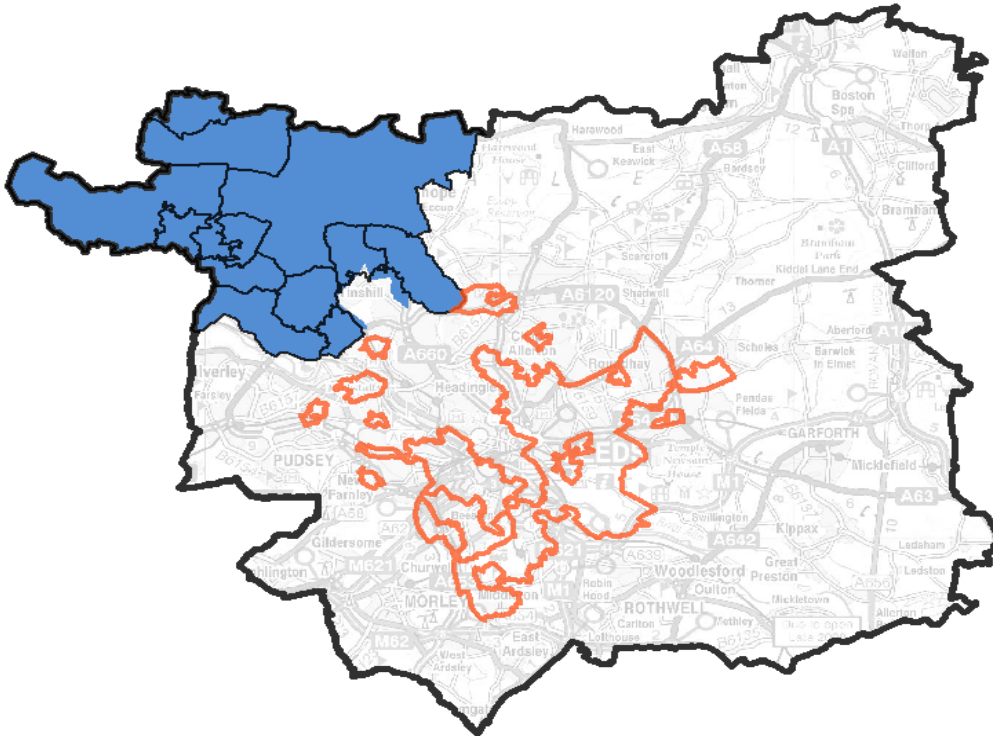


Area profile: Outer North West Area Committee



The main map shows the Outer North West Area Committee area committee area in blue. The data in the report is built up using small geographic areas called Middle Super Output Areas (MSOAs), the MSOAs used in this report are shown as black outlines. MSOA are attributed to an area if the 'centre of gravity' of the population is within the area. This means the data in this report is as closely matched to the blue area as possible.

The orange outline represents parts of Leeds which fall into the 10% most deprived in England according to the Index of Multiple Deprivation (2004). Approximately 20% of the Leeds population live in this area.

The smaller map shows the Outer North West Area Committee area committee area and the ward boundaries.



About MSOAs: (Middle Super Output Area). These are geographic areas designed to improve the reporting of small area statistics in England and Wales. There are 108 MSOA in Leeds. MSOAs are built from groups of Lower Super Output Areas (LSOAs).

The minimum population of an MSOA is 5,000 and the mean is 7,200 (when originally generated).



Leeds
CITY COUNCIL



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Summary table for Outer North West Area Committee	This Area Committee	'best' MSOA in this area committee	'worst' MSOA in this area committee	Leeds	Deprived quintile	Deprived Leeds
area population	87,800			795,476	159,387	172,084
area population proportion of Leeds pop	11.0%				20.0%	21.6%
number in deprived Leeds	0			172,084		
proportion of population in deprived Leeds	0.0%			21.6%		
proportion of deprived Leeds this represents	0.0%					
number in deprived <i>quintile</i>	0			159,387		
proportion of population in deprived quintile	0.0%			20.0%		
proportion of deprived quintile this represents	0.0%					
pupils on roll	11,260			104,056		
proportion of all pupils in leeds	10.8%					
GP recorded CANCER <i>Age Standardised rate per 100,000</i>	2,308.2	E02002336 1,874.3	E02002342 2,706.9	2,199.3	1,999.1	
GP recorded CHD <i>Age Standardised rate per 100,000</i>	2,425.1	E02002337 2,114.2	E02002339 3,482.7	2,853.6	3,562.8	
GP recorded COPD <i>Age Standardised rate per 100,000</i>	985.0	E02002345 440.7	E02002339 1,925.7	1,536.6	2,872.7	
GP recorded Diabetes <i>Age Standardised rate per 100,000</i>	2,752.5	E02002350 2,072.4	E02002339 4,183.4	3,615.5	5,244.1	
GP recorded Obesity <i>Age Standardised rate per 100,000</i>	17,847.4	E02002336 14,113.7	E02002339 24,561.5	21,130.3	25,726.2	
GP recorded Smoking <i>Age Standardised rate per 100,000</i>	16,946.2	E02002345 11,144.4	E02002339 26,138.8	23,112.4	34,123.3	
Mortality under 75s all causes <i>rate per 100,000</i>	227.0	E02002342 166.0	E02002333 293.0	294.6		458.8
Mortality under 75s all causes Males <i>rate per 100,000</i>	255.9	E02002350 175.0	E02002332 386.0	356.1		568.2
Mortality under 75s all causes Females <i>rate per 100,000</i>	200.0	E02002342 78.0	E02002357 295.0	235.3		344.9
Cancer mortality under 75s ALL <i>rate per 100,000</i>	100.9			117.7		159.8
Cancer mortality under 75s Males <i>rate per 100,000</i>	106.8			128.4		173.5
Cancer mortality under 75s Females <i>rate per 100,000</i>	96.4			108.2		146.6
Circulatory disease mortality under 75s ALL <i>rate per 100,000</i>	53.3			79.1		127.4
Circulatory disease mortality under 75s Males <i>rate per 100,000</i>	68.5			108.4		174.3
Circulatory disease mortality under 75s Females <i>rate per 100,000</i>	38.6			50.9		78.7
Respiratory disease mortality under 75s ALL <i>rate per 100,000</i>	13.5			26.2		53.7
Respiratory disease mortality under 75s Males <i>rate per 100,000</i>	17.0			32.0		68.5
Respiratory disease mortality under 75s Females <i>rate per 100,000</i>	10.4			20.8		39.0
Alcohol specific admissions <i>rate per 1000</i>	3.3	E02002343 1.2	E02002340 5.8			
Alcohol specific admissions Male <i>rate per 1000</i>	4.2					
Alcohol specific admissions Female <i>rate per 1000</i>	2.4					
Alcohol attributable admissions <i>rate per 1000</i>	15.7	E02002350 10.3	E02002339 22.7			
Alcohol attributable admissions Male <i>rate per 1000</i>	19.5					
Alcohol attributable admissions Female <i>rate per 1000</i>	12.0					

Area profile contents

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 - Summary table
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 - Differing levels of deprivation
 - Neighbourhood index
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 - Coronary heart disease
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 - Diabetes
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- Mortality rates in the area
- Alcohol admissions
- Adult Social Care
- Glossary

MSOAs making up this area

The MSOAs that are used in this report to represent Outer North West Area Committee

E02002356	Horsforth, New Road Side, Stanhopes and Rawdon South
E02002350	Horsforth - Brownberries, West End
E02002343	Rawdon North
E02002340	Yeadon -Rufford Park, Yeadon Tarn
E02002345	Adel
E02002357	Horsforth Central
E02002342	Cookridge, Holt Park
E02002336	Arthington, Bramhope, Pool and Carlton
E02002339	Yeadon - Henshaws, Southway, Westfields
E02002338	Guiseley
E02002333	Otley
E02002337	Hawksworth Village, Tranmere Park
E02002332	Otley - Newalls / Weston Lane

To see profiles for these MSOA, visit: <http://www.westyorkshireobservatory.org/explorer/resources/>

Population profile

Population of Outer North West Area Committee

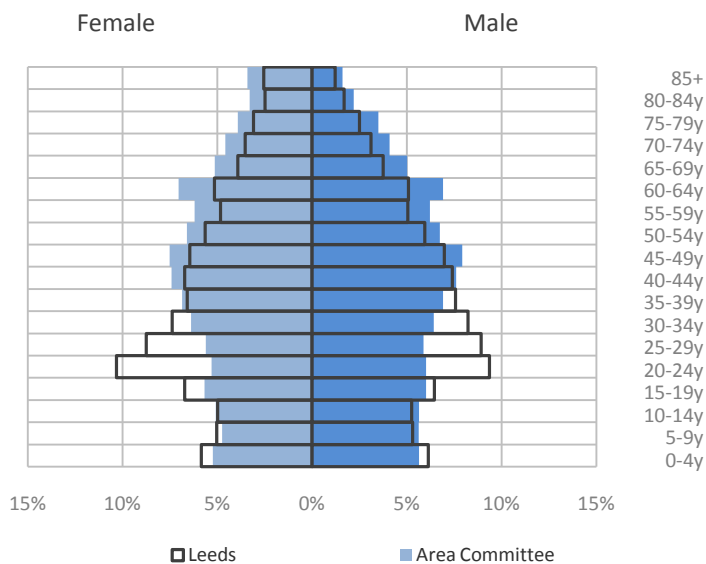
87,800 which is 11.0% of the Leeds registered and resident population of 795,476.

Males: 43,315 Females: 44,485

Population of Outer North West Area Committee living in deprived Leeds*.

There are 0 people in this area who are living in deprived Leeds. This equates to 0.0% of the Outer North West Area Committee population and 0.0% of the entire population of deprived Leeds.

Population pyramid for Outer North West Area Committee



The population shown in the chart is what is commonly referred to as a population pyramid. Traditionally, the chart is shaped like a pyramid in that the base is wide and each level above becomes slightly narrower as the population in the increasing age groups becomes a smaller percentage of the total.

In modern western societies the pyramids are now typically narrower at the base due to a decline in the birth rate. The Leeds profile is shown in outline and follows the expected pattern for a modern western population with an increase in the proportion of people in the university student age groups.

The blue bars in this pyramid represent the total GP registered population living in the area of this report.

The Outer North West Area has one the largest populations in Leeds. The population in this area is mainly 40 plus, with a slightly higher number of over 60's than the Leeds average.

(January 2011 GP registered population)

***Deprived Leeds:** This is the Lower Super output Areas (LSOAs) in Leeds which are in the 10% most deprived in England. Elsewhere in this report the 'Deprived quintile' is also mentioned, this is the fifth of Leeds MSOAs which are most deprived.

Practice population note: The practice populations here are from January 2011 and include all patients living in the MSOAs making up the area of the report.

Population heritage and faith

Population of this area: 87,800

The Leeds registered and resident population is 795,476

(index compares this area with Leeds in terms of proportions of populations. An index of 100 means the area has the same proportion of a group as Leeds does. 200 is double the proportion Leeds has for instance)

Origins geography groups* of the population in this area:

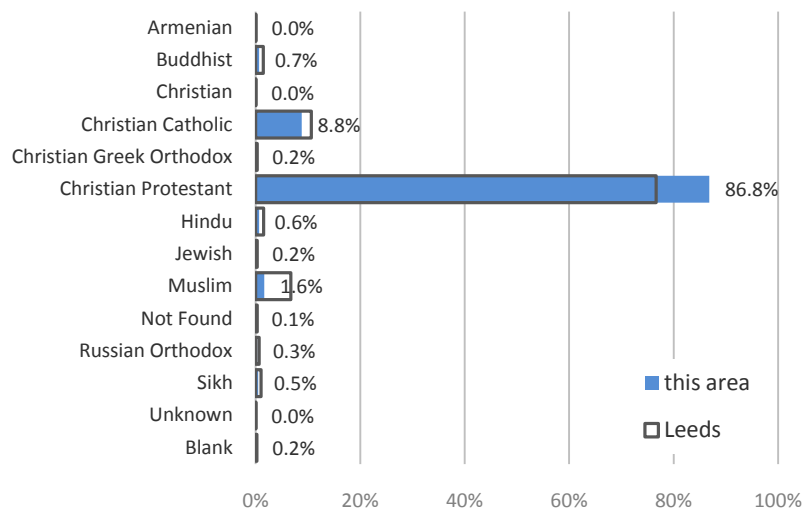
	in this area		in Leeds		index	0	100	200
Africa	285	0.3%	14,698	1.8%	18			
Americas	280	0.3%	4,633	0.6%	55			
British Isles	79,274	90.3%	633,431	78.6%	115			
Central Asia	22	0.0%	190	0.0%	106			
Diasporic	173	0.2%	2,571	0.3%	62			
East Asia	831	0.9%	14,104	1.7%	54			
Eastern Europe	922	1.1%	19,536	2.4%	43			
Middle East	751	0.9%	22,681	2.8%	30			
Northern Europe	438	0.5%	4,409	0.5%	91			
Not found	54	0.1%	2,457	0.3%	20			
Oceanian	19	0.0%	229	0.0%	76			
South Asia	1,610	1.8%	47,734	5.9%	31			
Southern Europe	1,128	1.3%	14,485	1.8%	72			
Unknown	3	0.0%	187	0.0%	15			
Western Europe	2,237	2.5%	22,909	2.8%	90			
Blank	133	0.2%	1,981	0.2%	62			
Grand Total	100.4%		100.0%		100			

(Chart does not illustrate groups numbering less than 1,000 in the total Leeds population)

'Faith' as calculated by Origins software

The population in this area is almost entirely British in origin with very small numbers of other geographical origins, the largest of which is West European.

In terms of faith, this is almost entirely a Christian area, predominantly Protestant.



***Origins geography and faith note:** Origins software analyses forename and surname of every GP registered patient in Leeds and gives what is considered to be an indication of an individuals most likely heritage and faith according to geography. This is not necessarily how they might describe themselves. For more information about Origins software visit: <http://publicsector.experian.co.uk/Products/Mosaic%20Origins.aspx>

As the Origins data includes all Leeds registered patients in January 2011, regardless of where they live, totals will vary slightly from those elsewhere in the report where only Leeds resident patients are counted.

January 2011 School Census

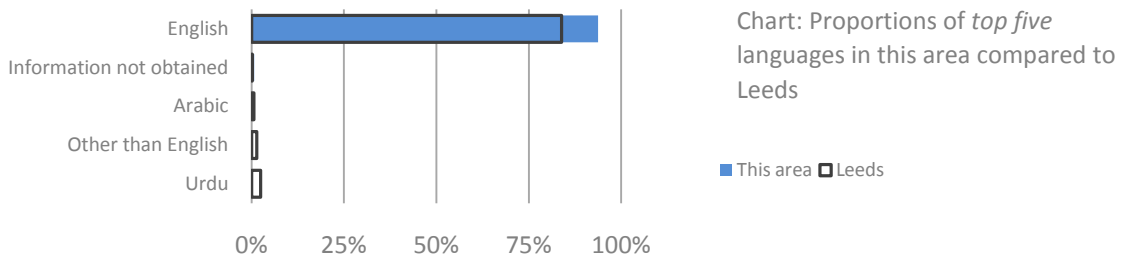
Language and ethnicity

(index compares this area with Leeds in terms of proportions of populations. An index of 100 means the area has the same proportion of a group as Leeds does. 200 is double the proportion Leeds has for instance)

Pupils on roll in this area: **11,260**
 Leeds total: 104,056

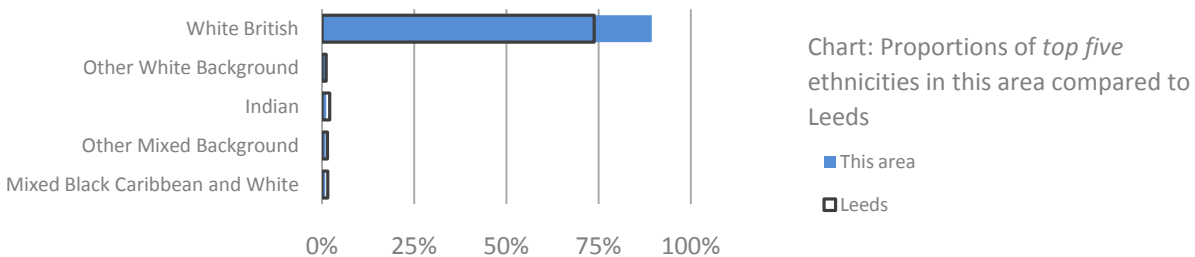
Top five languages recorded:	in this area		in Leeds		index	Index (Leeds = 100)
	Count	%	Count	%		
English	10,554	93.7%	87,265	83.9%	112	
Information not obtained	84	0.7%	170	0.2%	457	
Arabic	81	0.7%	684	0.7%	109	
Other than English	40	0.4%	1,433	1.4%	26	
Urdu	30	0.3%	2,506	2.4%	11	
Others	268	2.4%	10,362	10.0%		

(Totals will be slightly less than roll total as it is not a statutory requirement to collect ethnicity and language data for pupils below the statutory school age)



Top five ethnicity recorded:	in this area		in Leeds		index	Index (Leeds = 100)
	Count	%	Count	%		
White British	10,069	89.4%	76,737	73.7%	121	
Other White Background	129	1.1%	1,179	1.1%	101	
Indian	125	1.1%	2,163	2.1%	53	
Other Mixed Background	106	0.9%	1,521	1.5%	64	
Mixed Black Caribbean and White	97	0.9%	1,667	1.6%	54	
Others	713	6.3%	20,415	19.6%		

(Totals will be slightly less than roll total as it is not a statutory requirement to collect ethnicity and language data for pupils below the statutory school age)



The annual school census provides information on the ethnicity and first language of pupils who live in and go to school in Leeds. In total, there are 24 ethnic categories and over 170 different first languages.

This profile summarises the top five of each in the area and compares these to the city averages (N.B. the “top five” has been set as a threshold because in most areas the numbers below this are very small).

While this data is specific to school children it is representative of the wider population and provides valuable additional information on the make-up of the area and complements the population profile derived from analysis with Origins software of the GP registered population.

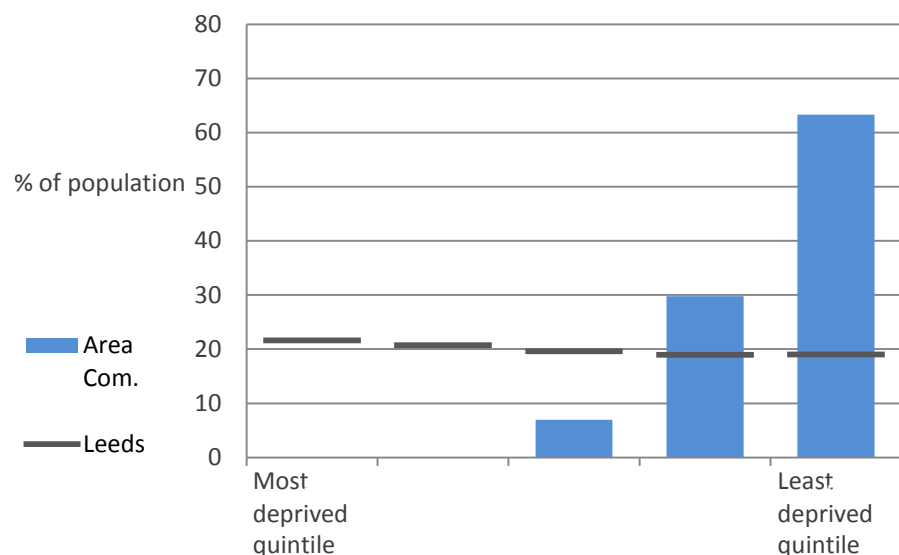
Source: January 2011 School Census

Source: Index of Multiple Deprivation 2007

Office for National Statistics

Deprivation

People living in different levels of deprivation in Outer North West Area Committee



The most deprived *fifth* of Leeds is the area which is arrived at by ranking all 108 MSOAs in Leeds according to their Index of Multiple Deprivation score, and simply taking the lowest fifth of all those MSOAs. This is also known as the **most deprived quintile**. There are of course 4 more quintiles with the last representing the *least deprived* parts of Leeds.

The chart illustrates how the population of this Area Committee is split over these 5 quintiles of deprivation. Overlaid on the chart are the proportions of the Leeds population in the same quintiles.

The MSOA which constitute this Area Committee are listed below the chart. The number of people living in each MSOA is also listed.

MSOA	Population
E02002333	8,161
E02002357	8,062
E02002356	7,699
E02002336	7,090
E02002338	7,055
E02002350	7,005
E02002337	6,470
E02002342	6,155
E02002339	6,118
E02002332	6,109
E02002343	6,078
E02002345	5,798
E02002340	5,798
Total	49,558

About the IMD: The English Indices of Deprivation attempt to measure a broader concept of multiple deprivation, made up of several distinct dimensions, or domains, of deprivation. Seven distinct domains have been identified in the English Indices of Deprivation; Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education Skills and Training Deprivation, Barriers to Housing and Services, Living Environment Deprivation, and Crime. For more details visit <http://www.communities.gov.uk/corporate/researchandstatistics/statistics/subject/indicesdeprivation>

Neighbourhood Index

Neighbourhood Index

The City Council has worked with partner organisations to develop a “Neighbourhood Index” for the city, which provides the Council and its partners with a robust evidence base by which to plan service interventions and to begin to identify and guide resources into the areas of greatest need. It contributes to a more sophisticated understanding of the problems and issues facing local communities and the people in those communities, and provides a framework to benchmark progress in key neighbourhoods and communities.

The Neighbourhood Index is a tool which brings together a wealth of information that paints a broad picture of an area and helps to describe local conditions.

It is a multiple domain and indicator based system that seeks to measure outcomes rather than activities and inputs, and which can be used to measure the general “health” and the relative success of neighbourhoods across the city. The aim has been to provide a framework for the exchange, analysis and sharing of information amongst partners / project deliverers / local communities that:

- can consistently gather, collate, analyse and present information about neighbourhoods
- can identify areas of need and analyse relevant data on the critical issues facing target neighbourhoods
- provides an agreed mechanism for reporting progress in neighbourhoods, and target areas in particular, and monitors success in meeting targets.

The Index is constructed from 27 indicators that have been grouped into the following seven domains, then combined into a domain score and rank, and then into a single Neighbourhood Index score and rank:

Economic Activity	Community Safety
Low Income	Environment
Education	Housing
Health	

The Neighbourhood Index is run once a year and this profile represents the third year of the Index. Comparison profiles are also available showing how conditions in an area have changed over time. The information contained in the Neighbourhood Index provides a contextual background for the detailed health and wellbeing data contained in this profile.

Two profiles are included here as examples.

For further information please contact Jacky Pruckner, Business Transformation Team, Leeds City Council. Email: jacky.pruckner@leeds.gov.uk or telephone: 0113 2476394.

Leeds Neighbourhood Index Year 3

Outer North West Area Committee

On a best fit basis the Outer North West East Area Committee covers thirteen Middle Super Output Areas (MSOA).

The following overview provides a brief summary for each MSOA in the area highlighting any domain scores that are significantly worse than the city average and identifying any domain where an area is ranked in the top 10.

E02002332: Otley – Newalls / Weston Lane

This area is ranked 77 on the combined Neighbourhood Index. Across the individual domains the scores are all higher than the averages for the city, although it should be noted that within the Education domain the area performs less well in terms of Foundation Stage achievement

E02002333: Otley

This area is ranked 82 on the combined Neighbourhood Index. Across the individual domains the scores are all higher than the averages for the city. It should however be noted that within the Health domain the area records a relatively high number of adults receiving social care services and within the Low Income domain the area has a higher than average proportion of older person households that are in receipt of local authority administered benefits.

E02002336: Arthington / Bramhope / Pool / Carlton

This area is ranked 105 on the combined Neighbourhood Index. Across the individual domains the scores are all higher than the averages for the city.

E02002337: Hawksworth Village / Tranmere Park

This area is ranked 104 on the combined Neighbourhood Index. Across the individual domains the scores are well above the average for the city.

E02002338: Guiseley

This area is ranked 88 on the combined Neighbourhood Index. Across the individual domains the area scores are all higher than the averages for the city. It should however be noted that within the Health domain the area has a slightly higher than average incidence of low birthweight.

E02002339: Yeadon – Henshaws / Southway / Westfields

This area is ranked 52 on the combined Neighbourhood Index. Across the individual domains the area scores are generally in line with or slightly higher than the averages for the city, although it should be noted that

within the Health domain the area records a relatively high number of adults receiving social care services.

E02002340: Yeadon – Rufford Park / Yeadon Tarn

This area is ranked 87 on the combined Neighbourhood Index. Across the individual domains the area scores are all higher than the averages for the city.

E02002342: Cookridge / Holt Park

This area is ranked 84 on the combined Neighbourhood Index and across all domains the area scores are higher than the averages for the city.

E02002343: Rawdon North

This area is ranked 89 on the combined Neighbourhood Index. Across the individual domains the area scores are all higher than the averages for the city.

E02002345: Adel

This area is ranked 101 on the combined Neighbourhood Index. Across the individual domains the area scores are all higher than the averages for the city.

E02002350: Horsforth – Brownberries / West End

With a rank of 108 on the combined Neighbourhood Index this is the most successful area in Outer North West and indeed within the city. Across the individual domains the area scores are all well above the averages for the city.

E02002356: Horsforth – New Road Side / Stanhopes / Rawdon South

This area is ranked 98 on the combined Neighbourhood Index. Across the individual domains the area scores are all higher than the averages for the city, although it should be noted that within the Health domain the area records a relatively high number of adults receiving social care services.

E02002357: Horsforth Central

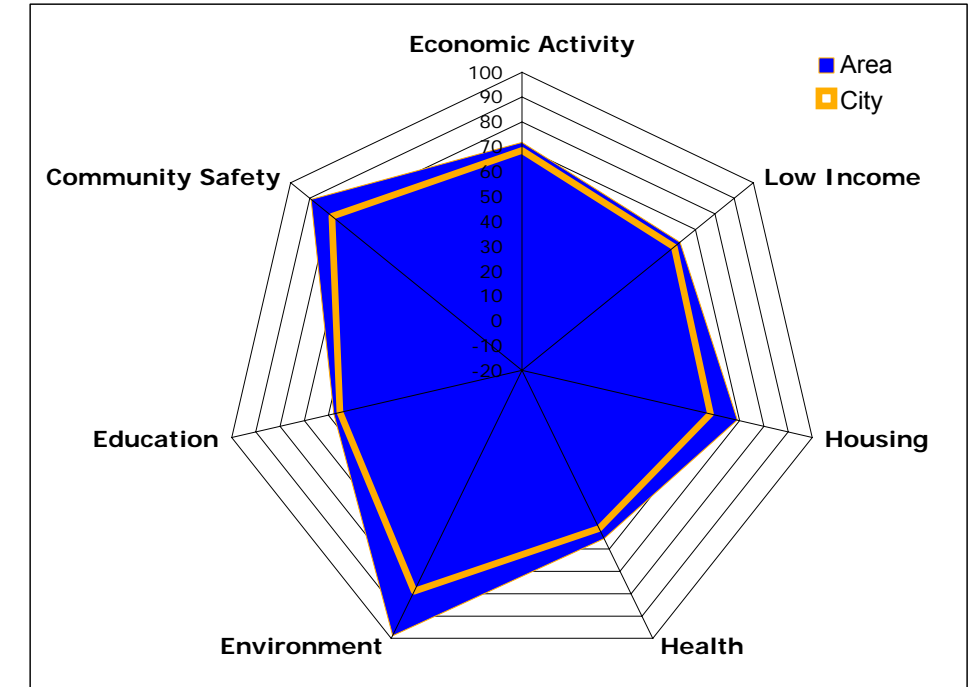
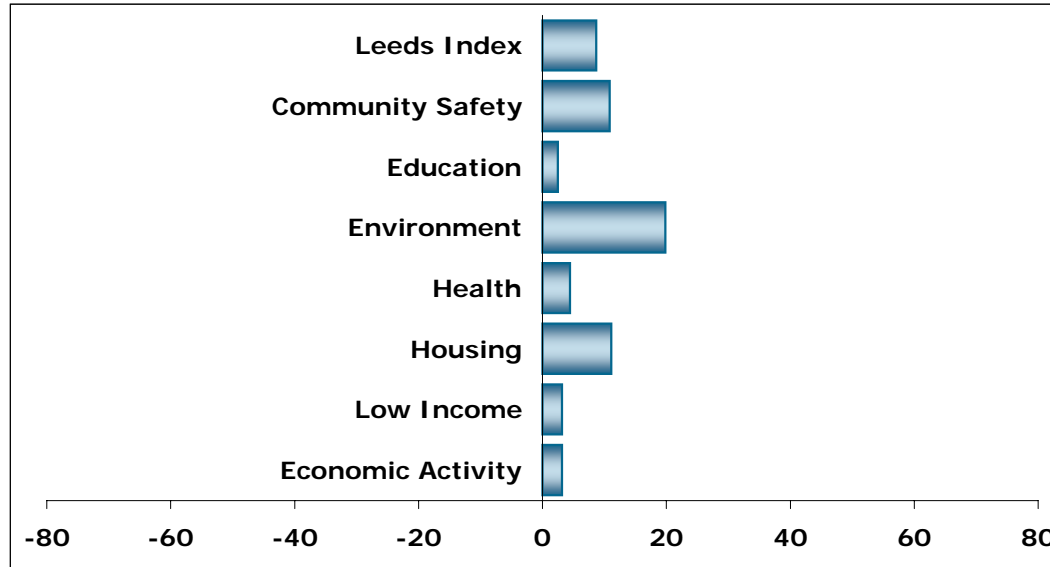
This area is ranked 66 on the combined Neighbourhood Index. Across the individual domains the area scores are close to or above the averages for the city.



Leeds Neighbourhood Index

E02002339: Yeadon - Henshaws, Southway, Westfields

Domain Summary				
2011	Rank	Score	Leeds Score	Diff.
Economic Activity	47	71.61	68.48	3.14
Low Income	45	61.90	58.74	3.16
Housing	78	69.01	57.92	11.09
Health	43	55.27	50.84	4.43
Environment	101	98.75	78.94	19.81
Education	46	57.65	55.19	2.46
Community Safety	69	89.22	78.38	10.85
Leeds Index	52	64.89	56.19	8.69



Key Statistics	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
Population 2009 MYE	6,302		787,701	
Households Liable for Council Tax	2,622		321,098	
BME Population	254	4.21%	77,482	10.83%
Foundation Stage	39	54.17%	4,251	52.49%
Key Stage 2	43	81.13%	5,596	73.09%
Key Stage 4	41	53.95%	3,858	50.16%
Persistent Absenteeism	31	9.54%	2,838	7.60%
NEET (Nov - Jan Average)	16	8.92%	1,596	7.58%
Crimes Against the Person	156	N/A	25,887	N/A
Acquisitive Property Crime	218	N/A	45,203	N/A
Environmental Crimes	61	N/A	11,961	N/A
Community Disorders	368	N/A	51,988	N/A
Average Purchase Price	£149,874	N/A	£170,997	N/A
Price / Income Ratio	6.39	N/A	5.24	N/A
Housing Turnover	273	10.03%	47,987	14.23%
Empty Homes (90+ days)	126	4.63%	21,110	6.26%
Children in Workless Households	170	15.41%	25,184	18.88%
Households Receiving In-Work Benefits	148	5.64%	15,569	4.85%
60+ Households In Receipt of Benefits	364	13.88%	33,200	10.34%
Court Payment Orders	159	N/A	23,562	N/A
Job Seekers' Allowance	124	3.12%	22,675	4.34%
Incapacity Benefit	260	6.54%	30,830	5.90%
Lone Parent Income Support	60	1.51%	8,710	1.67%
Circulatory Disease Mortality	N/A	60.36	N/A	79.13
Cancer Mortality	N/A	136.90	N/A	117.74
Low Birthweight	N/A	7.63	N/A	7.86
Adult Social Care	167	N/A	12,836	N/A
Fly Tipping	11	N/A	4,375	N/A
Graffiti	6	N/A	3,141	N/A
Waste Issues	8	N/A	6,852	N/A

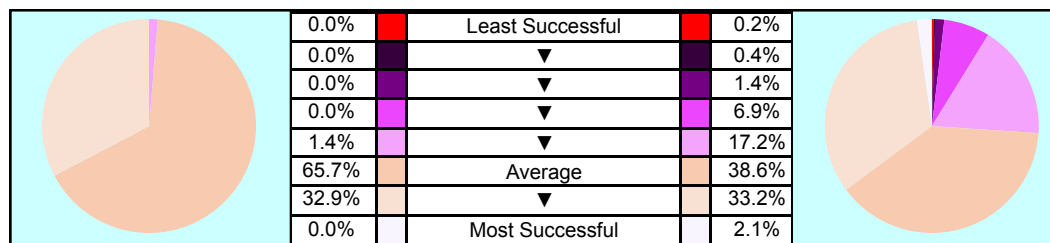
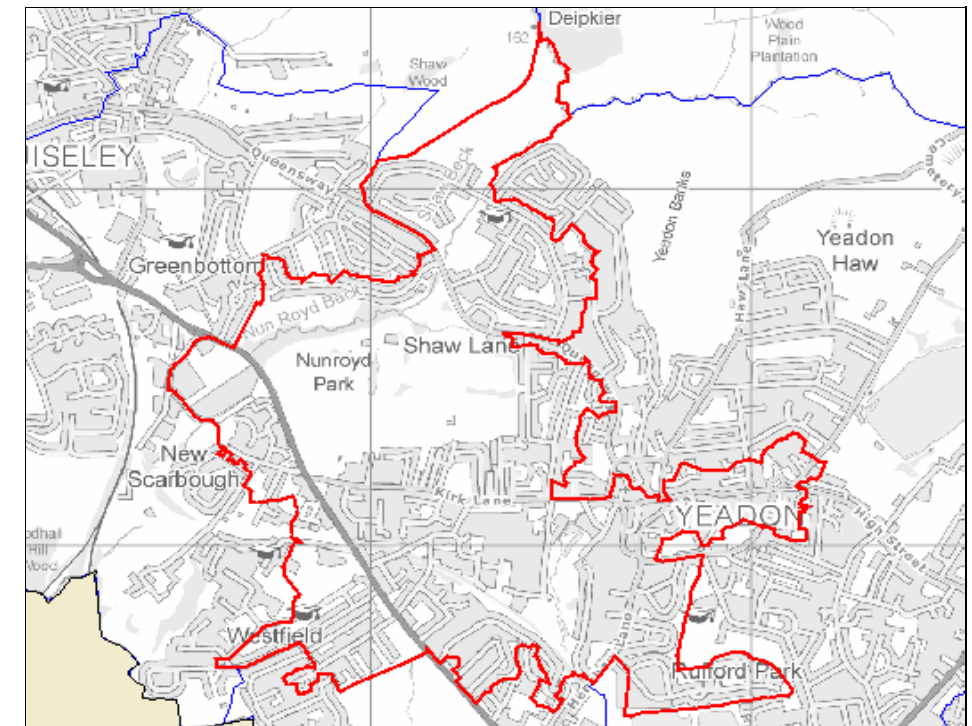
This area is located in the Outer North West. The northern boundary follows Nunroyd Beck, the south west runs behind the housing estates along New Road, while the south takes in the Henshaw estate, heads north via Yeadon Main Street, finishing near the Queensway Estate.

The population is predominantly White British and the age breakdown shows a higher than average proportion of older people.

59.5% of households are in owner occupation and a further 25% are renting from the local authority (through an ALMO). Semi-detached housing accounts for 34% of the stock, terraced housing for 32% and purpose built flats for a further 21.5%. 70% of properties are classified in Council Tax Bands A and B.

The area contains Yeadon Westfield Junior School, St Peter and St Paul RC Primary School, Queensway Primary School, Yeadon Library, Yeadon Town Hall and Yeadon Post Office.

The area is home to Yeadon District Centre, an important shopping centre and a hub of the local economy. The area also contains some tourist attraction such as Nunroyd Park – Sports ground and Playing Field and Kirk Lane Park.



The pie charts represent the weighted proportions of individual indicators falling into each band

Adult Social Care Community Based Service Users	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Learning Disabilities	19	N/A	1,448	N/A
Mental Health	22	N/A	2,424	N/A
Physical Disability	118	N/A	8,374	N/A
Other Reasons	8	N/A	590	N/A

Ethnicity (2001 Census)	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
White British	5,774	95.79%	637,872	89.17%
Irish	45	0.75%	8,532	1.19%
Black Caribbean & White	15	0.25%	4,577	0.64%
Black African & White	3	0.05%	867	0.12%
Asian & White	6	0.10%	2,541	0.36%
Indian	38	0.63%	12,296	1.72%
Pakistani	8	0.13%	15,064	2.11%
Bangladeshi	3	0.05%	2,531	0.35%
Black Caribbean	10	0.17%	6,737	0.94%
Black African	6	0.10%	2,404	0.34%
Chinese	26	0.43%	3,468	0.48%

Faith (2001 Census)	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
Christian	4,305	71.44%	492,656	68.87%
Buddhist	24	0.40%	1,603	0.22%
Hindu	20	0.33%	4,189	0.59%
Jewish	9	0.15%	8,233	1.15%
Muslim	23	0.38%	21,385	2.99%
Sikh	8	0.13%	7,601	1.06%

Supplementary Health Information	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
CHD Prevalance	N/A	5%	N/A	3.5%
Smoking Prevalance	N/A	25%	N/A	22.8%

Age (2009 M.Y.E.)	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Children	1,103	17.50%	133,396	16.93%
Working Age	3,977	63.11%	522,769	66.37%
Older People	1,222	19.39%	131,536	16.70%

Disability (2001 Census)	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Limiting Long-Term Illness	1,201	19.93%	128,647	17.98%

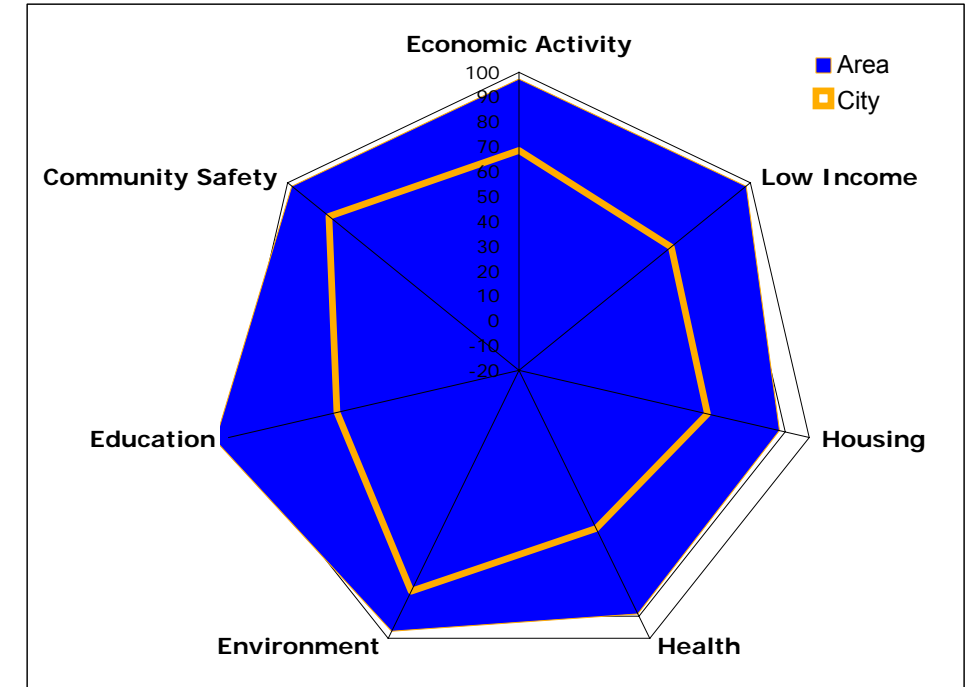
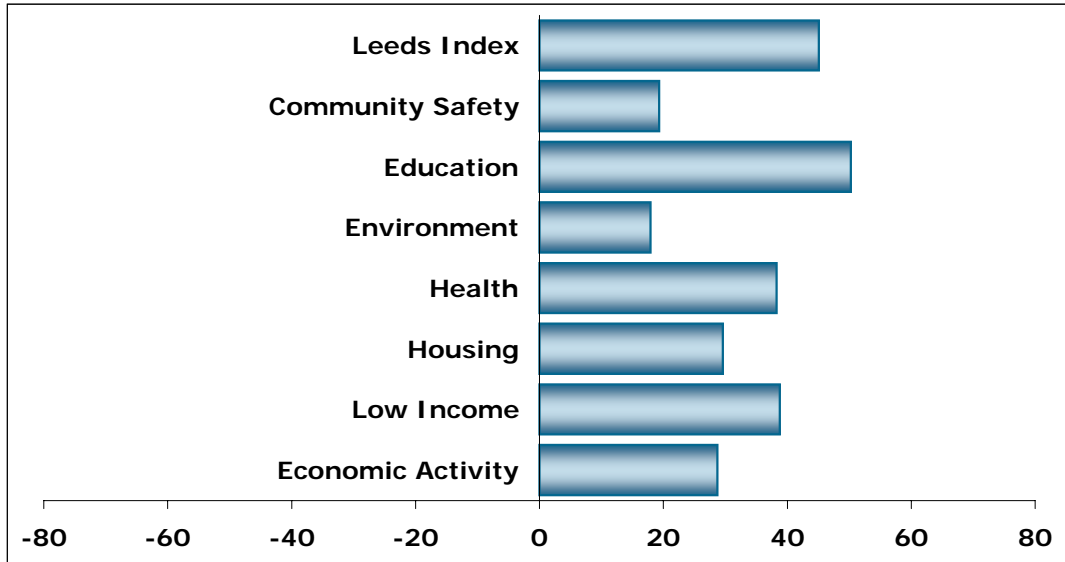
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Leeds Neighbourhood Index

E02002350: Horsforth - Brownberries, West End

Domain Summary				
2011	Rank	Score	Leeds Score	Diff.
Economic Activity	103	97.21	68.48	28.73
Low Income	108	97.51	58.74	38.77
Housing	105	87.50	57.92	29.58
Health	104	89.12	50.84	38.28
Environment	85	96.85	78.94	17.91
Education	108	105.42	55.19	50.23
Community Safety	101	97.69	78.38	19.31
Leeds Index	108	101.30	56.19	45.10



Key Statistics	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
Population 2009 MYE	6,514		787,701	
Households Liable for Council Tax	2,578		321,098	
BME Population	247	3.93%	77,482	10.83%
Foundation Stage	50	79.37%	4,251	52.49%
Key Stage 2	65	94.20%	5,596	73.09%
Key Stage 4	65	86.67%	3,858	50.16%
Persistent Absenteeism	9	2.62%	2,838	7.60%
NEET (Nov - Jan Average)	1	0.57%	1,596	7.58%
Crimes Against the Person	62	N/A	25,887	N/A
Acquisitive Property Crime	178	N/A	45,203	N/A
Environmental Crimes	23	N/A	11,961	N/A
Community Disorders	193	N/A	51,988	N/A
Average Purchase Price	£285,602	N/A	£170,997	N/A
Price / Income Ratio	8.02	N/A	5.24	N/A
Housing Turnover	213	7.98%	47,987	14.23%
Empty Homes (90+ days)	114	4.27%	21,110	6.26%
Children in Workless Households	21	2.08%	25,184	18.88%
Households Receiving In-Work Benefits	22	0.85%	15,569	4.85%
60+ Households In Receipt of Benefits	101	3.92%	33,200	10.34%
Court Payment Orders	42	N/A	23,562	N/A
Job Seekers' Allowance	37	0.94%	22,675	4.34%
Incapacity Benefit	95	2.40%	30,830	5.90%
Lone Parent Income Support	10	0.25%	8,710	1.67%
Circulatory Disease Mortality	N/A	44.17	N/A	79.13
Cancer Mortality	N/A	60.59	N/A	117.74
Low Birthweight	N/A	5.81	N/A	7.86
Adult Social Care	98	N/A	12,836	N/A
Fly Tipping	5	N/A	4,375	N/A
Graffiti	13	N/A	3,141	N/A
Waste Issues	8	N/A	6,852	N/A

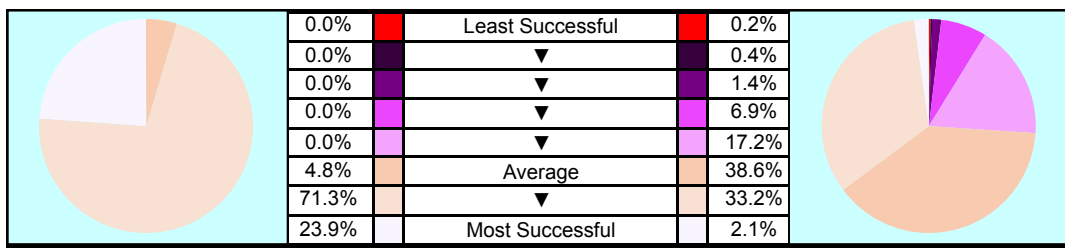
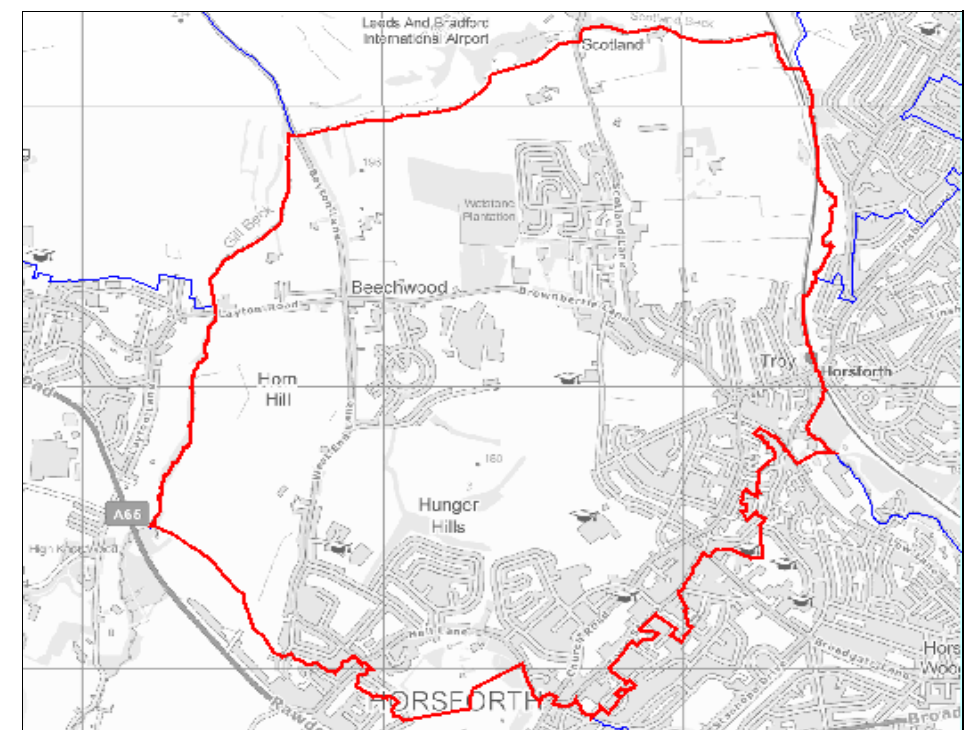
The area is located in the Outer North West. It is bounded by Gill, Scotland and Moseley Becks to the west, north and east respectively and contains parts of Horsforth, including Southway, West End and the Brownberries.

The population is predominantly White British and the age breakdown shows a slightly higher than average proportion of older people.

90% of households are in owner-occupation and just over half of these are owned outright. Semi-detached housing accounts for 42% of the stock with detached housing accounting for a further 40%. 75% of properties are classified in Council Tax Bands C-E.

The area contains the Trinity and All Saints University, Horsforth High School, West End Primary School, Westbrook Lane Primary School, St Margaret's C of E Primary School, Horsforth Housing Office, Horsforth Rail Station, Horsforth Post Office, Horsforth Library and Horsforth Youth Centre.

This area is home to Horsforth Town Centre – an important market town and a hub of local economy. It also contains many tourist attractions, including Horsforth Hall Park, Japanese Garden, Horsforth Village Museum, Horsforth Golf Club, King George's Field – Cricket ground and Football ground.



The pie charts represent the weighted proportions of individual indicators falling into each band

Adult Social Care Community Based Service Users	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Learning Disabilities	34	N/A	1,448	N/A
Mental Health	16	N/A	2,424	N/A
Physical Disability	45	N/A	8,374	N/A
Other Reasons	3	N/A	590	N/A

Ethnicity (2001 Census)	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
White British	6,032	96.07%	637,872	89.17%
Irish	41	0.65%	8,532	1.19%
Black Caribbean & White	9	0.14%	4,577	0.64%
Black African & White	3	0.05%	867	0.12%
Asian & White	9	0.14%	2,541	0.36%
Indian	37	0.59%	12,296	1.72%
Pakistani	15	0.24%	15,064	2.11%
Bangladeshi	0	0.00%	2,531	0.35%
Black Caribbean	3	0.05%	6,737	0.94%
Black African	3	0.05%	2,404	0.34%
Chinese	14	0.22%	3,468	0.48%

Faith (2001 Census)	Profiled Area		Leeds M.D.	
	Number	Rate	Number	Rate
Christian	5,050	80.24%	492,656	68.87%
Buddhist	3	0.05%	1,603	0.22%
Hindu	17	0.27%	4,189	0.59%
Jewish	3	0.05%	8,233	1.15%
Muslim	22	0.35%	21,385	2.99%
Sikh	17	0.27%	7,601	1.06%

Age (2009 M.Y.E.)	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Children	1,008	15.47%	133,396	16.93%
Working Age	3,954	60.70%	522,769	66.37%
Older People	1,552	23.83%	131,536	16.70%

Supplementary Health Information	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
CHD Prevalance	N/A	4%	N/A	3.5%
Smoking Prevalance	N/A	11%	N/A	22.8%

Disability (2001 Census)	Profiled Area		Leeds MD	
	Number	Rate	Number	Rate
Limiting Long-Term Illness	872	13.82%	128,647	17.98%

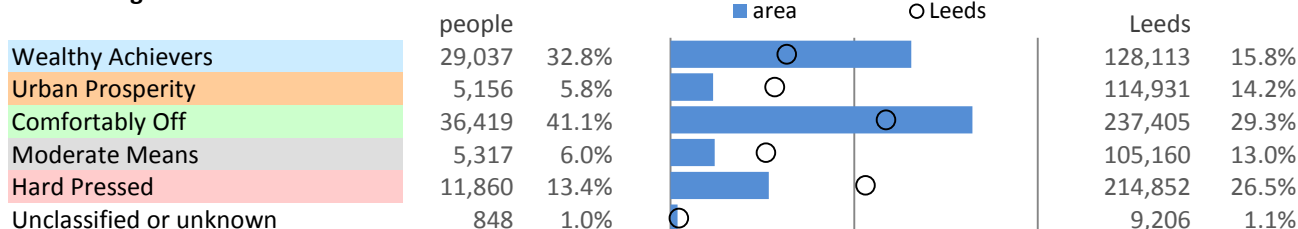
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2010 Population Acorn Profile

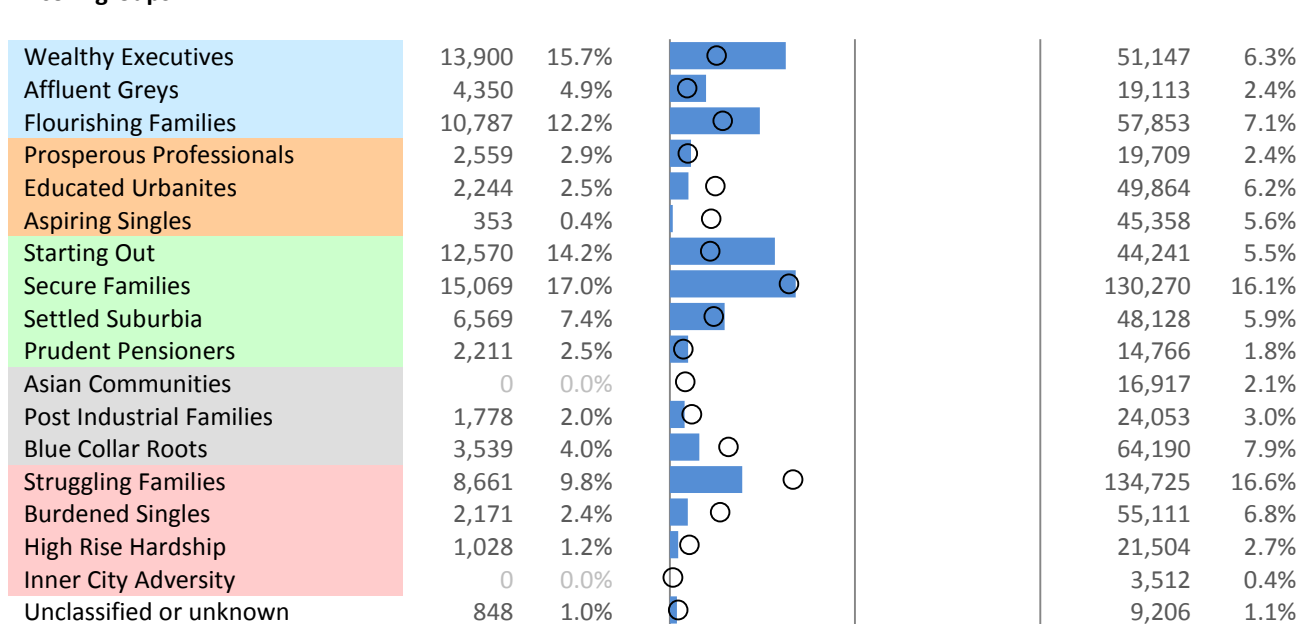
Acorn is a nationwide population segmentation tool. It combines geography with demographics and lifestyle information, and places where people live with their underlying characteristics and behaviour, to create a tool for understanding the different types of people in different areas throughout the country. This data is modelled using the standardised population provided by JICPOP, *not* Leeds GP patients. see www.jicpops.co.uk

This sheet compares the population of Outer North West Area Committee with the whole population of Leeds in terms of Acorn groups. For instance 13.4% of the population are in the 'Hard Pressed' category, compared to 26.5% of the population of Leeds.

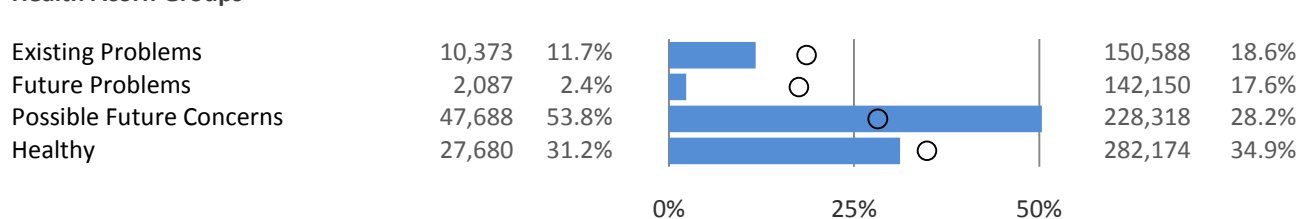
Acorn categories



Acorn groups



Health Acorn Groups



The population of Outer North West Area Committee is divided between Acorn categories in a manner which bears no resemblance to the way the Leeds population is divided. For instance, the Wealthy Achievers category has very much higher prevalence here than it does in the Leeds population as a whole.

Outer North West area is made up of 13 MSOAs, with a large proportion of “wealthy achievers” and “comfortably off” which make up 73% of the population, this is well above the Leeds proportion. In terms of Health Acorn Data, the area has much lower proportions than Leeds for the “existing problems” and “future problems” groups but has a much higher rate of “possible future concerns”.

For more information about Acorn, including the characteristics of the categories, groups and types listed here, visit <http://www.caci.co.uk/Acorn-classification.aspx> and <http://www.caci.co.uk/healthacorn.aspx>

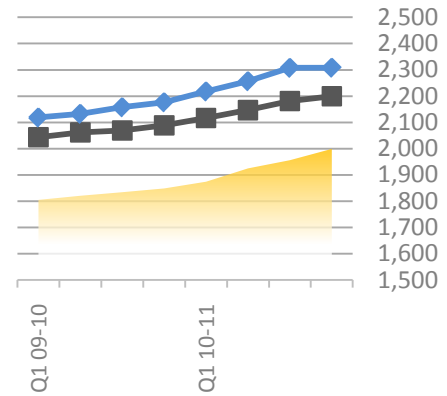
Cancer and CHD

note: chart scales vary to reveal maximum detail, be careful with visual comparisons between charts

Cancer rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	2,119	2,043	1,805
Qtr 2 09-10	2,133	2,062	1,821
Qtr 3 09-10	2,158	2,069	1,834
Qtr 4 09-10	2,177	2,088	1,849
Qtr 1 10-11	2,218	2,116	1,874
Qtr 2 10-11	2,257	2,147	1,925
Qtr 3 10-11	2,308	2,181	1,956
Qtr 4 10-11	2,308	2,199	1,999

Rates are *age standardised* and per 100,000

Deprived quintile Leeds This area



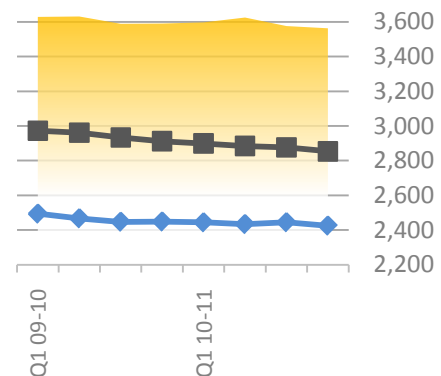
The Outer North West Area Committee has age standardised cancer rates which are generally the same as Leeds, and much higher than that of the deprived quintile. The three MSOA with highest age standardised rates of cancer are E02002342, E02002345, and E02002343. In addition, age standardised CHD rates are generally much lower than Leeds, and much lower than that of the deprived quintile. The three MSOA with highest age standardised rates of CHD are E02002339, E02002340, and E02002357.

The main risk factors for cancer are: growing older, smoking, sun, ionising radiation and chemicals, some viruses, family history of cancer, alcohol, poor diet, lack of physical activity, or being overweight. Life expectancy for people with cancer is lower in more deprived communities. The range of risk factors suggests many cancers are potentially preventable. CHD has a close association with deprivation as well as key lifestyle factors such as smoking, being overweight and excessive alcohol use. From a recent CVD mortality audit within Leeds we know that being on a register has a positive effective on increasing both life expectancy and quality of life.

In terms of risk factors the smoking rate is lower than the Leeds average. The standardised rate of obesity is much lower than the Leeds average. This area made up of 13 MSOAs mainly “wealthy” and “comfortable off” and in general has low levels of deprivation.

CHD rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	2,494	2,973	3,628
Qtr 2 09-10	2,467	2,961	3,631
Qtr 3 09-10	2,447	2,934	3,589
Qtr 4 09-10	2,449	2,912	3,590
Qtr 1 10-11	2,444	2,899	3,597
Qtr 2 10-11	2,434	2,885	3,625
Qtr 3 10-11	2,445	2,876	3,576
Qtr 4 10-11	2,425	2,854	3,563

Rates are *age standardised* and per 100,000



About the GP records data collection: The PCT runs a quarterly collection of data from GP systems, forming a picture over time of how conditions are recorded by GPs across Leeds. The automated data collections note the most recent occurrences of specific disease codes in each patients record as defined by the Quality Outcomes Framework (QOF). The data includes age, gender and location information, giving Leeds a much greater level of detail than standard QOF data and is a benefit of the trusting relationship we have developed with practices.

Age standardised rates: Are calculated using the date-relevant GP registered populations for those practices which partook in the data collection. Some practices opted not to submit data for certain audits and therefore their population are not part of rate calculations. **Deprived QUINTILE:** The deprived quintile is the most deprived fifth of all MSOA in Leeds. 'Deprived Leeds' as used elsewhere, is the LSOA in Leeds which are in the 10% most deprived in England - a more exact definition, but GP audit data is restricted to MSOA level and cannot be resolved to the finer level of detail LSOAs offer.

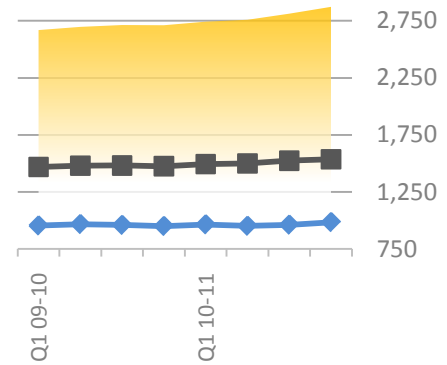
COPD and Diabetes

note: chart scales vary to reveal maximum detail, be careful with visual comparisons between charts

COPD rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	955	1,468	2,669
Qtr 2 09-10	968	1,481	2,697
Qtr 3 09-10	960	1,482	2,713
Qtr 4 09-10	951	1,475	2,711
Qtr 1 10-11	965	1,495	2,743
Qtr 2 10-11	952	1,500	2,759
Qtr 3 10-11	962	1,524	2,813
Qtr 4 10-11	985	1,537	2,873

Rates are *age standardised* and per 100,000

Deprived quintile Leeds This area



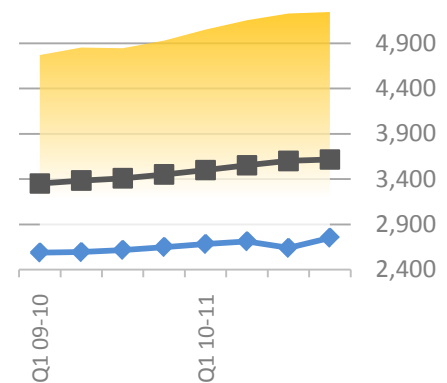
The Outer North West Area Committee has age standardised COPD rates which are generally very much lower than Leeds, and very much lower than that of the deprived quintile. The three MSOA with highest age standardised rates of COPD are E02002339, E02002357, and E02002340. In addition, age standardised diabetes rates are generally much lower than Leeds, and very much lower than that of the deprived quintile. The three MSOA with highest age standardised rates of Diabetes are E02002339, E02002343, and E02002332.

COPD is a disease of the lungs and is a key cause of premature mortality in Leeds. It is associated with deprivation and smoking. COPD is often identified late, reducing options for management to improve quality of life or to slow down the progression of the disease. Diabetes consists of type 1 and 2. Type 2 is the most common and is strongly associated with obesity, other lifestyle factors, particular population groups and deprivation. The NHS Health Check (a vascular risk assessment and identification programme) is a systematic way of identifying people with diabetes, it is estimated that the prevalence in Leeds should be around 6.7% but the recorded prevalence on GP system for Leeds is 3.6%.

The slightly low age standardised rate of COPD compared to Leeds reflects the lower than average rate of GP recorded smoking in this area.

Diabetes rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	2,590	3,352	4,769
Qtr 2 09-10	2,594	3,384	4,852
Qtr 3 09-10	2,618	3,410	4,844
Qtr 4 09-10	2,650	3,452	4,929
Qtr 1 10-11	2,683	3,500	5,050
Qtr 2 10-11	2,713	3,554	5,153
Qtr 3 10-11	2,640	3,601	5,228
Qtr 4 10-11	2,753	3,616	5,244

Rates are *age standardised* and per 100,000



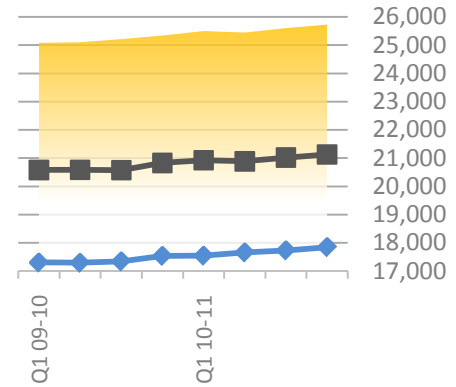
About the GP records data collection: The PCT runs a quarterly collection of data from GP systems, forming a picture over time of how conditions are recorded by GPs across Leeds. The automated data collections note the most recent occurrences of specific disease codes in each patients record as defined by the Quality Outcomes Framework (QOF). The data includes age, gender and location information, giving Leeds a much greater level of detail than standard QOF data and is a benefit of the trusting relationship we have developed with practices.

Age standardised rates: Are calculated using the date-relevant GP registered populations for those practices which partook in the data collection. Some practices opted not to submit data for certain audits and therefore their population are not part of rate calculations. **Deprived QUINTILE:** The deprived quintile is the most deprived fifth of all MSOA in Leeds. 'Deprived Leeds' as used elsewhere, is the LSOA in Leeds which are in the 10% most deprived in England - a more exact definition, but GP audit data is restricted to MSOA level and cannot be resolved to the finer level of detail LSOAs offer.

Obesity and Smoking

note: chart scales vary to reveal maximum detail, be careful with visual comparisons between charts

Obesity rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	17,306	20,581	25,081
Qtr 2 09-10	17,296	20,587	25,104
Qtr 3 09-10	17,347	20,572	25,214
Qtr 4 09-10	17,537	20,831	25,340
Qtr 1 10-11	17,545	20,924	25,498
Qtr 2 10-11	17,660	20,887	25,445
Qtr 3 10-11	17,732	21,020	25,603
Qtr 4 10-11	17,847	21,130	25,726



Rates are *age standardised* and per 100,000

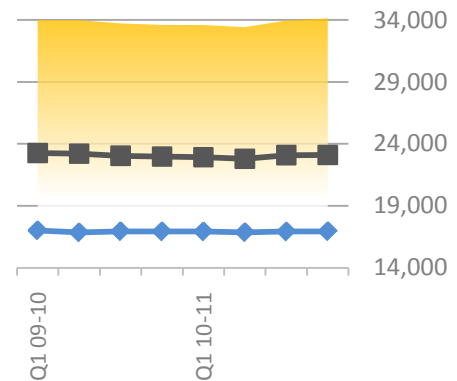
Deprived quintile Leeds This area

The Outer North West Area Committee has age standardised obesity rates which are generally much lower than Leeds, and much lower than that of the deprived quintile. The three MSOA with highest age standardised rates of Obesity are E02002339, E02002332, and E02002357. In addition, age standardised smoking rates are generally much lower than Leeds, and very much lower than that of the deprived quintile. The three MSOA with highest age standardised rates of Smoking are E02002339, E02002332, and E02002357.

The latest Health Survey for England (HSE) data shows that nearly 1 in 4 adults, and over 1 in 10 children aged 2-10, are obese and the trend is set to increase. Obesity can have a severe impact on people's health. Around 10% of all cancer deaths among non-smokers are related to obesity. The risk of coronary artery disease and type 2 diabetes directly increases with increasing levels of obesity e.g. levels of type 2 diabetes are about 20 times greater for people who are very obese. These diseases can shorten life expectancy.

The use of tobacco is the primary cause of preventable disease and premature death. It is not only harmful to smokers but also to the people around them through the damaging effects of second-hand smoke. Smoking rates are much higher in some social groups, including those with the lowest incomes. These groups suffer the highest burden of smoking-related illness and death. This is the single biggest cause of inequalities in death rates between the richest and poorest in our communities. Levels of smoking have fallen since the 1960s. However this decline in smoking rates has stopped and may be reversing.

Smoking rates	This area	Leeds	Deprived quintile
Qtr 1 09-10	17,018	23,268	33,989
Qtr 2 09-10	16,853	23,213	33,989
Qtr 3 09-10	16,944	23,039	33,720
Qtr 4 09-10	16,934	22,982	33,601
Qtr 1 10-11	16,927	22,922	33,589
Qtr 2 10-11	16,866	22,793	33,422
Qtr 3 10-11	16,923	23,089	33,950
Qtr 4 10-11	16,946	23,112	34,123



Rates are *age standardised* and per 100,000

About the GP records data collection: The PCT runs a quarterly collection of data from GP systems, forming a picture over time of how conditions are recorded by GPs across Leeds. The automated data collections note the most recent occurrences of specific disease codes in each patients record as defined by the Quality Outcomes Framework (QOF). The data includes age, gender and location information, giving Leeds a much greater level of detail than standard QOF data and is a benefit of the trusting relationship we have developed with practices.

Age standardised rates: Are calculated using the date-relevant GP registered populations for those practices which partook in the data collection. Some practices opted not to submit data for certain audits and therefore their population are not part of rate calculations. **Deprived QUINTILE:** The deprived quintile is the most deprived *fifth* of all MSOA in Leeds. 'Deprived Leeds' as used elsewhere, is the LSOA in Leeds which are in the 10% most deprived in England - a more exact definition, but GP audit data is restricted to MSOA level and cannot be resolved to the finer level of detail LSOAs offer.

Calculated using the best fit MSOA for this area

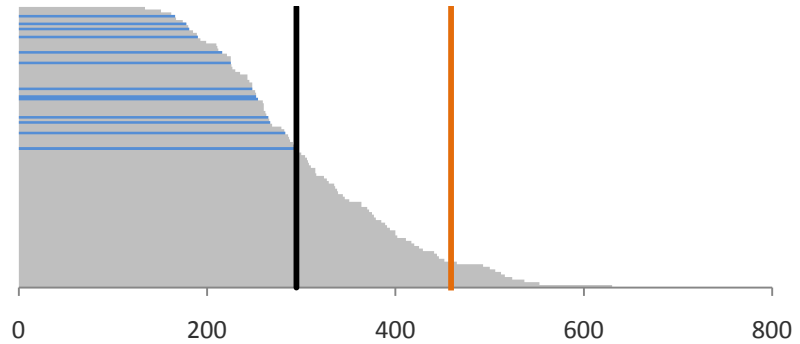
Mortality rates, all causes, under 75s 2006-8

Mortality rates per hundred thousand for all 108 MSOA in Leeds are ranked in the charts below. The MSOA comprising this report area are highlighted in blue. Leeds and Deprived Leeds under 75s mortality rates are shown as vertical lines for comparison.

MSOA of this area, listed in corresponding order to their position in the main charts

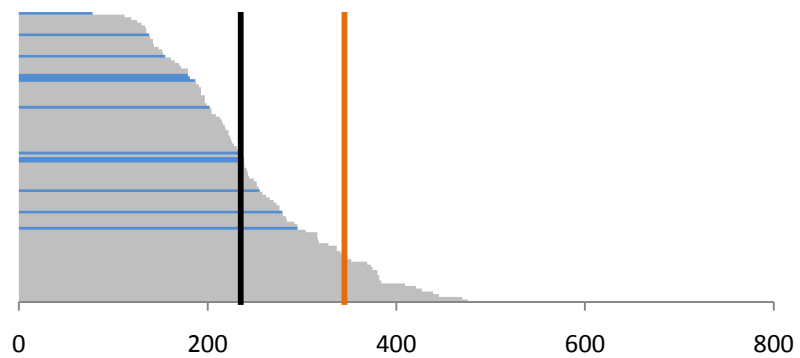
- E02002342
- E02002350
- E02002345
- E02002336
- E02002356
- E02002337
- E02002338
- E02002340
- E02002343
- E02002339
- E02002357
- E02002332
- E02002333

Male and female, all causes per 100,000



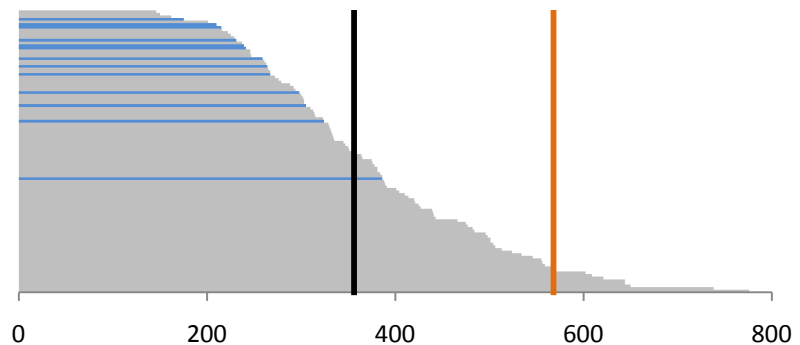
Female, all causes per 100,000

- E02002342
- E02002336
- E02002345
- E02002340
- E02002350
- E02002332
- E02002356
- E02002338
- E02002337
- E02002339
- E02002343
- E02002333
- E02002357



Male, all causes per 100,000

- E02002350
- E02002345
- E02002337
- E02002356
- E02002357
- E02002336
- E02002343
- E02002342
- E02002338
- E02002339
- E02002333
- E02002340
- E02002332



■ This area ■ All MSOAs — Leeds — Deprived Leeds

These charts show at MSOA level the mortality rates within Outer North West Area. This area is made up of 13 MSOAs which mainly fall into “wealthy achievers” and “comfortably off”. Horsforth Central and Otley are outliers in terms of female mortality, both have higher mortality rates than the Leeds average with cancer being the leading cause. (visit <http://www.westyorkshireobservatory.org/explorer/resources/> for in depth profiles on MSOAs)

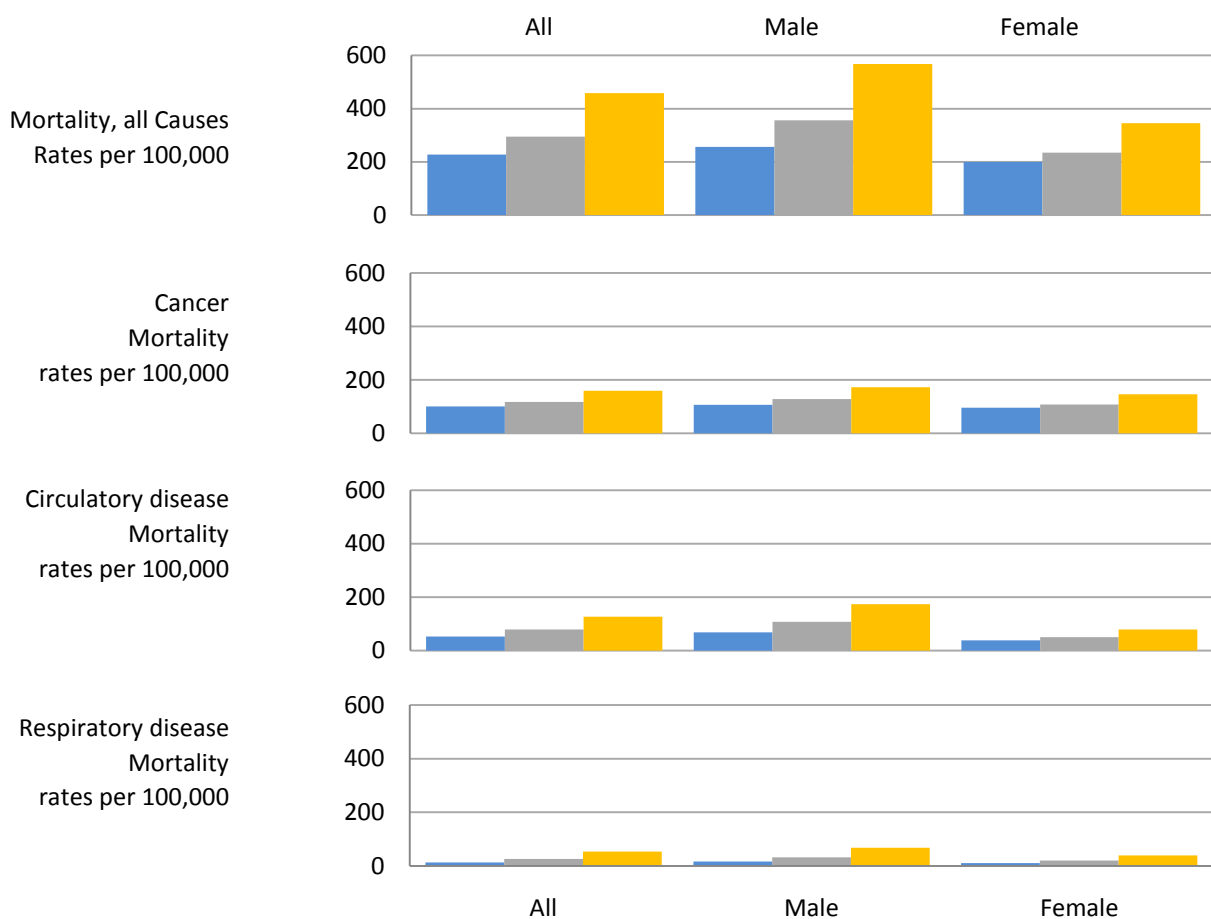
Source: ONS deaths extract, GP registered populations.

Mortality rates, under 75s 2006-8

Mortality rates per hundred thousand for this Area Committee are listed below for all causes and three major sub headings - cancer mortality, circulatory disease mortality, and respiratory disease mortality. A rate is shown for Males, Females, and All. The charts display this information alongside that for Leeds and Deprived Leeds.

Outer North West Area Committee	All	Males	Females
Mortality, all Causes	227.0	255.9	200.0
Cancer mortality	100.9	106.8	96.4
Circulatory disease mortality	53.3	68.5	38.6
Respiratory disease mortality	13.5	17.0	10.4

- Area Committee
- Leeds
- Deprived Leeds



Mortality rates for Outer North West area are mostly below the Leeds average.

Source: ONS deaths extract, GP registered populations. **'Deprived Leeds'** is the LSOA in Leeds which are in the 10% most deprived in England.

Alcohol admissions 2009-10

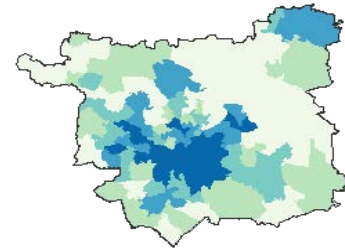
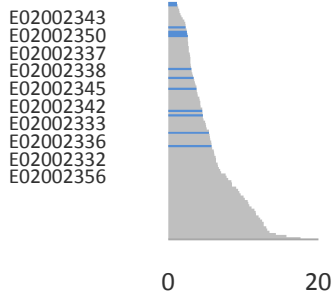
Alcohol *specific* admissions (Where alcohol is the single cause of admission)

	Count
All	289
Male	184
Female	105

This area rate
3.3 per 1,000
4.2 per 1,000
2.4 per 1,000

Leeds rate
6.0 per 1,000
8.1 per 1,000
3.8 per 1,000

■ This area
□ Leeds



All MSOAs in Leeds ranked by their alcohol specific admissions rate per 1000 population. Those in this area are highlighted in blue and listed in order of appearance.

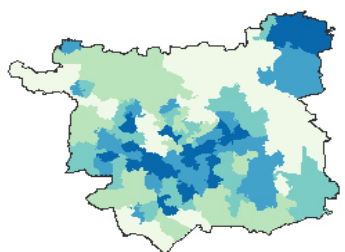
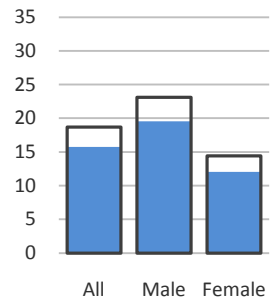
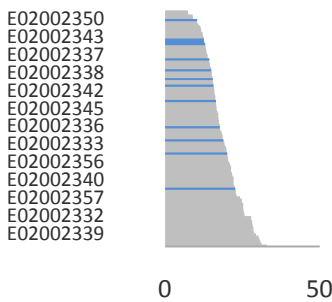
This area: Alcohol specific admissions rates per 1000 population.

Map of all MSOAs in Leeds, showing alcohol specific admissions divided into five groups each with about a fifth of all MSOAs.

Alcohol *attributable* admissions (Where alcohol is not the entire cause of admission.)

	This area rate
All	15.7 per 1,000
Male	19.5 per 1,000
Female	12 per 1,000

Leeds rate
18.7 per 1,000
23.1 per 1,000
14.4 per 1,000



All MSOAs in Leeds ranked by their alcohol attributable admissions rate per 1000 population. Those in this area are highlighted in blue and listed in order of appearance.

This area: Alcohol attributable admissions rates per 1000 population.

Map of all MSOAs in Leeds, showing alcohol attributable admissions divided into five groups each with about a fifth of all MSOAs.

The overall alcohol specific admission rate in Outer North West Area Committee is much lower than the Leeds rate. As is normal, the Male rate is higher than the Female rate. When we look at attributable admissions, the overall rate in Outer North West Area Committee is lower than the Leeds rate. As is normal, the Male attributable admissions rate is much higher than the Female rate.

The misuse of alcohol is associated with a wide range of chronic health conditions such as liver disease, hypertension, some cancers, impotence and mental health problems. It has a direct association with accidents, criminal offending, domestic violence and risky sexual behaviour. It also has hidden impacts on educational attainment and workplace productivity. Within this area, alcohol specific rates are well below average, attributable admission rates are slightly lower than the Leeds average.

Source: Hospital episode statistics 2009-10 and NWPCHO alcohol attributable fractions - details of how attributable admissions are calculated can be found at <http://www.nwpho.net/nwpho/publications/alcoholattributablefractions.pdf>. Maps show data split into groups each holding about a fifth of 108 MSOA in Leeds, for full scale maps with legends please contact Adam.taylor@nhsleeds.nhs.uk. Rates are calculated against GP registered and Leeds resident population January 2010.

Adult Social Care (ASC)

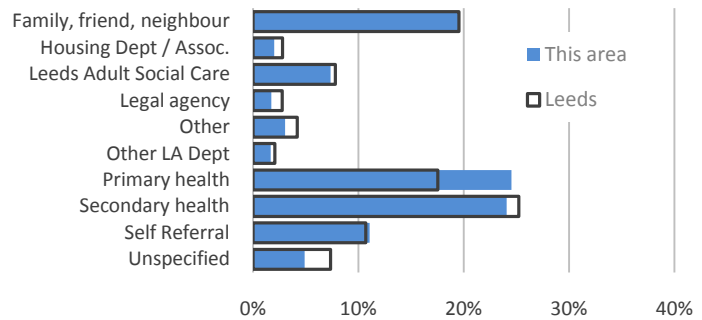
Source: LCC Adult Social Care data 2010-11

Calculated on an MSOA basis

Referrals to ASC by source

1,899 which is 9.6% of the 19,831 Leeds total

Chart shows the % contribution to the total for various referral sources

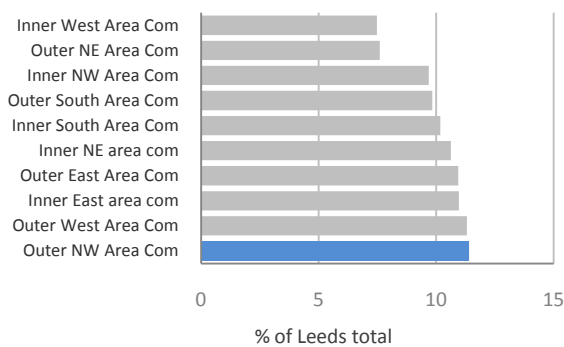


Signposted referrals

In this area, 21% of referrals are signposted for action by other agencies. In Leeds as a whole, this figure is 15%. A referral is signposted by ASC when it is considered to be more suitable for another agency.

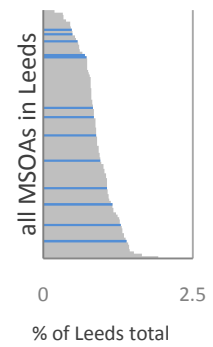
Adult Social Care assessments

This area had 835 completed assessments. This is 11.4% of the Leeds total.



- E02002343
- E02002350
- E02002337
- E02002345
- E02002338
- E02002336
- E02002342
- E02002340
- E02002332
- E02002339
- E02002356
- E02002357
- E02002333

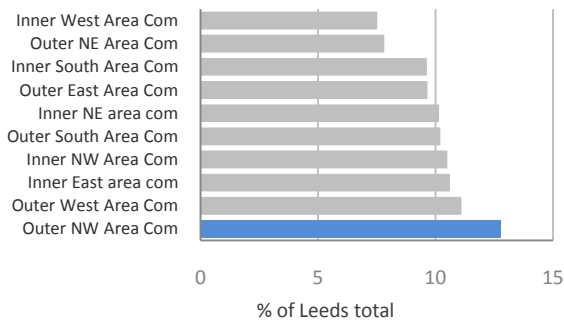
list of MSOAs in this area in rank order as charted



% of Leeds total

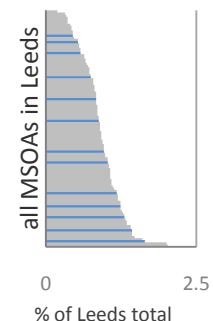
People receiving Adult Social Care services

599 people received services from Adult Social Care, that is 12.8% of the 4,691 total for Leeds.



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- E02002345
- E02002336
- E02002340
- E02002342
- E02002332
- E02002356
- E02002339
- E02002357
- E02002333

list of MSOAs in this area in rank order as charted



% of Leeds total

What proportion of completed ASC assessments led to services being provided?

In this area, 72% of completed assessments led to a service being provided. In Leeds this figure is 64%

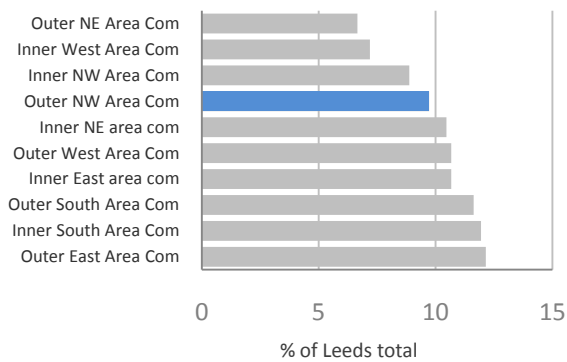
This is an area of Leeds in which a higher proportion of the population are middle aged or older. This area has a disproportionately low number of referrals for adult social care. Primary Health Care agencies are disproportionately high referrers. This area is the highest in the city for the proportion of referrals which go on to be assessed and nearly three quarters of assessments lead to people receiving services. This is the highest proportion in the city.

Referrals data includes 1,233 referrals which are attributed to 'Outside Leeds' or 'Unspecified' locations. These 1,233 referrals are not included in the Leeds total of 19,831 mentioned above as they are not attributed to an MSOA in Leeds.

Provision and safeguarding

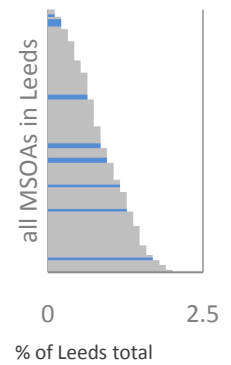
ASC supported residential and nursing care admissions (18+ years)

This area had 92 admissions. Which is 9.7% of the Leeds total of 946.



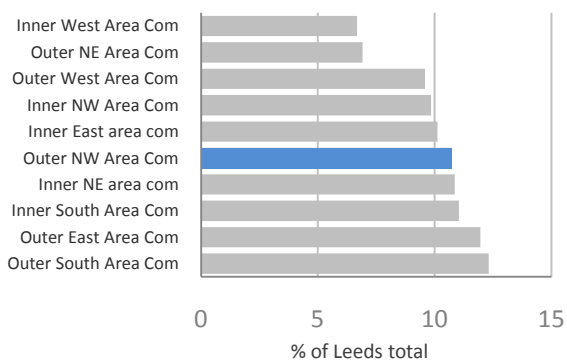
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list of MSOAs in this area in rank order as charted



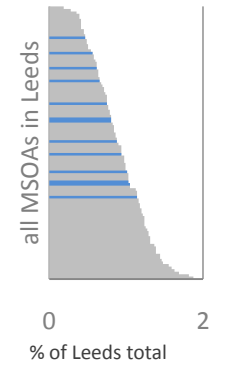
Number of people aged 18+ who received domiciliary care at some point in the year

This area had 572 people who received domiciliary care. Which is 10.7% of the Leeds total of 5,340.



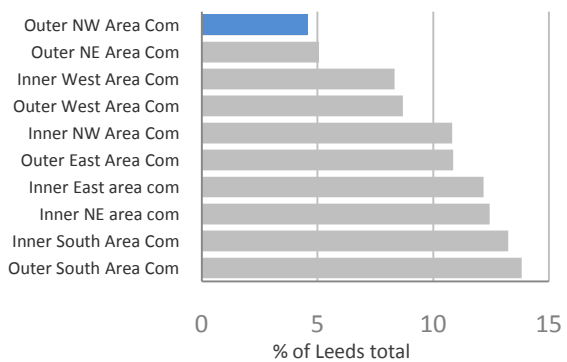
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list of MSOAs in this area in rank order as charted



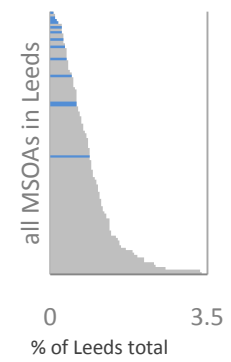
Safeguarding referral at some point in year

This area had 124 safeguarding referrals. Which is 4.5% of the Leeds total of 2,726.



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E02002342
E02002343
E02002333
E02002339
E02002356

list of MSOAs in this area in rank order as charted



A disproportionately low number of people were admitted to care homes from this area. Outer North West has the lowest number of people referred following safeguarding concerns in the city.

Glossary

Acorn A nationwide population segmentation tool. Combines geography with demographics and lifestyle information, places where people live with their underlying characteristics and behaviour, to create a tool for understanding the different types of people in different areas throughout the country. Over 400 variables were used to build describe the different Acorn types. Of these variables, 30% were sourced from the 2001 Census. The remainder were derived from CACI's consumer lifestyle databases, which cover all of the UK's 49 million adults and 25 million households. For more information about Acorn, including the characteristics of the categories, groups and types listed here, visit <http://www.caci.co.uk/acorn-classification.aspx>

Alcohol attributable admission A hospital admission which is partly caused by alcohol. NWPHO alcohol attributable fractions assign values to each type of admission, rating each by the effect alcohol has in its cause. Attributable admissions are sums of these fractions, not actual admissions. For more details see <http://www.nwph.net/nwpho/publications/alcoholattributablefractions.pdf>

Alcohol specific admission A hospital admission solely caused by alcohol.

BMI Body Mass Index

Deprived Leeds The area of Leeds where LSOAs rank in England in the 10% most deprived, in terms of Index of Multiple Deprivation (IMD 2004). Almost 20% of the Leeds population live in this area.

Deprived quintile This is the *fifth* of Leeds's MSOAs which are the *most deprived*. This does not have the fine level of detail that "Deprived Leeds" (see above) has. The Deprived Quintile is used in this report where data is only available at MSOA level in order to allow some comparison with deprived parts of Leeds.

DSR - Directly Age Standardised Rate Age standardising compensates for the fact that populations usually have varied age profiles. DSR is usually expressed as a rate per 100,000 and means we can exclude differences in age structure when investigating the underlying causes of different rates (see example below)

"Wetherby West MSOA has a high prevalence of CHD (in the highest fifth of the Leeds MSOAs). This would be expected as the MSOA has an elderly population and CHD is more prevalent in older people. Directly age standardised rates show how many people (in most cases per 100,000) would be expected to have CHD in Wetherby West if the population had the same structure as the European Standard Age Profile. (This has an even distribution between age groups up until 55 before gradually decreasing in older ages). Age standardised rates for CHD in Wetherby West are well below average, in the lowest fifth of the Leeds MSOAs. This shows that, while there are a lot of people with CHD in Wetherby West, it is the age of the population which is a large factor rather than other possible contributing factors."

Health Acorn An extension to the Acorn classification system. The classification groups the population of Great Britain into 4 groups, 25 types and 60 sub-types for more in-depth analysis. By analysing diet, illness and exercise characteristics as well as demographic attributes, Health Acorn provides an in-depth understanding of different communities in every part of the country. The classification names and descriptions have been chosen to be simple and non-judgemental. For more information about Acorn, including the characteristics of the categories, groups and types listed here, visit <http://www.caci.co.uk/acorn-classification.aspx>

Index An index of 100 for this area means this area has the same proportion of its population recorded with a condition as Leeds does. An index of 200 means the area has twice the proportion that Leeds has. Index scores below 100 mean the area has a lower proportion than Leeds. Index attempts to illustrate how closely the area matches Leeds.

IMD - Index of Multiple Deprivation Measures relative levels of deprivation in small areas of England called Lower Super Output Areas (LSOAs). The English Indices of Deprivation are a continuous measure of relative deprivation, therefore there is no definitive point on the scale below which areas are considered to be deprived and above which they are not. IMD scores and ranks have been produced for all LSOA in England in 2004, 2007 and 2010.

LSOA - Lower Super Output Area These are geographic areas designed nationally to improve the reporting of small area statistics in England. LSOAs when originally generated had between 1000 and 3000 people living in them with an average population of 1500 people.

Glossary

Credits



MSOA - Middle Super Output Area These are geographic areas designed nationally to improve the reporting of small area statistics in England and Wales. MSOAs are built from groups of Lower Super Output Areas (LSOAs). The minimum population of an MSOA is 5,000 and the mean is 7,200 (when originally generated). There are 108 MSOA in Leeds.

NEET not in education, employment, or training

NWPHO North West Public Health Observatory

Origins software Analyses forename and surname of every GP registered patient in Leeds and gives a calculated most likely heritage for each patient. This is considered to be an indication of 'country of origin' and not actual ethnicity. These 'countries of origin' are grouped up into geography levels and this is what is displayed here. The same software gives a likely faith for each patient.

Prevalence The number of cases divided by the population. In this report it can be thought of as the proportion of the relevant population with diabetes / CHD etc. Prevalence is expressed as a percentage. However an elderly population can be expected to have more cases (a higher prevalence) of certain conditions than a younger population. To compensate for variations in population ages, data can be directly age standardised (see above).

Rank Areas are often ranked in this report. This simply puts them in logical order from largest to smallest.

Rate per 100,000 The number of cases that would be expected in a population sized 100,000. DSR (see above) usually produces rates per 100,000. In this report the MSOA possibly has a population of around 5,000 people. Rates per 5,000 would be too small to consider and would not allow comparison with another MSOA of different population size. By producing rates per 100,000 for all areas they can be directly compared.

Q1 or Qtr1,2,3,4 Quarters in this report are financial year quarters. So Q1 data is from April – June with Q4 running from January to March.

Credits

GP audit data supplied by James Womack (Senior Public Health Information Analyst). Alcohol admissions, A&E admissions, populations data and profile introduction by Frank Wood (Information Manager). Origins, Admissions, Mortality data by Richard Dixon (Information Manager) at NHS Leeds. ASC data supplied by Stuart Cameron-Strickland (Head of Policy Performance & Improvement and Adam Mitchell) at Leeds City Council. Neighbourhoods data, Neighbourhood Index, Service map and School Census data supplied by Jacky Pruckner (Information Officer, Strategy and Development) and Richard Haslett (Research Officer, Business Transformation Team) at Leeds City Council. Report produced by Adam Taylor (Senior Information Analyst at NHS Leeds) using CACI InSite software.

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Editing team: Penny Mares, Barbara MacDonald. Penny Mares Associates, penny.mares@btinternet.com