







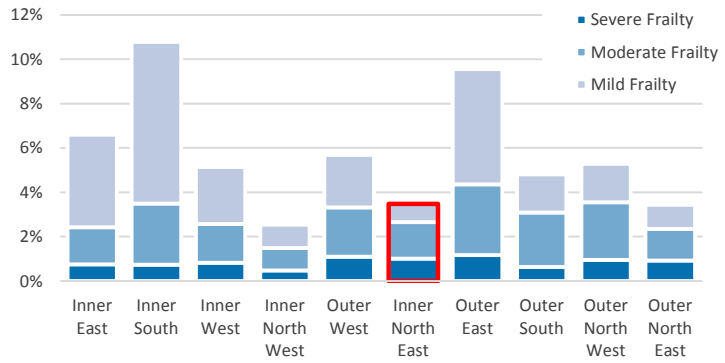


**Frailty rates - all ages**

GP data, April 2018

Rates of frailty (all ages) within whole populations. The Community Committees here are ordered from most deprived on the left to least deprived on the right.

Less deprived populations tend to have larger proportions of elderly patients, but in this chart the least deprived areas have some of the lowest rates of frailty.



**Inner North East Community Committee**

The health and wellbeing of the Inner North East Community Committee contains some variation but is generally around the mid to healthier range within Leeds. Around 25% of the population live in the most deprived fifth of Leeds\*\* but the rest are distributed widely including in the least deprived areas.

Life expectancy for the Community Committee is more or less the same as for Leeds overall. The age structure bears a close resemblance to that of Leeds overall but with slightly larger proportions of children. GP recorded ethnicity shows the Community Committee to have smaller proportions of “White background” than Leeds and higher proportions of some BME groups, especially “Pakistani or British Pakistani”. Around 9% of the GP population in Leeds have no recorded ethnicity and are not included here, which needs to be taken into account. The pupil survey shows a similar picture.

Smoking, obesity, CHD and COPD are well below the Leeds average despite one MSOA ‘Meanwood 6 estates’ having figures which are much higher than other parts of the area. Diabetes, dementia and severe mental health rates are well above Leeds and again the same MSOA features 1st or 2nd. The alcohol dependency test shows the usual higher proportions of men to women, and in general a younger profile than many committee areas, but rates are in general much lower than average. Correspondingly, alcohol specific admissions are significantly below Leeds for men, and average for women.

All-cause mortality for under 75s has historically not been any different to the Leeds rate but recently it become significantly lower than that of the city. Male and female rates are very different though and female rates look to be levelling off. Circulatory disease mortality shows a similar situation. Three small areas show much higher cancer and circulatory disease mortality rates than their neighbours – ‘Meanwood’, ‘Chapelton’, and ‘Meanwood 6 estates’.

The **Map** shows this Community Committee as a black outline. Health data is available at MSOA level and must be aggregated to best-fit the committee boundary. The MSOAs used in this report are shaded orange.

\* **Deprived Leeds:** areas of Leeds within the 10% most deprived in England, using the Index of Multiple Deprivation. \*\***Most deprived fifth of Leeds** - Leeds split into five areas from most to least deprived. **Ordnance Survey** PSMA Data, Licence Number 100050507, (c) Crown Copyright 2011, All rights reserved. **GP data** courtesy of Leeds GPs, only includes Leeds registered patients who are resident in the city. **Admissions data** Copyright © 2016, re-used with the permission of the Health and Social Care Information Centre (HSCIC) / NHS Digital. All rights reserved.

