Introduction

This profile provides an overview of the population health needs in North Yorkshire. Greater detail on for the districts and CCGs in the county can be found in our Joint Strategic Needs Assessment (JSNA) resource at 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 North Yorkshire and provides links to the local response which meets those challenges.

Summary

- The population of North Yorkshire is ageing. By 2025, there will be 21,200 additional people aged 65+, a 14% increase from 2018, but a 4% decrease in the working-age population. This is likely to lead to increased health and social care needs with fewer people available to work in health and care roles.

- Overall population health in North Yorkshire is better than England. However, there are stark inequalities: life expectancy varies by 15 years between wards within North Yorkshire; the healthy life expectancy gap for men is even wider at 18 years.

- Rates of child poverty are higher than poverty in older people. Over 28,000 children are growing up in poverty in North Yorkshire, with about one quarter of them in Scarborough Borough.

- Cardiovascular diseases remain the leading cause of death in North Yorkshire and are the largest contributor to the life expectancy gap between the least and most deprived areas.

Overview: Population

The population pyramid shows that, overall, North Yorkshire has an older population than England, with more residents aged 45-89, and fewer aged under 45. There are noticeably fewer people aged 20-44 in North Yorkshire compared to the national demographics. The shape of the pyramid is typical of a population with long life expectancy and low birth rate.

There are about 67,200 people aged 65+ with a limiting long term illness in North Yorkshire. Of these people, 44% (29,300) report that their daily activities are limited a lot because of their illness (POPPI, 2019).

Within the county, 2.8% of the population are from black, Asian and minority ethnic groups, compared to 15% in England.
Current and projected population

The population of North Yorkshire is estimated to be 614,500 and is set to increase to 620,300 in 2025. The birth rate in the county is 59 births per 1,000 women, the same as the national birth rate.

Selby has the highest population proportion aged 0-19 at 23%, while Ryedale has, proportionally, the least in this age group at just under 20%. Richmondshire has the greatest proportion of those in the young workers category (aged 20-44) at 31%, which is likely due to the military base located in the district. Most of the districts have around 30% of their population in the older workers category, although, Richmondshire has the lowest proportion in this age group at 27%. There is some variation in the retirement age grouping, with a range of 18% in Selby and Richmondshire and 23% in Scarborough and Ryedale. Finally, for those 85+, Hambleton has the greatest proportion of residents in this age bracket, at 3.8%, while Selby and Richmondshire have the lowest proportion at 2.3%.

Projections indicate that the population aged over 85 is expected to increase in North Yorkshire by approximately 26% by 2025, compared with a 20% increase in England. A 17% increase is also anticipated for those in the retirement category in the county. Meanwhile, both the 45-64 and the 20-44 age groups are projected to decrease in North Yorkshire by 3%. There is some variation in the make-up of the projected populations in the districts within the county. Harrogate and Selby districts are projected to see an increase of 26% in the 85+ age group by 2025. Meanwhile, only Ryedale and Selby are expected to see a rise in the under 44s, with Ryedale projected to increase by 5.5% in the under 19 category and Selby projected to see growth of 4.2%.
Life expectancy

Life expectancy at birth is increasing for England. In North Yorkshire, it is estimated at 81 years for males and 84 years for females. This is higher for both sexes compared to both Yorkshire and the Humber (79 for males and 82 for females) and England (80 for males and 83 for females) in 2015-17.

There is not a lot of variation in the county in terms of life expectancy. Most of the districts have estimated life expectancy at birth which is significantly higher than England for both males and females. Scarborough (83y) and Selby (84y) both have female life expectancies statistically similar to England. For males, most districts have higher life expectancies compared with England, exceptions being Selby, which is statistically similar (81), and Scarborough, which has a significantly lower life expectancy for males (79).

By comparing healthy life expectancy with the overall life expectancy, we can get a richer picture of years spent in good health. In North Yorkshire, there is considerable variation in the years spent in good health for both males and females, indicating inequalities within the county. There is a 15 year difference in life expectancy for males between the ward with the lowest overall life expectancy (Castle ward, Scarborough district) and that with the highest overall life expectancy (Ripon Minster ward, Harrogate district). In terms of healthy life expectancy, men in Castle ward can expect to live 56 years in good health but men in Ripon Minster ward spend 73 years in good health, a near 18 year difference of life spent in good health. For females, there is also a 15 year difference in life expectancy between the wards with the lowest and highest life expectancy. For healthy life expectancy, women in the ward with the lowest life expectancy (Scotton ward, Richmondshire) spend 62 years in good health, while in Claro ward in Harrogate they spend 75 years of their longer 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.
Wider determinants of health

Poverty

The 2019 Index of Multiple Deprivation (IMD) identifies 24 Lower Super Output Areas (LSOAs) of the 373 LSOAs in North Yorkshire which are amongst the 20% most deprived in England, with a population of 36,000 people. Twenty of these LSOAs are in Scarborough district with a combined population of 30,000.

IMD also calculates deprivation for specific groups based on key indicators. The charts presented here highlight that Eastfield, Woodlands and North Bay wards in Scarborough have higher rates of overall deprivation. North Bay and Eastfield wards together with Harrogate Bilton Woodfield ward have higher rates of older people in deprivation. Across the county, around 23% of children (28,275) are living in poverty after housing costs, lower than the national average of 30%. However, this rises to 41% in the Northstead ward in Scarborough.

There is some variation in deprivation for both children and older people between districts. Recent figures from End Child Poverty indicate that nearly 31% of children in Scarborough are considered to live in poverty after housing costs, compared with 18% in Harrogate.

(www.endchildpoverty.org.uk)
Employment

The employment rate in North Yorkshire is 79%, higher than both England (76%) and Yorkshire & Humber (74%) rates. The lowest employment rate in the county is in Craven (69%) where the employment rate has decreased by 1.3% between 2017/18 and 2018/19.

In 2018, the Office for National Statistics reported that the median average weekly earnings in North Yorkshire were £423, significantly lower than England (£451 per week, which is skewed by higher earnings in the South East). The median average earnings for Yorkshire & Humber (£408), however, were not significantly different compared to North Yorkshire. The lowest average weekly earnings were in Richmondshire (£371), Ryedale (£375) and Scarborough (£398). Richmondshire, despite having the lowest earnings, but due to the wide confidence intervals, was not significantly different compared to England; whereas Ryedale and Scarborough were both significantly lower compared with England. The rest of the districts had average weekly earnings similar to England.

There is a large variation in the median earnings for men and women at the county, regional and national level. In 2018, men in North Yorkshire earned, on average, £489 per week, significantly higher compared to North Yorkshire. Women, however, earned £347 per week, significantly lower compared to North Yorkshire. The data includes earning information for both full and part-time work, which could explain some of the gap, as women are more likely to be in part-time employment. However, as income is related to a variety of health-related factors, including self-reported health and disability-free life expectancy, the reason for the gap in earnings between men and women in the county could be explored more fully.

Education

Educational attainment and qualifications are directly related to health and health inequalities. Furthermore, low attendance at both primary and secondary school is linked to lower educational attainment. Tackling absenteeism is an important aspect of the Government’s goal of increasing social mobility and helping all children meet their potential.

The proportion of half days missed by pupils due to overall absence (4.4%) and this is significantly lower than the England rate. However, Scarborough has the highest rate (6%) and this is significantly higher than England. The proportion of overall absence has increased from 2015/16 to 2017/18 in the county, and this is in line with Yorkshire and Humber trends.

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

Education

The chart below highlights the Ofsted judgement of overall effectiveness of primary and secondary schools in North Yorkshire compared to England.

<table>
<thead>
<tr>
<th>Ofsted Judgement of overall effectiveness at 01/10/2019</th>
<th>Source: Ofsted.gov.uk</th>
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</thead>
<tbody>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>North Yorkshire (303)*</td>
<td>15% Outstanding</td>
</tr>
<tr>
<td>England</td>
<td>18% Outstanding</td>
</tr>
<tr>
<td>Secondary</td>
<td></td>
</tr>
<tr>
<td>North Yorkshire (43)*</td>
<td>28% Outstanding</td>
</tr>
<tr>
<td>England</td>
<td>21% Outstanding</td>
</tr>
</tbody>
</table>

Ratings for primary schools are similar to national findings. However, for secondary schools, North Yorkshire has a higher proportion rated ‘outstanding’ compared with England but also higher proportion rated as ‘inadequate’. Due to the small number of secondary schools in North Yorkshire (43), this needs to be interpreted with a degree of caution.

At a district level, there is some variation in the distribution of Ofsted judgements.

For primary schools, Richmondshire has the highest proportion of schools rated ‘Outstanding’ (10%). Harrogate and Craven have the highest proportions of primary schools rated ‘Inadequate’ at 22%.

<table>
<thead>
<tr>
<th>Ofsted Judgement of overall effectiveness, primary schools, at 01/10/2019</th>
<th>Source: Ofsted.gov.uk</th>
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<tbody>
<tr>
<td>Harrogate (75)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Craven (12)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Hambleton (51)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Richmondshire (29)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Selby (40)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Scarborough (12)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Ryedale (33)*</td>
<td>Inadequate</td>
</tr>
</tbody>
</table>

There are relatively few secondary schools in the county and when broken down by district level, extra caution needs to be used when interpreting and comparing the data. There are four secondary schools rated ‘Inadequate’: two in each of Hambleton and Scarborough. Hambleton and Scarborough have no schools judged to be ‘Outstanding’. Richmondshire and Ryedale districts have no secondary schools judged to be either ‘Inadequate’ or ‘Requires improvement’.

<table>
<thead>
<tr>
<th>Ofsted Judgement of overall effectiveness, secondary schools, at 01/10/2019</th>
<th>Source: Ofsted.gov.uk</th>
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</thead>
<tbody>
<tr>
<td>Hambleton (3)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Scarborough (8)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Selby (8)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Craven (8)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Harrogate (10)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Ryedale (4)*</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Richmondshire (4)*</td>
<td>Inadequate</td>
</tr>
</tbody>
</table>

* = number of schools
Housing

Housing affordability affects where people live and work. It also affects factors that influence health, including poverty, community cohesion, housing quality, 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 also be an important factor in determining how individuals experience and respond to housing affordability problems.

Data for housing affordability is not aggregated at the county level but is available at the district level. A ratio is calculated for each district, based on the ratio of lower quartile house price to lower quartile earnings. The lower the ratio, the more affordable housing is overall. In North Yorkshire, Harrogate has the largest ratio and Selby has the smallest; however, all districts other than Scarborough and Selby have higher ratios than the England average of 7.0.

In 2017, 9% of households (24,045 households) in North Yorkshire were classified as fuel poor, lower than the national average (11%). Scarborough has the highest proportion of households classified as fuel poor at 12%. Merely tackling poverty would not necessarily relieve 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 subsequently 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.

There is some variability in the excess winter mortality trend in the county over time, mirroring the trend seen in both Yorkshire and the Humber and England. In 2016/17 the Excess Winter Mortality index increased from 12 to 26 in the county and is now higher than the England average of 22; however, this is not statistically significant. All districts in the county have values that are statistically similar to the England value. While there is some variation across the county, the small numbers mean that these data must be interpreted with caution.

The rate of homeless households has decreased in North Yorkshire since 2011/12 and is currently 1.2 per 1,000 households. This is below both the Yorkshire and the Humber (1.7 per 1,000) and England (2.4 per 1,000) rates. Richmondshire and Scarborough districts are the only districts that have rates of statutory homelessness that are not significantly lower than England. At around 2.2 per 1,000 households, the rates in Richmondshire and Scarborough are statistically similar to the England rate.
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 North Yorkshire is 25 per 1,000 accidents and this is similar to the England rate of 26 per 1,000 accidents. Selby is the only district significantly higher than the national rate (46 per 1,000 accidents), and Scarborough is the only district that has a rate that is significantly lower than England rate at 13 per 1,000 accidents. All other districts are statistically similar to the national rate.

The rate of people being killed and seriously injured (KSI) casualties on roads in North Yorkshire is significantly higher than the national average at 70 per 100,000 population, versus 41 per 100,000 population in England. The Yorkshire and the Humber rate is also statistically higher than England, at 46 per 100,000. It is noteworthy that, while the regional and national rates are slowly increasing, the rate for North Yorkshire has been decreasing since 2009-11.

All districts in North Yorkshire have rates significantly higher than England, other than Scarborough (44 per 100,000 population), which is statistically similar to England. There are relatively small numbers of casualties and so must be interpreted with caution.

Across North Yorkshire, the rate of children killed and seriously injured on England’s roads has decreased between 2013-15 and 2014-16 (from 22 per 100,000 population to 19 per 100,000 per population) and is now similar to the England average (17 per 100,000 per population). 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.
Lifestyle and behaviour

Smoking

Smoking prevalence in North Yorkshire is significantly lower than England, at 12.0% versus 14.4%. Between 2017 and 2018 there has been a decrease in the proportion of smokers. All districts in North Yorkshire have smoking rates that are statistically similar to the England rate, other than Craven which has a rate of 13%, and is significantly lower than England.

For adults in routine and manual professions, rates are higher than for the general population and prevalence in North Yorkshire is similar to England (25.1% locally vs 25.4% nationally). Craven district has the highest rates of smoking in routine and manual professions in the county.

Maternal smoking in pregnancy is detrimental for the health of both the mother and baby. In North Yorkshire, maternal smoking is currently estimated to be 11.7%, significantly higher than the England prevalence of 10.8%, but lower than the Yorkshire and the Humber rate. There are differences between the districts, with Richmondshire having the lowest rate (9.7%) in the county. Ryedale (14.6%) and Scarborough (15.7%) both have rates that are significantly higher than the England rate.

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 North Yorkshire is significantly lower than England, at 493 per 100,000 population compared with 570 nationally. Craven and Scarborough are the only districts with rates significantly higher than England. Alcohol misuse can be a contributing factor in many diseases, however, and it is important to also look at broader health conditions where alcohol may have had a role, including mental health. Comparing admissions for alcohol-specific conditions to admissions for alcohol-related conditions shows that most alcohol-related harm is due to prolonged use, manifesting in a wide range of health problems. For people admitted to hospital for alcohol-related conditions, the North Yorkshire rate is significantly lower at 2,028 compared with 2,224 per 100,000 population in England. Craven is significantly higher than England, at 2,441 per 100,000 population. Scarborough is similar to England (2,152 per 100,000) and the remaining districts have rates that are statistically lower than England. 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 North Yorkshire is similar to the figures seen in England (22% and 23%, respectively). Scarborough is the only district with a rate that is significantly higher than England, at 28%. The prevalence of children with excess weight in Year 6 is significantly lower in North Yorkshire at 32% compared with 34% in England. None of the districts have rates that are significantly higher than England. However, in North Yorkshire, there is a doubling of the proportion of obese children from Reception to Year 6, demonstrating that while the proportion of children in the county who carry excess weight is lower than the national average, it is still important to identify children at risk of excess weight early on. For overweight children, we only see a 6% increase between Reception and Year 6 but this could be that 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 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 North Yorkshire is significantly lower than England at 19% compared with 22%. Craven (16%), Harrogate (15%) and Richmondshire (17%) all have proportions of inactive adults statistically lower than England. Targeting adults who are inactive will have a greater impact on the reduction of chronic disease, including those related to excess weight. Tackling 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 North Yorkshire is 60%—statistically similar to England at 61%. There are no districts in the county with a statistically higher proportion of adults who are overweight or obese.

The Government recommends that adults eat at least five portions of fruit and vegetables daily. Self-reported fruit and vegetable consumption shows that North Yorkshire 62% of adults report consuming five portions a day, significantly better than the England average (57%). However, this indicates that nearly 40% of adults in North Yorkshire could improve their diet.

Breastfeeding provides benefits to the health and wellbeing of both mother and child. In North Yorkshire, approximately 74% of mothers in 2016/17 initiated breastfeeding within 48 hours of delivery. This is statistically similar to the England proportion (75%). In Harrogate, 83% of mothers initiate breastfeeding within 48 hours of delivery—the highest in the county. Scarborough, on the other hand, has the lowest initiation rate in the county at 61%. Both districts could provide learning opportunities regarding the benefits and barriers to breastfeeding initiation.

In order to increase breastfeeding, a strategy and action plan has been developed in partnership with York 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 North Yorkshire, the rate of new Sexually Transmitted Infection (STI) diagnoses for 2018 at 438 per 100,000 population is significantly lower than the rate of 794 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 that North Yorkshire is significantly lower than England. All districts in the county follow the same pattern as North Yorkshire—significantly lower diagnoses of new STIs but also a significantly lower testing rate. 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 North Yorkshire at 72 per 1,000 women aged 15-44 is significantly higher than the rate seen in England of 46 per 1,000 women. All the districts in the county have prescribing rates that are significantly better than the England rate, but Scarborough has the highest in the county at 87 per 1,000 women aged 15-44.

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 teenage conception rate in North Yorkshire is significantly lower than the overall England rate at 10 per 1,000 women aged 15-17 compared to 18 per 1,000 women aged 15-17, continuing an overall downward trend in teenage conceptions. No district in the county has a statistically higher rate of under-18 conceptions than England.
Diseases and Death

Major causes of death

In North Yorkshire, there were 6,546 deaths in 2017. Nearly two-thirds of deaths fell under just three broad causes: 1,801 (28%) due to cancer; 1,827 (28.0%) due to circulatory disease; and 838 (13%) due to respiratory diseases.

The rate of mortality for individuals aged under 75 from cardiovascular disease has decreased in North Yorkshire between 2001-03 and 2015-17, and at 63 per 100,000 population is significantly lower than both the national (73 per 100,000) and Yorkshire and the Humber (83 per 100,000) average. None of the districts in North Yorkshire have a rate statistically higher than the England rate. There is evidence of some variation between districts, with Scarborough having the highest rate of premature mortality from cardiovascular disease at 81 per 100,000. Though this is higher than the England rate, it does not reach statistical significance. Craven (47), Hambleton (52), Harrogate (62) and Ryedale (48) all have rates that are statistically lower than the England and Yorkshire and the Humber rates.

The rate of mortality for individuals aged under 75 from cancer has decreased in North Yorkshire between 2001-03 and 2015-17, and at 121 per 100,000 population and is now significantly lower than the national (137 per 100,000) and Yorkshire and the Humber (146 per 100,000) average. The most common death from cancer for individuals aged under 75 in North Yorkshire in 2017 were cancers of the trachea, bronchus and lungs (158 deaths). 66% percent of these deaths occurred in those aged between 65-74. There were no cancer-related deaths reported in the county in 2017 for anyone aged under 44.

The overall rate of deaths in those under 75 related to respiratory disease in North Yorkshire is 27 per 100,000 population. This is statistically better than the rate in both England (34) and Yorkshire and the Humber (40). All the districts in the county had rates statistically lower than both England and Yorkshire and the Humber, other than Scarborough and Selby who were statistically similar to the England rate. However, the rate in North Yorkshire has slightly increased since 2013-15, so this should be monitored to determine if this is a lifestyle or behaviour related health trend, or if it is representative of shifting demographics in the county.

Inequality

The following charts show causes of death which contribute towards the life expectancy gap between the most deprived and least deprived areas in North Yorkshire (2015-17). The biggest contributors to the gap for women are circulatory and cancer diseases, accounting for more than 50% of the gap. For men, circulatory is the greatest contributor to the gap, accounting for 32% but other causes of death account for 21% of the gap, and this includes diabetes, infectious diseases and urinary conditions.
Diseases and Death

Dementia

The Government and NHS has set a commitment that at least two-thirds of people living with dementia receive a formal diagnosis. Like the England rate, the North Yorkshire is statistically similar to the target of 66.7% (66% in North Yorkshire and 68% in England). There are 5,845 people aged 65+ with a formal dementia diagnosis in North Yorkshire.

Only Harrogate district has a diagnosis rate that is significantly higher than the target, with it being estimated that 77% of people living with dementia are diagnosed in the district. Hambleton (57%), Ryedale (51%) and Scarborough (59%) all have estimated diagnosis rates that are significantly lower than the 66.7% target.

Timely diagnosis of dementia enables the people living with dementia, their carers and healthcare staff to work together and plan accordingly. The lower rate of diagnosis in these districts needs to be investigated to determine how to improve early intervention for the portion of the affected population who do not have a formal diagnosis.

Cancer screening

Cancer screening supports early detection of disease. Screening programmes target key demographics to help with is early detection. In North Yorkshire, as for England, there is there is greater uptake of screening for cervical cancer when compared to bowel cancer. Despite the low uptake of screening for bowel cancer in North Yorkshire, the 2018 rate is significantly higher than the England average (64% locally compared to 59% nationally). All districts in the county have statistically higher screening rates for bowel cancer compared to the England average.

Breast cancer screening coverage was 79% in 2016-17, and was statistically higher than the England coverage rate of 75%. All districts but Scarborough were had statistically higher coverage rates than England. Scarborough’s rate of 75% was statistically similar to England. Coverage for cervical cancer is also statistically higher in North Yorkshire compared to England, at 78% compared to 71%. All districts have significantly higher screening coverage for cervical cancer when compared to England. Screening rates for both breast and cervical cancers have shown some signs of decreasing in the county, and this should be monitored to ensure a decreasing trend does not emerge. Screening for cancer leads to diagnosis at an earlier stage, leading to improved outcomes and increased survival. There is minimal variation across the districts in screening coverage overall.
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, and 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 North Yorkshire, it is estimated that only 71% of diabetes cases are diagnosed, significantly lower than both Yorkshire and the Humber (81%) and England (78%). Selby is the only district with a rate that is statistically better than England at 85% of cases diagnosed. All other districts are significantly below the England rate.

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

Overall, drug misuse is a considerable cause of premature morbidity in the UK. Recently, an increase nationally has been seen in drug-related deaths. In North Yorkshire, the rate of deaths from drug misuse in 2015-17 is statistically similar to England, at 4.4 per 100,000 population compared to 4.3 per 100,000 population. As seen nationally, the rate has increased slightly between 2014-16 and 2015-17 in the county. Between 2001-03 and 2015-17 deaths from drug misuse have remained similar to the England average.

Because of small numbers, data around deaths from drug misuse is not available for all the districts in the county. When we look at those with available, data, the only district in the county with a rate higher than the England or Yorkshire and the Humber average is Scarborough, at 11.3 per 100,000. Both Hambleton and Harrogate have rates that are statistically similar to England.
Diseases and death

Mental Health

The percentage of individuals reporting depression or anxiety in North Yorkshire (13%) is statistically lower than the national average (14%). The percentage of individuals reporting depression or anxiety has increased by 2% in North Yorkshire from 2014/15 to 2016/17. Scarborough was the only district that had a rate that was significantly higher than the England rate, with 16% of people aged over 18 reporting anxiety or depression.

The rate of individuals with long-term musculoskeletal disease who report feeling depressed or anxious is significantly lower in North Yorkshire when compared to England (20% compared to 24%).

North Yorkshire has a similar rate of hospital admissions for intentional self harm (189 per 100,000 population) compared to the overall England rate (185 per 100,000 population). The proportion of hospital admissions for intentional self harm in the county has increased between 2014/15 and 2017/18. Craven and Scarborough both have rates significantly higher than the England rate, at 256 per 100,000 and 255 per 100,000, respectively.

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 North Yorkshire has maintained at around 10 per 100,000 population since 2002, and the 2016-18 rate is significantly higher than the England average (11.4 per 100,000 locally compared to 9.6 per 100,000 nationally). The suicide rate for males is higher than females in North Yorkshire and this is in line with national trends, and the rate for males in North Yorkshire is similar to the England rate (17 per 100,000 compared to 15 per 100,000). The North Yorkshire rate for females is also similar to the England rate (5.6 per 100,000 locally compared to 4.7 per 100,000 nationally). 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

The North Yorkshire Joint Health and Wellbeing Strategy includes an ambition to increase the number of people dying either at home or place that they chose by 2020. In recent years, the proportion of people dying at home in North Yorkshire has tended to increase. North Yorkshire has a similar proportion of people dying at home when compared to regional and national rates. Nearly 50% of people are still dying in hospital, but in North Yorkshire in 2016, 56% of people died at home, at a care home or hospice.

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October 2019