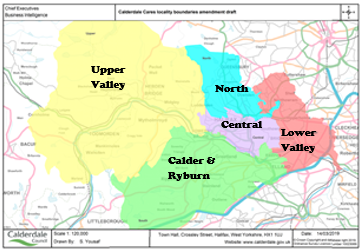
Calderdale Cares Neighbourhood Profile – Central

**Map of area**



**GPs in Central**

Boulevard Medical Centre

King Cross Practice

Rosegarth Medical Practice Group

Spring Hall Medical Practice Group

**Wards in Central:** The wards do not map exactly to the neighbourhood boundaries; however, the following wards have part of their population living within Central; Park 83%, Skircoat 80%, Town 53%, Warley 56%

**Population Characteristics**

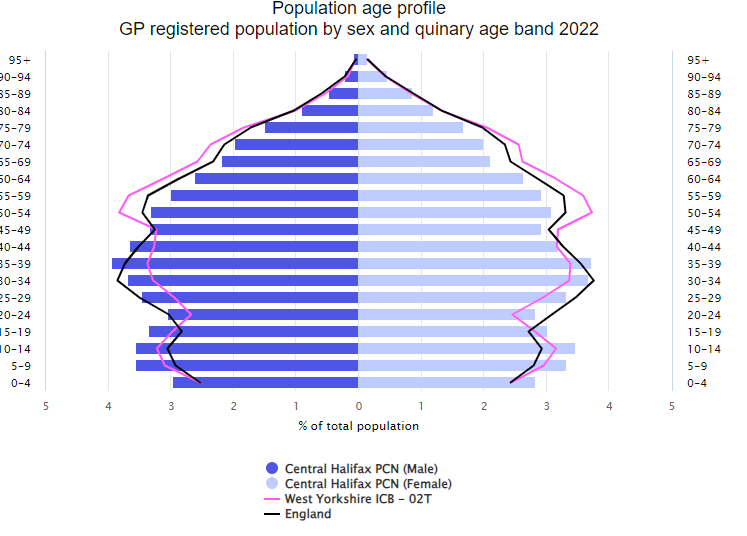
The total registered population of Central is 54,124, according to the 2022 GP Practice Populations.

Central has the largest ethnic minority population of the localities (43%), with Asian being the largest group, accounting for 34.6% of the population, followed by White Other (3.2%). Just over half of primary and secondary school pupils are Asian.

According to the 2021 Census around 4.2% of the population have stated that they cannot speak English well or at all which is higher than the Calderdale average.

Around a third of the population are Christian and a third are Muslim.

***Figure 1 Population Pyramid***



Source: GP Practice Populations 2022

The population pyramid shows that Central has a higher proportion of those aged between 0 to 44 when compared to Calderdale (Pink line – West Yorkshire ICB – 02T). There is a lower proportion of those aged 50 to 79 years when compared to Calderdale.

**Wider determinants of Health**

Central is a relatively deprived area with around 1 in 5 of its households claiming council tax reduction and over 1 in 4 claiming Universal credit. 25.9% of primary school children in the area are eligible for free school meals, which is similar to the Calderdale average. However, by secondary school this has increased to 29.5%, which is significantly higher than the Calderdale average.

**Starting Well**

The fertility rate in Central is significantly higher than the Calderdale average, with around 668 babies being born each year.

The proportion of women still smoking at the time of delivery is similar to the Calderdale average with 1 in 9 still smoking.

The percentage of babies born with a low birth weight (less than 2500g) is significantly higher than the Calderdale average. Approx. 53 babies in Central are born with a low birth weight each year.

59% of mothers breastfeed following delivery, remaining at a similar rate by the time mother and baby are discharged from hospital and 53.5% are still breastfeeding between 6 and 8 weeks post birth. These rates are similar to the Calderdale average.

**Developing Well**

Just under 1 in 3 households in Central have dependent children.

Excess weight for reception age children is slightly higher than the Calderdale average at around 19%, but not significantly. By year 6 it is significantly higher than the Calderdale average, with 38.8% having excess weight, the highest neighbourhood.

We do not have much information around the health conditions that children are living with, but we do know that the proportion claiming disability living allowance is similar to Calderdale’s average at 4.4%, compared to 4.7%.

Referrals to children’s social care are similar to the Calderdale average.

**Living and Working Well**

Smoking rates in Central are similar compared to Calderdale overall with just over1 in 6 estimated to be smokers.

Obesity prevalence amongst 18+ year patients with a BMI of 30 or above is significantly lower than the Calderdale average.

We currently do not have any other information around healthy lifestyles in adults at neighbourhood level.

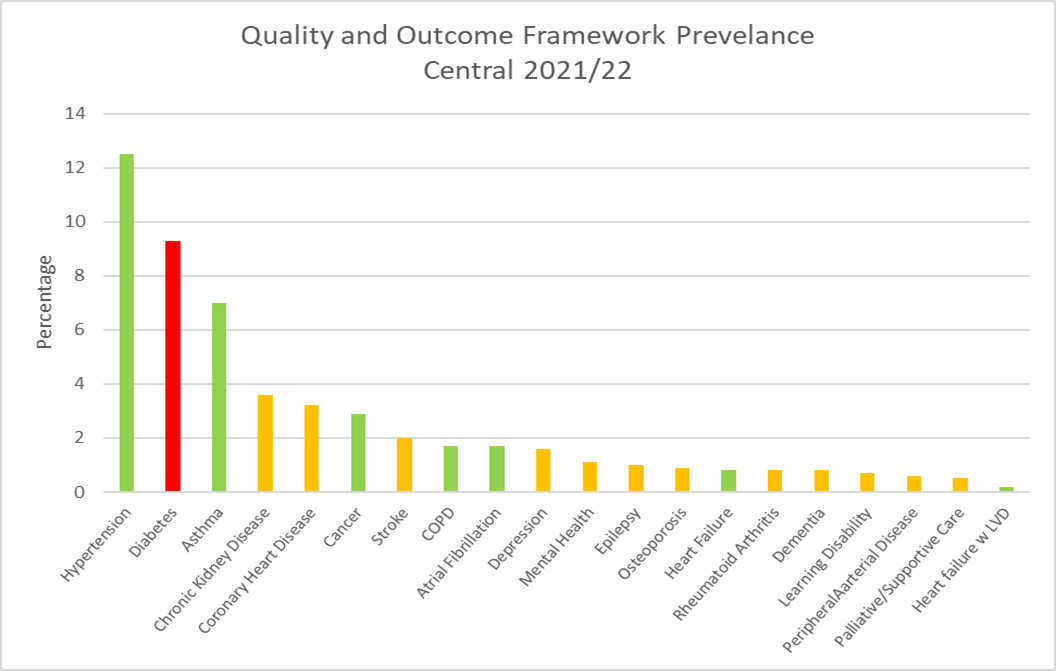
*Life Expectancy*

Both Females and Males in Central have a life expectancy almost 1 year less than Calderdale average but this is not a statistically significant difference.

*Long term conditions*

According to the 2021 Census, 17.2% had a long-term health problem or disability which limits activities – this is significantly lower than the Calderdale average. We do not know how many of these had more than one long term condition.

There is a significantly higher referral rate to adults social care in adults aged 18 or over compared to the Calderdale average



The graph shows the percentage of residents with each condition according to the Quality and Outcomes Framework (QOF). Bars coloured red are significantly higher than Calderdale, green is significantly lower, and amber is no significant difference. There are a few things to consider when interpreting this data:

* These rates do not take into account the age structure of the population so areas with a high percentage of older people are likely to have higher rates than the Calderdale average.
* Patients may have conditions that have not yet been diagnosed and therefore will not be included in the figures
* A high death rate will result in a lower prevalence
* There may be differences in coding and data quality that affect the figures

As can be seen from the graph, hypertension has the highest prevalence, followed by diabetes. We currently do not know how much clinical time is spent managing these conditions, the amount of medication used, and the costs associated with this. It could be that other conditions with a lower prevalence actually take up more clinical time and are more costly to manage.

It is useful to consider the incidence/prevalence of a condition as well as mortality rates, to get a better picture of need. However, it is important to bear in mind that the deaths have been adjusted to take into account the age structure of the population whereas the other data has not. Available data that we have for each condition is summarised over the page:

*Circulatory Diseases*

The percentages with hypertension and heart failure are significantly lower than the Calderdale average and the percentages with heart disease and stroke are similar to the Calderdale average. Deaths from cerebrovascular disease are significantly higher than the Calderdale average given the age structure of the population. Deaths from cardiovascular disease and heart disease are also significantly higher than Calderdale.

*Cancer*

Screening rates for cervical and bowel cancer are all significantly worse than the Calderdale average though the breast cancer screening rate is significantly better. The prevalence of any type of cancer is significantly lower than the Calderdale average and there is also a lower emergency admission rate for cancer. The rate of those receiving palliative/supportive care is similar to the Calderdale average.

The death rate from cancer is similar to Calderdale rate.

*Mental Health*

The percentage diagnosed with depression each year is similar to the Calderdale average, patients are only recorded as having depression if they receive medication, so if those not taking medication were included the numbers could be higher. The proportion living with mental health (schizophrenia, bipolar affective disorder, and other psychoses) is also similar to the Calderdale average.

The death rate from suicide is not significantly different to the overall Calderdale rate.

*Respiratory Conditions*

The percentages living with COPD and Asthma is significantly lower than Calderdale. Death rates from respiratory conditions are similar to the Calderdale average, apart from in those aged under 65, where it’s significantly worse.

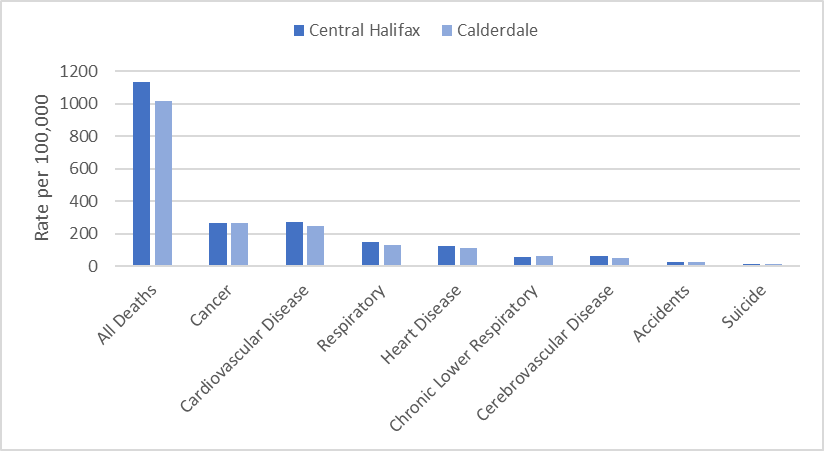
*Other*

The proportion of people living with diabetes is significantly higher than the Calderdale average.

**What do people die from?**

On average, around 522 of Central’s residents die each year. Around 120 people die per year from cancer, and a similar number from cardiovascular disease, 67 from respiratory conditions, 50 from ischaemic heart disease and 31 from cerebrovascular disease.

***Figure 2 Directly Standardised Mortality Rates for Leading Causes of Death 2017-2021***

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The directly standardised mortality rate (DSR) takes into account the age structure of the population and shows if the number of deaths per population is higher or lower compared to area averages.

Mortality in Central was significantly higher than Calderdale for all deaths for all ages, this is also the case for cerebrovascular disease, cardiovascular disease, and heart disease. Accidents, cancer, and respiratory conditions are higher than Calderdale, but this was not statistically significant.

Deaths from respiratory, cardiovascular and heart disease for those aged less than 65 were significantly higher than Calderdale.

**Ageing well**

Pension credit is extra money given to those who are over state pension age and on a low income, to help with living costs. Older people living in Central appear to be relatively more deprived than the Calderdale average. A significantly higher percentage aged 65+ claim pension credit, with 13.3% in Central compared to 11% for Calderdale.

Personal independence payment (PIP) is given to those with a long-term physical or mental health condition or disability who have difficulty doing certain everyday tasks or getting around. Attendance Allowance helps with extra costs if a person has a disability severe enough that they need someone to help look after them. Central has a significantly higher proportion compared to Calderdale claiming PIP (around 1 in 10) or Attendance Allowance at 65+ (around 1 in 8).

The death rate for all causes and dementia in those aged 65+ is significantly higher than the Calderdale average.

Public Health, CMBC September 2023

V2

| **Red is significantly worse than Calderdale**  **Green is significantly better than Calderdale**  **Blue is significantly different to Calderdale**  Calderdale rated compared to England average  **INDICATOR** | **Central** | **Calderdale** | **England** | **Source** |
| --- | --- | --- | --- | --- |
| **Population Characteristics** |  |  |  |  |
| **Population** |  |  |  |  |
| Total registered population | 54124 | 213519 |  | GP Practice Populations 2022 |
| Registered population 0-4 | 3119 | 10604 |  | GP Practice Populations 2022 |
| Registered population 5-14 | 7504 | 26441 |  | GP Practice Populations 2022 |
| Registered population 0-19 | 14062 | 49414 |  | GP Practice Populations 2022 |
| Registered population aged 65 and over | 8514 | 40039 |  | GP Practice Populations 2022 |
| Registered population aged 75 and over | 4048 | 18128 |  | GP Practice Populations 2022 |
| Registered population aged 85 and over | 1211 | 4672 |  | GP Practice Populations 2022 |
| **Ethnicity** |  |  |  |  |
| Percentage of the population who are Irish | 0.5 | 0.8 | 0.9 | 2021 census |
| Percentage of the population who are Gypsy/Irish Travellers/Roma | 0.5 | 0.2 | 0.1 | 2021 census |
| Percentage of the population who are White Other | 3.2 | 2.4 | 6.4 | 2021 census |
| Percentage of the population who are Asian | 34.6 | 10.5 | 9.6 | 2021 census |
| Percentage of the population who are Black | 1.2 | 0.7 | 4.2 | 2021 census |
| Percentage of the population who are Mixed Race | 2.1 | 2.0 | 3.0 | 2021 census |
| Percentage of the population who are "other" | 1.8 | 0.7 | 2.2 | 2021 census |
| Percentage of primary school children attending Calderdale schools who are Asian | 51.3 | 17.8 | 12.8 | Jan 2023 School Census |
| Percentage of secondary school children attending Calderdale schools who are Asian | 52.2 | 17.7 | 12.9 | Jan 2023 School Census |
| **Religion** |  |  |  |  |
| Percentage of the population who are Christian | 32.1 | 41.5 | 46.3 | 2021 census |
| Percentage of the population who are Buddhist | 0.3 | 0.3 | 0.5 | 2021 census |
| Percentage of the population who are Hindu | 1.7 | 0.6 | 1.8 | 2021 census |
| Percentage of the population who are Jewish | 0.1 | 0.1 | 0.5 | 2021 census |
| Percentage of the population who are Muslim | 32.2 | 9.5 | 6.7 | 2021 census |
| Percentage of the population who are Sikh | 0.2 | 0.2 | 0.9 | 2021 census |
| **Language** |  |  |  |  |
| Percentage main language is not English and cannot speak English well or at all | 4.2 | 1.4 | 1.8 | 2021 census |
| **Sexual Orientation** |  |  |  |  |
| Percentage of 16+ residents who identify as LGBTQ+ | 2.3 | 3.2 | 3.2 | 2021 census |
| **Wider determinants of health** |  |  |  |  |
| Percentage of households claiming council tax reduction | 19.8 | 16.8 |  | Calderdale Council Tax system c/o Calderdale Council Qlikview, accessed April 2023 |
| Percentage of households claiming housing benefit | 8.2 | 7.8 | 8.8 | DWP - Housing Benefit claimants February 2023; stat-xplore.dwp.gov.uk, accessed 30 May 2023; Census 2021 Number of households by LSOA |
| Percentage of households claiming universal credit | 27.3 | 20.9 | 16.6 | DWP - Households claiming universal credit February 2023; stat-xplore.dwp.gov.uk, accessed 31 May 2023; Census 2021 Number of households by LSOA |
| Percentage of primary school children eligible for free school meals | 25.9 | 26.8 | 24.0 | Jan 2023 School Census |
| Percentage of secondary school children eligible for free school meals | 29.5 | 26.1 | 22.7 | Jan 2023 School Census |
| Percentage of households that are owned outright | 33.1 | 34.6 | 32.5 | 2021 census |
| Percentage of households that are owner occupied - Mortgage/Loan | 28.9 | 30.4 | 29.8 | 2021 census |
| Percentage of households rented from a social landlord | 12.4 | 14.5 | 17.1 | 2021 census |
| Percentage of households rented privately | 25.5 | 20.4 | 20.5 | 2021 census |
| Percentage of households without central heating | 2.3 | 2.1 | 1.5 | 2021 census |
| Percentage of households with no car or van | 29.0 | 24.5 | 23.5 | 2021 Census |
| **Starting Well** |  |  |  |  |
| Fertility rate per 1000 women aged 15-44 [2017-2021] | 67.0 | 60.1 | 59.2 | ONS, calculated by CMBC |
| Live birth rate per 1000 women aged 15-44 [2017-2021] | 66.8 | 59.9 |  | ONS, calculated by CMBC |
| Still birth rate per 1000 births [2017-2021] | 3.6 | 3.8 |  | ONS, calculated by CMBC |
| Percentage of low birth weight babies [2017-2021] | 8.1 | 7.0 | 6.8 | ONS, calculated by CMBC, figure differ from national as includes all gestations |
| Infant mortality rate per 1000 live births [2017-2021] | 5.4 | 4.3 | 3.9 | ONS, calculated by CMBC |
| Percentage smoking at delivery (2022/23) | 11.4 | 10.0 |  | Maternity system, calculated by CMBC |
| Percentage breastfeeding at delivery (2022/23) | 59.3 | 60.3 | 71.7 | Maternity system, calculated by CMBC |
| Percentage breastfeeding at discharge (2022/23) | 58.5 | 59.4 |  | Maternity system, calculated by CMBC |
| Percentage breastfeeding at 6-8 weeks (2022/23) | 53.5 | 51.6 | 49.2 | Maternity system, calculated by CMBC |
| Percentage of households with dependent children | 32.0 | 28.3 | 28.4 | 2021 Census |
| **Developing well** |  |  |  |  |
| Percentage of those aged under 18 claiming disability living allowance (November 2022) | 4.4 | 4.7 | 4.8 | Stat-xplore DWP, GP practice populations 2022 |
| Excess weight reception age children [2019/22] | 18.8 | 17.4 | 22.6 | NCMP |
| Excess weight year 6 children [2019/22] | 38.8 | 34.3 | 35.8 | NCMP |
| Rate per 1000 population aged 0 to 17 referred to children's social care (2023) | 54.5 | 55.4 |  | CMBC Cass system accessed 30 May 2023; Census 2021 |
| Children on a child protection plan (rate per 1000) 31 March 2023 | 4.1 | 5.1 |  | CMBC Cass system accessed 30 May 2023; Census 2021 |
| **Living and working well** |  |  |  |  |
| Estimated smoking prevalence QOF (15+) [2021/22] | 17.5 | 17.5 | 15.4 | QOF |
| Obesity QOF Prevalence (18+) Patients with a BMI of 30 or above (2021/22) | 8.3 | 9.4 | 9.7 | QOF |
| **Life Expectancy and All Cause Mortality** |  |  |  |  |
| Life expectancy at birth in males [2019-2021] | 77.2 | 78.2 | 79.4 | ONS, calculated by CMBC |
| Life expectancy at birth in females [2019-2021] | 81.6 | 82.4 | 83.1 | ONS, calculated by CMBC |
| Directly Standardised Death Rate all causes (all ages) [2017 -2021] | 1130.4 | 1017.9 |  | ONS, calculated by CMBC |
| Directly Standardised Death Rate all causes (aged <65) [2019 -2021] | 229.9 | 191.6 |  | ONS, calculated by CMBC |
| **Long term conditions** |  |  |  |  |
| Percentage of population with a long term health problem or disability which limits activities | 17.2 | 18.3 | 17.3 | 2021 census |
| Percentage of population who stated they were in good or very good health | 80.6 | 80.8 | 82.2 | 2021 census |
| Rate per 1000 population aged 18+ referred to adults social care (2021/22) | 52.6 | 47.7 |  | CMBC |
| **Circulatory Diseases** |  |  |  |  |
| Coronary Heart Disease prevalence (all ages) [2021/22] | 3.2 | 3.5 | 3.0 | QOF |
| Heart Failure: QOF prevalence (all ages) [2021/22] | 0.8 | 0.9 | 1.0 | QOF |
| Heart failure w LVD prevalence (all ages) [2021/22] | 0.2 | 0.3 | 0.4 | QOF |
| Stroke prevalence (all ages) [2021/22] | 2.0 | 2.0 | 1.8 | QOF |
| Atrial fibrillation: QOF prevalence (all ages) (2021/22) | 1.7 | 2.1 | 2.1 | QOF |
| Peripheral arterial disease QOF prevalence (all ages) [2021/22] | 0.6 | 0.8 | 0.6 | QOF |
| Hypertension: QOF prevalence (all ages) [2021/22] | 12.5 | 13.9 | 14.0 | QOF |
| DSR Deaths for ischaemic heart disease (all ages) [2017 -2021] | 126.6 | 110.7 |  | ONS, calculated by CMBC |
| DSR Deaths for ischaemic heart disease (aged <65) [2017 -2021] | 28.9 | 20.0 |  | ONS, calculated by CMBC |
| DSR Deaths for cerebrovascular disease (all ages) [2017 -2021] | 64.3 | 53.9 |  | ONS, calculated by CMBC |
| DSR Deaths for cerebrovascular disease (aged <65) [2017 -2021] | 8.3 | 6.4 |  | ONS, calculated by CMBC |
| DSR Deaths for cardiovascular disease (all ages) [2017 -2021] | 273.8 | 249.3 |  | ONS, calculated by CMBC |
| DSR Deaths for cardiovascular disease (aged <65) [2017 -2021] | 51.3 | 38.7 |  | ONS, calculated by CMBC |
| **Cancer** |  |  |  |  |
| Cancer prevalence all ages [2021/22] | 2.9 | 3.5 | 3.3 | QOF |
| Persons eligible, 25-49, attending cervical screening within target period (3.5 year coverage, %) 2021/22 | 60.3 | 71.7 | 69.0 | QOF |
| Persons eligible, 50-64, attending cervical screening within target period (5.5 year coverage, %) 2021/22 | 74.0 | 76.9 | 76.1 | QOF |
| Persons eligible, 50-70, screened for breast cancer in last 36 months (3 year coverage, %) 2021/22 | 59.8 | 47.2 | 62.3 | QOF |
| Persons eligible, 60-74, screened for bowel cancer in last 30 months (2.5 year coverage, %) 2021/22 | 69.2 | 72.8 | 70.3 | QOF |
| Number of emergency admissions with cancer (per 100,000) [2021/22] | 371.0 | 475.0 | 514.0 | QOF |
| Palliative/supportive care: QOF prevalence (all ages) [2021/22] | 0.5 | 0.5 | 0.5 | QOF |
| DSR for cancer (all ages) [2017 -2021] | 265.7 | 263.6 |  | ONS, calculated by CMBC |
| DSR for cancer (aged <65) [2017 -2021] | 60.9 | 58.9 |  | ONS, calculated by CMBC |
| **Mental Health** |  |  |  |  |
| Mental Health: QOF prevalence (all ages) [2021/22] | 1.1 | 1.1 | 1.0 | QOF |
| Depression: QOF incidence (18+) - new diagnosis [2021/22] | 1.6 | 1.8 | 1.5 | QOF |
| Dementia: QOF prevalence (all ages) [2021/22] | 0.8 | 0.7 | 0.7 | QOF |
| DSR for suicide (all ages) [2017-2021] | 11.5 | 13.5 |  | ONS, calculated by CMBC |
| **Respiratory Conditions** |  |  |  |  |
| COPD: QOF prevalence (all ages) [2021/22] | 1.7 | 2.2 | 1.9 | QOF |
| Asthma: QOF prevalence (all ages (6+)) [2021/22] | 7.0 | 7.4 | 6.5 | QOF |
| DSR for respiratory conditions (all ages) [2017-2021] | 147.4 | 132.3 |  | ONS, calculated by CMBC |
| DSR for respiratory conditions (aged <65) [2017-2021] | 22.7 | 15.6 |  | ONS, calculated by CMBC |
| DSR for chronic lower respiratory conditions (all ages) [2017-2021] | 59.4 | 62.0 |  | ONS, calculated by CMBC |
| DSR for chronic lower respiratory conditions (aged <65) [2017-2021] | 9.5 | 8.0 |  | ONS, calculated by CMBC |
| **Other** |  |  |  |  |
| Learning disability: QOF prevalence [2021/22] | 0.7 | 0.7 | 0.5 | QOF |
| Chronic Kidney Disease: QOF prevalence (18+) [2021/22] | 3.6 | 3.6 | 4.0 | QOF |
| Diabetes: QOF prevalence (17+) [2021/22] | 9.3 | 7.8 | 7.3 | QOF |
| Epilepsy: QOF prevalence (18+) [2021/22] | 1.0 | 1.0 | 0.8 | QOF |
| Rheumatoid Arthritis: QOF prevalence (16+) [2021/22] | 0.8 | 0.8 | 0.8 | QOF |
| DSR for accidents (all ages) [2017-2021] | 28.8 | 25.7 |  | ONS, calculated by CMBC |
| DSR for accidents (aged <65) [2017-2021] | 21.1 | 16.4 |  | ONS, calculated by CMBC |
| **Ageing Well** |  |  |  |  |
| Percentage aged 60+ claiming Personal Independence Payment (Jan 2023) | 10.0 | 8.5 | 6.5 | Stat-xplore DWP, GP practice populations 2022 |
| Percentage aged 65+ claiming Attendance Allowance (Jan 2023) | 12.0 | 11.4 | 12.0 | Stat-xplore DWP, GP practice populations 2022 |
| Percentage aged 65+ claiming pension credit (Nov 2022) | 13.3 | 11.0 | 11.2 | Stat-xplore DWP, GP practice populations 2022 |
| Osteoporosis: QOF prevalence (50+) [2021/22] | 0.9 | 0.6 | 0.8 | QOF |
| DSR Deaths for all causes (aged 65+) [2017-2021] | 4848.0 | 4429.2 |  | ONS, calculated by CMBC |
| DSR Deaths for accidents (aged 65+) [2017-2021] | 60.7 | 64.2 |  | ONS, calculated by CMBC |
| DSR Deaths from Dementia (aged 65+) [2017-2021] | 406.1 | 305.2 |  | ONS, calculated by CMBC |
| DSR Deaths for ischaemic heart disease (aged 65+) [2017-2021] | 529.6 | 485.1 |  | ONS, calculated by CMBC |
| DSR Deaths from cerebrovascular disease (aged 65+) [2017-2021] | 295.5 | 249.9 |  | ONS, calculated by CMBC |
| DSR Deaths from cardiovascular disease (aged 65+) [2017-2021] | 1192.5 | 1118.4 |  | ONS, calculated by CMBC |
| DSR Deaths for cancer (aged 65+) [2017-2021] | 1111.2 | 1108.7 |  | ONS, calculated by CMBC |
| DSR Deaths for respiratory disease (aged 65+) [2017-2021] | 661.9 | 613.6 |  | ONS, calculated by CMBC |
| DSR Deaths for chronic lower respiratory disease (aged 65+) [2017-2021] | 265.3 | 284.7 |  | ONS, calculated by CMBC |

Please contact the Public Health Intelligence team at [ph.intelligence@calderdale.gov.uk](mailto:ph.intelligence@calderdale.gov.uk) if you require this data in another format.