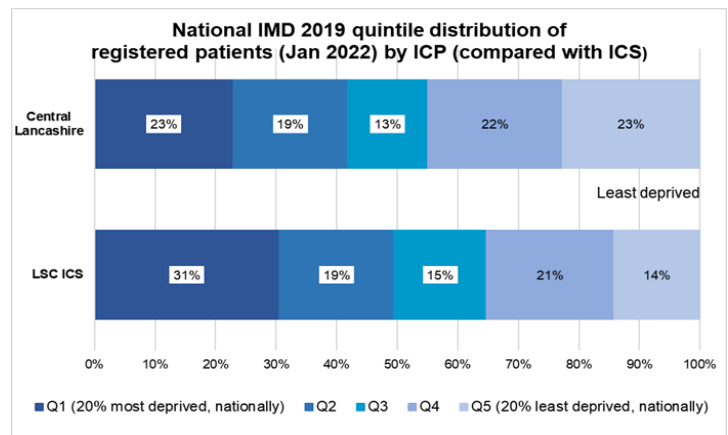# Central Lancashire Integrated Care Partnership Profile

This profile provides an overview of the ICP, including deprivation, demographics and key indicators which have an impact on health. Some of these have been highlighted as 'positives' or 'challenges' for the ICP. These may be areas that need promoting, protecting or improving.

The **statistical significance** comparisons for the positives and challenges on pages one and two are with England. Please note, while the overall value for the ICP may be significantly different to England, the individual districts which make up the ICP may show variation. All proportions, rates and values can be found on the chart on page five along with the full suite of indicators for the area. We have calculated the variation (using ward data) which exists in the ICP, with the lowest and highest values provided where possible, along with the integrated care system (ICS) and England values.

Deprivation

Deprivation and poverty can be the biggest risk factors for poor health and wellbeing. People living in deprived areas are more likely to have poorer health outcomes and a reduced life expectancy.

They may also have inequalities in life chances and fewer opportunities, compared to their counterparts in less deprived areas. Parts of the ICP (in Preston) have high levels of deprivation, which continue to contribute to the inequalities.

National IMD 2019 quintile distribution of registered patients (Jan 2022) by ICP (compared with ICS)

Central Lancashire: Q1 23%, Q2 19%, Q3 13%, Q4 22%, Q5 23% (Least deprived)

LSC ICS: Q1 31%, Q2 19%, Q3 15%, Q4 21%, Q5 14%

■ Q1 (20% most deprived, nationally) ■ Q2 ■ Q3 ■ Q4 ■ Q5 (20% least deprived, nationally)

Population breakdown based on Jan-22 GP registered population

Key findings: early years and childhood

A good start in life is vital: the experiences a child has in their early years can have an impact on their future health and wellbeing. Some children may experience educational, social and health disadvantages that follow them through life. These may include factors such as being born to a teenage mother and/or being a low birth weight. Missing school through hospital stays, or having excess weight can also affect a child's development. Protective factors, which promote wellbeing and mitigate risk, such as not living in poverty, or doing well at school, can lead to opportunities to thrive in life.
(Key: CH = Chorley, PR = Preston, SR = South Ribble).

Positives for the ICP

- **A&E attendance** in under-fives is better for all three districts.

- The proportion of **obese** children in reception is similar across all three districts.

- For year 6 children, the proportion who are **obese** or **overweight** is similar in CH and PR, and better in SR.

- The proportion of **physically active children** and young people (5-16 years) is better in CH and SR, and similar in PR.

- **Emergency hospital admissions** (15-24 years) is better.

Challenges for the ICP

- The proportion of **low birth weight live babies** is worse in the ICP overall (worse in PR, similar in SR, better in CH).

- **Emergency hospital admissions** for **injuries** in under-fives are higher.

- The **emergency admission rate for injuries** for those aged under-15 is higher.

- The proportion of **deliveries to teenage mothers** is similar (PR is higher).

- The **infant mortality rate** is similar across the three districts.

Central Lancashire Integrated Care Partnership Profile

Key findings: adults and older people

Where a person lives, their lifestyle, their social connections and their economic position continue to have an impact on their physical and mental health. Having these as positive influences increases the likelihood of having a healthier life (including disability-free and longer life expectancy). Conversely, a lack of these may lead to poorer health outcomes, which can be seen through higher levels of hospital admissions, illness and premature mortality.

Central ICP has challenges, with many of the indicators showing as significantly worse than England. Partners (including communities) working together in these areas can have a positive impact on the health and wellbeing of their residents. The full impact of the Covid-19 pandemic will likely be seen in future data releases.

Positives for the ICP

- Proportion of **older people living in poverty** is better in the ICP overall, (worse in PR, better in CH and SR).

- Incidence of **colorectal cancer** is similar across the ICP*

- Incidence of **prostate cancer** is lower in the ICP (CH is lower, PR and SR are similar).

- The ICP has a similar rate of **emergency hospital admissions for hip fractures in 65+** (all districts similar).

*lower incidence of disease may be due to healthier lifestyles and/or screening, but equally it may be due to a gap in screening and diagnosis. Looking at this in respect of the local population is important.

Challenges for the ICP

- The proportion of people with a **long-term illness or disability** is higher.

- The rate of **emergency hospital admissions** for **all causes** is higher.

- Emergency hospital admissions for **coronary heart disease** are higher.

- Mortality from **circulatory disease** (all ages) is higher (SR is similar).

- Mortality from **respiratory diseases** (all ages) is higher in the ICP (CH and PR are higher, SR is similar).

- The incidence of **lung cancer** is higher (SR is similar).

Additional public health indicators (below) show that the rate of new STI diagnoses (excluding chlamydia in under-25s) is significantly better than England. The smoking prevalence in adults (18+) is similar to England, while the under-18 conception rate is worse for the ICP overall.

Indicator	Period	England	LSC ICS	Central Lancs ICP	Chorley	Preston	South Ribble	Unit
Killed and seriously injured (KSI) casualties on England's roads (persons, all ages)	2019	89.7*	N/A	N/A	N/A	N/A	N/A	Crude rate per billion vehicle miles
Children killed and seriously injured (KSI) on England's roads (persons, <16 yrs)	2017 - 19	18.0	49.0	N/A	N/A	N/A	N/A	Crude rate per 100,000
Smoking prevalence in adults (18+) - current smokers (APS) (2020 definition)	2020	12.1	N/A	N/A	20.2	11.2	14.7	%
Smoking status at time of delivery (%)	2020/21	9.6	N/A	N/A	9.1	10.7	9.7	%
Under 18s conception rate / 1,000 (female, <18 yrs)	2019	15.7	20.6	21.7*	17.1	25.5	21.4	Crude rate per 1,000 females aged 15-17
Excess winter deaths index (persons, all ages)	Aug19 - Jul20	17.4	N/A	N/A	25.5	19.8	7.9	Ratio - %
Admission episodes for alcohol-specific conditions - Under 18s (persons, <18 yrs)	2017/18 - 19/20	30.7	N/A	N/A	41.7	21.0	36.8	Crude rate per 100,000
TB incidence (three-year average) (persons, all ages)	2018 - 20	8.0	N/A	N/A	1.1	13.8	2.1	Crude rate per 100,000
Killed and seriously injured (KSI) casualties on England's roads (historic data) (persons, all ages)	2016 - 18	42.6*	N/A	N/A	43.8	51.6	49.5	Crude rate per 100,000
New STI diagnoses (exc chlamydia aged <25) / 100,000 (persons, 15-64 yrs)	2020	619.0	N/A	N/A	337.0	568.0	416.0	Crude rate per 100,000

Source: OHID, Fingertips   * Aggregated from all known lower geography values. N/A = not available.   - = no data

🟥 Significantly worse than England 🟩 Significantly better than England 🟧 Similar to England

Central Lancashire Integrated Care Partnership Profile

About the population

The registered population is **408,146** (Jan-22). There are slightly more males (**50.2%**) compared to females (**49.8%**).

Percentage of the population by five-year age group and gender with comparison to England (based on GP population, January 2022)

Legend: ICP male, ICP female, England male, England female
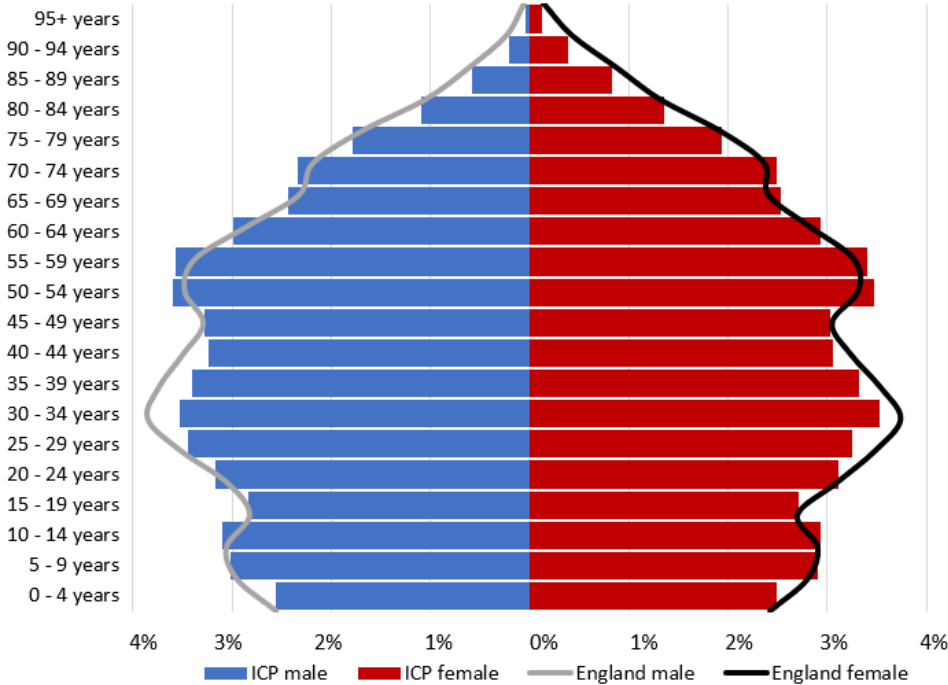
Age	Male	Female
00 - 04	10450	10136
05 - 09	12321	11845
10 - 14	12640	11943
15 - 19	11574	11047
20 - 24	12959	12679
25 - 29	14045	13235
30 - 34	14430	14410
35 - 39	13921	13567
40 - 44	13224	12476
45 - 49	13376	12384
50 - 54	14686	14146
55 - 59	14568	13907
60 - 64	12180	11973
65 - 69	9965	10300
70-74	9545	10180
75-79	7285	7892
80-84	4481	5518
85+	3375	5483
Total	**205,025**	**203,121**

Compared to England there are:

- similar proportions of those aged **5-19** years (males and females)
- a similar proportion of those aged **20-24**, despite Preston having a large university
- fewer working-age people aged **25-44** years (males and females)
- more older people aged **50-59** years (males and females)
- slightly fewer males and females aged **85+**

Ethnicity

Ethnicity breakdown % by ICP, compared with the ICS and England from the GP Survey July 2021*

Legend: White, Asian, Black, Mixed, Other

Central: 89.0%, 6.5%
ICS: 89.4%, 7.1%
England: 82.8%, 9.4%
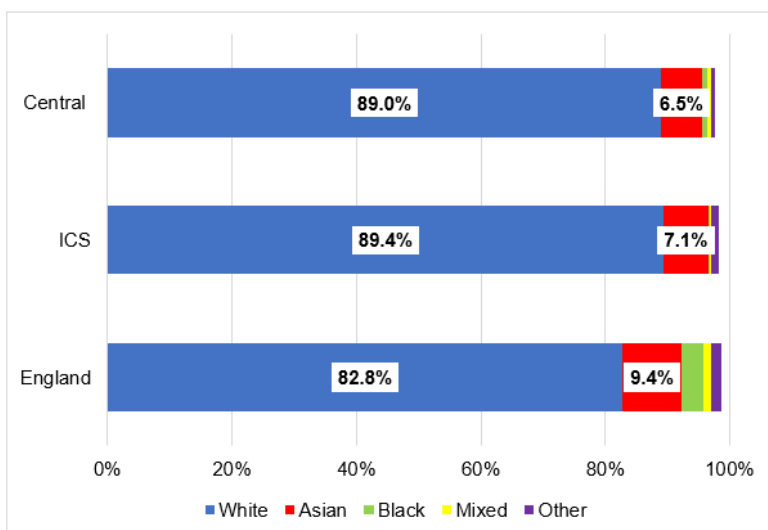
Key findings:

- There are fewer white people registered in the ICP compared to the ICS, but more when compared to England.
- The number of people who are Asian is similar for the ICP (6.5%) and ICS (7.1%), but lower than England overall (9.4%).
- The ICP has the highest proportion (0.8%) of Black people in the ICS but is still lower compared to England (3.6%).

Asian background includes Chinese. Black includes Caribbean and/or African. White = all white backgrounds, including 'other', Gypsy or Irish traveller, and Roma.
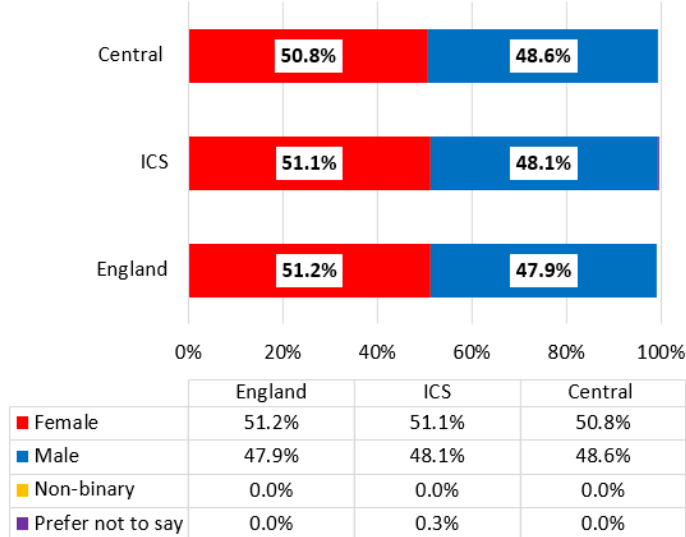
*Figures won't sum due to rounding. Data based on registered population.

Central Lancashire Integrated Care Partnership Profile
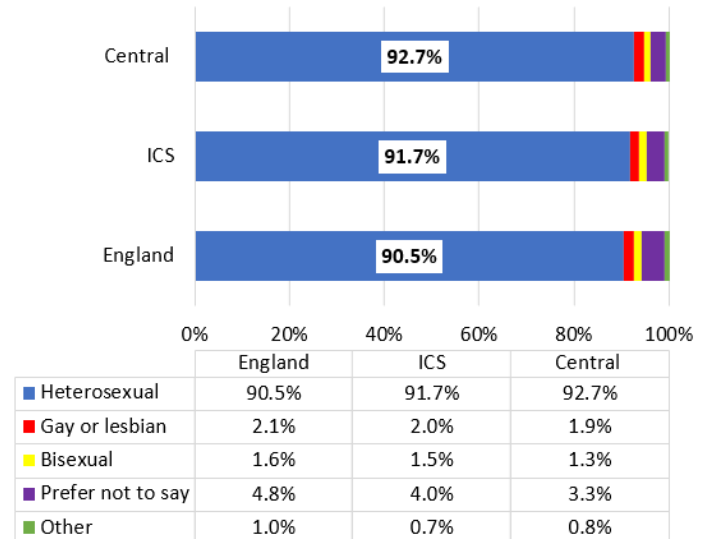
Gender identification and sexual orientation

Knowledge of a person's gender identification and sexual orientation can be important for effective provision of health care, screening and prevention services. There are health conditions that can disproportionately affect the LGBT+ population. For example, lesbians are more likely than heterosexual and bisexual women to be overweight and obese, increasing their risk for cardiovascular disease, type 2 diabetes and morbidity related to inactivity. Transgender patients may be at greater risk of cardiovascular disease due to cross-sex hormone use. The LGBT+ population can also experience poorer mental health compared to those who identify as heterosexual.[1]

Responses to 'What gender do you identify most closely with?' (GP Survey, Jul-21)*

	England	ICS	Central
Female	51.2%	51.1%	50.8%
Male	47.9%	48.1%	48.6%
Non-binary	0.0%	0.0%	0.0%
Prefer not to say	0.0%	0.3%	0.0%

*Figures will not sum due to rounding

Responses to 'What is your sexual orientation?' (GP Survey, Jul-21)*

	England	ICS	Central
Heterosexual	90.5%	91.7%	92.7%
Gay or lesbian	2.1%	2.0%	1.9%
Bisexual	1.6%	1.5%	1.3%
Prefer not to say	4.8%	4.0%	3.3%
Other	1.0%	0.7%	0.8%

Impact of Covid-19 on accessing health care

The Covid-19 pandemic has meant many people have avoided GPs and other health care settings. This may have a negative impact on **screening**, **diagnosis** and **treatment** of potentially serious health conditions. The GP Survey (Jul-21) asked 'At any time over the last 12 months, have you or someone you live with shielded at home due to being vulnerable to COVID-19 because of pre-existing health issues?'

The second question asked 'Have you, at any time in the last 12 months, avoided making a general practice appointment for any reason?' Please note, totals will not equal 100% as the survey allowed for the selection of more than one 'yes' response. The charts show the response for Central ICP, compared to England and the ICS.

	Yes, I have shielded	Yes, someone in my household	No, I have not shielded
England	16.9%	12.7%	73.7%
ICS	18.7%	13.6%	71.5%
Central	16.8%	11.4%	74.9%
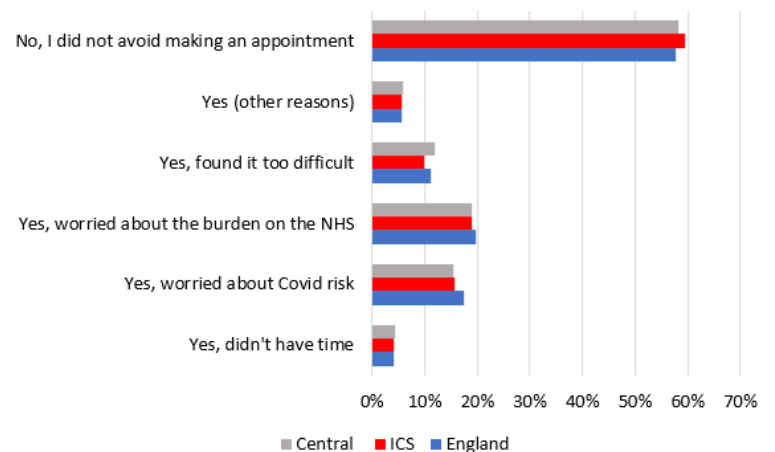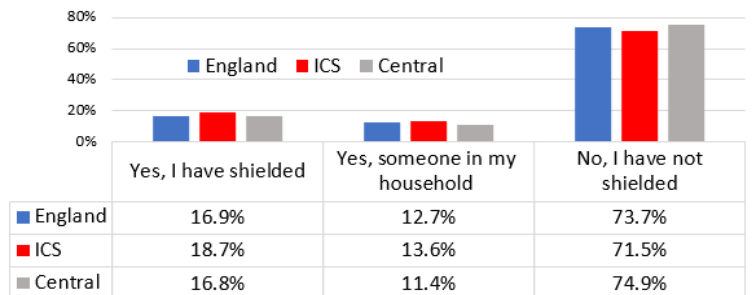
Data from the GP Survey July 2021 are based on the registered population (not resident). Data are weighted.

(1) Fenway Institute policy briefing 'Why gather data on sexual orientation and gender identity in clinical settings'. 2014.

Central Lancashire Integrated Care Partnership Profile

Indicator Name	Central Lancs ICP	Chorley	Preston	South Ribble	LSC ICS	England	Lowest in ICP	Highest in ICP
Percentage of the total resident population who are 65 and over	NA	20.0	14.7	21.5	NA	18.4	7.5	31.3
Percentage of the total resident population who are 25-64 years of age	NA	52.9	50.7	51.4	NA	51.8	43.0	60.9
Percentage of the total resident population who are 16-24 years of age	NA	8.7	14.1	8.9	NA	10.6	6.2	34.8
Percentage of the total resident population who are 0-15 years of age	NA	18.5	20.5	18.2	NA	19.2	10.4	26.3
Percentage of population whose ethnicity is not 'White UK'	NA	4.9	24.2	4.7	NA	20.2	1.9	60.9
Child Poverty, Income deprivation affecting children index (IDACI)	15.4	12.1	20.4	11.8	18.2	17.1	2.8	33.5
Unemployment (% of the working age population claiming out of work benefit)	NA	2.1	3.5	1.9	NA	2.8	0.5	6.4
Long-Term Unemployment- rate per 1,000 working age population	NA	1.8	3.3	1.5	NA	3.2	0.0	6.3
Older people living alone, % of people aged 65 and over who are living alone	31.1	29.6	34.2	29.5	31.8	31.5	17.0	49.1
Percentage of the total resident population aged 85 and over	NA	2.1	1.9	2.5	NA	2.5	0.7	4.3
Black and Minority Ethnic (BME) Population	NA	3.1	19.8	2.9	NA	14.6	1.2	56.0
Income deprivation, English Indices of Deprivation	12.2	10.2	16.2	9.1	14.7	12.9	3.5	29.6
Proficiency in English, % of people who cannot speak English well or at all	NA	0.4	2.4	0.4	NA	1.7	0.0	7.1
Index of Multiple Deprivation Score	NA	16.9	29.5	15.3	NA	21.7	5.2	53.1
Households with overcrowding based on overall room occupancy levels	5.0	3.8	7.5	3.0	4.9	8.7	0.6	17.6
Older people in poverty: Income deprivation affecting older people Index (IDAOPI)	13.6	11.7	19.4	10.0	15.0	14.2	4.8	44.2
Estimated percentage of households that experience fuel poverty, 2018	NA	10.0	13.4	9.3	NA	10.3	6.9	20.7
Percentage of the total resident population who are 0-4 years of age	NA	5.3	6.5	5.2	NA	5.9	2.7	9.4
Percentage of the total resident population who are 5-15 years of age	NA	13.1	13.9	13.0	NA	13.4	6.5	19.0
Percentage of the total resident population who are 50-64 years of age	NA	20.6	17.4	20.9	NA	19.0	11.2	27.6
Small area population density (persons/km^2)	NA	582.9	1005.9	980.8	NA	432.1	75.7	8145.7
General fertility rate: live births per 1,000 women aged 15-44 years. five year pooled	NA	59.1	61.7	59.1	NA	60.6	30.5	97.9
Low birth weight of live babies, five year pooled 2015-2019	7.4	6.2	8.7	6.6	7.8	6.9	2.7	12.4
Reception: Prevalence of obesity (including severe obesity), 3-years data combined	NA	9.0	10.1	8.5	NA	9.7	5.0	14.3
Reception: Prevalence of overweight (including obesity), 3-years data combined	NA	22.6	23.4	21.9	NA	22.6	14.8	35.7
Year 6: Prevalence of obesity (including severe obesity), 3-years data combined	NA	18.1	19.9	18.4	NA	20.4	8.3	29.2
Year 6: Prevalence of overweight (including obesity), 3-years data combined	NA	33.2	34.1	32.5	NA	34.6	21.1	47.4
Percentage of physically active children and young people	NA	50.1	42.1	57.2	NA	44.6	NA	NA
Deliveries to teenage mothers	NA	0.9	1.4	0.8	NA	0.7	0.0	3.4
Emergency hospital admissions for injuries in under 5 years old, crude rate	NA	18.6	21.1	19.5	NA	12.3	11.6	29.7
Emergency hospital admissions in under 5 years old, crude rate	NA	219.2	294.9	269.5	NA	162.1	139.1	397.9
A&E attendances aged under 5 years old, crude rate	NA	396.2	480.6	406.4	NA	642.5	246.5	555.0
Emergency hospital admissions for injuries in under 15 years old, crude rate	NA	137.8	147.4	137.1	NA	97.8	79.7	227.1
Emergency hospital admissions for injuries in 15-24 years old, crude rate	NA	118.8	101.3	112.7	NA	132.1	43.0	315.6
Smoking prevalence at age 15 - regular smokers (modelled estimates)	NA	5.7	5.7	5.7	NA	5.4	2.7	10.5
Smoking prevalence at age 15 - regular or occasional smokers (modelled estimates)	NA	9.0	9.0	9.0	NA	8.2	5.2	14.3
Emergency hospital admissions for all causes, all ages, standardised admission ratio	110.5	101.5	123.9	103.9	109.0	100.0	69.8	152.4
Emergency hospital admissions for coronary heart disease, standardised admission ratio	130.8	127.3	149.7	115.7	123.9	100.0	58.4	281.1
Emergency hospital admissions for stroke, standardised admission ratio	102.2	97.9	112.4	96.4	102.2	100.0	40.6	165.6
Emergency hospital admissions for Myocardial Infarction (heart attack), standardised admission ratio	116.7	120.1	124.8	105.4	121.8	100.0	48.1	230.0
Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD), standardised admission ratio	109.4	98.8	137.6	93.1	125.4	100.0	22.6	282.3
Incidence of all cancers, standardised incidence ratio	101.6	100.5	106.3	98.0	100.6	100.0	82.1	134.7
Incidence of breast cancer, standardised incidence ratio	95.9	109.3	95.5	83.1	96.6	100.0	44.6	154.4
Incidence of colorectal cancer, standardised incidence ratio	102.7	101.3	105.2	101.6	99.2	100.0	55.4	172.0
Incidence of lung cancer, standardised incidence ratio	108.8	102.0	123.2	101.8	108.9	100.0	32.7	241.3
Incidence of prostate cancer, standardised incidence ratio	91.9	88.7	94.5	92.7	87.2	100.0	51.2	163.5
Hospital stays for self harm, standardised admission ratio	102.2	107.8	105.9	90.9	123.6	100.0	39.9	236.0
Emergency hospital admissions for hip fracture in persons 65 years and over, standardised admission ratio	98.4	95.1	108.0	92.6	101.2	100.0	35.9	151.4
Percentage of people who reported having a limiting long-term illness or disability	18.2	18.4	18.2	18.0	20.7	17.6	12.9	22.9
Infant mortality	NA	2.7	4.2	2.6	NA	3.9	NA	NA
Deaths from all causes, all ages, standardised mortality ratio	107.6	108.8	118.8	95.7	110.3	100.0	61.2	162.3
Deaths from all causes, under 75 years, standardised mortality ratio	109.2	103.6	130.2	94.3	115.5	100.0	39.3	209.1
Deaths from all cancer, all ages, standardised mortality ratio	101.1	99.5	108.8	95.1	103.4	100.0	59.3	161.7
Deaths from all cancer, under 75 years, standardised mortality ratio (SMR)	100.2	97.7	112.9	90.8	105.2	100.0	48.5	178.9
Deaths from circulatory disease, all ages, standardised mortality ratio	108.4	109.2	119.6	97.1	110.1	100.0	65.6	172.2
Deaths from circulatory disease, under 75 years, standardised mortality ratio	110.1	100.9	133.5	97.2	118.8	100.0	22.4	237.7
Deaths from coronary heart disease, all ages, standardised mortality ratio	113.3	117.5	124.7	98.4	119.2	100.0	55.4	197.9
Deaths from stroke, all ages, standardised mortality ratio	105.1	107.0	117.9	91.1	109.9	100.0	51.3	309.5
Deaths from respiratory diseases, all ages, standardised mortality ratio	126.6	120.5	154.1	106.3	121.8	100.0	52.9	219.3
Life expectancy at birth, (upper age band 90+)-males	NA	79.0	77.7	80.1	NA	79.7	73.5	84.8
Life expectancy at birth, (upper age band 90+)-females	NA	82.3	81.0	83.6	NA	83.2	77.8	91.2
Deaths from causes considered preventable, under 75 years, standardised mortality ratio	114.4	106.5	138.8	98.2	122.2	100.0	39.3	245.6

Benchmarked with England: Lower | Higher | Worse | Similar | Better | Not available | Not compared

All indicators from: Office for Health Improvement and Disparities Local Health profiles

See page seven for details of units/time periods covered by each indicator.

*ICP value based on aggregated local authority values

Central Lancashire Integrated Care Partnership Profile

Gaps in life expectancy

Many factors can contribute to the gap in life expectancy (LE). Further analysis can help to identify where these gaps are and provide direction on action to reduce them.

The table below shows life expectancy (2018-20) overall and the gap in life expectancy between the ICP and England, and within the ICP districts (for deprivation) (2017-19).

In the ICP, for males life expectancy at birth is significantly worse in Preston, similar in Chorley and South Ribble. For females, it is worse in Chorley and Preston, similar in South Ribble.

Local authority	Absolute gap in life expectancy between local authority and England (years)	Life expectancy (years)-local authority (2018-20)	Life expectancy (years)-England (2018-20)	Difference in life expectancy between most and least deprived quintile (years) (2017-2019)	Life expectancy in most deprived quintile of local authority (years) (2017-2019)	Life expectancy in least deprived quintile of local authority (years) (2017-2019)
Males						
Chorley	-0.5	78.9	79.4	10.4	73.0	83.0
Preston	-2.7	76.7	79.4	11.1	73.7	84.2
South Ribble	0.5	79.9	79.4	7.6	76.2	84.0
Females						
Chorley	-1.2	81.9	83.1	10.3	79.5	90.6
Preston	-2.6	80.5	83.1	8.0	78.9	86.8
South Ribble	0.6	83.7	83.1	4.9	80.3	85.6

Worse	Similar	Better

Top six causes contributing to the gap in life expectancy

When looking at the LE (above) in more detail, the table (right) shows the top six causes of death contributing to the gap in life expectancy between the most and least deprived areas in the ICP for males and females.

For comparison, the top six causes for the ICP and for England are also provided.

The Office for Health Improvement and Disparities (formerly Public Health England) has a segment tool, which provides information on the causes of death which are driving inequalities in life expectancy at local area level.

Targeting the causes of death which contribute most to the life expectancy gap should have the biggest impact on reducing inequalities.

Central

Male	Female
Heart disease	Chronic lower respiratory diseases
Other cancer	Heart disease
Lung cancer	Dementia & Alzheimer's disease
Chronic lower respiratory diseases	Lung cancer
Other circulatory	Other cancer
Cirrhosis & liver disease	Other

L&SC ICS

Male	Female
Heart disease	Chronic lower respiratory diseases
Other	Heart disease
Chronic lower respiratory diseases	Other cancer
Cirrhosis & liver disease	Lung cancer
Accidental poisoning	Other
Lung cancer	Other circulatory

England

Male	Female
Heart disease	Chronic lower respiratory diseases
Other	Lung cancer
Chronic lower respiratory diseases	Heart disease
Lung cancer	Other
Other cancer	Other cancer
Other circulatory	Dementia & Alzheimer's disease

See page seven for the ICD-10 broad/detailed causes of death

For further information, please contact: businessintelligence.publichealth@lancashire.gov.uk

Please see our Lancashire Insight pages for additional intelligence and data.

Indicators & death classification

All indicators below from: [Office for Health Improvement and Disparities Local Health profiles](#)

Indicator name	Unit	Period
Percentage of the total resident population who are 65 and over	%	2019
Percentage of the total resident population who are 25-64 years of age	%	2019
Percentage of the total resident population who are 16-24 years of age	%	2019
Percentage of the total resident population who are 0-15 years of age	%	2019
Percentage of population whose ethnicity is not 'White UK'	%	2011
Child Poverty, Income deprivation affecting children index (IDACI)	%	2019
Unemployment (% of the working age population claiming out of work benefit)	%	2019/20
Long-Term Unemployment- rate per 1,000 working age population	per 1,000	2019/20
Older people living alone, % of people aged 65 and over who are living alone	%	2011
Percentage of the total resident population aged 85 and over	%	2019
Black and Minority Ethnic (BME) Population	%	2011
Income deprivation, English Indices of Deprivation	%	2019
Proficiency in English, % of people who cannot speak English well or at all	%	2011
Index of Multiple Deprivation Score	Score	2019
Households with overcrowding based on overall room occupancy levels	%	2011
Older people in poverty: Income deprivation affecting older people Index (IDAOPI)	%	2019
Estimated percentage of households that experience fuel poverty, 2018	%	2018
Percentage of the total resident population who are 0-4 years of age	%	2019
Percentage of the total resident population who are 5-15 years of age	%	2019
Percentage of the total resident population who are 50-64 years of age	%	2019
Small area population density (persons/km2)	persons/km2	2019
General fertility rate: live births per 1,000 women aged 15-44 years. five year pooled	per 1,000	2015-2019
Low birth weight of live babies, five year pooled 2015-2019	%	2015-2019
Reception: Prevalence of obesity (including severe obesity), 3-years data combined	%	2017/18-2019/20
Reception: Prevalence of overweight (including obesity), 3-years data combined	%	2017/18-2019/20
Year 6: Prevalence of obesity (including severe obesity), 3-years data combined	%	2017/18-2019/20
Year 6: Prevalence of overweight (including obesity), 3-years data combined	%	2017/18-2019/20
Deliveries to teenage mothers	%	2015/16-2019/20
Emergency hospital admissions for injuries in under 5 years old, crude rate	per 10,000	2015/16-2019/20
Emergency hospital admissions in under 5 years old, crude rate	per 1,000	2017/18-2019/20
A&E attendances aged under 5 years old, crude rate	per 1,000	2017/18-2019/20
Emergency hospital admissions for injuries in under 15 years old, crude rate	per 10,000	2015/16-2019/20
Emergency hospital admissions for injuries in 15-24 years old, crude rate	per 10,000	2015/16-2019/20
Smoking prevalence at age 15 - regular smokers (modelled estimates)	%	2014
Smoking prevalence at age 15 - regular or occasional smokers (modelled estimates)	%	2014
Emergency hospital admissions for all causes, all ages, standardised admission ratio (SAR)	per 100	2015/16-2019/20
Emergency hospital admissions for coronary heart disease, SAR	per 100	2015/16-2019/20
Emergency hospital admissions for stroke, SAR	per 100	2015/16-2019/20
Emergency hospital admissions for Myocardial Infarction (heart attack), SAR	per 100	2015/16-2019/20
Emergency hospital admissions for chronic obstructive pulmonary disease, SAR	per 100	2015/16-2019/20
Incidence of all cancers, standardised incidence ratio (SIR)	per 100	2014-2018
Incidence of breast cancer, SIR	per 100	2014-2018
Incidence of colorectal cancer, SIR	per 100	2014-2018
Incidence of lung cancer, SIR	per 100	2014-2018
Incidence of prostate cancer, SIR	per 100	2014-2018
Hospital stays for self harm, SAR	per 100	2015/16-2019/20
Emergency hospital admissions for hip fracture in persons 65 years and over, SAR	per 100	2015/16-2019/20
Percentage of people who reported having a limiting long-term illness or disability	%	2011
Deaths from all causes, all ages, standardised mortality ratio (SMR)	per 100	2015-2019
Deaths from all causes, under 75 years, SMR	per 100	2015-2019
Deaths from all cancer, all ages, SMR	per 100	2015-2019
Deaths from all cancer, under 75 years, SMR	per 100	2015-2019
Deaths from circulatory disease, all ages, SMR	per 100	2015-2019
Deaths from circulatory disease, under 75 years, SMR	per 100	2015-2019
Deaths from coronary heart disease, all ages, SMR	per 100	2015-2019
Deaths from stroke, all ages, SMR	per 100	2015-2019
Deaths from respiratory diseases, all ages, SMR	per 100	2015-2019
Life expectancy at birth, (upper age band 90+)-males	Years	2015-2019
Life expectancy at birth, (upper age band 90+)-females	Years	2015-2019
Deaths from causes considered preventable, under 75 years, SMR	per 100	2015-2019

[International Statistical Classification of Diseases and Related Health Problems 10th Revision](#) (ICD-10)

Broad cause	ICD 10 code	Detailed cause	ICD10 code
Circulatory	I00-I99	Heart disease	I20-I25
		Stroke	I60-I69
		Other circulatory	Rest of I00-I99
Cancer	C00-C97	Lung cancer	C33-C34
		Prostate cancer	C61
		Colorectal cancer	C18-C21
		Leukaemia & lymphoma	C81-C96
		Breast cancer	C50
		Other cancer	Rest of C00-C97
Mental and behavioural	F00-F99, G30	Dementia and Alzheimer's disease	F01, F03, G30
		Other mental and behavioural	Rest of F00-F99
Respiratory	J00-J99	Chronic lower respiratory diseases	J40-J47
		Influenza and pneumonia	J09-J18
		Other respiratory	Rest of J00-J99
Digestive	K00-K93	Cirrhosis and other diseases of liver	K70-K76
		Other digestive	Rest of K00-K93
External causes	V00-Y98	Land transport accidents	V01-V89
		Accidental poisoning	X40-X49
		Suicide and injury of undetermined intent	X60-X84 (age 10+), Y10-Y34 (age 15+)
		Other external causes	Rest of V00-Y98
Under 28 days	No code assigned	Under 28 days	No code assigned
Other	All other codes	Urinary disease	N00-N39
		Other	All other codes