



Hull
City Council

Hull Public Health Profiles 2015: Ings Ward



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**Public Health Sciences, Hull City Council
(www.hullpublichealth.org), August 2015**

About this profile

This public health profile presents the most up to date information on a range of topics, to help us understand who lives in each area of Hull, and what their needs might be. We have also included comparisons with the Hull average, the Yorkshire and Humber average and the England average where data were available

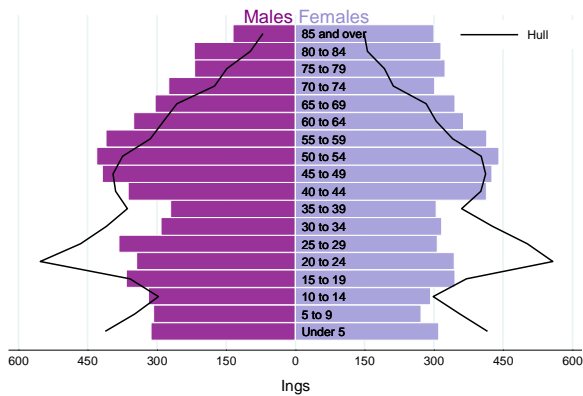
The sources of the information, as well some explanatory notes, are provided in the Data Sources section towards the end of the report.

We hope you find this profile useful. If you have questions or feedback, please use the contact details at the end of this profile.

Please do explore the rest of the www.hullpublichealth.org website, which has a wealth of information on health, lifestyles and attitudes to these, of Hull residents. The website includes the following:

- Hull's Joint Strategic Needs Assessment and supporting information (see the last page of this report for further information).
- Director of Public Health Annual Reports for Hull.
- In-depth survey reports from both adult surveys conducted across Hull (Health and Lifestyle surveys in 2003, 2007 and 2011-12, Social Capital surveys in 2004 and 2009, Prevalence surveys in 2009 and 2014) and from surveys of the health and lifestyle of young people, conducted in secondary schools across Hull.
- 41 In-depth Public Health Profiles for Hull exploring individual disease areas, population groups and lifestyle behaviours and many more (available to download from www.hullpublichealth.org/jsnatoolkit.html).
- Also available are ward profiles (2009, 2011, 2013 and 2015) and GP practice profiles (2011)
- Equity Audits which examine how fairly services or other resources are distributed in relation to health 'needs' of different groups and areas, and assesses the success of programmes which aim to improve any inequities that are found.
- Public Health Outcomes Framework, which are a range of indicators used to assess whether public health is improving or not. A series of analyses using both the national datasets as well as locally derived data are provided to examine Hull in some detail for each of these indicators. Each of these reports may be downloaded from, www.hullpublichealth.org/phof.html.
- Short Summary Public Health Profiles For Hull
- Hull atlas, which enable differences between wards in Hull to be examined visually on a map (www.hullpublichealth.org/hullatlas.html). Further information is given towards the end of this report.

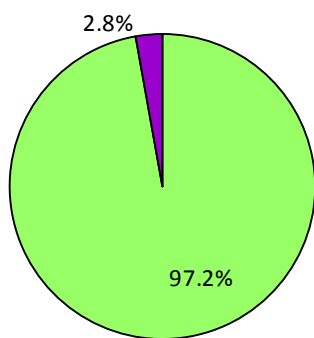
Population structure (2013)¹



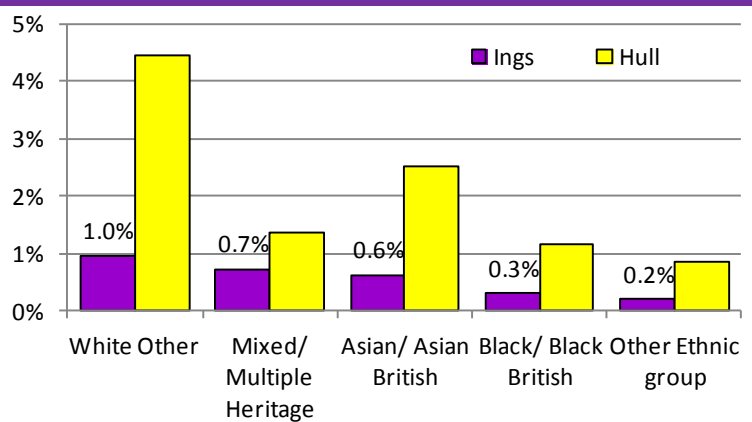
2013 mid-year population estimates from the Office for National Statistics

Age (yrs)	Males	Females	Total
Under 10	620	583	1,203
10-19	684	639	1,323
20-29	726	652	1,378
30-39	561	624	1,185
40-49	780	840	1,620
50-59	840	857	1,697
60-69	654	710	1,364
70-79	492	626	1,118
80+	354	616	970
Total	5,711	6,147	11,858

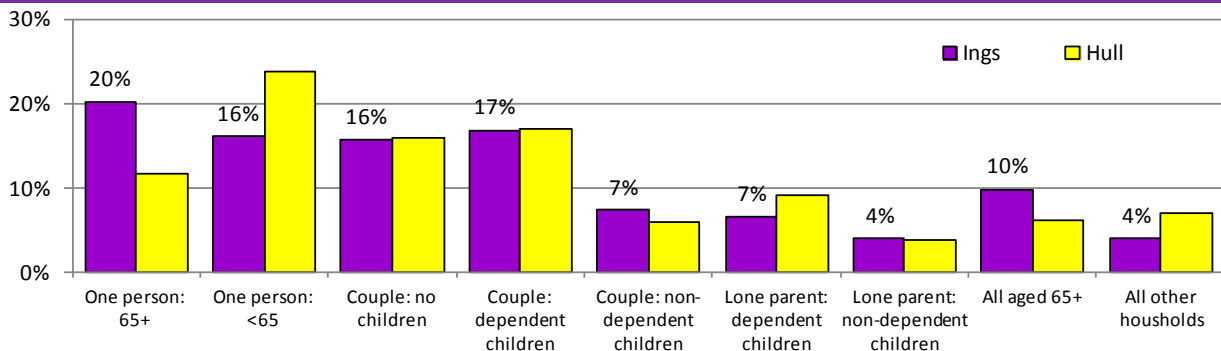
Ethnicity (from 2011 census)²



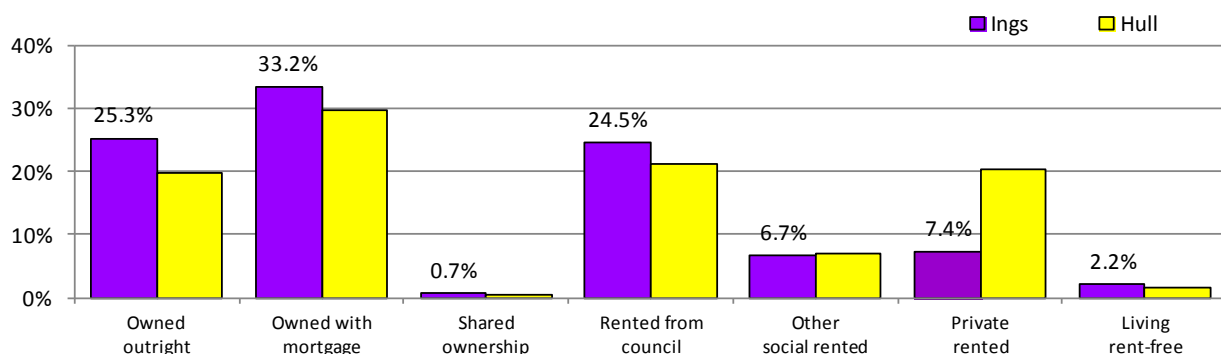
White British BME community



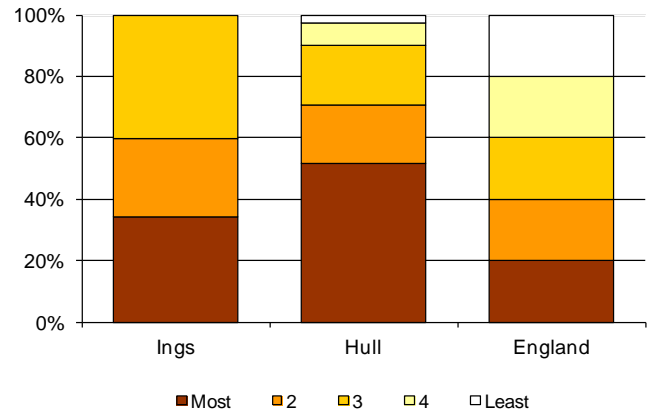
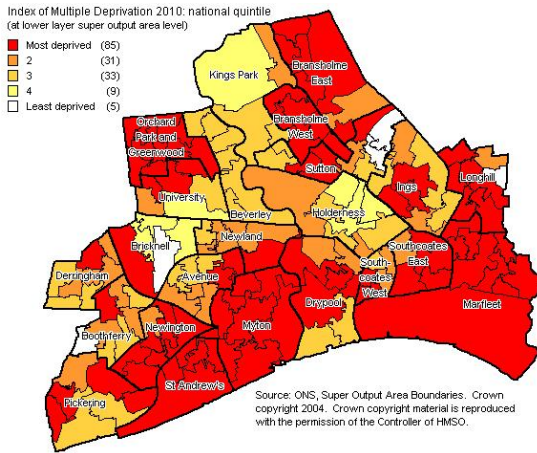
Household composition (2011 census)³



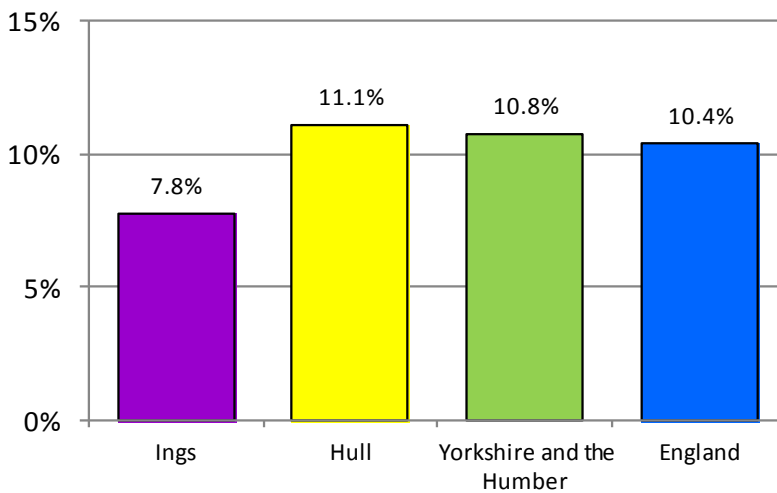
Household tenure (from 2011 census)⁴



National quintiles of IMD 2010⁵

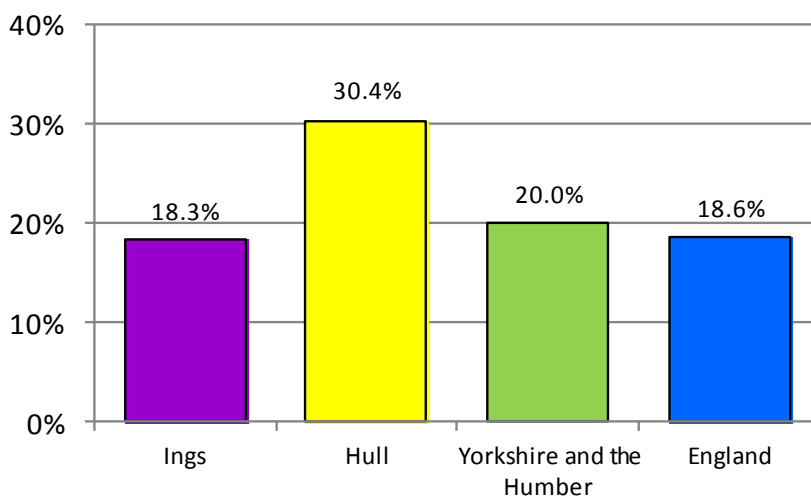


Fuel Poverty 2012⁶



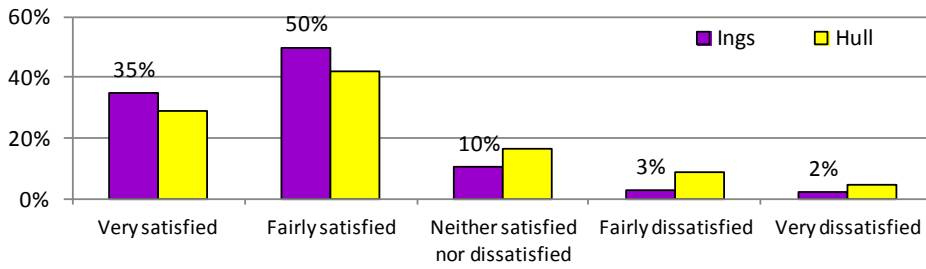
A household is said to be fuel poor if it needs to spend more than 10% of its income on fuel in order to maintain an adequate standard of warmth.

Child Poverty 2012⁷

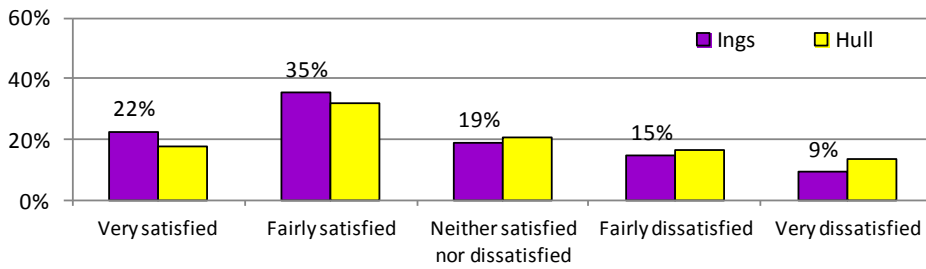


The proportion of dependent children under 20 years living in families in receipt of CTC whose reported income is less than 60 per cent of the median income or are in receipt of IS or (Income-Based) JSA.

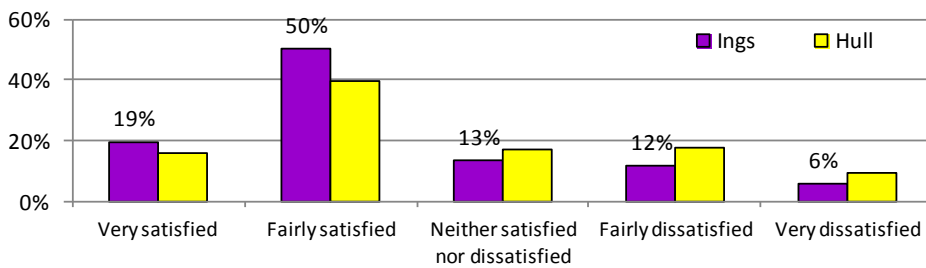
Satisfaction with aspects of the local area⁸



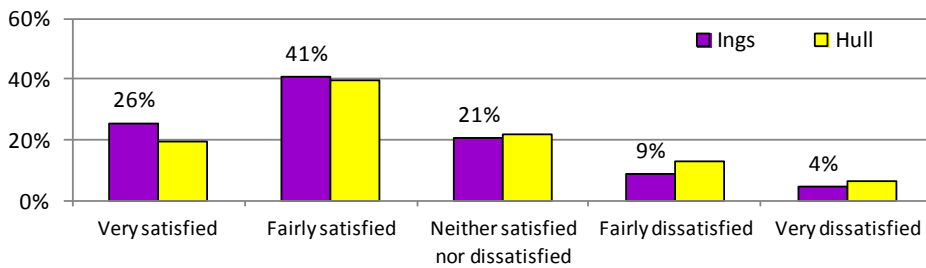
Satisfaction with open spaces in the local area



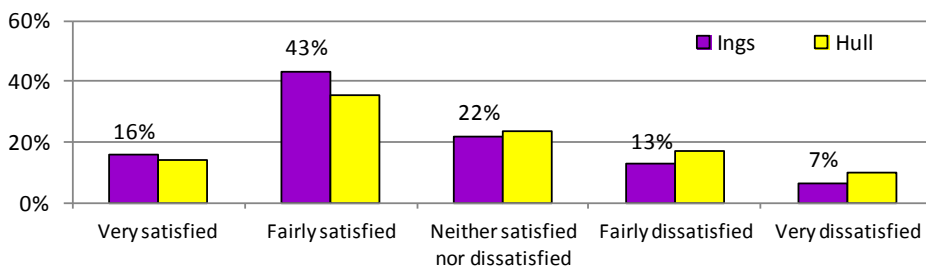
Satisfaction with parking in the local area



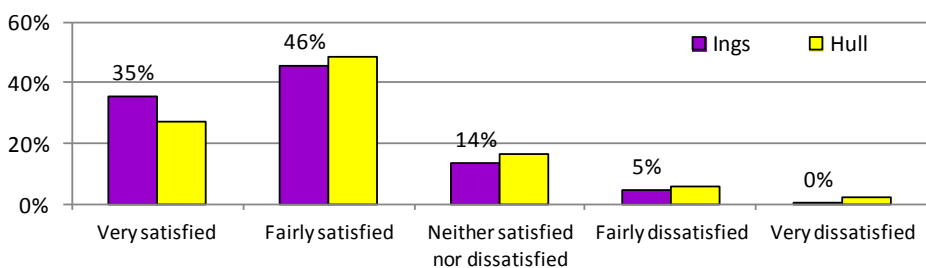
Satisfaction with the street appearance in the local area



Satisfaction with traffic in the local area

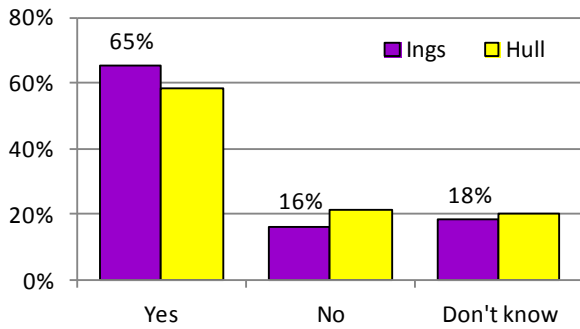


Satisfaction with level of anti-social behaviour and crime in the local area



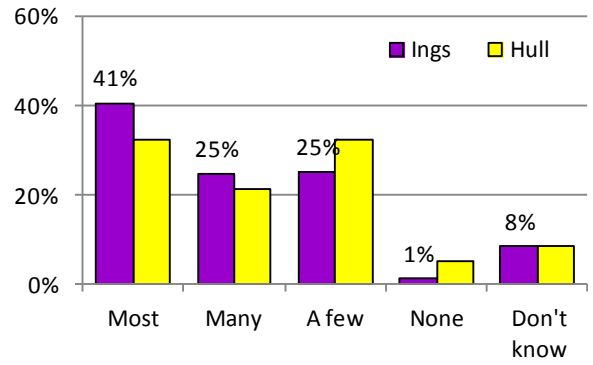
Satisfied with neighbourhood as a place to live

Neighbours look out for one another⁹



Is this a neighbourhood where neighbours look out for each other?

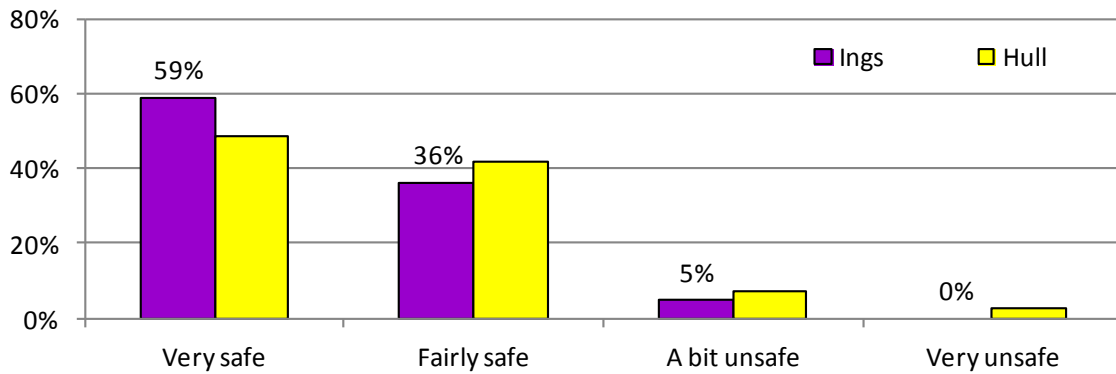
Trust in neighbours¹⁰



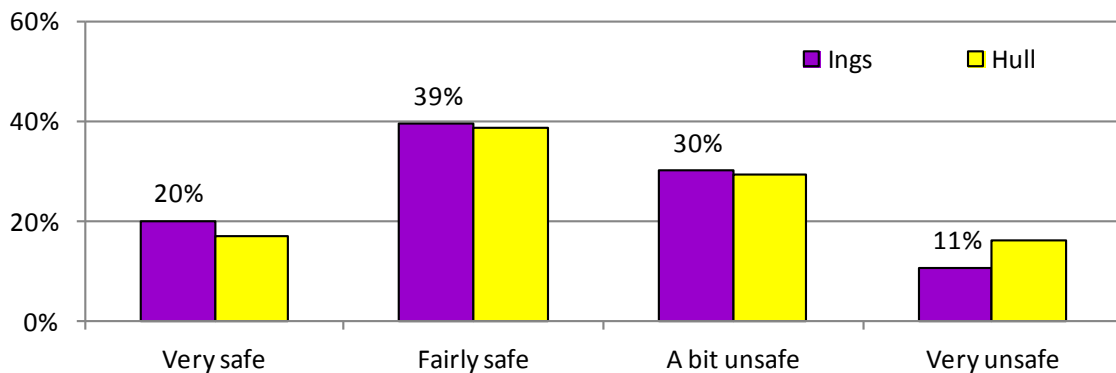
How many people in your neighbourhood do you trust?

Feelings of safety when¹¹

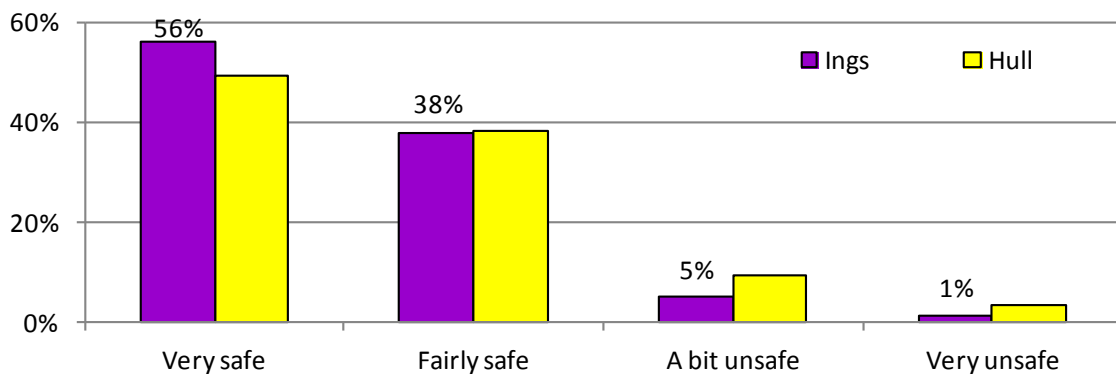
. . . . walking alone in area during the daytime



. . . . walking alone in area after dark

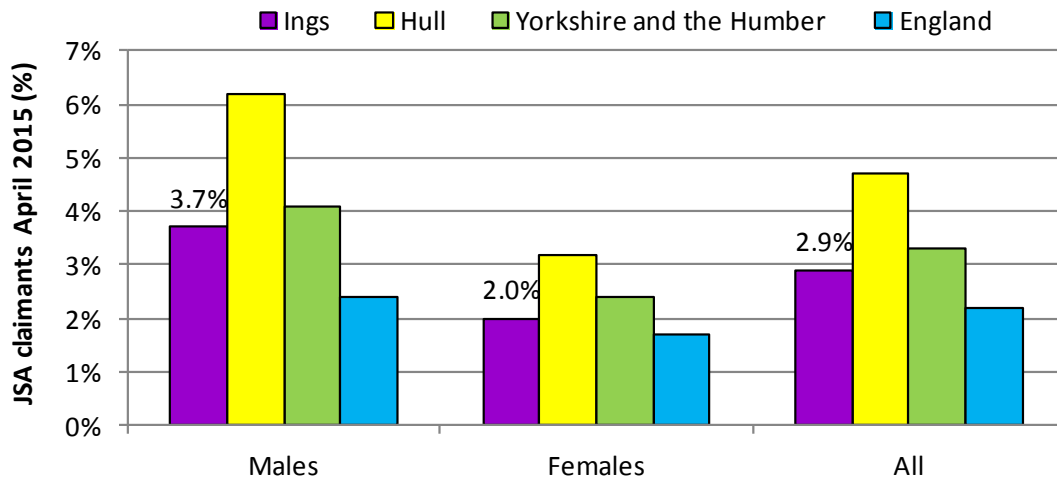


. . . . alone in own home at night

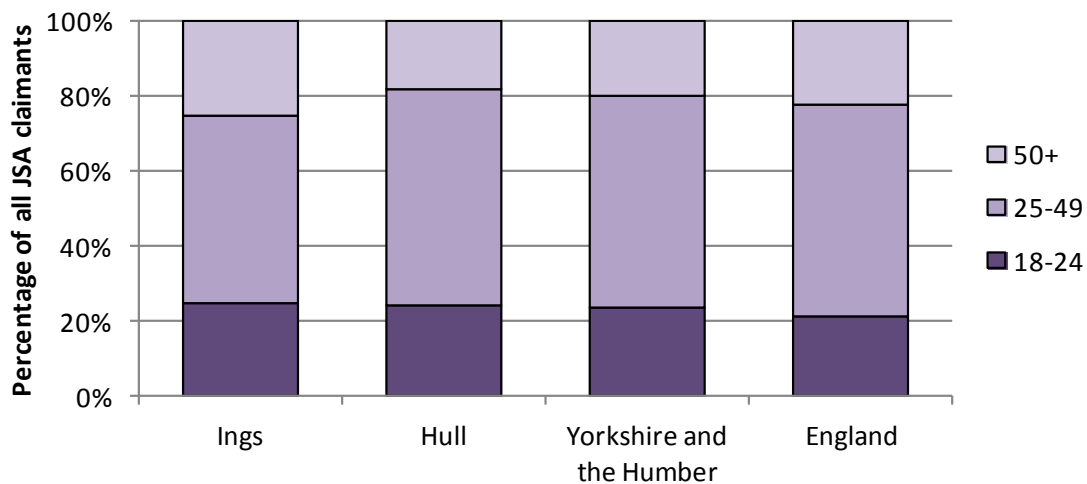


Unemployment¹²

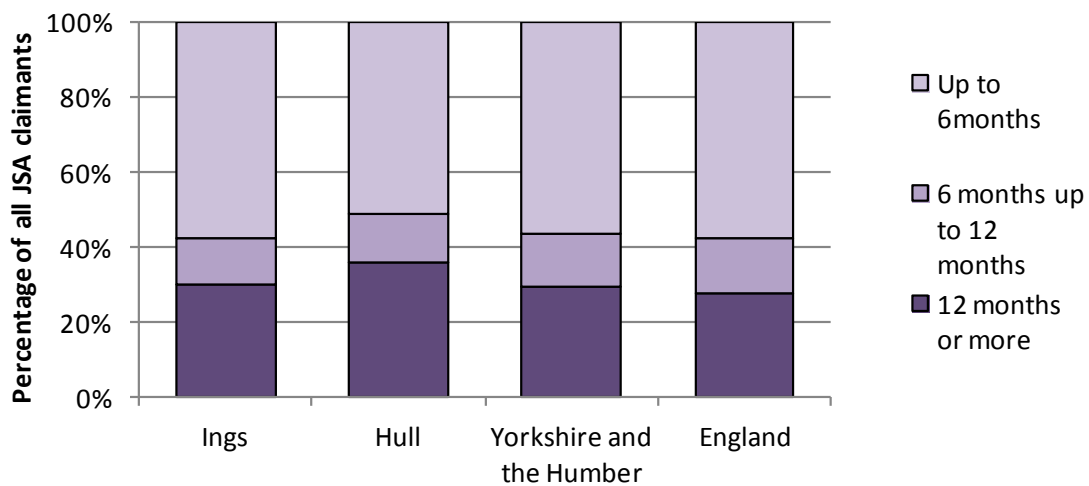
Job Seekers Allowance claimants April 2015 (%)



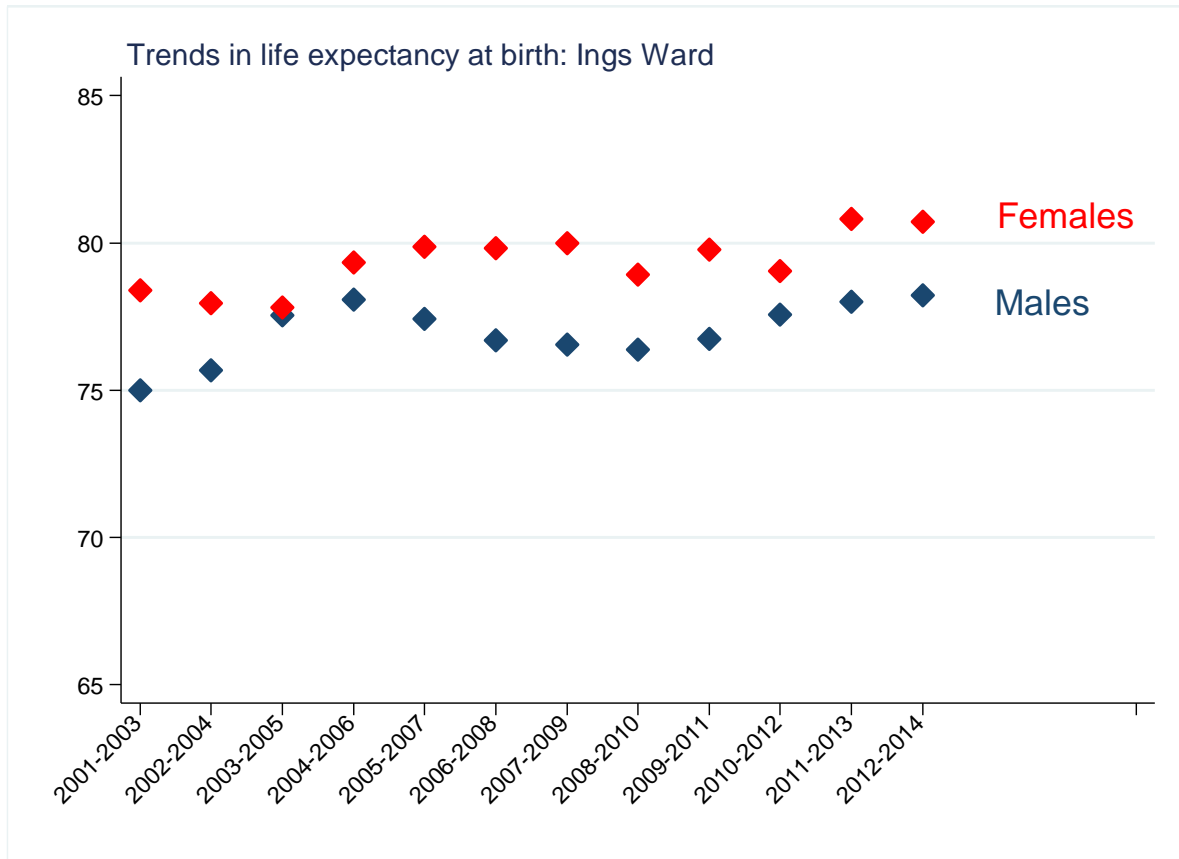
Job Seekers Allowance claimants, by age of claimant, April 2015 (percentage of all JSA claimants)



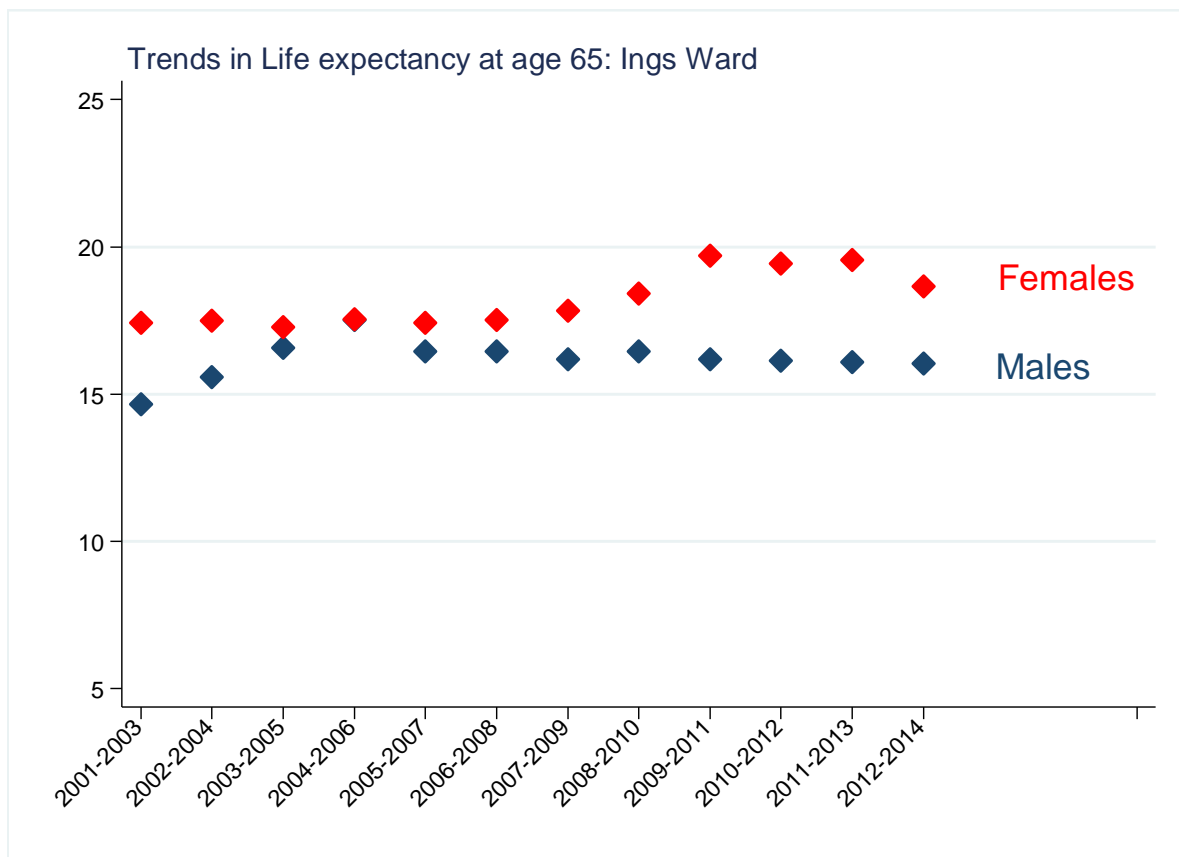
Job Seekers Allowance claimants, by length of claim, April 2015 (percentage of all JSA claimants)



Life expectancy at birth (years)¹³

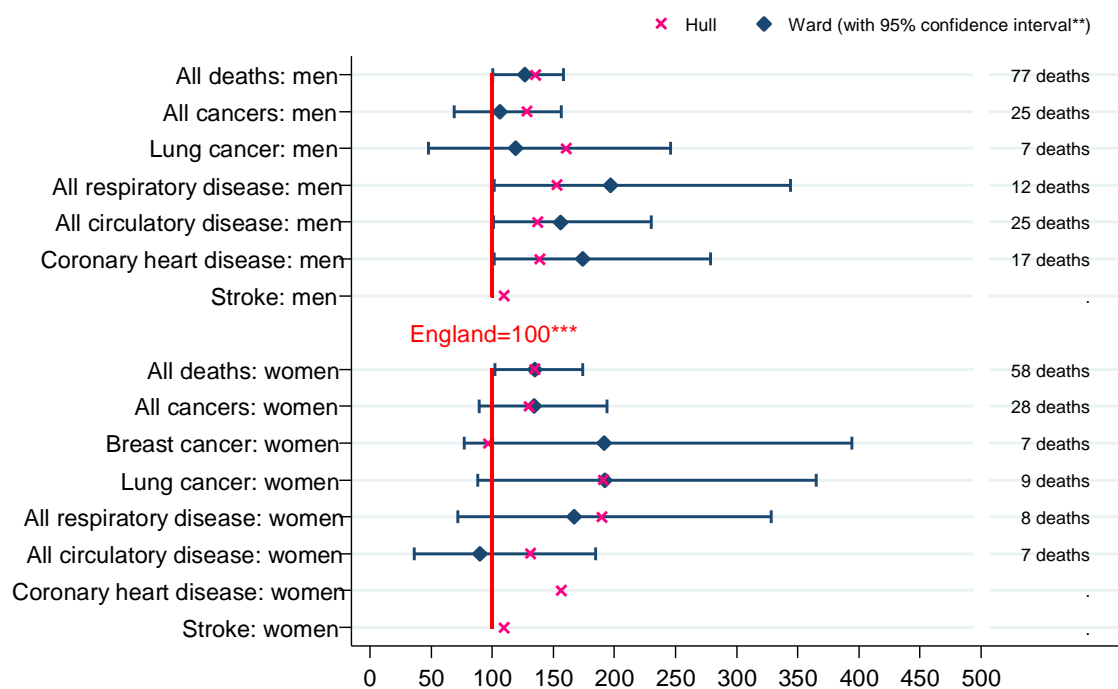


Life expectancy at age 65 (years)¹⁴



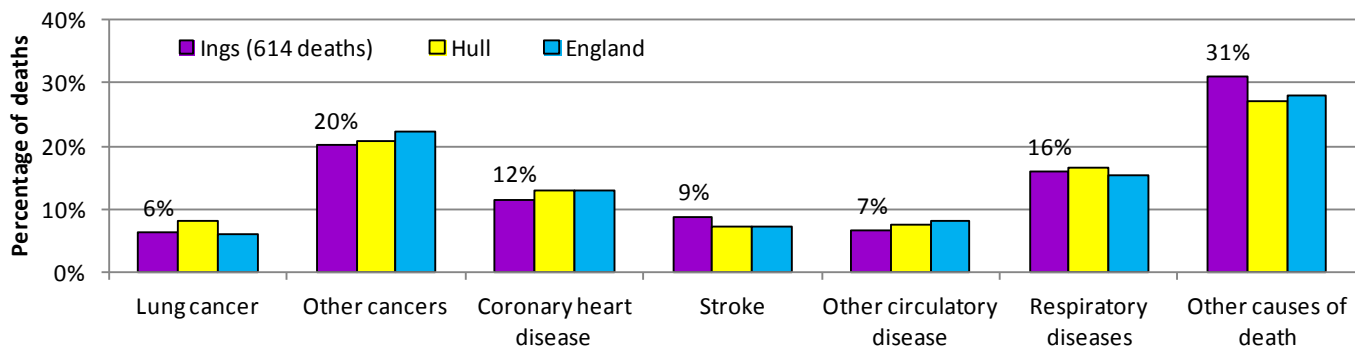
Under 75 Standardised Mortality Ratios 2012-2014¹⁵

Under 75 SMRs* 2012-2014: Ings Ward

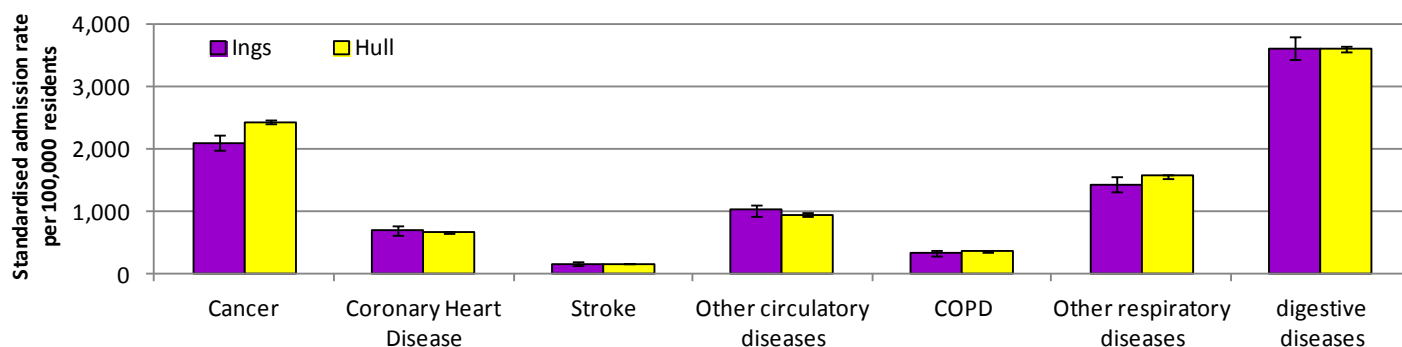


*Standardised Mortality Ratios, not produced if fewer than 5 deaths during 2012-2014. **Upper confidence limit truncated at 500. ***England 2011-2013.

Most common causes of death 2012-2014¹⁶

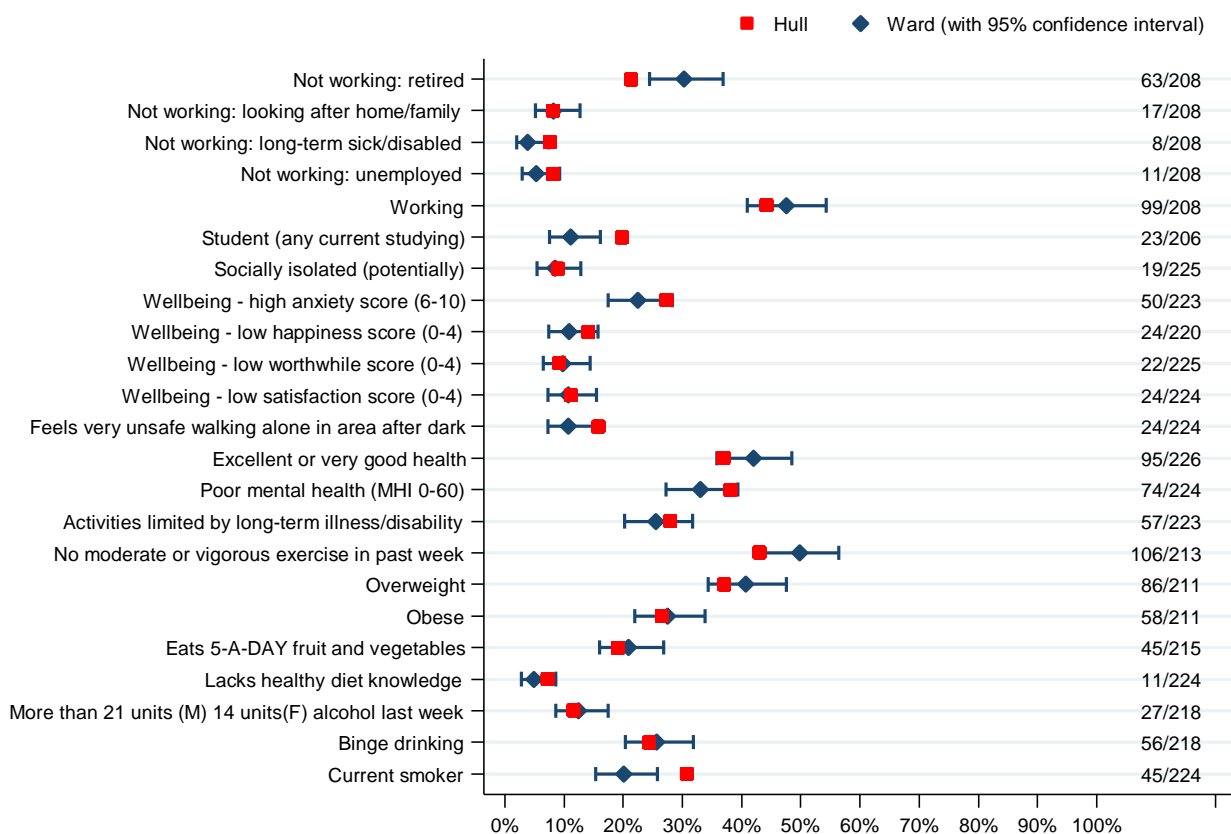


Common causes of hospital admissions 2010-2012¹⁷



Selected results from 2014 prevalence survey¹⁸

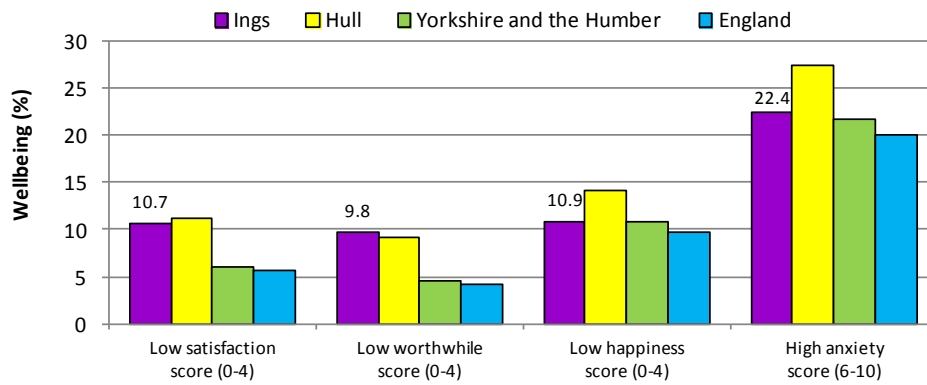
Hull 2014 Prevalence Survey: Ings Ward



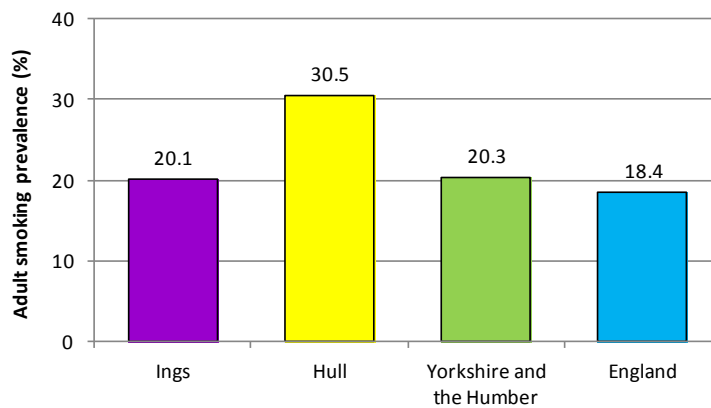
Estimated prevalence of risk factors for poor health (results of 2014 prevalence survey applied to 2013 adult (16+) populations)¹⁹

Risk factor	Men (N=4,711)	Women (N=5,206)	All (N=9,917)
Smokes	1,300	700	2,000
Binge drinks	1,800	800	2,700
Excessive weekly alcohol	800	400	1,300
Problem drinking	2,000	1,000	3,000
Does not eat 5-A-DAY	3,900	3,900	7,900
Overweight	1,900	2,100	4,000
Obese	1,500	1,300	2,800
Overweight or obese	3,300	3,400	6,700
Insufficient exercise	3,300	4,000	7,300
No moderate/vigorous exercise in last week	2,100	2,800	4,900
Activities limited by long-term illness or disability	1,000	1,500	2,500
Poor mental health (SF36 0-60)	1,100	2,000	3,200
Feels very unsafe walking alone in area after dark	400	700	1,000
Wellbeing - low satisfaction score (0-4)	400	600	1,000
Wellbeing - low worthwhile score (0-4)	300	600	900
Wellbeing - low happiness score (0-4)	300	800	1,100
Wellbeing - high anxiety score (6-10)	900	1,300	2,200
Socially isolated (potentially)	200	600	800

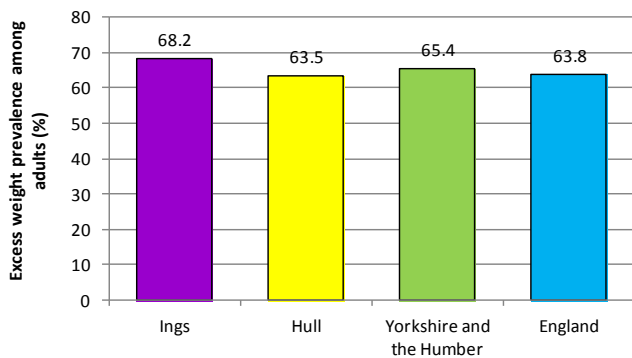
Wellbeing among adults²¹



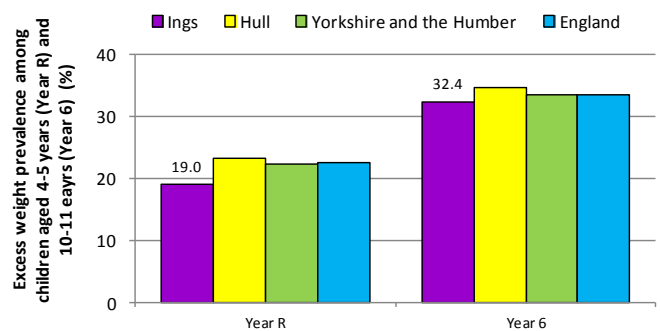
Smoking prevalence among adults²²



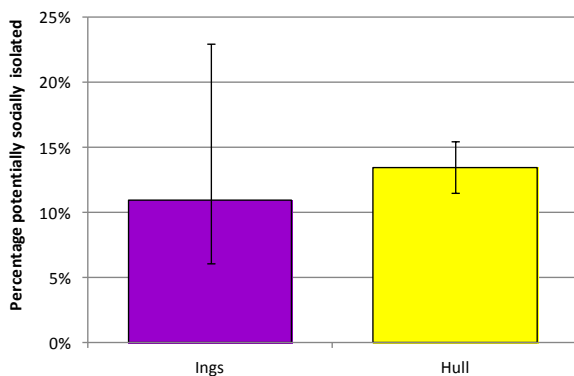
Excess weight among adults²³



Excess weight among children²⁴

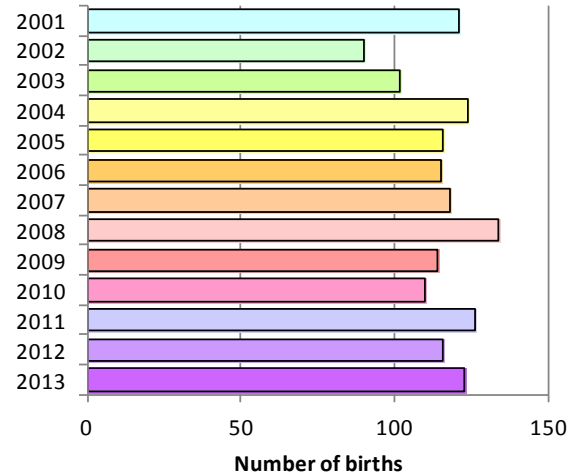
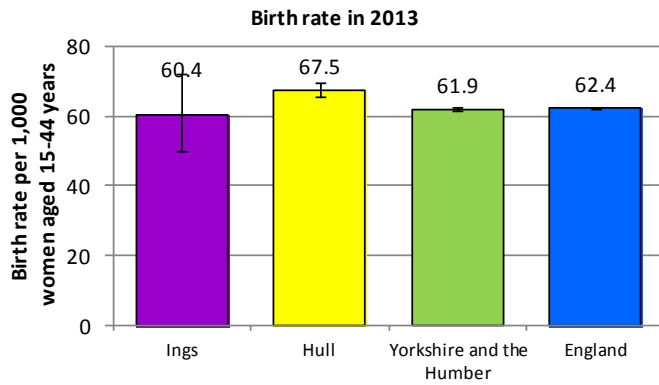


Potential social isolation among residents aged 65+ years²⁵

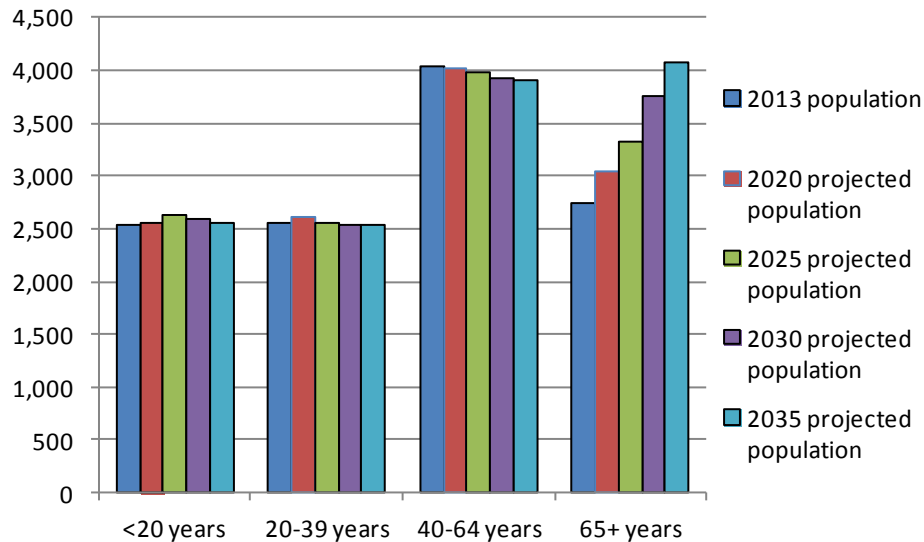


	Percentage (95% CI)	Estimated number (range)
Ings	10.9 (5.4, 20.9)	148 to 572
Hull	13.4 (11.5, 15.5)	4,323 to 5,856

Births²⁶

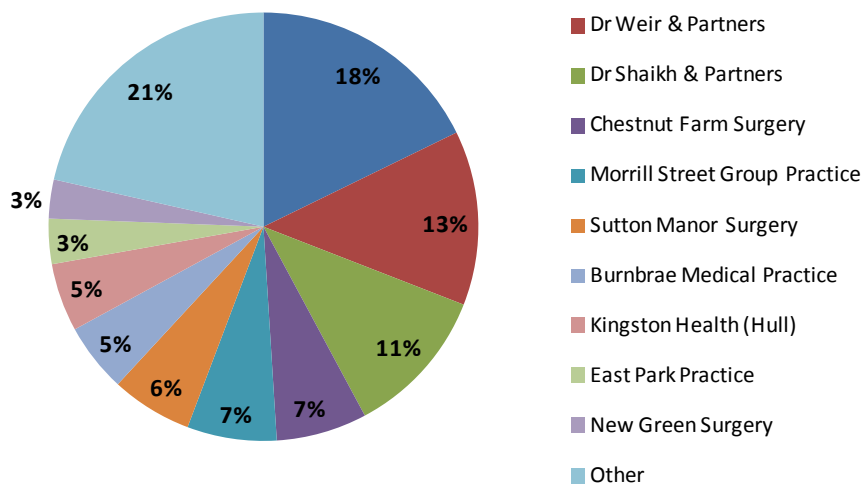


Population projections to 2035²⁷



Percentage of population registered to each GP practice, 2015²⁸

N=12,430



Data sources

- 1 Population data from Office for National Statistics (ONS) mid-year population estimates for 2013 (www.ons.gov.uk).
- 2,3,4 Data from the 2011 census (<http://www.ons.gov.uk/ons/guide-method/census/2011/index.html>).
- 5 IMD 2010 is produced by the Department for Communities and Local Government (<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2010>). IMD 2015 is in production but is not due to be released until September 2015. The map also uses boundary files supplied by ONS.
- 6 Fuel poverty data is produced by the Department for Energy and Climate Change (<https://www.gov.uk/government/publications/2012-sub-regional-fuel-poverty-data-low-income-high-costs-indicator>). The latest data release is for 2012. This is also indicator 1.17 in the Public Health outcomes Framework (www.phoutcomes.info).
- 7 Child Poverty data is produced by HM Revenue and Customs (<https://www.gov.uk/government/statistics/personal-tax-credits-children-in-low-income-families-local-measure-2012-snapshot-as-at-31-august-2012>). Data is for 2012, and was last updated in December 2014. This is also indicator 1.01i in the Public Health outcomes Framework (www.phoutcomes.info).
- 8,9,10 Data are taken from Hull's 2011-12 Adult Health and Lifestyle Survey of more than 13,500 adults in Hull aged 16 years and over (<http://www.hullpublichealth.org/adults.html#ad2011>).
- 11 Feelings of safety figures are derived from Hull's 2014 Adult Prevalence Survey of more than 5,000 adults in Hull aged 16 years and over (full survey results will be published at <http://www.hullpublichealth.org/adults.html> once finalised). Respondents were asked about feelings of safety when walking alone in their local area during the daytime and after dark, as well as when alone at home at night. Response choices were 'Very safe', 'Fairly safe', 'A bit unsafe', 'Very unsafe' and 'Never goes out' / 'Never alone at home at night'. If the respondent chose the last answer they were further asked how they would feel if they did go out alone / were at home alone at night, with just four response choices 'Very safe', 'Fairly safe', 'A bit unsafe' and 'Very unsafe'. Data from these supplementary questions was then combined with the initial questions.
- 12 Unemployment data is taken from NOMIS (<http://www.nomisweb.co.uk/reports/lmp/ward2011/contents.aspx>) which is a services provided by ONS for detailed up-to date labour market statistics. Data are for April 2015.
- 13,14 Life expectancy was produced using mortality data from the Public Health Mortality File (PHMF), supplied by ONS, and mid-year population estimates, rebased after the 2011 census, also supplied by ONS. Life expectancy at birth and at age 65 is also indicator 0.1ii in the Public Health outcomes Framework (www.phoutcomes.info).
- 15 Under 75 SMRs indicate whether local premature mortality rates are higher or lower than would be expected if national (England) rates applied to the local population. Death data are from the PHMF, supplied by ONS, and the population data are from ONS mid-year estimates, rebased after the 2011 census. National mortality rates were extracted from data available from the Health and Social Care Information Centre (<https://indicators.ic.nhs.uk/webview/>).
- 16 Death data are taken from the PHMF.
- 17 Hospital admission data is taken from Hospital Episode Statistics (HES). Rates were produced using HES data and population data (taken from GP registered populations, supplied through the Primary Care Information System).
- 18,19,20 Data from the 2014 Prevalence Survey of Adults in Hull aged 16 years and over was conducted among more than 5,000 Hull residents. Full survey results will be published at <http://www.hullpublichealth.org/adults.html> once finalised. Population data were the 2013 mid-year estimated population produced by ONS. Estimated numbers are rounded to the nearest 100.
- 21,22,23 Local data is taken from Hull's 2014 Prevalence Survey of Adults aged 16 years of more than 5,000 Hull residents. Full survey results will be published at <http://www.hullpublichealth.org/adults.html> once finalised. Regional and national data are taken from the Public Health Outcomes Framework (www.phoutcomes.info) of which these are indicators 2.12 (excess weight), 2.14 (smoking prevalence) and 2.23 (wellbeing).
- 24 Local data is taken from Hull's extract of the National Child Measurement Programmes. Regional and national data, also derived from the National Child Measurement Programme, are taken from the Public Health Outcomes Framework (www.phoutcomes.info) of which this is indicator 2.06.
- 25 The definition of potentially socially isolated is an adult is the only adult living in the household, and does not speak to at least one of family, friends or neighbours each day. Data are from Hull's 2014 Prevalence Survey of Adults aged 16 years of more than 5,000 Hull residents. Full survey results will be published at <http://www.hullpublichealth.org/adults.html> once finalised. Population data are from the 2013 ONS mid-year population estimates.
- 26 The number of births is from the Public Health Births File (PHBF). The birth rate per 1,000 is produced using the PHBF and populations from the ONS mid-year population estimates for 2013. Regional and national birth rates were extracted from data available from the Health and Social Care Information Centre (<https://indicators.ic.nhs.uk/webview/>).
- 27 Population projections were produced by applying the ONS projected population changes by single year of age to the 2013 ONS mid-year estimated populations, thence aggregating the results by broad age band.
- 28 Figure is produced from the April 2015 GP populations by lower layer super output area published by the Health and Social Care Information Centre (www.hscic.gov.uk). The number of residents quoted in the figure is higher than in the population table, as it comes from the GP registration file which historically tends to be higher than the mid-year population estimates presented in the population table

Hull Atlas

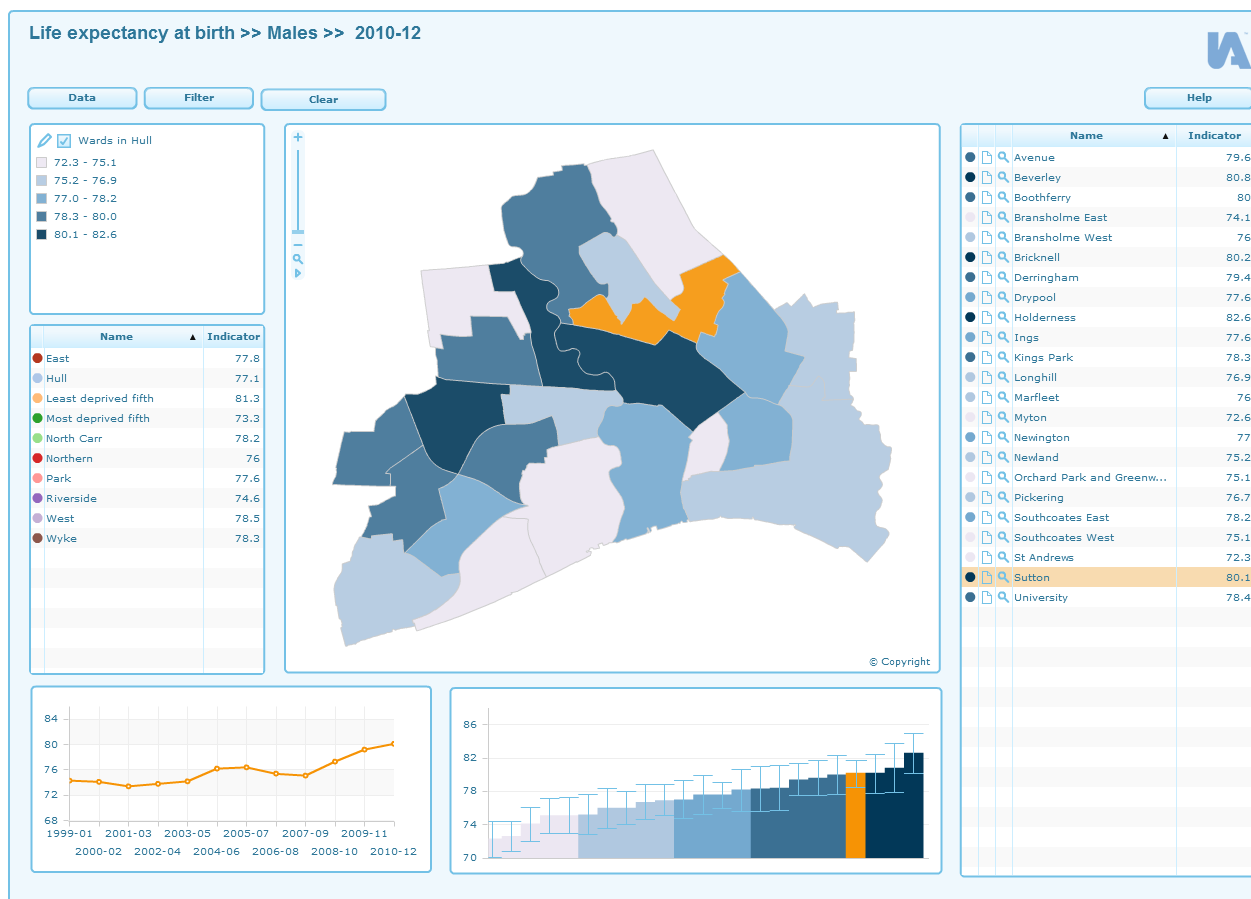
There are seven sets of data currently presented in the JSNA Interactive Atlas at ward level:

- i. Life expectancy and Standardised Mortality Ratios
- ii. Information from the 2011 census
- iii. Indicators from the Public Health Outcomes Framework
- iv. Health status and behavioural risk factors from surveys conducted in Hull
- v. Social Capital measures from surveys conducted in Hull
- vi. Hospital admissions
- vii. Deprivation and crime

The first indicator is automatically presented for each page. To change the indicator, click on “Data” (above the map) and select from the list. You can click on Hull, an Area or deprivation in the “Comparison Table” box to show the comparison information on the charts for the chosen area.

Example: Male Life Expectancy at Birth, by Ward

This page displays a “Time Series Chart” box which gives the trends over time (1999-2001 to 2010-2012 at the time of publication). The 95% confidence interval for the selected year is given in the bar chart. If the number of deaths is less than 3 for a ward, it is not included for data confidentiality reasons. For men and women separately, life expectancy at birth and SMRs for those aged under 75 years for all causes, respiratory disease, circulatory disease, chronic obstructive pulmonary disease (COPD), coronary heart disease (CHD), stroke, all cancers and lung cancer can be selected.



Hull's Joint Strategic Needs Assessment (JSNA)

What is a JSNA?

The JSNA assess the current and future health, care and well-being needs of the people of Hull.

- **Joint** - The JSNA is carried out jointly by NHS Hull and Hull City Council. It is the joint responsibility of the Director of Public Health, Director of Children's Services and the Director of Adult Social Services.
- **Strategic** - Intended to give the information that allows decision makers to make sound strategic decisions.
- **Needs Assessment** - Gives a scientifically robust understanding of the health and wellbeing needs of a local population for more focused commissioning and service delivery.

What will you do with the JSNA?

The JSNA will be used to inform the way in which services are organised and delivered in Hull to meet the needs of the local population. Available for strategic planning, but also micro-implementation.

What is different about the Hull JSNA?

- The JSNA is regularly updated and is a living and interactive web based resource for all the people of Hull, the Voluntary Sector, the Council, all the NHS Organisations and Trusts, the Police and Fire Service.
- The JSNA draws on information gained through local surveys, allowing for 'real' trends to be analysed based on Hull's epidemiological profile as opposed to synthetic or modelled data from national sources.

For further information, please contact:

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www.hullpublichealth.org