Fife Health and Wellbeing Profiles – key indicators and overview

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Introduction

The ScotPHO Health and Wellbeing profiles (www.scotpho.org.uk/comparative-health/profiles/online-profiles-tool) provide a set of health and wellbeing indicators for Scottish local authority areas. The indicators are displayed in spine charts for each local authority and are measured in the same way in each part of Scotland. One of the key aims of the profiles is to allow comparisons between areas, and the data that are available demonstrate the inequalities in outcomes between areas.

Feedback shows that some people find using the online profiles tool daunting, therefore this report will provide key points without the need to go into the tool. For further details or up-to-date figures see the final section of this report, which explains how to use the tool.

The featured spine chart compares the local and national positions for each indicator. Also included – for the worst key indicator locally – are a trend chart, showing changes over time in comparison with Scotland, and a rank chart, showing how your local authority compares with the other 31 local authorities. These charts can be accessed online by clicking on an individual indicator name in the spine chart.

Throughout this report we refer to the European Age Standardised Rate (EASR), which is the rate per 100,000 population adjusted for the different age balances. Unless the indicator is given for one sex only, the EASRs adjust for both differing age and sex balance. Crude rates are the rates before any adjustment. Unless specified as crude, 'rate' always means the EASR in this report.

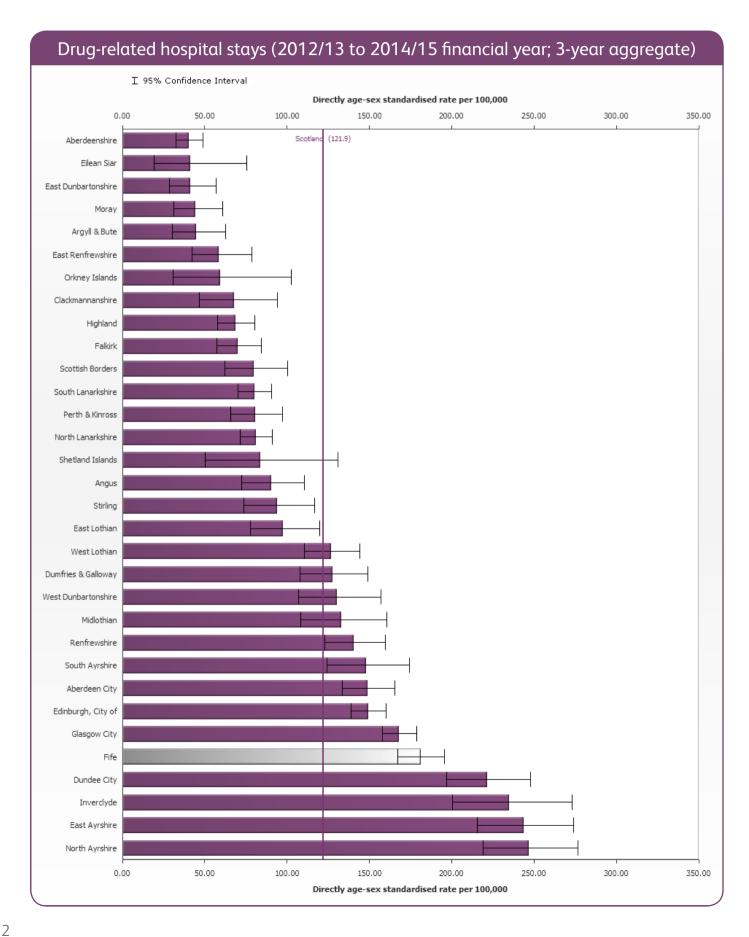






Key differences from Scotland in health and wellbeing indicators for Fife

The 'worst' indicators ranked locally are reported below in the key differences summary. The aim is to provide an indication of which areas might be considered as priorities for improvement.



Methods

Indicators are highlighted only when it is considered that the difference between the local and national figure is not just due to random variation (in other words the difference is statistically significant). Figures were ordered from the worst to the best, then the six worst were selected and compared with the Scottish averages. This information may be of use in health improvement planning, but must be considered in a local context.

The information in this report is a snapshot taken on a particular date (25 February 2016). The indicators are updated continuously, and therefore more up-to-date information may be available online. To avoid disclosure as a result of small numbers, many indicators use aggregated figures where necessary, for example over a three- or five-year period, such as 2012–14. The data can be collected for a calendar year, such as 2012, or a financial year, such as 2012/13.

Key indicators for Fife

For Fife in 2012/13–2014/15, the rate for drug-related hospital stays was 181/100,000, which was 48% higher than the Scottish level of 122/100,000.

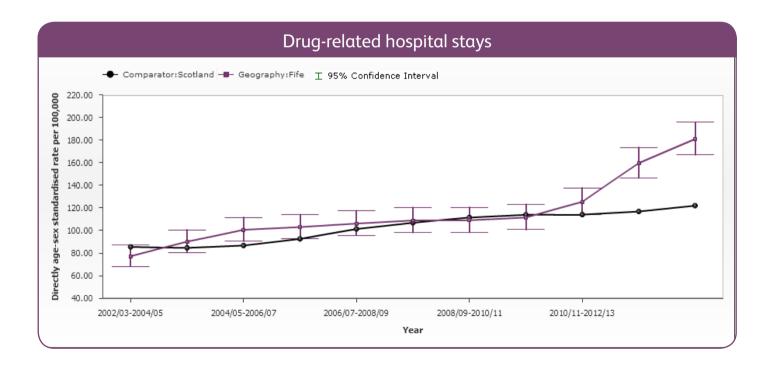
In 2012/2013, the percentage of active travel to work was 9%, which was 44% lower than the Scottish level of 16%.

In 2013/14, the percentage of people aged 65 and over with high levels of care needs who are cared for at home was 23%, which was 33% lower than the Scottish level of 35%.

In 2012/13–2014/15, the percentage of mothers smoking during pregnancy was 22%, which was 21% higher than the Scottish level of 19%.

In 2012/13–2014/15, the percentage of babies exclusively breastfed at 6–8 weeks was 24%, which was 9% lower than the Scottish level of 27%.

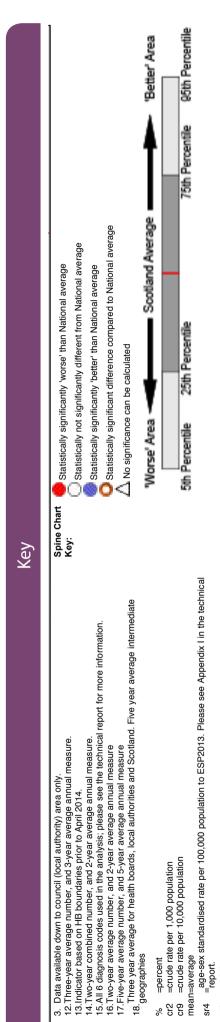
In 2014, the percentage of young people not in employment, education or training (NEET) was 7%, which was 9% higher than the Scottish level of 6.5%.



Health & Wellbeing Profiles (Fife)

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Domain	Indicator	Period	Number	Period Number Measure	уре	Average	ge Worst' Scotland Comparator
	1 Male life expectancy ¹⁸	2011	n/a	77.0	yrs	9.92	•
	2 Female life expectancy ¹⁸	2011	n/a	81.1	yrs	80.8	
Life Expectancy	3 Deaths all ages ¹²	2013	3,746	1,128.0	sr4	1,169.8	8.6
Mortality,	4 All-cause mortality among the 15-44 year olds. ¹²	2013	134	103.0	sr4	100.5	\$
Morrainy	5 Early deaths from CHD (<75) ¹²	2012	174	54.5	sr4	60.7	2
	6 Early deaths from cancer (<75) ¹²	2013	546	148.4	sr4	154.7	
	7 Estimated smoking attributable deaths 3,13,16	2014	969	347.7	sr4	366.8	8
	8 Smoking prevalence (adults 16+) 3,14	2014	101	20.5	%	20.2	
	9 Alcohol-related hospital stays ¹⁵	2014	2,274	629.9	sr4	671.7	
Benaviours	10 Deaths from alcohol conditions ¹⁷	2012	71	19.7	sr4	23.1	
	11 Drug-related hospital stays ^{12,15}	2013	628	181.0	sr4	122.0	0
	12 Active travel to work 3,14	2013	39	9.0	%	16.0	•
	13 Patients registered with cancer ¹²	2012	2,184	632.7	sr4	634.1	•
	14 Patients hospitalised with chronic obstructive pulmonary disease (COPD) ^{12,15}	2012	2,201	644.8	sr4	629.9	0
≡	15 Patients hospitalised with coronary heart disease ¹²	2012	1,342	389.3	sr4	440.3	8
Health &	16 Patients hospitalised with asthma ¹²	2012	285	76.5	sr4	91.2	
Injury	17 Patients with emergency hospitalisations ¹²	2012	24,550	6,912.9	sr4	7,500.2	2.0
	18 Patients (65+) with multiple emergency hospitalisations ¹²	2012	2,876	4,496.6	sr4	5,159.5	9.5
	19 Road traffic accident casualties 12	2012	219	60.2	sr4	63.2	
	20 Population prescribed drugs for anxiety/depression/psychosis ³	2014	65,714	17.9	%	17.4	•
Mental Health	21 Patients with a psychiatric hospitalisation ¹²	2012	996	273.3	sr4	291.6	9
	22 Deaths from suicide ¹⁷	2011	51	14.7	sr4	14.5	9
	23 Adults claiming incapacity benefit/severe disability allowance/ employment and support allowance	2014	17,475	4.8	%	5.1	- 69
Social Care	People aged 65 and over with high levels of care needs who are cared for at home 24 $^{\rm 3}$	2013	596	23.3	%	34.7	•
Housing	25 Children looked after by local authority ³	2013	834	10.7	cr2	14.4	•
	26 Single adult dwellings	2014	64,376	37.3	%	37.5	
	27 Average tariff score of all pupils on the S4 roll ¹³	2012	n/a	186.0	mean	193.0	0
: : :	28 Primary school attendance	2010	24,943	94.6	%	94.8	•
Education	29 Secondary school attendance	2010	18,990	90.1	%	91.1	•
	30 Working age adults with low or no educational qualifications ³	2013	21,300	9.5	%	12.6	
	31 Population income deprived	2014	48,560	13.2	%	13.1	•
	32 Working age population employment deprived	2014	28,855	12.4	%	12.2	2
i i i i i i i i i i i i i i i i i i i	33 Working age population claiming Out of Work benefits	2014	28,200	12.2	%	12.0	0
Ecologia	34 Young people not in employment, education or training (NEET). 3	2014	1,290	7.0	%	6.5	

	34 Young people not in employment, education or training (NEET). 3	2014	1,290	7.0	%	6.5	
	35 Children Living in Poverty	2012	13,525	16.4	%	15.3	
	36 People claiming pension credits (aged 60+)	2014	4,975	5.3	%	6.9	
	37 Crime rate	2014	12,806	34.9	cr2	40.4	•
	38 Prisoner population 3,13	2012	386	133.3	sr4	171.2	
9	39 Referrals to Children's Reporter for violence-related offences ³	2013	34	7	cr2	2.1	0
e E E	40 Domestic Abuse ³	2014	4,200	114.4	cr9	112.0	•
	41 Violent crimes recorded ³	2014	335	9.1	cr9	11.9	
	42 Drug crimes recorded ³	2014	1,547	42.1	cr9	68.9	
	43 Population within 500 metres of a derelict site	2013	94,007	25.7	%	29.7	
Environment	44 People living in 15% most 'access deprived' areas	2014	39,931	10.9	%	15.0	
	45 Adults rating neighbourhood as 'a very good place to live' 3,14	2014	n/a	26.0	%	55.8	•
	46 Teenage pregnancies ¹²	2012	559	20.0	cr2	41.1	•
	47 Mothers smoking during pregnancy ¹²	2013	841	22.4	%	18.5	•
Women's	48 Low birth weight ¹²	2013	64	1.8	%	2.0	•
& Children's	49 Babies exclusively breastfed at 6-8 weeks ¹²	2013	901	24.3	%	26.8	
Health	50 Child dental health in primary 1	2013	2,680	68.4	%	2.99	### ### ### ### ### ### ### ### ### ##
	51 Child dental health in primary 7	2013	1,747	53.8	%	47.7	
	52 Child obesity in primary 1	2013	424	10.5	%	10.1	0
	53 Breast screening uptake ¹²	2011	11,177	71.9	%	72.5	•
Immunisations and	54 Bowel screening uptake ¹²	2012	33,547	56.9	%	56.0	## Part Part
Screening	55 Immunisation uptake at 24 months - 5 in 1 ¹²	2013	4,093	98.3	%	98.2	•
	56 Immunisation uptake at 24 months - MMR ¹²	2013	3,944	94.7	%	95.3	



See the detailed Definitions and Sources table for indicator information and Technical Report for further guidance on interpreting the spine.

=percent =crude rate per 1,000 population =crude rate per 10,000 population

% =percent
cr2 =crude rate
cr9 =crude rate
mean=average

Spine Chart Key:

sr4

Overview of the ScotPHO profiles for Fife

Introduction

This section provides an overview of the population in Fife and all the health and wellbeing indicators in the area. The 56 indicators are split into 13 themes (also called domains). For each theme, comparisons are made between what is observed locally and the national picture.

As we include all indicators in the overview summary, some of these differences may be due to random variation. The spine chart (page 4–5) can be used to examine this. The colour of the dot on the spine chart indicates whether the differences are considered to be due to random variation or are statistically significant. Note that an indicator shown as higher does not always mean worse; it could be better. This depends on what the individual indicator measures. Please note that in this overview we use 'similar' wherever a difference is not statistically significant.

Population structure

In 2014, 63% (232,113/367,260) of the population of Fife was of working age (16–64 years), lower than the national percentage of 65%. Children and young people (aged 0–15 years) made up 17.4% (64,084/367,260) of the population, higher than the national 17%. Adults aged over 75 years comprised 8.4% (30,808/367,260) of the population, higher than the national average of 8.1%. The population structure of Fife has more younger people, more older people, and fewer people of working age than the national average.

Life expectancy

Life expectancies in 2011, at 77 years for males and 81.1 years for females, were similar to the Scottish average of 76.6 years for males and similar to the Scottish female average of 80.8 years.

Mortality

In 2012–2014, the overall mortality rate among young adults (aged 15–44 years) was, at 103, similar to the Scottish rate of 101. Among those aged under 75 years, cancer mortality was 148, so similar to the Scottish rate of 155. For the same age group, for coronary heart disease, the mortality rate was 55, similar to the Scottish rate of 61.

Behaviours

In Fife the prevalence of smoking in adults in 2014 was, at 21%, similar to that in Scotland (20%). The rate for smoking-attributable deaths in 2013–2014, at 348, was similar to Scotland (367). The rate for alcohol-related hospital stays in 2014/15 was 630, lower than the rate for Scotland (672). The rate for drug-related hospital stays in 2012/13–2014/15, at 181, was higher than Scotland's 122. In 2010–2014, the rate for alcohol-related deaths, at 20, was similar to the Scottish rate of 23. The percentage of adults walking or cycling to work in 2012/2013, at 9%, was lower than the 16% who did so in Scotland overall.

Ill-health and injury

The rate for cancer registration in 2011–2013 was, at 633, similar to Scotland's overall rate of 634. The rate for patients hospitalised with asthma in 2011–2013, 77, was lower than the Scottish rate of 91. The rate for emergency hospitalisations in 2011–2013, at 6910, was lower than the rate for Scotland (7500). The rate for patients hospitalised for chronic obstructive pulmonary disease (COPD) in 2011–2013, at 645, was similar to the Scottish rate of 660. In 2011–2013, coronary heart disease rate was, at 389, lower than the Scottish level of 440. For road traffic accidents in 2011–2013 the rate was, at 60, similar to the Scottish rate of 63. The rate for adults aged 65 years and over with multiple hospital admissions in 2011–2013, at 4500, was lower than that in Scotland (5160).

Mental health

The percentage of people prescribed medication for anxiety, depression or psychosis in 2014/15 was, at 18%, higher than Scotland overall (17%). The rate for psychiatric hospitalisations in 2011–2013 was 273, which was lower than the Scottish rate of 292. The suicide rate in 2009–2013 was 15, which was similar to the Scottish rate of 15.

Social care and housing

In 2014, 4.8% of adults claimed incapacity benefit, severe disability allowance or employment and support allowance; this was lower than the Scottish figure of 5.1%. The percentage of those aged 65 years and over with high care needs cared for at home, at 23%, was lower than in Scotland overall (35%). The crude rate for children who were looked after by the local authority, at 11/1000, was similar to Scotland's rate of 14/1000. The proportion of households occupied by single adults (37%) was similar to the 38% in Scotland as a whole.

Education

In 2012/13, the mean tariff score – which measures exam success rates – was 186, in comparison with the Scotland mean of 193. In 2010/11, the percentage attendance at primary school in Fife, at 95%, was similar to Scotland overall (95%) and the secondary school attendance of 90.09 was lower than Scotland's 91%. In 2013, some 9.2% of working-age adults had low or no educational qualifications, in comparison with 13% in Scotland.

Economy

Economic deprivation indicators mostly suggested that the level of deprivation in Fife was higher than the level for Scotland overall. In 2014, the percentage who were income deprived in Fife was 13.2% for all ages, higher than the 13.1% for all ages for Scotland. 12.4% were employment deprived, higher than the 12.2% for those employment deprived in Scotland. In 2014, the percentage who claimed out-of-work benefits, at 12.2%, was higher than the 12% across Scotland. In 2014, the percentage of young adults who were outside employment, education or training was 7%, which was higher than the 6.5% for Scotland. In 2012, the percentage of children living in poverty was 16%, and so was higher than the 15% for Scotland. The percentage of those aged 60 years and over who claimed pension credits in 2014, at 5.3%, was lower than the 6.9% for Scotland.

Crime

In Fife the crude population crime rate for 2014 was lower than Scotland at 35/1000 (Scotland: 40/1000) and the crude domestic abuse rate was similar to Scotland at 114/10,000 (Scotland: 112/10,000). The crude rate for recorded drug crimes was lower than Scotland's rate, at 42/10,000 (Scotland: 69/10,000), and the crude rate for referrals to the children's reporter for violence-related offences was similar to Scotland at 1.1/1000 (Scotland: 2.1/1000). The crude rate for recorded violent crimes was lower than Scotland at 9/10,000 (Scotland: 12/10,000). The rate for prisoner population, at 133, was lower than the Scottish rate of 171.

Environment

In 2013, the percentage of the population who lived within 500m of a derelict site in Fife was 26%, which was lower than that in Scotland (30%) and the percentage with access deprivation (i.e. within the 15% of the Scottish population who lived furthest away from local services) was, at 11%, lower than the 15% for Scotland. In 2014, the percentage of adults who rated their area as a very good place to live was, at 56%, similar to Scotland's 56%.

In 2011–2013, the crude rate for teenage pregnancy was 50/1000, so similar to Scotland's 41/1000. In 2012/13–2014/15, 2% of births were low weight, similar to Scotland at 2%. In 2013/14 the prevalence of childhood obesity in primary 1 was 11%, so similar to Scotland's 10%. The proportion of mothers smoking in pregnancy, at 22%, was higher than the 19% for Scotland in 2012/13–2014/15. The percentage of exclusive breastfeeding, at 24% in 2012/13–2014/15, was lower than Scotland's 27%. In 2013/14, 68% of children in primary 1 had good dental health, higher than Scotland at 67%. The dental health of children in primary 7, at 54% with no obvious decay experience, was higher than the Scotlish average of 48%.

Immunisation and screening

For breast screening, the uptake rate of 72% in 2010–2012 was similar to the national average of 73%. For bowel screening, the uptake rate of 57% was higher than the 56% uptake for Scotland. The immunisation uptake for MMR (measles, mumps, rubella) by age 2 years was 95% in 2012–2014, similar to Scotland's 95%. The immunisation uptake for 5 in 1 (diphtheria, pertussis, tetanus, polio, Hib [meningitis]) by age 2 years in 2012–2014 was 98%, similar to Scotland's 98%.

Intermediate zones

Spine charts showing the data that are available for smaller areas within Fife (intermediate zones [IZs] – areas with approximately 10,000 individuals) are available via the online tool, but it is not possible to show these in the printed reports owing to the volume of the data (there are 1235 IZs in Scotland). The IZs can be further investigated by selecting Intermediate Zone from the Geography drop-down menu in the 'Profiles update process' section within the tool. This will show a map initially featuring the IZs for Aberdeen City. Use the buttons provided to zoom in (+) or out (–) of the map. You can select any local authority from the drop-down menu to the top-right of the map. To access the spine, trend and rank charts about a particular IZ, choose one from the list in the left-hand drop-down menu. Some indicators, particularly those reliant on survey data or those which have a very small number of outcomes, are not available at this level.

Comparisons, time trends, other indicators and further data

Using the online ScotPHO profiles tool (www.scotpho.org.uk/comparative-health/profiles/online-profiles-tool) it is possible to compare the outcomes between any NHS Board, local authority or IZ area. A wider range of outcomes data are also available in the tool, including alcohol and drugs profiles, older adults' profiles, diabetes profiles and mental health profiles.

In any of the ScotPHO profiles the extent to which any differences may be due to random variation or chance is indicated by the colouring of the dots. By clicking on each individual indicator in the online tool it is also possible to compare areas on a rank chart and view time-trend data. Where relevant, data are also presented as standardised rates (to balance and account for age differences between areas) and as crude rates (to reflect the actual number of individuals/events for a particular outcome for service planning). Data across the socioeconomic determinants of health and health topic areas are available on the ScotPHO website: www.scotpho.org.uk

To examine inequalities within local authority areas, use the ScotPHO deprivation profiles from the online tool. These provide data on the inequalities across the local populations broadly in line with the outcomes relevant to Single Outcome Agreements (economic recovery and growth, employment, early years, safer and stronger communities and health inequalities).

A technical report is available on the profiles gateway page (www.scotpho.org.uk/opt/Reports/ HWP-2015-technical-report-13112015.pdf), giving more background on the indicators and how they were measured. A user guide for the online profiles tool is also available here.

Contact ScotPHO scotpho@nhs.net for further information.