

Committee: Health and Wellbeing Board – For Information Health and Social Care Scrutiny Committee – For Information	Date: 18 September 2020 3 November 2020
Subject: City of London Health Profile 2019	Public
Report of: Andrew Carter – Director of Community & Children’s Services Dr Sandra Husbands – Director of Public Health	For Information
Report author: Xenia Koumi – Department of Community & Children’s Services	

Summary

The City of London Health Profile 2019 was published in March 2020 (see Appendix 1). Public Health England produces Health Profiles for local authorities that contain summary information on the health of the people in each local authority area and factors that may influence their health.

Recommendation

Members are asked to:

- Note the City of London Health Profile 2019 and consider how they might use it to shape their forward-planning process.

Main Report

Background

1. Public Health England (PHE) produces Health Profiles for local authorities that contain summary information on the health of the people in each local authority area and factors that may influence their health. Health Profiles are Official Statistics, published by PHE according to the Statistics Release Calendar.
2. The Health Profiles provide a snapshot overview of health for each local authority in England. They are conversation starters, highlighting issues that can affect health in each locality.
3. Health Profiles aim to:
 - provide a consistent, concise, comparable and balanced overview of the population’s health

- inform local needs assessments, policy, planning, performance management, surveillance and practice
 - be primarily of use to joint efforts between local government and the health service, to improve health and reduce health inequalities
 - empower the wider community
4. Since 2019 Public Health England has published its Local Authority Health Profiles on its Fingertips website, however it is not possible for the City of London's profile to be made available in this way, due to the need to include indicators from multiple profiles and because some of the indicators are combined with Hackney's data (due to small numbers in the City).
 5. To mitigate this, PHE has made available a PDF profile that is in a format as similar as possible to the HTML versions created for other local authorities.

Current Position

6. The 2019 City of London Health Profile (published in March 2020) includes 30 indicators. Indicators are reviewed regularly by PHE to ensure that they reflect important public health topics.
7. The 2019 Profile shows some improvements when compared with the 2018 profile; has been a reduction in the percentage of smoking during pregnancy, to 3.6% in 2018-19 from 5.0% in 2017-18. This is a combined value for Hackney and the City of London.
8. According to the 2019 Profile, the City of London performs at, or better than, the national average for the following indicators:
 - Life expectancy at birth (for males and females)
 - Premature mortality (<75 years old) from all causes
 - Mortality rates from all cardiovascular diseases and cancer
 - Emergency hospital admissions for intentional self-harm*
 - Emergency hospital admissions for hip fractures*
 - Hospital admissions for alcohol-specific and alcohol-related conditions*
 - Smoking prevalence in adults
 - Physically active adults
 - Excess weight in adults
 - Under-18 conceptions
 - Smoking during pregnancy
 - Breastfeeding initiation
 - Infant mortality
 - Children in low-income families
 - GCSE attainment
 - Statutory homelessness (temporary accommodation)
 - Excess winter deaths
 - Tuberculosis incidence

*values for the City and Hackney are combined
9. According to Public Health England's City of London Profile 2019, the overall number of residents in 2018 was 8,706. ONS data shows that in the year to mid-

2018, the City of London was the fastest-growing local authority in England, closely followed by Westminster, Camden and Tower Hamlets.

10. The City still has a higher proportion of its population in older age groups compared to London. Compared with 2017 figures there has been a decrease in those aged below 20 and over 65 and an increase in those aged between 20 and 64.
11. Life expectancy in the City of London for both men and women remains higher than the London and England averages.
12. The premature mortality rate from all causes among City of London residents (aged <75 years old) is still significantly lower than both London and England. In 2016-18 there were a similar number of premature deaths from cardiovascular disease and cancer compared with 2015-17 and the England average.
13. The 2019 Health Profile highlights several indicators in which the City of London fared worse than regional or national comparators (marked red) , as follows:
14. **Indicator 6: Killed and seriously injured (KSI) on roads**
Rate of people reported killed or seriously injured on the roads, all ages, (crude rate per 100,000 resident population (2016-18)).

Public Health England states that “Areas with low resident populations but have high inflows of people or traffic may have artificially high rates because the at-risk resident population is not an accurate measure of exposure to transport. This is likely to affect the results for employment centres e.g. City of London.”

On a day-to-day basis there are roughly half a million workers travelling in, out, and around the Square Mile during the working week, using a variety of modes of transport, including public transport, private hire, walking and cycling.

When looking at the count, rather than the rate, between 2016 and 2018 there were 193 KSI casualties in the City of London, which is the sixth lowest count across all 33 London local authorities. Westminster and Tower Hamlets, which both include employment centres, had rates of 715 (the highest) and 473 respectively.

15. **Indicator 10: Diabetes diagnoses**
% proportion of the City’s population (estimated diagnosis rate for people with diabetes aged 17 and over) in 2018.
This is an estimate of the number of people diagnosed with diabetes, expressed as a proportion of the estimated number of those with diabetes, given the characteristics of the local population.

The City of London has a single GP practice – the Neaman Practice. Patients registered at the Neaman have one of the lowest rates of diabetes within the City and Hackney practices. However, the higher rates of diabetes in neighbouring Hackney may skew local estimates of diabetes.

The lower-than-average estimated diagnosis rate may be explained by the fact that the estimates for Local Authorities are created by aggregating GP-level data, which means that data from the Neaman Practice as well as other Hackney GP practices, may be used to create the City of London estimate.

In addition, patient data from the Neaman Practice – the City of London’s only GP practice – shows that diabetes prevalence among its patients (2018/19) was statistically significantly lower than the England average. This needs to be investigated to determine whether or not there is really a low prevalence of diabetes among City residents, or whether it is being underdiagnosed, which could lead to complications and early mortality.

16. Indicator 11: Dementia diagnoses

% proportion of those aged 65+ (2019).

This is an estimate of the number of people aged 65+ diagnosed with dementia, expressed as a proportion of the estimated number of those with dementia, given the characteristics of the local population.

Public Health England states that “organisations with a smaller denominator population...should be interpreted with caution”.

As with the diabetes indicator (above), this data is likely to underestimate the number of people living with dementia in the City of London, and hence the diagnosis rate seems to be lower than it should be.

Patient data from the Neaman Practice shows that dementia prevalence among its patients (2018/19) was statistically significantly lower than the England average, which, as with the diabetes indicator above, may also help to explain the lower-than-average estimated diagnosis rate. Again, this needs to be investigated to ascertain the true prevalence of dementia among City residents.

17. Indicator 21: Obese children (including severe obesity)

Combined figures for City of London and Hackney for children aged 10 to 11 years, given as a % proportion (2018/19).

Data is taken from the National Child Measurement Programme (NCMP), which collects pupils’ BMI (height and weight information) from state maintained primary schools – only one of which exists in the City of London (The Aldgate Church of England Primary School). City-specific data has been combined with data from London Borough of Hackney to prevent potential disclosure of individuals.

18. Indicator 29: New STI diagnoses (exc. Chlamydia in <25s)

All new sexually transmitted infection diagnoses (excluding Chlamydia in under 25 year olds) (crude rate per 100,000 population aged 15 to 64) (2018).

PHE states that “diagnosis rates of STIs should be interpreted alongside the corresponding testing rate and positivity. A high diagnosis rate is indicative of a high burden of infection, however a low diagnosis rate may be explained by other factors as well”.

The rate of new STI diagnoses in the City of London is significantly higher than the national value may be due to a number of reasons, including that due to the small resident population used as the denominator, any small changes in the numerator (new diagnoses) are likely to be represented as large fluctuations due to the crude rate methodology. In addition, City workers accessing sexual health services who provide their workplace postcode, who do not provide their home address, or who are from overseas, are automatically allocated to the City of London.

The City of London's STI testing rate (excluding chlamydia aged <25) per 100,000 population is better than the England average and the highest in London (2018). The percentage of STI testing positivity (excluding Chlamydia aged <25) is higher than the England average (3.4% and 2.3% respectively, in 2018).

Corporate & Strategic Implications

19. This information informs the City and Hackney Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy of the City Corporation's Health and Wellbeing Board, as well as the development and implementation of other health and social-care related strategies and action plans.

Conclusion

20. While the City of London's Health Profile 2019 provides a useful starting point for looking at performance, the small numbers must be treated with caution, as they can paint an inaccurate picture of health and factors influencing health locally.

21. Members are asked to note the Health Profile and consider how they might use it to shape their forward-planning process.

Appendices

- Appendix 1 – City of London Health Profile 2019

Xenia Koumi

Public Health Specialist, Department of Community & Children's Services

T: 020 7332 3378

E: xenia.koumi@cityoflondon.gov.uk