







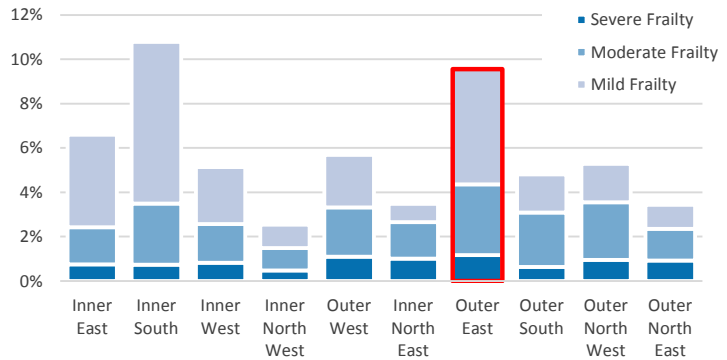


**Frailty rates - all ages**

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.



**Outer East Community Committee**

The health and wellbeing of the Outer East Community Committee contains wide variation across the full range of Leeds, generally in the mid range for the city. Only 8% of the population live in the most deprived fifth of Leeds\*\*. Life expectancy for the Community Committee is not significantly different to Leeds overall but has been increasing until recently.

The age structure bears little resemblance to that of Leeds overall with more young children, fewer young adults and slightly greater proportions of those aged over 40. GP recorded ethnicity shows the Community Committee to have much larger proportions of “White background” than Leeds. 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.

The rate of ‘very overweight’ children is fourth highest in Leeds and ‘overweight’ levels are some of the highest too.

GP recorded conditions show a mixed picture. Obesity and common mental health issues are significantly higher than Leeds and in both cases the ‘Swarcliffe’ MSOA is highest and second highest in the city. On the other hand, smoking, diabetes, and severe mental health are all well below the Leeds figures and for these the ‘Halton Moor, Wykebecks’ MSOA features highly.

Alcohol specific admissions are significantly below Leeds rates for this Community Committee, with widely distributed rates at MSOA level, the ‘Halton Moor, Wykebecks’ and ‘Swarcliffe’ MSOAs are again the highest. Audit-C rates of ‘increasing risk’ are higher than in Leeds overall except for in the youngest age band.

All-cause mortality for under 75s is significantly below the Leeds average despite the same two MSOAs having very high rates. Both circulatory disease and cancer mortality shows a similar widely spread MSOA pattern. Respiratory disease mortality is now significantly better than the Leeds rate.

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.

