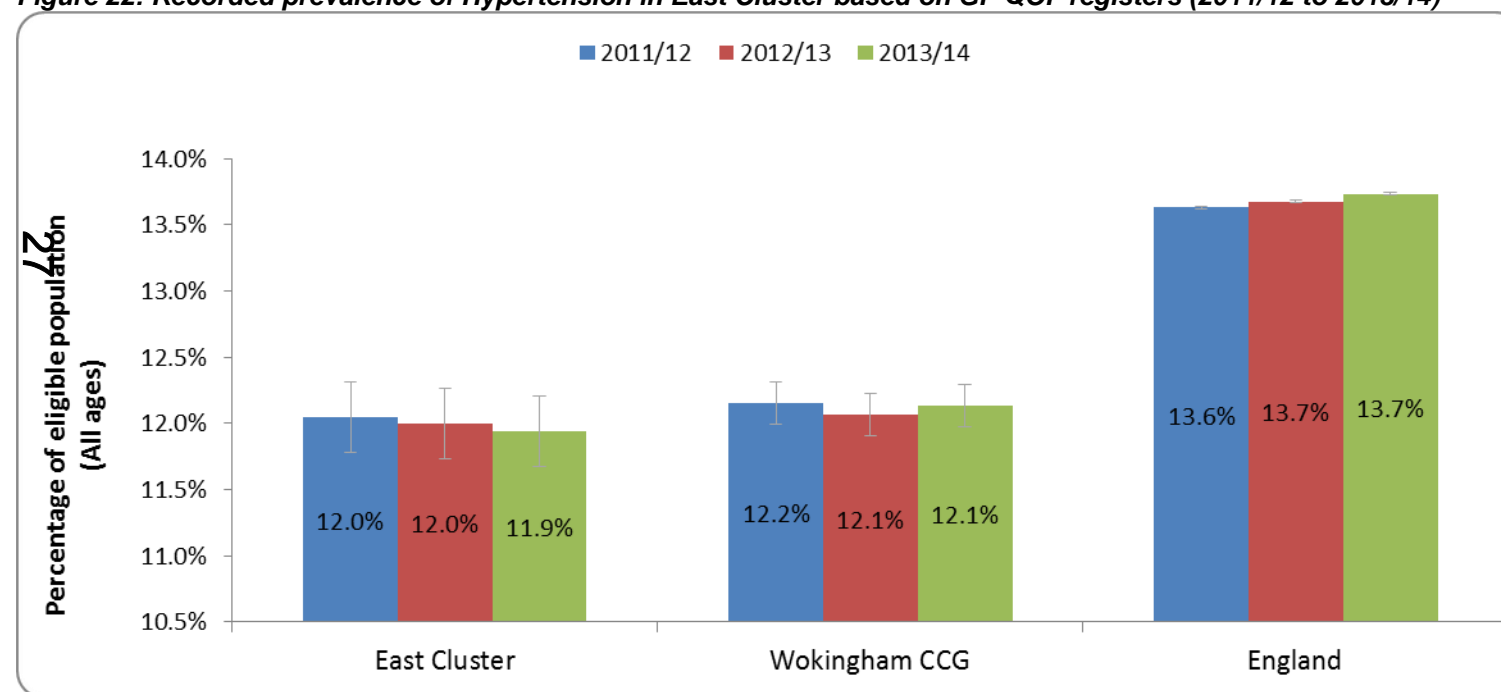
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Hypertension

Number of people on the Hypertension register: 6,956  
Prevalence of Hypertension: 11.94%

The prevalence of hypertension in the East Cluster was 11.94%; this did not significantly change from 2011/12 to 2013/14. There was also no significant difference between Wokingham CCG prevalence of 12.3% and the East Cluster prevalence.

**Figure 22: Recorded prevalence of Hypertension in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



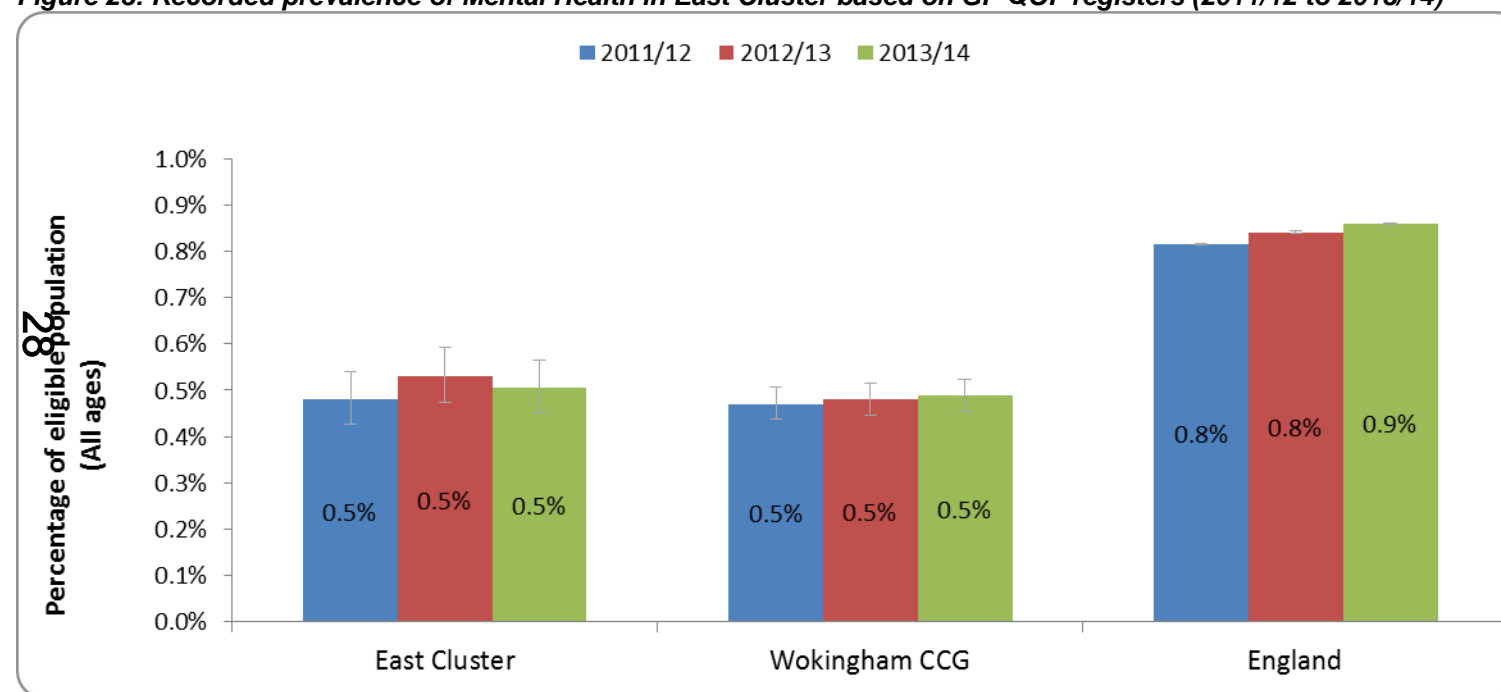
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Mental Health

Number of people on the Mental Health register: 294  
Prevalence of Mental Health: 0.5%

The prevalence of Mental Health in the East Cluster was 0.5%; there was no significant difference between the East Cluster and Wokingham CCG with 0.49%. The prevalence in the East Cluster and Wokingham CCG did not change significantly between 2011/12 to 2013/14, but both are significantly lower than the England prevalence of 0.86%.

**Figure 23: Recorded prevalence of Mental Health in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



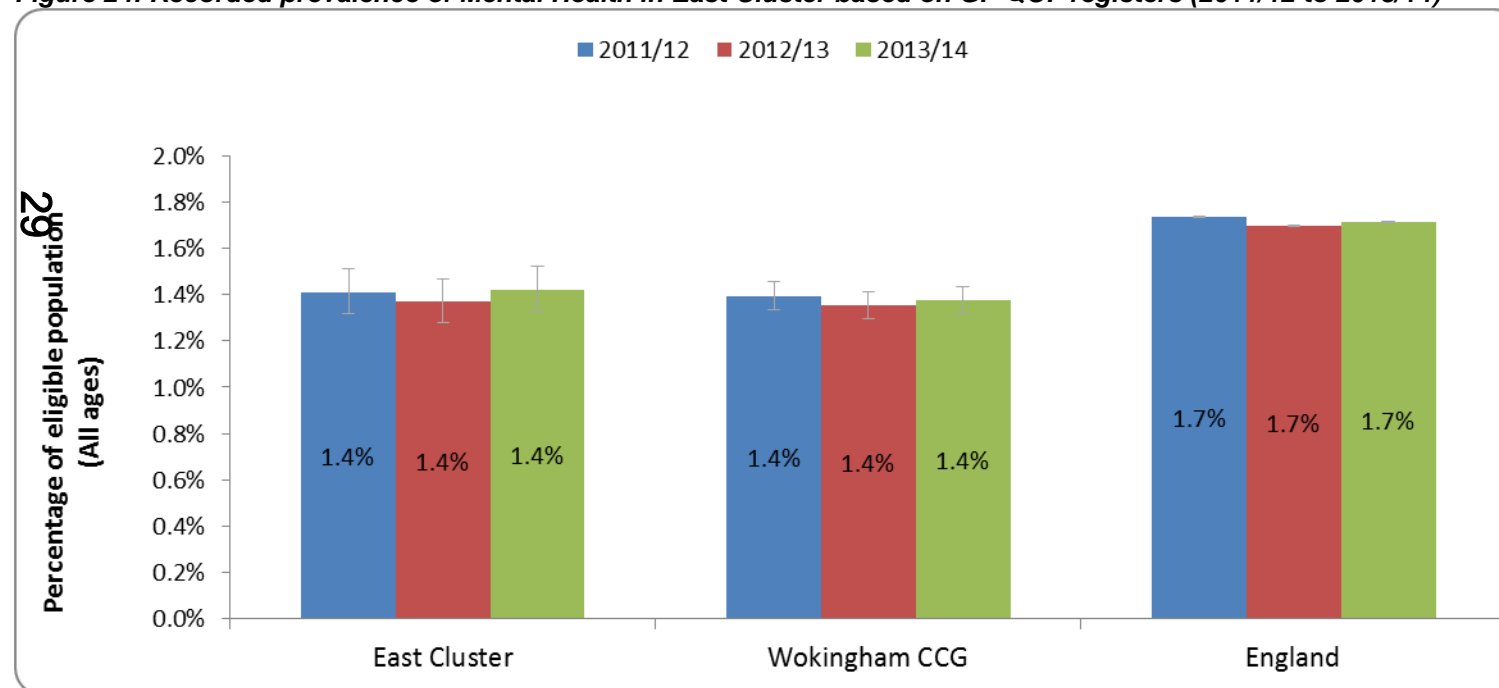
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Stroke or Transient Ischaemic Attack (TIA)

Number of people on the Stroke and Transient Ischaemic Attack register: 828  
Prevalence of Stroke and Transient Ischaemic Attack: 1.42%

The prevalence of Stroke and TIA in the East cluster was 1.42%; this had not changed significantly from 2011/12 to 2013/14, and did not differ significantly from Wokingham CCG. Both the East Cluster and Wokingham CCG have a significantly lower prevalence than the England prevalence of 1.72%.

**Figure 24: Recorded prevalence of Mental Health in East Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## GP Patient Survey

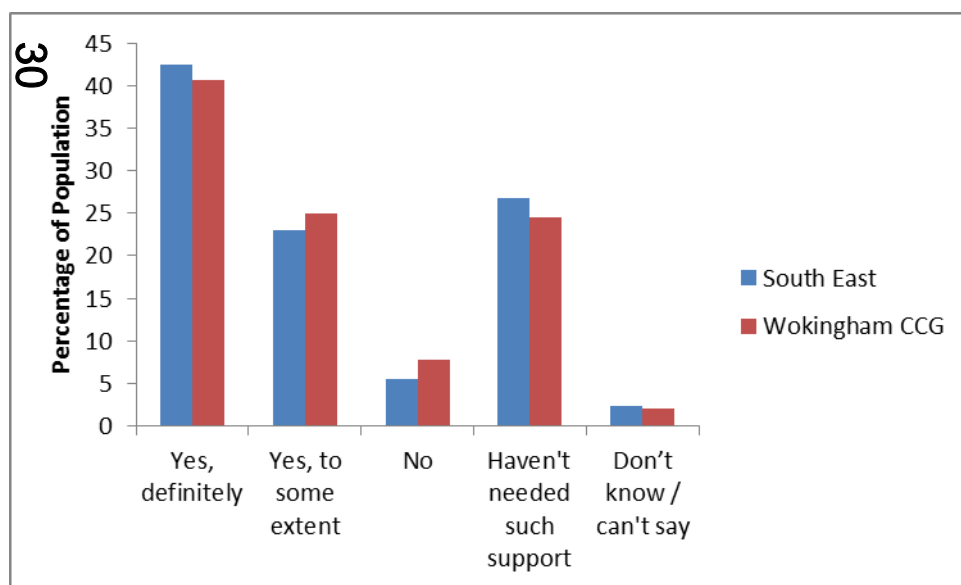
### Support to Manage LTC

Figure 25 displays the responses of all those who reported they had a medical condition when answering the question, '*In last 6 months, had enough support from local services or organisations to help manage long-term health condition(s)*'. The responses indicated that 42.5% of patients that identified themselves as having a LTC were satisfied with the support that they had received.

As this data is from the GP Patient Survey it can only be used as a guide and should not be mistaken for a rigorous and absolute picture of the East Cluster.

**Figure 25: Responses to question about support to manage a LTC in the last 6 months from the GP Survey comparing the East Cluster and Wokingham CCG**

	% Yes, definitely	% Yes, to some extent	% No	% Haven't needed such support	% Don't know / can't say
<b>East Cluster</b>	42.50	22.98	5.44	26.80	2.29
<b>Wokingham CCG</b>	40.7	24.9	7.8	24.5	2



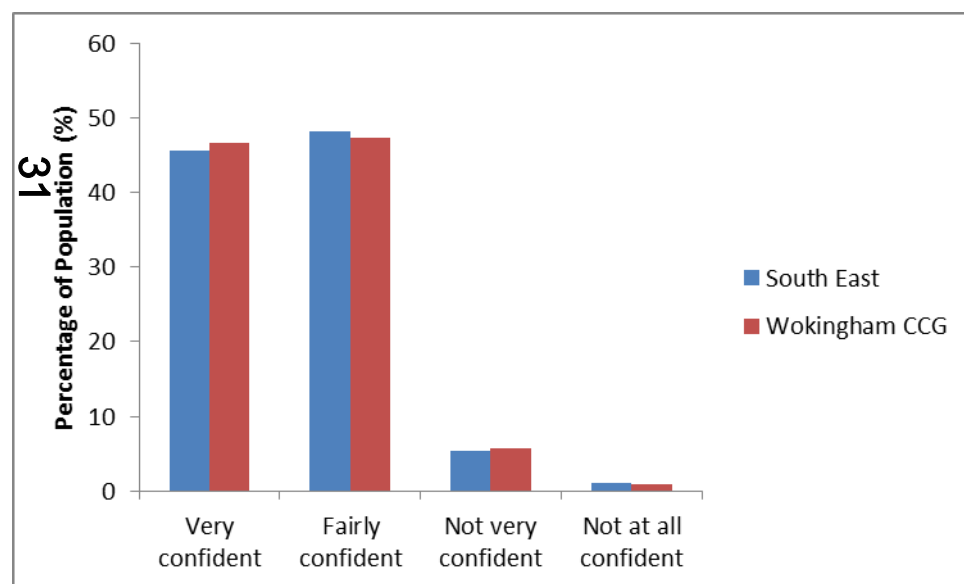
Source: GP Patient Survey January 2015

## Confidence Managing Own Health

Figure 26 displays responses of all of those who completed the survey question asking if they had – ‘confidence in managing own health’. Figure 26 shows that 45.51% of the East Cluster felt very confident in managing their own health.

**Figure 26: Responses to question about confidence managing own health from the GP Survey comparing the East Cluster and Wokingham CCG**

	% Very confident	% Fairly confident	% Not very confident	%Not at all confident
<b>East Cluster</b>	45.51	48.10	5.32	1.07
<b>Wokingham CCG</b>	46.6	47.3	5.7	0.9



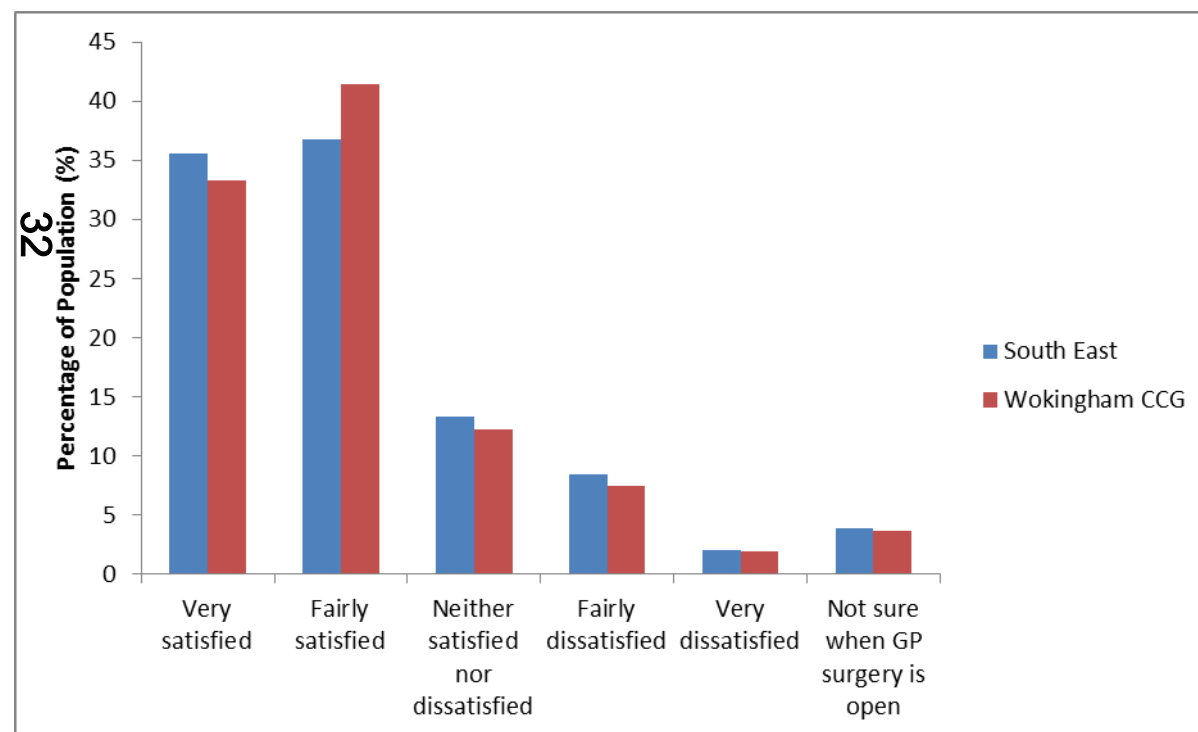
Source: GP Patient Survey January 2015

## Satisfaction with Opening Hours

The GP survey asked patients about their satisfaction with the GP opening times, the majority of East Cluster patients (72.25%) were either very satisfied or fairly satisfied with the opening times. In comparison there were still 27.75% of patients that were indifferent, dissatisfied or unsure of GP opening times.

**Figure 27: Responses to question about satisfaction with GP opening times from the GP Survey comparing the East Cluster and Wokingham CCG**

	% Very Satisfied	% Fairly Satisfied	% Neither Satisfied or Dissatisfied	% Fairly Dissatisfied	% Very Dissatisfied	% Not sure when a GP surgery is open
<b>East Cluster</b>	35.53	36.72	13.32	8.45	2.05	3.92
<b>Wokingham CCG</b>	33.3	41.4	12.2	7.5	1.9	3.7



Source: GP Patient Survey January 2015



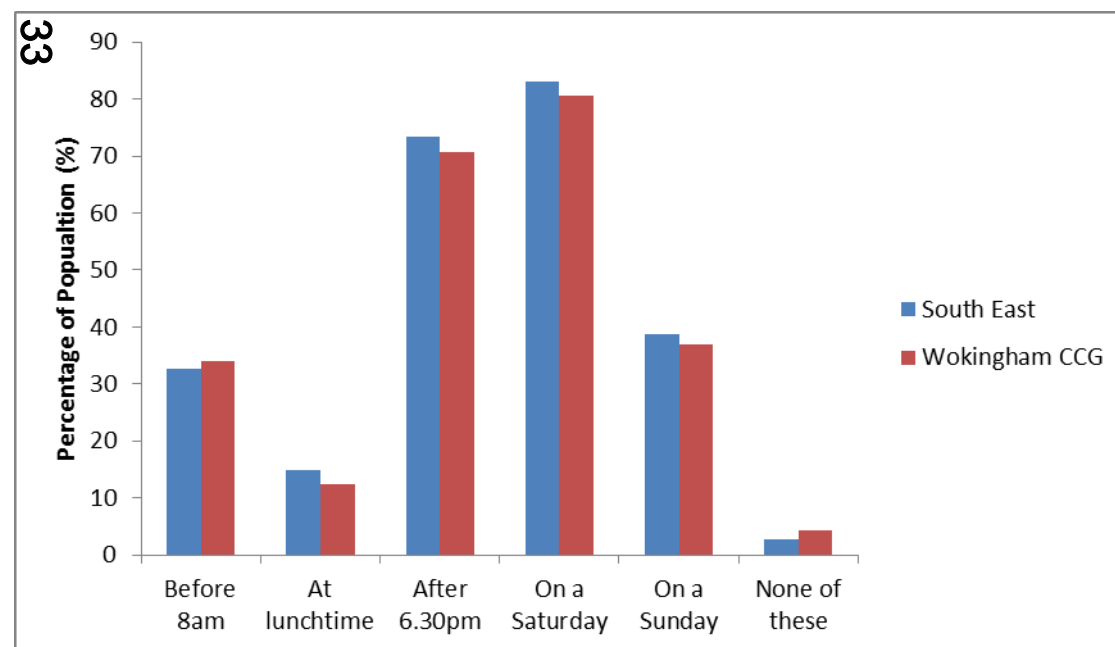
### Additional opening hours that would make it easier to see or speak to someone

When asked what additional opening times would make it easier to see or speak to someone 82.9% of the East Cluster respondents said that opening on Saturday would help. The second highest response (73.4%) was that GP surgeries should be open after 6.30pm. This was a similar picture when comparing the East Cluster with Wokingham CCG.

It must be noted that data for patients at both Wilderness Road and Burma Hills Surgery was suppressed due to the low number of responses; this has influenced both the East Cluster and Wokingham CCG data.

**Figure 28: Responses to question about additional GP opening times from the GP Survey comparing the East Cluster and Wokingham CCG**

	% Before 8am	% At Lunchtime	% After 6.30am	% On a Saturday	% On a Sunday	% None of These
<b>East Cluster</b>	32.7	14.8	73.4	82.9	38.7	2.8
<b>Wokingham CCG</b>	33.9	12.4	70.6	80.6	36.9	4.4



Source: GP Patient Survey January 2015

**This page is intentionally left blank**

**Wokingham CCG**

**North Cluster Profile**

**July 2015**

## Contents

Introduction .....	1
Who is included in the North Cluster? .....	1
Summary .....	2
Population profile .....	4
Ethnicity .....	6
Employment Status .....	7
Caring Responsibilities .....	8
Deprivation Profile.....	10
Lifestyle and Health Behaviour.....	11
Smoking Status.....	11
Obesity Prevalence.....	12
Depression .....	13
36 Prevalence of Long Term Conditions for Children .....	14
Asthma .....	14
Diabetes .....	14
Chronic Obstructive Pulmonary Disease (COPD) .....	15
Epilepsy .....	15
Prevalence of Long Term Conditions for Adults .....	16
Atrial Fibrillation .....	17
Cancer .....	18
Chronic Obstructive Pulmonary Disease.....	19
Coronary Heart Disease.....	20
Dementia .....	21
Diabetes .....	22
.....	22
Heart Failure .....	23

---

Hypertension.....	24
Mental Health.....	25
Stroke or Transient Ischaemic Attack.....	26
GP Patient Survey .....	27
Support to Manage LTC.....	27
Confidence Managing Own Health.....	28
Satisfaction with Opening Hours .....	29
Additional opening hours that would make it easier to see or speak to someone .....	30

## Introduction

Wokingham CCG's North Cluster Profile has been produced to inform the work surrounding the Better Care Fund and the subsequent GP Cluster work that has emerged. This Profile, in conjunction with the East and West Cluster Profiles, can be used to inform the work going forward and help inform the services offered in each cluster.

Wokingham CCG Locality Profiles are produced on an annual basis by Public Health Services from Berkshire. The Cluster Profiles are based on these and include available GP Practice-level data, however not all data is available at this level. Data based on a geographical level, such as Middle Super Output Areas (MSOAs) or wards, also cannot be included as these boundaries are not coterminous with GP Practice populations.

This Profile includes information from three main sources;

- The GP Patient Survey 2015
- Health and Social Care Information Centre
- Quality Outcomes Framework 2013-14

These are the most robust data sources available for GP Practice level data. The GP Patient Survey is a national survey that is standardised across the country to produce detailed information at a GP Practice level. The results from the Survey are included in the CCG Outcomes Framework. However, as with all surveys, the data is self-reported and is based on the sample size and response rate of the individual Practice's patients. These figures will therefore have wider confidence intervals than other sources, than other data sources, such as GP registers, Patient records and the subsequent Quality Outcomes Framework (QOF).

In relation to the graphs and data within this profile it has been highlighted if there are significant differences. These are significant in a statistical sense, which means that there is a statistically significant difference between two or more data sets and this can be stated with absolutely certainty, there is no potential that this difference has occurred due to chance.

## Who is included in the North Cluster?

The North Cluster consists of 6 GP practices;

- Loddon Vale Practice
- Parkside Family Practice – Green Road and Woodley Surgeries
- Woodley Centre Surgery – Woodley and Winnersh Surgeries
- Wilderness Road Surgery – Wilderness Road and Elm Lane Surgeries
- Twyford Surgery
- Wargrave Surgery – Wargrave, Knowl Hill and Waltham St Lawrence

It is important to note that GP Practice information is based on people registered with each Practice. This means that there will be some Wokingham residents that are not included in the CCG Locality Profile, or Cluster Profiles, as they are registered to GP Practices outside the Borough. In contrast, there will also be some non-Wokingham residents that are registered to Wokingham GP Practices and therefore included in these figures.

## Summary

### Population

- Wokingham CCG's North Cluster had a registered population of 61,639, with a smaller proportion of children aged 0 to 14 years
- The employment status differed from Wokingham CCG, with a greater proportion of people unemployed or permanently sick or disabled

### Deprivation

- Two of the most deprived GP Practices based on registered population are located within the North Cluster, Wilderness Road and Parkside. All of the GP practices in Wokingham CCG are in the least deprived quartile of GP practices nationally

### Lifestyle and Behaviours

- Smoking: 15.8% were estimated to be regular or occasional smokers compared with Wokingham CCG of 12.9%, therefore there was a higher risk of poor health outcomes
- Obesity: 7.2% were registered as being obese, compared with 6.5% in Wokingham CCG, therefore there was a higher risk of poor health outcomes

### Children and Young People

- 6.3% of all children aged 19 years and under were estimated to have Asthma
- 0.34% of children were estimated to have Diabetes
- 0.4% of children were estimated to have COPD
- 0.4% of children were estimated to have epilepsy

### Adults

- The prevalence of Asthma, Atrial Fibrillation, Cancer, Chronic Obstructive Pulmonary Disease, Dementia, Diabetes, Heart Failure, Mental Health and Stroke/Transient Ischaemic Attack had no significant difference between the North Cluster and Wokingham CCG
- The prevalence of Coronary Heart Disease and Hypertension in the North Cluster was significantly higher than the Wokingham CCG

### GP Patient Survey

- 
- Support to manage Long Term Conditions: 34.7% of the North Cluster respondents were definitely happy with the support they received, compared to 40.7% of Wokingham CCG respondents
  - Confidence managing own health: 43.4% of the North Cluster respondents were very confident managing their own health compared to 46.6% of Wokingham CCG respondents
  - Opening hours: When given the choice North Cluster respondents felt that opening on a Saturday and after 6.30pm would be most useful



## Population profile

The 2013 mid-year estimates indicate that the resident population for the Wokingham CCG locality was 157,866. The latest registered population figure for Wokingham CCG was higher at 158,339 on 31<sup>st</sup> March 2015. This discrepancy will be made up of people who live outside of the CCG boundary and also a percentage of people on GP patient lists that no longer live in the area.

Wokingham CCG's North cluster had a registered population of 61,639 on 31<sup>st</sup> March 2015. This is 39% of Wokingham CCG's total registered population and is shown in Figure 1.

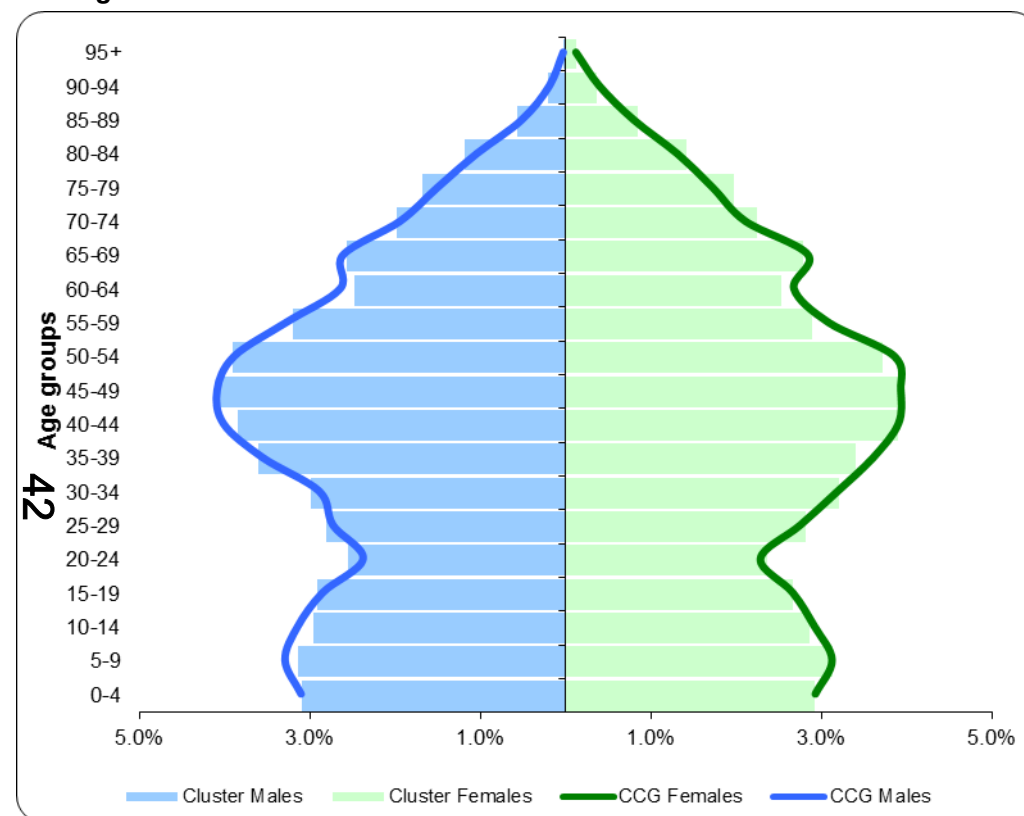
**Figure 1: Registered population for Wokingham CCG's North Cluster at 31-Mar-15**

Age Group	Male	Female	People
0-4	1,909	1,802	3,711
5-9	1,941	1,932	3,873
10-14	1,824	1,764	3,588
15-19	1,800	1,642	3,442
20-24	1,573	1,456	3,029
25-29	1,738	1,739	3,477
30-34	1,850	1,972	3,822
35-39	2,224	2,101	4,325
40-44	2,374	2,400	4,774
45-49	2,526	2,431	4,957
50-54	2,410	2,289	4,699
55-59	1,978	1,783	3,761
60-64	1,534	1,558	3,092
65-69	1,589	1,716	3,305
70-74	1,227	1,385	2,612
75-79	1,040	1,213	2,253
80-84	730	876	1,606
85-89	348	516	864
90-94	130	225	355
95+	18	76	94
<b>Total</b>	<b>30,763</b>	<b>30,876</b>	<b>61,639</b>

Source: Health and Social Care Information Centre (April 2015)

The graphs below show the registered population profile for Wokingham CCG's North cluster compared with the full Wokingham CCG profile (Figure 2) and also the national picture (Figure 3).

**Figure 2: Registered population pyramid for the North cluster compared with Wokingham CCG at 31-Mar-15**

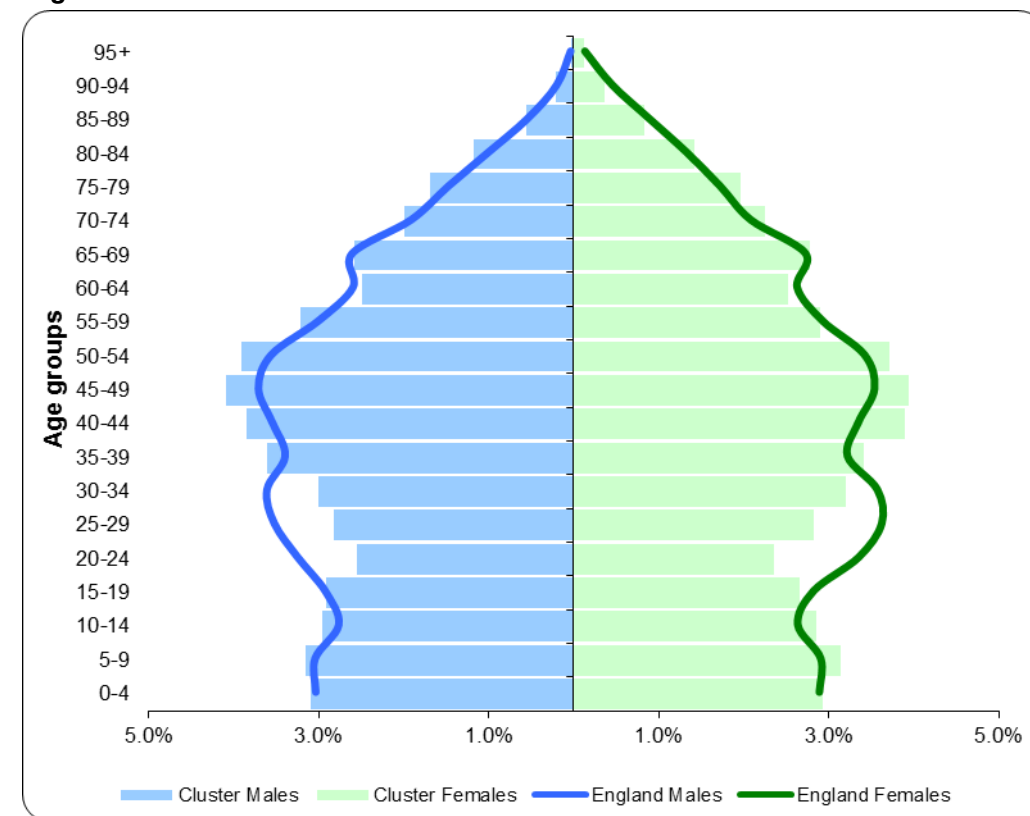


Source: Health and Social Care Information Centre (April 2015)

The North Cluster population profile differs slightly from Wokingham CCG's picture with a smaller proportion of children (aged 0 to 14) and a larger proportion of younger adults (aged 20 to 34). There was also a larger proportion of people aged 70 and over.

The North Cluster population profile differs more significantly from the national picture with a larger proportion of adults aged 35 to 59, but smaller proportion of younger adults (aged 20 to 34).

**Figure 3: Registered population pyramid for the North cluster compared with England at 31-Mar-15**

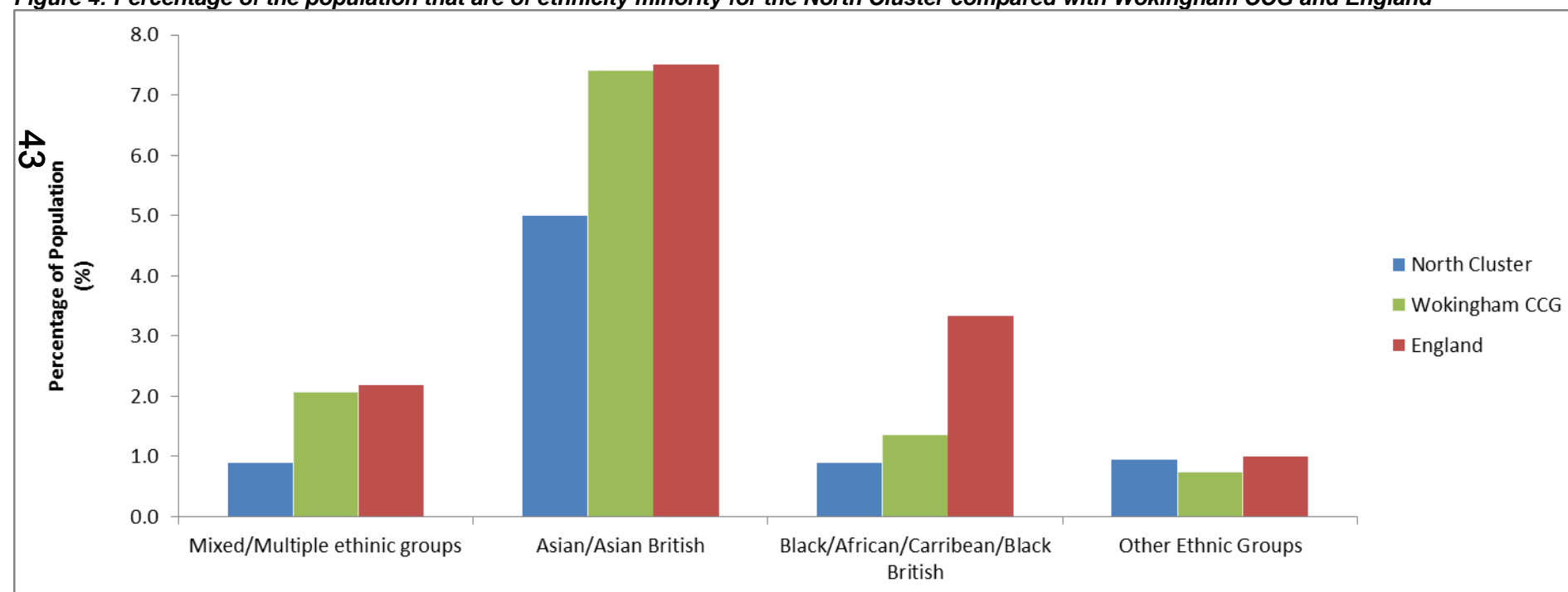


## Ethnicity

The majority of people registered within the North Cluster are White – English/ Welsh/ Scottish/ Northern Irish / British/ Irish/ Gypsy or Irish Traveller/ Any other white background with 92.2%. This was higher than both the Wokingham CCG and England levels, with 88.4% and 86% respectively.

Figure 4 clearly displays that the North Cluster had a lower level of many ethnic minorities when compared with both the Wokingham CCG and England levels.

**Figure 4: Percentage of the population that are of ethnicity minority for the North Cluster compared with Wokingham CCG and England**

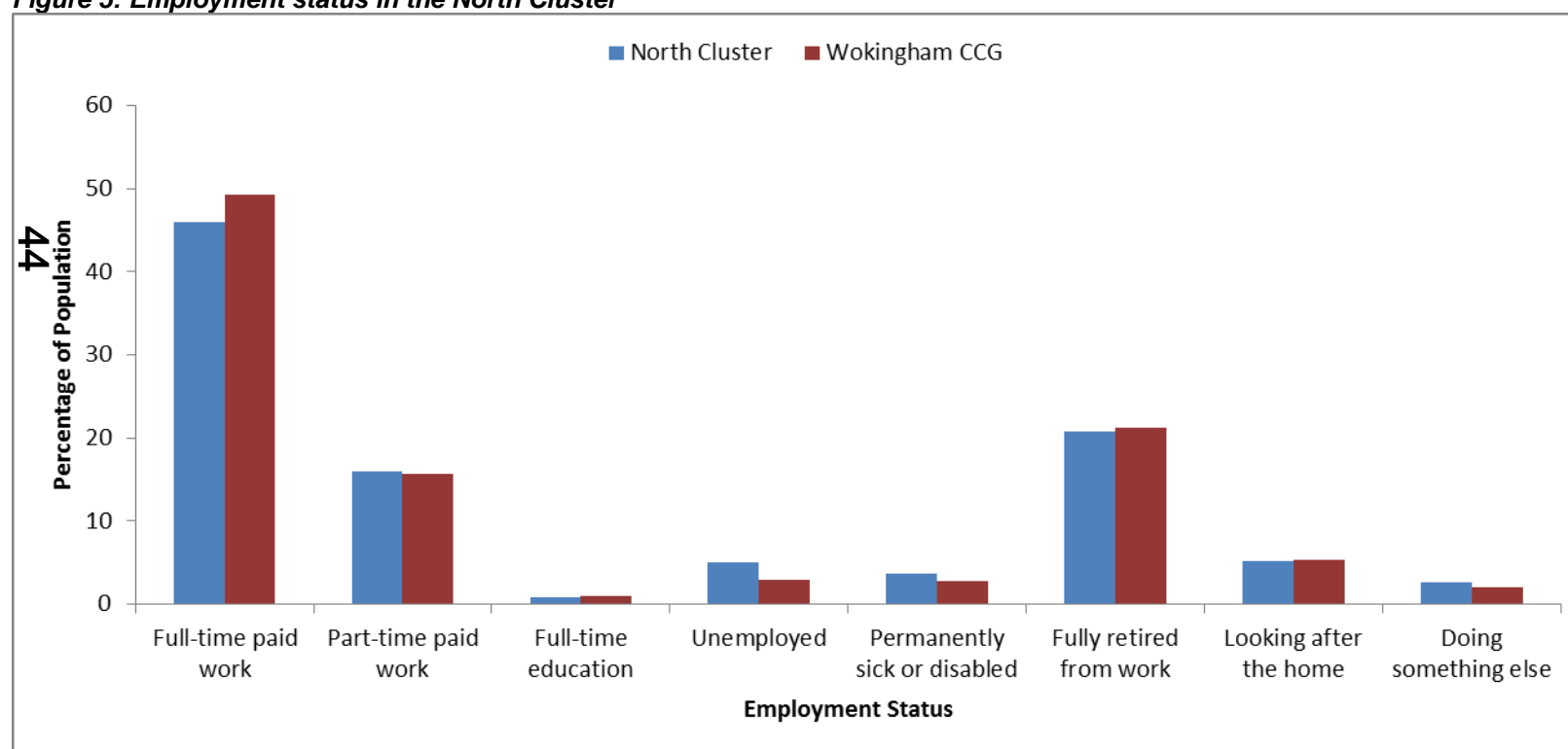


Source: GP Patient Survey January 2015

## Employment Status

When looking at the employment status the highest percentage of residents within the North Cluster was in full-time paid work (46%). There were a greater proportion of people unemployed or permanently sick or disabled (5% and 4% respectively) when compared with the Wokingham CCG (2.9% and 2.7% respectively). The proportion of people retired in the North cluster (21%) was the same to that of Wokingham CCG (21.1%). The lowest proportions of people within the North Cluster were in Full-time education, this was the same picture when looking at Wokingham CCG.

**Figure 5: Employment status in the North Cluster**



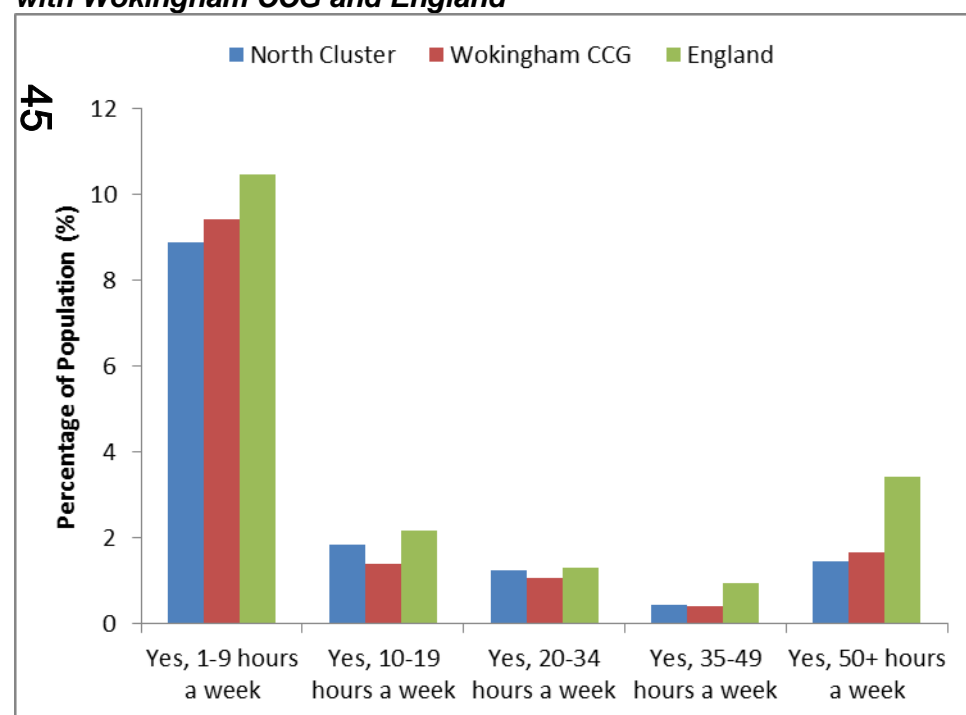
Source: GP patient survey January 2015

## Caring Responsibilities

The data from the GP Patient Survey published in January 2015 stated that 13.9% of the North Cluster identified themselves as a carer, when compared with the Wokingham CCG level data it was exactly the same. Figure 6 below shows the breakdown of how long those who identified themselves as a carer spent providing this care; they were asked how long they spent providing the care in the last week.

This figure for Wokingham CCG of 13.9% was very different from the 9% figure reported in the 2011 census. The difference between these two figures could be due to many factors, such as sample size, time of question and response rate. The preferred data source would be Census level data due to its large sample size and validity; however this is not available at a GP Practice level and cannot be broken down into Clusters.

**Figure 6: Self-reported number of hours spent providing care per week (excluding hours spent as part of their job) for the North Cluster compared with Wokingham CCG and England**



Source: GP Patient Survey January 2015

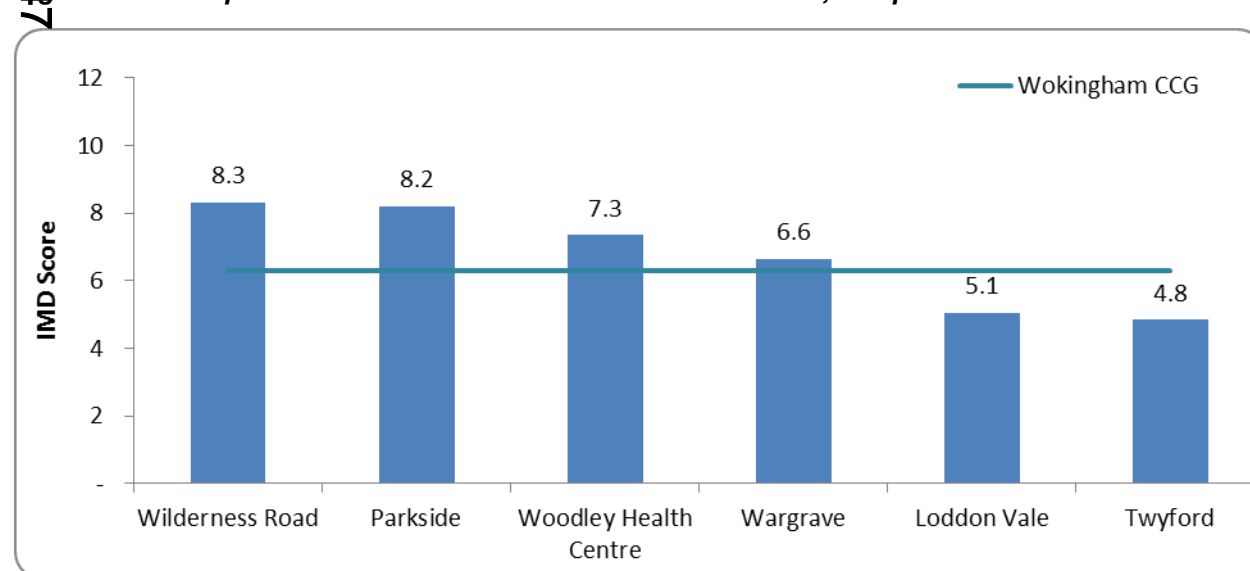


## Deprivation Profile

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 and disability, employment, education, skills and training, barriers to housing and services and living environment. The IMD enables neighbourhoods, or Lower Super Output Areas (LSOAs), to be ranked against each other according to their level of deprivation. Each LSOA covers a population of 1,000-3,000 people and an area with a higher IMD score will be more deprived than another.

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. The 'most deprived' GP practices in Wokingham CCG are Burma Hills, Wilderness Road and Parkside surgeries. Two of these GP practices are in the North Cluster (Wilderness Road and Parkside). However, it is important to note that all of the GP Practices in Wokingham CCG are in the least deprived quartile of GP Practices nationally.

**Figure 7: IMD Deprivation scores for North Cluster GP Practices, compared with the overall Wokingham CCG score**



Source: Network of Public Health Observatories, Index of Multiple Deprivation 2010

## Lifestyle and Health Behaviour

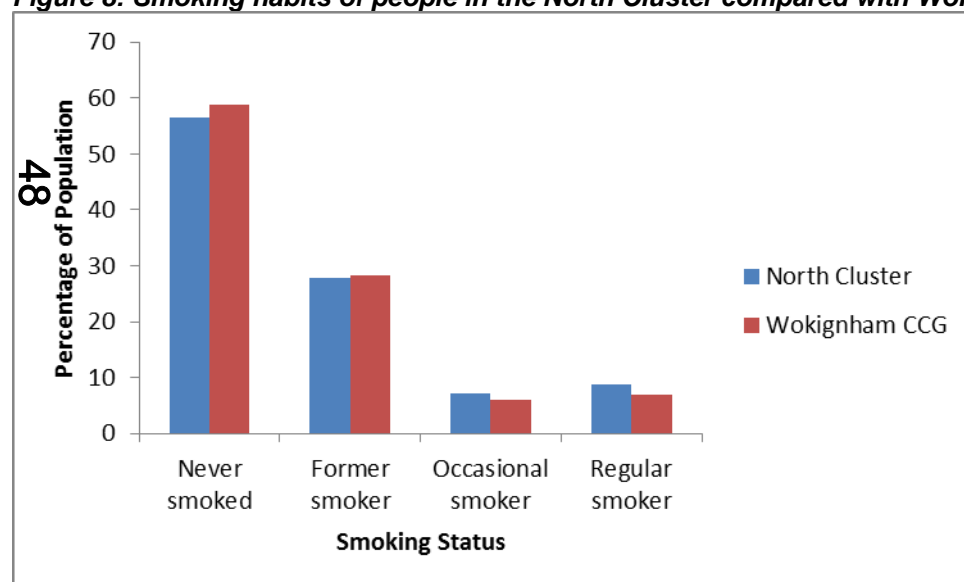
The lifestyle choices that people make can greatly affect people's health, both positively and negatively. Whilst these ultimately fall on the individual to change they are modifiable and with the right support these can be influenced.

This section looks at Smoking status, Obesity and Depression.

### Smoking Status

The GP Patient Survey asked people to describe their smoking habits, in total 956 people responded for the North Cluster. Of these 56.4% of people in the North Cluster identified themselves as never having smoked compared with 58.8% in Wokingham CCG. Figure 7 shows the North Cluster had a higher proportion of regular and occasional smokers (15.8%) than when compared with Wokingham CCG (12.9%).

**Figure 8: Smoking habits of people in the North Cluster compared with Wokingham CCG**



Data Source: GP Patient Survey January 2015

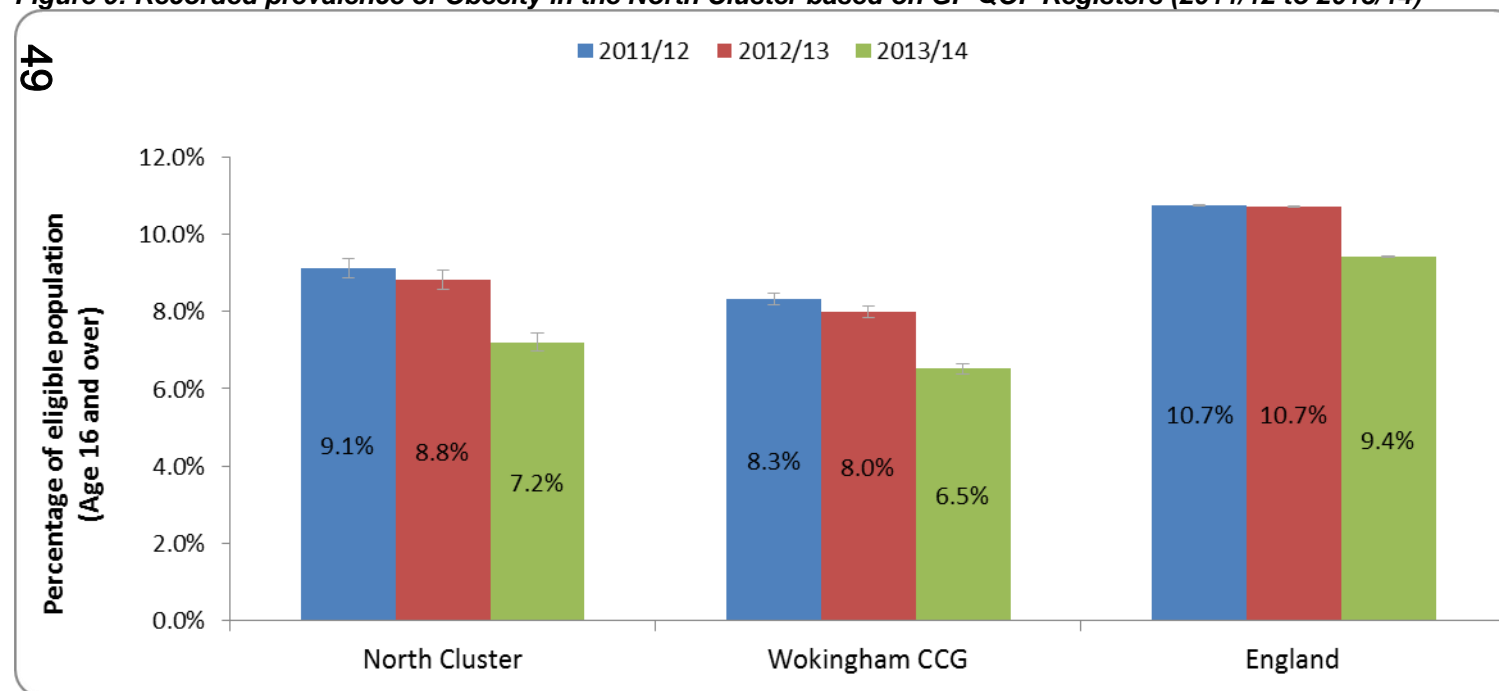


## Obesity Prevalence

Obesity is calculated by measuring a person's Body Mass Index (BMI). An adult aged 16 or above is classed as Obese if their BMI is equal to or above 30 in the preceding 12 months. It must be noted that BMI is calculated differently for children and the category boundaries can vary depending on ethnicity, for example if you are calculating the BMI of a Asian adult they would be classified as obese if their BMI was 27 or above.

Obesity within the North Cluster and Wokingham CCG was lower than the national average; Figure 9 shows that Wokingham CCG and the North Cluster followed the national trend of decreasing year-by-year for adults aged 16 years and over. The QOF does not collect data for children under 16 years of age, so the profile cannot give these figures, however modelled estimates are provided later in the profiles.

**Figure 9: Recorded prevalence of Obesity in the North Cluster based on GP QOF Registers (2011/12 to 2013/14)**



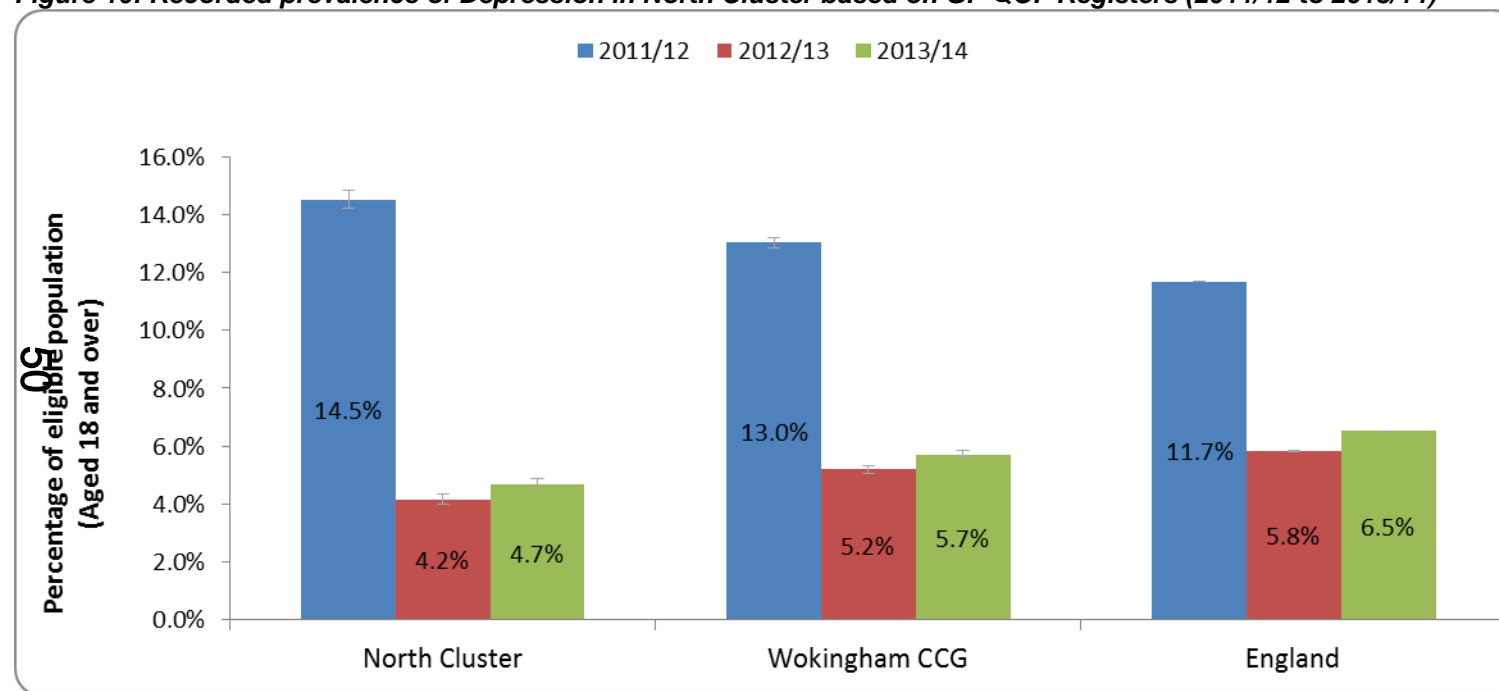
Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)

## Depression

The prevalence of depression decreased significantly in the North Cluster from 2011/12 and 2013/14, however there was a significant increase observed between 2012/13 and 2013/14. This is a trend that has been seen both at a Wokingham CCG and England level as well.

However, it is important to point out that whilst figure 10 suggests that there was a large fall between 2011/12 and 2012/13 this was mainly due to the change in the definition for depression register. Therefore we cannot directly compare these figures with 2011/12.

**Figure 10: Recorded prevalence of Depression in North Cluster based on GP QOF Registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)

## Prevalence of Long Term Conditions for Children

This section focuses on the health of children in the North Cluster, specifically looking at Long Term Conditions. The prevalence data for children, unlike adults, is not included in the QOF. For this reason national models need to be used to estimate the level of disease in local child populations. These agreed prevalence models can be found on the NHS comparators website. It is important to note that these models do not take into account local demographics or deprivation levels and therefore can only be used as a guide for the level of childhood disease in the local area.

### Asthma

The model suggests that 6.3% of all children aged 19 years and under in the North Cluster had asthma, this equates to approximately 1,565 children. An age and sex breakdown can be found in Figure 11. From this breakdown it is also possible to infer that a higher proportion of boys had asthma than girls, 11.6% compared with 9.8%.

**Figure 11: Table displaying modelled age break down of Asthma in the North Cluster based on March 2015 population data, per 1,000 population, figures have been rounded to nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	176	270	254	164	864
Girls	102	219	200	181	702
<b>All</b>	<b>278</b>	<b>489</b>	<b>454</b>	<b>344</b>	<b>1565</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

### Diabetes

Approximately 49.7 children in the North cluster had diabetes, this equates to 0.34%, and this is based on modelled estimates. An age and sex breakdown can be found in Figure 12.

**Figure 12: Modelled estimates of diabetes prevalence in children aged 0-19 in the North Cluster based on March 2015 population data, per 100 population, figures have been rounded to nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	7	7	6	6	25
Girls	6	7	6	6	24
<b>All</b>	<b>13</b>	<b>13</b>	<b>12</b>	<b>12</b>	<b>50</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Chronic Obstructive Pulmonary Disease (COPD)

The NHS comparators website does not give a definition of COPD, but is modelled with the use of Quality Outcome Framework (QOF) data. The QOF defines COPD as 'the name for a collection of lung diseases including chronic bronchitis and emphysema. People with COPD have difficulties breathing and the most common symptoms are increasing breathlessness when active and a persistent cough with phlegm.' Within the North Cluster, 0.97% of patients (all ages) were registered as having COPD. Within the North Cluster the percentage of children modelled to have COPD was 0.4%. The age and sex break down below suggests that there were a higher proportion of boys, 0.5% with COPD than girls 0.4%.

**Figure 13: Modelled estimates of COPD prevalence in children aged 0-19 in the North Cluster based on March 2015 population data, per 100 population, figures have been rounded to nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	21	4	4	5	34
Girls	16	4	4	5	29
<b>All</b>	<b>37</b>	<b>8</b>	<b>7</b>	<b>10</b>	<b>63</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Epilepsy

The model suggested that 0.4% of the registered patients aged 19 years in the North Cluster had Epilepsy. This is very similar to the CCG level modelled estimates. Figure 14 gives a sex and age breakdown.

**Figure 13: Modelled estimates of Epilepsy prevalence in children aged 0-19 in the North Cluster based on March 2015 population data, per 1,000 population, figures have been rounded to nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	4	9	8	11	31
Girls	3	8	7	10	29
<b>All</b>	<b>7</b>	<b>17</b>	<b>15</b>	<b>22</b>	<b>60</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Prevalence of Long Term Conditions for Adults

### Asthma

Number of people on the Asthma Register: 3,828  
Prevalence of Asthma: 6.30%

Looking at the QOF register the Asthma prevalence did not change significantly between 2011/12 and 2013/14. There were 3,828 people on the Asthma register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 5,627 people living with Asthma, which means there were potentially 1,799 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

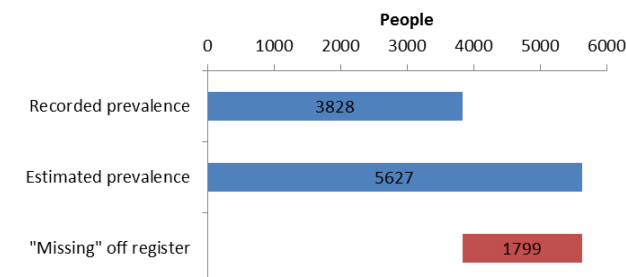
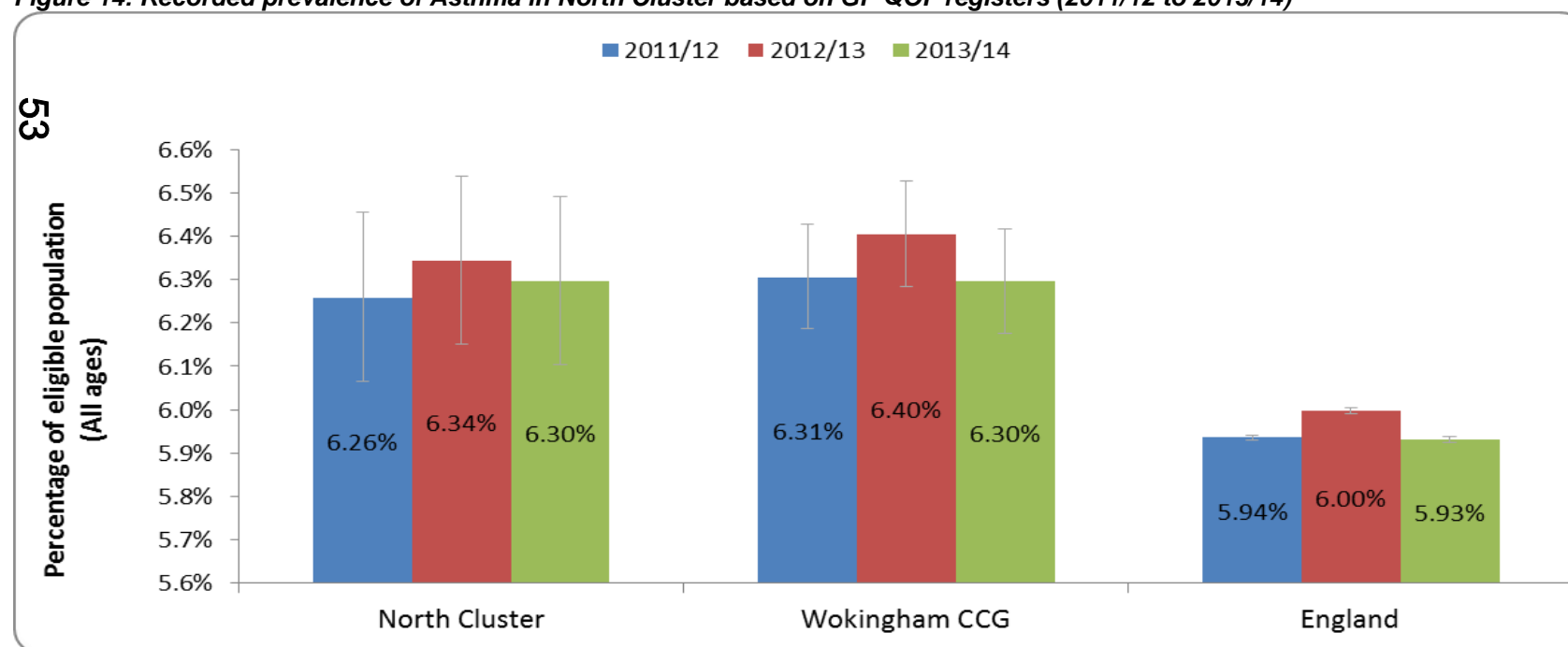


Figure 14: Recorded prevalence of Asthma in North Cluster based on GP QOF registers (2011/12 to 2013/14)



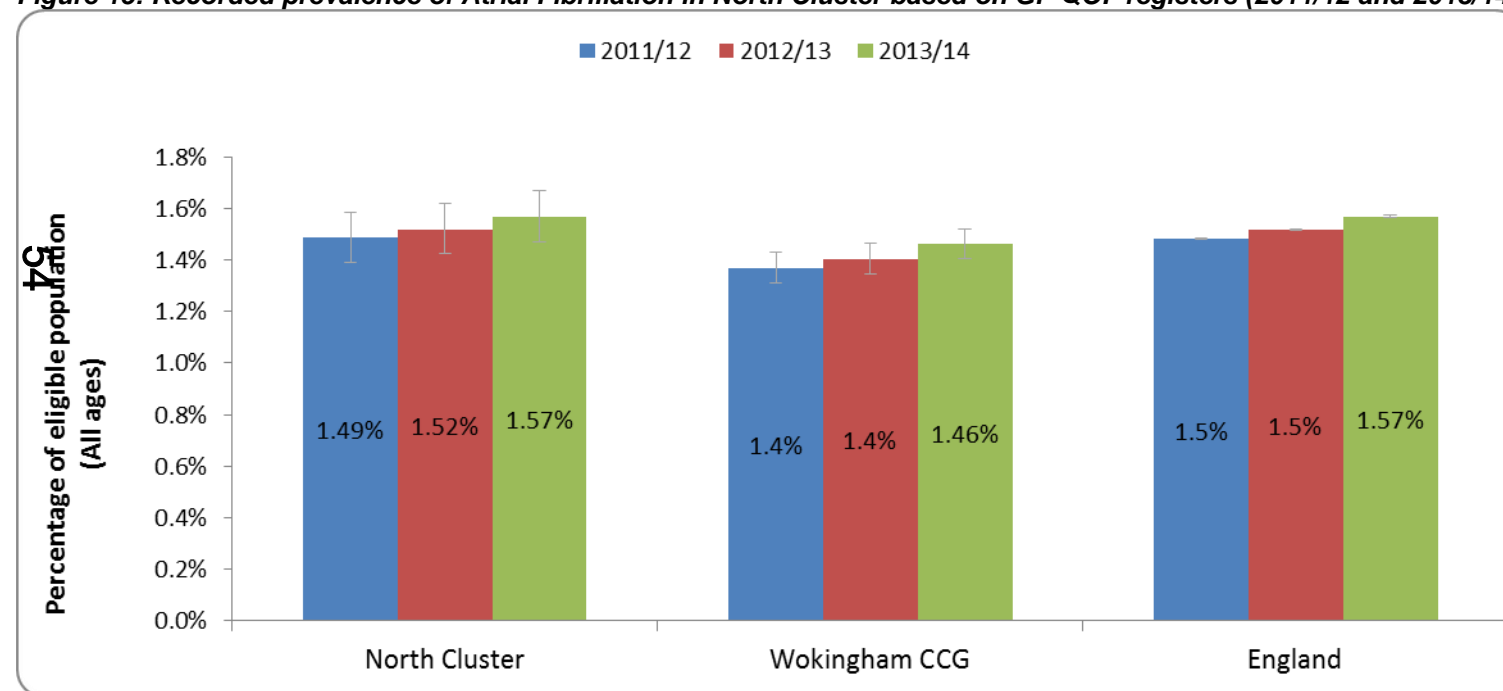
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Atrial Fibrillation

Number of people on the Atrial Fibrillation register: 952  
Prevalence of Atrial Fibrillation: 1.57%

The prevalence of Atrial Fibrillation in the North Cluster as of 2013/14 was 1.57%, which was the same as England. Neither the North Cluster nor the Wokingham CCG had changed significantly between 2011/12 and 2013/14. England had a statistically significant increase by 0.09% from 2011/12 to 2013/14.

**Figure 15: Recorded prevalence of Atrial Fibrillation in North Cluster based on GP QOF registers (2011/12 and 2013/14)**



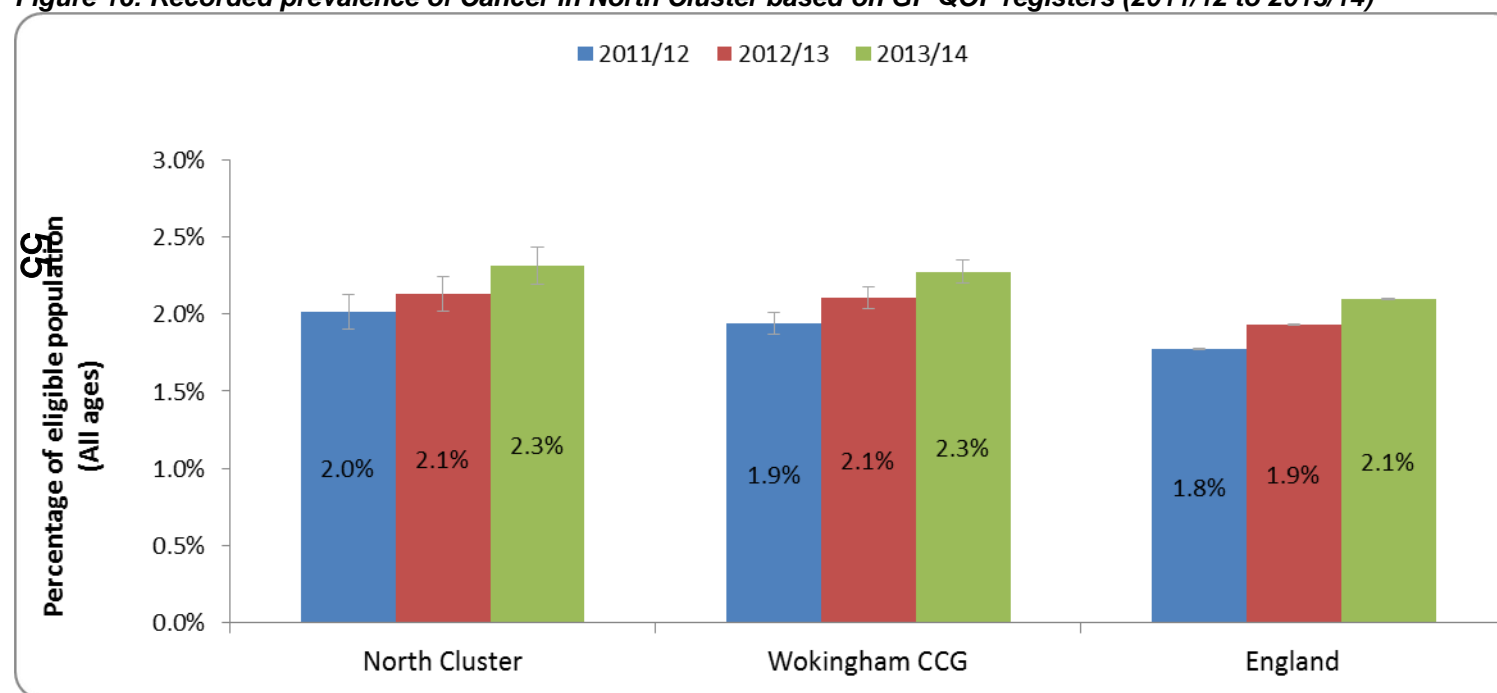
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Cancer

Number of people on the Cancer register: 1,405  
Prevalence of Cancer: 2.31%

The prevalence of cancer in the North cluster was 2.31% in 2013/14, which was a significant increase on 2011/12's figures. This is a trend that was seen both nationally and locally, with significant increases in both Wokingham CCG and England.

**Figure 16: Recorded prevalence of Cancer in North Cluster based on GP QOF registers (2011/12 to 2013/14)**

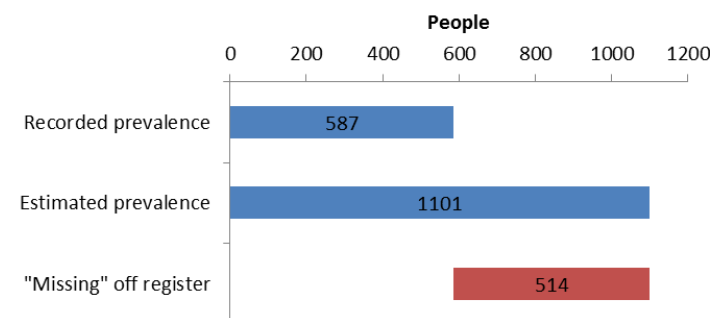


Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

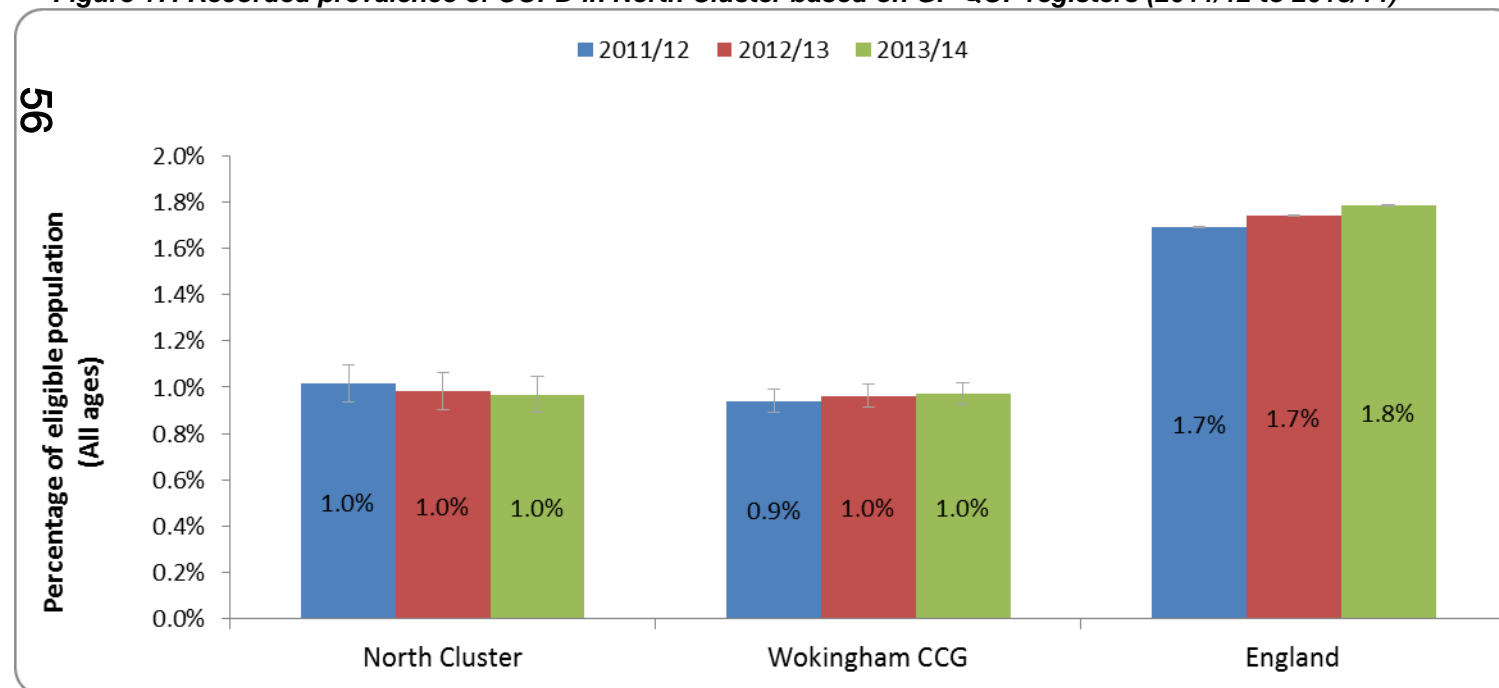
## Chronic Obstructive Pulmonary Disease

Number of people on the COPD register: 587  
Prevalence of COPD: 0.97%

The Prevalence of COPD in the North Cluster did not significantly change from 2011/12 to 2013/14. In the North Cluster the prevalence was 0.97%, which was the same as Wokingham CCG, and this did not significantly change from 2011/12. Nationally, England has a much higher prevalence at 1.78% and this had significantly increased from 2011/12 to 2013/14. There were 587 people on the COPD register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 1,101 people living with COPD within the North Cluster. This means there were potentially 514 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 17: Recorded prevalence of COPD in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

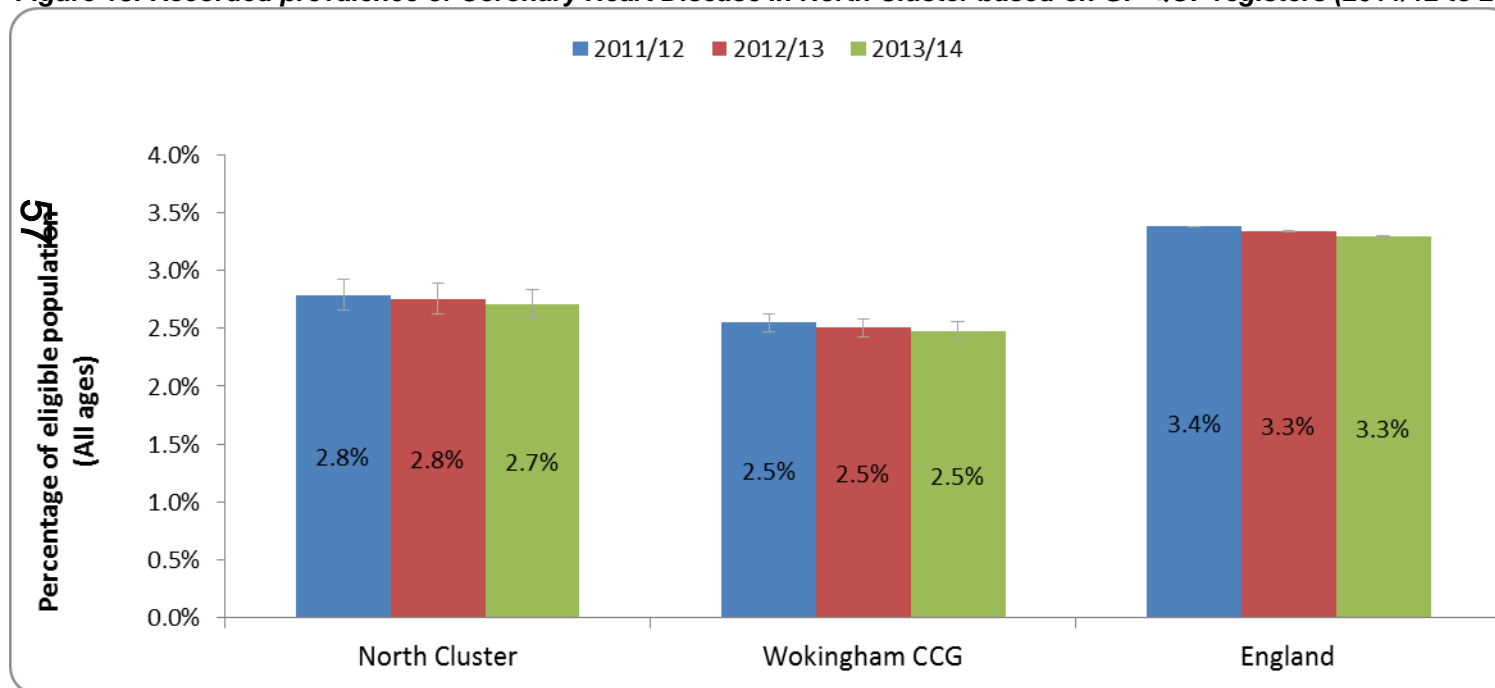


## Coronary Heart Disease

Number of people on the Coronary Heart Disease register: 1,646  
Prevalence of Coronary Heart Disease: 2.71%

In 2013/14, Coronary Heart Disease had a prevalence of 2.71% in the North Cluster compared with 2.48% in Wokingham CCG. Neither the North Cluster nor Wokingham CCG had significantly changed from 2011/12 to 2013/14. The England prevalence had significantly decreased from 2011/12 to 2013/14 from 3.4% to 3.29%, but still remained greater than the South East and Wokingham CCG prevalence rates.

**Figure 18: Recorded prevalence of Coronary Heart Disease in North Cluster based on GP QOF registers (2011/12 to 2013/14)**

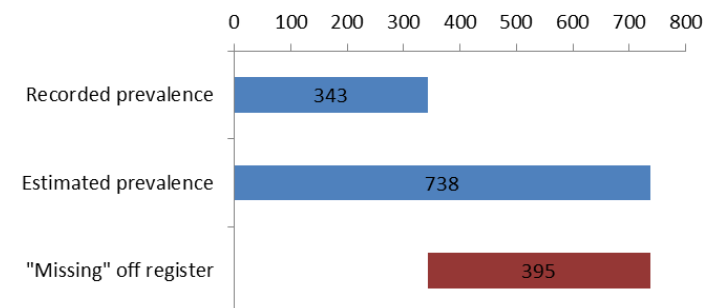


Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

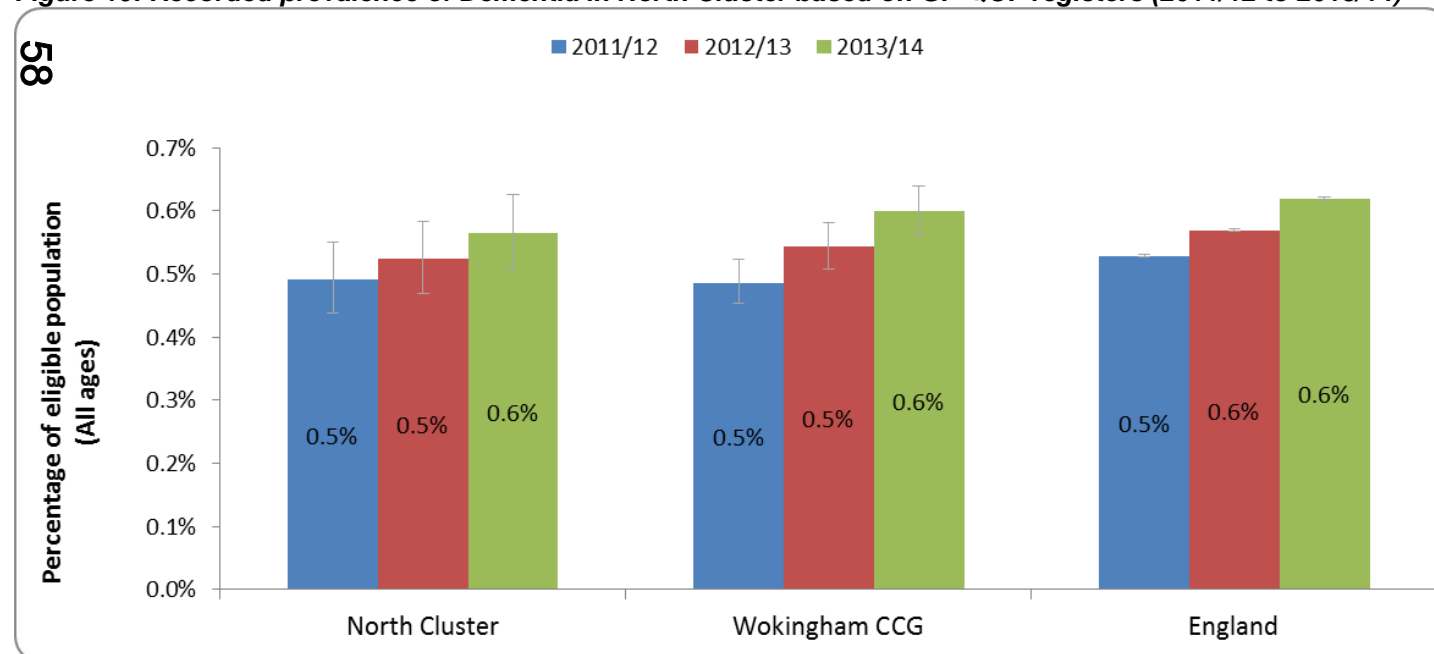
## Dementia

Number of people on the Dementia register: 343  
Prevalence of Dementia: 0.56%

The prevalence of Dementia in the North Cluster was 0.56% and this did not significantly change from 2011/12 to 2013/14, due to the smaller sample size, this increased the size of the confidence intervals; therefore it wasn't possible to say that the true values for each year were significantly different. This contrasts with both Wokingham CCG and England prevalence rates, which significantly increased. Wokingham CCG increased by 0.11% to 0.60% and England increased by 0.09% to 0.62%. It is worth noting that the Dementia prevalence could change in the future with the introduction the new QOF indicator for 2015/16 that looks at the percentage of patients with a new diagnosis of Dementia. There were 343 people on the Dementia register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 738 people living with Dementia within the North Cluster. This means there were potentially 395 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 19: Recorded prevalence of Dementia in North Cluster based on GP QOF registers (2011/12 to 2013/14)**

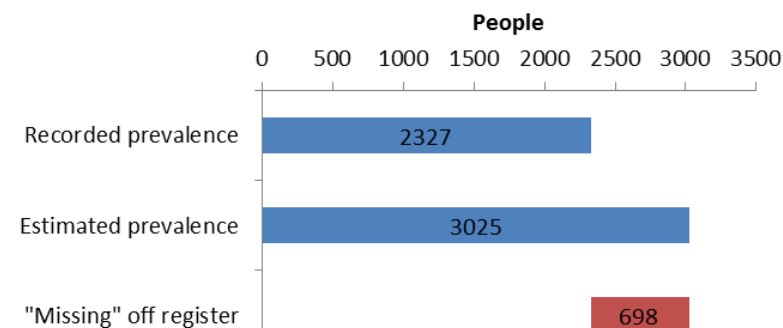


Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

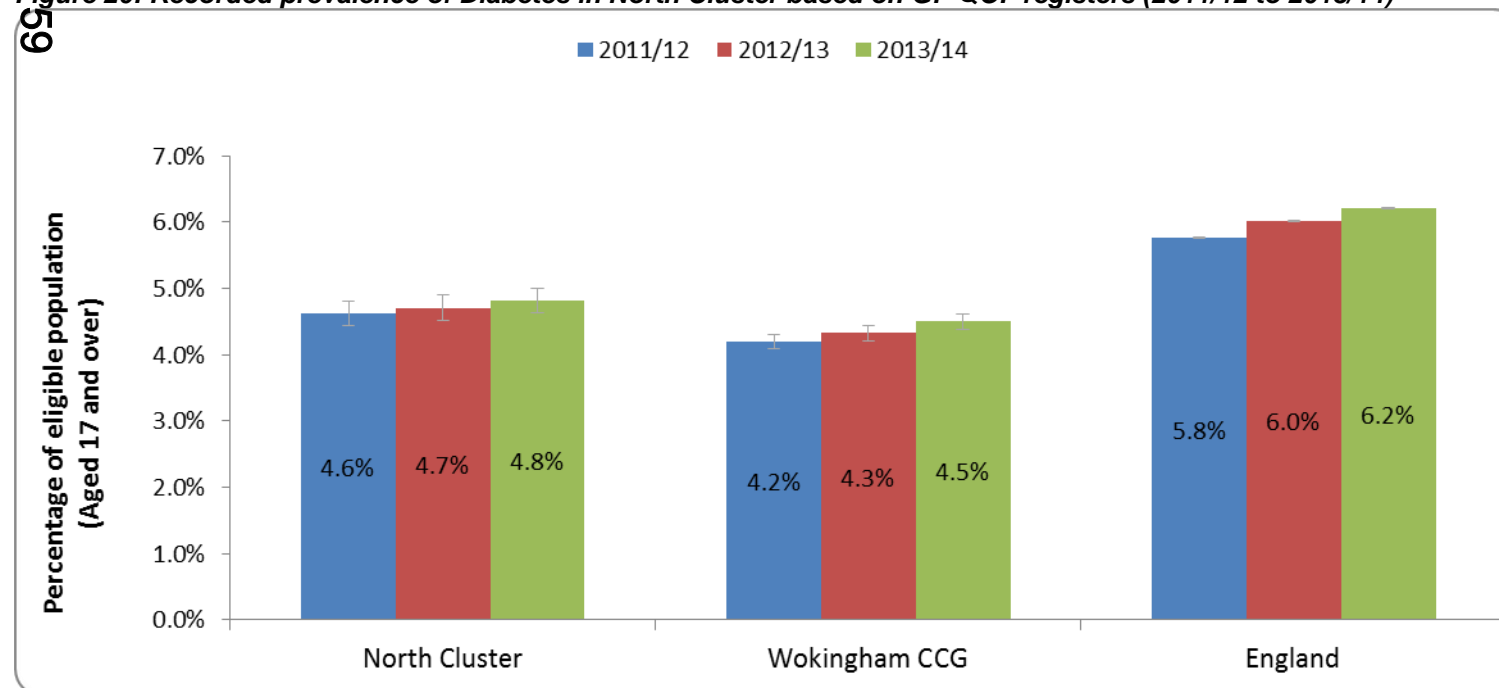
## Diabetes

Number of people on the Diabetes register: 2,327  
Prevalence of Diabetes: 0.07%

The prevalence of Diabetes in the North cluster did not significantly change from 2011/12 to 2013/14, and was 4.81% in 2013/14. This was greater than the prevalence in Wokingham CCG of 4.50%. Both the North cluster and Wokingham CCG had a lower prevalence of Diabetes than the national prevalence in England of 6.21%. It is worth noting that the prevalence in both Wokingham CCG and England did significantly increase from 2011/12 to 2013/14. There were 2,327 people on the Diabetes register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 3,025 people living with Diabetes within the North Cluster, this means there were potentially 698 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 20: Recorded prevalence of Diabetes in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



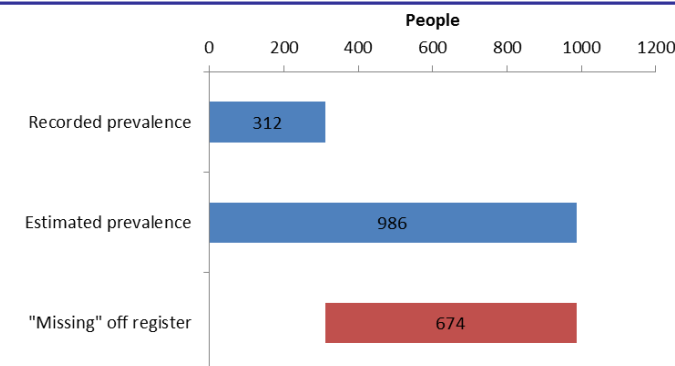
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Heart Failure

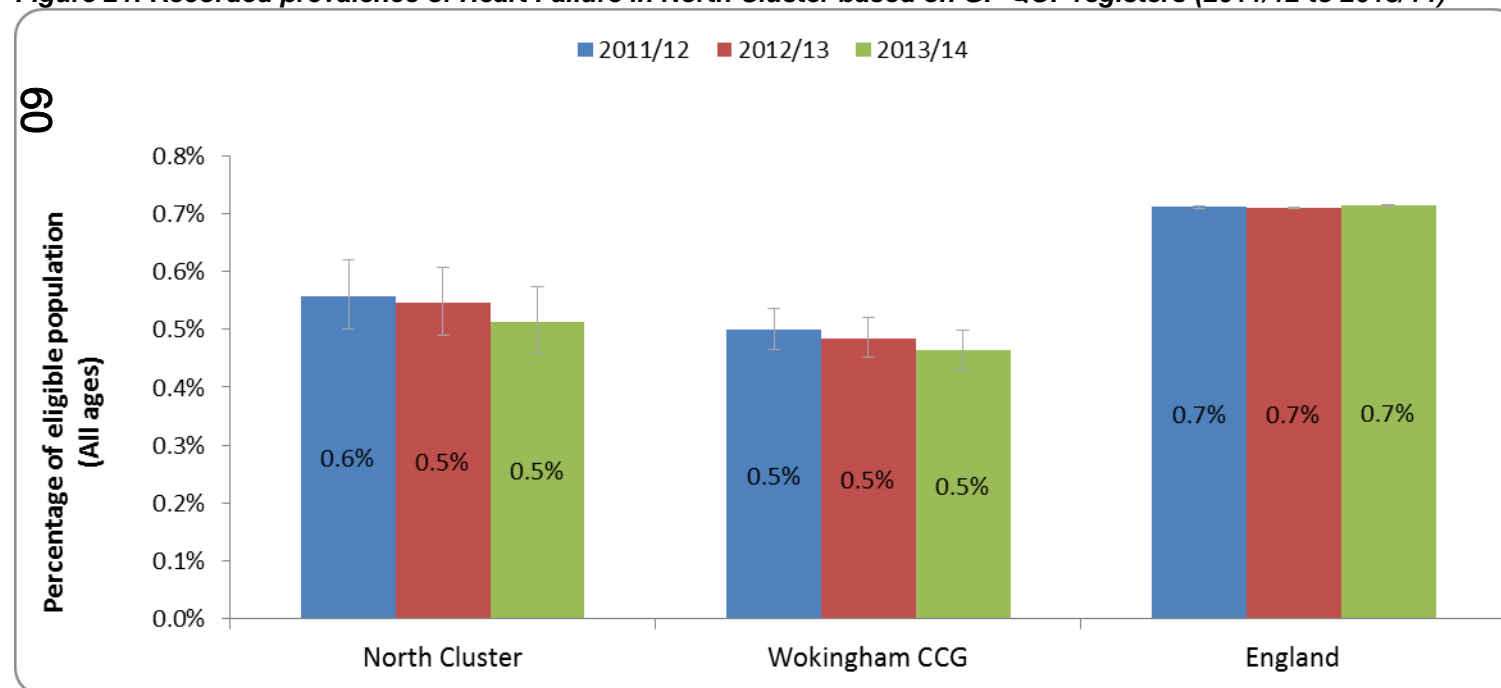
Number of people on the Heart Failure register: 312  
Prevalence of Heart Failure: 0.51%

The prevalence of Heart Failure in the North Cluster was 0.51%; this was greater than the prevalence in Wokingham CCG of 0.46%. The prevalence of Heart Failure both locally and nationally did not significantly change from 2011/12 to 2013/14.

There were 312 people on the Heart Failure register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 986 people living with Heart Failure within the North Cluster, this means there were potentially 674 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 21: Recorded prevalence of Heart Failure in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



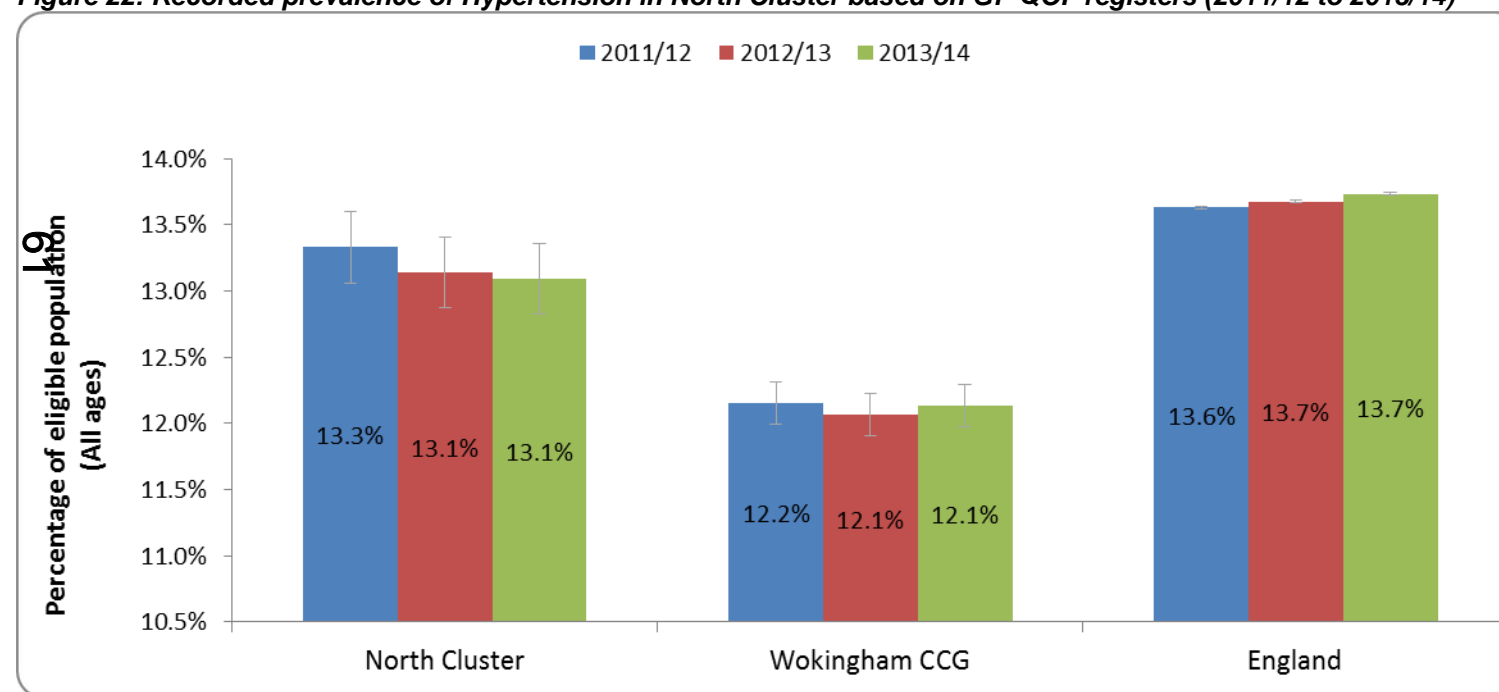
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Hypertension

Number of people on the Hypertension register: 7,958  
Prevalence of Hypertension: 13.09%

The prevalence of hypertension in the North cluster was 13.09%; this did not significantly change from 2011/12 to 2013/14. This was higher than the Wokingham CCG prevalence of 12.13%. Within the North cluster and Wokingham CCG the prevalence did not change significantly from 2011/12 to 2013/14.

**Figure 22: Recorded prevalence of Hypertension in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



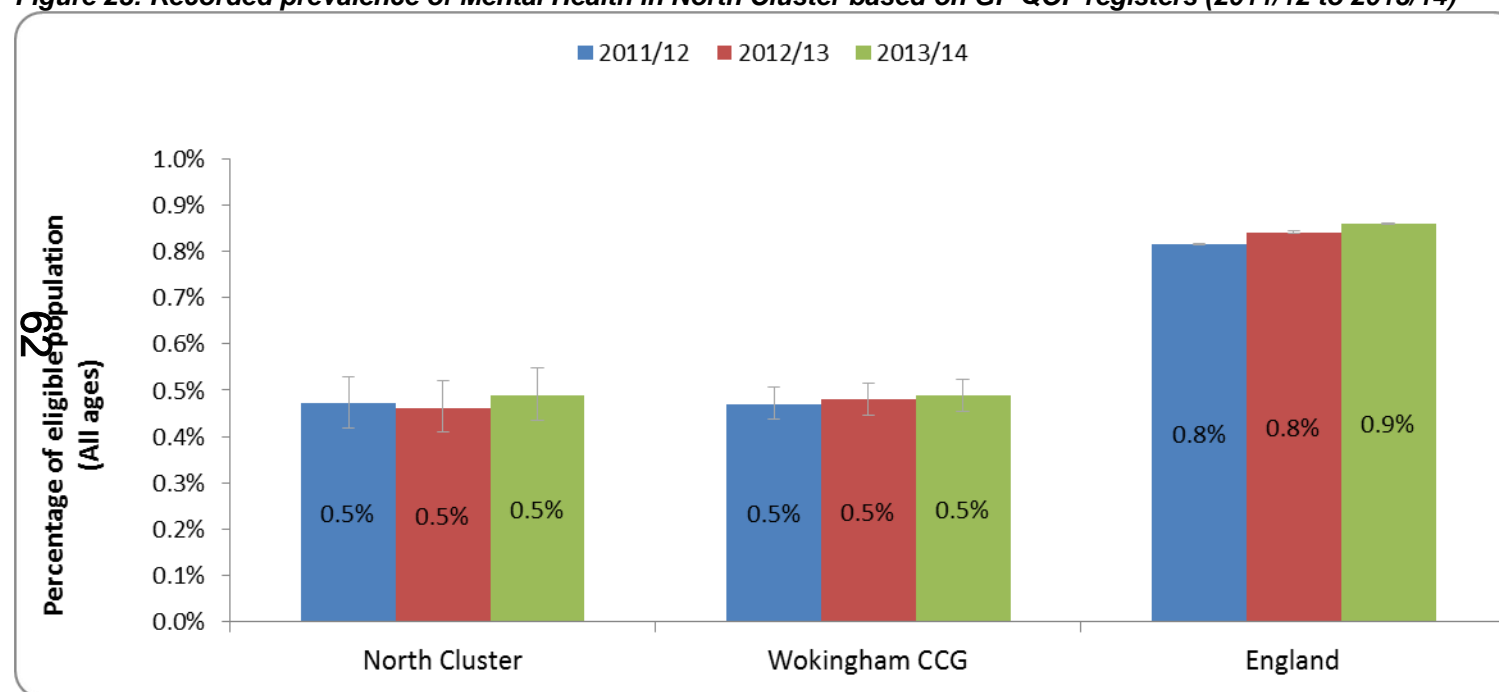
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Mental Health

Number of people on the Mental Health register: 297  
Prevalence of Mental Health: 0.49%

The prevalence of Mental Health in the North Cluster was 0.49%; this was the same as Wokingham CCG with 0.49%. This did not change significantly between 2011/12 and 2013/14. Both the North Cluster and Wokingham CCG prevalence was less than the England prevalence of 0.9%.

**Figure 23: Recorded prevalence of Mental Health in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



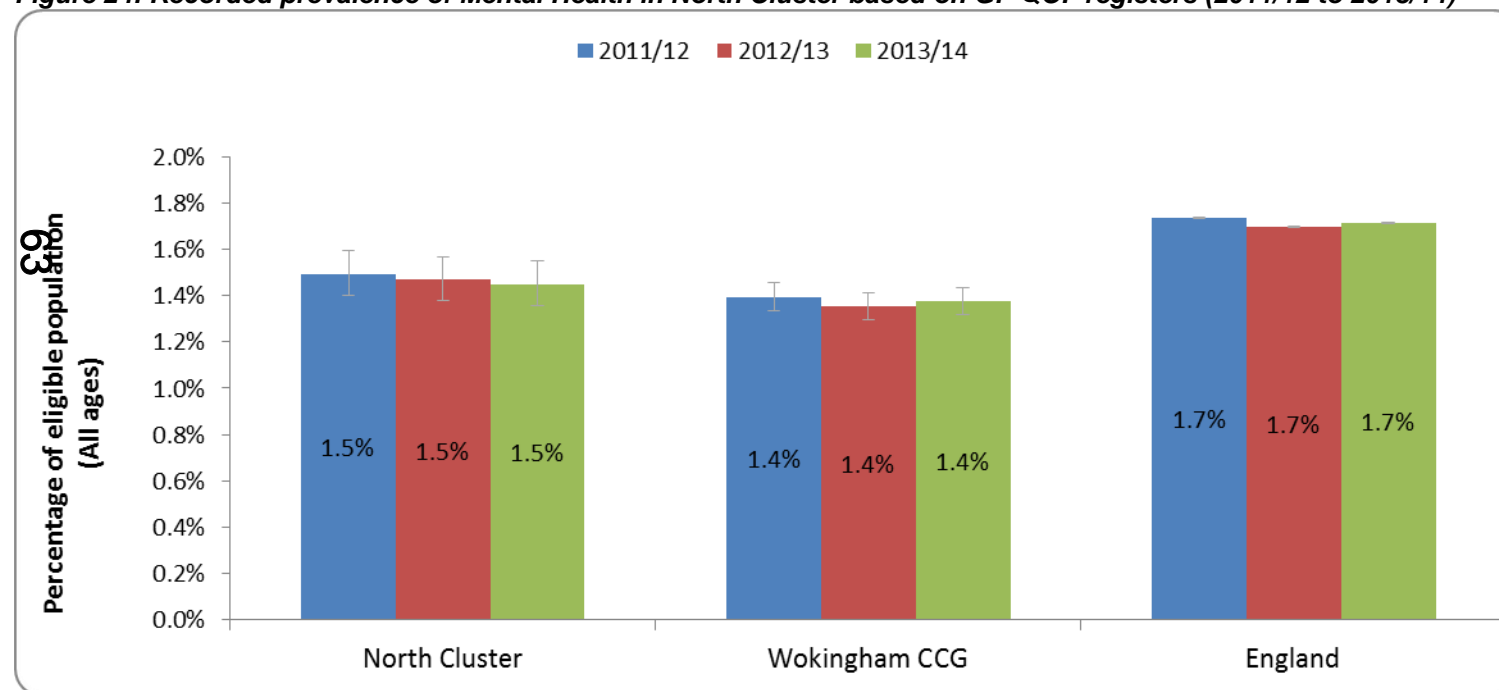
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Stroke or Transient Ischaemic Attack

Number of people on the Stroke or Transient Ischaemic Attack register: 882  
Prevalence of Stroke or Transient Ischaemic Attack: 1.45%

The prevalence of Stroke and TIA in the North cluster was 1.45%; this had not changed significantly from 2011/12 to 2013/14, and did not significantly differ from Wokingham CCG. Both the North Cluster and Wokingham CCG prevalence was lower than England's prevalence of 1.7%.

**Figure 24: Recorded prevalence of Mental Health in North Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## GP Patient Survey

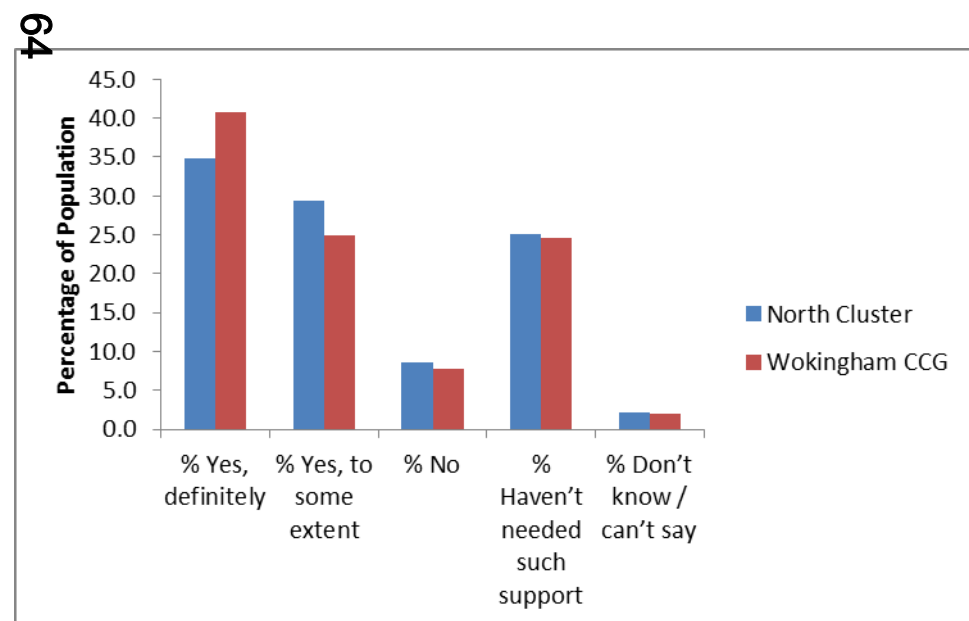
### Support to Manage LTC

Figure 25 displays the responses of all those who reported they had a medical condition when answering the question, '*In last 6 months, had enough support from local services or organisations to help manage long-term health condition(s)*'. The responses indicated that 34.67% of patients that identified themselves as having a LTC were satisfied with the support that they had received and 8.6% were not. This suggests that the North Cluster has the lowest levels of satisfaction of the three clusters; however caution should be applied when using this data.

As this data is from the GP Patient Survey it can only be used as a guide and should not be mistaken for a rigorous and absolute picture of the North Cluster.

**Figure 25: Responses to question about support to manage a LTC in the last 6 months from the GP Survey comparing the North Cluster and Wokingham CCG**

	% Yes, definitely	% Yes, to some extent	% No	% Haven't needed such support	% Don't know / can't say
<b>North Cluster</b>	34.7	29.3	8.6	25.1	2.2
<b>Wokingham CCG</b>	40.7	24.9	7.8	24.5	2.0



Source: GP Patient Survey January 2015

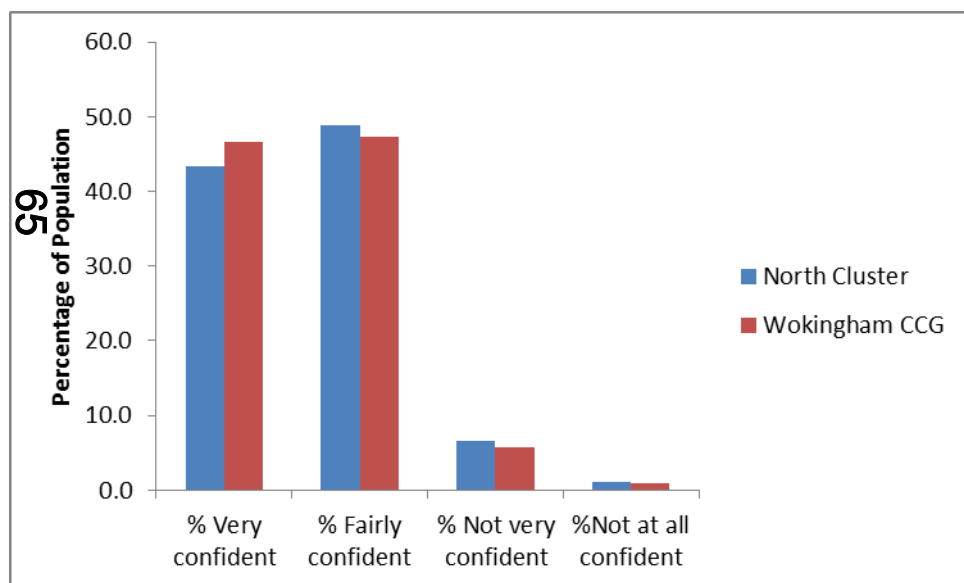


## Confidence Managing Own Health

Figure 26 displays responses of all of those who completed the survey question asking if they had – ‘confidence in managing own health’. Figure 26 shows that 43.4% of the North Cluster felt very confident in managing their own health.

**Figure 26: Responses to question about confidence managing own health from the GP Survey comparing the North Cluster and Wokingham CCG**

	% Very confident	% Fairly confident	% Not very confident	%Not at all confident
<b>North Cluster</b>	43.4	48.8	6.7	1.1
<b>Wokingham CCG</b>	46.6	47.3	5.7	0.9



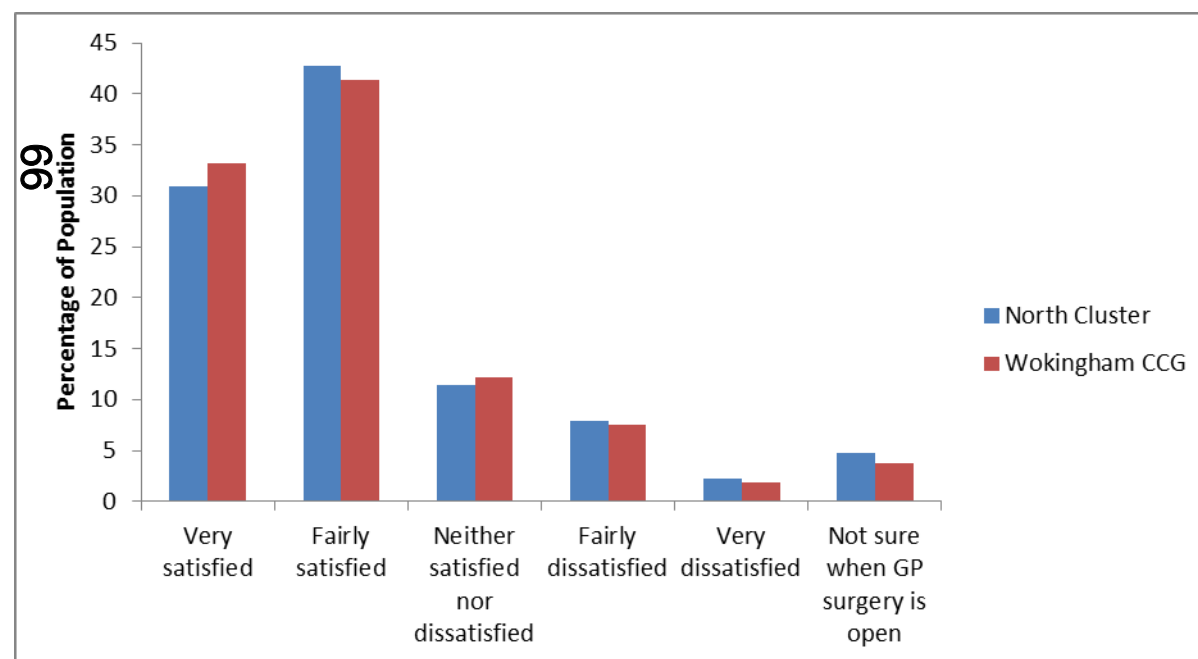
Source: GP Patient Survey January 2015

## Satisfaction with Opening Hours

The GP survey asked patients about their satisfaction with the GP opening times, the majority of North Cluster patients (73.6%) were either very satisfied or fairly satisfied with the opening times. In comparison there were still 26.5% of patients that were indifferent, dissatisfied or unsure of GP opening times.

**Figure 27: Responses to question about satisfaction with GP opening times from the GP Survey comparing the North Cluster and Wokingham CCG**

	% Very Satisfied	% Fairly Satisfied	% Neither Satisfied or Dissatisfied	% Fairly Dissatisfied	% Very Dissatisfied	% Not sure when a GP surgery is open
North Cluster	30.9	42.7	11.5	7.9	2.3	4.8
Wokingham CCG	33.3	41.4	12.2	7.5	1.9	3.7



Source: GP Patient Survey January 2015

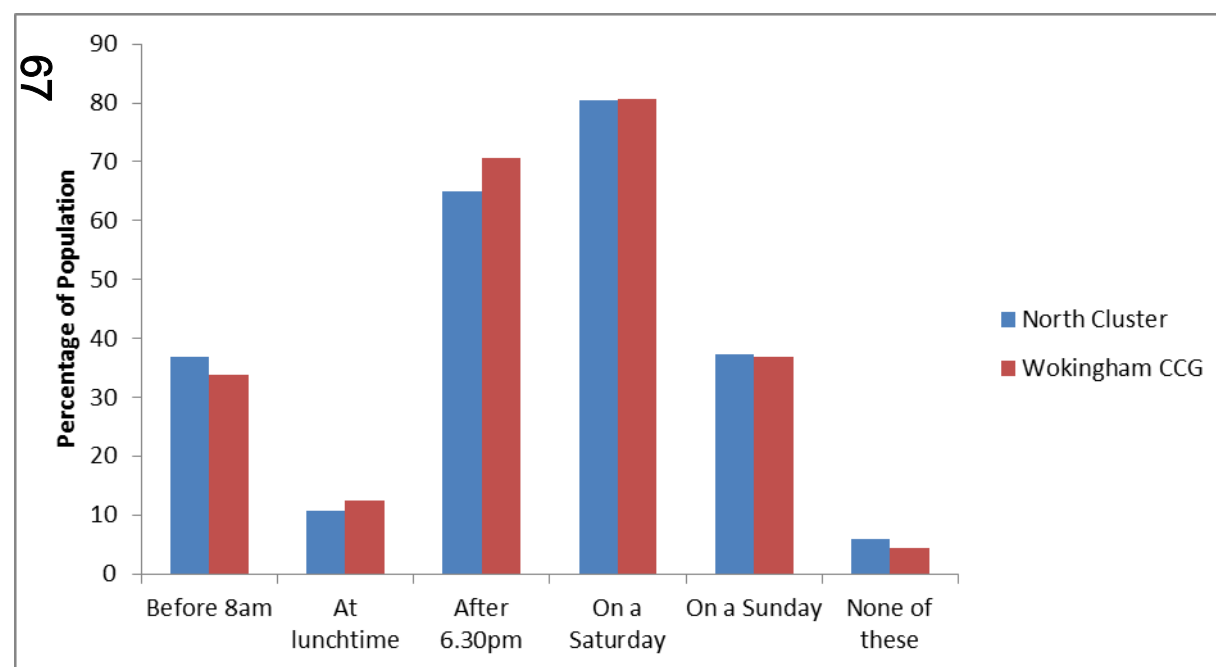
### Additional opening hours that would make it easier to see or speak to someone

When asked what additional opening times would make it easier to see or speak to someone, 80.5% of North Cluster respondents said that opening on Saturday would help. The second highest response (65.0%) was that GP surgeries should be open after 6.30pm. This was a similar picture when comparing the North Cluster with Wokingham CCG.

It must be noted that data for patients at both Wilderness Road and Burma Hills Surgery was suppressed due to the low number of responses; this affected both the North Cluster and Wokingham CCG data.

**Figure 28: Responses to question about additional GP opening times from the GP Survey comparing the North Cluster and Wokingham CCG**

	% Before 8am	% At Lunchtime	% After 6.30pm	% On a Saturday	% On a Sunday	% None of These
North Cluster	36.8	10.8	65.0	80.5	37.3	6.0
Wokingham CCG	33.9	12.4	70.6	80.6	36.9	4.4



Source: GP Patient Survey January 2015

**This page is intentionally left blank**

**Wokingham CCG**

**West Cluster Profile**

**July 2015**

## Contents

Introduction .....	1
Who is included in the West Cluster? .....	1
Summary .....	2
Population profile .....	4
Ethnicity .....	6
Employment Status .....	7
Caring Responsibilities .....	8
Deprivation Profile .....	9
Lifestyle and Health Behaviour .....	10
Smoking Status .....	10
Obesity Prevalence .....	11
Depression .....	12
70 Prevalence of Long Term Conditions for Children .....	13
Asthma .....	13
Diabetes .....	13
COPD .....	14
Epilepsy .....	14
Prevalence of Long Term Conditions for Adults .....	15
Atrial Fibrillation .....	16
Cancer .....	17
COPD .....	18
.....	18
Coronary Heart Disease .....	19
Dementia .....	20
Diabetes .....	21
Heart Failure .....	22

---

Hypertension.....	23
Mental Health.....	24
Stroke or Transient Ischaemic Attack.....	25
GP Patient Survey .....	26
Support to Manage LTC.....	26
Confidence Managing Own Health.....	27
Satisfaction with Opening Hours .....	28
Additional opening hours that would make it easier to see or speak to someone .....	29

## Introduction

Wokingham CCG's West Cluster profile has been produced to inform the work surrounding the Better Care Fund and the GP Cluster work that has emerged. This profile, in conjunction with the North and East Cluster profiles, can be used to inform the work going forward and help inform the services offered in each cluster.

Wokingham CCG Locality Profiles are produced on an annual basis by Public Health Services from Berkshire. The Cluster Profiles are based on these and include available GP Practice-level data, however not all data is available at this level. Data based on a geographical level, such as Middle Super Output Areas (MSOAs) or wards, also cannot be included as these boundaries are not coterminous with GP Practice populations.

This Profile includes information from three main sources;

- The GP Patient Survey 2015
- Health and Social Care Information Centre
- Quality Outcomes Framework 2013-14

These are the most robust data sources available for GP Practice level data. The GP Patient Survey is a national survey that is standardised across the country to produce detailed information at a GP Practice level. The results from the Survey are included in the CCG Outcomes Framework. However, as with all surveys, the data is self-reported and is based on the sample size and response rate of the individual Practice's patients. These figures will therefore have wider confidence intervals, than other data sources, such as GP registers, Patient records and the subsequent Quality Outcomes Framework (QOF).

In relation to the graphs and data within this profile it has been highlighted if there are significant differences. These are significant in a statistical sense, which means that there is a statistically significant difference between two or more data sets and this can be stated with absolutely certainty, there is no potential that this difference has occurred due to chance.

### Who is included in the West Cluster?

The West Cluster consists of 3 GP practices;

- Brookside Group Practice – which has 3 branches Chalfont, Brookside and Winnersh Surgery
- Swallowfield Medical Practice – which has 3 branches Swallowfield, Shinfield and Arborfield Surgeries
- South Reading and Shinfield Group Medical Practice – which has two branches South Reading Surgery and Shinfield Medical Practice



South Reading and Shinfield Group Medical Practice has been included in the West Cluster because there is a satellite surgery which is based within Wokingham Borough. However, this Practice is part of South Reading CCG therefore has been excluded from this Profile. This is because separate data for the two surgeries is not published so there is no way to specifically identify data for Shinfield Medical Practice. It is also important to note that GP Practice information is based on people registered with each Practice. This means that there will be some Wokingham residents that are not included in the CCG Locality Profile, or Cluster Profiles, as they are registered to GP Practices outside the Borough. In contrast, there will also be some non-Wokingham residents that are registered to Wokingham GP Practices and therefore included in these figures.

## Summary

### Population

- The West Cluster has a register population of 37,963, this is 24% of Wokingham CCG's total registered population
- The West Cluster has a higher proportion of Asian/Asian British than both Wokingham CCG and England
- The West Cluster has a higher proportion of people estimated to be in full time or part time employment than Wokingham CCG

### Deprivation

73

- The West Cluster does not include any of the most deprived GP Practices within Wokingham CCG

### Lifestyle and Behaviour

- Smoking: 16.7% of the West Cluster identified themselves as being a regular or occasional smoker compared to Wokingham CCG with 12.9%, therefore there was a higher risk of poor health outcomes
- Depression: There was a significantly higher prevalence of Depression in the West Cluster (7.3%) compared to Wokingham CCG (5.7%), therefore increasing the risk of poor mental health

### Children and Young People

- 10.7% of all children aged 19 years and under are estimated to have Asthma
- 0.34% of children are estimated to have Diabetes
- 0.43% of children were estimated to have COPD
- 0.41% of children were estimated to have Epilepsy

### Adults

- There was no significant difference between the West Cluster and Wokingham CCG for the prevalence of Asthma, Chronic Obstructive Pulmonary Disease, Dementia, Diabetes, Heart Failure and Mental Health
- The prevalence of Atrial Fibrillation, Cancer, Coronary Heart Disease, Hypertension and Stroke/Transient Ischaemic Attack was significantly lower for the West Cluster compared with Wokingham CCG

## GP Patient Survey

- Support to manage Long Term Conditions: 4.2% of the West Cluster respondents were definitely happy with the support they received, which was a higher percentage than Wokingham CCG, however 10.25% were not happy which was lower percentage than the Wokingham CCG
- Confidence managing own health: 51.5% were very confident managing their own health
- Satisfaction with opening hours: When given the choice West Cluster respondents felt that opening after 6.30pm and on a Saturday would be most helpful

## Population profile

The 2013 mid-year estimates indicate that the resident population for the Wokingham CCG locality was 157,866. The latest registered population figure for Wokingham CCG was higher at 158,339 on 31<sup>st</sup> March 2015. This discrepancy will be made up of people who live outside of the CCG boundary and also a percentage of people on GP patient lists that no longer live in the area.

Wokingham CCG's West Cluster had a registered population of 37,963 on 31<sup>st</sup> March 2015. This is 24% of Wokingham CCG's total registered population and is shown in Figure 1.

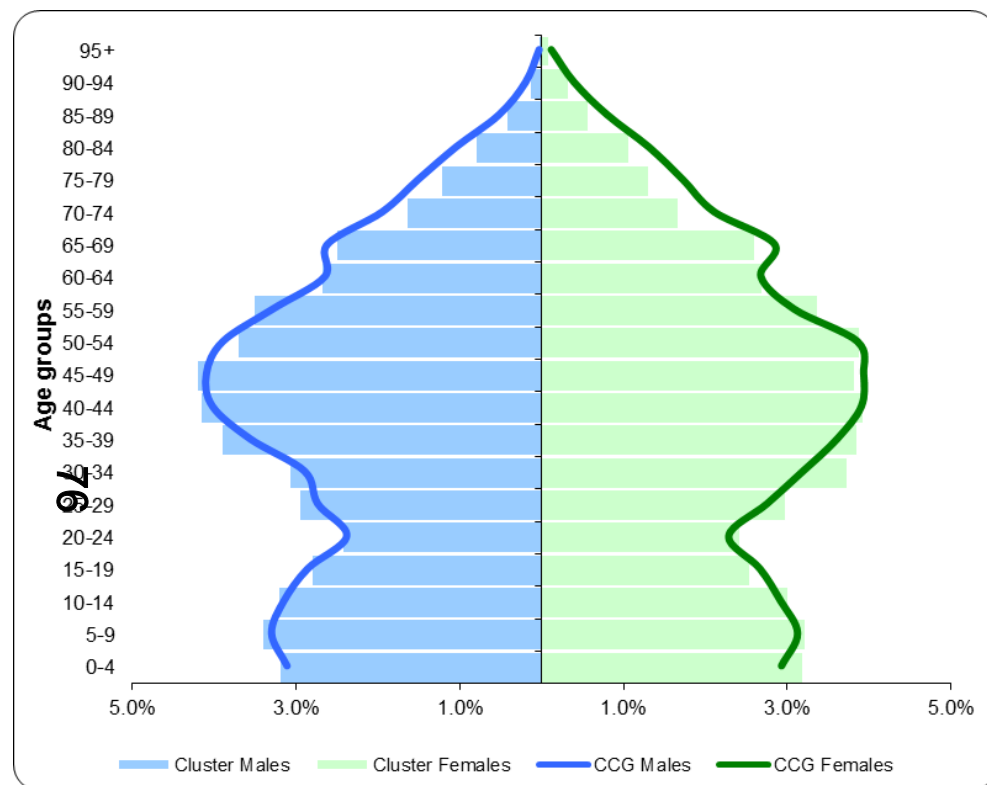
**Figure 1: Registered population for Wokingham CCG's West Cluster at 31-Mar-15**

Age Group	Male	Female	People
0-4	1,213	1,206	2,419
5-9	1,292	1,219	2,511
10-14	1,215	1,140	2,355
15-19	1,062	964	2,026
20-24	917	916	1,833
25-29	1,121	1,127	2,248
30-34	1,167	1,415	2,582
35-39	1,479	1,458	2,937
40-44	1,579	1,489	3,068
45-49	1,596	1,449	3,045
50-54	1,405	1,473	2,878
55-59	1,329	1,275	2,604
60-64	1,018	1,021	2,039
65-69	945	984	1,929
70-74	621	628	1,249
75-79	463	492	955
80-84	301	402	703
85-89	158	214	372
90-94	50	120	170
95+	11	29	40
<b>Total</b>	<b>18,942</b>	<b>19,021</b>	<b>37,963</b>

Source: Health and Social Care Information Centre (April 2015)

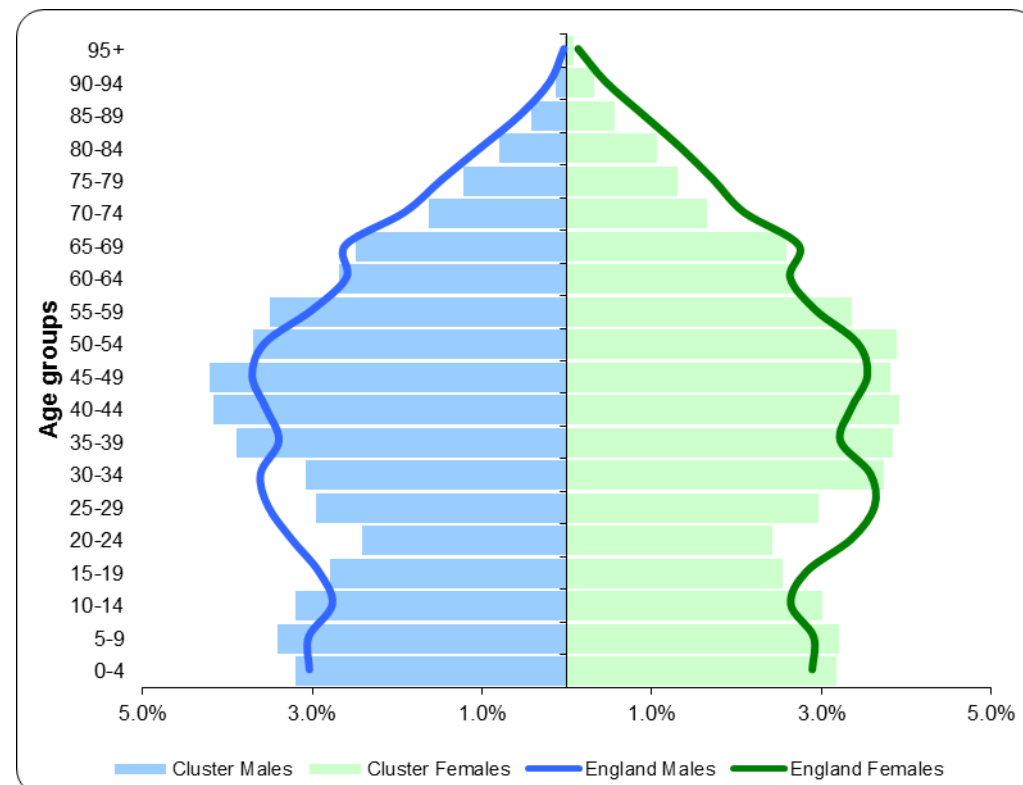
The graphs below show the registered population profile for Wokingham CCG's West cluster compared with the full Wokingham CCG profile (Figure 2) and also the national picture (Figure 3).

**Figure 2: Registered population pyramid for the West Cluster compared with Wokingham CCG at 31-Mar-15**



Source: Health and Social Care Information Centre (April 2015)

**Figure 3: Registered population pyramid for the West Cluster compared with England at 31-Mar-15**



Source: Health and Social Care Information Centre (April 2015)

The West Cluster population profile differs slightly from Wokingham CCG's picture with a smaller proportion of older people (aged 70 to 95+) and a larger proportion of female adults (aged 30 to 34).

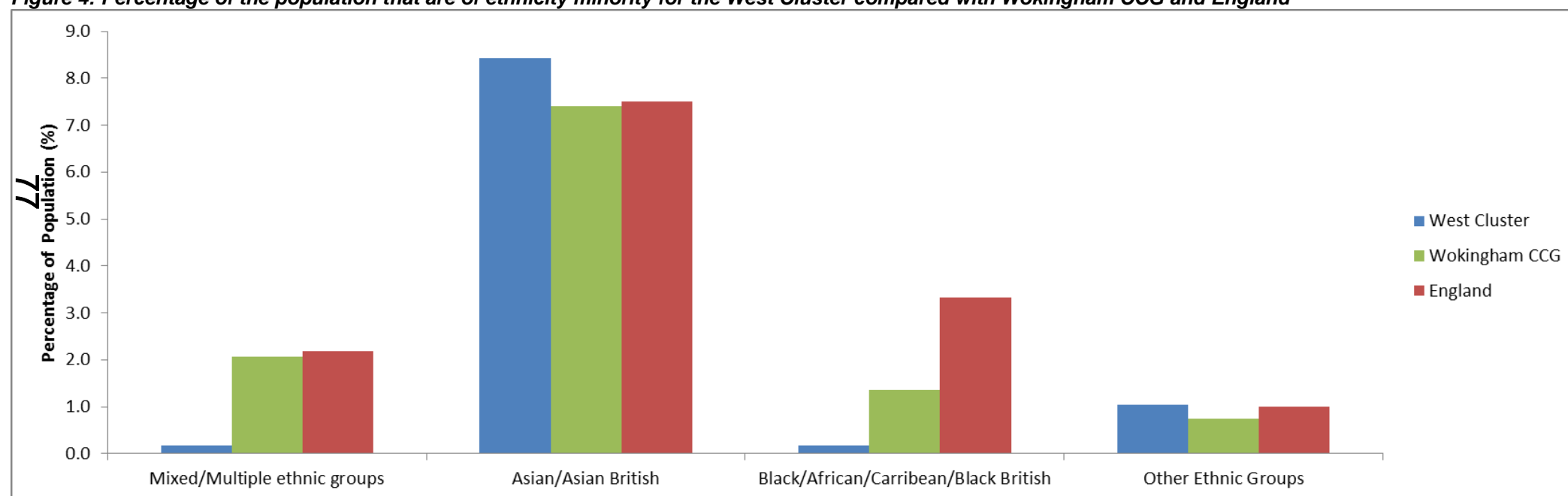
The West Cluster population profile differs more significantly from the national picture with a smaller proportion of male younger adults aged 20 to 34, and a smaller proportion of younger female adults (aged 20 to 29).

## Ethnicity

The majority of people registered within the West Cluster were White – English/ Welsh/ Scottish/ Northern Irish / British/ Irish/ Gypsy or Irish Traveller/ Any other white background with 89%. This was higher than both the Wokingham CCG and England levels, with 88.4% and 86% respectively.

Figure 4 clearly shows that the West Cluster had a higher proportion of Asian and Asian British population (8%) when compared with both Wokingham CCG (7.45%) and England (7.5%).

**Figure 4: Percentage of the population that are of ethnicity minority for the West Cluster compared with Wokingham CCG and England**

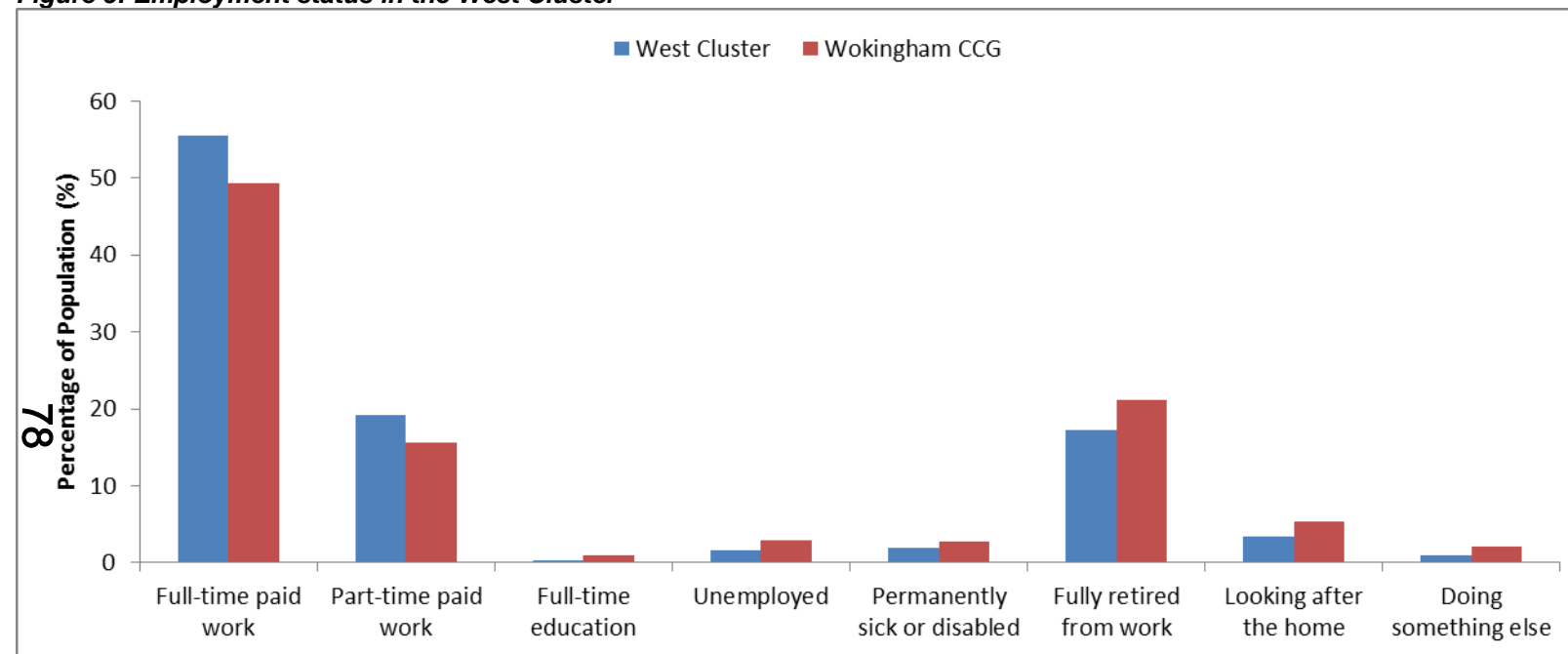


Source: GP Patient Survey January 2015

## Employment Status

When looking at the employment status the over half of people (55.5%) within the West Cluster were in full time paid work. Both the percentage of people in full time and part time (19.1%) work was higher than Wokingham CCG. There was also a lower proportion of the population that are unemployed and permanently sick or disabled when compared with Wokingham CCG.

**Figure 5: Employment status in the West Cluster**



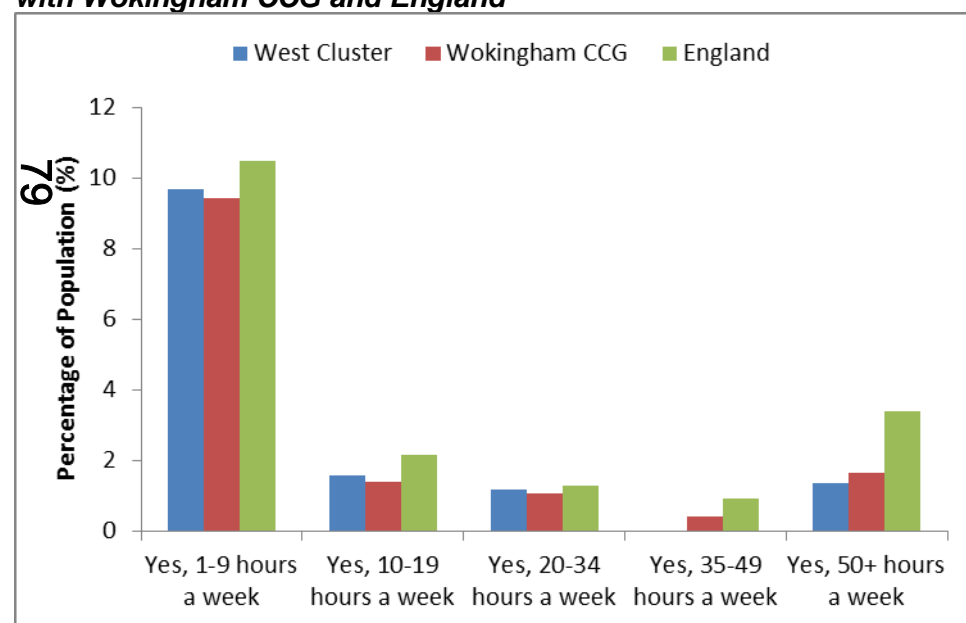
Source: GP patient survey January 2015

## Caring Responsibilities

The data from the GP Patient Survey published in January 2015 stated that 13.8% of the West Cluster identified themselves as a carer. Figure 6 below shows the breakdown of how long those who identified themselves as a carer spent providing care; they were asked how long they spent providing the care in the last week.

This figure for Wokingham CCG of 13.9% was very different from the 9% figure reported in the 2011 Census. The difference between these two figures could be due to many factors, such as sample size, time of question and response rate. The preferred data source would be Census level data due to its large sample size and validity; however this is not available at a GP Practice level and cannot be broken down into Clusters.

**Figure 6: Self-reported number of hours spent providing care per week (excluding hours spent as part of their job) for the west Cluster compared with Wokingham CCG and England**



Source: GP Patient Survey January 2015

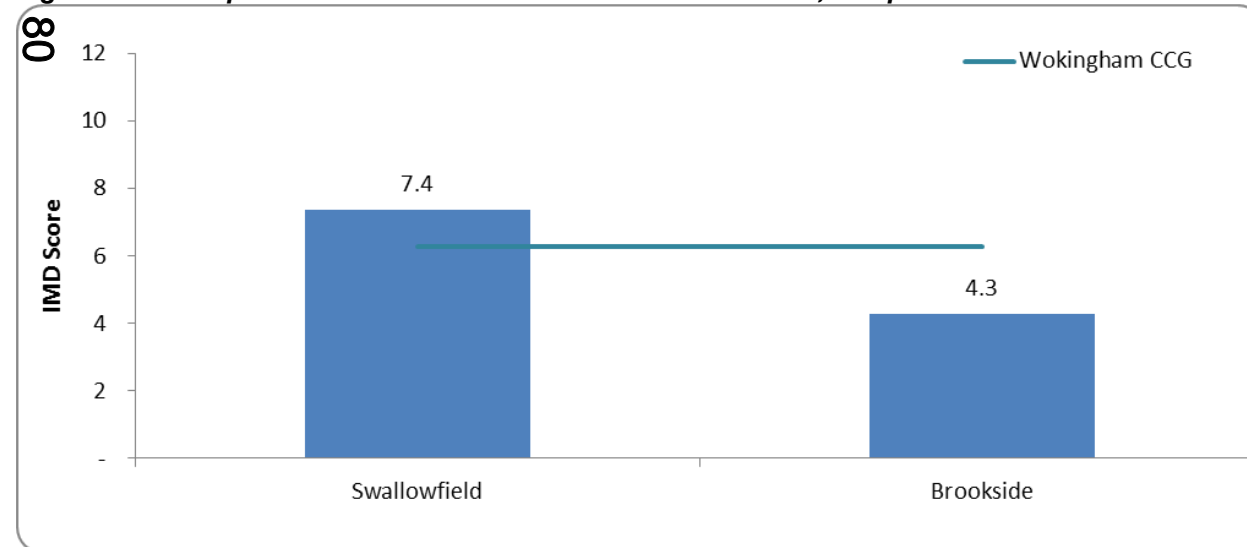
## Deprivation Profile

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 and disability, employment, education, skills and training, barriers to housing and services and living environment. The IMD enables neighbourhoods, or Lower Super Output Areas (LSOAs), to be ranked against each other according to their level of deprivation. Each LSOA covers a population of 1,000-3,000 people and an area with a higher IMD score will be more deprived than another.

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. The 'most deprived' GP practices in Wokingham CCG are Burma Hills, Wilderness Road and Parkside surgeries. None of these GP practices are in the West Cluster. However, it is important to note that all of the GP Practices in Wokingham CCG are in the least deprived quartile of GP Practices nationally.

Looking at figure 7 Swallowfield has a higher IMD score when compared with Wokingham CCG and Brookside, it is a very rural and isolated ward, it borders, Hampshire and West Berkshire and this contributes to the higher IMD score.

**Figure 7: IMD Deprivation scores for West Cluster GP Practices, compared with the overall Wokingham CCG score**



Source: Network of Public Health Observatories, Index of Multiple Deprivation 2010



## Lifestyle and Health Behaviour

The lifestyle choices that people make can greatly affect people's health, both positively and negatively. Whilst these ultimately fall to the individual to change they are modifiable, and with the right support these can be influenced.

This section looks at Smoking status, Obesity and Depression.

### Smoking Status

The GP Patient Survey asked people to describe their smoking habits, in total 583 people responded for the West Cluster. Of these 60.6% of people in the West Cluster identified themselves as never having smoked compared with 58.8% in Wokingham CCG. Figure 8 shows the West Cluster had a higher proportion of regular and occasional smokers (16.7%) than when compared with Wokingham CCG (12.9%).

**Figure 8: Smoking habits of people in the West Cluster compared with Wokingham CCG**



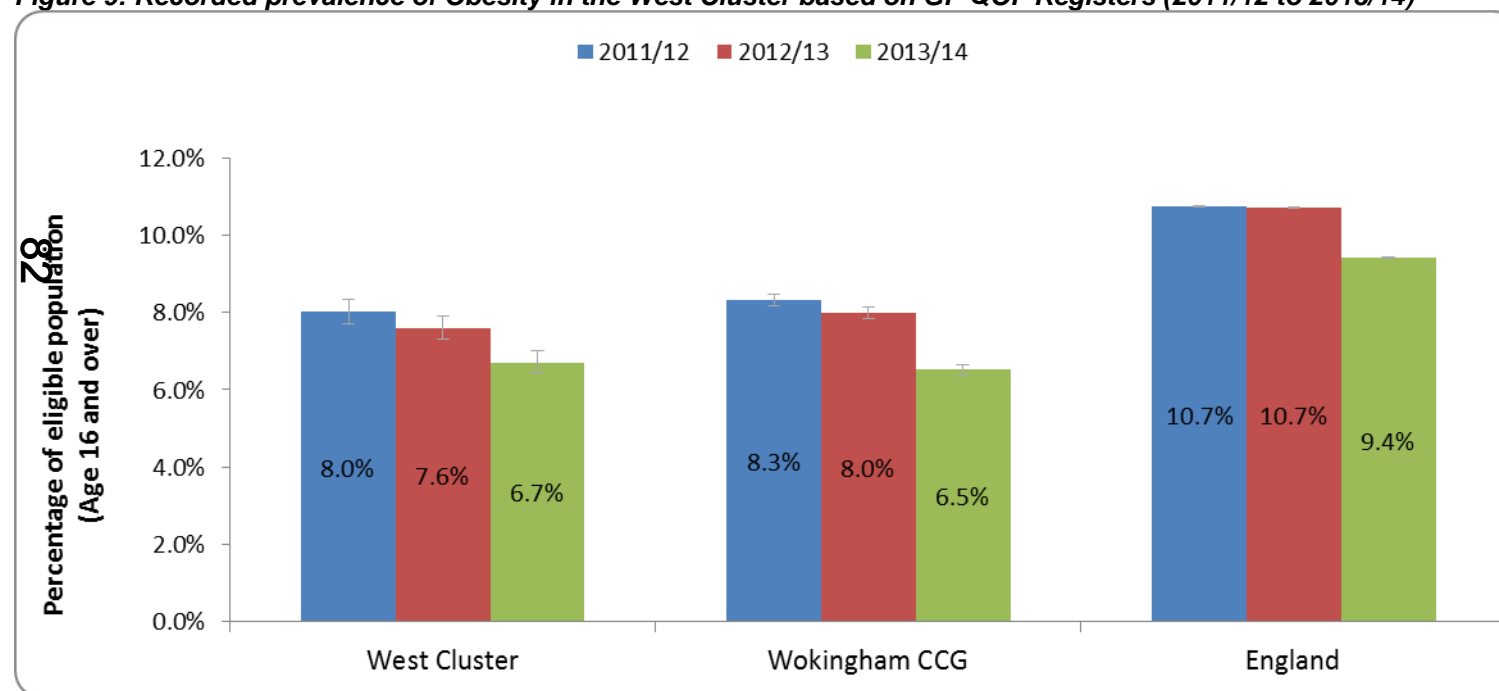
Source: GP Patient Survey January 2015

## Obesity Prevalence

Obesity is calculated by measuring a person's Body Mass Index (BMI). An adult aged 16 or above is classed as Obese if their BMI is equal to or above 30 in the preceding 12 months. It must be noted that BMI is calculated differently for children and the category boundaries can vary depending on ethnicity, for example if you are calculating the BMI of a Asian adult they would be classified as obese if their BMI was 27 or above.

Obesity within the West Cluster and Wokingham CCG was lower than the national average; Figure 9 shows that Wokingham CCG and the West Cluster followed the national trend of significantly decreasing year-by-year for adults aged 16 years and over. The QOF does not collect data for children under 16 years of age, so the profile cannot give these figures, however modelled estimates are provided later in the profiles.

**Figure 9: Recorded prevalence of Obesity in the West Cluster based on GP QOF Registers (2011/12 to 2013/14)**



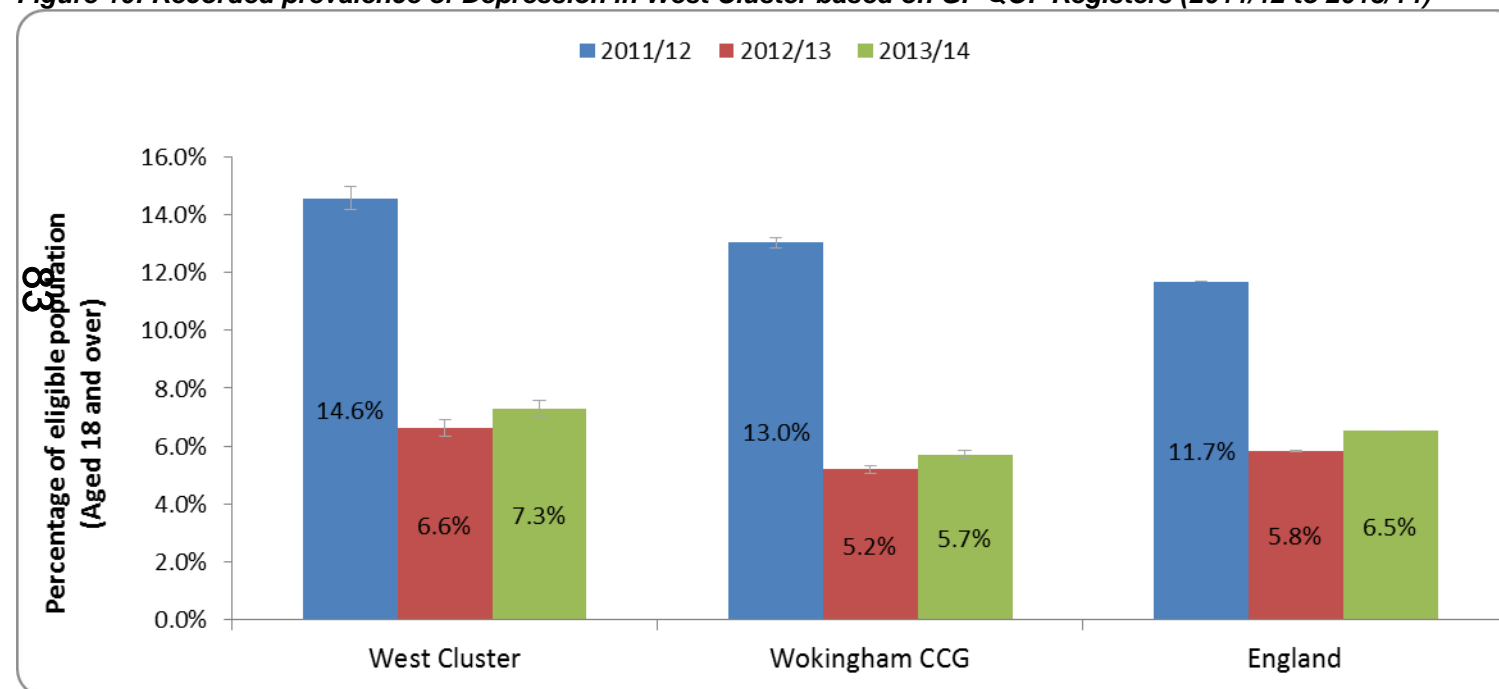
Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)

## Depression

The prevalence of depression decreased significantly in the West Cluster from 2011/12 to 2013/14, however there has been a significant increase observed between 2012/13 and 2013/14. This is a trend that has been seen both at a Wokingham CCG and England level as well.

However, it is important to point out that whilst figure 10 suggests that there was a large fall between 2011/12 and 2012/13 this was mainly due to the change in the definition for depression register. Therefore we cannot directly compare these figures with 2011/12.

**Figure 10: Recorded prevalence of Depression in West Cluster based on GP QOF Registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health and Social Care Information Centre (Oct 2014)

## Prevalence of Long Term Conditions for Children

This section focuses on the health of children in the West Cluster, specifically looking at Long Term Conditions. The prevalence data for children, unlike for adults, is not included in the QOF. For this reason national models need to be used to estimate the level of disease in local child populations. These agreed prevalence models can be found on the NHS comparators website. It is important to note that these models do not take into account local demographics or deprivation levels and therefore can only be used as a guide for the level of childhood disease in the local area.

### Asthma

The model suggests that 10.7% of all children aged 19 and under in the West Cluster had asthma, this equates to approximately 999 children. An age and sex breakdown can be found in Figure 11. From this breakdown it is also possible to infer that a higher proportion of boys had asthma than girls, 11.7% compared with 9.7% respectively.

**Figure 11: Table displaying modelled age break down of Asthma in the West Cluster based on March 2015 population data, per 1,000 population. Figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	112	180	169	97	558
Girls	68	138	129	106	442
<b>All</b>	<b>180</b>	<b>318</b>	<b>298</b>	<b>203</b>	<b>999</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

### Diabetes

Approximately 31.7 children in the West cluster had diabetes, this equates to 0.34% which is based on modelled estimates. An age and sex breakdown can be found in Figure 12.

**Figure 12: Modelled estimates of diabetes prevalence in children aged 0-19 in the West Cluster based on March 2015 population data, per 100 population. Figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	4	4	4	4	16
Girls	4	4	4	3	15
<b>All</b>	<b>8</b>	<b>9</b>	<b>8</b>	<b>7</b>	<b>32</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## COPD

Within the West Cluster the percentage of children that had COPD is 0.43%. The age and sex break down below suggests that there were a higher proportion of boys, 0.45% with COPD than girls 0.41%.

**Figure 13: Modelled estimates of COPD prevalence in children aged 0-19 in the West Cluster based on March 2015 population data, per 100 population. Figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	13	3	2	3	22
Girls	11	2	2	3	19
<b>All</b>	<b>24</b>	<b>5</b>	<b>5</b>	<b>6</b>	<b>40</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Epilepsy

∞  
The

The model suggested that 0.41% of the registered patients aged 19 years and under in the West Cluster were estimated as having Epilepsy. This is very similar to the CCG level modelled estimates. Figure 14 gives a sex and age breakdown.

**Figure 14: Modelled estimates of Epilepsy prevalence in children aged 0-19 in the West Cluster based on March 2015 population data, per 1,000 population. Figures have been rounded to the nearest whole number**

	0-4	5-9	10-14	15-19	Total
Boys	2	6	5	7	20
Girls	2	5	5	6	18
<b>All</b>	<b>4</b>	<b>11</b>	<b>10</b>	<b>13</b>	<b>38</b>

Source: NHS comparators (2014) modelled on Health & Social Care Information Centre (2015) registered population figures

## Prevalence of Long Term Conditions for Adults

### Asthma

Number of people on the Asthma Register: 2,457  
Prevalence of Asthma: 6.51%

Asthma prevalence did not change significantly between 2011/12 and 2013/14 according to the QOF register, and the West prevalence did not differ significantly from Wokingham CCG. There were 2,457 people on the Asthma register however, according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 2,457 adults living with Asthma, which means there were 989 people potentially "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

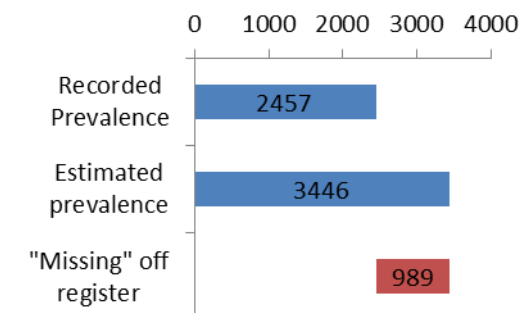
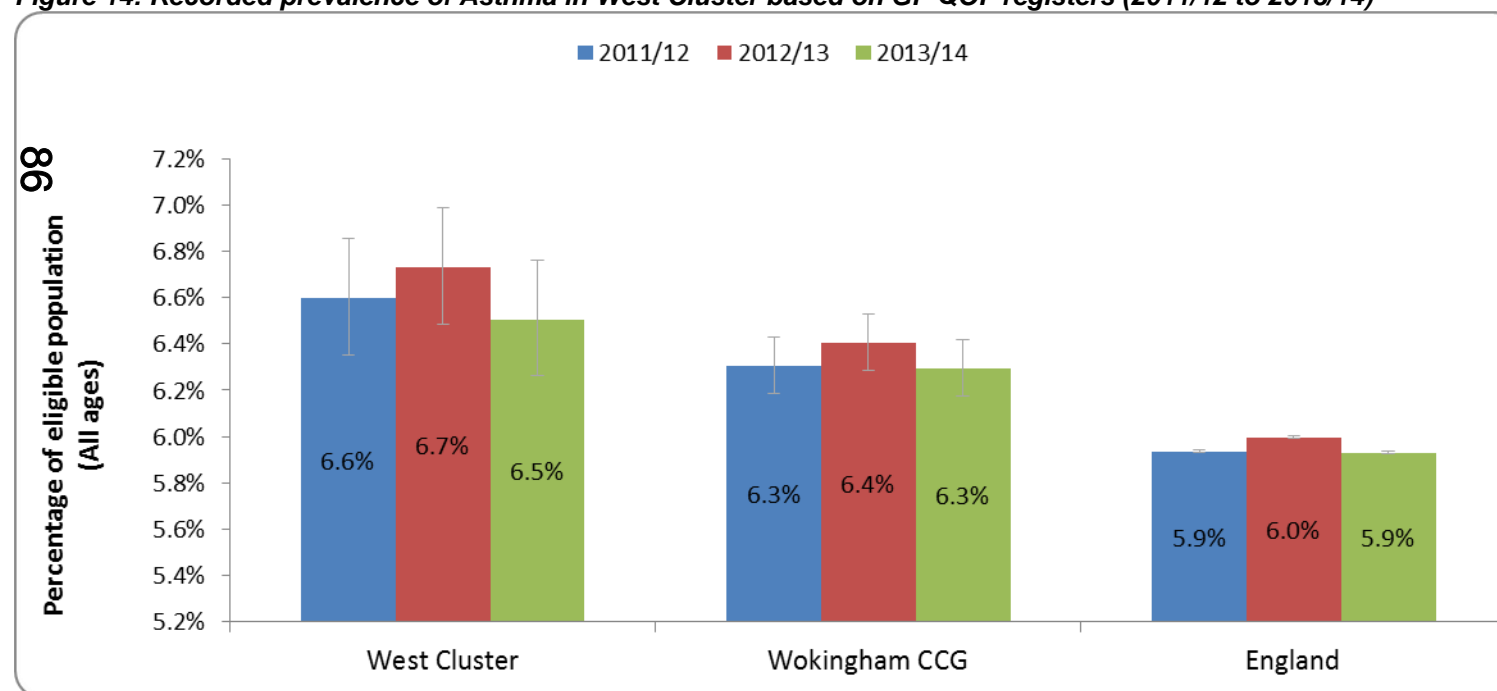


Figure 14: Recorded prevalence of Asthma in West Cluster based on GP QOF registers (2011/12 to 2013/14)



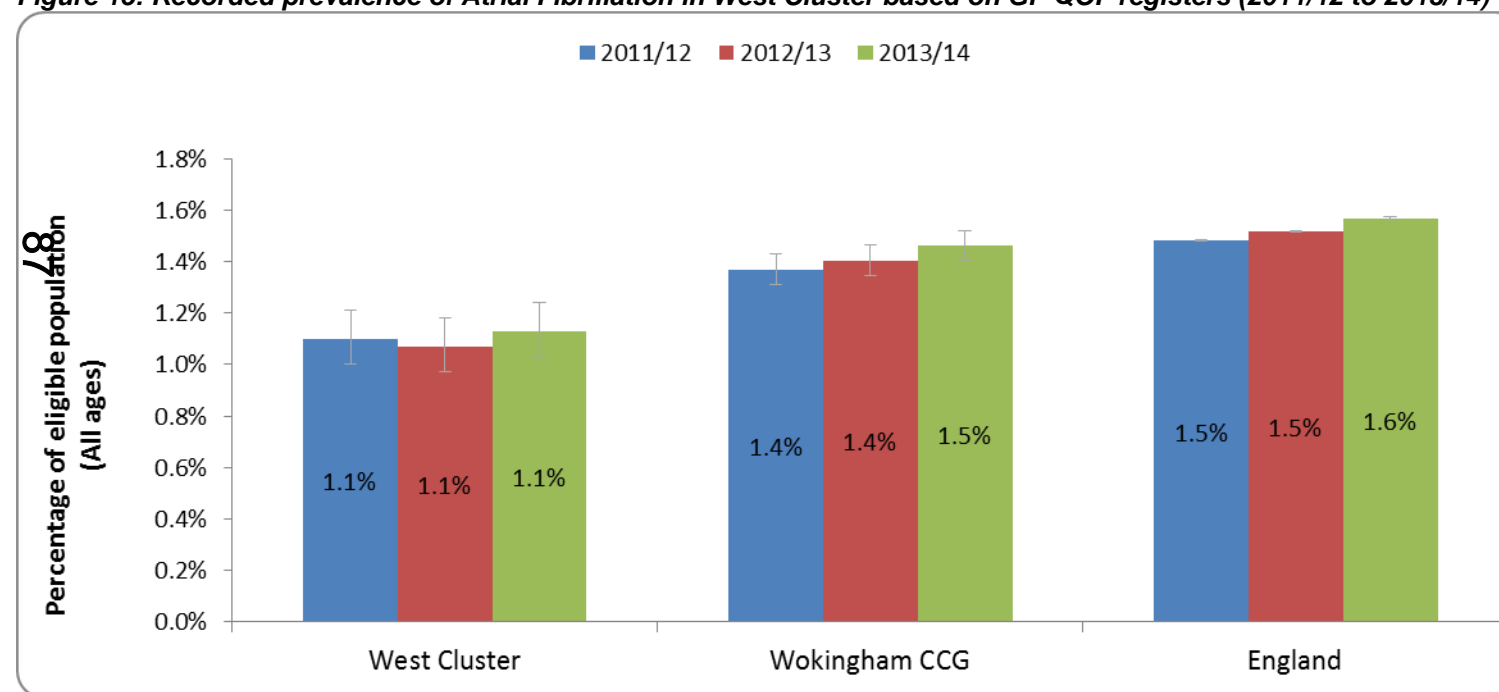
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Atrial Fibrillation

Number of people on the Atrial Fibrillation register: 426  
Prevalence of Atrial Fibrillation: 1.13%

The prevalence of Atrial Fibrillation in the West Cluster as of 2013/14 was 1.13. Neither the West Cluster nor the Wokingham CCG had changed significantly between 2011/12 and 2013/14. England significantly increased by 0.09% from 2011/12 to 2013/14.

**Figure 15: Recorded prevalence of Atrial Fibrillation in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



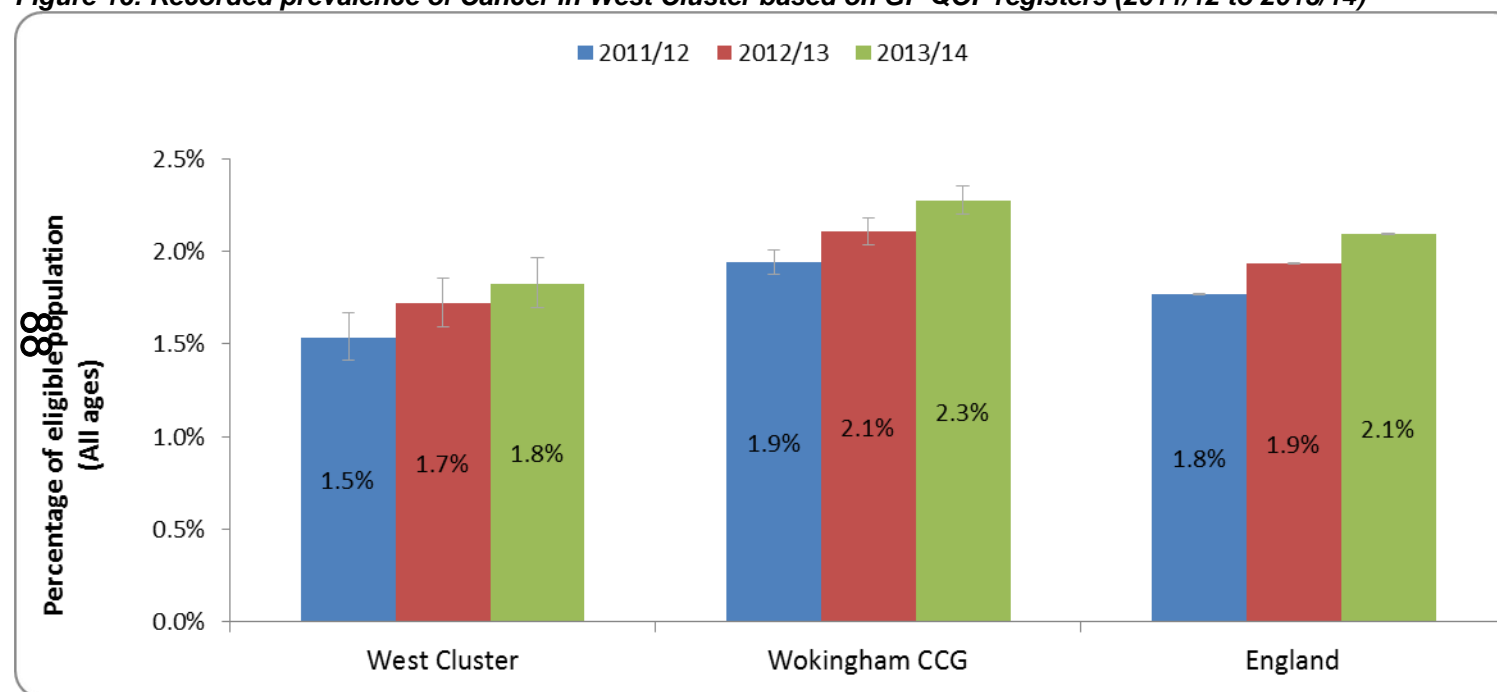
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Cancer

Number of people on the Cancer register: 689  
Prevalence of Cancer: 1.82%

The prevalence of cancer in the West Cluster was 1.82% which was significantly lower than the Wokingham CCG prevalence. The West prevalence significantly increased by 0.29% from 2011/12, this is a trend that was seen both nationally and locally, with significant increases in both Wokingham CCG and England.

**Figure 16: Recorded prevalence of Cancer in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)



## COPD

Number of people on the COPD register: 383  
Prevalence of COPD: 1.01%

The Prevalence of COPD in the West Cluster did not significantly change from 2011/12 to 2013/14. In the West Cluster prevalence was 1.01% which was not significantly different from the Wokingham CCG prevalence with 0.97%. Nationally, England had a much higher prevalence at 1.78% and this significantly increased from 2011/12 to 2013/14. There were 383 people on the COPD register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 606 people living with COPD within the West Cluster. This means there were potentially 223 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

## West Cluster Profile 2015

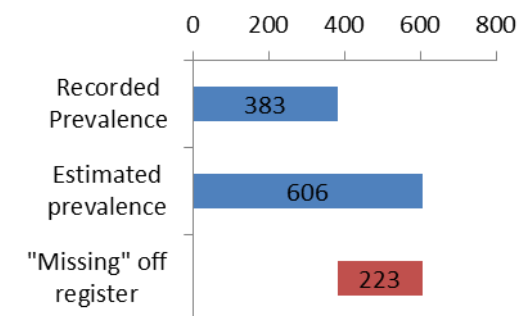
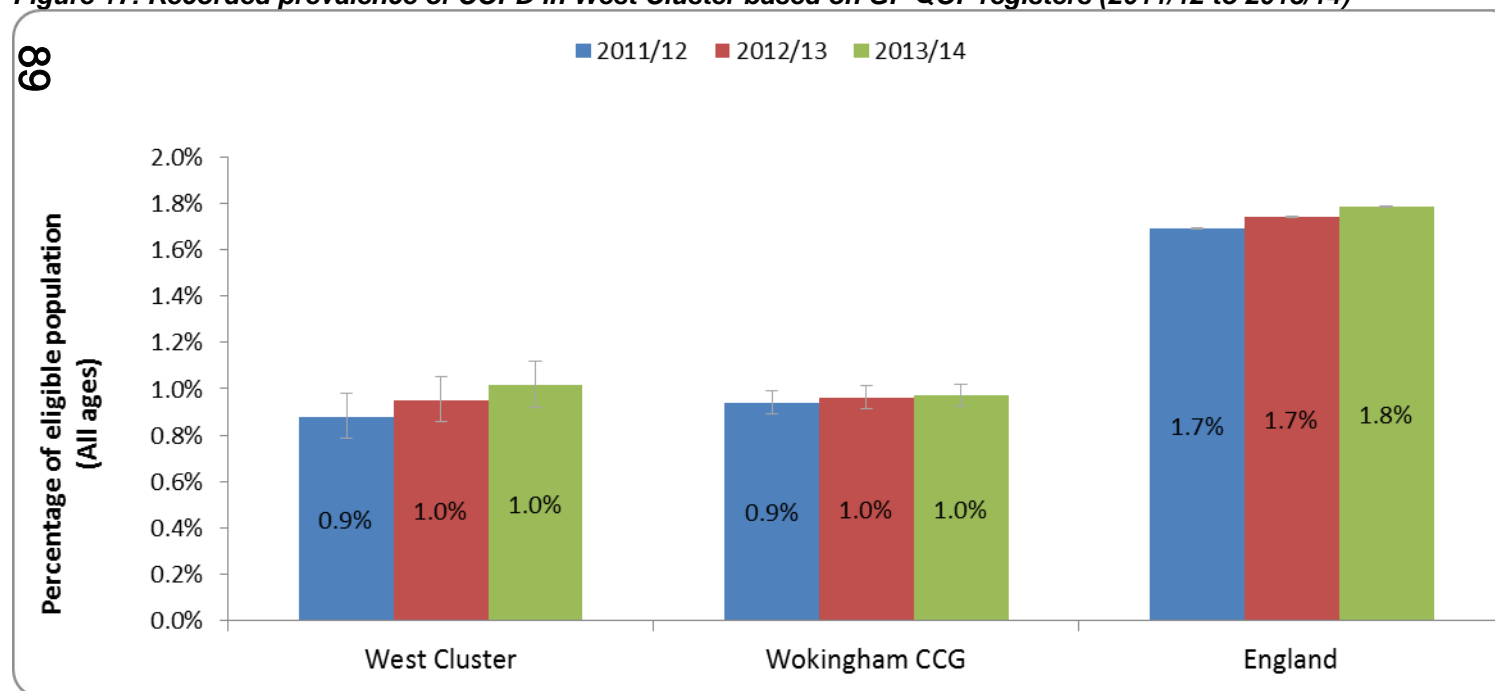


Figure 17: Recorded prevalence of COPD in West Cluster based on GP QOF registers (2011/12 to 2013/14)



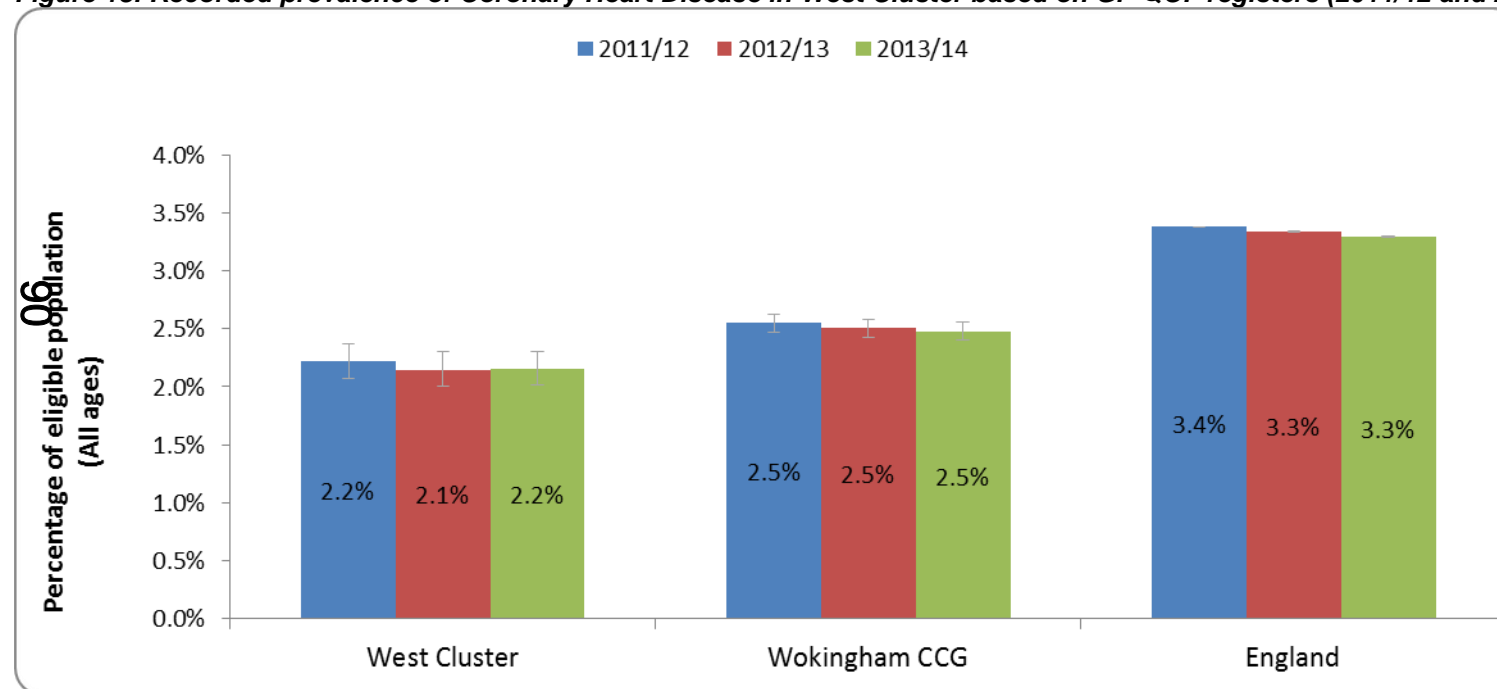
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Coronary Heart Disease

Number of people on the Coronary Heart Disease register: 813  
Prevalence of Coronary Heart Disease: 2.15%

In 2013/14, Coronary Heart Disease had a prevalence of 2.15% in the West Cluster compared with 2.48% in Wokingham CCG. Neither the West Cluster nor Wokingham CCG had significantly changed from 2011/12 to 2013/14. The England prevalence had significantly decreased from 2011/12 to 2013/14 from 3.38% to 3.29% but still remained significantly greater than the West and Wokingham CCG prevalence rates.

**Figure 18: Recorded prevalence of Coronary Heart Disease in West Cluster based on GP QOF registers (2011/12 and 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

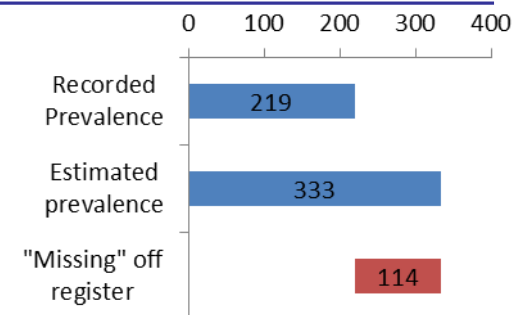
## Dementia

Number of people on the Dementia register: 219  
Prevalence of Dementia: 0.58%

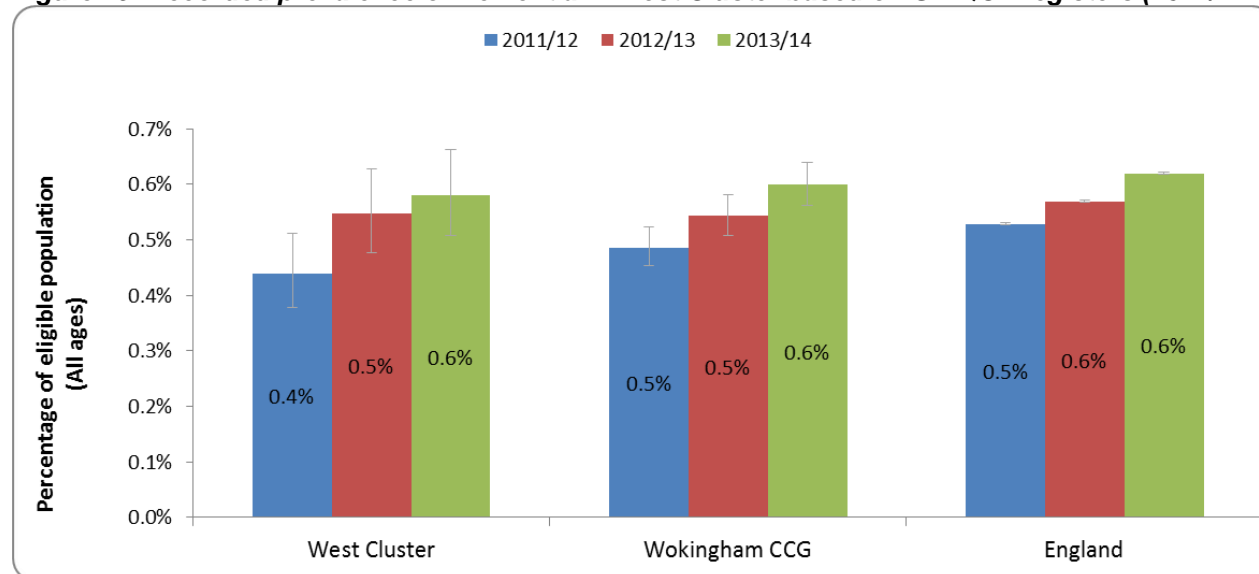
The prevalence of Dementia in the West Cluster was 0.58%, there was no significant changes from 2011/12 to 2013/14. This contrasts with both Wokingham CCG and England prevalence rates, which significantly increased. Figure 19 appears to contradict this, the West Cluster shows the biggest increase, much greater than Wokingham CCG and England, however it wasn't a significant increase. The reason for this is due to the smaller sample size which increased the size of the confidence intervals for the West; therefore it wasn't possible to say that the true values for each year were significantly different. It is also worth noting that the Dementia prevalence could change in the future with the introduction the new QOF indicator for 2015/16 that looks at the percentage of patients with a new diagnosis of Dementia.

There were 219 people on the Dementia register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 333 people living with Dementia within the West Cluster. This means there were potentially 114 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.

### West Cluster Profile 2015



**Figure 19: Recorded prevalence of Dementia in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



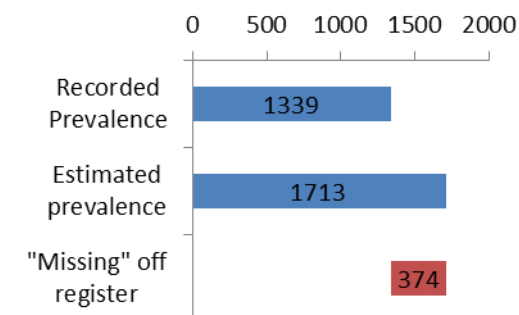
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Diabetes

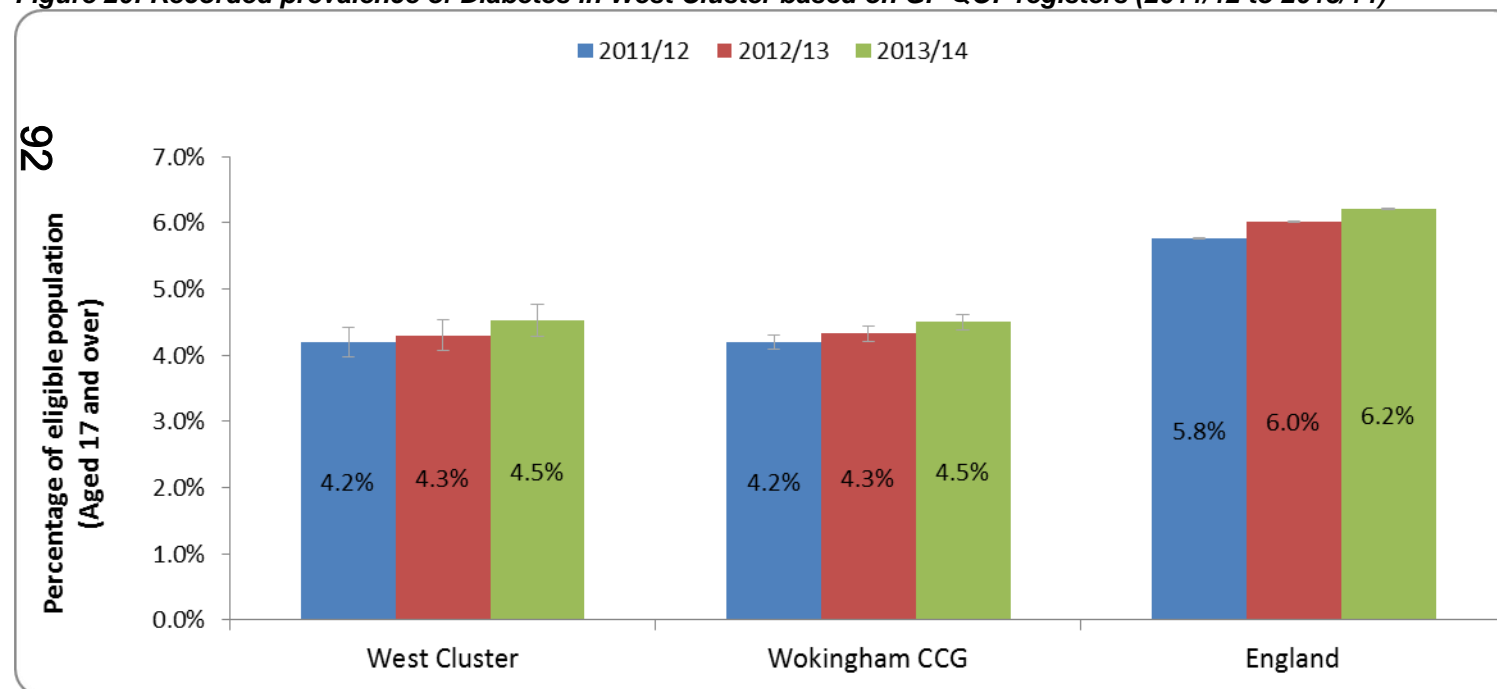
Number of people on the Diabetes register: 1,339  
Prevalence of Diabetes: 4.52%

The prevalence of Diabetes in the West cluster did not significantly change from 2011/12 to 2013/14, and was 4.52% in 2013/14. Both the Wokingham CCG and England experienced significant increases by 0.31% and 0.45% respectively. Both the West Cluster and Wokingham CCG had a lower prevalence of Diabetes than the national picture in England of 6.21%.

There were 1,339 people on the Diabetes register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 1713 people living with Diabetes within the West Cluster. This means there were potentially 374 people "missing" from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 20: Recorded prevalence of Diabetes in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



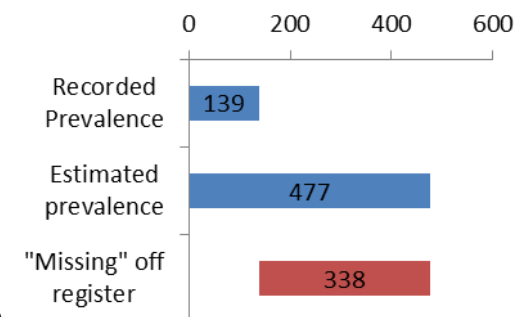
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Heart Failure

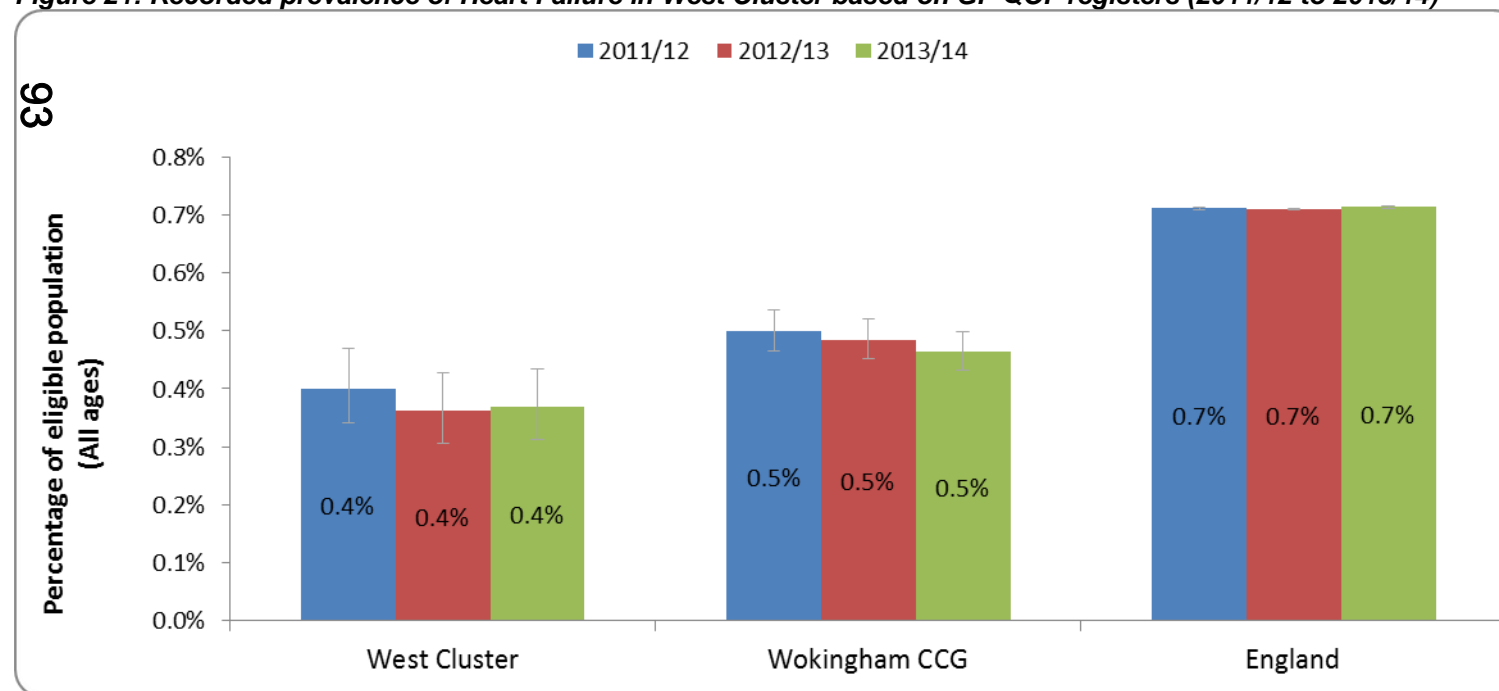
Number of people on the Heart Failure register: 139  
Prevalence of Heart Failure: 0.37%

The prevalence of Heart Failure in the West Cluster was 0.37%. The prevalence of Heart Failure both locally and nationally did not significantly changed from 2011/12 to 2013/14.

There were 139 people on the Heart Failure register, however according to modelled figures coming from the NHS comparators website and the 2015 population figures it is estimated that there were 477 people living with Heart Failure within the West Cluster. This means there were potentially 338 people “missing” from the register. It must be noted that the national model used has not been disaggregated to a local level, so will show under or over estimations in local regions depending on the demographic of that region.



**Figure 21: Recorded prevalence of Heart Failure in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



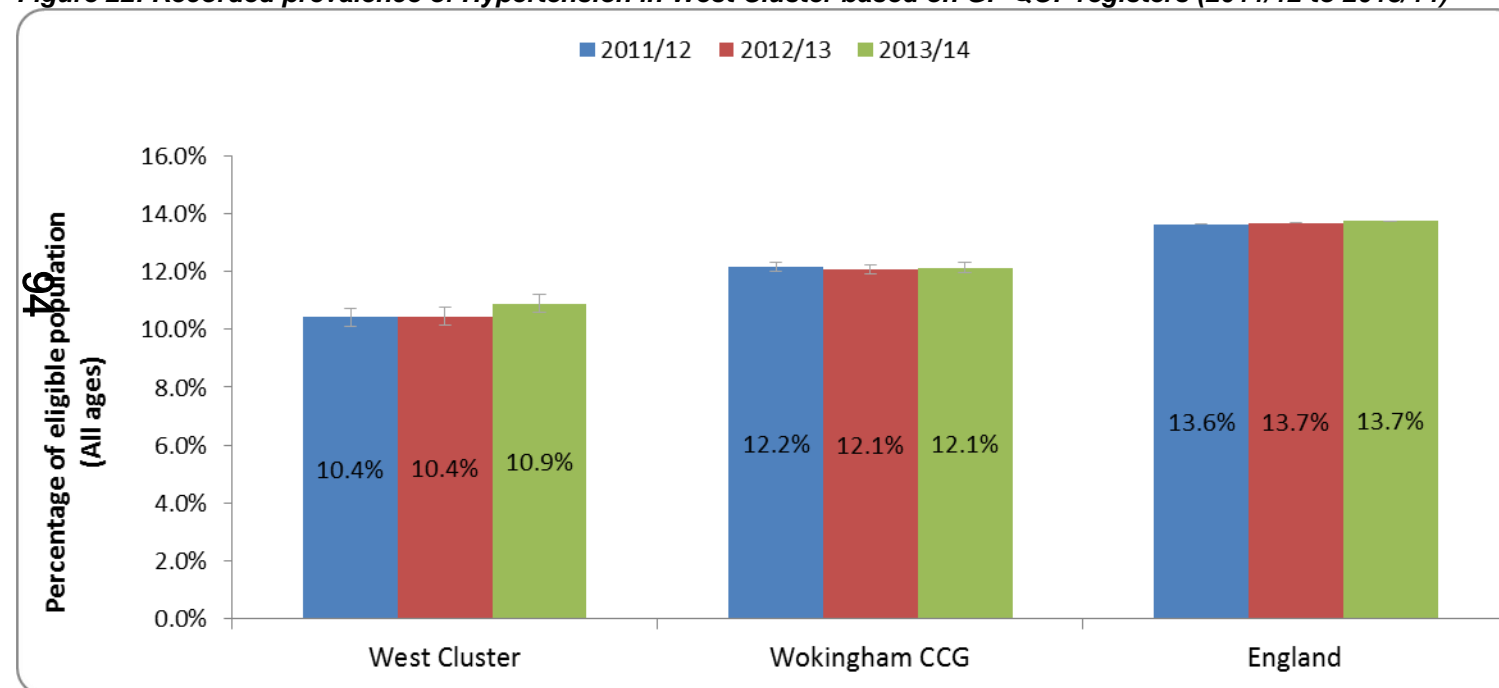
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Hypertension

Number of people on the Hypertension register: 4,114  
Prevalence of Hypertension: 10.9%

The prevalence of hypertension in the West Cluster was 10.90%; this did not significantly change from 2011/12 to 2013/14. The West Cluster prevalence was significantly less than the Wokingham CCG prevalence of 12.13%, and both the West and Wokingham CCG prevalence was significantly less than the England prevalence of 13.73%.

**Figure 22: Recorded prevalence of Hypertension in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



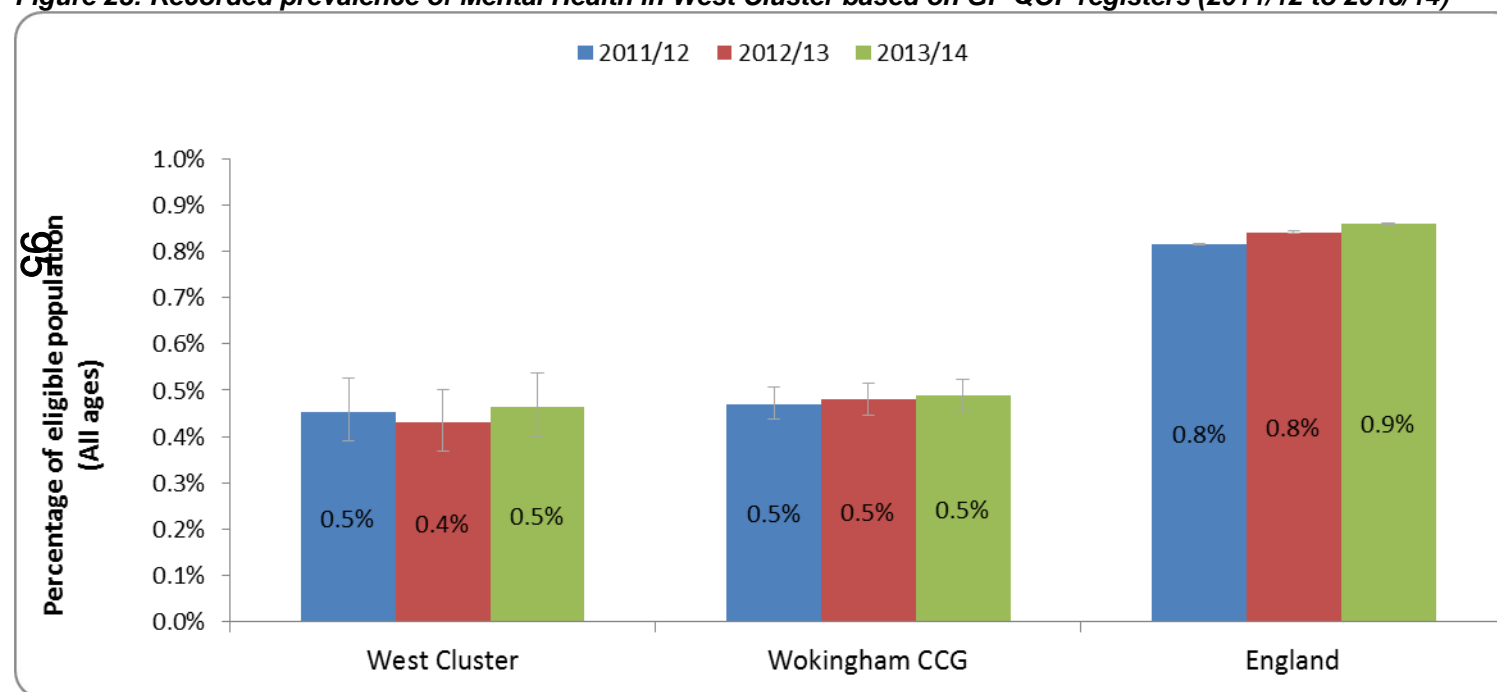
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Mental Health

Number of people on the Mental Health register: 175  
Prevalence of Mental Health: 0.46%

The prevalence of Mental Health in the West Cluster was 0.46%; there was no significant difference between the West Cluster and Wokingham CCG with 0.49%. The prevalence in the West Cluster and Wokingham CCG did not change significantly between 2011/12 to 2013/14. Both the West Cluster and Wokingham CCG had significantly lower prevalence's when compared with England.

**Figure 23: Recorded prevalence of Mental Health in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



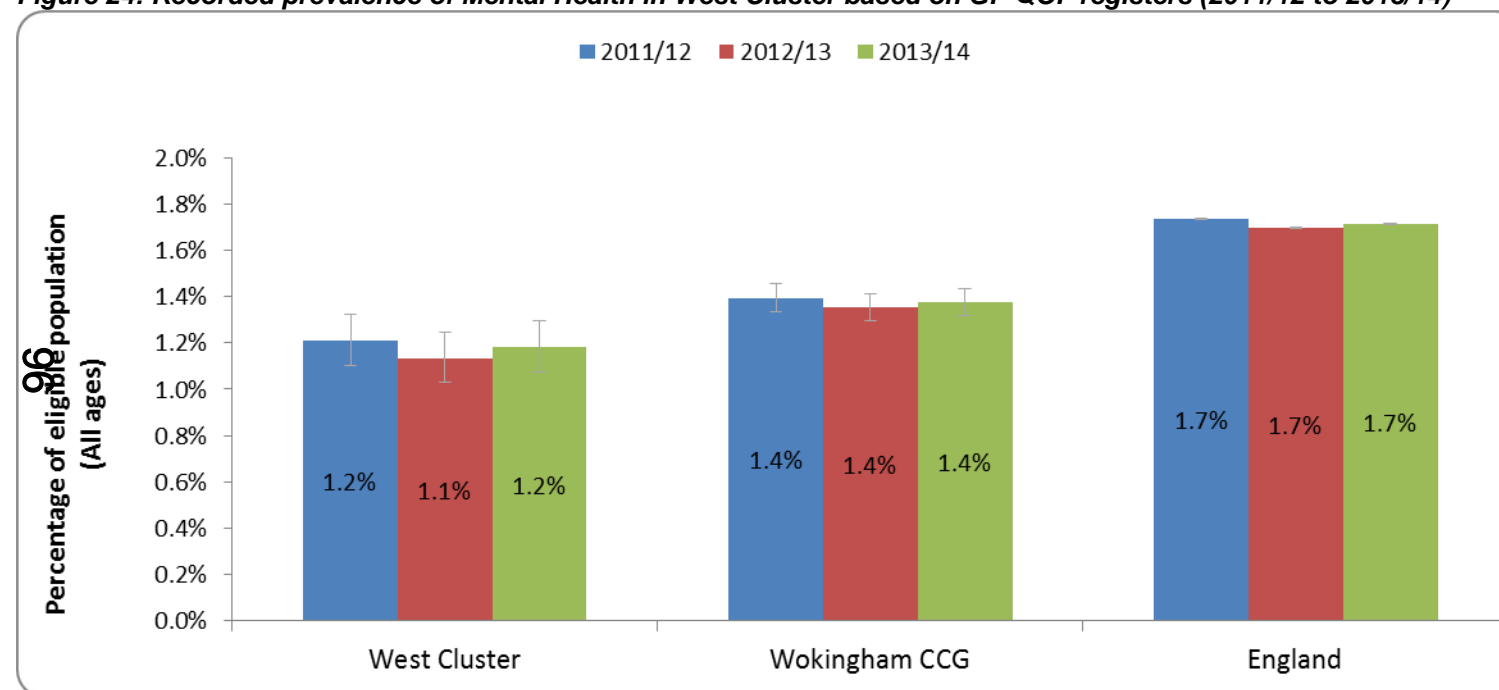
Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)

## Stroke or Transient Ischaemic Attack

Number of people on the Stroke or Transient Ischaemic Attack register: 446  
Prevalence of Stroke or Transient Ischaemic Attack: 1.18%

The prevalence of Stroke and TIA in the West cluster was 1.18%; this did not change significantly between 2011/12 and 2013/14, however was significantly lower than both the Wokingham CCG and England prevalence.

**Figure 24: Recorded prevalence of Mental Health in West Cluster based on GP QOF registers (2011/12 to 2013/14)**



Source: Quality Outcomes Framework 2013-14; Health & Social Care Information Centre (Oct-2014)



## GP Patient Survey

### Support to Manage LTC

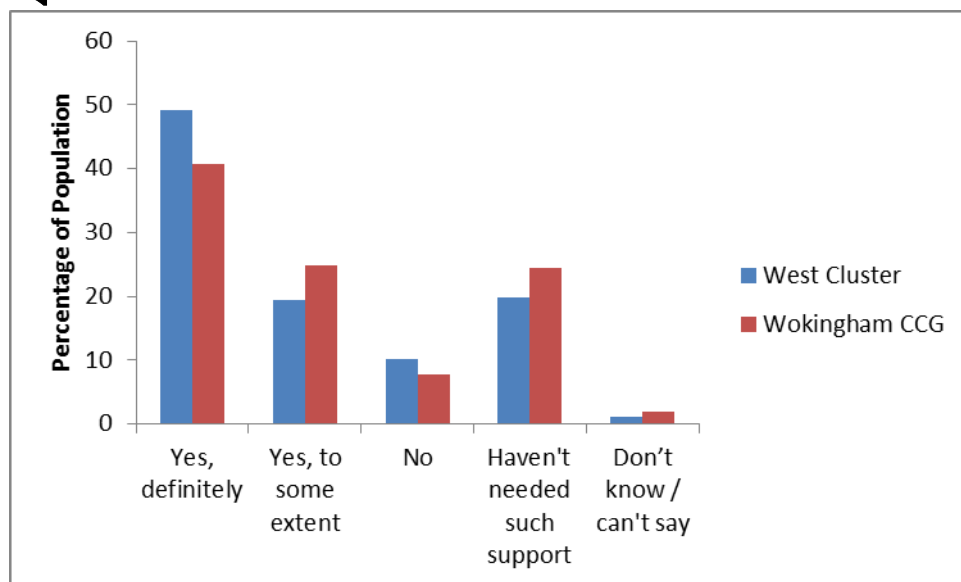
Figure 25 displays the responses of all those who reported they had a medical condition when answering the question, '*In last 6 months, had enough support from local services or organisations to help manage long-term health condition(s)*'. The responses indicated that 49.2% of patients that identified themselves as having a LTC were satisfied with the support that they had received.

As this data is from the GP Patient Survey it can only be used as a guide and should not be mistaken for a rigorous and absolute picture of the West Cluster.

**Figure 25: Responses to question about support to manage a LTC in the last 6 months from the GP Survey comparing the West Cluster and Wokingham CCG**

	% Yes, definitely	% Yes, to some extent	% No	% Haven't needed such support	% Don't know / can't say
<b>West Cluster</b>	49.20	19.44	10.25	19.87	1.09
<b>Wokingham CCG</b>	40.7	24.9	7.8	24.5	2

97



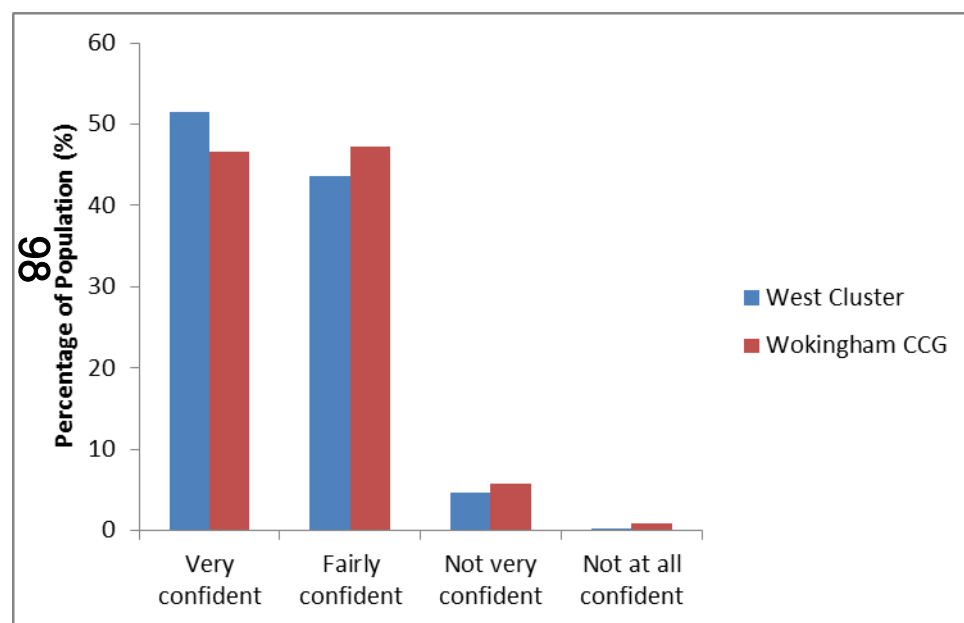
Source: GP Patient Survey January 2015

## Confidence Managing Own Health

Figure 26 displays responses of all of those who completed the survey question – ‘*confidence in managing own health*’. Figure 26 shows that 51.5% of the West Cluster felt very confident in managing their own health.

**Figure 26: Responses to question about confidence managing own health from the GP Survey comparing the West Cluster and Wokingham CCG**

	% Very confident	% Fairly confident	% Not very confident	% Not at all confident
<b>West Cluster</b>	51.50	43.58	4.63	0.29
<b>Wokingham CCG</b>	46.6	47.3	5.7	0.9



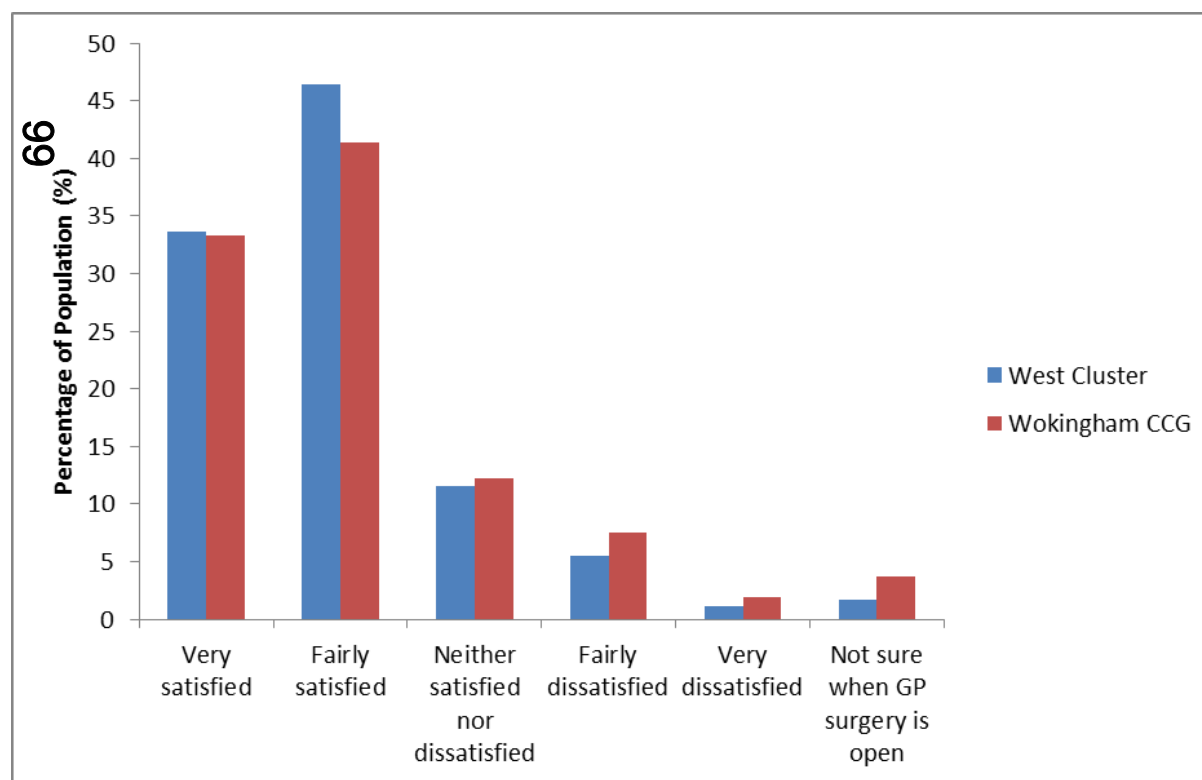
Source: GP Patient Survey January 2015

## Satisfaction with Opening Hours

The GP survey asked patients about their satisfaction with the GP opening times, the majority of West Cluster patients (80.07%) were either very satisfied or fairly satisfied with the opening times. In comparison there were still 19.93% of patients that were indifferent, dissatisfied or unsure of GP opening times.

**Figure 27: Responses to question about satisfaction with GP opening times from the GP Survey comparing the West Cluster and Wokingham CCG**

	% Very Satisfied	% Fairly Satisfied	% Neither Satisfied or Dissatisfied	% Fairly Dissatisfied	% Very Dissatisfied	% Not sure when a GP surgery is open
<b>West Cluster</b>	33.67	46.40	11.53	5.55	1.10	1.75
<b>Wokingham CCG</b>	33.3	41.4	12.2	7.5	1.9	3.7



Source: GP Patient Survey January 2015

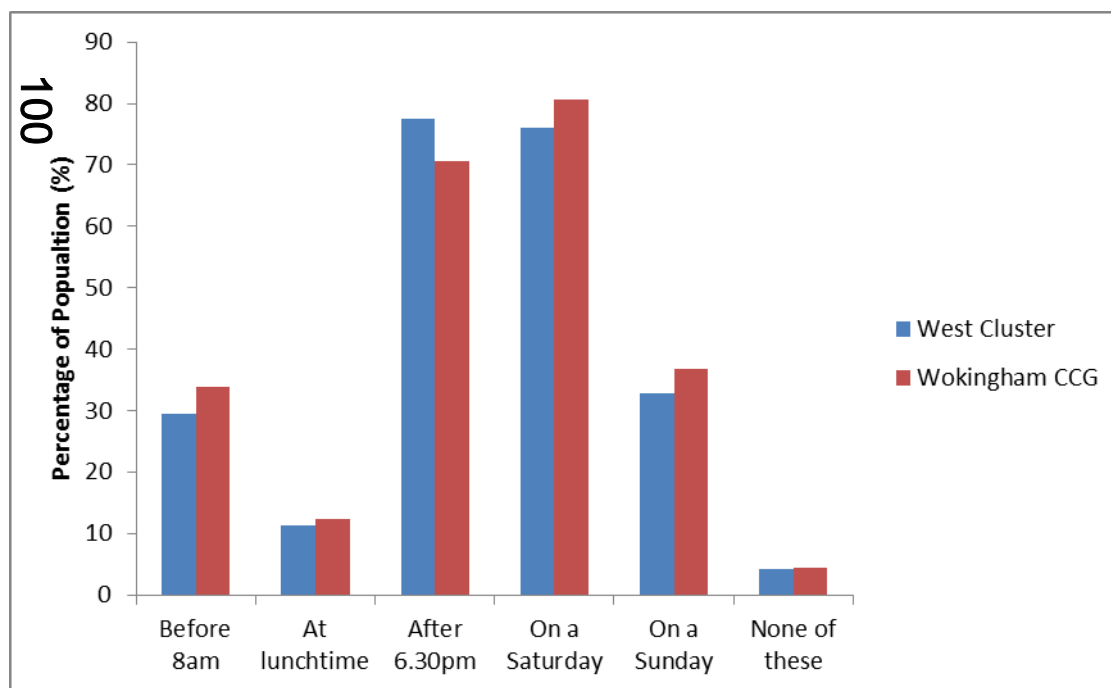
### Additional opening hours that would make it easier to see or speak to someone

When asked what additional opening times would make it easier to see or speak to someone, 77.6% of West Cluster respondents said that GP surgeries should be open after 6.30pm. The second highest response (76%) was that opening on a Saturday would help. This was a similar picture when comparing the West Cluster with Wokingham CCG.

It must be noted that data for patients at both Wilderness Road and Burma Hills Surgery was suppressed due to the low number of responses; this affected both the North Cluster and Wokingham CCG data.

**Figure 28: Responses to question about additional GP opening times from the GP Survey comparing the West Cluster and Wokingham CCG**

	% Before 8am	% At Lunchtime	% After 6.30am	% On a Saturday	% On a Sunday	% None of These
<b>West Cluster</b>	29.6	11.3	77.6	76.0	32.8	4.2
<b>Wokingham CCG</b>	33.9	12.4	70.6	80.6	36.9	4.4



Source: GP Patient Survey January 2015