

Area overview profile for Outer South Community Committee

This profile presents a high level summary of data sets for the Outer South Community Committee, using closest match Middle Super Output Areas (MSOAs) to calculate the area.

All ten Community Committees are ranked to display variation across Leeds and this one is outlined in red.

If a Community Committee is significantly above or below the Leeds rate then it is shaded red or green respectively, otherwise it is shown as white. Leeds overall is shown as a horizontal black line, Deprived Leeds* (or the deprived fifth**) is a dashed horizontal. The MSOAs that make up this area are shown as red circles and often range widely.

Pupil ethnicity, top 5	Area	% Area	% Leeds
White British	12,584	89%	65%
Any other white background	350	2%	5%
Indian	194	1%	2%
White and Black Caribbean	184	1%	2%
Any other mixed background	177	1%	2%

(January 2018, top 5 in Community committee, corresponding Leeds value. Includes unknowns)

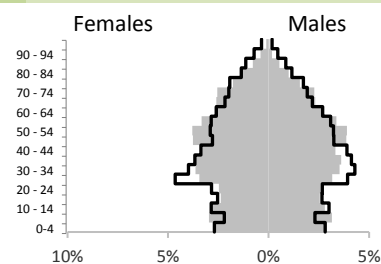
Pupil language, top 5	Area	% Area	% Leeds
English	13,493	96%	79%
Polish	132	1%	2%
Other than English	47	0%	1%
Believed to be English	39	0%	0%
Panjabi	34	0%	1%

(January 2018, top 5 in Community committee, corresponding Leeds value. Includes unknowns)

Population: 91,751 46,449 45,302

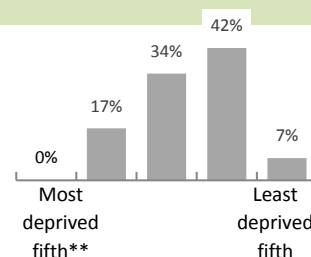
Comparison of Community Committee and Leeds age structures in October 2018.

Leeds is outlined in black, Community Committee populations are shown as orange if inside the most deprived fifth of Leeds, or grey if elsewhere.



Deprivation distribution

Proportions of this population within each deprivation 'quintile' or fifth of Leeds (Leeds therefore has equal proportions of 20%), October 2018.

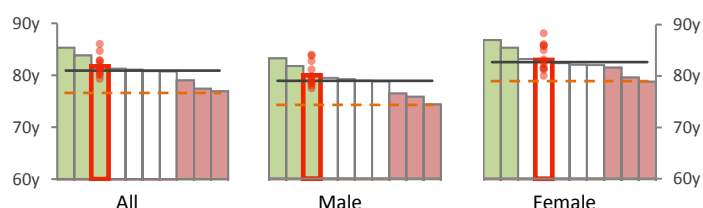


GP recorded ethnicity, top 5	% Area	% Leeds
White British	83%	70%
Other White Background	12%	10%
Indian or British Indian	1%	3%
Chinese	0%	2%
Other Ethnic Background	0%	2%

(October 2018, top 5 in Community committee, and corresponding Leeds values. Does not include unknowns)

Life expectancy at birth, 2014-16 ranked Community Committees

ONS and GP registered populations

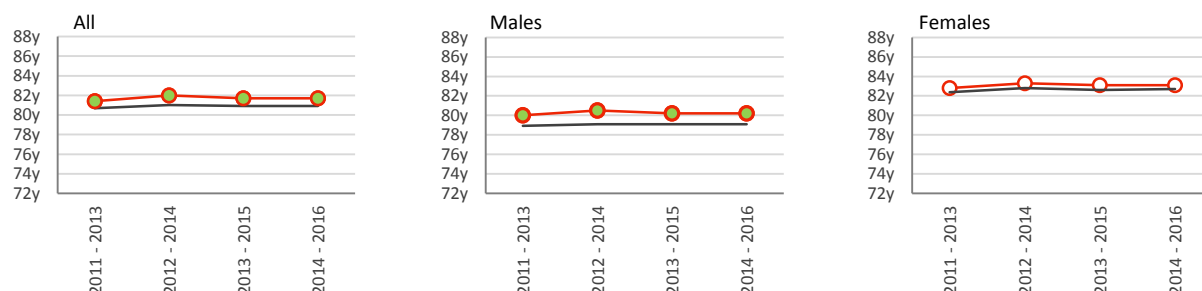


(years)	All	Males	Females
Outer South CC	81.7	80.2	83.1
Leeds resident	80.9	79.1	82.7
Deprived Leeds*	76.6	74.4	79.0

"How different is the life expectancy here to Leeds?"

The three charts below show life expectancy for people, men, and women in this Community Committee in red against Leeds. The Community Committee points are coloured red if the it is significantly worse than Leeds, green if better than Leeds, and white if not significantly different.

Life expectancy overall, and for men is significantly better than that of Leeds and it has been this way since 2011-13. Female life expectancy is also higher than Leeds.



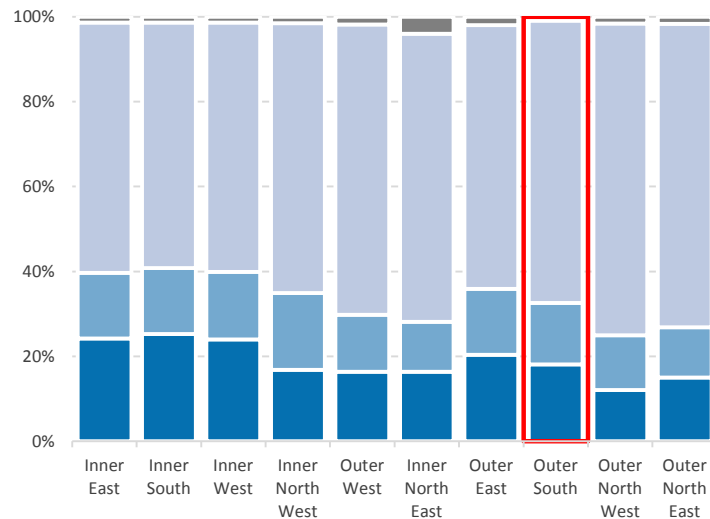
Child obesity - Year 6

National Child Measurement Programme (NCMP)

Child obesity data is shown here for Year 6 classes in Leeds in 2016-17.

The Community Committees are displayed in deprivation order with the most deprived on the left. The proportions of 'healthy weight' increase as deprivation falls, this is mostly due to larger 'very overweight' groups in more deprived areas.

- Underweight
- Healthy Weight
- Overweight
- very overweight
- This Community Committee

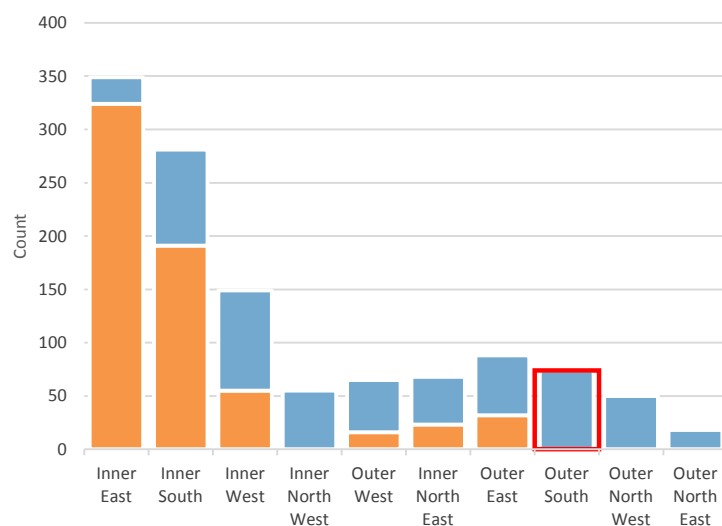
**Looked after children**

Intelligence & Policy Service LCC

Number of looked after children in Community Committees from 2016-17.

The Community Committees are shown ranked by deprivation and despite variations in population sizes the general picture shows larger counts in more deprived areas. Children living inside the most deprived fifth of Leeds are shown in orange.

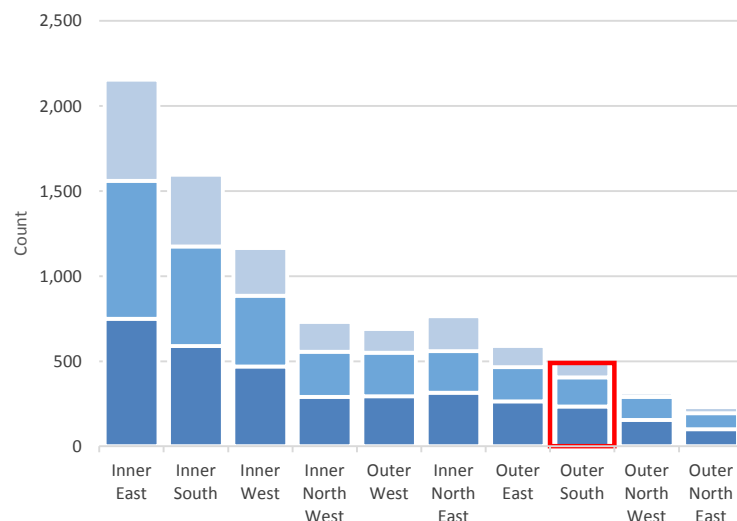
- Not in deprived 5th
- In most deprived fifth
- This Community Committee

**Job seekers allowance**<https://www.nomisweb.co.uk/>

Counts of adults receiving Job Seekers Allowance in August 2018. the data is split by the amount of time spent receiving the allowance.

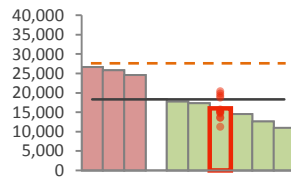
The Community Committees are ranked by levels of deprivation and despite variations in population size and structure, there is a clear reduction in numbers as deprivation falls.

- 1 to 13 weeks
- 13 to 52 weeks
- 52+ weeks

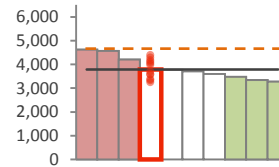


GP recorded conditions, persons (DSR per 100,000)

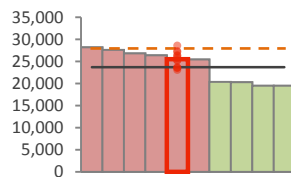
GP data, October 2018

**Smoking (16y+)**

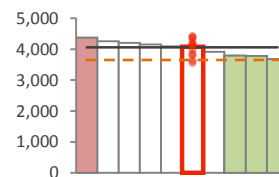
Outer South CC	15,954
Leeds	18,277
Deprived fifth**	27,619

**CHD**

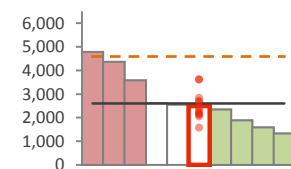
Outer South CC	3,790
Leeds	3,783
Deprived fifth	4,663

**Obesity (16y+ and BMI>30)**

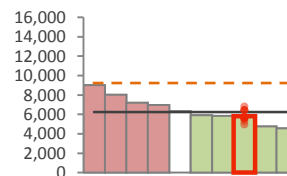
Outer South CC	25,519
Leeds	23,712
Deprived fifth	27,935

**Cancer**

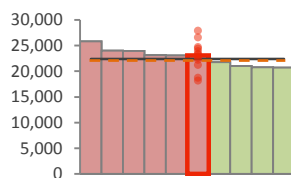
Outer South CC	4,079
Leeds	4,065
Deprived fifth	3,653

**COPD**

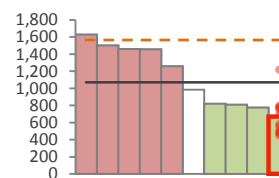
Outer South CC	2,487
Leeds	2,596
Deprived fifth	4,589

**Diabetes**

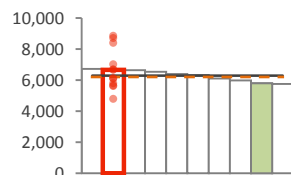
Outer South CC	5,804
Leeds	6,259
Deprived fifth	9,233

**Common mental health**

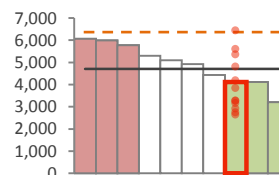
Outer South CC	23,038
Leeds	22,361
Deprived fifth	22,076

**Severe mental health**

Outer South CC	669
Leeds	1,069
Deprived fifth	1,565

**Asthma in children**

Outer South CC	6,655
Leeds	6,286
Deprived fifth	6,207

**Dementia (over 65s)**

Outer South CC	4,124
Leeds	4,701
Deprived fifth	6,367

The GP data charts show all ten Community Committees in rank order by directly standardised rate (DSR). DSR removes the effect that differing age structures have on data, and allow comparison of 'young' and 'old' areas. GP data can only reflect those patients who visit their doctor. Certain groups within the population are known to present late, or not at all, therefore it is important to remember that GP data is not the whole of the picture. This data includes all Leeds GP registered patients who live within the Community Committee. Obesity here is the rate within the population who have a recorded BMI. If a Community Committee is significantly above or below the Leeds rate then it is shaded red or green respectively, otherwise it is shown as white.

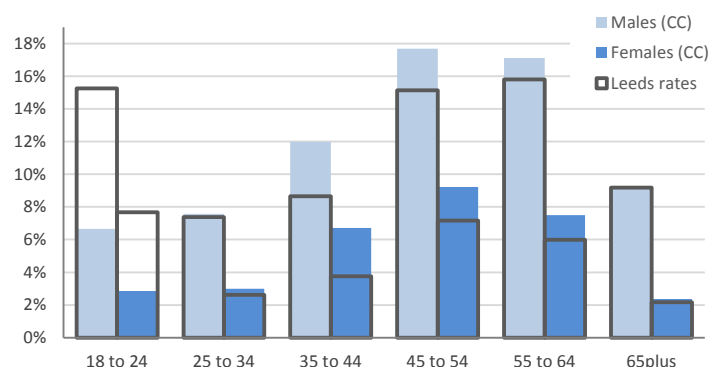
Alcohol dependency - the Audit-C test

GP data, most recent scores, recorded between September 2014 and October 2018

The Audit-C test assesses a patients drinking habits, assigning them a score. Patients scoring 8 or higher are considered to be at 'increasing risk' due to their alcohol consumption.

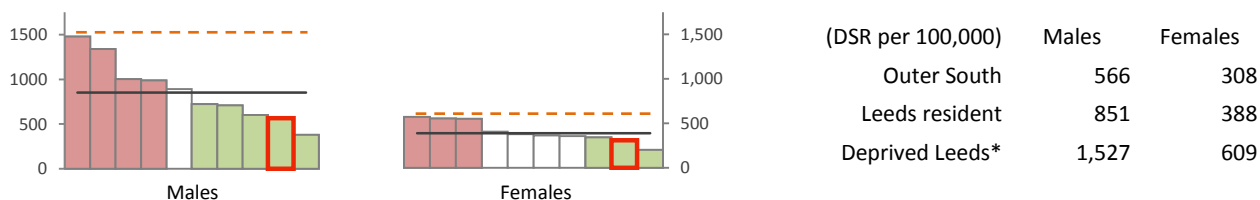
The *proportion* of tests which score 8 or more are shown here for this Community Committee in blue with the Leeds rates overlaid in dark grey.

Men generally have a greater rate than women.



Alcohol specific hospital admissions, 2015-17 ranked

HES



Mortality - under 75s, age Standardised Rates per 100,000

ONS and GP registered populations

"How different are the sexes in this area?"

- Males
△ Females

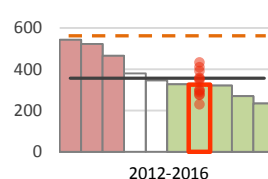
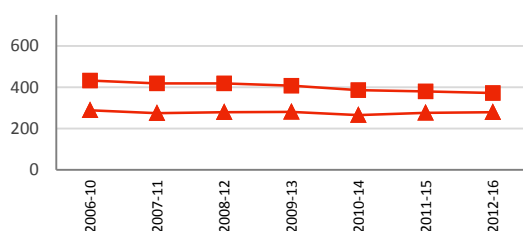
Gender rates are solid red if they are significantly different to one another.

"Where is this Community Committee in relation to the others and Leeds?"

Community Committees are ranked by their most recent rates and coloured as red or green if their rate is significantly above or below that of Leeds.

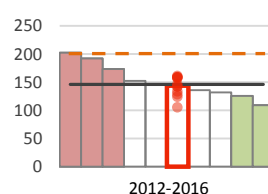
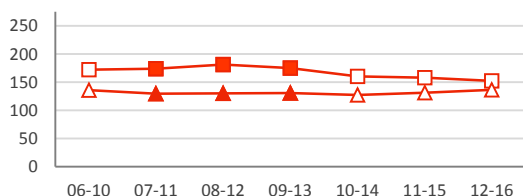
Rates for small areas within this Community Committee are shown as red dots. This Community Committee is highlighted with a red border.

All cause mortality - under 75s



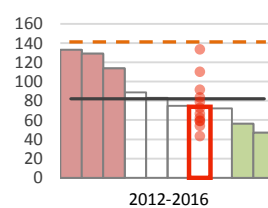
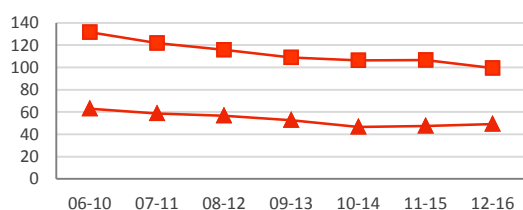
Persons (DSR per 100,000)	
Outer South CC	325
<u>Count of deaths in 2012-16</u>	1,230
Leeds resident	356
Deprived fifth**	562

Cancer mortality - under 75s



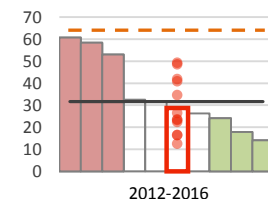
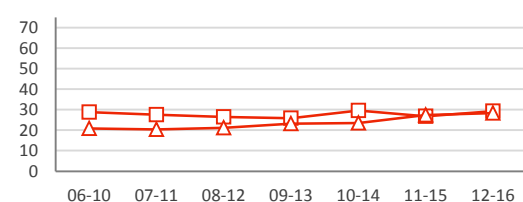
Persons (DSR per 100,000)	
Outer South CC	144
<u>Count of deaths in 2012-16</u>	541
Leeds resident	146
Deprived fifth	201

Circulatory disease mortality - under 75s



Persons (DSR per 100,000)	
Outer South CC	74
<u>Count of deaths in 2012-16</u>	274
Leeds resident	82
Deprived fifth	141

Respiratory disease mortality - under 75s



Persons (DSR per 100,000)	
Outer South CC	29
<u>Count of deaths in 2012-16</u>	105
Leeds resident	32
Deprived fifth	64

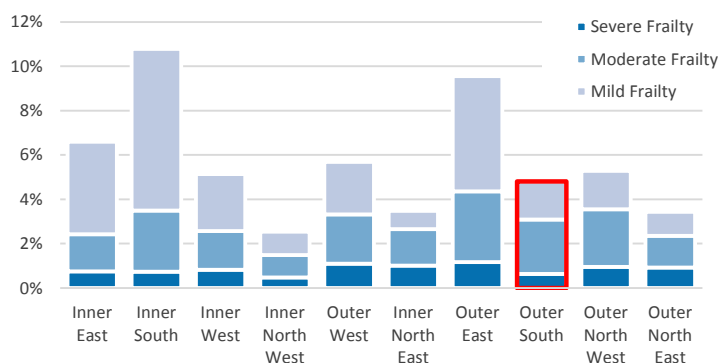
DSR - Directly Standardised Rate removes the effect that differing age structures have on data, allows comparison of 'young' and 'old' areas.

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 South Community Committee**

The health and wellbeing of the Outer South Community Committee contains relatively wide variation across the range of Leeds, excluding some extremes, and is overall within the mid range for the city. It is the fourth largest Community Committee in the city and none of the population live in the most deprived fifth of Leeds**. Life expectancy for the Community Committee population has for some time been significantly higher than Leeds overall. Male life expectancy is also much higher than the city. Female life expectancy though follows a similar pattern but is not significantly higher.

The age structure bears little resemblance to that of Leeds overall with fewer young adults, more young children, and very slightly greater proportions of those aged between 40 and 74. GP recorded ethnicity shows the Community Committee to have 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 clearer but similar picture. The area has low counts of ‘looked after children’ and adults receiving Job Seekers Allowance.

GP recorded smoking, diabetes, severe mental health, and dementia rates are all significantly lower than Leeds and showing relatively little variation at MSOA level. Obesity and common mental health issues though are both significantly higher than Leeds rates. The Community Committee has virtually the highest rate of ‘Asthma in children’ in the city, but it is not significantly different to the Leeds rate or any other of the committees as rates are actually very similar.

Audit-C rates of patients scoring at ‘increasing risk’ or more are in general higher than Leeds, except for the youngest age band which is only half as prevalent. Alcohol specific admissions though are significantly below Leeds rates – ‘Morley East’ MSOA stands out as the MSOA with highest rate in the Committee area.

All-cause mortality for under 75s for the Community Committee is significantly below the Leeds rate but may be flattening off. This is due to female rates beginning to increase in recent years. The same increase in female mortality rates can be seen in the three main causes of death. The ‘Morley West’ MSOA has the highest rates in the Community Committee for most causes of death.

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.

