

North Yorkshire Joint Strategic Needs Assessment 2021

Ryedale District Summary Profile

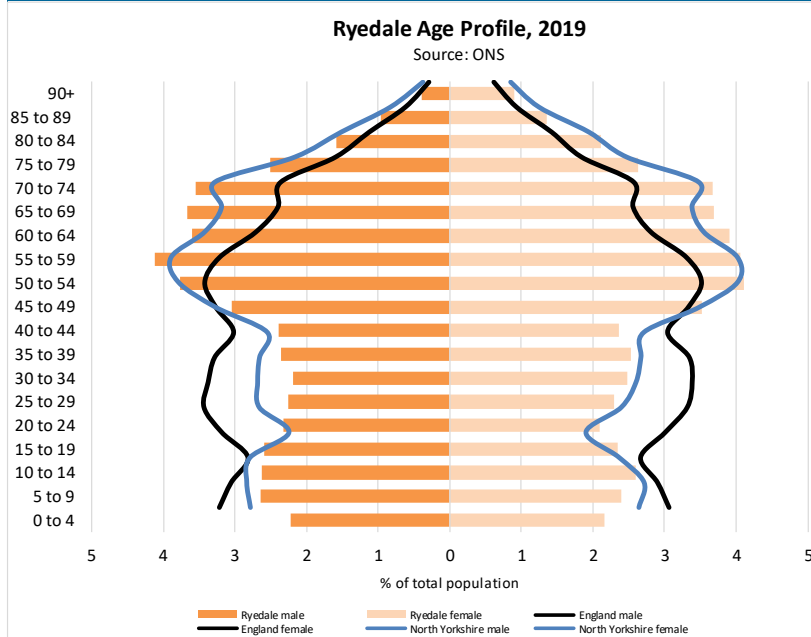
Introduction

This profile provides an overview of health and social care needs in Ryedale District. Greater detail on particular topics can be found within JSNA content at www.datanorthyorkshire.org. This document is structured into four parts: population, wider determinants of health, health behaviours and diseases and death and identifies the major themes which affect health in Ryedale and links to the local response which meets those challenges

Summary

- The population in Ryedale District is ageing. By 2030, there will be 3,700 additional people aged 65+, a 25% increase from 2019, but a static working-age population. This will lead to increased health and social care needs with no extra people available to work in health and care roles.
- Despite recent reductions, the rate of people being killed and seriously injured on Ryedale's roads remains at double the England average (about 47 casualties annually).
- The rate of maternal smoking in Ryedale remains significantly worse compare to England for the past seven years, posing health concerns for both the mothers and babies.
- There are high rates of fuel poverty in parts of Ryedale, particularly in the most rural areas.
- The estimated dementia diagnosis rate is increasing but remains lower than England, with most general practices below the North Yorkshire average. There may be additional, unidentified care needs.
- Whilst below the England average, the proportion of adults overweight or obese remains high—at 57.9%.

Overview: Population



The population pyramid shows that, overall, Ryedale district has an older population than England, with more residents between the ages of 50-89, and fewer aged under 45. The population make-up is similar to North Yorkshire. The shape of the pyramid is typical of a population with long life expectancy and low birth rate.

There are about 6,458 people aged 65+ with a limiting long term illness. Of these people, 42% (2,703) report that their daily activities are limited a lot because of their illness (POPPI, 2020).

1.7% of the population is from black, Asian and minority ethnic groups, compared with 2.8% in North Yorkshire and 15% in England.

Life Expectancy

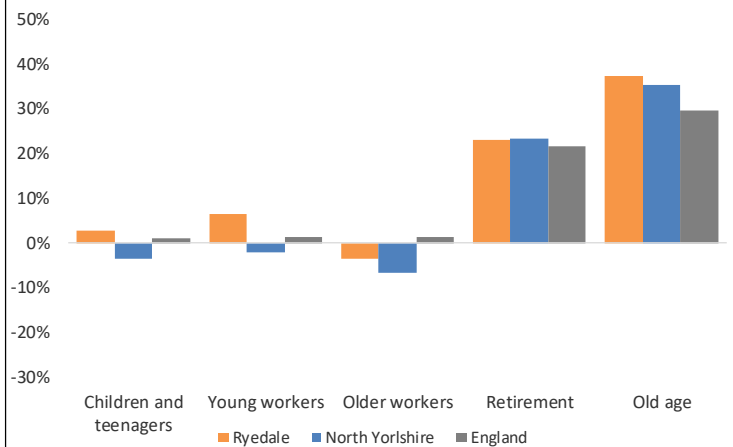
The population of Ryedale district is estimated to be 55,380 and is set to increase to 59,612 in 2030. The birth rate in the district is 53 per 1,000 women (England= 59 per 1,000 women). Projections indicate that the population in the over-85 age group is expected to

increase in Ryedale by approximately 37% by 2030. For the same age group, an increase of 35% is expected in North Yorkshire and an increase of 30% in England. An 23% increase is also anticipated for those in the retirement category in the district, compared to the 22% projected for England. Meanwhile, it is projected that the population of children and teenagers in Ryedale will increase by 3%.

		Current and projected population							
		2019				2030 (projected)			
		Males		Females		Males		Females	
		N	%	N	%	N	%	N	%
Children and teenagers	0-19	5578	20.6	5256	18.5	5851	19.9	5264	17.4
Young workers	20-44	6379	23.6	6521	23.0	6780	23.1	6935	22.9
Older workers	45-64	8055	29.8	8636	30.4	7807	26.6	8286	27.4
Retirement	65-84	6259	23.2	6706	23.6	7802	26.6	8153	27.0
Old age	85+	747	2.8	1243	4.4	1140	3.9	1594	5.3

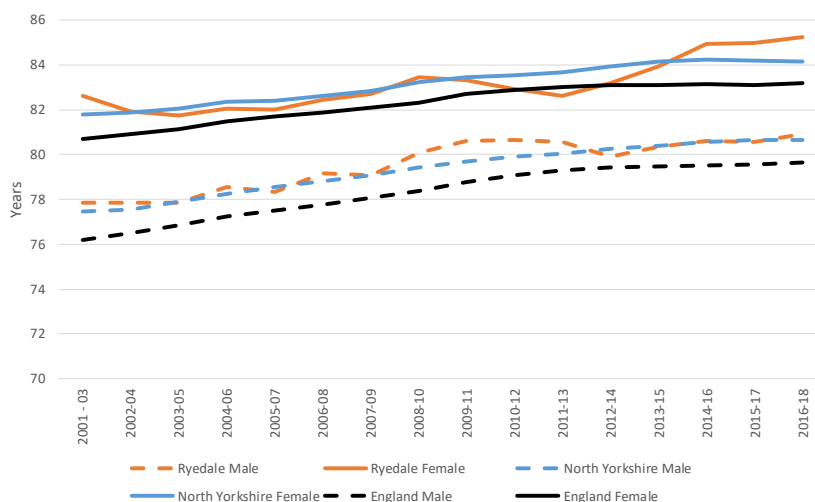
Projected population change - 2019 to 2030

Source: ONS



Life expectancy at birth, male and female, Ryedale district, 2001-03 to 2016-18

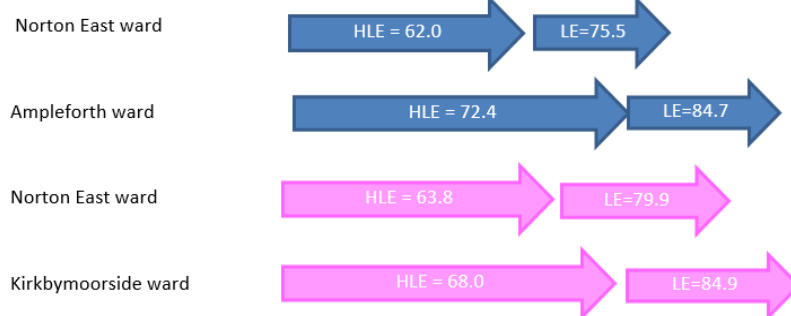
Source: PHE



Life expectancy at birth is increasing for men in Ryedale, but only gradually. For females, the life expectancy in Ryedale (85.3) is greater than then both England (83.2) and North Yorkshire (80.7).

By comparing the healthy life expectancy with overall life expectancy, we can get a richer picture around years spent in good health. In Ryedale, there is wide variation in the years spent in good health for both males and females between wards, indicating within district inequalities. There is a nine year difference in life expectancy for males between Norton East ward and Ampleforth ward. Men in Norton East can expect to live 62 years in good health however, men in Ampleforth spend 72 years in good health. For females, women in the district with the lowest life expectancy (Norton East) spend 64 years in good health, and women in Kirkbymoorside also spend 68 years of their life in good health. For both sexes, the wards with the highest life expectancy exceed that seen by England and those with the lowest life expectancy are below the England figures.

Healthy Life Expectancy (HLE) and Life Expectancy (LE) by gender, Ryedale wards, 2009-13



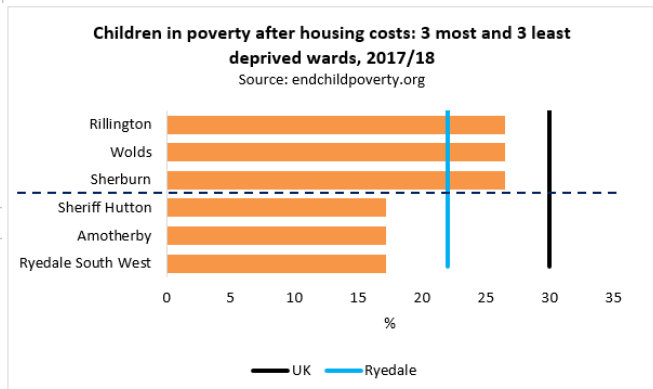
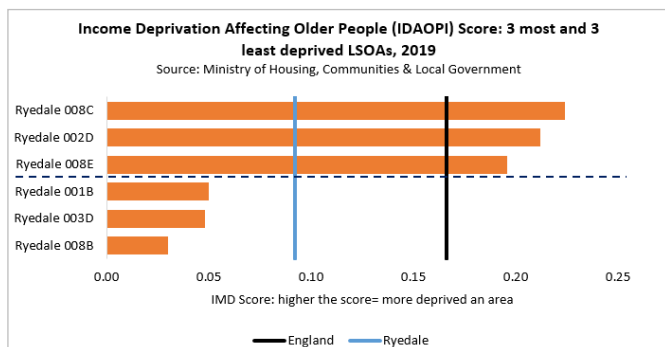
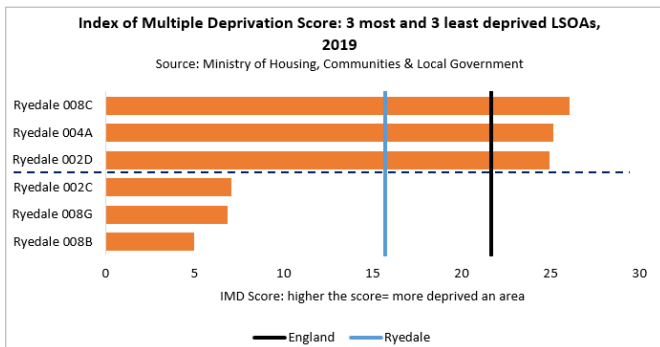
Source: ONS, Health state life expectancy by 2011 Census wards in England and Wales

Wider determinants of health

Poverty

The 2019 Index of Multiple Deprivation (IMD) identifies no Lower Super Output Areas (LSOA) out of 30 total within the district which are amongst the 20% most deprived in England. However, Pickering West, Derwent and Malton wards have higher levels of deprivation than the district average.

LSOA name	Ward
Ryedale 008C	Malton
Ryedale 004A	Derwent
Ryedale 002D	Pickering West
Ryedale 002C	Pickering West
Ryedale 008G	Norton West
Ryedale 008B	Malton



LSOA name	Ward
Ryedale 008C	Malton
Ryedale 002D	Pickering West
Ryedale 008E	Norton East
Ryedale 001B	Dales
Ryedale 003D	Sinnington
Ryedale 008B	Malton

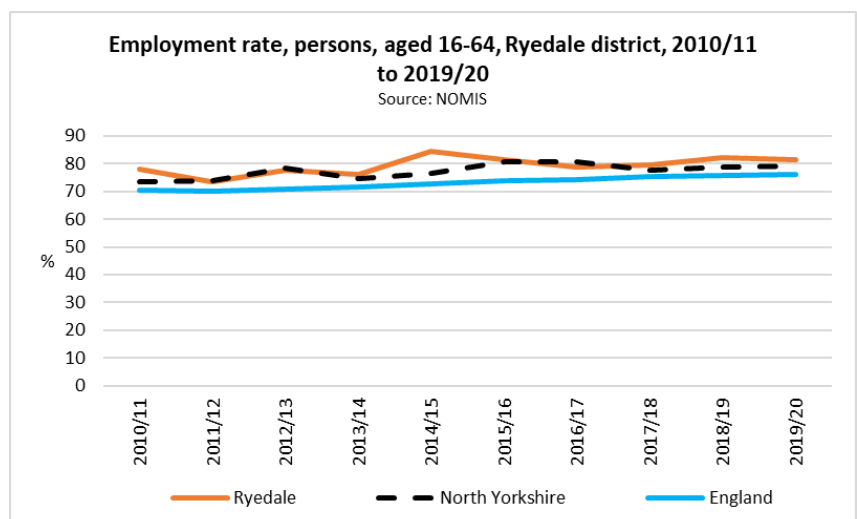
The IMD also calculates deprivation for specific groups based on key indicators. For children, child poverty (22%, 2379 children) is lower than that observed nationally (30%). However, this rises to over 26% in Rillington, Wolds and Sherburn ward.

Furthermore, Norton East and Pickering West wards have high levels of older people in deprivation with rates higher than the district average, indicating these areas are the most deprived areas of Ryedale.

Employment

Employment rate is higher in Ryedale (82% in the district in the period April 2019 to March 2020 compared to 76% across England and 79% in North Yorkshire); and employment rate has remained the same between 2018/19 and 2019/20.

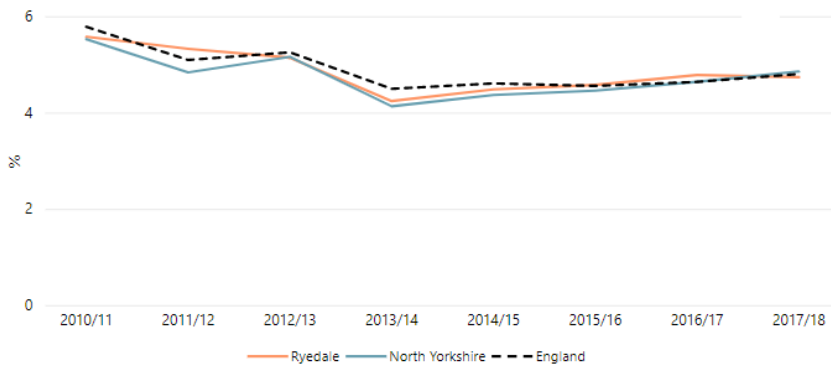
In 2020, average weekly earnings in Ryedale (£431) were significantly below England (£483).



Education

Half days missed by pupils due to overall absence, persons, aged 5-15, Ryedale district, 2010/11 to 2017/18

Source: PHE



Low school attendance is linked to lower educational attainment. The proportion of half days missed by pupils due to overall absence (both authorised and unauthorised) is 4.7%, is similar to the national (4.8%) and regional (5%) averages in 2017/18.

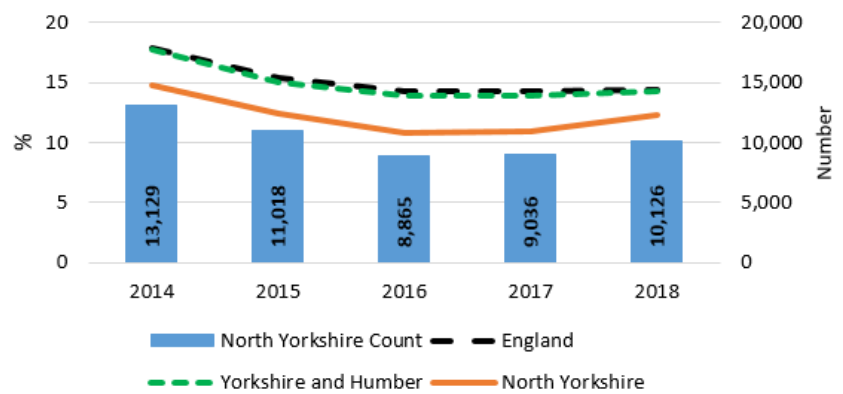
The proportion of pupils aged 5-15 with special educational needs in North Yorkshire has increased slowly between 2016 and 2018 and is significantly lower than England.

The chart below highlights the Ofsted judgement of overall effectiveness of primary and secondary schools in Ryedale.

Performance at primary schools is similar to county and national results. Ryedale has a higher proportion of secondary schools with a score of 'good' when compared to the national and county averages and does not have any secondary schools rated 'inadequate' or 'requires improvement'. The small number of secondary schools (4) means that this needs to be interpreted with some caution.

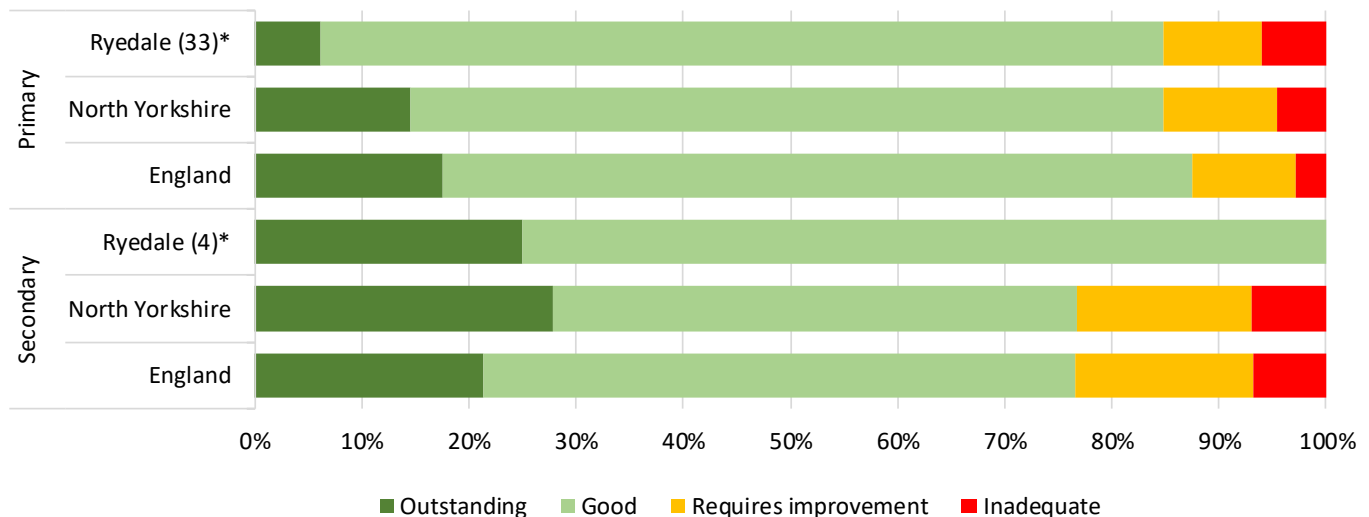
All pupils with Special Educational Needs, aged 5-15, North Yorkshire

Source: PHE



Ofsted Judgement of overall effectiveness at 01/07/2020

Source: Ofsted.gov.uk



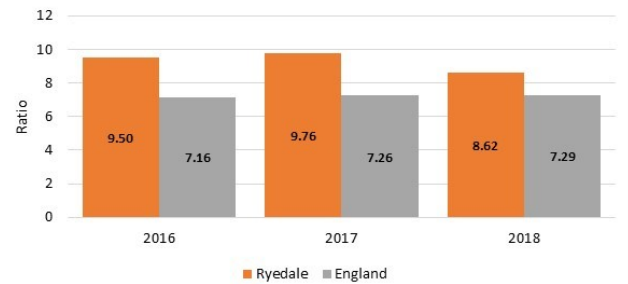
*= number of schools

Housing

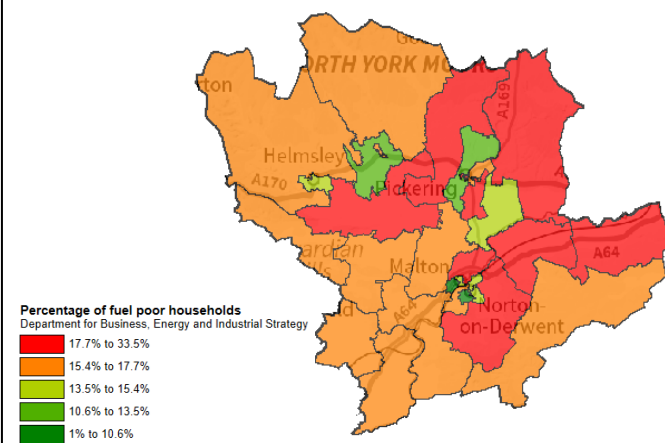
Housing affordability affects where people live and work. It also affects factors that influence health, including the quality of housing available, poverty, community cohesion, and time spent commuting. There is increasing evidence of a direct association between unaffordable housing and poor mental health, over and above the effects of general financial hardship. Type of housing tenure may be an important factor in determining how individuals experience and respond to housing affordability problems.

Ryedale has a ratio of lower quartile house price to lower quartile earnings (estimating housing affordability for lower than average earners), similar to the England average. Even though this has decreased between 2016 and 2018, Ryedale has the second highest ratio out of the seven districts in the county, highlighting that housing in Ryedale is comparatively less affordable relative to earnings.

Ratio of lower quartile house price to lower quartile earnings, all ages, persons, Ryedale district, 2016 to 2018
Source: PHE



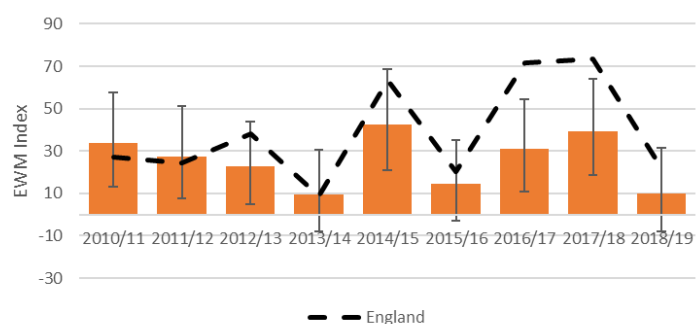
Percentage of Fuel poor households in Ryedale, 2019



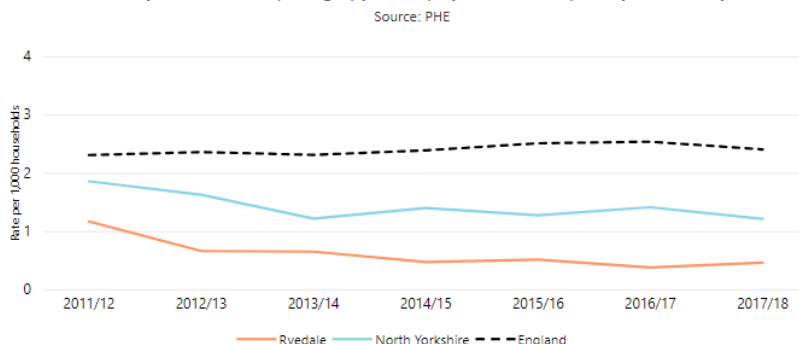
In 2019, 16.1% of households (3,894 households) in Ryedale were classified as fuel poor, higher than the national average (13.4%). Merely tackling poverty would not necessarily relieve the fuel poverty, as often housing type and access to affordable sources of energy are important. Tackling fuel poverty should in turn improve winter health, decreasing excess winter mortality and the pressure on the health and care system during the winter months. Further information on the [North Yorkshire Winter Health Strategy 2015-20](#) can be found at the North Yorkshire Partnership website.

The chart to the right suggests a variable picture in the district. In 2018/19 the Excess Winter Mortality index decreased from 39.4 to 10.1, below the national average of 15.1.

Excess Winter Mortality (EWM) Index, Ryedale district, 2010/11 to 2018/19
Source: ONS



Statutory homelessness, all ages, persons, Ryedale district, 2011/12 to 2017/18
Source: PHE

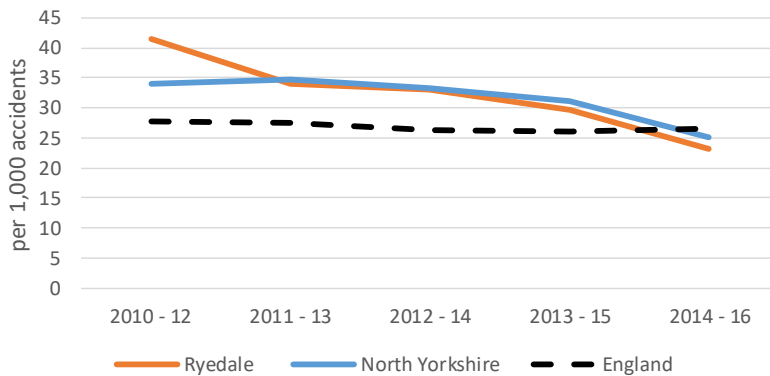


The rate of households who are homeless has decreased in Ryedale since 2011/12 and is below England and county averages.

Transport

Alcohol related road traffic accidents, persons, all ages, Ryedale district, 2010-12 to 2014-16

Source: PHE



Alcohol consumption is responsible for around one in seven deaths in reported road traffic accidents in Great Britain. Any amount of alcohol affects people's ability to drive safely. The effects can include slower reactions, increased stopping distance, poorer judgement of speed and distance and reduced field of vision, all increasing the risk of having an accident or fatality.

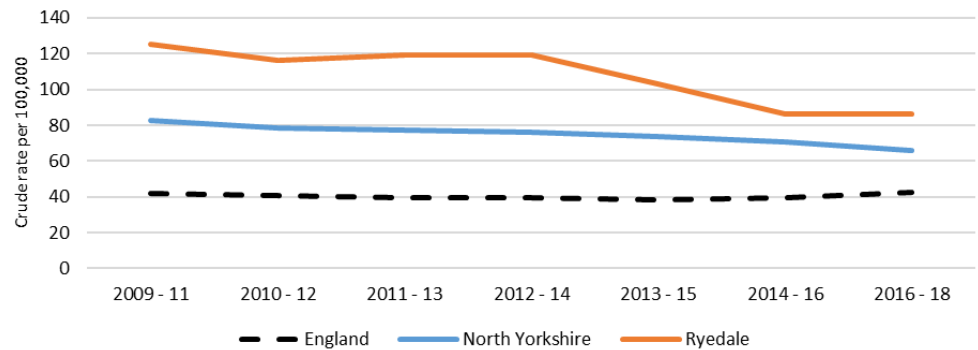
The rate of alcohol-related road traffic accidents in Ryedale has decreased since 2011-13 and is similar to county and national rates.

The rate of people being killed and seriously injured (KSI) casualties on roads in Ryedale is significantly higher than the national average at 86.5 per 100,000.

Across North Yorkshire, the rate of children killed and seriously injured on England's roads has decreased between 2014-16 and 2016-18 (from 16.8 per 100,000 to 15.8 per 100,000) and is now similar to the England average (17.7 per 100,000).

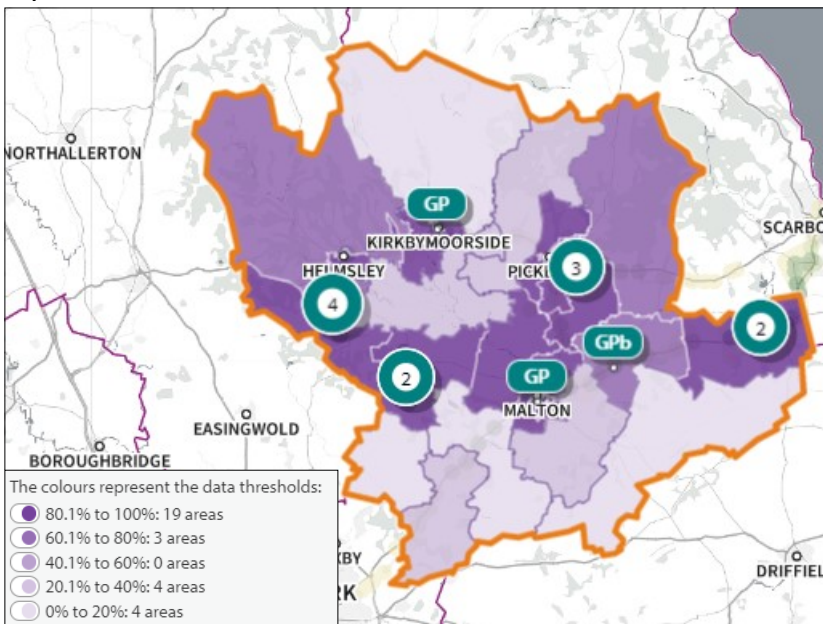
Killed and Seriously Injured Casualties on the road, all ages, Ryedale district, 2009-11 to 2016-18

Source: PHE



More information on staying safe on the road can be found in [Safer Roads, Healthier Place: York and North Yorkshire Road Safety Strategy](#) and at roadwise.co.uk.

Population within 30 minutes travel time by public transport to a general practice, Ryedale, 2020



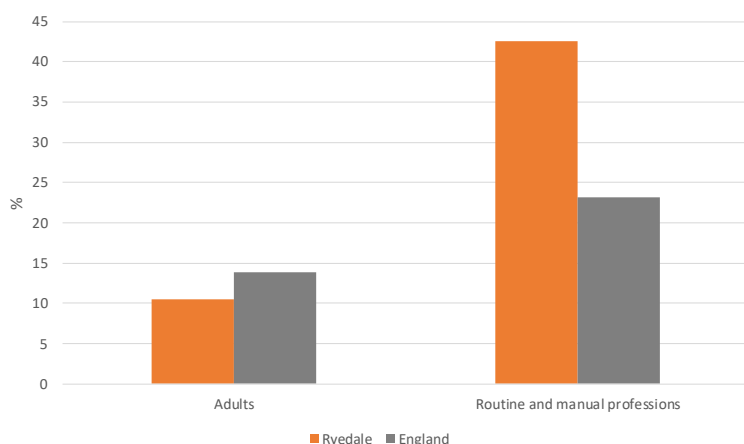
In Ryedale, most of the population (74.1%) lives within a 30 minute travel time, by public transport, to a general practice.

Further information is available via the [Strategic Health Asset Planning and Evaluation \(SHAPE\) Place Atlas](#) online tool. This is an interactive health atlas tool available to NHS and Local Authority professionals working in public health or social care.

Lifestyle and behaviour

Smoking

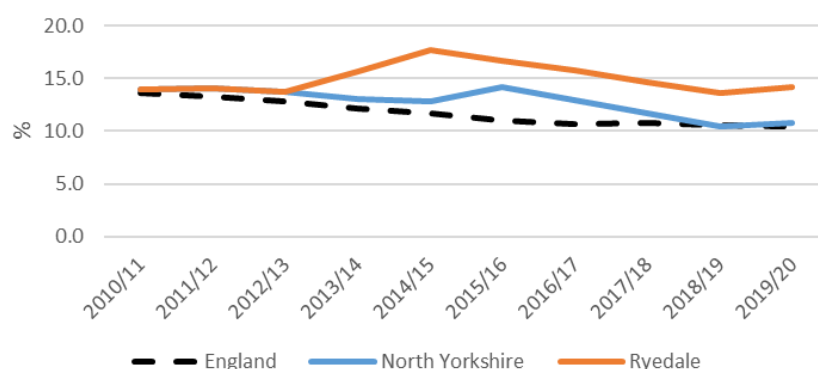
Smoking prevalence, persons, aged over 18, Ryedale district, 2019
Source: PHE



Smoking prevalence for adults in Ryedale is similar to England, at 10.4% compared with 13.9% nationally. For adults in routine and manual professions, smoking rates are higher than for the general population; in Ryedale the prevalence is 42.5% - not statistically significantly different from the 23.2% estimated for England.

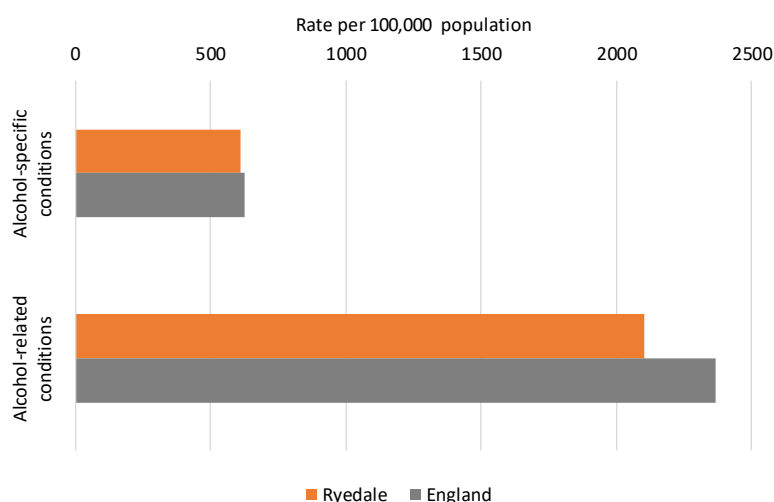
Maternal smoking during pregnancy is known to be detrimental for both the health of the mother and baby. In Ryedale, maternal smoking is a concern, with 14.2% (63) of local mothers smoking, compared to 10.4% nationally. The rate in Ryedale is significantly higher than the England average.

Proportion of women who smoke at time of delivery, all ages, Ryedale district, 2010/11 to 2019/20
Source: PHE



Alcohol

Rate of alcohol-related hospital admissions, 2018/19
Source: PHE

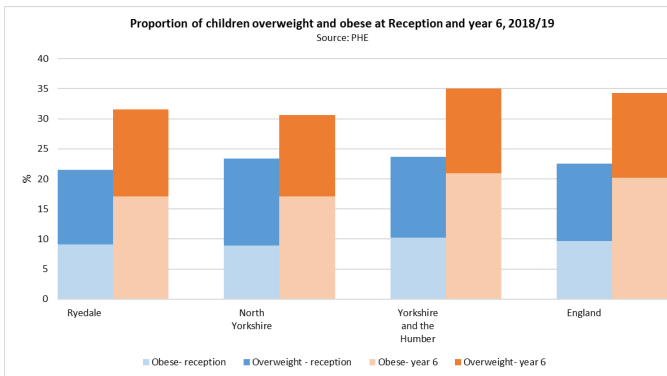


Implementing appropriate local interventions ensures we reduce misuse and harm associated with alcohol in our communities. Overall, the rate of admission episodes for alcohol-specific conditions in Ryedale is similar to England at 613 per 100,000 population compared to 626 for England. As alcohol misuse can be a contributing factor in a wide variety of diseases, and it is important to also look at broader health conditions where alcohol may have had a role, including both physical and mental health. When we look at people admitted for alcohol-related conditions, Ryedale is significantly lower compared to England (2,104 per 100,000 population compared to 2,367). This shows most alcohol-related harm is due to prolonged use, manifesting in a wide range of health problems. Further information on the

2014-2019 North Yorkshire Alcohol Strategy can be found on North Yorkshire Partnership website via the following link <http://www.nypartnerships.org.uk/>

Nutrition, activity and excess weight

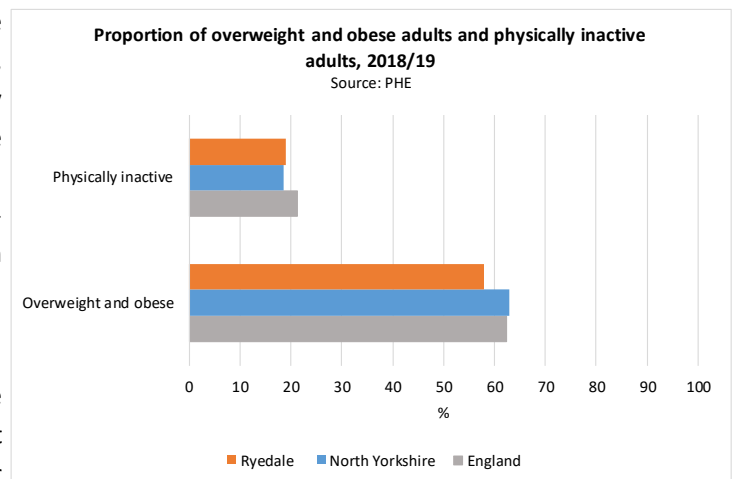
Nutrition, activity and excess weight



Childhood obesity is closely related to excess weight in adulthood. The proportion of children in Reception who are overweight or obese in Ryedale is similar to England overall (21.5% locally and 22.6% nationally). The prevalence of excess weight in year 6 children is similar to England (31.6% locally and 34.3% nationally). There is an increase in the proportion of obese children from Reception to year 6 in Ryedale, demonstrating that it is important to identify children at risk for excess weight early on and minimise excessive weight gain through primary school. For overweight children, we don't see

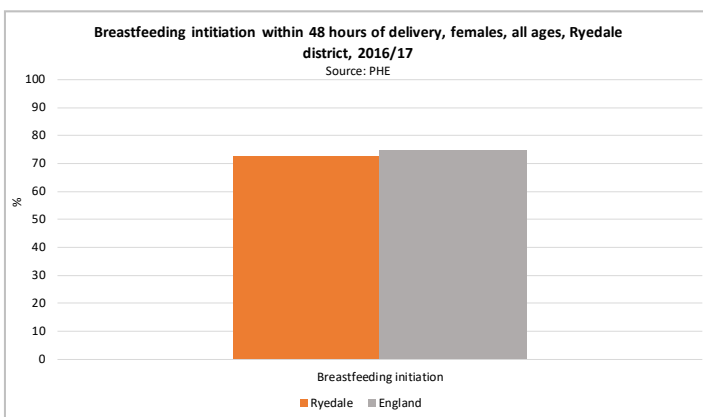
an increase between Reception and year 6 but this could be because children change weight status (from overweight to obese) rather than indicating weight maintenance. Details of approaches to tackle excess weight across the life course are in the strategy [Healthy Weight, Healthy Lives: Tackling overweight and obesity in North Yorkshire 2016-2026](#)

Physical activity is associated with overall better health. Adults are identified as being inactive if they engage in less than 30 minutes of physical activity per week. The proportion of inactive adults in Ryedale is similar to England (19.0% locally and 21.4% at the national level). Targeting adults who are inactive will impact on the reduction of chronic disease, particularly those related to excess weight. Targeting obesity is a priority area for Government as a way to decrease premature mortality and avoidable ill health. The proportion of adults who are overweight or obese in Ryedale is 57.9%—similar to the proportion of adults with excess weight in England.



The Government recommends that adults eat at least five portions of fruit and vegetables per day. Self-reported fruit and vegetable consumption shows that Ryedale is higher than England average in consuming the recommended fruit and vegetables, and indicates that just under 30% of the adult population in Ryedale could improve what they eat.

Breastfeeding provides benefits to the health and wellbeing of both mother and child. In Ryedale, 72% of women initiate breastfeeding within 48 hours of delivery, similar to the proportion of women in England (75%).

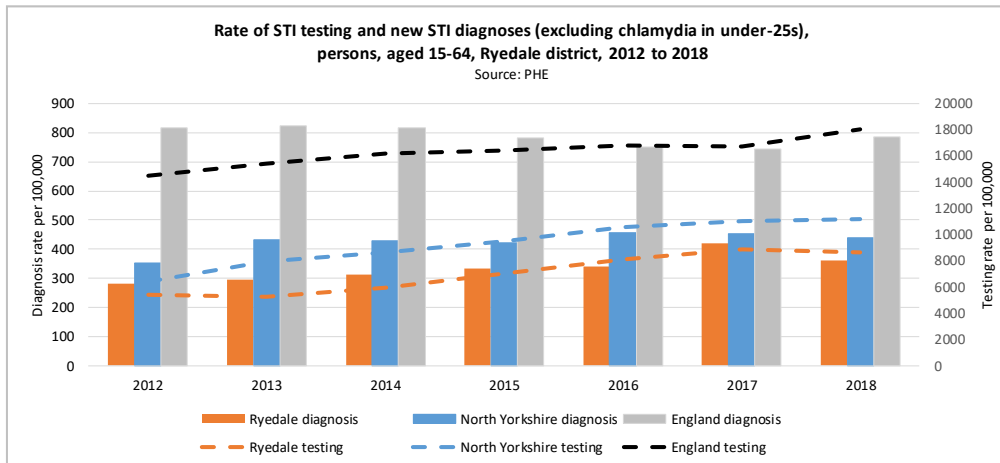


In order to increase breastfeeding a strategy and action plan has been developed that is focusing on:

- Increasing initiation of breastfeeding
- Increasing breastfeeding at 6-8 weeks
- Reducing the gap between breastfeeding rates in the most deprived areas/population groups and the York and North Yorkshire average.

Lifestyle and behaviour

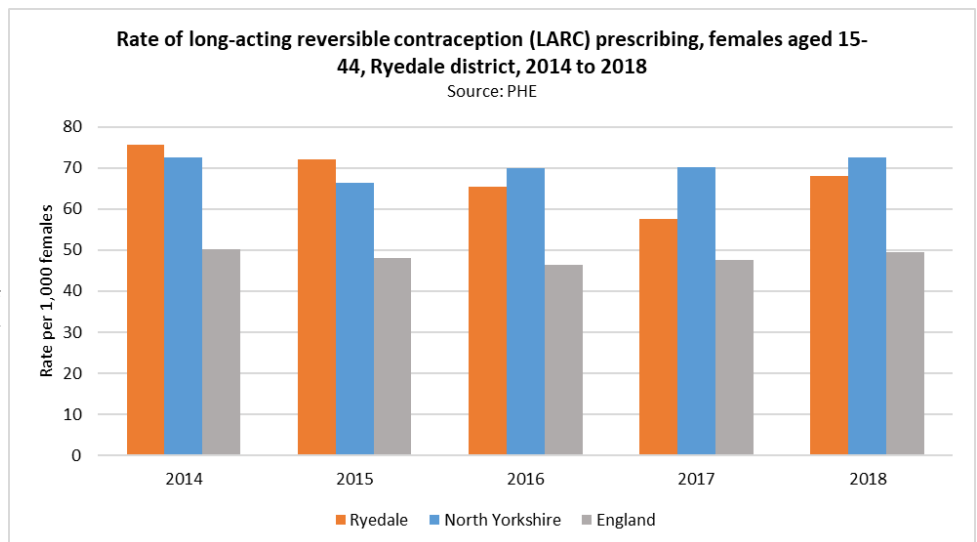
Sexual health



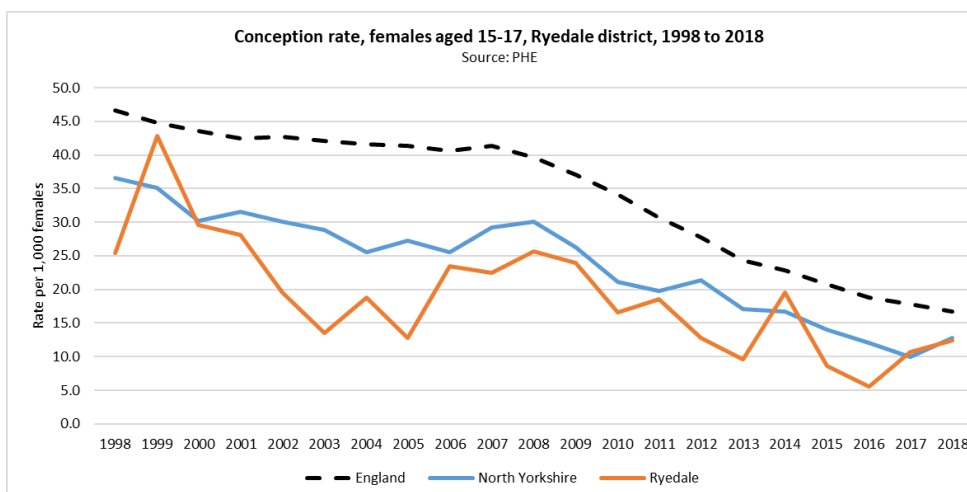
It is important that we have a good understanding of local sexual health needs in order to provide the most appropriate services and interventions. In Ryedale, the rate of new Sexually Transmitted Infection (STI) diagnoses for 2018 at 360 per 100,000 population is significantly lower than the rate of 784 per 100,000 in England. This excludes chlamydia diagnoses in the under

25's as they have their own active screening programme in place.

The STI testing rate for the same time period, shows Ryedale is significantly lower than England but similar to North Yorkshire. There are many factors which can explain a low diagnosis rate; it is not necessarily indicative of a lower prevalence of disease. When accompanied by a low rate of testing, it is important to consider if all of those who need to be tested within the population have services that are accessible and available to them.



Long-acting reversible contraception (LARC) is recommended as a cost-effective and effective form of birth control. As part of the priority to make a wide-range of contraceptive services available to all, LARC prescription measurement is often used as a proxy measure for access to wider contraceptive services. An increase in access to contraceptive services is thought to lead to a reduction in unintended pregnancies. The prescription rate for LARC in Ryedale at 68.1 per 1,000 women aged 15-44 is significantly higher than the rate seen in England (49.5).



Unplanned pregnancies at any stage of life can have an impact on women's health and well-being. There is a great deal of attention paid to the experiences of teenagers who have an unplanned pregnancy, particularly in relation to the wider determinants of health including education, housing and poverty. The rate of teenage conception in Ryedale is similar to England (12.4 and 16.7 per 1,000 women aged 15-17, respectively); however there has been a slight

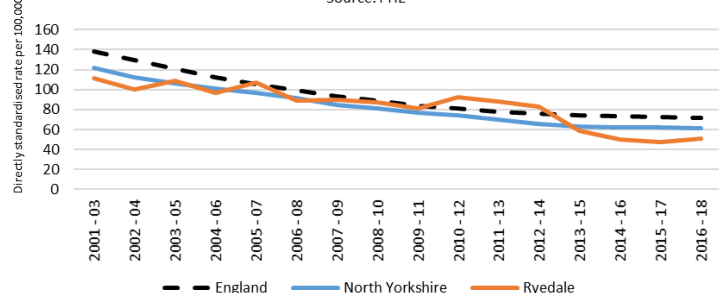
increase between 2017 and 2018. however, numbers are small and should be interpreted with caution.

Diseases and Death

Major causes of death

Under 75 mortality rate from all cardiovascular diseases, Ryedale district, 2001-03 to 2016-18

Source: PHE



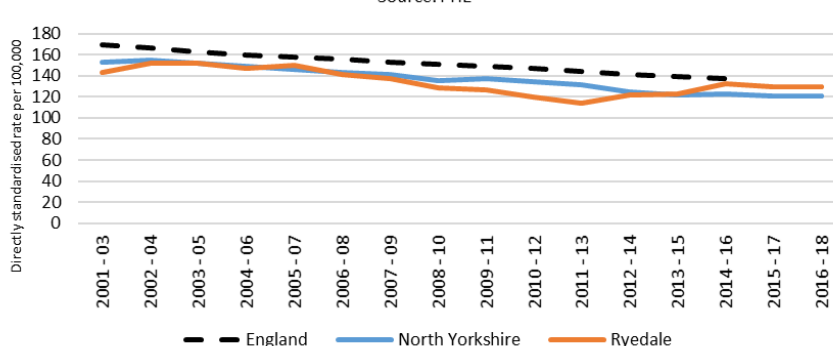
In Ryedale, there were 514 deaths in 2018 for those aged under 75. Over half of deaths fell under just three broad causes: 101 (20%) due to cardiovascular diseases; 246 (48%) due to cancer and 49 (10%) due to respiratory diseases.

The rate of mortality for individuals aged under 75 from cardiovascular disease has increased slightly in Ryedale between 2015-17 and 2016-18 and is significantly lower than national (71.7 per 100,000) and Yorkshire and Humber (82.0 per 100,000) average.

The rate of mortality for individuals aged under 75 from cancer has remained the same in Ryedale between 2015-17 and 2016-18 and is now similar to the national (132.3 per 100,000) and regional (141.2 per 100,000) average.

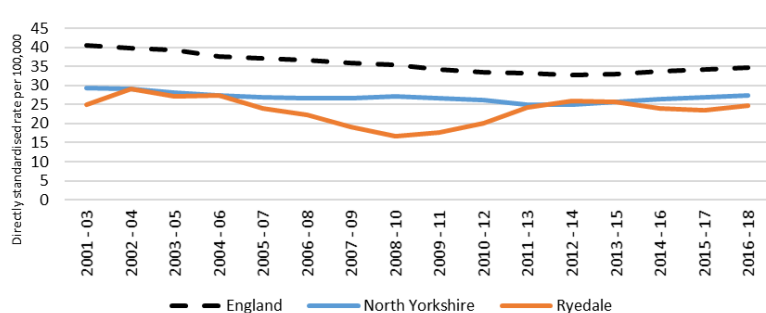
Under 75 mortality rate from cancer, Ryedale district, 2001-03 to 2016-18

Source: PHE



Under 75 mortality rate from respiratory disease, Ryedale district, 2001-03 to 2016-18

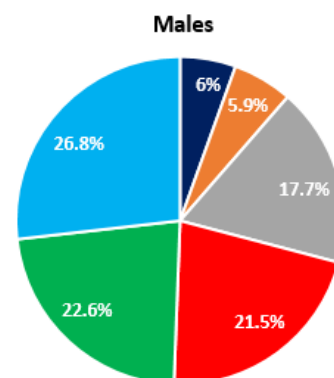
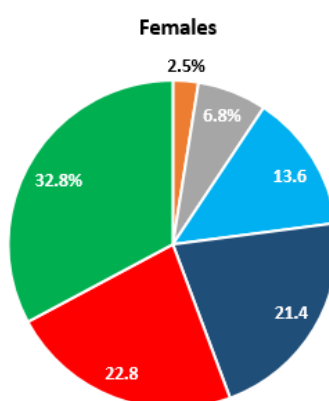
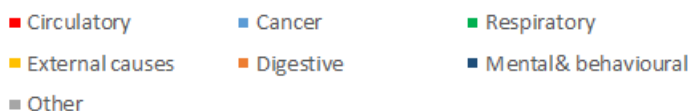
Source: PHE



The rate of mortality for individuals aged under 75 from respiratory disease has decreased in Ryedale between 2013-15 and 2016-18 and is significantly lower than the national (34.7 per 100,000) and regional (41.2 per 100,000) averages.

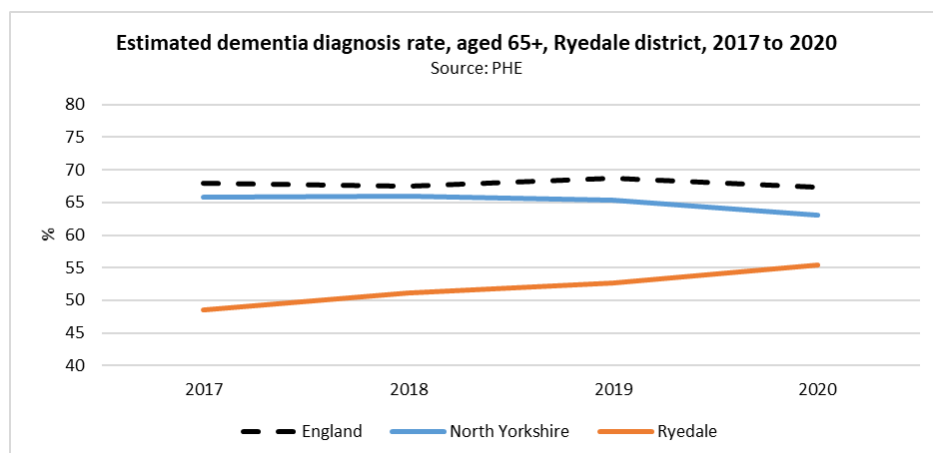
Inequality

The following charts show causes of death which contribute towards the life expectancy gap between the most deprived and least deprived areas in Ryedale district. The biggest contributor to the life expectancy gap for both men is cancer and respiratory and women is respiratory and circulatory diseases. Targeting public health services in deprived areas will help to narrow the inequality in life expectancy. Data from PHE based on ONS death registration data.



Diseases and Death

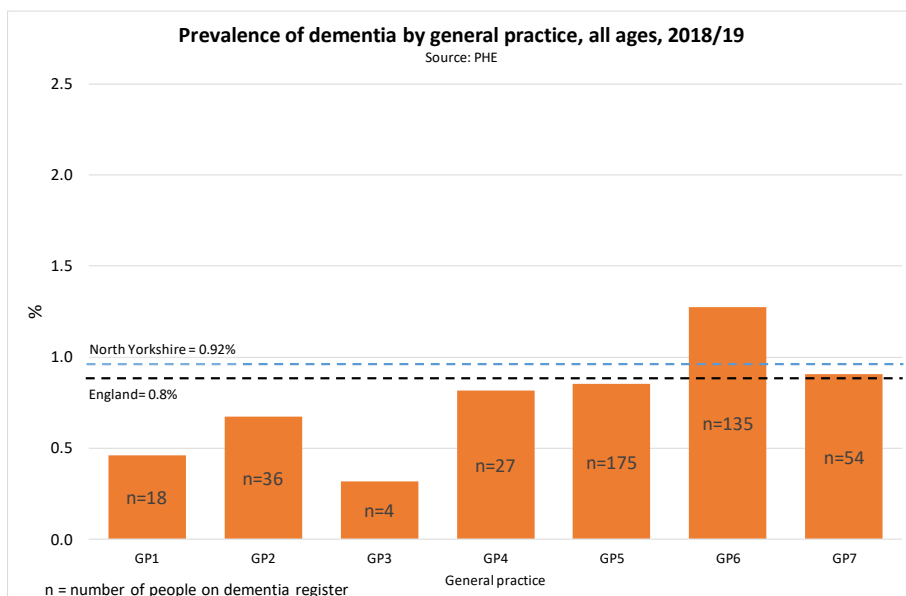
Dementia



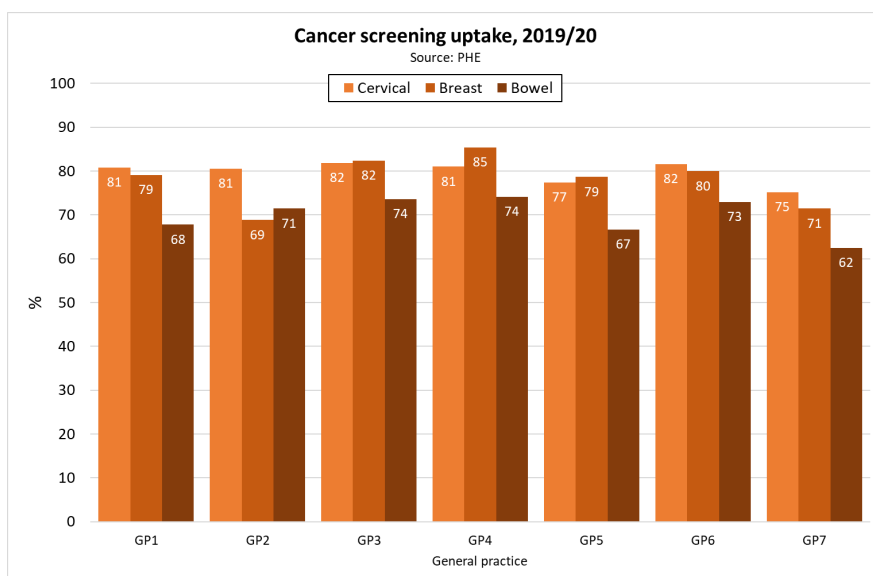
Ryedale has a significantly lower rate of those estimated to have dementia being diagnosed when compared with England (55.4% vs 67.4%).

NHS Health Check works to identify people at risk of vascular diseases including vascular dementia so they can reduce risks. More information on NHS Health Checks can be found via FingerTips [website](#).

The chart to the right shows the number of people with dementia registered at each general practice as a proportion of all people registered at each practice, for practices in the district. There are two GPs in Ryedale that have a higher proportion of people with dementia than the national average.



Cancer Screening



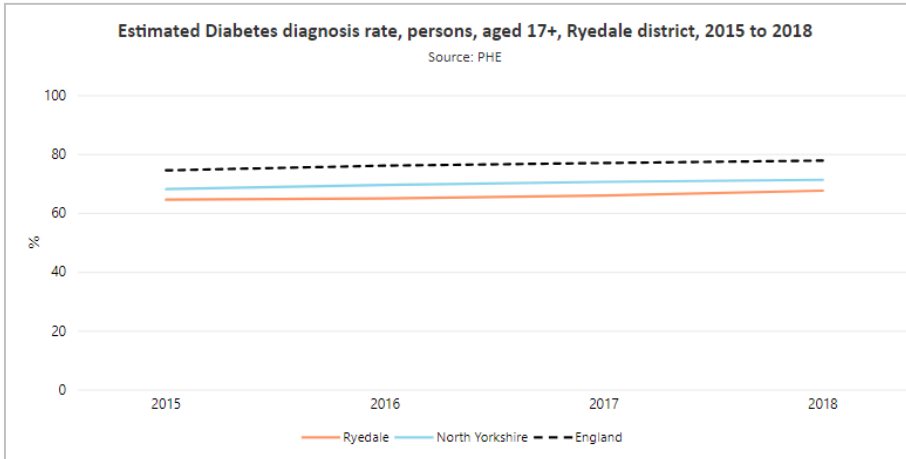
In Ryedale there tends to be higher uptake of screening for breast and cervical cancer when compared with bowel cancer.

Breast and cervical cancer screening rates continue their long-term downward trend but coverage remains significantly higher than England across the district. Bowel cancer screening uptake is also significantly higher than England but with only a slight increase of uptake since 2015.

Screening for cancer leads to diagnosis at an earlier stage, leading to better outcomes and increased survival.

Diseases and Death

Diabetes

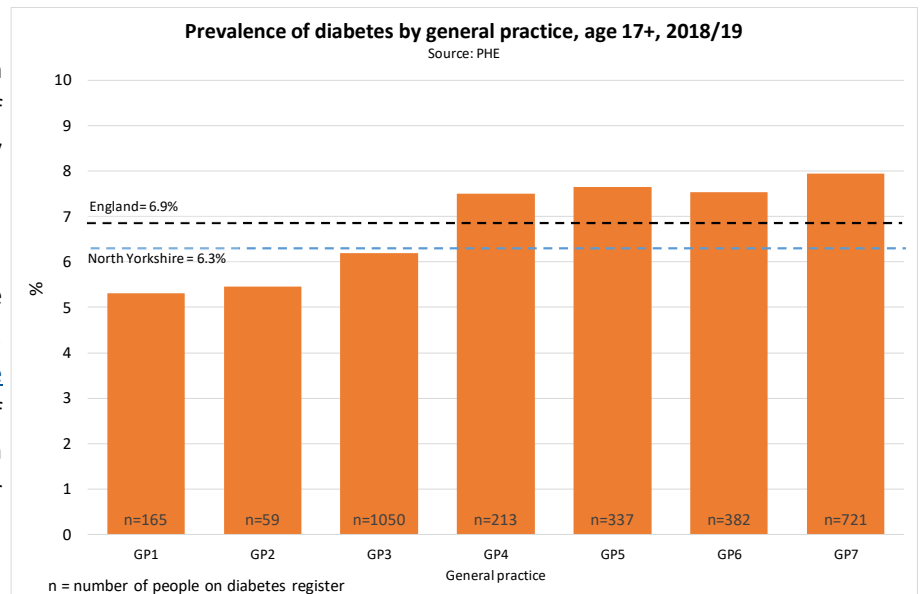


Complications from diabetes result in considerable morbidity and have a detrimental impact on quality of life. Type 2 diabetes is typically associated with excess weight can be prevented or delayed by lifestyle changes.

To implement effective interventions, it is important to identify all cases. The gap between observed prevalence (the number of diabetes cases recorded) and the actual prevalence (observed plus those who are undiagnosed) helps to

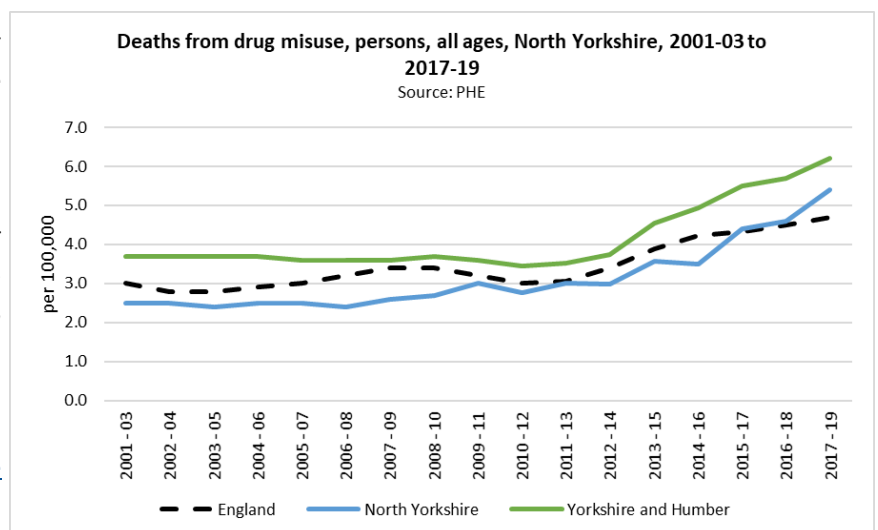
quantify those who may be untreated. In Ryedale, it is estimated that only 68% of diabetes cases are diagnosed, significantly lower than England (78%).

The chart to the right highlights the prevalence of diabetes by general practice. The [NHS Diabetes Prevention Programme](#) aims to identify those at high risk of developing diabetes and the NHS Health Checks programme routinely tests for those at risk of developing diabetes.



Substance Misuse

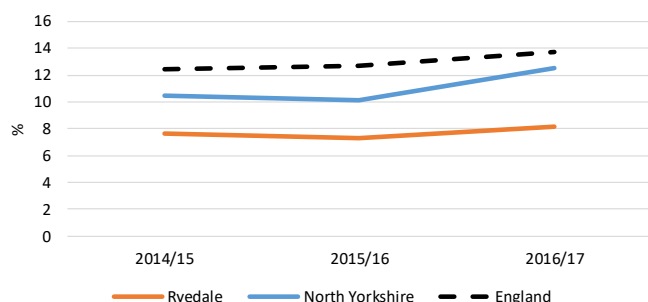
Deaths from drug misuse is not available for Ryedale district as the value cannot be calculated as the numbers are too small. However, deaths from drug misuse in North Yorkshire have increased slightly between 2015-17 and 2017-19 and the rate per 100,000 is similar to the England average (5.4 nationally v 4.7 locally). Between 2001-03 and 2017-19 deaths from drug misuse have remained similar to the England average. Confidential help with drug and alcohol addiction is available through [North Yorkshire Horizons](#).



Mental Health

People reporting depression or anxiety, persons, aged 18+, Ryedale district, 2014/15 to 2016/17

Source: PHE



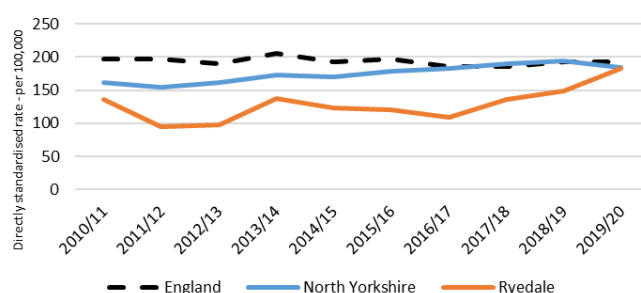
The percentage of individuals reporting depression or anxiety in Ryedale is significantly lower (8.2%) when compared to the national average (13.7%). Ryedale district has the lowest proportion of depression or anxiety when compared to other districts in North Yorkshire.

Ryedale's rate of individuals who have long-term musculoskeletal disease who are also feeling depressed or anxious is not statistically significantly different from the England average (12.6% locally compared to 24.1% nationally).

Ryedale district has a significantly lower rate of emergency hospital admissions for self-harm (182.5 per 100,000) similar to the England average (192.6 per 100,000). The proportion of hospital admissions for intentional self harm has increased between 2018/19 and 2019/20.

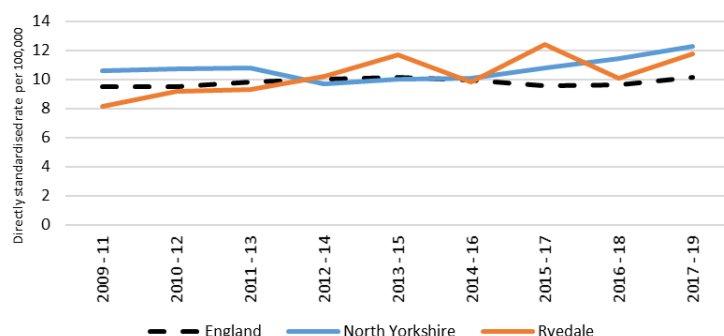
Emergency Hospital Admissions for Intentional Self-Harm, all ages, Ryedale district, 2010/11 to 2019/20

Source: PHE



Suicide rate, all persons, aged over 10 years, Ryedale district, 2009-11 to 2017-19

Source: PHE

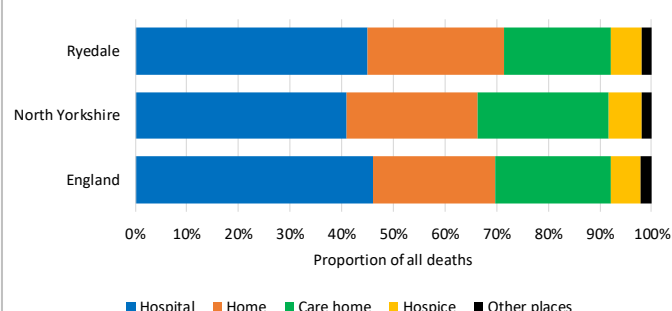


Suicide is a significant cause of death in young adults, and is seen as an indicator of underlying rates of mental ill-health. The suicide rate in Ryedale increased from 2016-18 to 2017-19 and is similar to England (11.7 per 100,000 locally; 10.1 per 100,000 nationally). The suicide rate for males is higher than females in Ryedale, in line with national rates. However, these are small numbers and should be interpreted with caution. Further information can be found in the [Suicides Audit in North Yorkshire 2015](#) and on the [North Yorkshire Partnerships Suicide Prevention](#) webpage.

End of Life Care

Place of death, persons, all ages, Ryedale district, 2017

Source: PHE



The [North Yorkshire Joint Health and Wellbeing Strategy](#) includes an ambition to increase the number of people dying either at home or place of choice that they chose by 2020. In recent years, the proportion of people dying at home in North Yorkshire has tended to increase and Ryedale has a higher proportion of people dying at home compared with county and national rates. Ryedale District has a higher proportion of people dying at hospital when compared to county averages in 2017.

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