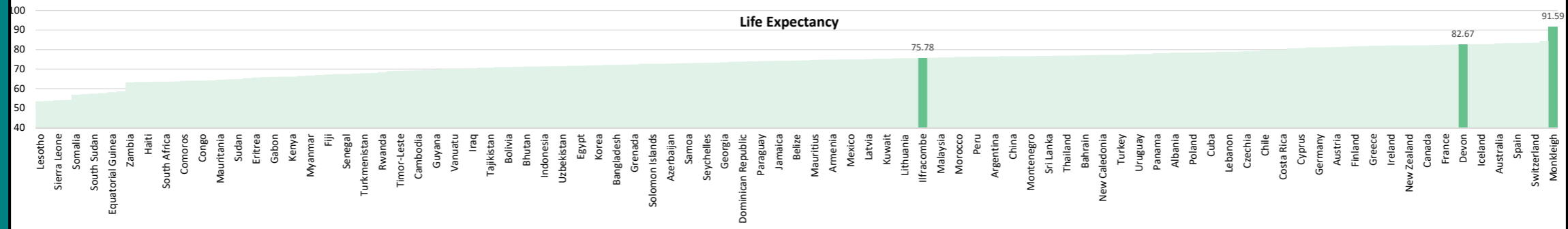# HEALTH AND WELLBEING OUTCOMES REPORT 2020-25

Vision - Health outcomes and health equality in Devon will be amongst the best in the world, and will be achieved by Devon's communities, businesses and organisations working in partnership

Life Expectancy

Life Expectancy bar chart (countries and places ordered low to high). Labelled values: Ilfracombe 75.78, Devon 82.67, Monkleigh 91.59.

Priority and Indicator	Time Period	Devon	SW	Eng	Devon Trend	East Devon	Exeter	Mid Devon	North Devon	South Hams	Teignbridge	Torridge	West Devon	Deprivation MD <------> LD	Value	Guide
1. Create opportunities for all																
GCSE Attainment (Free School Meals)	2018	18.2%	17.7%	21.7%	-	28.2%	21.1%	25.0%	17.9%	26.2%	17.5%	13.2%	16.7%		%	Higher is better
GCSE Attainment	2018	41.0%	43.2%	43.5%	-	48.0%	41.9%	45.3%	36.7%	45.2%	36.1%	28.0%	41.2%		%	Higher is better
Good Level of Development (Free School Meals)	2017/18	49.5%	52.3%	56.6%	⚑	49.1%	54.3%	42.2%	46.9%	40.5%	51.1%	53.8%	53.7%		%	Higher is better
Good Level of Development	2017/18	71.7%	71.2%	71.5%	⚑	71.5%	68.8%	72.2%	73.1%	76.2%	72.5%	67.2%	71.5%		%	Higher is better
% with NVQ4+ (aged 16-64)	2018	40.1%	38.7%	39.0%	⚑	35.8%	40.6%	40.3%	30.5%	45.7%	46.4%	33.6%	50.0%		%	Higher is better
% with no qualifications (NVQ) (aged 16-64)	2018	5.1%	5.3%	7.6%	⚑	6.5%	4.4%	5.4%	9.2%	2.4%	5.1%	-	5.5%		%	Lower is better
Child Poverty	2016	12.5%	14.0%	17.0%	⚑	11.2%	13.4%	11.6%	13.4%	10.5%	12.8%	16.0%	12.3%		%	Lower is better
Not in Education, Employment or Training	2019	6.3%	6.7%	6.0%	-	5.9%	8.5%	6.0%	6.8%	4.8%	6.0%	6.0%	5.7%		%	Lower is better
Gross Value Added - Per Head (Output)	2016	£20,843	£23,091	£27,108	⚑	£17,246	£31,446	£16,663	£20,929	£23,847	£18,583	£16,094	£17,371	-	£	Higher is better
2. Healthy, safe strong and sustainable communities																
Fuel Poverty	2017	11.6%	10.8%	10.9%	⚑	10.3%	12.4%	11.2%	12.6%	11.2%	10.9%	13.2%	12.6%		%	Lower is better
Rough Sleeping	2018	1.5	1.9	2.0	-	0.8	3.2	0.9	2.9	1.8	1.2	0.9	0.0		Rate per 10,000	Lower is better
Dwellings with category one hazards	2014/15	15.4%	15.6%	10.4%	-	14.7%	9.4%	17.3%	17.7%	15.8%	13.4%	26.2%	13.8%		%	Lower is better
Private sector dwellings made free of hazards	2014/15	1.0%	1.0%	1.2%	⚑	1.1%	1.7%	1.1%	1.9%	0.4%	1.5%	0.1%	0.5%		%	Higher is better
People who use services who feel safe	2018/19	69.2%	70.0%	70.1%	⚑	78.7%	63.7%	68.5%	70.2%	66.7%	72.2%	60.8%	66.7%		%	Higher is better
Proportion of people with poor access to healthy assets	2017	26.5%	18.1%	21.1%	-	37.4%	-	30.7%	23.8%	38.4%	15.7%	44.6%	44.0%		%	Higher is better
Overall rate of crime	2018/19	57.1	67.1	67.3	⚑ (red)	44.0	84.0	45.0	60.0	41.0	52.0	43.0	40.0		Rate per 1,000	Lower is better
3. Focus on mental health																
Suicide Rate	2016-18	11.2	11.1	9.6	⚑	7.0	15.0	12.9	13.0	6.7	13.7	12.8	8.9		DASR per 100,000	Lower is better
Emergency Hospital Admissions for Intentional Self-Harm	2017/18	210.3	250.2	185.5	⚑	153.0	208.9	170.2	327.2	194.6	225.2	263.9	183.3		DASR per 100,000	Lower is better
Self-Reported Wellbeing (low happiness score %)	2017/18	6.9%	7.4%	8.2%	⚑	-	-	-	-	-	-	-	-		%	Lower is better
Social Contentedness	2017/18	42.8%	46.0%	46.0%	⚑	-	-	-	-	-	-	-	-		%	Lower is better
Access to psychological therapies	2017	17.5%	-	18.3%	-	16.8%	20.1%	16.1%	18.8%	13.3%	18.9%	17.3%	15.3%		%	Higher is better
4. Maintain good health for all																
Adults Excess Weight	2017/18	60.1%	61.0%	62.0%	-	55.8%	55.8%	60.8%	64.7%	60.1%	68.7%	66.3%	58.6%		%	Lower is better
Proportion of Physically Active Adults	2017/18	72.8%	70.7%	66.3%	-	77.3%	80.0%	70.8%	65.8%	70.1%	69.7%	72.7%	70.1%		%	Higher is better
Alcohol-Related Admissions	2017/18	604.1	649.7	632.3	⚑	534.4	638.3	573.7	742.8	582.6	630.7	643.6	515.7		DASR per 100,000	Lower is better
Alcohol-Specific Admissions in Under 18s	2015-18	43.6	43.6	32.9	⚑	49.1	42.5	20.1	49.2	43.6	61.1	37.7	26.7		Rate per 100,000	Lower is better
Fruit and Vegetable Consumption (5-a-day)	2017/18	62.3%	61.2%	54.8%	⚑	58.3%	59.6%	62.9%	62.9%	67.9%	64.1%	64.6%	61.6%		%	Higher is better
Mortality Rate from Preventable Causes	2016-18	159.9	167.2	180.8	⚑	136.8	193.1	154.8	183.6	137.4	157.5	175.4	157.6		DASR per 100,000	Lower is better
Cancer Diagnosed at Stage 1 or 2	2017	56.1%	53.3%	52.2%	⚑	58.5%	59.9%	56.0%	49.3%	57.4%	54.2%	57.1%	56.6%		%	Higher is better
Overall satisfaction of carers with social services	2018/19	38.3%	38.5%	38.6%	-	43.9%	47.1%	50.0%	32.4%	28.6%	36.0%	33.3%	30.0%		%	Higher is better
Feel Supported to Manage Own Condition	2019	84.2%	81.8%	78.4%	-	87.2%	83.5%	83.8%	83.6%	84.3%	82.7%	80.0%	88.4%	-	%	Higher is better
Re-ablement Services (Effectiveness)	2017/18	82.6%	80.2%	82.9%	⚑	77.5%	79.5%	79.5%	76.1%	97.8%	81.9%	87.1%	94.6%		%	Higher is better
Re-ablement Services (Coverage)	2017/18	1.8%	2.6%	2.9%	⚑	-	-	-	-	-	-	-	-	-	%	Higher is better
Injuries Due to Falls	2017/18	1714.5	2056.4	2170.4	⚑	1586.1	1745.8	1465.1	1692.2	1780.8	1988.7	1683.2	1709.3		DASR per 100,000	Lower is better
Adult Smoking Prevalence	2018	13.4%	13.9%	14.4%	⚑	8.6%	17.2%	13.3%	14.4%	17.3%	14.1%	7.1%	14.3%		%	Lower is better
Estimated Dementia Diagnosis Rate (65+)	2019	59.8%	62.4%	68.7%	⚑	64.8%	71.9%	52.1%	61.0%	41.4%	59.1%	58.5%	58.8%	-	%	Higher is better

Key Symbols

- `-` Data not available
- `#` Value missing due to small sample size
- `^` Change in methodology
- `^^` National method for calculating Confidence Intervals are being revised
- Most deprived <--------> Least deprived

Significance compared to England figure
- Significantly higher
- Not significantly different
- Significantly lower

Trend
- Worsening trend
- Static trend
- Improving trend
- Not enough data

Health and Wellbeing — Committed to promoting health equality — Devon County Council

Indicator	Description	Detailed specification
1. Create Opportunities for All		
GCSE Attainment (Free School Meals)	Percentage of pupils achieving five or more GCSEs at grades 9 to 5 including English and Maths that are part of the Free School Meal 6 status.	Number of pupils at end of Key Stage 4 in schools maintained by the local education authority (includes special schools and pupil referral units) achieving five or more GCSEs at grades A* to C or equivalent, including English and maths GCSE as a percentage of all pupils at end of Key Stage 4.
GCSE Attainment	Percentage of overall pupils achieving five or more GCSEs at grades 9 to 5 including English and Maths.	Number of pupils at end of Key Stage 4 in schools maintained by the local education authority (includes special schools and pupil referral units) achieving five or more GCSEs at grades A* to C or equivalent, including English and maths GCSE as a percentage of all pupils at end of Key Stage 4.
Good Level of Development (Free School Meals)	The percentage of children with free school meal status achieving a good level of development at the end of reception	All children defined as having reached a good level of development at the end of the EYFS by local authority. Children are defined as having reached a good level of development if they achieve at least the expected level in the early learning goals in the prime areas of learning (personal, social and emotional development; physical development; and communication and language) and the early learning goals in the specific areas of mathematics and literacy.
Good Level of Development	The percentage of children achieving a good level of development at the end of reception	All children defined as having reached a good level of development at the end of the EYFS by local authority. Children are defined as having reached a good level of development if they achieve at least the expected level in the early learning goals in the prime areas of learning (personal, social and emotional development; physical development; and communication and language) and the early learning goals in the specific areas of mathematics and literacy.
% with NVQ4+ (aged 16-64)	Percentage of people aged 16-64 with and NVQ4+ qualification	The number of people with NVQ 4 equivalent and above, e.g. HND, Degree and Higher Degree level qualifications or equivalent divided by the total population age 16-64.
% with no qualifications (NVQ) (aged 16-64)	Percentage of people aged 16-64 with no qualifications (%)	The number of people with no formal qualifications divided by the total population aged 16-64.
Child Poverty	Percentage of children (aged 0 to 15) living in households dependent on benefits or tax credits.	Children living in families in receipt of Child Tax Credit (CTC) whose reported income is less than 60 per cent of the median income or are in receipt of income support (IS) or Income-Based Jobseeker's Allowance (JSA), as a proportion of the total number of children in the area.
Not in Education, Employment or Training	16-19 year olds not in education, employment or training (NEET) or whose activity is not known	The estimated number of 16-19 year olds not in education, employment or training or whose activity is not known. The England and South West figure represents the estimated proportion of 16-17 year olds not in education, employment or training or whose activity is not known.
Gross Value Added - Per Head (Output)	The value generated by any unit engaged in the production of goods and services.	A measure of the increase in the value of the economy due to the production of goods and services. It is measured at current basic prices, which includes the effect of inflation, excluding taxes (less subsidies) on products. GVA plus taxes (less subsidies) on products is equivalent to gross domestic product (GDP).
2. Healthy, Safe, Strong and Sustainable Communities		
Fuel Poverty	The percentage of households that experience fuel poverty based on the "Low income, high cost" methodology	Under the "Low Income, High Cost" measure, households are considered to be fuel poor where: 1.They have required fuel costs that are above average (the national median level) 2.Were they to spend that amount, they would be left with a residual income below the official fuel poverty line. The key elements in determining whether a household is fuel poor or not are income, fuel prices, and fuel consumption (which is dependent on the dwelling characteristics and the lifestyle of the household)
Rough Sleeping	The number of rough sleepers counted or estimated by the local authority as a rate per 1,000 households	These annual rough sleeping counts and estimates are carried out in October or November. Each local authority district either conducts a street count or provides an estimate. A count is a single night snapshot of the number of rough sleepers in a local authority area. Counts are independently verified by Homeless Link. An estimate is the number of people thought to be sleeping rough in a local authority area on any one night in a chosen week. Local authorities decide annually whether to provide a count or an estimate in light of their local circumstances. Counts and estimates may underestimate the true extent of rough sleeping.
Dwellings with category one hazards	Percentage of total dwellings with hazards rated as serious (category one) under the housing health and safety rating system (HHSRS)	The housing health and safety rating system (HHSRS) is a risk-based evaluation tool introduced under the Housing Act 2004, which identifies 29 hazards including damp, excess cold, excess heat, the presence of pollutants (including Asbestos), space, security, light, noise, hygiene, sanitation, water supply, and risk of accidental injury. Risks rated as category one pose a serious risk to health and safety. The numerator is the total number of dwellings identified as having category one hazards present (f6a). The denominator is the total number of dwellings from Live Table 100 (dwelling stocks by local authority).
Private sector dwellings made free of hazards	Percentage of private sector dwellings identified as having hazards rated as serious (category one) under the housing health and safety rating system (HHSRS) which were made free of these hazards in the previous financial year	The housing health and safety rating system (HHSRS) is a risk-based evaluation tool introduced under the Housing Act 2004, which identifies 29 hazards including damp, excess cold, excess heat, the presence of pollutants (including Asbestos), space, security, light, noise, hygiene, sanitation, water supply, and risk of accidental injury. Risks rated as category one pose a serious risk to health and safety. The numerator is the total number of private sector dwellings made free of category one hazards through local authority intervention. The denominator is the total number of private sector dwellings identified as having category one hazards present.
People who use services who feel safe	The measure is defined by determining the percentage of all those responding who choose the answer "I feel as safe as I want" from the Adult Social Care Survey.	This measures one component of the overarching 'social care-related quality of life' measure. It provides an overarching measure for this domain.
Proportion of people with poor access to healthy assets	Access to Healthy Assets & Hazards Index	Percentage of the population who live in LSOAs which score in the poorest performing 20% on the Access to Healthy Assets & Hazards (AHAH) index. The AHAH index is comprised of four domains: access to retail services (fast food outlets, gambling outlets, pubs/bars/nightclubs, off licences, tobacconists), access to health services (GP surgeries, A&E hospitals, pharmacies, dentists and leisure centres), the physical environment (access to green spaces, and three air pollutants: NO2 level, PM10 level, SO2 level) and air pollution (NO2 level, PM10 level, SO2 level).
Overall rate of crime	The rate of crimes, crude rate per 1,000	Numerator is the number of crime incidents recorded by the police. Denominator is the rounded mid-year population of the area. Rate is numerator divided by denominator multiplied by 1,000.
3. Focus on Mental Health		
Suicide Rate	Direct age-standardised mortality rate (DASR) from suicide and injury of undetermined intent per 100,000 population	Number of deaths from suicide and injury of undetermined intent (classified by underlying cause of death recorded as ICD10 codes X60-X84 (all ages), Y10-Y34 (ages 15+ only) registered in the respective calendar years, aggregated into quinary age bands, with corresponding mid-year population totals. Age specific rates are calculated and multiplied by the standard population for each age group and aggregated to give the age adjusted count of deaths for the area, and divided by the total standard population and multiplied by 100,000 to give the age standardised mortality rate for the area. New 2013 European Standard population used.
Emergency Hospital Admissions for Intentional Self-Harm	Direct Age Standardised Rate of finished admission episodes for self-harm per 100,000 population aged 10 to 24 years	Numerator is the number of finished admission episodes in children aged between 10 and 24 years where the main recorded cause is between 'X60' and 'X84' (Intentional self-harm). Population for people aged 10 to 24, aggregated into quinary age bands. Age specific rates are calculated and multiplied by the standard population for each age group and aggregated to give the age adjusted count of deaths for the area, and divided by the total standard population and multiplied by 100,000 to give the age standardised mortality rate for the area. The 2013 revision to the European Standard Population has been used.
Self-Reported Wellbeing (low happiness score %)	Self-reported well-being - percentage of people with a low happiness score	The percentage of respondents who answered 0-4 to the question "Overall, how happy did you feel yesterday?"ONS are currently measuring individual/subjective well-being based on four questions included on the Integrated Household Survey. Responses are given on a scale of 0-10 (where 0 is "not at all happy" and 10 is "completely happy")The first full year data from these questions was published by ONS in July 2012 and are being treated as experimental statistics. In the ONS report, the percentage of people scoring 0-6 and 7-10 have been calculated for this indicator.
Social Contentedness	Proportion of people who use services who reported that they had as much social contact as they would like.	The percentage of users responding "I have as much contact as I want with people I like" and carers choosing "I have as much contact as I want" to questions based on their social situation in the Adult Social Care Survey and Carers Survey. Currently just measuring social care users. Measures for users and carers will be presented separately
Access to psychological therapies	Access to IAPT services: people entering IAPT (in month) as % of those estimated to have anxiety/depression	The number of people entering IAPT services as a proportion of those estimated to have anxiety and/or depression.

4. Maintain good health for all		
Adults Excess Weight	Percentage of adults classified as overweight or obese.	Number of adults with a BMI classified as overweight (including obese), calculated from the adjusted height and weight variables. Adults are defined as overweight (including obese) if their body mass index (BMI) is greater than or equal to 25kg/m2. Denominator is number of adults ages 18+ with valid height and weight recorded.Height and weight is self-reported but is adjusted by age and sex using Health Survey for England data to adjust for differences between self-reports and actual BMI. Prevalences are weighted to be representative of the whole population at each level of geography and have been age-standardised.
Proportion of Physically Active Adults	Percentage of adults achieving at least 150 minutes of physical activity per week in accordance with UK CMO recommended guidelines on physical activity.	The number of respondents aged 19 and over, with valid responses to questions on physical activity, doing at least 150 "equivalent" minutes of at least moderate intensity physical activity per week in bouts of 10 minutes or more in the previous 28 days expressed as a percentage of the total number of respondents aged 16. This includes physical activity as a mode of transportation to work, as well as direct leisure activities.
Alcohol-Related Admissions (Narrow)	Direct age-standarised rate of hospital admissions involving an alcohol-related primary diagnosis or an alcohol-related external cause per 100,000 population.	Admissions to hospital involving an alcohol-related primary diagnosis or an alcohol-related external cause. Admissions of children under 16 were only included if they had an alcohol-specific diagnosis i.e. where the attributable fraction = 1, meaning that the admission is treated as being wholly attributable to alcohol. For other conditions, estimates of the alcohol-attributable fraction were not available for children.
Alcohol-Specific Admissions in under 18s	Hospital admissions for alcohol-specific causes in persons aged under 18 per 100,000 population	Persons aged less than 18 years admitted to hospital where the primary diagnosis or any of the secondary diagnoses are an alcohol-specific condition for three financial years pooled. In addition, individuals admitted are only counted once per financial year. Denominator is ONS mid-year population estimates for 0-17 year olds. Three years are pooled. Rate is a crude rate per 100,000 population. See LAPE user guide for further details - http://www.lape.org.uk/downloads/Lape_guidance_and_methods.pdf
Fruit and Vegetable Consumption (5-a-day)	Proportion of the population who, when surveyed, reported that they had eaten the recommended 5 portions of fruit and vegetables on a usual day.	Proportion of the population who, when surveyed, reported that they had eaten the recommended 5 portions of fruit and vegetables on the previous day. Respondents to the Active Lives Survey who answered both of the following questions were included: 1) How many portions of fruit did you eat yesterday? Please include all fruit, including fresh, frozen, dried or tinned fruit, stewed fruit or fruit juices and smoothies. Fruit juice only counts as one portion no matter how much you drink. 2) How many portions of vegetables did you eat yesterday? Please include fresh, frozen, raw or tinned vegetables, but do not include any potatoes you ate. Beans and pulses only count as one portion no matter how much of them you eat.
Mortality Rate from Preventable Causes	Direct age-standarised mortality rate from causes considered preventable per 100,000 population	Numerator is number of deaths that are considered preventable (classified by underlying cause of death recorded as ICD codes A15-A19, B17.1, B18.2, B20-B24, B90, C00-C16, C18-C22, C33-C34, C43, C45, C50, C53, E10-E14, F10-F16, F18-F19, G31.2, G62.1, I20-I26, I42.6, I71, I80.1-I80.3, I80.9, I82.9, J09-J11, J40-J44, K29.2, K70, K73-K74 (excl. K74.3-K74.5), K86.0, U50.9, V01-Y34, Y60-Y69, Y83-Y84) registered in the respective calendar years, aggregated into quinary age bands (0-4, 5-9,…, 80-84, 85+). The 2013 revision to the European Standard Population has been used for this measure.
Cancer Diagnosed at Stage 1 or 2	Proportion of cancers diagnosed at an early stage	New cases of cancer diagnosed at stage 1 and 2 as a proportion of all new cases of cancer diagnosed (specific cancer sites, morphologies and behaviour: invasive malignancies of breast, prostate, colorectal, lung, bladder, kidney, ovary, uterus, non-Hodgkin lymphomas, and invasive melanomas of skin). This indicator is labelled as experimental statistics because of the variation in data quality: the indicator values primarily represent variation in completeness of staging information.
Overall satisfaction of carers with social services	The measure is defined by determining the percentage of all those responding who identify strong satisfaction, by choosing the answer "I am extremely satisfied" or the answer "I am very satisfied" from the Adult Social Care Survey.	This measures the satisfaction with services of carers of people using adult social care, which is directly linked to a positive experience of care and support. Analysis of user surveys suggests that reported satisfaction with services is a good predictor of the overall experience of services and quality.
Feel Supported to Manage Own Condition	Weighted percentage of people feeling supported to manage their condition.	Numerator: For people who answer yes to the Question 30 "Do you have a longstanding health condition", the numerator is the total number of 'Yes, definitely' or 'Yes, to some extent' answers to GPPS Question 32: In the last 6 months, have you had enough support from local services or organisations to help you manage your long-term condition(s)? Please think about all services and organisations, not just health services • Yes, definitely • Yes, to some extent • No • I have not needed such support • Don't know/can't say. Responses weighted according to the following 0-100 scale: "No" = 0 "Yes, to some extent" = 50 "Yes, definitely" = 100.
Re-ablement Services (Effectiveness)	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.	The proportion of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting), who are at home or in extra care housing or an adult placement scheme setting 91 days after the date of their discharge from hospital.
Re-ablement Services (Coverage)	Proportion of older people (65 and over) offered reablement services following discharge from hospital.	The number of older people (65 and over) offered reablement services as a proportion of the total number of older people discharged from hospitals based on Hospital Episode Statitstics (HES)
Injuries Due to Falls	Emergency hospital admissions for falls injuries in persons aged 65 and over, directly age-sex standardised rate per 100,000.	Emergency admissions for falls injuries classified by primary diagnosis code (ICD10 code S00-T98) and external cause (ICD10 code W00-W19) and an emergency admission code. Age at admission 65 and over.Counted by first finished consultant episode (excluding regular and day attenders) in financial year in which episode ended, by local authority and region of residence from the HES data. Population based on Local Authority estimates of resident population produced by ONS. Analysis uses the quinary age bands 65-69, 70-74, 75-79, 80-84 and 85+, by sex. Calculated using the 2013 European Standard Population.
Adult Smoking Prevalence	Percentage of adults aged 18 and over who smoke	The number of persons aged 18+ who are self-reported smokers in the Annual Population Survey. The number of respondents has been weighted in order to improve representativeness of the sample. The weights take into account survey design and non-response. Denominator is Total number of respondents (with valid recorded smoking status) aged 18+ in the Annual Population Survey. The number of respondents has been weighted in order to improve representativeness of the sample. The weights take into account survey design and non-response.
Estimated Dementia Diagnosis Rate (65+)	Number of persons recorded on a GP Dementia Disease Register as a % of those in the area estimated to have dementia (using age and sex based estimates)	Numerator is the number of people on a GP practice dementia disease register at the end of the given period and reported through the Quality and Outcomes Framework. Numbers predicted to have dementia apply local GP practice population in quinary age bands to age and sex specific dementia prevalence rates from the 2007 Dementia UK prevalence study. Rate divides the number on the QOF register by the predicted number with dementia to give the percentage diagnosed. GP practice numerators and denominators are aggregated to areas based on location of practice.