

A SUMMARY OVERVIEW OF THE TORQUAY LOCALITY

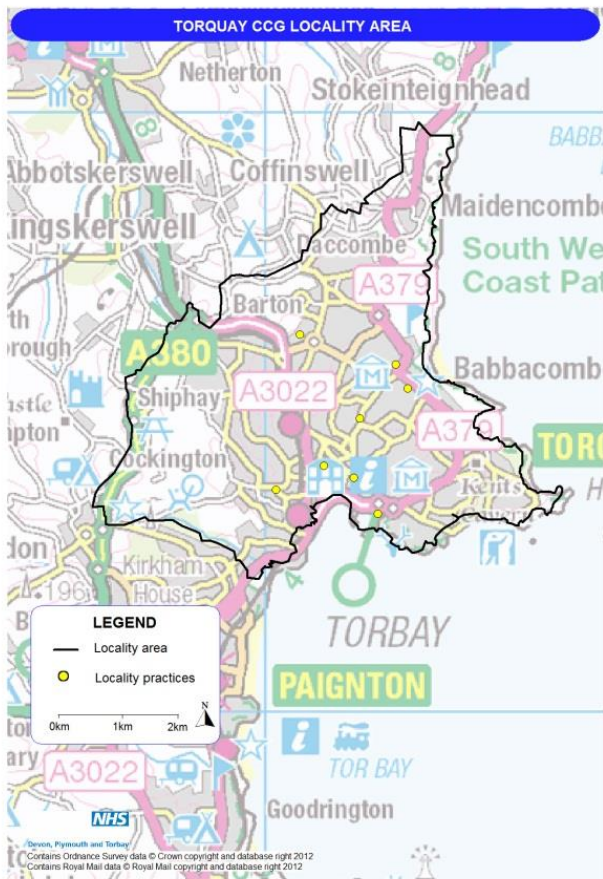
SOUTH DEVON AND TORBAY - 2013

This summary is part of the South Devon and Torbay Clinical Commissioning Group (CCG) Joint Strategic Needs Assessment (JSNA) and presents a summary of the registered population within the Torquay locality.

Overview: Torquay has high levels of deprivation, with large parts in the top 10% most deprived in England. Torquay experiences lower than average life expectancy, with a gap of around 8½ years between GP practices for females.

The Torquay locality takes in the official town boundary of Torquay.

Figure 1: Locality map



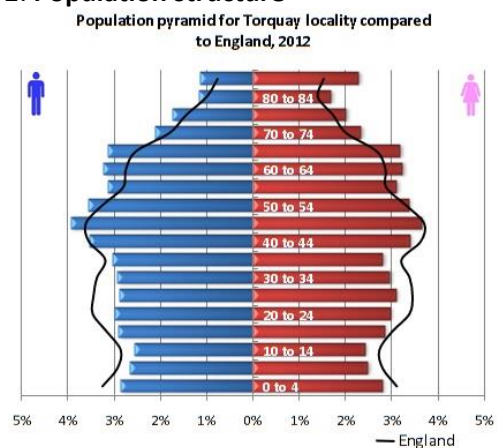
There are 9 GP practices in Torquay, serving a registered population of around 72,300.

Table 1: Population structure	Torquay locality		England
	Count	%	%
0 to 19	15,600	21.5%	23.8%
20 to 64	41,700	57.7%	59.3%
65 to 84	12,500	17.4%	14.6%
85+	2,500	3.4%	2.3%
Total	72,300		

Source: 2012 GP registered list, 2011 interim subnational population projections (ONS)

The population structure for Torquay is shown in figure 2 below. Where the solid bars are the Torquay population (by gender and 5 year age groups) and the black lines represent the England average.

Figure 2: Population structure

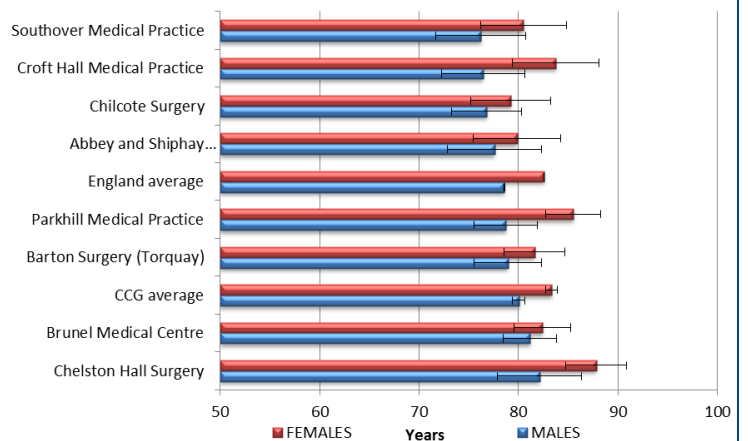


Source: 2012 GP registered list, 2011 interim subnational population projections (ONS)

Life expectancy at birth for the locality is generally lower than the CCG average (see figure 3 below). There is a gap of around 6 years for males, and around 8½ years for females between practices.

Figure 3: 2008-10 Life expectancy at birth by practice

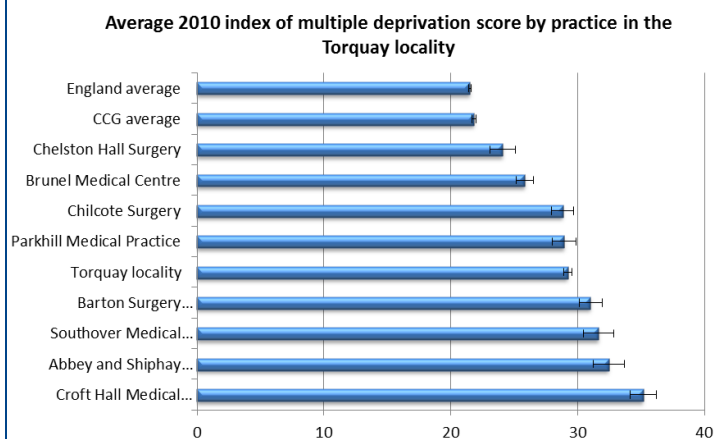
2008-10 life expectancy at birth by gender for the Torquay locality



Source: PCMD, GP registered list, information centre

Variations between practices in Torquay are just as pronounced for deprivation and benefit claimants.

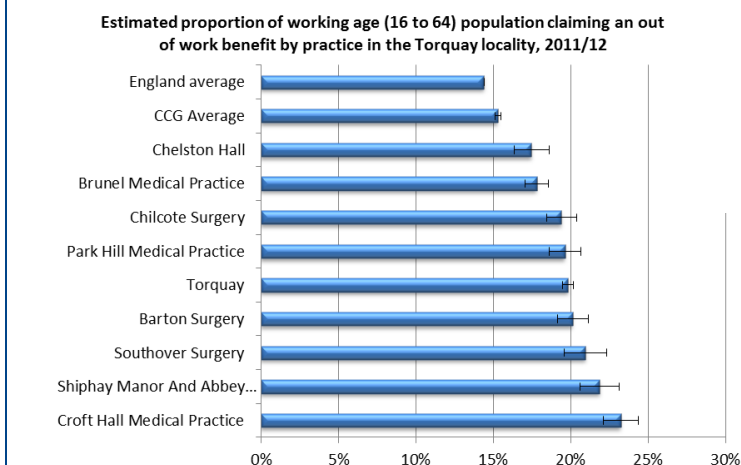
Figure 4: Average deprivation score per practice



Source: GP registered list, DCLG

The higher the score, the higher the levels of relative deprivation

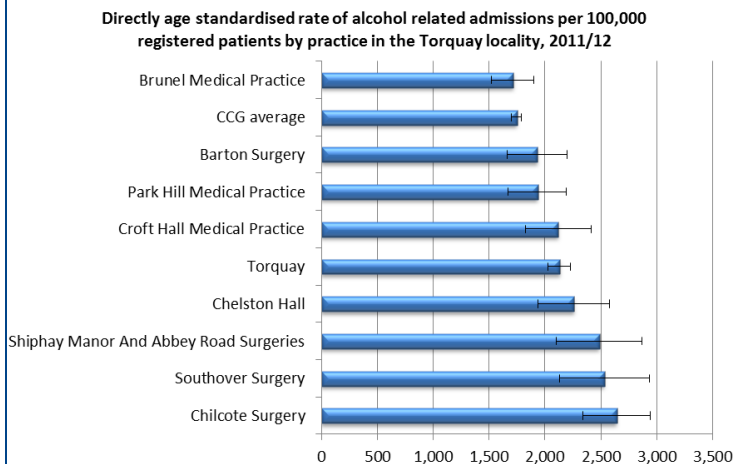
Figure 5: Out of work benefit claimants



Source: modelled from GP registered list, NOMIS

The effects of alcohol have been linked with poor productivity and economic performance, crime and inequalities as well as a burden on secondary care.

Figure 6: Alcohol related admissions to hospital

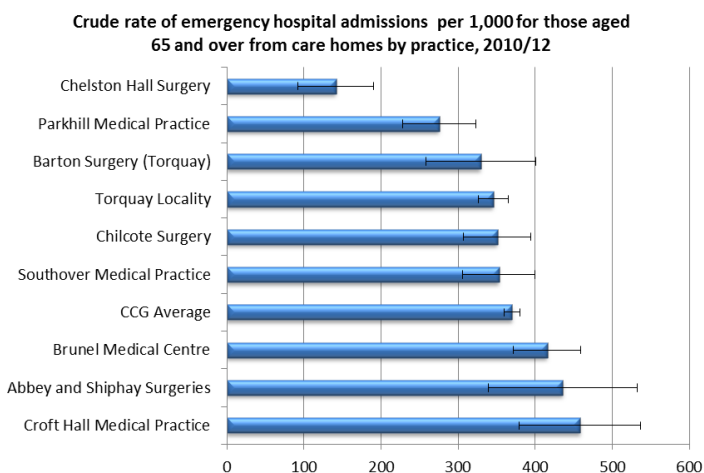


Source: GP registered list, hospital admissions

There is a noticeable difference in emergency admissions for patients living in care homes.

The crude rate, per 1,000 persons aged 65 and over living in a care home, is highest for those registered with Croft Hall. However, with relatively small numbers, there are relatively wide confidence intervals.

Figure 7: Emergency hospital admissions from care homes

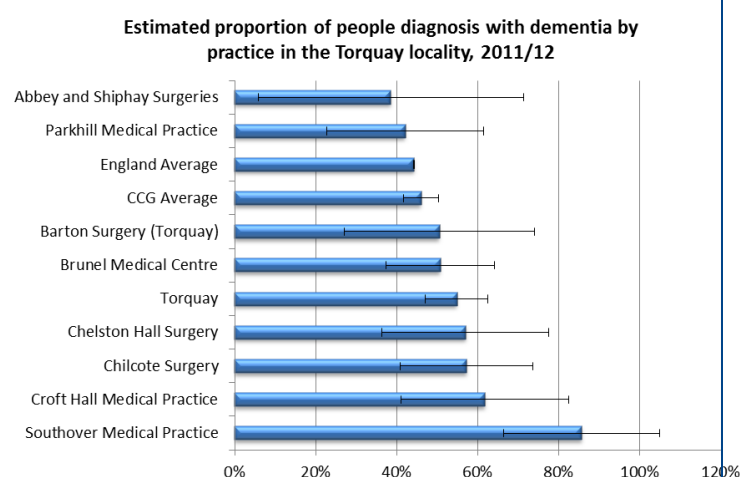


Source: GP registered list, hospital admissions

Dementia is more prevalent with age. With an ageing population; we would expect the number of people with dementia in the population to increase.

There are a lot fewer patients on a dementia disease register than we would expect given the demographic of the practice population. For example, at Southover Medical Practice, around 80% of the estimated population with dementia are on the dementia disease register.

Figure 8: Dementia diagnosis rates



Source: QOF, APHO