

# North Yorkshire Joint Strategic Needs Assessment 2019

## Selby District Summary Profile

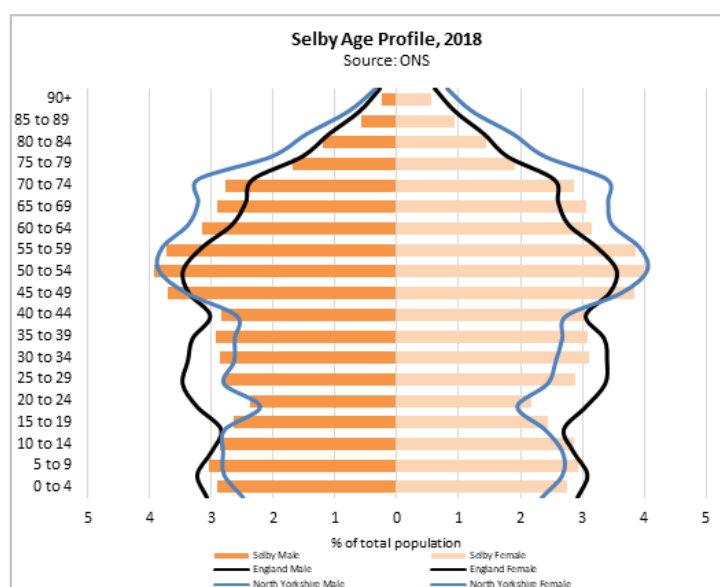
### Introduction

This profile provides an overview of population health needs in Selby District. Greater detail on particular topics can be found in our Joint Strategic Needs Assessment (JSNA) resource at [www.datanorthyorkshire.org](http://www.datanorthyorkshire.org). This document is structured into four parts: population, wider determinants of health, health behaviours and diseases and death. It identifies the major themes which affect health in Selby District and provides links to the local response which meets those challenges.

### Summary

- The population in Selby District is ageing. By 2025, there will be 3,300 additional people aged 65+, a 19% increase from 2018, but an unchanged 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.
- Selby District has the second highest health inequality in North Yorkshire. Life expectancy varies by 9 years between wards. The main causes of death underlying this inequality are circulatory disease and cancer.
- In Selby South and Selby North wards, about one third of children grow up in poverty.
- The excess winter deaths index is at its highest level since 2008/09, with 73 'excess' deaths in the winter of 2016/17 compared with the preceding summer and following spring.
- Selby District has a high proportion of people dying in hospital compared with other districts in North Yorkshire.

### Overview: Population



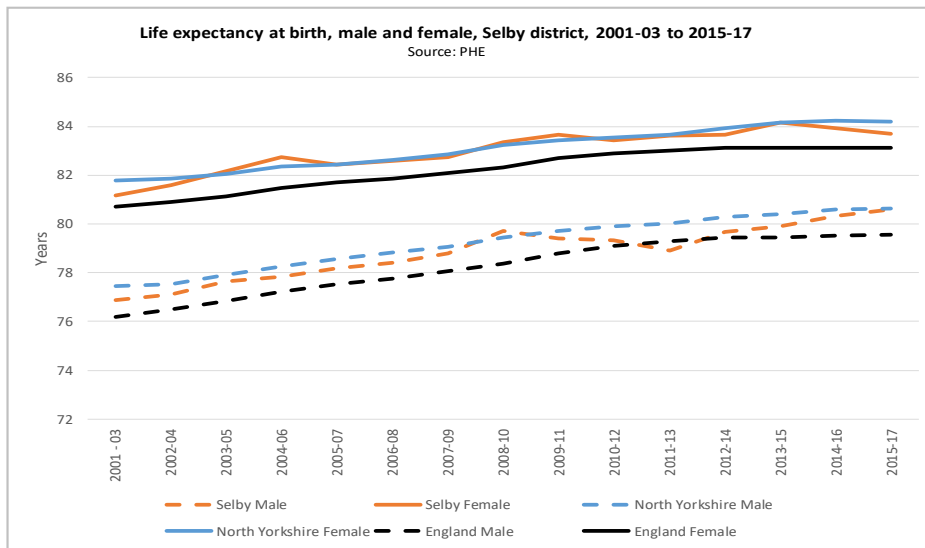
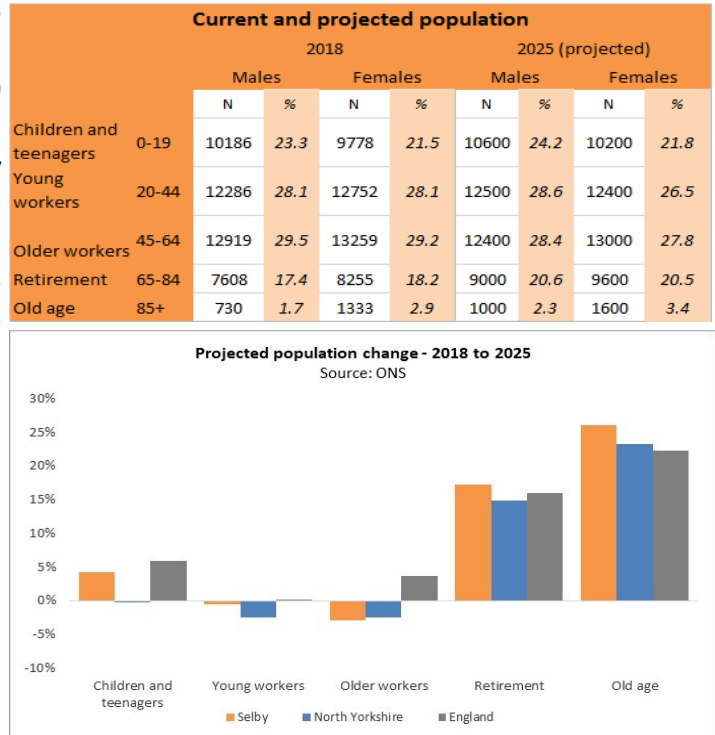
The population pyramid shows that, overall, the population in Selby district is generally older than England, with more residents between the ages of 45 -74, and fewer aged under 45. The population make-up is broadly similar to North Yorkshire. The shape of the pyramid is typical of a population with long life expectancy and low birth rate.

There are about 8,600 people aged 65+ with a limiting long term illness. Of these people, 46% (4,000) report that their daily activities are limited a lot because of their illness (POPPI, 2019).

1.8% of the population is from black, Asian and minority ethnic groups, compared with 2.8% in North Yorkshire and 15% in England.

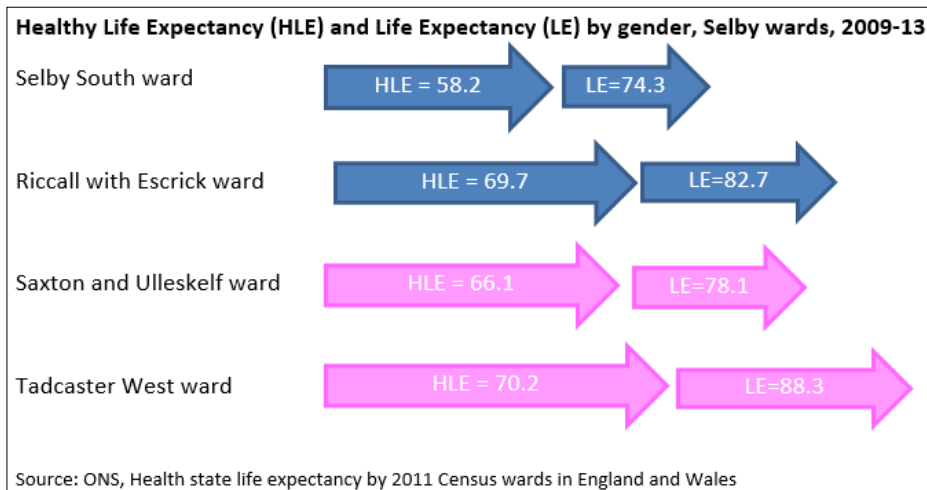
# Life Expectancy

The population of Selby District is estimated to be 89,106 and is set to increase to 92,300 in 2025. The birth rate in the district is 62 per 1,000 women (England = 69 per 1,000 women). Projections indicate that, by 2025, the population in the over-85 age group is expected to increase in Selby District by 26% , compared to an increase of 23% is expected in North Yorkshire and an increase of 22% in England. A 17% increase is also anticipated for those in the retirement category (age 65-84) in the district, compared to the 16% projected for England. Meanwhile, it is projected that the population of children and teenagers in Selby will increase by 4%, similar to England (6%).



Life expectancy at birth is increasing for both men and women in Selby District. For females, life expectancy in Selby District (83.7 years) is greater than then England (83.1 years) but slightly less than North Yorkshire (84.2 years). A similar pattern is seen for males.

By comparing healthy life expectancy with overall life expectancy, we can get a richer picture of years spent in good health. In Selby District, 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 10 year difference in life expectancy for females between Saxton and Ulleskelf ward and Tadcaster West ward, compared with an eight year difference for men between Selby South and Riccall with Escrick wards. Men in Selby South (the ward with the lowest life expectancy) can expect to live 58 years in good health; however, men in Riccall with Escrick ward spend 70 years in good health.



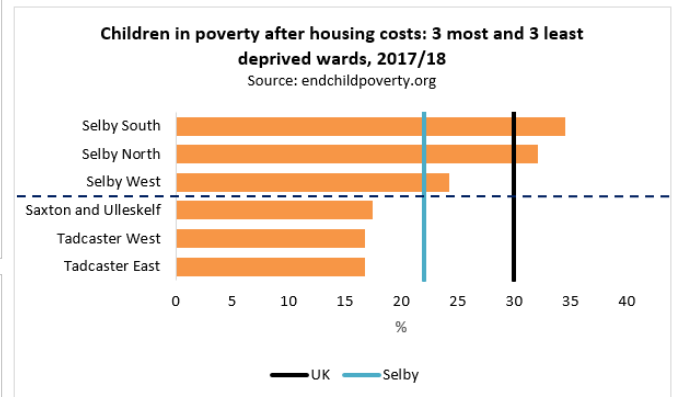
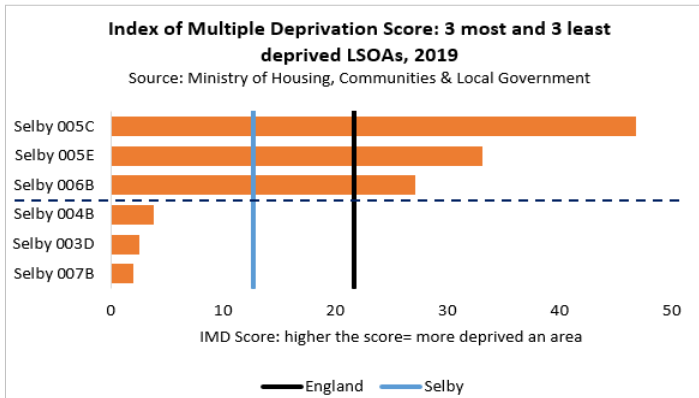
For both sexes, the wards with the highest life expectancy exceed that seen by England and those with the lowest life expectancy are below the England figures.

# Wider determinants of health

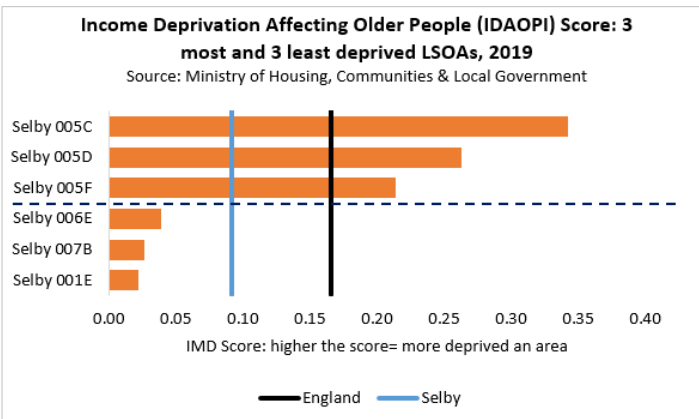
## Poverty

The 2019 Index of Multiple Deprivation (IMD) identifies one Lower Super Output Area (LSOA) out of a total of 50 within Selby district which are amongst the 20% most deprived in England. The LSOA includes part of Selby East and 1,419 people live in there.

LSOA name	Ward
Selby 005C	Selby West
Selby 005E	Selby East
Selby 006B	Selby West
Selby 004B	Sherburn in Elmet
Selby 003D	Riccall
Selby 007B	Brayton



LSOA name	Ward
Selby 005C	Selby West
Selby 005D	Selby West
Selby 005F	Selby East
Selby 006E	Selby West
Selby 007B	Brayton
Selby 001E	Tadcaster



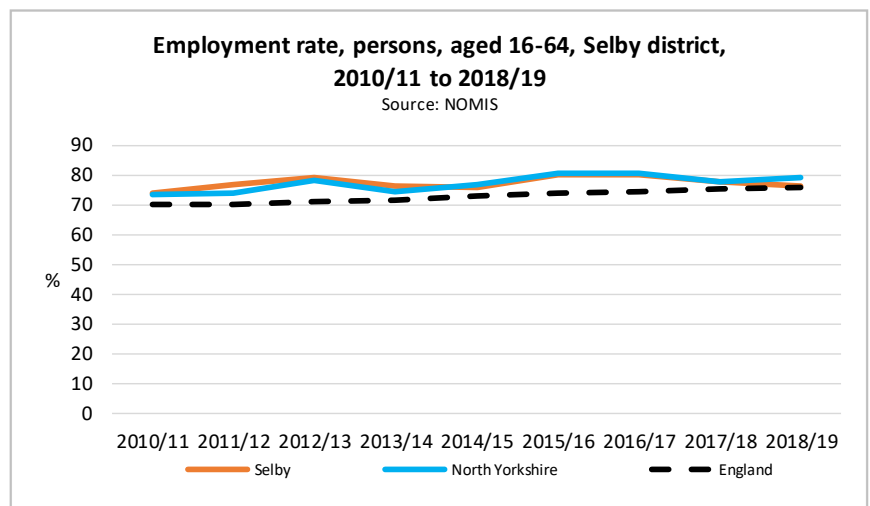
The IMD also calculates deprivation for specific groups based on key indicators. For children, child poverty (22%, 4306 children) is lower in Selby District than England (30%). However, rates rise to over 30% in Selby North and Selby South wards, higher than both national and district rates.

Selby East and Selby West wards have higher rates of older people in deprivation compared with both England and Selby district.

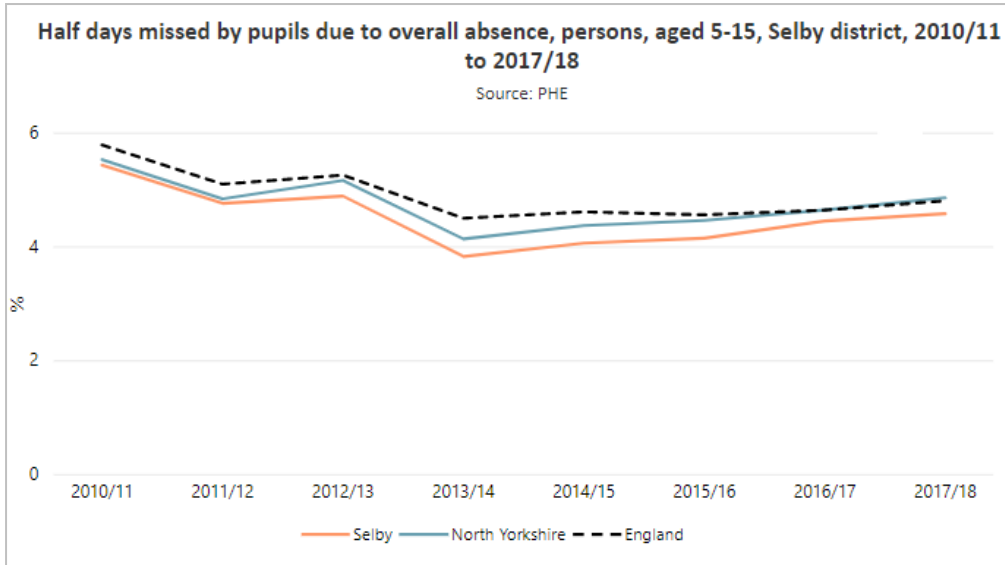
## Employment

The employment rate in Selby (77%) is slightly higher than England's rate (76%) but lower compared to North Yorkshire (79%). The rate has decreased by 1.2% from 2017/18 to 2018/19.

In 2018, average weekly earnings in Selby (£458) were similar to England (£451) and Yorkshire and Humber (£408) averages.

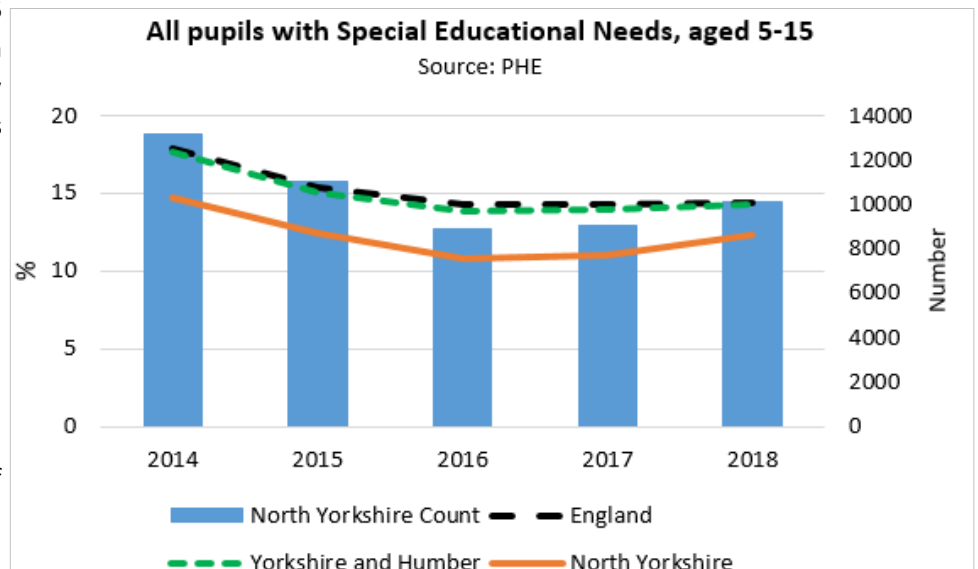


# Education



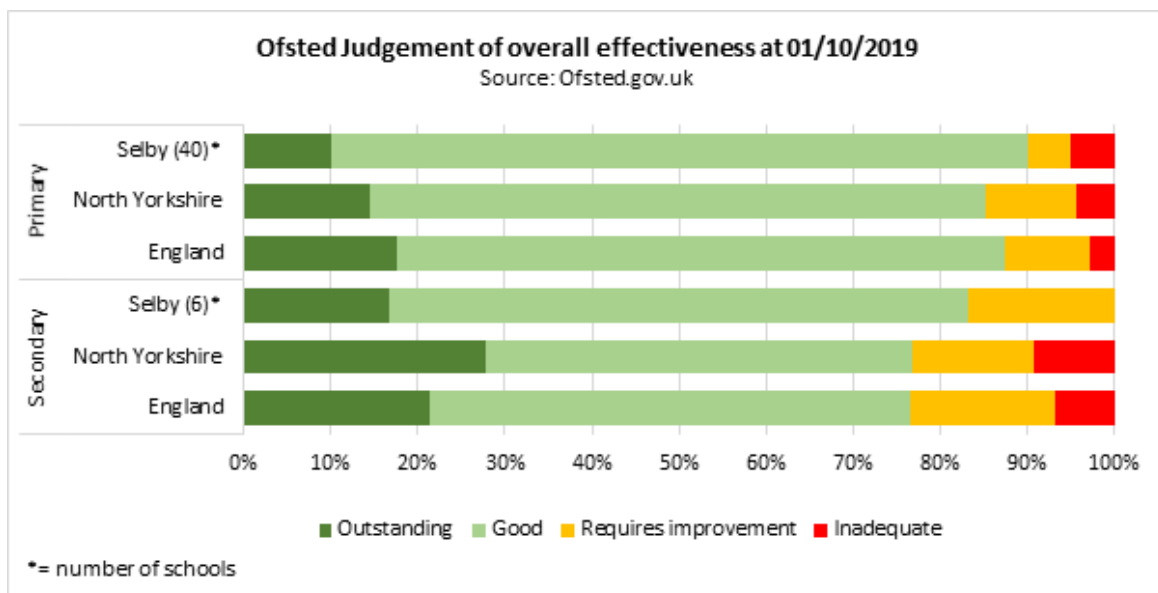
Low school attendance is linked to lower educational attainment. The proportion of half days missed by pupils due to overall absence (both authorised and unauthorised) is 4.6%, similar to the national (4.8%) and Yorkshire and the Humber (5%) averages in 2016/17.

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



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

Performance at primary schools is similar to county and national findings. Selby District 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'. The small number of secondary schools (6) means that this needs to be interpreted with some caution.



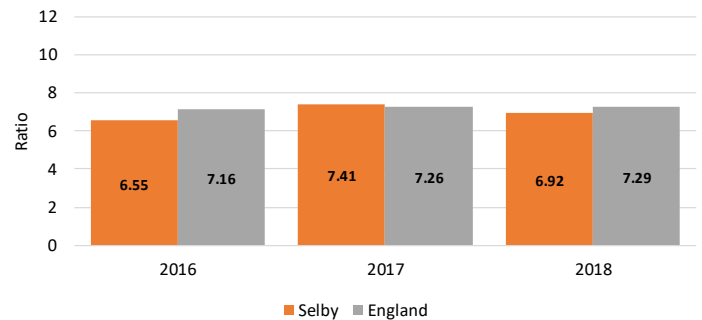
# Housing

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.

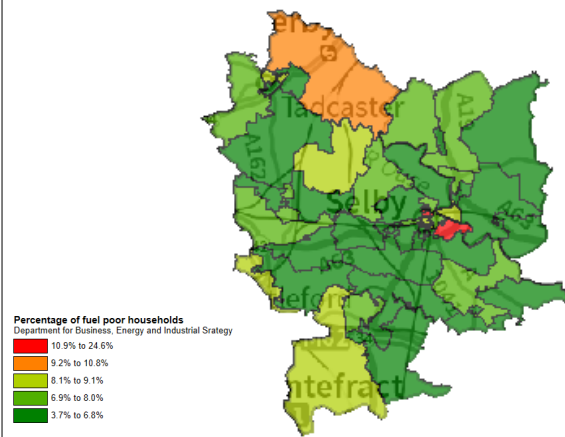
Selby District has a ratio of lower quartile house price to lower quartile earnings (estimating housing affordability for lower than average earners), similar to England. This has increased between 2016 and 2018, indicating that housing in Selby District is becoming less affordable relative to earnings.

**Ratio of lower quartile house price to lower quartile earnings, all ages, persons, Selby district, 2016 to 2018**

Source: PHE



**Percentage of Fuel poor households in Selby, 2017**



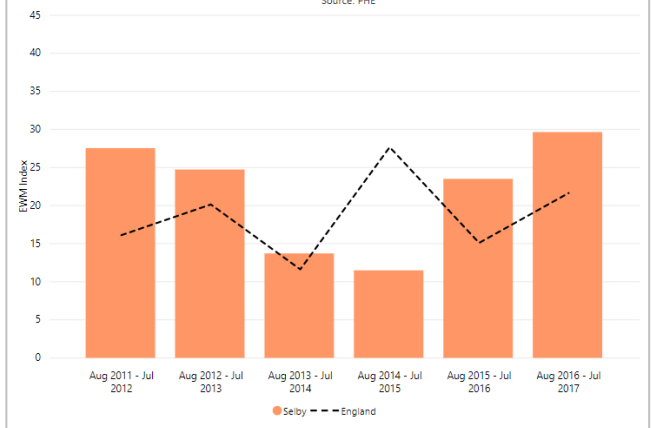
Fuel poverty rates are an issue for Selby District which is linked to deprivation. In 2017, 7.1% of households (2,530 households) in Selby District were classified as fuel poor, lower than the national average (11%). Merely tackling poverty would not necessarily relieve the fuel poverty, as often housing 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.

**Excess Winter Mortality Index, all ages, persons, Selby district, 2011/12 to 2016/17**

Source: PHE



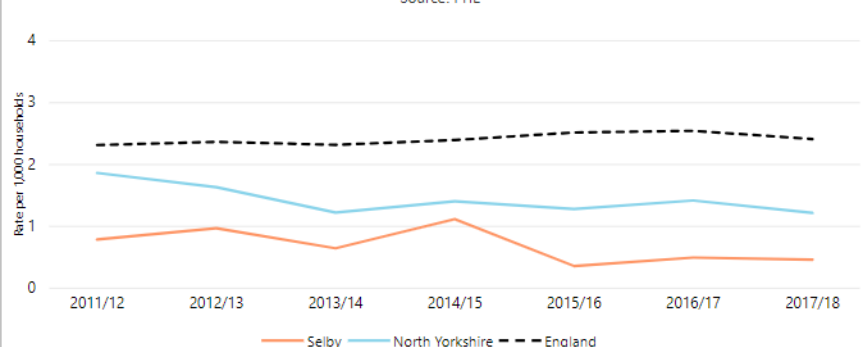
The chart to the right suggests a variable picture in the district. In 2016/17 the Excess Winter Mortality index increased from 23 to 30 but is still lower than the national average of 22.

The rate of households who are homeless has decreased in Selby District since 2011/12 and is below both North Yorkshire and England.

Selby District has the lowest rate of homelessness compared with other districts in North Yorkshire.

**Statutory homelessness, all ages, persons, Selby district, 2011/12 to 2017/18**

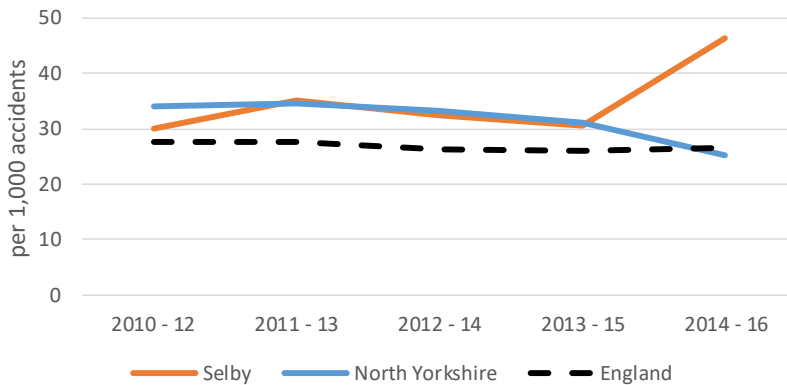
Source: PHE



# Transport

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

Source: PHE



Alcohol consumption is responsible for around one in every seven deaths in reported road traffic accidents in Great Britain.

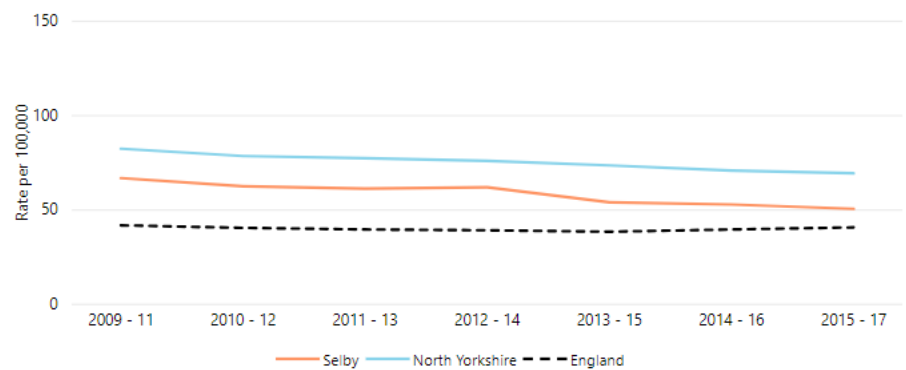
The rate of alcohol-related road traffic accidents in Selby has increased between 2013-15 and 2014-16 and is significantly higher than county and national rates. Selby is the only district in North Yorkshire with a rate significantly higher than England.

The chart shows the rate of people being killed and seriously injured (KSI) casualties on roads in Selby District is significantly higher than the national average at 51 per 100,000. However these are relatively small numbers and must be interpreted with caution

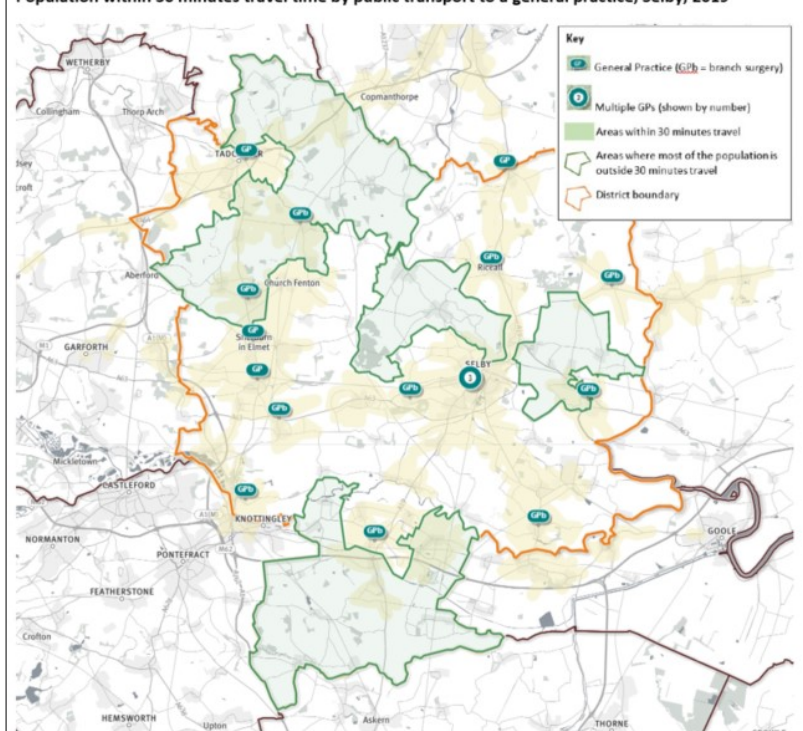
Across North Yorkshire, the rate of children killed and seriously injured on England's roads has decreased between 2014-16 and 2015-17 (from 19 per 100,000 to 18 per 100,000) and is now similar to the England average (17 per 100,000). More information on staying safe on the road can be found in [Safer Roads, Healthier Place: York and North Yorkshire Road Safety Strategy](#) and at

**Killed and seriously injured casualties on the road, persons, all ages, Selby district, 2009-11 to - 2015-17**

Source: PHE



**Population within 30 minutes travel time by public transport to a general practice, Selby, 2019**

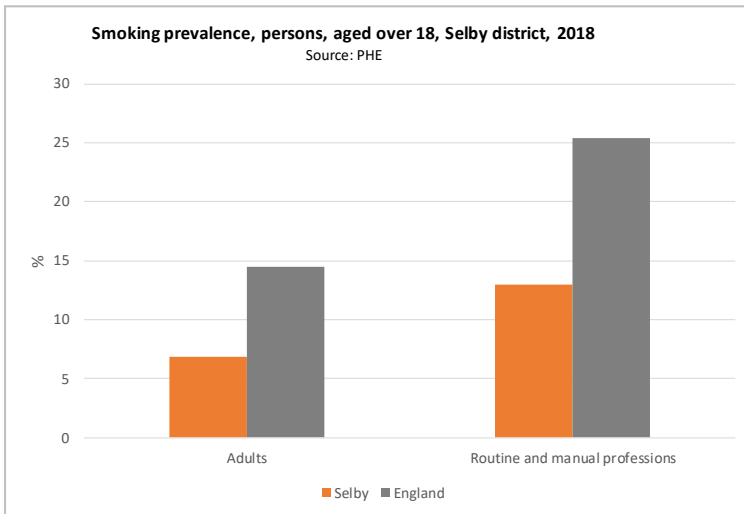


In Selby, most of the population (84%) lives within a 30 minute travel time, by public transport, to a general practice. There are about 14,200 residents in Selby District with longer travel times.

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.

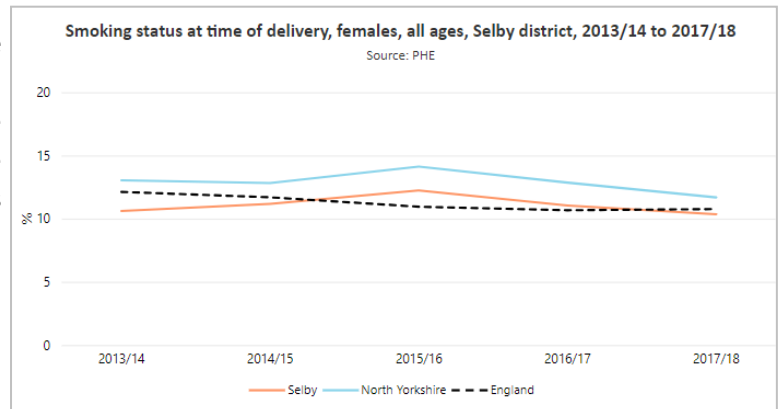
# Lifestyle and behaviour

## Smoking

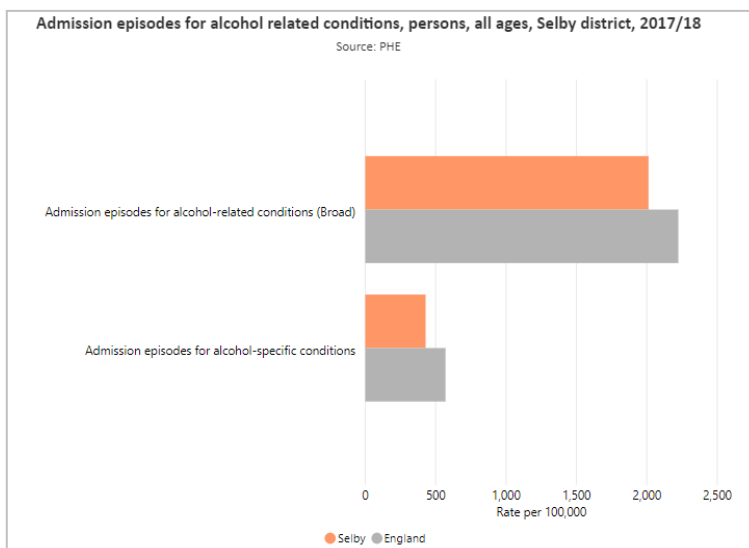


Smoking prevalence for adults in Selby District is lower than England (7% and 14%, respectively). For adults in routine and manual professions, smoking rates are higher than for the general population; the prevalence in Selby District is 13%, which is not statistically significantly different to 25% for England, due to small sample sizes in this survey. Smoking rates in this group have tended to decline since 2014.

Maternal smoking during pregnancy is known to be detrimental for both the health of the mother and baby. In Selby District, maternal smoking status at time of delivery is 10% (86 births), similar to England. The prevalence of maternal smoking in the district has remained relatively stable over the past five years.



## Alcohol

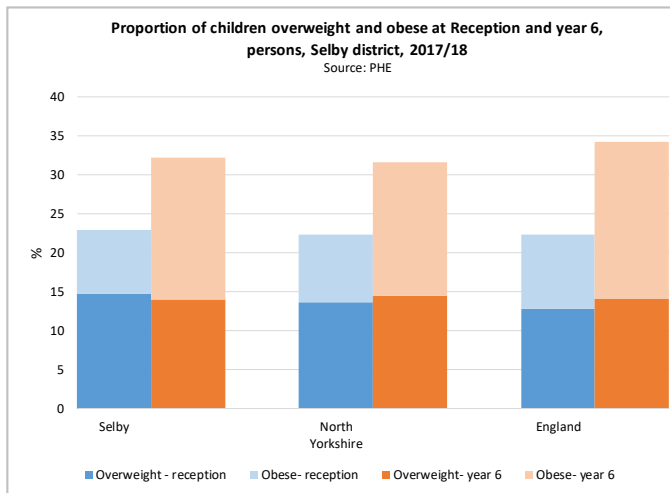


Implementing appropriate local interventions ensures we reduce misuse and harm associated with alcohol in our communities. Overall, the rate of admission episodes for alcohol-specific conditions in Selby District is lower than England at 428 per 100,000 population compared to 569 for England. As alcohol 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, Selby District is also lower than England (2,012 per 100,000 population compared to 2,223). 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/>

# Lifestyle and behaviour

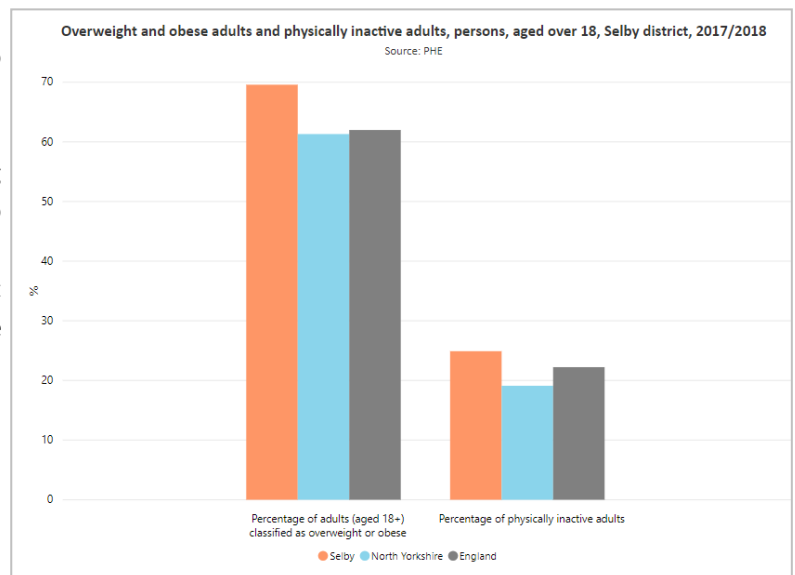
## Nutrition, activity and excess weight



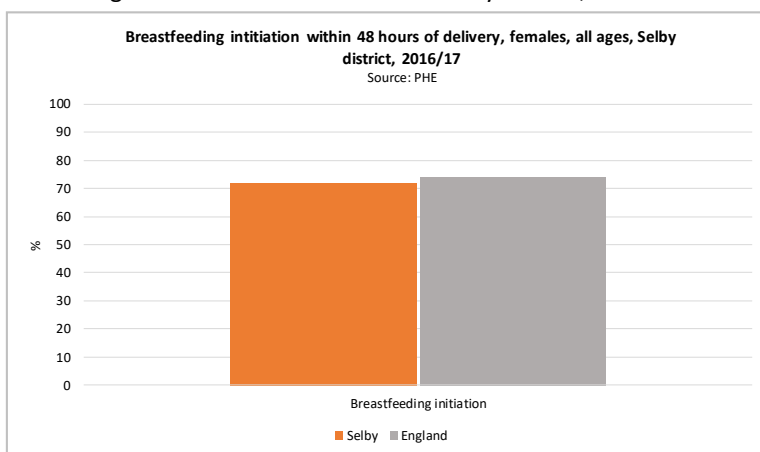
Childhood obesity is closely related to excess weight in adulthood. The proportion of children in Reception who are overweight or obese in Selby District is similar to the England overall (both 23%). This is also true for Year 6 children (32% locally and 34% nationally). There is an increase in the proportion of obese children from Reception to Year 6 in Selby District, 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 see a slight decrease 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 lifecourse 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 Selby District is 25%, similar to England (22%). 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 Selby District is 64%, similar to the England.



Breastfeeding provides benefits to the health and wellbeing of both mother and child. In Selby District, data for 2017 about breastfeeding initiation in the 48 hours after delivery

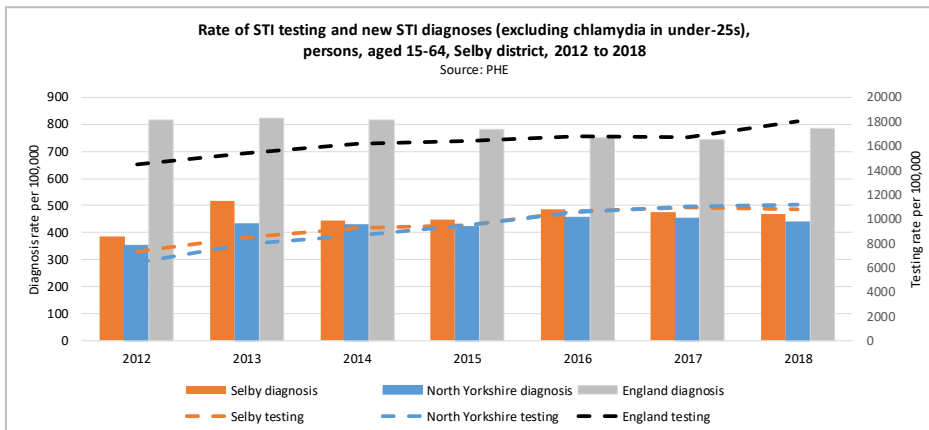


is not available, but the 2015/16 data indicate 72% of women did so, compared with 74% of women in England in the same time period. In order to increase breastfeeding, a strategy and action plan has been developed, focusing on:

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

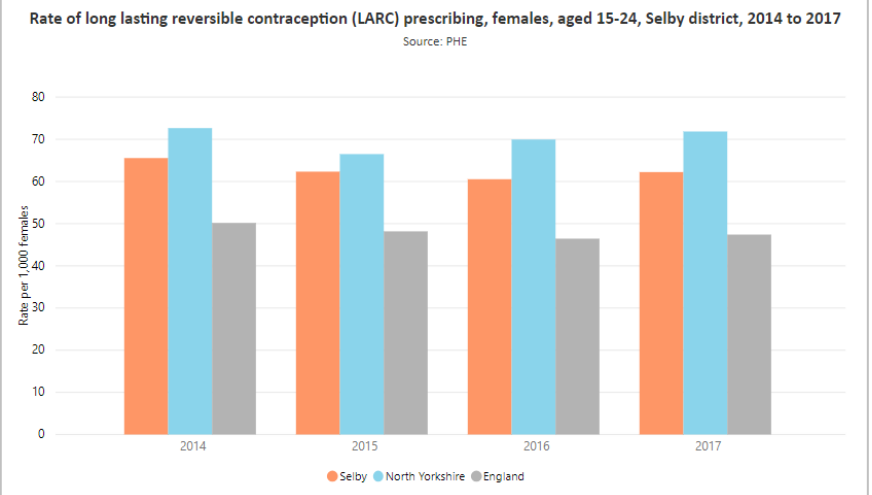
# Lifestyle and behaviour

## Sexual health

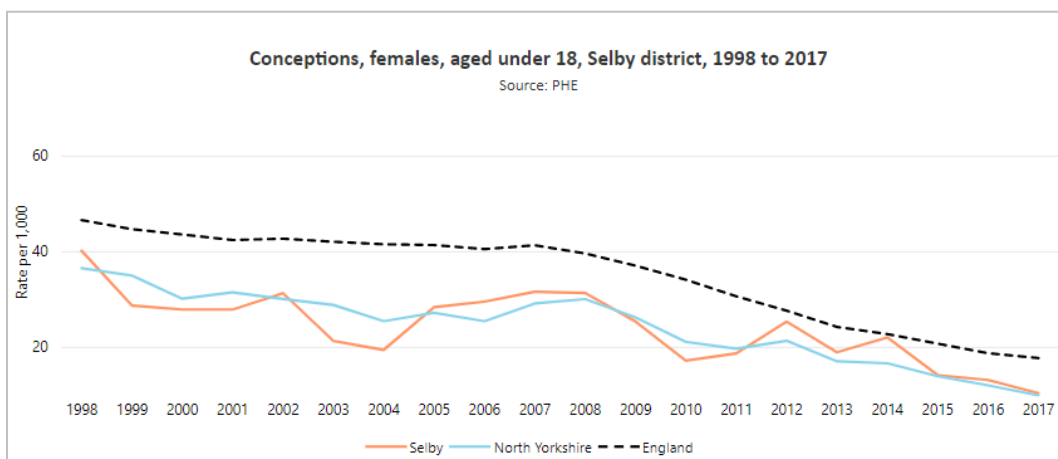


It is important that we have a good understanding of local sexual health needs in order to provide the most appropriate services and interventions. In Selby District, the rate of new sexually transmitted infection (STI) diagnoses for 2018 (469 per 100,000) is significantly lower than England (784 per 100,000). This excludes chlamydia diagnoses in the under 25s, which have their own active screening programme in place.

The STI testing rate for the same time period, shows Selby District 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 Selby District (62 per 1,000 women aged 15-44) is significantly higher than England (47/1,000).



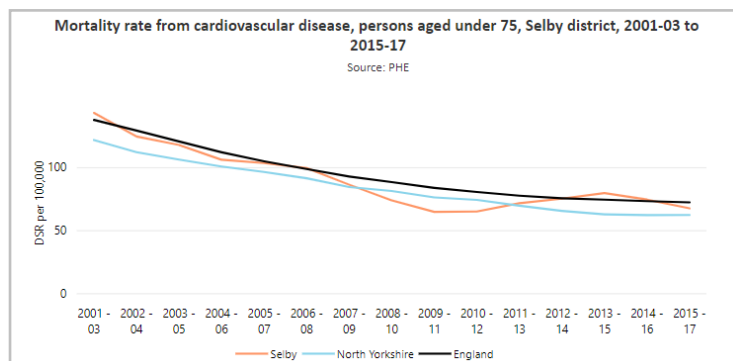
Unplanned pregnancies at any stage of life can have an impact on women's health and well-being. There is a great deal of attention paid to the experiences of teenagers who have an unplanned pregnancy, particularly in relation to the wider determinants of health including education, housing and poverty. In Selby District, the rate of

teenage conception is significantly lower than England (10 and 18 per 1,000 women aged 15-17, respectively), and continues a long-term downward trend.

# Diseases and Death

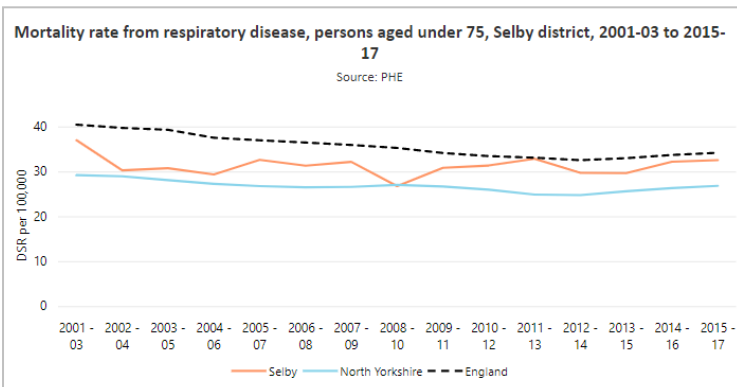
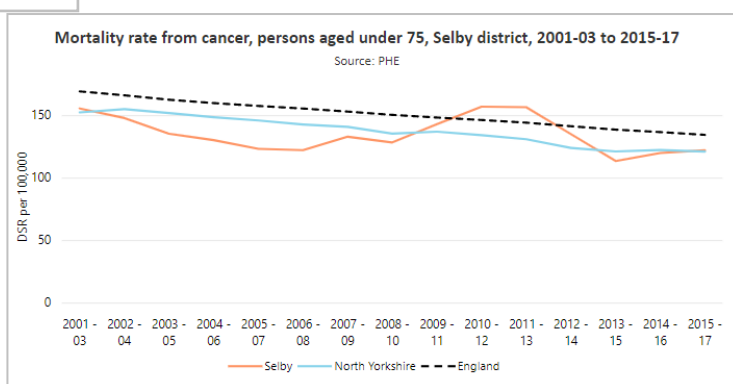
## Major causes of death

In Selby, there were 787 deaths in 2017. Over half of deaths fell under just three broad causes: 220 (28%) due to circulatory diseases; 212 (27%) due to cancer and 108 (14%) due to respiratory diseases.



The rate of mortality for individuals aged under 75 from cardiovascular disease has decreased in Selby between 2001-03 and 2015-17. At 67.8 per 100,000, Selby is not significantly different from England (72.5 per 100,000) and Yorkshire and the Humber (82.6 per 100,000).

The rate of mortality for individuals aged under 75 from cancer has increased slightly since 2015-17 from 120 to 122.2. Selby's latest rate (122 per 100,000) is not significantly different from England (134.5 per 100,000).



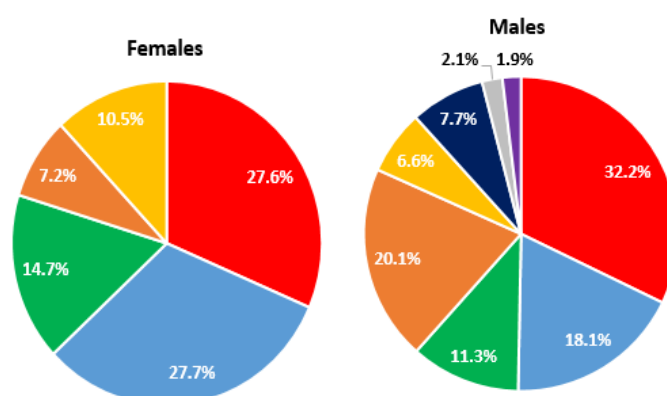
The rate of mortality for individuals aged under 75 from respiratory disease has increased in Selby between 2012-14 and 2015-17. The rate is significantly higher than the national (34 per 100,000) and Yorkshire and the Humber (40 per 100,000) averages.

The proportion of individuals aged 85 and over who died from respiratory disease in Selby (15.8%) in 2017 is similar to the England average (15.5%).

## Inequality

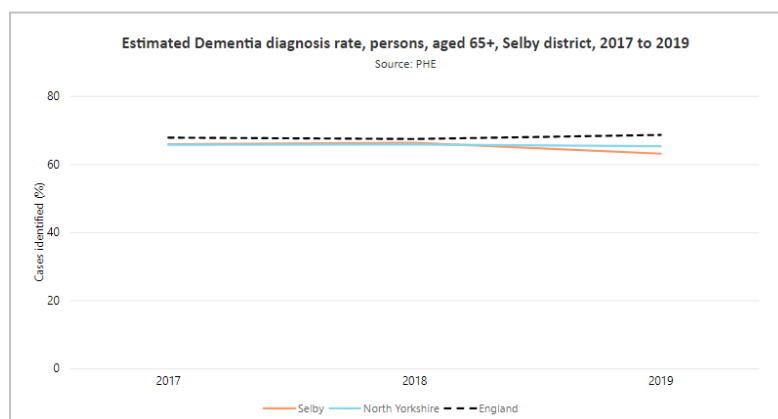
The following charts show causes of death which contribute towards the life expectancy gap between the most deprived and least deprived areas in Selby district. The biggest contributor to the life expectancy gap for women is cancer and circulatory diseases. For men, the biggest contributor is circulatory disease and digestive diseases. Targeting [NHS Health Checks](#) in deprived areas will help to narrow the inequality in life expectancy.

- Circulatory
- Cancer
- Respiratory
- External causes
- Digestive
- Other



# Diseases and Death

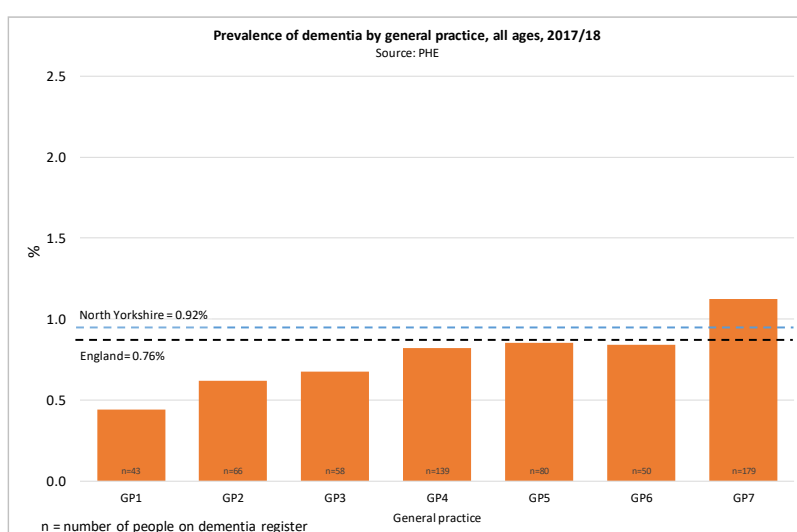
## Dementia



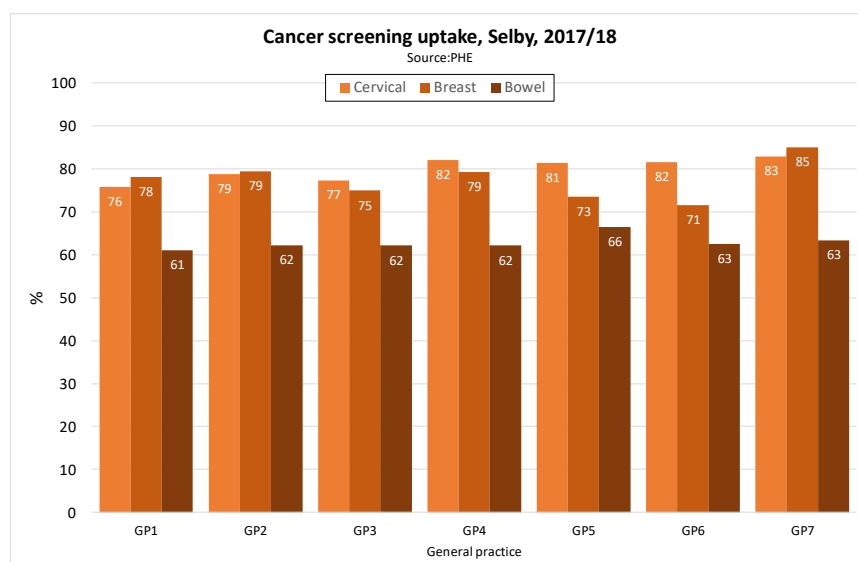
Selby has a similar rate of those estimated to have dementia being diagnosed when compared with England (63% vs 69%). There are 589 people aged 65+ with dementia diagnosed in Selby, with potentially another 300 cases unrecorded.

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 recorded on general practice registers as a proportion of all people registered at each practice, for practices in the district. There is one GP in Selby that has a higher number of people with dementia than the county and national average.



## Cancer Screening



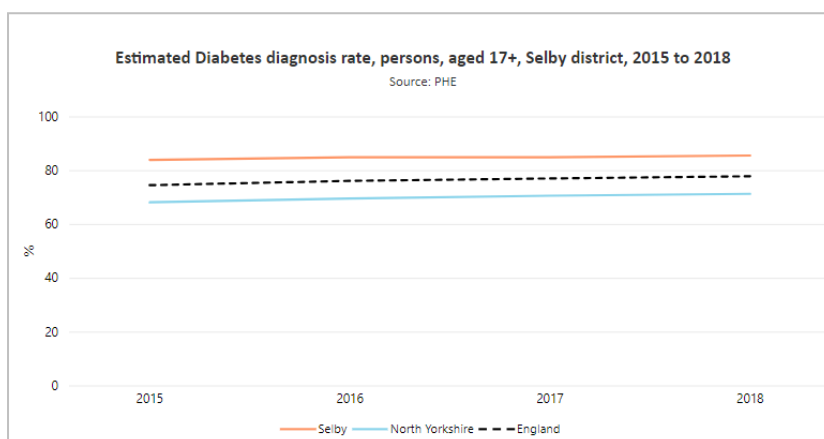
In Selby, there tends to be higher uptake of screening for breast and cervical cancer when compared with bowel cancer. Despite the lower uptake of screening for bowel cancer in Selby, the rate is significantly higher than England (62% locally; 59% nationally) in 2018.

Breast cancer screening rates continue their long-term downward trend over the last 10 years (83.7%, 2010; 79.3%, 2018) but coverage remains significantly higher than England. Bowel and cervical cancer screening uptake is increasing.

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

# Diseases and Death

## Diabetes

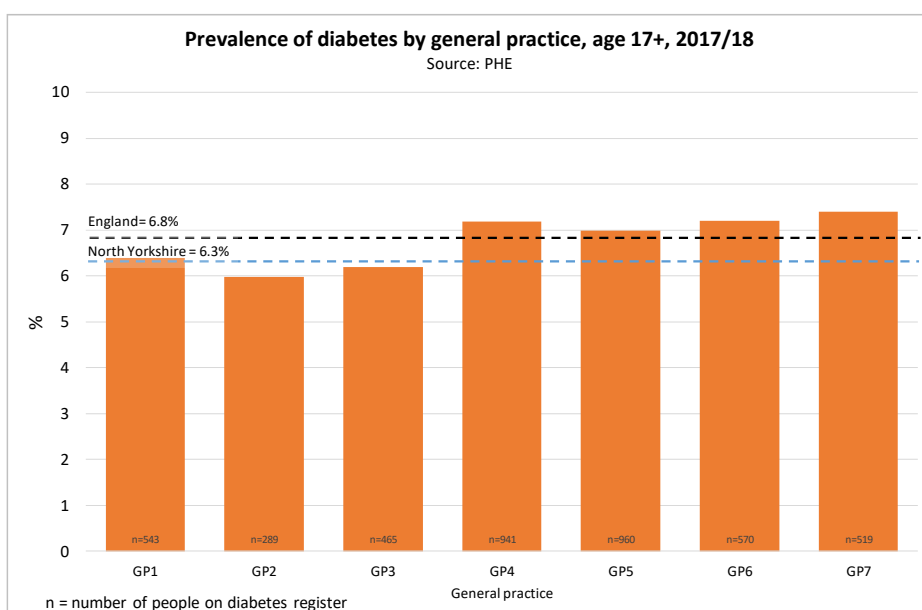


Complications from diabetes result in considerable morbidity and have a detrimental impact on quality of life. Type 2 diabetes is typically associated with excess weight can be prevented or delayed by lifestyle changes.

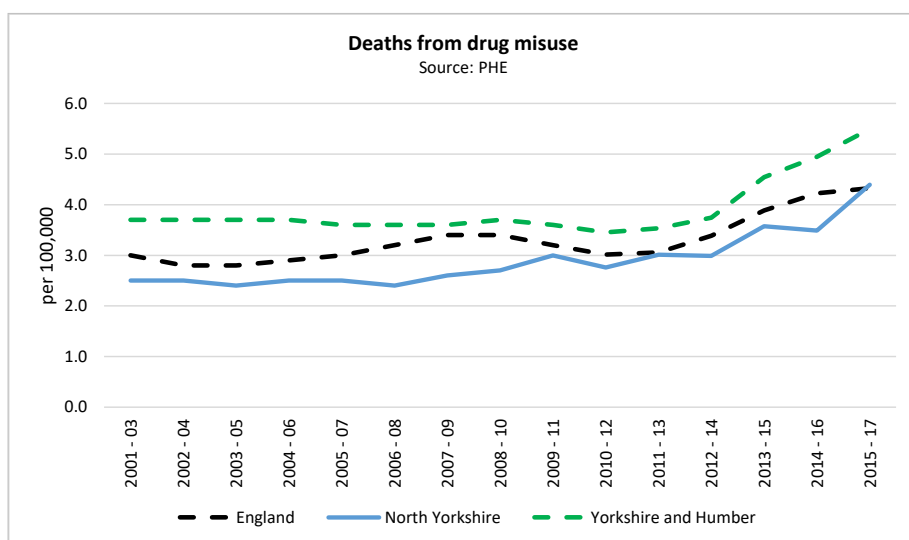
To implement effective interventions, it is important to identify all cases. The gap between observed prevalence (the number of diabetes cases recorded) and the actual prevalence (observed plus those who are undiagnosed) helps to quantify those who may be untreated. In Selby, it is estimated that 86% of diabetes cases are

diagnosed, significantly higher than England (78%).

The chart to the right highlights the prevalence of diabetes by general practice. Over half of GPs in Selby have a higher number of people with diabetes than the county average. 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



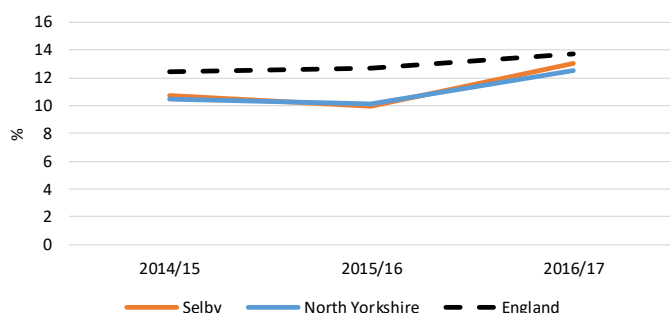
Deaths from drug misuse is not available for Selby district, as the value cannot be calculated because the numbers are too small. However, deaths from drug misuse in North Yorkshire have increased slightly between 2014-16 and 2015-17 and the rate per 100,000 is similar to the England average (4.3 nationally v 4.4 locally). Between 2001-03 and 2015-17 deaths from drug misuse have remained similar to the England average; however, in 2014-16 the rate was statistically lower than the Yorkshire and Humber average.

Confidential help with drug and alcohol addiction is available through [North Yorkshire Horizons](#).

# Mental Health

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

Source: PHE



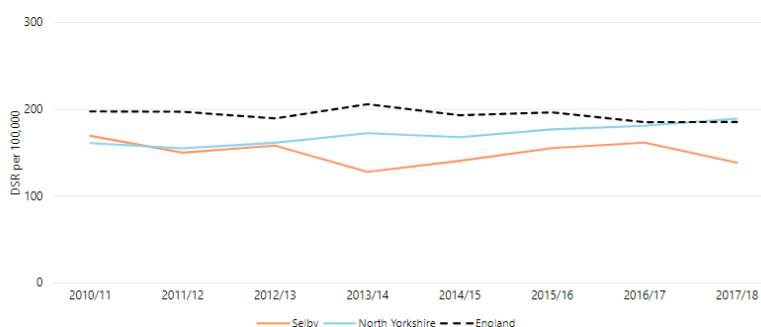
The percentage of individuals reporting depression or anxiety in Selby is similar (13%) when compared to the national average (13.7%).

Selby has a similar rate of individuals who have long term musculoskeletal diseases who are also feeling depressed or anxious compared with the England average (22% locally compared to 24% nationally).

Selby district has a lower rate of emergency hospital admissions for intentional self-harm compared to the England average (139 per 100,000). The proportion of hospital admissions for intentional self harm has decreased between 2016/17 and 2017/18.

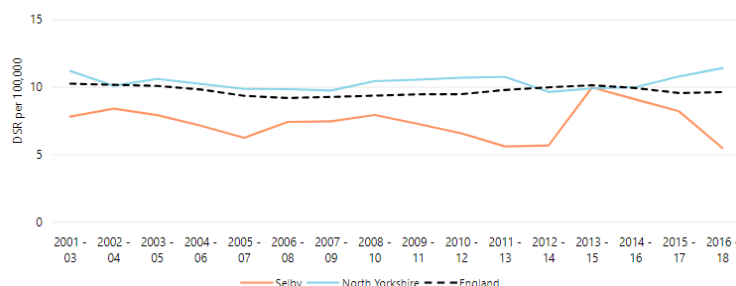
Emergency Hospital Admissions for Intentional Self-harm, persons, all ages, Selby district, 2010/11 to 2017/18

Source: PHE



Suicide rate, persons, aged over 10 years, Selby district, 2001-03 to 2016-18

Source: PHE



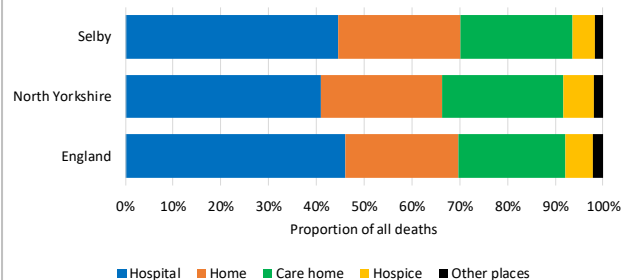
Suicide is a significant cause of death in young adults, and is seen as an indicator of underlying rates of mental ill-health.

The suicide rate in Selby has decreased between 2015-17 and 2016-18 and the rate is similar to the England average (5.5 per 100,000 locally compared to 9.6 per 100,000 nationally). The suicide rate for males is higher than females in Selby and this is in line with national trends. However, these are small numbers and should be interpreted with caution. Further information can be

## End of Life Care

Place of death, persons, all ages, Selby 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, however, Selby has a smaller proportion of people dying at home when compared to county and national rates. In contrast to this, Selby district has fewer people dying in hospital, but a higher proportion of people dying in a care home when compared to county and national averages in 2017.

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