Integrated Care System
Nottingham & Nottinghamshire

PRIMARY CARE NETWORKS
HEALTH AND CARE PROFILE
Version 1.5

BACHS PCN

Prepared by Nottinghamshire County Council and Nottingham City Council, Public Health Intelligence

Purpose of this profile

- These profiles are a detailed view covering the various aspects of the health, wellbeing and social care of the different Primary Care Networks (PCNs)

- They are intended to help inform the needs of the local population, to assist and support the planning of local services

- They will allow organisations and teams working in PCNs to develop tailored approaches to engagement and communications and understand issues unique to each population

- The intention is that they are conversation starters for local government, health and social services and the community

What does this profile reveal about this PCN

- This PCN is responsible for 15% of the registered patients in Nottingham City ICP.

- The population age structure differs from the ICP population in having a higher proportion of children and older people and fewer young adults; it is ethnically diverse and experiences significant levels of deprivation.

- Life Expectancy and Healthy Life Expectancy are lower than England; on average, health may begin to decline around age 56.

- Prevalence of some chronic long term conditions are higher than nationally, as are obesity and smoking prevalence.

- Primary care (as measured by QOF) is generally as good as England though worse in some disease areas such as diabetes and heart disease.

- Vaccination uptake rates are poor.
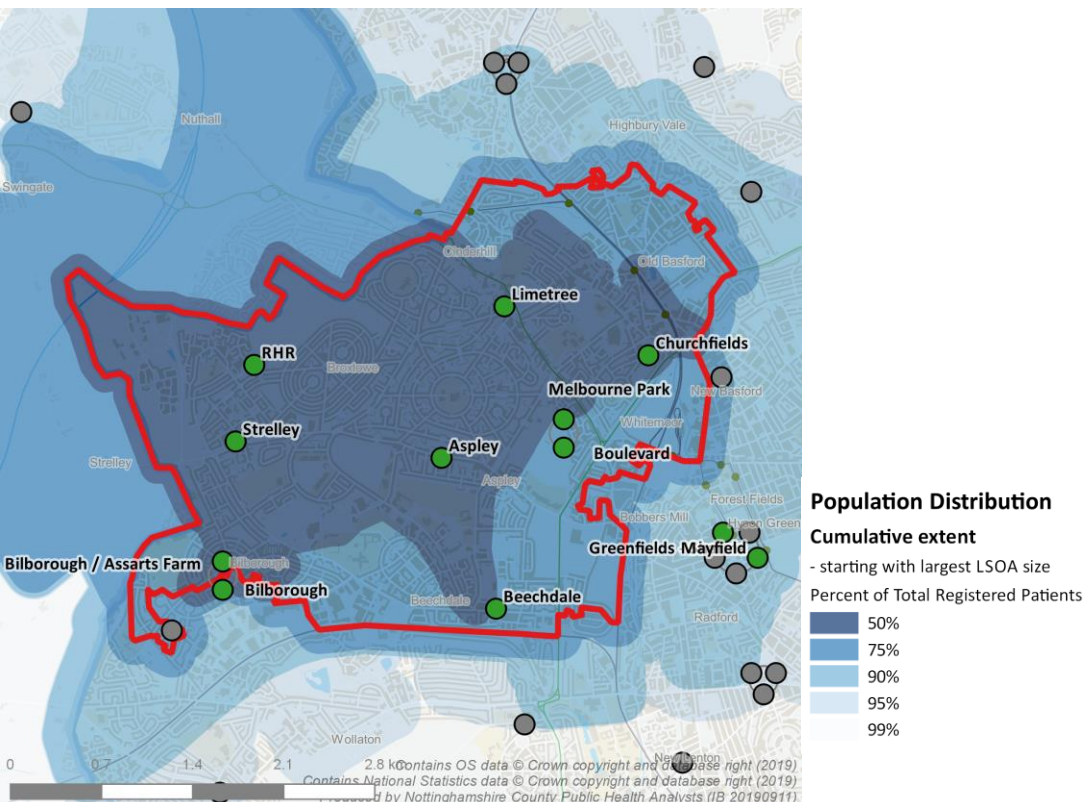
Quick statistics for this PCN

- There are a total of 59,160 patients registered with practices in this PCN. Of these, 69% live within the nominal PCN boundary.

- 72% of the population resident within the PCN boundary are registered with its GP practices.

- Compared to the ICP as a whole, the PCN has a higher proportion of children under 15 and older people. The proportion of young adults is lower as there are few students living in this area.

- 3.6% of the population provide 50 hours or more of unpaid care each week, higher than the ICP and England average.

- BME groups form 26% of the resident population, similar to the ICP and higher than England.

- Asian, Black and Mixed ethnic groups form the predominant BME groups in the area.

- 8.2% of people rate their health as 'bad' or 'very bad, higher than the ICP and England average.

- The area is more deprived than the ICP, with 76% of the population living in areas defined as the most deprived 20% in England.

- Just 43% of school children achieve five A* - C grade GCSEs; lower than the England average (56.6%).

- Adults accessing long-term community support is higher than England.

- Incidence of all cancers is low and lung cancer is high compared to England.

- All-age death rates for all causes and selected causes are higher than England.

- The death rate from all causes and selected causes among people aged under 75 is higher than than England.
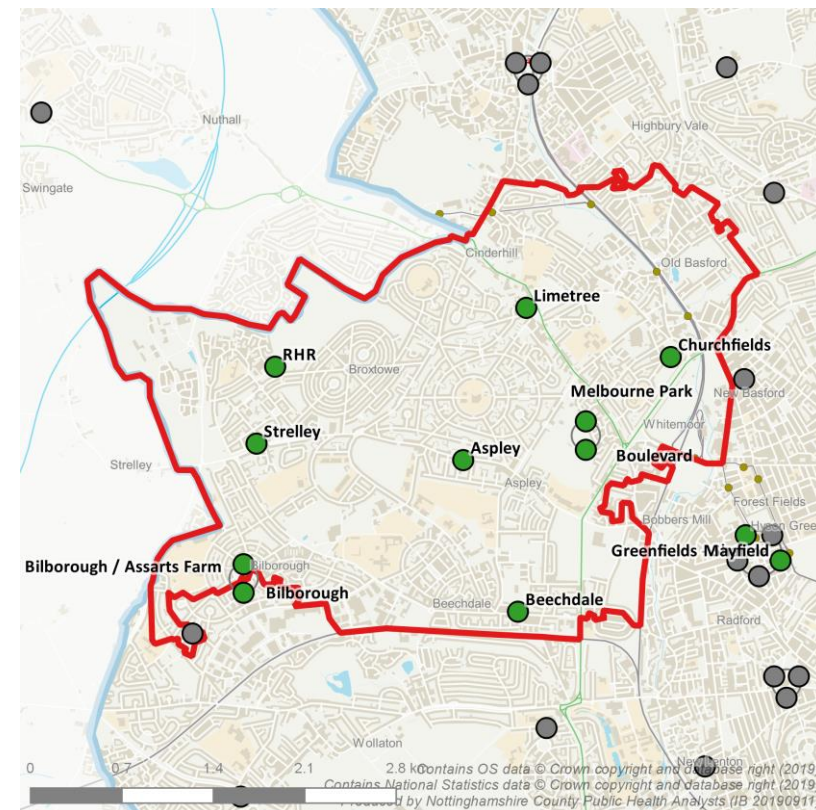
This PCN boundary covers Aspley ward and parts of Bilborough, Leen Valley and Basford wards to the west of the City.

- There are 12 GP practices in this PCN (shown in green); three outside the nominal boundary.

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Nottingham & Nottinghamshire

BACHS PCN

Patient population density

Population Distribution

Cumulative extent
- starting with largest LSOA size
Percent of Total Registered Patients
- 50%
- 75%
- 90%
- 95%
- 99%

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Contains National Statistics data © Crown copyright and database right (2019)
Produced by Nottinghamshire County Public Health Analysts (IB 20190911)

This PCN boundary covers Aspley ward and parts of Bilborough, Leen Valley and Basford wards to the west of the City.

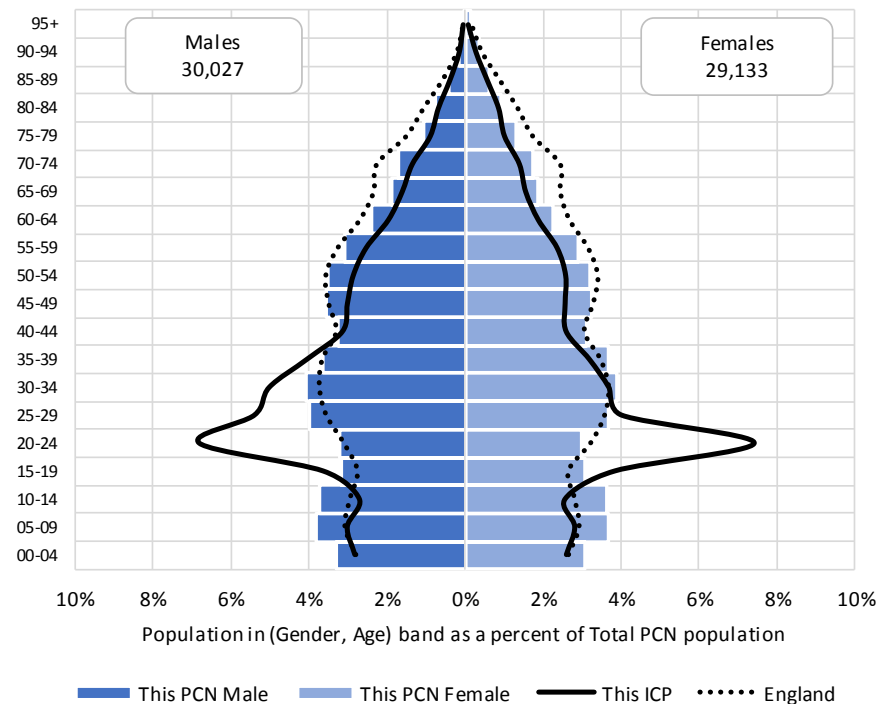- There are 12 GP practices in this PCN (shown in green); three outside the nominal boundary.

- 69% of patients registered with the practices live within the boundary.

- 72% of people resident within the boundary area are registered with PCN practices.

Patient population pyramid

Males 30,027

Females 29,133

Population in (Gender, Age) band as a percent of Total PCN population

This PCN Male — This PCN Female — This ICP ····· England

Source: NHS Digital 'Patients registered at GP practices' (April 2019 extract)

This chart shows the April 2019 GP registered population for the PCN, ICP and England.

- There are a total of 59,160 patients registered with the GP practices

- Overall, the population profile shows a higher proportion of children than the ICP and England and a higher proportion of older people.

- The proportion of young adults is much lower as there are few students.

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Deprivation (Income Domain)
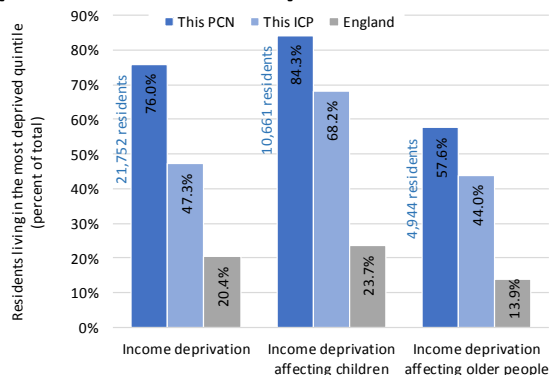
Source: MHCLG Indices of Income Deprivation (2019) (including ONS Population Estimates 2015), ICP spatial boundary, locally agreed PCN spatial boundaries
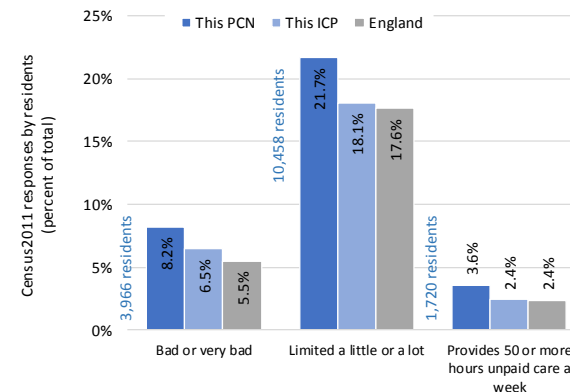
- 84.3% of children in this PCN are living in areas defined as the most deprived 20% in England.
- This is higher than for the ICP and England.

Deprivation (Index of Multiple Deprivation)
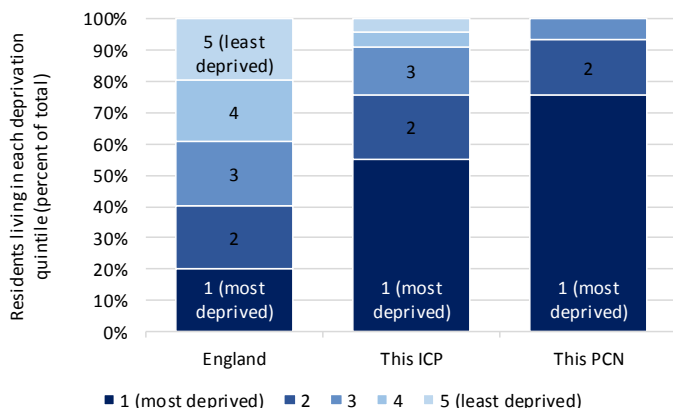
Source: MHCLG Index of Multiple Deprivation (IMD) (2019) (including ONS Population Estimates 2015), ICP spatial boundary, locally agreed PCN spatial boundaries

Self reported health and care

Source: Census2011 tables, ICP spatial boundary, locally agreed PCN spatial boundaries

- Compared to the ICP and England, higher proportions of this PCN population report that their health is bad or very bad, or that their daily activities are limited by health or disability.

Ethnicity
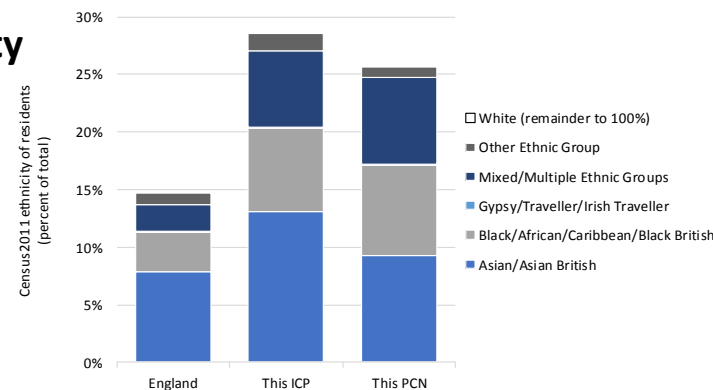
Source: Census2011 tables, ICP spatial boundary, locally agreed PCN spatial boundaries
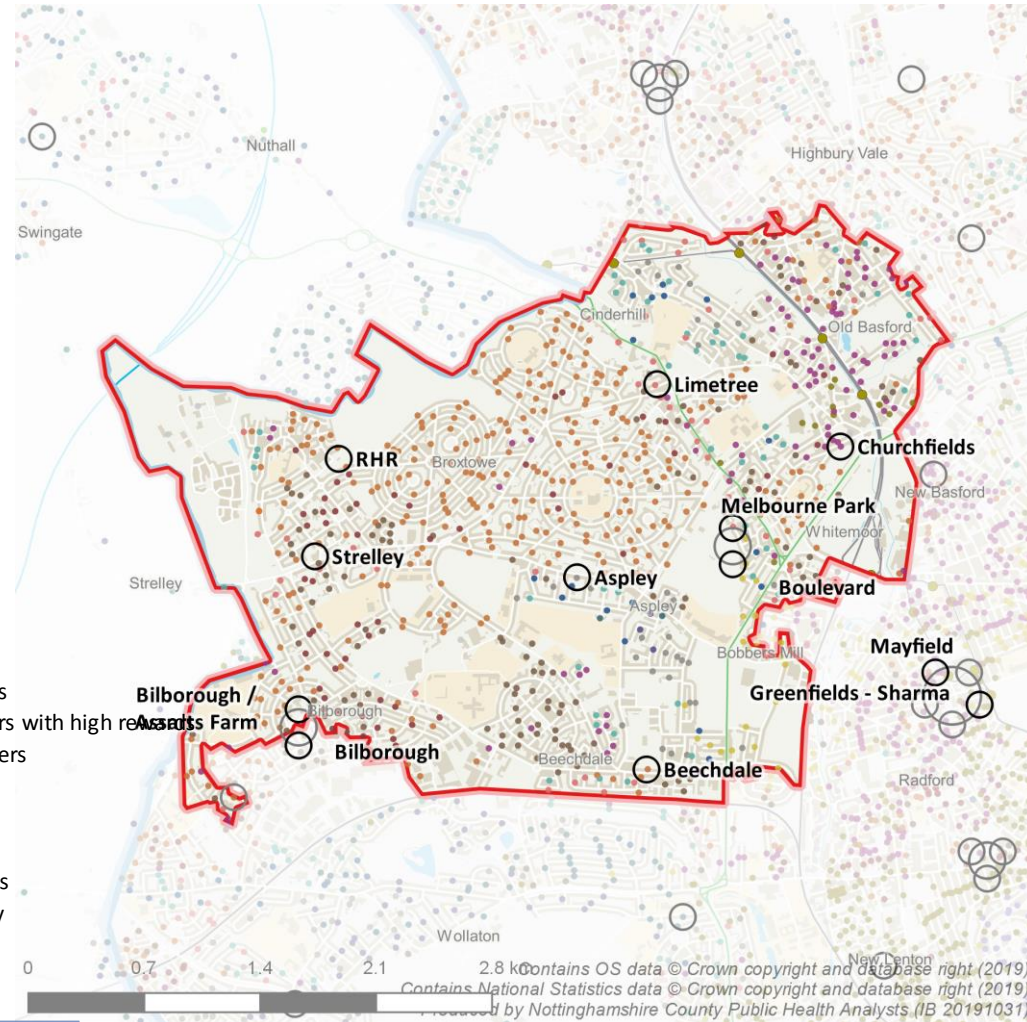
- 25.6% of the resident population is from a BME background.
- This is similar to the ICP and higher than England.

Mosaic population groups

Mosaic groups are a way to segment the population into 15 groups based on their common characteristics

○ The predominant group is Group M; families with limited resources who may struggle to make ends meet. They tend to live in Aspley, Broxtowe and Bilborough.

○ Together with groups N and O these groups make up 69% of the population and are likely to have significant health needs. These groups tend to live in Bilborough and Beechdale.

Percent		Group Type Name	One Line Description
0.0%	A	Country Living	Well-off owners in rural locations enjoying the benefits of country life
0.3%	B	Prestige Positions	Established families in large detached homes living upmarket lifestyles
0.0%	C	City Prosperity	High status city dwellers living in central locations and pursuing careers with high rewards
0.1%	D	Domestic Success	Thriving families who are busy bringing up children and following careers
2.3%	E	Suburban Stability	Mature suburban owners living settled lives in mid-range housing
4.2%	F	Senior Security	Elderly people with assets who are enjoying a comfortable retirement
0.0%	G	Rural Reality	Householders living in inexpensive homes in village communities
5.9%	H	Aspiring Homemakers	Younger households settling down in housing priced within their means
3.4%	I	Urban Cohesion	Residents of settled urban communities with a strong sense of identity
1.1%	J	Rental Hubs	Educated young people privately renting in urban neighbourhoods
4.9%	K	Modest Traditions	Mature homeowners of value homes enjoying stable lifestyles
9.0%	L	Transient Renters	Single people privately renting low cost homes for the short term
49.1%	M	**Family Basics**	**Families with limited resources who have to budget to make ends meet**
12.2%	N	**Vintage Value**	**Elderly people reliant on support to meet financial or practical needs**
7.4%	O	Municipal Challenge	Urban renters of social housing facing an array of challenges

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Contains National Statistics data © Crown copyright and database right (2019)
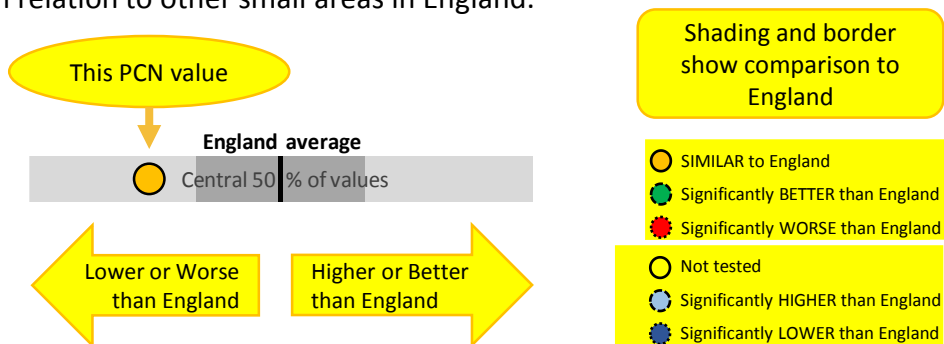Produced by Nottinghamshire County Public Health Analysts (IB 20191031)

Public Health England Local Health Indicators

Local Health is a collection of health information to help understand the health and wider determinants of health of populations in small geographical areas.

Local Health contains indicators relate to Population and demographic factors, Wider determinants of health and Health outcomes and are split across four domains:

- Our Community
- Behavioural risk factor and child health
- Disease and poor health
- Life expectancy and causes of death

Values for PCNs are estimated using the small area data and are compared to the overall England value. The spine chart shows how these values vary in relation to other small areas in England.

This PCN value

England average

Central 50 % of values

Lower or Worse than England

Higher or Better than England

Shading and border show comparison to England

○ SIMILAR to England
● Significantly BETTER than England
● Significantly WORSE than England

○ Not tested
● Significantly HIGHER than England
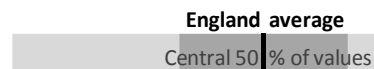● Significantly LOWER than England

These indicators are based on resident populations which should not differ greatly from the registered population unless the registered population has a wide spatial distribution.

Features to note for this PCN

- Life expectancy at birth for Females is higher than for Males
    - Life expectancy for Males in 2013-17 was 76.4 years
    - … and for Females was 80.5 years
- Females live in poor health for longer than Males
    - The gap between Life expectancy and Healthy life expectancy in 2009-13 was 20.8 years for Males
    - … and 25.2 years for Females
- Life Expectancy and Healthy Life Expectancy are lower than England for both men and women.
- Generally, the population is very deprived and in poor health; local health indicators are generally worse than the England averages.
- Areas where this PCN fares better or as well as England despite higher levels of deprivation include:
    - A&E attendances and admissions for injuries for children
    - Smoking prevalence at age 15
    - Incidence of breast, prostate and colorectal cancer
    - Emergency admissions for hip fracture in older people

Public Health England Local Health Indicators
Our Community

England average

Central 50 % of values

- 🟡 SIMILAR to England
- 🟢 Significantly BETTER than England
- 🔴 Significantly WORSE than England
- ⚪ Not tested
- 🔵 Significantly HIGHER than England
- 🔵 Significantly LOWER than England

Indicator	Sex	PCN value	England value	England Lowest or Worst	England range	England Highest or Best	Units	To be Better value should be …	Period
Percentage of the total resident population who are 0-15 years of age	Persons	25.6	19.1	11.9		27.5	Proportion, %	-	2017
Percentage of the total resident population who are 16-24 years of age	Persons	12.2	10.9	6.8		24.0	Proportion, %	-	2017
Percentage of the total resident population who are 25-64 years of age	Persons	49.7	51.9	43.3		62.7	Proportion, %	-	2017
Percentage of the total resident population who are 65 and over	Persons	12.5	18.0	6.7		32.2	Proportion, %	-	2017
Percentage of the total resident population aged 85 and over	Persons	1.7	2.4	0.7		5.2	Proportion, %	-	2017
Black and Minority Ethnic (BME) Population	Persons	26.1	14.6	1.0		67.9	Proportion, %	-	2011
Percentage of population whose ethnicity is not 'White UK'	Persons	30.5	20.2	2.3		79.7	Proportion, %	-	2011
Proficiency in English, % of people who cannot speak English well or at all	Persons	2.1	1.7	0.1		9.6	Proportion, %	-	2011
Index of Multiple Deprivation Score 2015, IMD	Persons	48.5	21.8	54.3		4.9	Score, Score	Lower is better	2015
Income deprivation, English Indices of Deprivation 2015	Persons	32.0	14.6	35.6		3.9	Proportion, %	Lower is better	2015
Child Poverty, English Indices of Deprivation 2015, IDACI	Persons	41.8	19.9	44.7		4.0	Proportion, %	Lower is better	2015
Child Development at age 5 (%)	Persons	42.2	60.4	40.0		80.5	Proportion, %	Higher is better	2013/14
GCSE Achievement (5A*-C including English & Maths)	Persons	43.2	56.6	31.7		82.3	Proportion, %	Higher is better	2013/14
Unemployment (% of the working age population claiming out of work benefit)	Persons	4.0	1.9	5.8		0.4	Proportion, %	Lower is better	2017/18
Long-Term Unemployment- rate per 1,000 working age population	Persons	12.2	3.6	14.9		0.0	Crude rate per 1,000	Lower is better	2017/18
Fuel poverty	Not applicable	15.7	11.1	20.6		6.2	Proportion, %	Lower is better	2016
Percentage of households in Poverty	Not applicable	31.5	21.1	42.6		10.6	Proportion, %	Lower is better	2013/14
Older people living alone, % of people aged 65 and over who are living alone	Persons	39.0	31.5	47.9		21.6	Proportion, %	Lower is better	2011
Older People in Deprivation, English Indices of Deprivation 2015, IDAOPI	Persons	30.6	16.2	46.3		5.4	Proportion, %	Lower is better	2015

Public Health England Local Health Indicators
Behavioural risk factors and child health

England average — Central 50 % of values

- 🟡 SIMILAR to England
- 🟢 Significantly BETTER than England
- 🔴 Significantly WORSE than England
- ⚪ Not tested
- 🔵 Significantly HIGHER than England
- 🔵 Significantly LOWER than England

Indicator	Sex	PCN value	England value	England Lowest or Worst	England range	England Highest or Best	Units	To be Better value should be …	Period
Deliveries to teenage mothers, five year aggregate	Female	2.3	1.1	3.8		0.0	Proportion, %	Lower is better	2011/12 - 15/16
Crude fertility rate: live births per 1,000 women aged 15-44 years. five year aggregate	Female	77.8	63.2	37.3		91.3	Crude rate per 1,000	-	2011 - 15
Low birth weight of term babies, five year aggregate	Persons	3.7	2.8	5.3		1.1	Proportion, %	Lower is better	2011 - 15
Emergency admissions aged under 5 years old, three year average	Persons	103.9	149.2	268.9		63.7	Crude rate per 1,000	Lower is better	2013/14 - 15/16
A&E attendances in under 5 years old, three year average	Persons	618.1	551.6	1,093.2		249.8	Crude rate per 1,000	Lower is better	2013/14 - 15/16
Admissions for injuries in under 5 years old, five year aggregate	Persons	122.1	138.8	264.6		63.1	Crude rate per 10,000	Lower is better	2011/12 - 15/16
Admissions for injuries in under 15 years old, five year aggregate	Persons	98.6	110.1	188.8		59.8	Crude rate per 10,000	Lower is better	2011/12 - 15/16
Admissions for injuries in 15-24 years old, five year aggregate	Persons	165.7	137.0	262.9		62.4	Crude rate per 10,000	Lower is better	2011/12 - 15/16
Obese children Reception Year, three year average	Persons	13.6	9.5	15.3		4.1	Proportion, %	Lower is better	2015/16 - 17/18
Children with excess weight Reception Year, three year average	Persons	27.9	22.4	31.0		13.4	Proportion, %	Lower is better	2015/16 - 17/18
Obese children Year 6, three year average	Persons	25.6	20.0	30.2		8.8	Proportion, %	Lower is better	2015/16 - 17/18
Children with excess weight Year 6, three year average	Persons	39.9	34.2	45.8		20.0	Proportion, %	Lower is better	2015/16 - 17/18
Smoking prevalence at age 15 - regular smokers (modelled estimates)	Persons	6.2	5.4	11.3		1.8	Proportion, %	Lower is better	2014
Smoking prevalence at age 15 - regular or occasional smokers (modelled estimates)	Persons	7.9	8.2	14.2		3.7	Proportion, %	Lower is better	2014

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Nottingham & Nottinghamshire

Public Health England Local Health Indicators
Disease and poor health

England average
Central 50 % of values

○ SIMILAR to England   ○ Not tested
● Significantly BETTER than England   ◉ Significantly HIGHER than England
● Significantly WORSE than England   ◉ Significantly LOWER than England

Indicator	Sex	PCN value	England value	England Lowest or Worst	England range	England Highest or Best	Units	To be Better value should be …	Period
Emergency hospital admissions for all causes, all ages, standardised admission ratio	Persons	114.6	100.0	159.0		64.9	ISR per 100	Lower is better	2013/14 - 17/18
Emergency hospital admissions for coronary heart disease, standardised admission ratio	Persons	117.1	100.0	196.3		51.6	ISR per 100	Lower is better	2013/14 - 17/18
Emergency hospital admissions for stroke, standardised admission ratio	Persons	113.0	100.0	163.7		61.6	ISR per 100	Lower is better	2013/14 - 17/18
Emergency hospital admissions for Myocardial Infarction (heart attack), standardised admission ratio	Persons	116.0	100.0	192.9		49.7	ISR per 100	Lower is better	2013/14 - 17/18
Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD), standardised admission ratio	Persons	215.6	100.0	295.5		27.0	ISR per 100	Lower is better	2013/14 - 17/18
Incidences of all cancers, standardised incidence ratio	Persons	102.8	100.0	124.8		80.1	ISR per 100	Lower is better	2012 - 16
Incidence of breast cancer, standardised incidence ratio	Female	89.2	100.0	140.6		60.4	ISR per 100	Lower is better	2012 - 16
Incidence of colorectal cancer, standardised incidence ratio	Persons	109.4	100.0	146.6		59.1	ISR per 100	Lower is better	2012 - 16
Incidence of lung cancer, standardised incidence ratio	Persons	146.7	100.0	224.8		43.8	ISR per 100	Lower is better	2012 - 16
Incidence of prostate cancer, standardised incidence ratio	Male	83.3	100.0	153.2		54.5	ISR per 100	Lower is better	2012 - 16
Hospital stays for self harm, standardised admission ratio	Persons	139.6	100.0	245.4		26.4	ISR per 100	Lower is better	2013/14 - 17/18
Hospital stays for alcohol-related harm (Narrow definition), standardised admission ratio	Persons	135.2	100.0	180.5		55.6	ISR per 100	Lower is better	2013/14 - 17/18
Hospital stays for alcohol-related harm (Broad definition), standardised admission ratio	Persons	123.6	100.0	175.4		58.2	ISR per 100	Lower is better	2013/14 - 17/18
Emergency hospital admissions for hip fracture in persons 65 years and over, standardised admission ratio	Persons	82.6	100.0	162.6		56.3	ISR per 100	Lower is better	2013/14 - 17/18
Percentage of people who reported having a limiting long-term illness or disability	Persons	21.6	17.6	26.8		10.0	Proportion, %	Lower is better	2011
Back pain prevalence in people of all ages	Persons	16.7	16.9	20.7		12.4	Crude rate, %	Lower is better	2012
Severe back pain prevalence in people of all ages	Persons	11.2	10.2	13.5		6.8	Crude rate, %	Lower is better	2012

Disease and poor health

BACHS PCN

Public Health England Local Health Indicators
Life expectancy and cause of death

England average — Central 50 % of values

- 🟡 SIMILAR to England
- 🟢 Significantly BETTER than England
- 🔴 Significantly WORSE than England
- ⚪ Not tested
- 🔵 Significantly HIGHER than England
- 🔵 Significantly LOWER than England

Indicator	Sex	PCN value	England value	England Lowest or Worst	England range	England Highest or Best	Units	To be Better value should be …	Period
Life expectancy at birth, (upper age band 90+)	Male	76.4	79.5	73.2		84.3	Life expectancy, Years	Higher is better	2013 - 17
Life expectancy at birth, (upper age band 90+)	Female	80.5	83.1	77.8		88.5	Life expectancy, Years	Higher is better	2013 - 17
Deaths from all causes, all ages, standardised mortality ratio	Persons	127.5	100.0	163.7		65.7	ISR per 100	Lower is better	2013 - 17
Deaths from all causes, under 75 years, standardised mortality ratio	Persons	151.1	100.0	188.0		55.8	ISR per 100	Lower is better	2013 - 17
Deaths from all cancer, all ages, standardised mortality ratio	Persons	124.9	100.0	150.2		69.5	ISR per 100	Lower is better	2013 - 17
Deaths from all cancer, under 75 years, standardised mortality ratio	Persons	129.5	100.0	166.6		59.5	ISR per 100	Lower is better	2013 - 17
Deaths from circulatory disease, all ages, standardised mortality ratio	Persons	126.5	100.0	163.6		61.6	ISR per 100	Lower is better	2013 - 17
Deaths from circulatory disease, under 75 years, standardised mortality ratio	Persons	173.4	100.0	216.3		40.6	ISR per 100	Lower is better	2013 - 17
Deaths from coronary heart disease, all ages, standardised mortality ratio	Persons	139.0	100.0	185.8		53.7	ISR per 100	Lower is better	2013 - 17
Deaths from stroke, all ages, standardised mortality ratio	Persons	120.0	100.0	190.0		44.0	ISR per 100	Lower is better	2013 - 17
Deaths from respiratory diseases, all ages, standardised mortality ratio	Persons	147.5	100.0	194.7		50.7	ISR per 100	Lower is better	2013 - 17
Deaths from causes considered preventable, all ages, standardised mortality ratio	Persons	160.6	100.0	200.1		52.3	ISR per 100	Lower is better	2013 - 17
Life expectancy at birth, (upper age band 85+)	Male	76.1	79.1	72.9		84.4	Life expectancy, Years	Higher is better	2009 - 13
Life expectancy at birth, (upper age band 85+)	Female	81.8	83.0	77.7		88.9	Life expectancy, Years	Higher is better	2009 - 13
Healthy life expectancy, (upper age band 85+)	Male	55.4	63.5	52.7		71.9	Life expectancy, Years	Higher is better	2009 - 13
Healthy life expectancy, (upper age band 85+)	Female	56.6	64.8	53.4		73.1	Life expectancy, Years	Higher is better	2009 - 13
Disability free life expectancy, (Upper age band 85+)	Male	57.0	64.1	54.3		71.4	Life expectancy, Years	Higher is better	2009 - 13
Disability free life expectancy, (Upper age band 85+)	Female	58.2	65.0	55.5		72.0	Life expectancy, Years	Higher is better	2009 - 13

Life expectancy and causes of death

BACHS PCN

Social care measures

These are local breakdowns of datasets relating to the Short and Long Term Support (SALT) submissions for the national collection.
Two years of data are combined (2017/18 and 2018/19) and include cross-border City and County residents.

Measure 1: Adults (aged 18+) supported in long-term residential and nursing care at the year-end 31 March

1A: Younger adults (aged 18-64)

74.3 per 100,000 residents
(45 clients)

This rate is lower than England

England: 122.9
per 100,000 residents

1B: Older adults (aged 65 and over)

1,511.8 per 100,000 residents
(200 clients)

This rate is similar to England

England: 1,478.7
per 100,000 residents

Measure 2: Adults (aged 18+) accessing long-term community support at the year-end 31 March

2A: Younger adults (aged 18-64)

1,181.1 per 100,000 residents
(715 clients)

This rate is higher than England

England: 630.3
per 100,000 residents

2B: Older adults (aged 65 and over)

5,215.8 per 100,000 residents
(690 clients)

This rate is higher than England

England: 2,327.7
per 100,000 residents

Measure 3: Long-term support needs of adults (aged 18+) met by admission to residential and nursing care homes
Lower rates are considered better

3A: Younger adults (aged 18-64)

16.5 per 100,000 residents
(10 clients)

This rate is similar to England

England: 13.9
per 100,000 residents

3B: Older adults (aged 65 and over)

982.7 per 100,000 residents
(130 clients)

This rate is worse than England

England: 582.8
per 100,000 residents

Measure 4: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services
Higher percentages are considered better

**4: Older adults (aged 65 and over)**

71.4 percent
(30 clients)

This percentage is similar to England

England Value: 82.7 percent

Integrated Care System
Nottingham & Nottinghamshire

Quality outcomes framework (QOF)

○ The QOF is a performance, management and payment system for General Practices.

○ GPs keep a record of people with specific diseases such as

- chronic chest disease (COPD)
- diabetes
- heart disease (CHD)
- mental health
- dementia
- atrial fibrillation
- asthma
- learning disability
- osteoporosis
- palliative care, and
- smoking

○ These registers are used to calculate recorded disease prevalence, which is compared to England in these profiles.

○ The data in this profile is for the year 2018/19. The figures may be under estimates due to people not presenting to their GP, not being diagnosed or not being recorded.

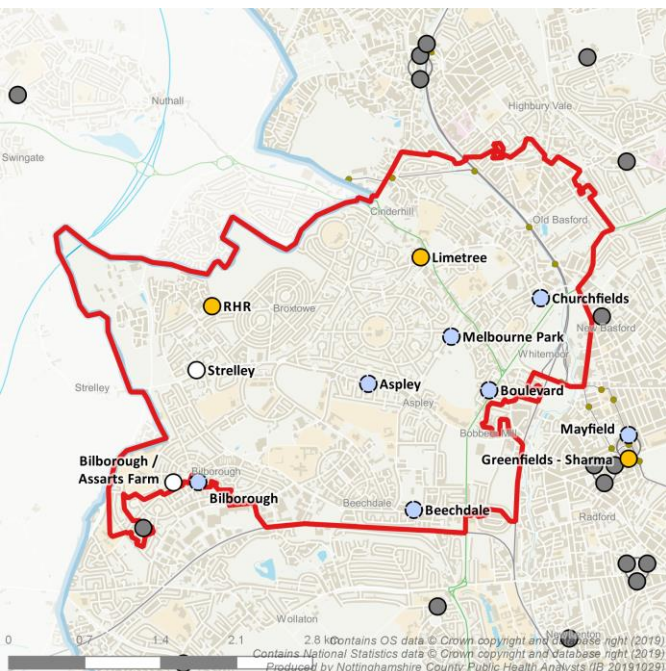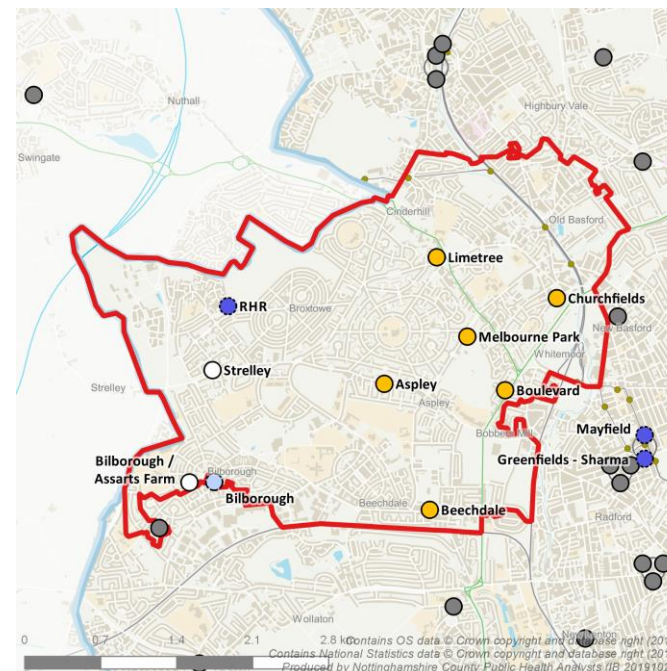○ There were two practices with no QOF data.

COPD prevalence
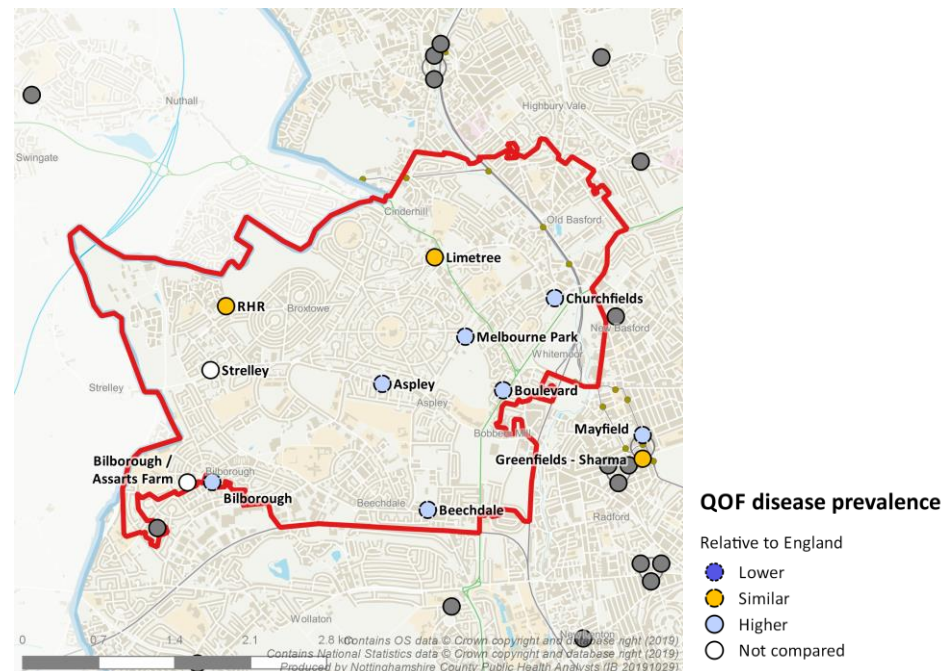
COPD is the name for a collection of chronic chest diseases. People with COPD have difficulties breathing due to a narrowing of their airways. Smoking is the main cause of COPD – more than 4 out of 5 people who develop the disease are, or have been smokers.

○ The PCN population had a higher prevalence of COPD than England (2.5% compared to 1.9%).

○ 95.4% of patients had their diagnosis confirmed by post bronchodilator spirometry, similar to the England average of 96.3%.

○ 80.8% of patients had received an influenza vaccination; similar to the England average of 78.4%.

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Diabetes prevalence

QOF disease prevalence
Relative to England
- Lower
- Similar
- Higher
- Not compared

Type 2 diabetes is linked to many health complications such as heart disease, eye problems, kidney disease and problems with circulation. It is important that diabetes is diagnosed early and well managed.

- The PCN population had a higher prevalence of diabetes (8.2%) than the England population (6.9%).

- 62.4% of patients had well controlled (HbA1c of 64mg or less) blood sugar, lower than the England average.

- The uptake of influenza immunisation (72.1%) was similar to England.

- However, diabetes management was worse on a range of measures.

CHD prevalence

QOF disease prevalence
Relative to England
- Lower
- Similar
- Higher
- Not compared

Coronary heart disease is caused by a build up of fatty deposits on the walls of the arteries around the heart (coronary arteries). Smoking, high blood pressure, lack of exercise, diabetes or being overweight or obese all increase the risk of CHD.

- The PCN population had a similar prevalence to the England population; 3.0% compared with 3.1%.

- 76.5% of CHD patients had well controlled blood pressure, lower than the England average (80.6%).

- 76.9% of CHD patients had taken aspirin or anti-clotting medication. This is lower than the England average (79.6%).

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Mental health prevalence
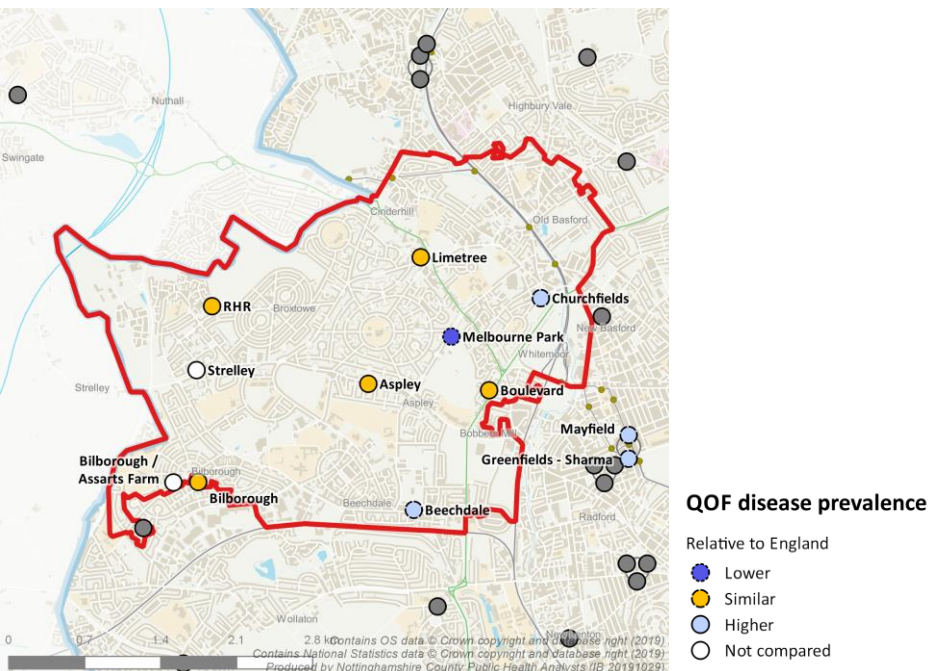
This includes all patients with a diagnosis of schizophrenia, bipolar affective disorder or other psychoses. Mental illness can result in high levels of disability and a reduced quality of life for patients, families and carers.

- The PCN population had a higher prevalence than England; 1.1% compared to 1% for England.

- 76% of patients had a comprehensive care plan. This is similar to England (70.5%).

- A higher proportion (97.6%) of eligible women in this group had a cervical smear in the previous 5 years compared with England (94%).
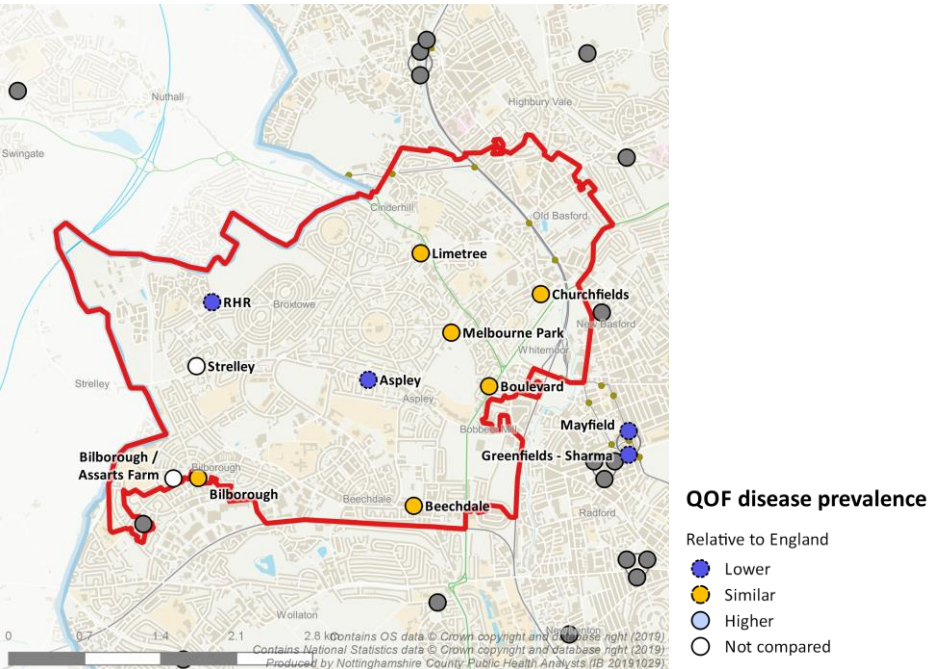
Dementia prevalence
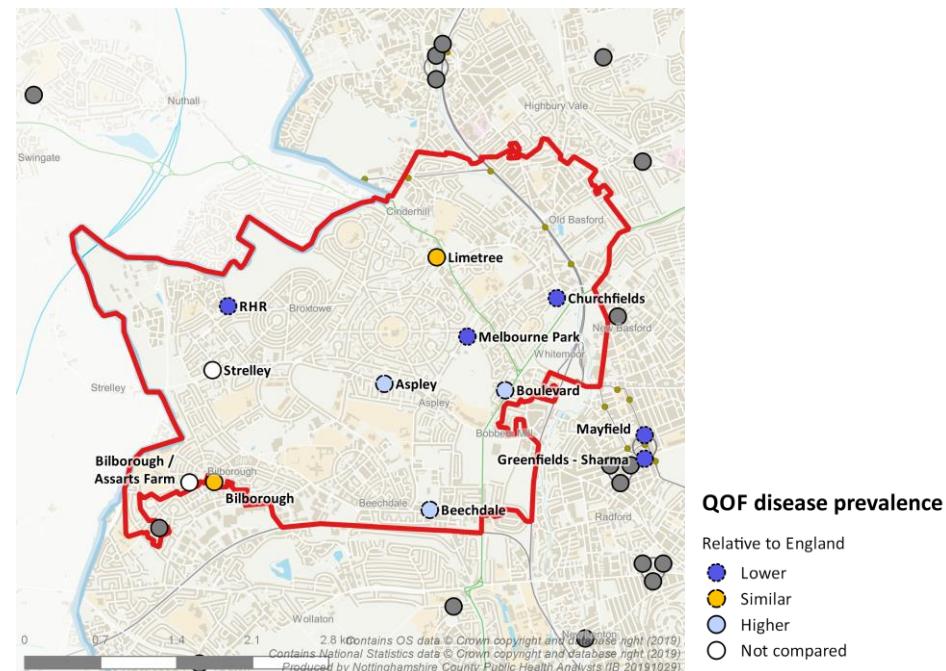
Dementia affects the brain and its abilities. This includes problems with memory loss, thinking speed, mental agility, language, understanding and judgement.

- The PCN population had a similar prevalence to England; 0.7% compared to 0.8% for England.

- 67.7% of patients had a face-to-face review in the previous 12 months. This is lower than the England average of 70.3%.

- 88.7% of patients newly diagnosed with dementia had records of key test results soon after diagnosis; similar to the England average (83.7%).

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Atrial fibrillation prevalence

QOF disease prevalence

Relative to England
- Lower
- Similar
- Higher
- Not compared

Asthma prevalence

QOF disease prevalence

Relative to England
- Lower
- Similar
- Higher
- Not compared

AF is the most common sustained cardiac arrhythmia. Men are more commonly affected than women and the prevalence increases with age. In people who have had a stroke, concurrent AF is linked with a higher rate of mortality, disability, longer hospital stay and lower rate of discharge home.

- The PCN population had a significantly lower prevalence than England; 1.6% compared with 2.0%.

- The proportion having their risk of stroke assessed (80.2%) was similar to the England average (82.1%).

- Anticoagulant treatment of at risk patients (81.1%) was the same as the England average.
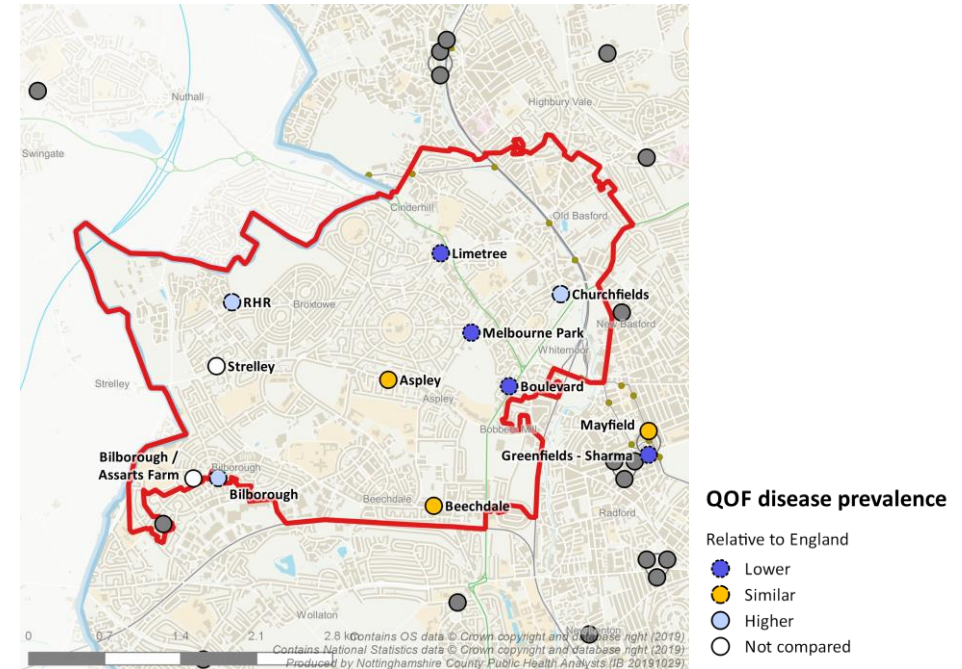
Asthma is a common respiratory condition which responds well to appropriate management and which is principally managed in primary care.

- The PCN population had the same prevalence as England (6.0%).

- Recording of smoking status (age 14-19 years) was lower than the England average; 75.5% compared to 78%.

- Asthma review had been carried out in 90.8% of patients comparable to the England average (91.6%).

- Recorded variability/reversibility (88.3%) was similar to the England average (88.5%).

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Learning disabilities prevalence

Osteoporosis (secondary prevention) prevalence
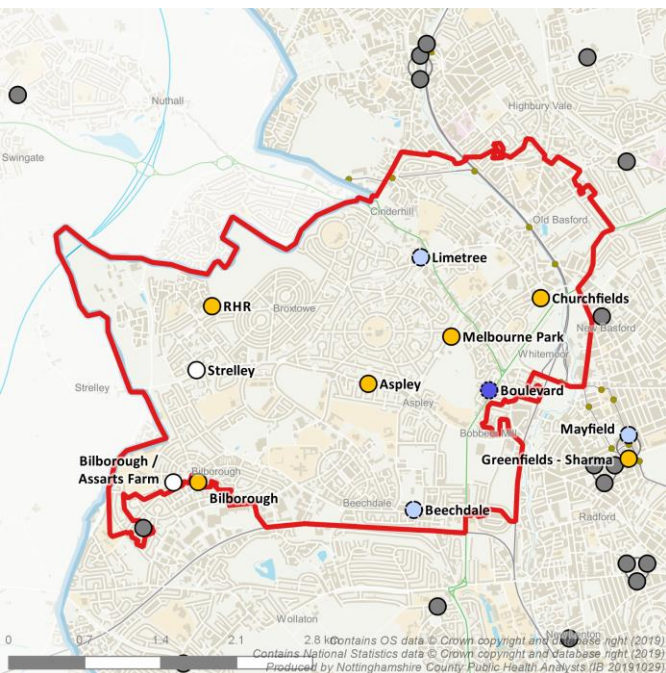
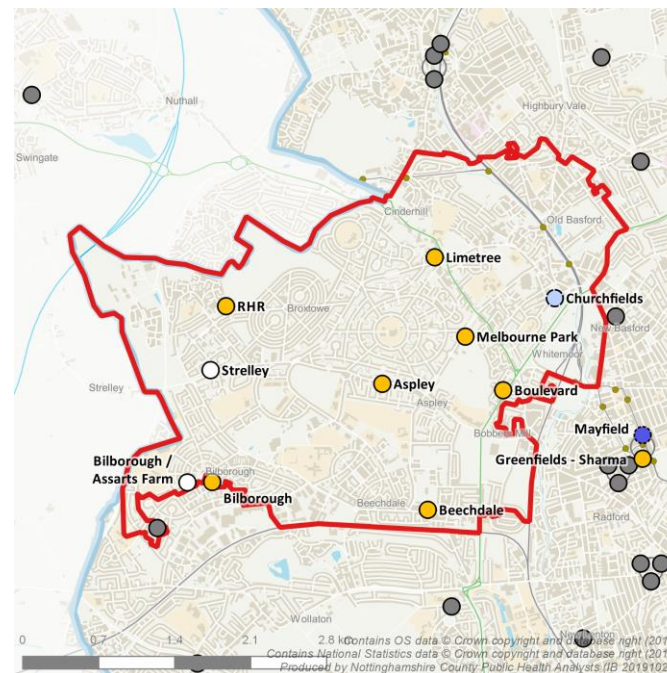People with learning disabilities are among the most vulnerable and socially excluded in our society. Virtually all people with learning disabilities are now living in the community and depend on general practice for their primary care needs.

○ The PCN population had a prevalence of 0.7%; higher than the England average (0.5%).

Osteoporotic fragility fractures can cause substantial pain and severe disability and are associated with decreased life expectancy. They occur most commonly in the spine, hip and wrist. They also occur in the arm, pelvis, ribs and other bones.

○ The PCN population had a significantly higher prevalence (1.0%) than England (0.8%).

○ The proportion of people age 50-74 treated with bone sparing agent (60.3%) was lower than the England average (68.1%).

○ The proportion of those treated that were age 75 or over was similar to England; 89.8% compared with 90.6%.

Palliative care prevalence
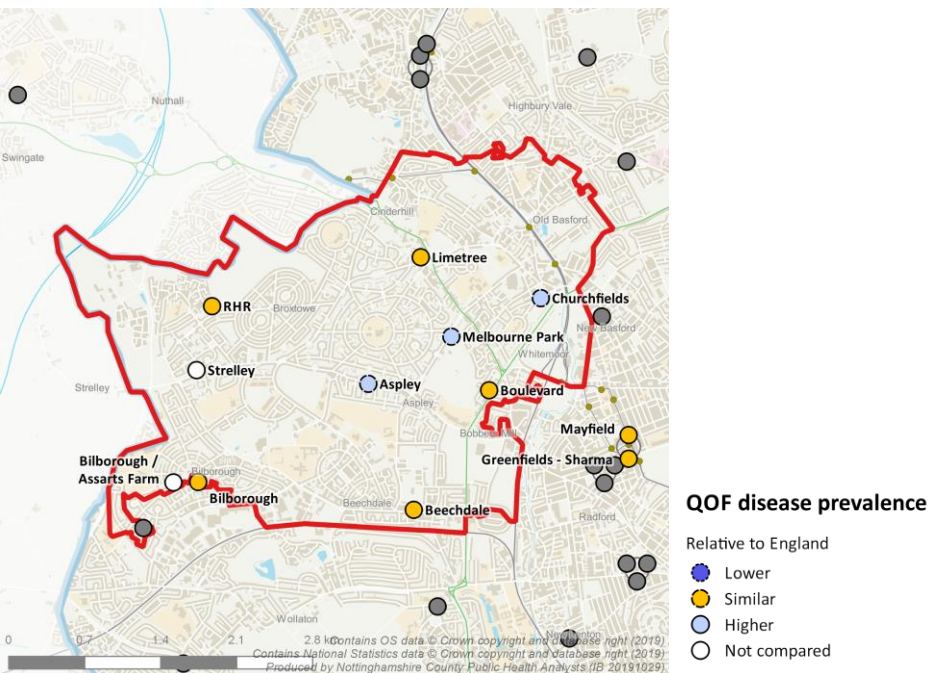
Palliative or end of life care is the active total care of patients with life-limiting disease and their families by a multi-professional team.

- The prevalence of patients receiving palliative care is significantly higher than the England average; 0.8% compared to 0.4%.

Smoking prevalence
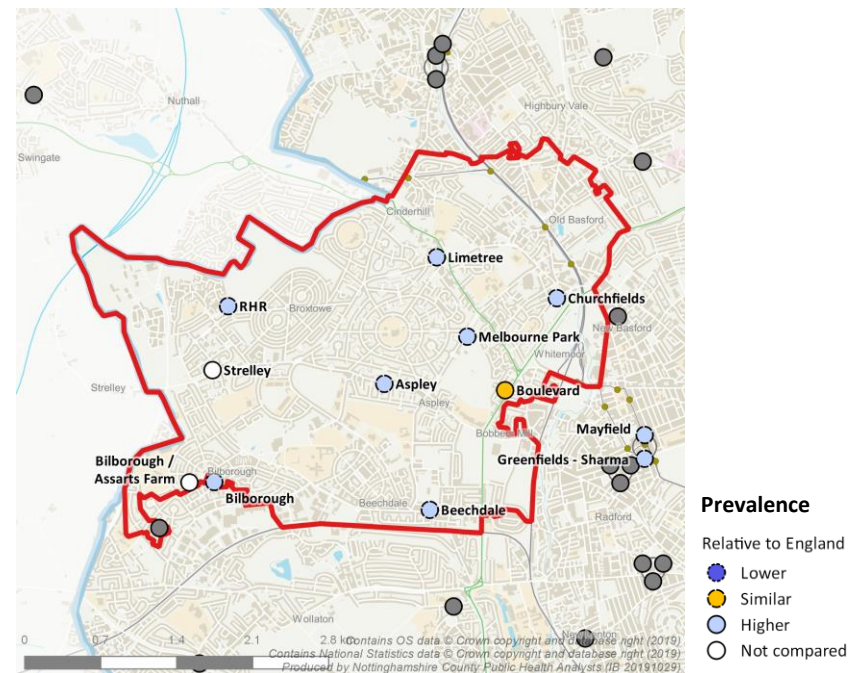
The percentage of patients age 15 and over with current status of smoker recorded in last 2 years. High risk smokers are those with any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses whose notes record smoking status in the preceding 12 months.

- The PCN population had a significantly higher smoking prevalence than England; 24.4% compared with 16.6%.

- A significantly lower proportion of high risk smokers were offered support and treatment in the last 12 months (78.5%) compared to the England average (79.7%).

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QOF Prevalence - PCN overview - all QOF disease registers

| QOF disease registers			BACHS PCN			England
DOMAIN DESCRIPTION	INDICATOR GROUP DESCRIPTION	Age band	Number on disease register	Percent of age specific practice population	Compared to ENGLAND this PCN prevalence is significantly ...	ENGLAND
Clinical	Hypertension	All ages	6,330	13.7	Similar	14.0
Clinical	Depression	18 and over	3,976	11.4	Higher	10.7
Clinical	Diabetes mellitus	17 and over	2,894	8.2	Higher	6.9
Clinical	Asthma	All ages	2,762	6.0	Similar	6.0
Clinical	Chronic kidney disease	18 and over	1,474	4.2	Similar	4.1
Clinical	Secondary prevention of coronary heart disease	All ages	1,393	3.0	Similar	3.1
Clinical	Cancer	All ages	1,124	2.4	Lower	3.0
Clinical	Chronic obstructive pulmonary disease	All ages	1,132	2.5	Higher	1.9
Clinical	Atrial fibrillation	All ages	735	1.6	Lower	2.0
Clinical	Stroke and transient ischaemic attack	All ages	786	1.7	Similar	1.8
Clinical	Mental health	All ages	493	1.1	Higher	1.0
Clinical	Epilepsy	18 and over	350	1.0	Higher	0.8
Clinical	Heart failure	All ages	477	1.0	Higher	0.9
Clinical	Dementia	All ages	337	0.7	Similar	0.8
Clinical	Rheumatoid arthritis	16 and over	248	0.7	Similar	0.8
Clinical	Peripheral arterial disease	All ages	319	0.7	Higher	0.6
Clinical	Learning Disability	All ages	302	0.7	Higher	0.5
Clinical	Osteoporosis: secondary prevention of fragility fractures	50 and over	137	1.0	Higher	0.8
Clinical	Palliative care	All ages	362	0.8	Higher	0.4
Public Health	Obesity	18 and over	4,075	11.7	Higher	10.1
Public Health	Cardiovascular disease – primary prevention	30 to 74	302	1.2	Similar	1.1
Public Health	Smoking	15 and over	8,933	24.4	Higher	16.6

QOF Treatment - by practice – selected QOF disease domains - relative to England

indicator group code	indicator code	indicator description	Percent of age specific practice population receiving intervention		Significance compared to England	Churchfields	Aspley	Greenfields - Sharma	Melbourne Park	Bilborough	Boulevard	Mayfield	RHR	Limetree	Beechdale
			England	This PCN	PCN Value compared to England										
DM	DM002	BP < 150/90 mmHg L12m	86.5	83.2	Worse	Worse	Worse	Similar	Worse	Better	Similar	Similar	Similar	Better	Similar
	DM003	BP < 140/80 mmHg L12m	70.7	65.0	Worse	Worse	Similar	Similar	Worse	Similar	Similar	Similar	Similar	Better	Similar
	DM004	Cholesterol <5mmol/l L12m	71.0	67.2	Worse	Worse	Worse	Similar	Similar	Similar	Similar	Worse	Similar	Similar	Similar
	DM006	Treated with an ACE-I or ARB (diagnosis of nephropathy or micro-albuminuria)	78.7	82.3	Similar	Similar	Similar	Similar	Better	Similar	Similar	Similar	Similar	Similar	Similar
	DM007	HbA1c <= 59mmol/mol L12m	61.1	55.4	Worse	Similar	Worse	Similar	Worse	Worse	Similar	Similar	Worse	Similar	Worse
	DM008	HbA1c <= 64mmol/mol L12m	69.2	62.4	Worse	Similar	Worse	Worse	Worse	Similar	Similar	Worse	Worse	Similar	Worse
	DM009	HbA1c <= 75mmol/mol L12m	80.1	73.3	Worse	Similar	Worse	Worse	Worse	Similar	Similar	Similar	Worse	Similar	Worse
	DM012	Record of foot examination and risk classification in L12m	81.7	79.6	Worse	Worse	Worse	Similar	Worse	Better	Similar	Better	Similar	Similar	Similar
	DM014	Referral to structured education programme (within 9m of entry to register) in L12m	70.5	58.5	Worse	Worse	Similar	Worse	Similar	Similar	Worse	Similar	Similar	Worse	Similar
	DM018	Influenza immunisation received during last winter	73.4	72.1	Similar	Worse	Similar	Similar	Better	Similar	Similar	Worse	Similar	Similar	Similar
AST	AST002	Recorded variability/reversibility (3m before/anytime after diagnosis) (age 8 or over)	88.5	88.3	Similar	Similar	Similar	Similar	Worse	Better	Similar	Better	Similar	Similar	Similar
	AST003	Asthma review including the 3 RCP questions in L12m	91.6	90.8	Similar	Similar	Similar	Similar	Better	Similar	Similar	Similar	Similar	Worse	Similar
	AST004	Record of smoking status in L12m (age 14-19)	78.0	75.5	Worse	Worse	Similar	Similar	Similar	Similar	Similar	Worse	Similar	Similar	Similar
CHD	CHD002	BP < 150/90 mmHg L12m	80.6	76.5	Worse	Similar	Worse	Similar	Better	Similar	Worse	Similar	Worse	Similar
	CHD005	Record of treatment aspirin, anti-platelet or anti-coagulant being taken in L12m	79.6	76.9	Worse	Similar	Worse	Similar	Better	Similar	Worse	Similar	Worse	Worse
	CHD007	Influenza immunisation received during last winter	71.0	54.1	Worse	Similar	Worse	Better	Worse	Similar	Worse	Worse	Similar	Worse	Worse
COPD	COPD002	Record of diagnosis confirmation (spirometry) (3m before or 12m after) entry to register	96.3	95.4	Similar	Similar	Similar	Similar	Similar	Similar	Worse	Similar	Similar	Worse	Similar
	COPD003	Received a review (including MRC dyspnoea scale) in L12m	78.1	75.4	Worse	Worse	Similar	Similar	Similar	Similar	Worse	Similar	Similar	Worse	Similar
	COPD004	Record of FEV_1 in L12m	78.0	81.9	Similar	Similar	Similar	Similar	Better	Better	Similar	Similar	Similar	Similar	Similar
	COPD005	Record of oxygen saturation in L12m (for those with MRC grade 3 or greater)	70.0	74.4	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
	COPD007	Influenza immunisation received during last winter	78.4	80.8	Similar	Similar	Similar	Similar	Better	Similar	Similar	Similar	Similar	Similar	Similar
AF	AF006	Stroke risk assessed using CHA2DS2-VASc in L12m	82.1	80.2	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Worse
	AF007	Anti-coagulant treatment for patients with CHA2DS2-VASc > 2	81.1	81.1	Similar	Worse	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
MH	MH002	Comprehensive care plan agreed in L12m	70.5	76.0	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Worse	Similar
	MH003	Record of BP in L12m	94.5	100.0	Similar	Similar	Similar	Not Tested	Similar	Not Tested	Not Tested	Not Tested	Similar	Similar	Similar
	MH007	Record of alcohol consumption in L12m	82.8	91.3	Similar	Similar	Similar	Not Tested	Similar	Not Tested	Not Tested	Not Tested	Similar	Similar	Similar
	MH008	Record of cervical screening in L5y (women aged 25 to 64)	94.0	97.6	Better	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
	MH009	Record of serum creatinine and TSH in L9m (patients on lithium therapy)	85.7	86.3	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
	MH010	Record of lithium levels in therapeutic range in L4m (patients on lithium therapy)	92.2	90.3	Worse	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Worse	Similar	Similar
DEM	DEM004	Review (face-to-face) in L12m	70.3	67.7	Worse	Similar	Worse	Better	Similar	Similar	Similar	Similar	Worse	Similar	Worse
	DEM005	Record of various tests/vitamin levels (12m before or 6m after register entry) in L12m	83.7	88.7	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
OST	OST002	Treated with appropriate bone-sparing agent (aged 50-74 with confirmed diagnosis)	68.1	60.3	Worse	Similar	Worse	Worse	Similar	Similar	Similar	Similar	Similar	Similar	Similar
	OST005	Treated with appropriate bone-sparing agent (aged 75 or over with confirmed diagnosis)	90.6	89.8	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
SMOK	SMOK002	Record of smoking status in L12m (with any one of a list of conditions)	82.2	83.0	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar
	SMOK004	Current smokers offered support and treatment in L24m (aged 15 or over)	80.8	68.8	Worse	Worse	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Similar	Worse
	SMOK005	Current smokers offered support and treatment in L12m (with any one of a list of conditions)	79.7	78.5	Worse	Worse	Similar	Similar	Worse	Better	Better	Similar	Similar	Better	Better

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BACHS PCN

DTAP 5yrs immunisation uptake
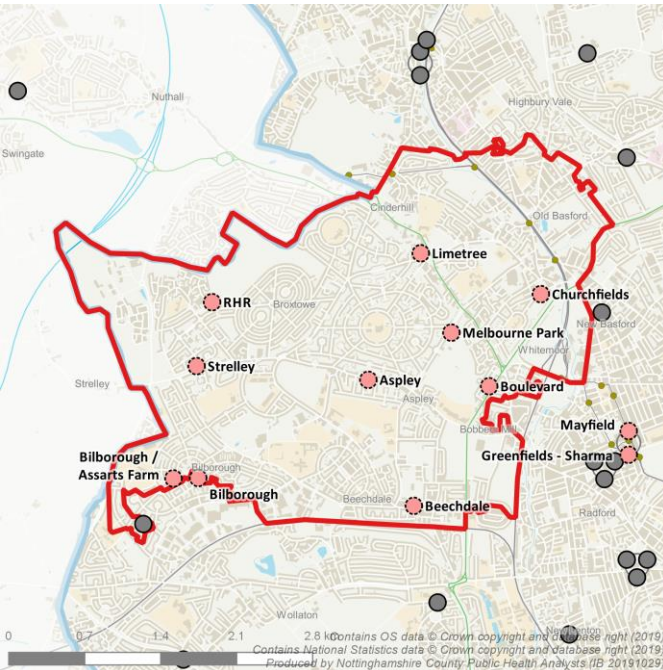
MMR uptake
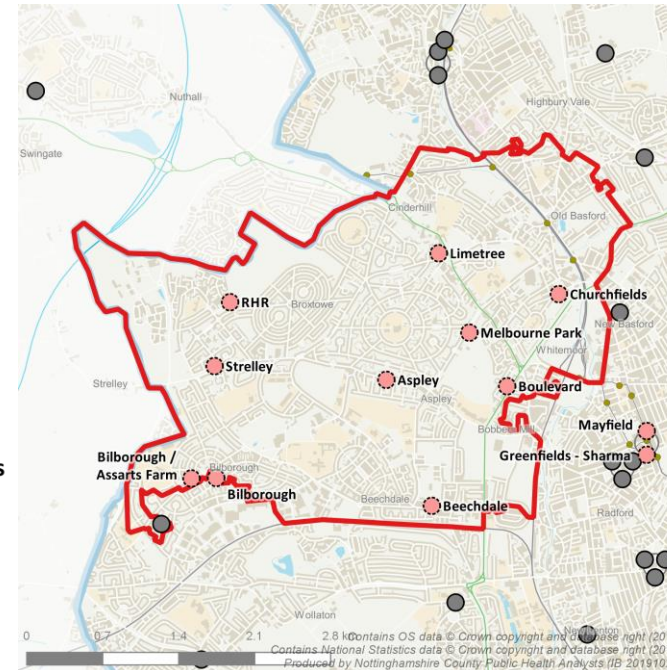
Diphtheria is a highly contagious bacterial infection that mainly affects the nose and throat.

- The PCN achieved immunisation uptake at age 5 of 72.5% during 2018/19, not reaching 90% coverage.
- None of the 12 practices in the PCN reached 90% coverage.

MMR is a combined vaccine that protects against three separate illnesses; measles, mumps and rubella (German measles). These are highly infectious conditions that can have serious, potentially fatal, complications.

- The PCN achieved 73.4% immunisation uptake at age 5 during 2018/19, not reaching 90% coverage.
- None of the 12 practices in the PCN reached 90% coverage.

BACHS PCN

Childhood Vaccinations and Immunisations – PCN overview

Child Vaccinations and Immunisations		BACHS PCN			England
Coverage at age	**Intervention**	**Number eligible**	**Percent receiving intervention**	**Coverage Band**	**England Value**
12 months	6-in-1 (Diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b and Hepatitis B)	677	86.4	<90%	91.7
	Hepatitis B (included in 6-in-1 from August 2017)			No data	
	Meningococcal B	677	86.6	<90%	91.8
	Pneumococcal disease (primary course)	677	86.9	<90%	92.3
	Rotavirus (primary course)	677	86.1	<90%	90.0
24 months	5-in-1 (Diphtheria, tetanus, pertussis, polio and Haemophilus influenzae type b)	781	91.9	90-95%	94.2
	Hepatitis B (included in 6-in-1 from August 2017)			No data	
	Haemophilus Influenzae type b and meningococcal group C (booster)	781	81.0	<90%	90.3
	Measles/mumps/rubella	781	81.7	<90%	90.0
	Pneumococcal disease (booster)	781	81.8	<90%	89.9
5 years	Diphtheria, tetanus, pertussis and polio (booster)	796	72.5	<90%	**84.1**
	5-in-1 (Diphtheria, tetanus, pertussis, polio and Haemophilus influenzae type b)	796	94.3	90-95%	94.5
	Haemophilus Influenzae type b and meningococcal group C (booster)	796	89.4	<90%	92.2
	Measles/mumps/rubella (first dose)	796	94.3	90-95%	94.3
	Measles/mumps/rubella (second dose)	796	73.4	<90%	**86.5**

Childhood Vaccinations and Immunisations - by practice

Child Vaccinations and Immunisations

Coverage at age	Intervention	This PCN	Churchfields	Aspley	Greenfields - Sharma	Melbourne Park	Bilborough	Boulevard	Mayfield	RHR	Bilborough / Assarts	Limetree	Strelley	Beechdale
12 months	6-in-1 (Diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b and Hepatitis B)	<90%	<90%	90-95%	90-95%	<90%	No data	95+%	<90%	<90%	<90%	<90%	<90%	90-95%
	Hepatitis B (included in 6-in-1 from August 2017)	No data	No data	No data	No data	No data	No data	No data	No data	95+%	No data	No data	No data	No data
	Meningococcal B	<90%	<90%	90-95%	90-95%	<90%	No data	95+%	<90%	<90%	<90%	<90%	<90%	90-95%
	Pneumococcal disease (primary course)	<90%	<90%	90-95%	90-95%	<90%	No data	95+%	<90%	<90%	<90%	<90%	<90%	<90%
	Rotavirus (primary course)	<90%	<90%	90-95%	<90%	<90%	No data	95+%	<90%	<90%	<90%	<90%	<90%	95+%
24 months	5-in-1 (Diphtheria, tetanus, pertussis, polio and Haemophilus influenzae type b)	90-95%	<90%	95+%	90-95%	<90%	90-95%	95+%	<90%	90-95%	90-95%	90-95%	90-95%	95+%
	Hepatitis B (included in 6-in-1 from August 2017)	No data	No data	No data	<90%	95+%	No data	No data	No data	No data	No data	No data	No data	No data
	Haemophilus Influenzae type b and meningococcal group C (booster)	<90%	<90%	<90%	90-95%	<90%	90-95%	90-95%	<90%	<90%	<90%	<90%	<90%	90-95%
	Measles/mumps/rubella	<90%	<90%	<90%	90-95%	<90%	90-95%	90-95%	<90%	<90%	<90%	90-95%	<90%	90-95%
	Pneumococcal disease (booster)	<90%	<90%	<90%	90-95%	<90%	90-95%	90-95%	<90%	<90%	<90%	90-95%	<90%	90-95%
5 years	Diphtheria, tetanus, pertussis and polio (booster)	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%
	5-in-1 (Diphtheria, tetanus, pertussis, polio and Haemophilus influenzae type b)	90-95%	90-95%	95+%	<90%	90-95%	95+%	95+%	90-95%	95+%	95+%	90-95%	95+%	90-95%
	Haemophilus Influenzae type b and meningococcal group C (booster)	<90%	<90%	95+%	<90%	<90%	90-95%	90-95%	<90%	95+%	90-95%	<90%	<90%	90-95%
	Measles/mumps/rubella (first dose)	90-95%	90-95%	95+%	<90%	90-95%	90-95%	95+%	90-95%	95+%	90-95%	95+%	95+%	95+%
	Measles/mumps/rubella (second dose)	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%	<90%

Where to look for more information about this profile

Links to downloadable versions of this and other ICS PCN profiles, along with a glossary and list of data sources, can be found on the Nottinghamshire County Insight page :

- PCN Health and Care Profiles

- https://nottinghamshireinsight.org.uk

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PCN Profiles

Nottingham City ICP
Nottingham City CCG
BACHS PCN

Version v1.5