

Integrated Neighbourhood Team Population Profile

Cheam and South Sutton

How to use this document

The Cheam and South Sutton INT Population Profile forms part of [Sutton's Strategic Needs Assessment](#), building on the [Borough Profile](#) to provide a place-based overview of the community living in this part of the borough.

It's a tool for anyone working in the area to help guide decision-making and focus interventions to reduce inequalities. Some practical applications for how the data and insights in the profile can be used are below:

Understanding the population

- Including who lives in this part of the borough, and the characteristics and wider circumstances that influence their health and wellbeing. This can help tailor business plans to the specific needs of the communities in Cheam and South Sutton

Identifying vulnerabilities in specific communities

- Highlighting where additional interventions may be needed to reduce inequalities and improve health and wellbeing. This can help substantiate grant applications, demonstrating a clear understanding of the target population's strengths and challenges.

Planning joined-up and resilient services

- That are fit for the future, considering population projections and changing demographics.
- Incorporating the identified strengths and assets/ resources of the area.
- Highlighting good practice and learning across the borough,

Key highlights for Cheam and South Sutton



Population

- The population of Cheam and South Sutton is older than the Sutton average, with a higher percentage of the population aged over 60, and a gap in the percentage aged 24-39.
- This part of the borough has grown more slowly than elsewhere in Sutton over the last decade, and the population is projected to stagnate over the next 10 years.
- A higher percentage of residents are from White British and Asian/ Asian British ethnic groups than elsewhere in Sutton.



Place

- Residents, particularly in the south of the INT, have lower access to green spaces than elsewhere in Sutton.



Health and care

- Acceleration in obesity between Reception and Year 6 amongst children living in the INT is high
- Amongst people with long-term conditions, there are variations in outcomes by age, sex and ethnicity that could be targeted to reduce health inequalities
- Fewer people with diabetes have all eight care processes recorded in the INT than Sutton and SWL averages
- Smoking prevalence in the INT is high amongst people with asthma: a high impact group to target quitting initiatives.

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Cheam and South Sutton

Overview of Cheam and South Sutton INT



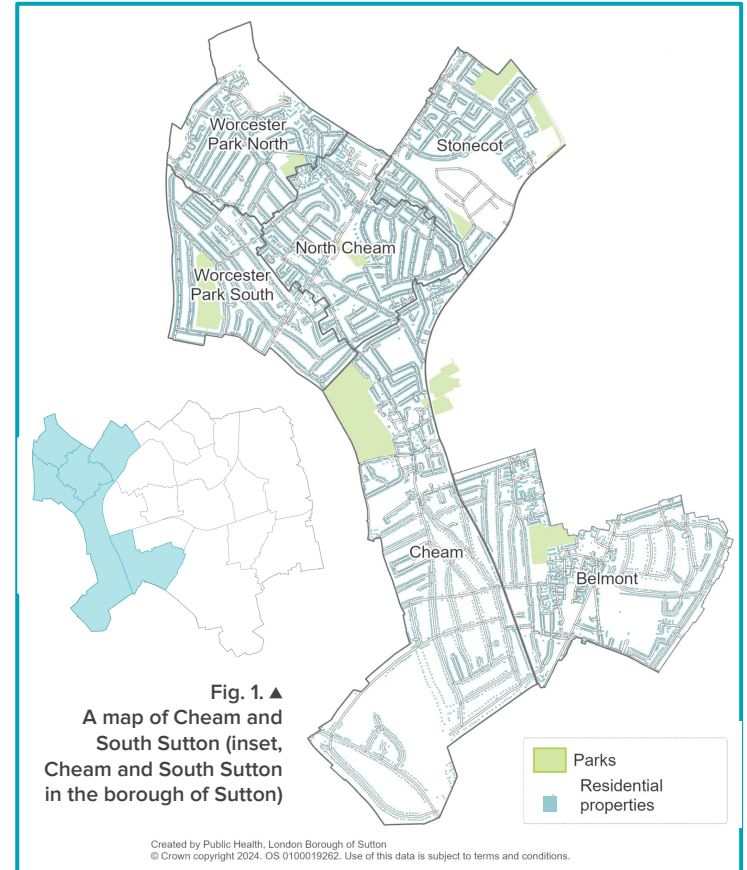
Cheam and South Sutton INT covers the west of the borough of Sutton, and is made up of six wards: Worcester Park North, Stonecot, North Cheam, Worcester Park South, Cheam and Belmont.



Just over [59,000 residents](#) live in Cheam and South Sutton INT, 22% of whom are under the age of 18, and 18% over 65.



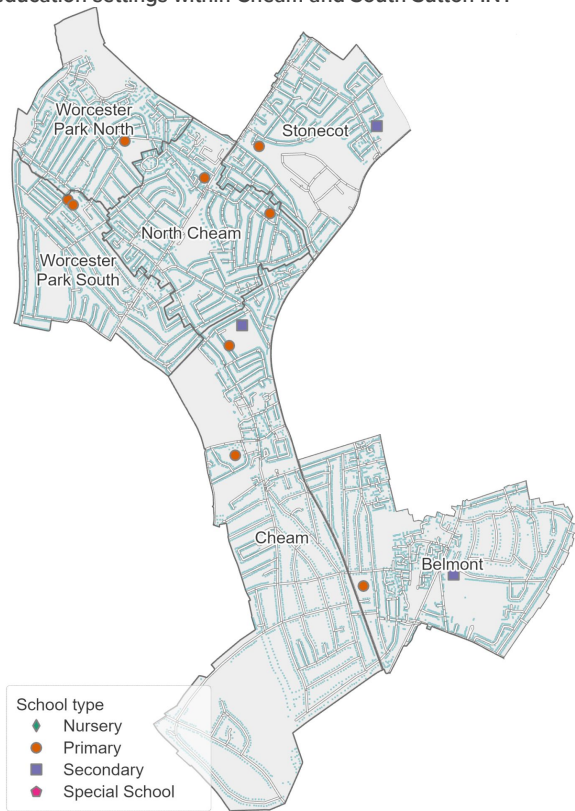
There are 12 parks within the INT area, including Cheam Park and Recreation Ground, Cuddington Park and Recreation Ground, Overton Recreation Ground, and Sutton Common Park



Assets in Cheam and South Sutton INT

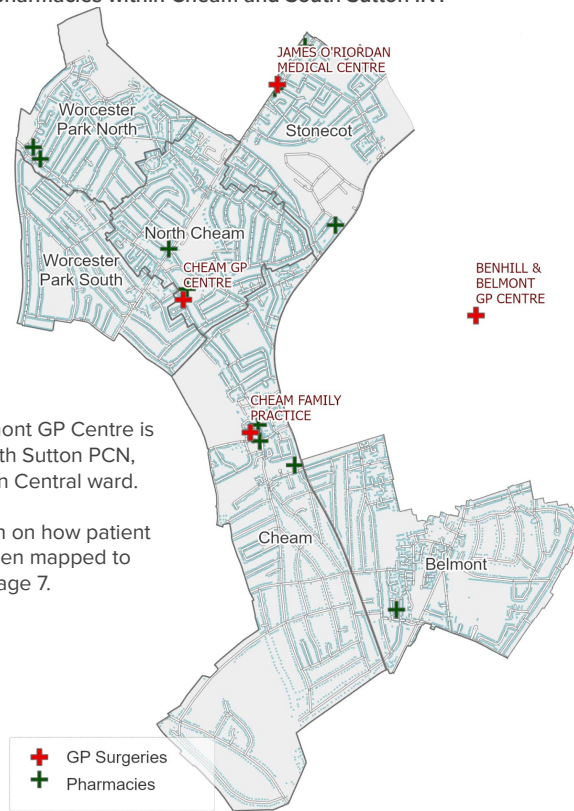
► Fig. 2.

A map of education settings within Cheam and South Sutton INT



► Fig. 3.

A map of GPs and pharmacies within Cheam and South Sutton INT



Note: Benhill & Belmont GP Centre is within Cheam & South Sutton PCN, and located in Sutton Central ward.

For more information on how patient populations have been mapped to wards, please see Page 7.

PCN patient population by ward

Patients do not map neatly to specific wards. GP practices are spread across the borough and registered patients are not limited by ward boundaries or catchment areas. An exercise was carried out to plot all registered patients who are resident within the borough to determine where the patients of each PCN live.

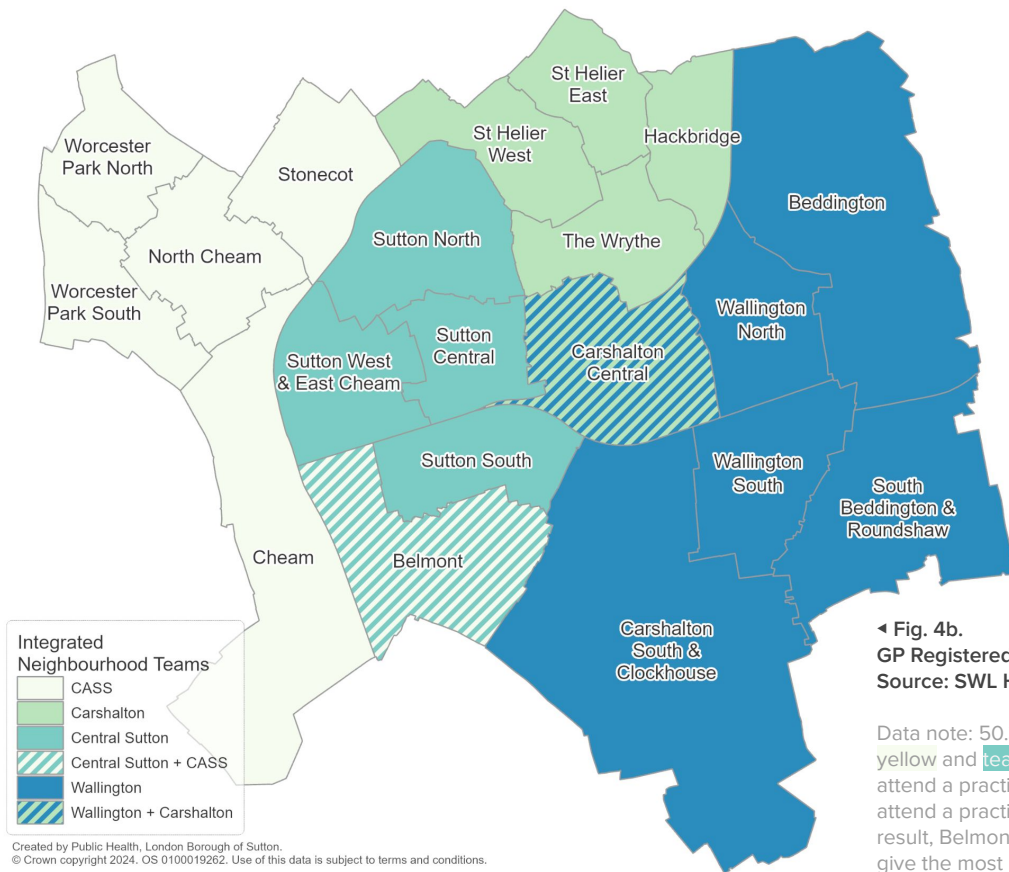
The tables below (Fig.4) show the patients for each PCN by their ward of residence within Sutton. This excludes all patients registered at a postcode outside of the borough. The red and orange coloured circles highlight the dominant PCN population within a ward. These dominant populations have been used to define which wards sit within an INT area (a map is on page 8). For Cheam and South Sutton INT, these wards are Belmont, Cheam, North Cheam, Stonecot, Worcester Park North and Worcester Park South.

Ward (2022)	PCN			
	CARSHALTON PCN	CENTRAL SUTTON PCN	CHEAM AND SOUTH SUTTON PCN	WALLINGTON PCN
Beddington	366 (3.2%)	40 (0.3%)	24 (0.2%)	11,094 (96.3%)
Belmont	334 (2.5%)	6,737 (50.3%)	5,214 (38.9%)	1,119 (8.3%)
Carshalton Central	6,087 (37.9%)	1,614 (10.1%)	508 (3.2%)	7,842 (48.9%)
Carshalton South & Clockhouse	627 (6.2%)	901 (8.9%)	537 (5.3%)	8,057 (79.6%)
Cheam	132 (1.4%)	2,544 (26.7%)	6,771 (71.1%)	70 (0.7%)
Hackbridge	8,055 (89.1%)	92 (1.0%)	42 (0.5%)	855 (9.5%)
North Cheam	139 (0.9%)	1,092 (7.0%)	14,402 (92.0%)	23 (0.1%)
South Beddington & Roundshaw	229 (2.2%)	37 (0.4%)	31 (0.3%)	10,003 (97.1%)
St Helier East	12,355 (93.5%)	206 (1.6%)	183 (1.4%)	469 (3.5%)
St Helier West	12,124 (81.9%)	1,435 (9.7%)	793 (5.4%)	449 (3.0%)

Ward (2022)	PCN			
	CARSHALTON PCN	CENTRAL SUTTON PCN	CHEAM AND SOUTH SUTTON PCN	WALLINGTON PCN
Stonecot	280 (4.4%)	874 (13.8%)	5,177 (81.5%)	25 (0.4%)
Sutton Central	3,570 (19.4%)	10,685 (58.0%)	3,610 (19.6%)	544 (3.0%)
Sutton North	3,010 (22.2%)	6,754 (49.8%)	3,603 (26.6%)	191 (1.4%)
Sutton South	624 (4.4%)	10,773 (76.4%)	1,524 (10.8%)	1,182 (8.4%)
Sutton West & East Cheam	409 (2.6%)	11,968 (74.7%)	3,527 (22.0%)	128 (0.8%)
The Wrythe	11,748 (87.7%)	468 (3.5%)	260 (1.9%)	923 (6.9%)
Wallington North	2,252 (17.4%)	101 (0.8%)	70 (0.5%)	10,539 (81.3%)
Wallington South	386 (3.0%)	121 (0.9%)	39 (0.3%)	12,331 (95.8%)
Worcester Park North	58 (1.4%)	63 (1.6%)	3,885 (96.6%)	15 (0.4%)
Worcester Park South	40 (0.7%)	292 (4.8%)	5,760 (94.4%)	10 (0.2%)

▲ Fig. 4a. GP Registered Patients by Ward. Source: SWL Health Insights team

PCN patient population by ward



◀ Fig. 4b.
GP Registered Patients by Ward.
Source: SWL Health Insights team

Data note: 50.3% of the population of Belmont (shown in yellow and teal) registered with a South West London GP attend a practice in Central Sutton PCN. A further 38.9% attend a practice in Cheam and South Sutton PCN. As a result, Belmont has been included in both INT profiles to give the most reflective insight into the population.

People

Cheam and South Sutton

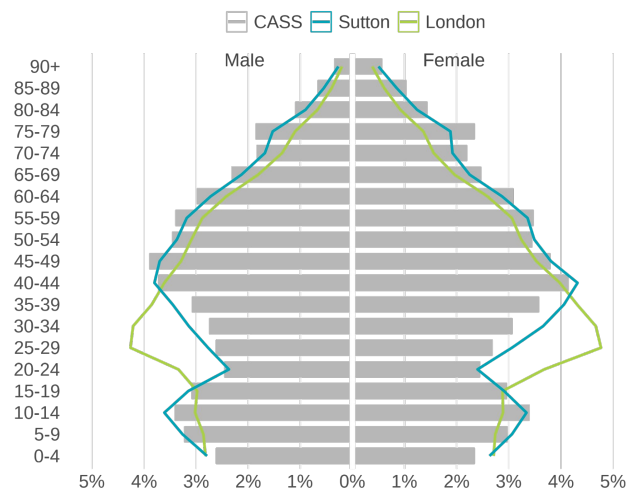
Population of Cheam and South Sutton INT

Resident population and projected growth

	2024	2029	2034
Sutton	214,862	215,795 (□ 0.4%)	217,617 (□ 1.3%)
Cheam and South Sutton INT	59,050	59,343 (□ 0.5%)	59,196 (□ 0.2%)

Resident population of children and young people aged 0-17 and projected growth

	2024	2029	2034
Sutton	48,819 (22.9%)	45,465 (□ 6.9%)	42,773 (□ 12.4%)
Cheam and South Sutton INT	12,942 (21.9%)	12,208 (□ 6.0%)	11,332 (□ 12.4%)



◀ Fig. 5. A population pyramid showing the percentage of the population by sex and five year age band in Cheam and South Sutton (CASS), compared to Sutton and London in 2024
Source: [Identified Capacity Projections, GLA, 2023](#)

Current population

- Fig. 5. shows the population of Cheam and South Sutton INT is older than the Sutton average, with a particularly high percentage of the population over the age of 60. There is a noticeable reduction in the percentage of young adults aged 24-39 compared to the borough average.

Population change

- In the last decade, Cheam and South Sutton INT's population has increased by 5.3%, growing at a slower rate compared to the 8.2% growth across the borough and 6.9% across London.
- The population of children and young people aged 0-17 has also grown at a slower rate, increasing by 4.8% in Cheam and South Sutton, compared to 8.1% across Sutton. Growth in the population of children and young people has been driven by migration, not an increase in birth rate.

Population projections

- Over the next decade the INT's population is predicted to remain broadly the same on average across all age groups, compared to a small increase across Sutton (1.3%) and slightly larger increase elsewhere in London (4.6%).
- The INT's population of children is projected to decline, in line with the rest of the borough. This is expected to be as a result of a continuing decline in the birth rate, and projected slowing of migration into the borough.

Ethnicity

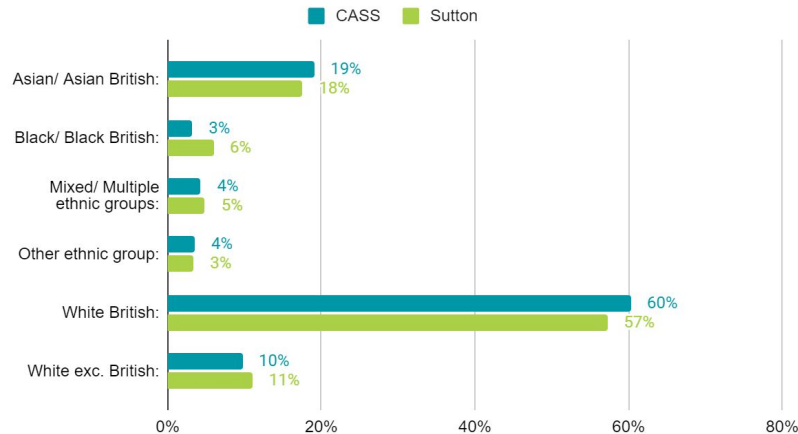
Sutton's population has become more ethnically diverse in the past decade. This change in the ethnic makeup of the borough has happened faster than previous estimates had predicted and as of the Census in 2021, 43% of the borough's population were from Asian, Black, Mixed/Multiple and White non-British ethnic backgrounds, compared to 2011 when the proportion was 27%.

Across the six wards in Cheam and South Sutton INT, [the population as of March 2021 was less ethnically diverse than the borough average](#), with 60% being White British, compared to 57% across Sutton. Figure 6 provides more detailed information by broad ethnic group, showing that Cheam and South Sutton INT has a slightly higher percentage of Asian/Asian British residents (19%, compared to 18%), and a lower percentage of people from Black/ Black British ethnic groups (3%, compared to 6% across the borough).

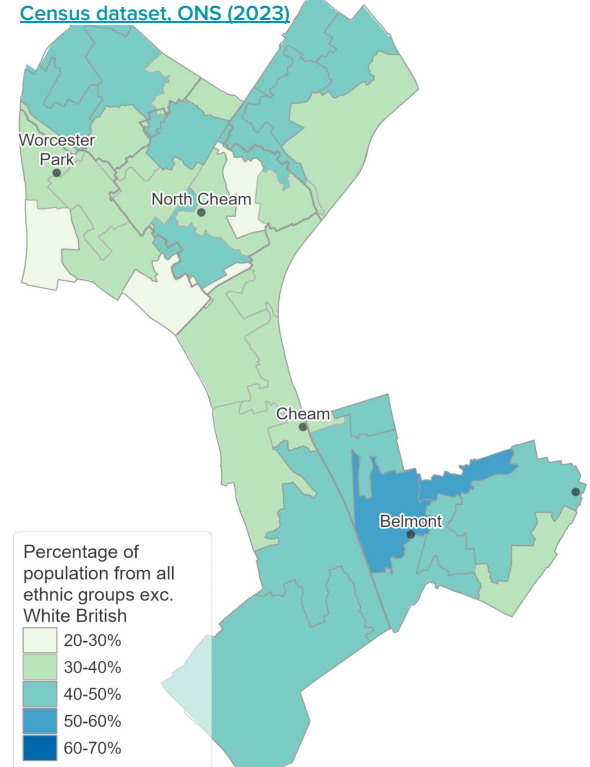
The level of ethnic diversity varies by neighbourhood, as shown in Figure 7. In parts of Belmont, up to 60% of residents are from ethnic groups excluding White British, (and largely Asian ethnic groups), whilst in parts of Worcester Park South, this figure drops to less than 30%.

More detail, by ethnic group and neighbourhood, is in Appendix 2.

▼ Fig. 6. Percentage of population by broad ethnic group. Source: [Ethnic Group Census dataset, ONS \(2023\)](#)



▼ Fig. 7. A map of Cheam and South Sutton INT, showing the percentage of residents from all ethnic groups excluding White British. Source: [Ethnic Group 2021 Census dataset, ONS \(2023\)](#)



Migration and English as a Second Language

Migrant Population

As of the 2021 Census, 419 people living in Cheam and South Sutton INT had migrated to the area from another country in the previous year. Cheam and South Sutton has a comparatively smaller migrant population (0.71%) than Sutton (0.80%). Fig. 8 shows that whilst England and Sutton have a comparable migrant population proportionally, London's is significantly higher.

Roma, Gypsy & Traveller Population

In Cheam and South Sutton INT, 82 residents are Roma (0.14% of the population, compared to 0.15% on average in Sutton), and 28 are Gypsy or Irish Traveller (0.05%, compared to 0.06% across Sutton).

English as an Additional Language

Over 80 languages are spoken in the borough. The percentage of people who speak English as a second language is lower in Sutton than elsewhere in London, but higher than across England (Fig. 9). The top five languages (excluding English) spoken in Sutton are Tamil, Polish, Urdu, Bulgarian and Romanian.

12.6% of Cheam and South Sutton INT's population didn't speak English as their first language, lower than across Sutton on average (13.8%). The top three languages are Tamil, 'other European languages**', and 'other South Asian languages***'.

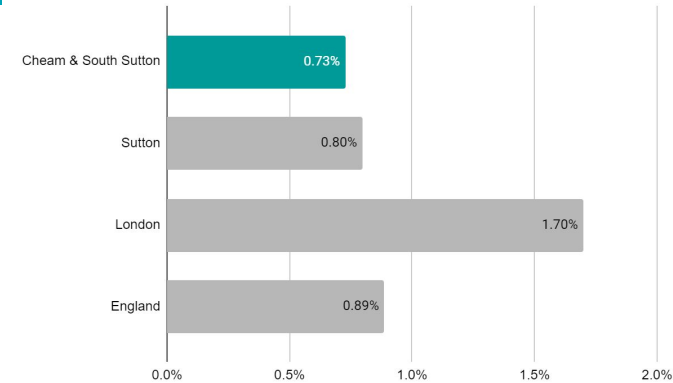
Residents with low or no English proficiency

There are 922 residents in Cheam and South Sutton who do not speak English or do not speak English well (1.7% of residents, compared to 1.9% across the borough). These residents are at increased risk of exclusion, and may need additional support to access services. Public data does not tell us what language these residents speak as their first language.

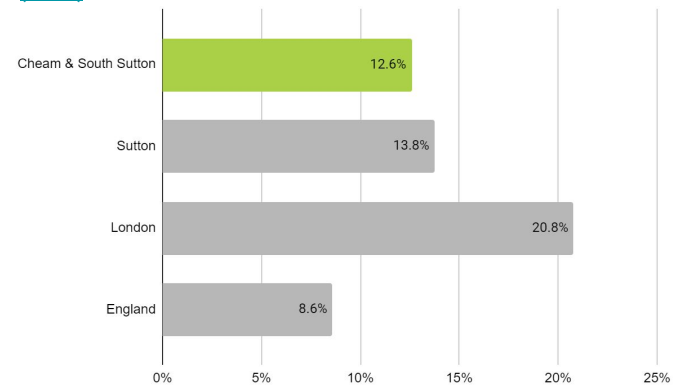
* Data note: Languages of EU member states (excluding French, Polish, Portuguese and Spanish which are counted separately).

** Data note: excluding Bengali, Gujarati, Panjabi, Tamil and Urdu, which are counted separately

▼ Fig. 8. Migrant population in Cheam and South Sutton, compared to Sutton, London and England averages. Source: [Migrant Indicator 2021 Census dataset, ONS \(2023\)](#)



▼ Fig. 9. Population for whom English is a second language in Cheam and South Sutton compared to Sutton, London and England averages. Source: [Household Language 2021 Census dataset, ONS \(2023\)](#)



Place

Cheam and South Sutton

Deprivation and poverty

Evidence shows that those living in the most deprived areas of England face the worst healthcare inequalities in relation to healthcare access, experience and outcomes.

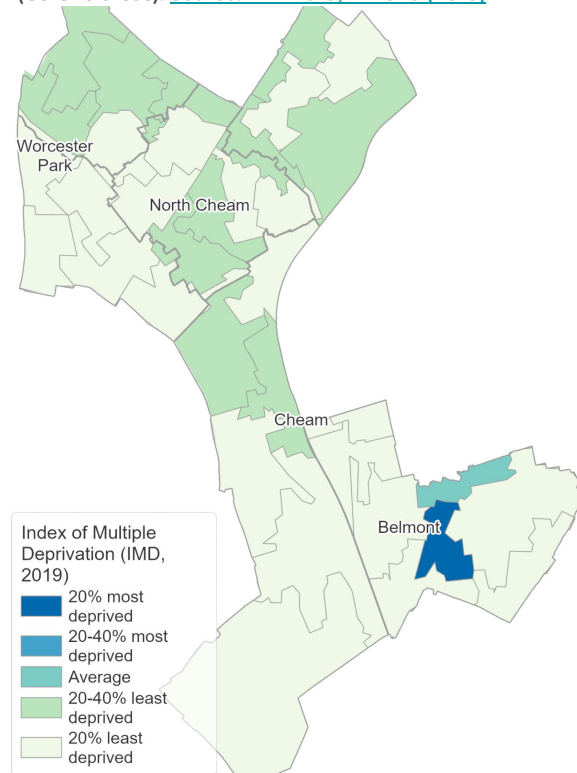
The [Index of Multiple Deprivation](#) (IMD) is the official measure of relative deprivation for small areas in England. The indices are based on 39 separate indicators, organised across seven distinct domains of deprivation.

Sutton is a relatively less deprived borough and based on the IMD (2019) is ranked 226th overall out of 317 local authorities in England (the 1st being most deprived). However, there are pockets of significant deprivation in the Sutton, and including in Cheam and South Sutton.

The map on the right (Fig. 10) shows these areas of deprivation in more detail (**the darker areas on the map**). One small area* in Belmont is in the 20% most deprived of all areas in England. Otherwise the areas in this INT has among the lowest levels of deprivation nationally, according to the Index of Multiple Deprivation. However, it is likely there are areas of inequalities masked by the Index, and although people are living side by side, their experience of education and employment, health and housing will be very different. This means that people in some parts of the INT maybe at more risk of living in hidden hardship.

Poverty causes ill physical and mental health, drives inequality in health outcomes, and, as seen in Sutton, increases use of health services. The effects of deprivation can be seen from early in childhood (e.g. poorer mental health), through to old age (e.g. lower life expectancy).

▼ Fig. 10. A map of Cheam and South Sutton INT, showing the most deprived 20% of all neighbourhoods in England (Core20 areas). [Source: IMD 2019, MHCLG \(2019\)](#)



* Lower layer super output areas or LSOAs

Low income and unemployment

Individuals living on a low income may face food and fuel poverty, debt, and limited social opportunities. These stresses can negatively impact relationships, and physical and mental well-being, and can contribute to feelings of stigma, isolation, and exclusion. The benefits system assists those with low incomes, however, it can be complicated to understand and navigate, meaning individuals may not receive all support they are entitled to.

Children and young people

- Fig. 11 shows the prevalence of children living in income deprived households, which is comparatively low, compared to elsewhere in Sutton.

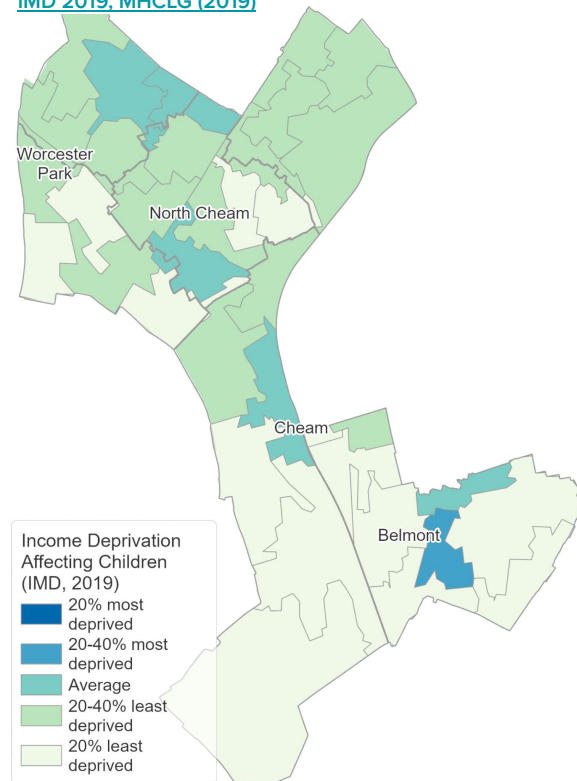
Working age adults

- In January 2024, [8.6% of residents aged 16-65 in Cheam and South Sutton INT were in receipt of Universal Credit](#), and therefore living on a low income, below both the Sutton (13.4%) and England (15.4%) averages. Within Cheam and South Sutton, residents of Stonecot are the highest claimants of Universal Credit with 12.3% of residents in receipt.
- During the pandemic, uptake of Universal Credit increased significantly across the country because of the impact Covid-19 had on the economy. Although the number of people receiving Universal Credit decreased through 2021, uptake in Cheam and South Sutton INT remains 81% higher than pre-pandemic (62% across Sutton), and has been relatively stable since April 2022. The increase has been seen across both those in and out of employment, unlike elsewhere in the borough which has been skewed towards those in employment and on low incomes.
- [Research](#) shows that 17% of working adults in London are in poverty. Additionally, nationally, 49% of people in families in receipt of Universal Credit are in poverty, highlighting that both work, and the level of benefits available are not always sufficient to meet people's day to day needs.
- In December 2023, [2.1% of all working age adults](#) in Cheam and South Sutton were in receipt of Out of Work benefits noticeably below than the Sutton (2.9%) and London (4.9%) averages.

Older adults

- As of August 2023, 718 residents within Cheam and South Sutton INT received [Pension Credit](#) (6.7% of over 65s, compared to 9.4% across Sutton). It is estimated that 30% of people eligible for Pension Credit do not claim it.

▼ Fig. 11. A map of Cheam and South Sutton INT, showing areas of income deprivation affecting children. [Source: IMD 2019, MHCLG \(2019\)](#)



Digital exclusion

Local picture on digital exclusion

In Cheam and South Sutton INT, approximately 2,900 residents (5% of the resident population) live in two neighbourhoods (one across Worcester Park and North Cheam wards and one in Belmont) estimated to be in the 20% of most at risk of digital exclusion in Sutton (Fig. 12).

Digital exclusion disproportionately affects certain demographic groups, but there is limited local data to show who is most at risk. **This data has been created locally to fill a gap in publicly available data. It takes [demographic characteristics identified by the NHS](#) that can increase a person's risk of being digitally excluded, and highlights the places in the borough with the highest percentages of people who fall into these categories.** It is intended to give an indication of where in the borough may be more vulnerable to digital exclusion to help services target support to residents, rather than be a definitive indicator. More detail is in Appendix 3.

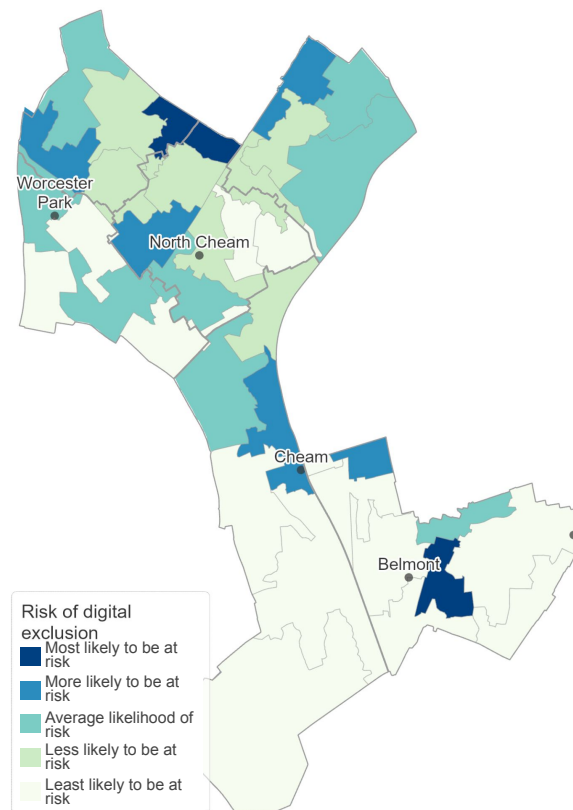
Not having the necessary digital skills and access to technology, often referred to as 'digital exclusion', can significantly affect a person's life.

Digitally excluded residents may:

- Have limited access to connect to the internet and go online
- Have limited skills to use the internet and online services
- Have low confidence to use the internet, fearing online crime or unsure where to start
- Not have the motivation to use the internet to access services

This can impact their ability to apply for jobs, access training opportunities, engage with public services and buy items for the best price in today's online world. It can therefore increase the risk of health inequalities.

▼ Fig. 12. A map of Cheam and South Sutton INT, the



Housing

Cheam and South Sutton INT



There are **21,990 households** in Cheam and South Sutton INT with at least one usual resident

5,374 people live on their own (22% of the population, below the Sutton (27%), and England averages (30%))

Source: [Household composition 2021 Census dataset, ONS \(2022\)](#)



16,607 households own their home either outright or with a mortgage (76%, compared to 64% in Sutton and 61% in England)

1,335 households rent from social landlords (6%, compared to 14% in Sutton, and 17% in England)

Source: [Household tenure 2021 Census dataset, ONS \(2023\)](#)



2,711 people over 65 live on their own (11% of households, comparable to elsewhere in Sutton)



2,098 households include lone parents (9% of households, below the 12% in Sutton)

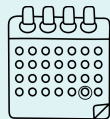
Source: [Household composition 2021 Census dataset, ONS \(2022\)](#)

London Borough of Sutton



Across the borough*, **200 households were homeless or threatened with homelessness** between July and September 2023 (down 9.5% compared to the same period in 2022). Black African & Black Caribbean groups are disproportionately likely to be homeless (16% of the homeless population in Sutton, compared to just 6% of the borough's population)

Source: [Tables on homelessness, DLUHC \(2024\)](#)



1,054 households in Sutton* were in emergency and temporary accommodation (EA and TA) placements as of February 2024, with 2,427 people (an increase of 22.4% since February 2023.).

70% of households include children, with 1,365 children living in EA and TA (up 19.5% on 2023)

Source: Data from Encompass



Between October and December 2023, there were **9 rough sleepers** in Sutton*

4 of these people were new rough sleepers (with no second night out), 4 were intermittent rough sleepers and 1 was sleeping rough for an unknown length

Source: [Rough sleeping in London, GLA \(2024\)](#)

* Data is not available for smaller areas

Health and Care

Cheam and South Sutton

Health inequalities

The health and wellbeing of residents of Cheam and South Sutton INT at different stages across the life course is shown below. These indicators have been chosen to align with the NHS' Core20PLUS5 programmes for [adults](#) (and South West London's 'Vital 5' - the five leading causes of poor health in the area) and [children](#) to **identify residents in Cheam and South Sutton at greater risk of poor health.**



[5.6% of children aged 6+ have an asthma diagnosis in Cheam and South Sutton.](#) This is lower than the national (6.5%) and borough (6.0%) averages, but similar to SWL (4.9%)



It is estimated that [14,762 residents](#) in Cheam and South Sutton INT will experience a [mental health problem](#) each year



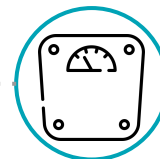
[8.5% of patients aged 18 or over registered with Cheam and South Sutton PCN GPs are obese](#), below the England average (11.4%)



[More adults are physically inactive in the INT than the England average.](#) 9,532 adults do not meet recommended activity levels: 26.9% of adults, 4.6% higher than nationally



[40% of residents](#) in Cheam and South Sutton INT are in South West London ICS' target population (Core20 + 5) for reducing health inequalities (compared to 50% across Sutton)



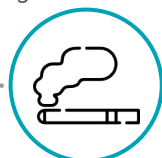
[There is large variation in the percentage of children aged 10-11 years are overweight/obese](#), ranging from 21.5% in Worcester Park, to 12.3% in Cheam.



[Emergency hospital admissions for intentional self-harm are 35% lower than the national average in Cheam and South Sutton.](#)



[Hospital admissions for alcohol related conditions](#) are 34% lower in Cheam and South Sutton than the national average, with rates uniformly low across the INT



[9.7% of people over the age of 16 smoke in Cheam and South Sutton INT](#), below both the Sutton (12.6%), SWL (13.1%) and England (13.6%) averages.



4,549 residents registered with a GP have an electronic frailty index (eFI) score indicating [moderate or severe frailty](#), [8% of the population](#) (non-aged standardised), slightly above the Sutton average of 7%



[Preventable mortality in Cheam and South Sutton is around 15% lower than the Sutton average](#), and 32% lower than the England average

Childhood obesity

Nationally, nearly a third of children aged 2 to 15 are overweight or obese with children becoming obese at earlier ages and staying obese for longer. Evidence suggests that children who are obese continue to struggle with obesity as an adult. This puts them at a higher risk of developing serious long-term health conditions like type 2 diabetes, hypertension, and cardiovascular disease as well as living with conditions such as depression. These conditions not only reduce life expectancy but also impact quality of life. The risk of obesity is often passed down to future generations, with children of obese parents more likely to face obesity themselves. The rates of overweight and obesity among children are highest in the most deprived areas, both locally and nationally.

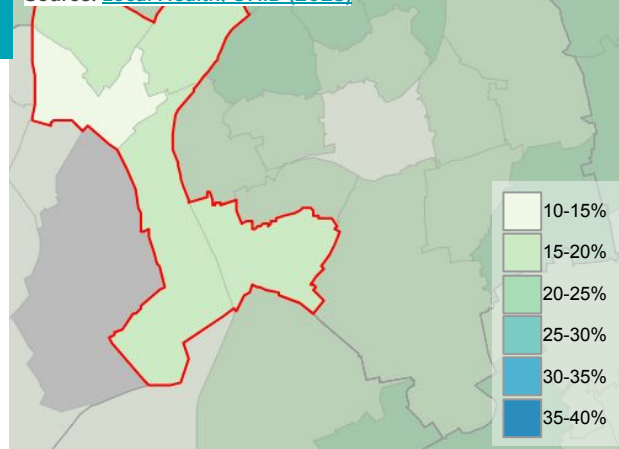
As of 2022/23 [a lower percentage of children are overweight or obese](#) in Sutton compared to the national and regional averages. 16.9% of Reception-aged children are overweight or obese (compared to 20.0% across England), increasing with age to 31.1% at Year 6 (compared to 36.6% across England).

Among Reception-aged children in Cheam and South Sutton INT (Fig. 13), the percentage of children who are overweight or obese varies from 10.7% of 4 to 5 year olds in the old Nonsuch ward (now Worcester Park South and North Cheam wards), to a high of 18.3% in the old Stonecot ward (now Stonecot and North Cheam wards). All areas are below the national average.

By Year 6, there has been an acceleration in the percentage of children who are overweight or obese, with 37.6% of children aged 10 or 11 falling into this category in the old Worcester Park ward (now Worcester Park North), above the national average. At least a third of children in all wards within the INT are obese by 10 or 11 years old, bar Cheam, which has the lowest rate of overweight or obese children in the borough (Fig. 14).

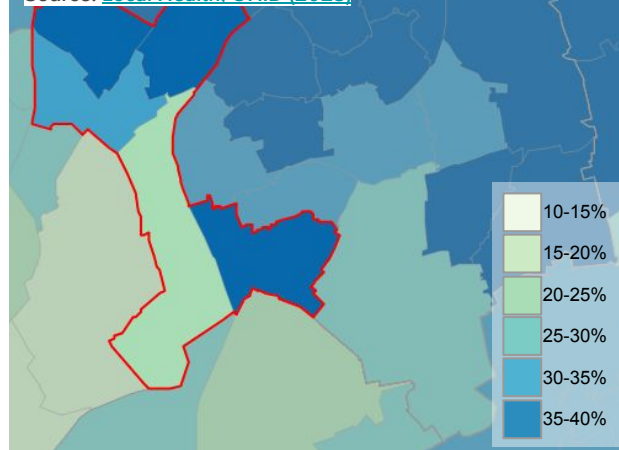
▼ Fig. 13. Prevalence of overweight and obesity at 4-5 years
3 years combined (19/20-21/22).

Source: [Local Health, OHID \(2023\)](#)



▼ Fig. 14. Prevalence of overweight and obesity at 10-11 years
3 years combined (19/20-21/22).

Source: [Local Health, OHID \(2023\)](#)



Children and young people's mental health

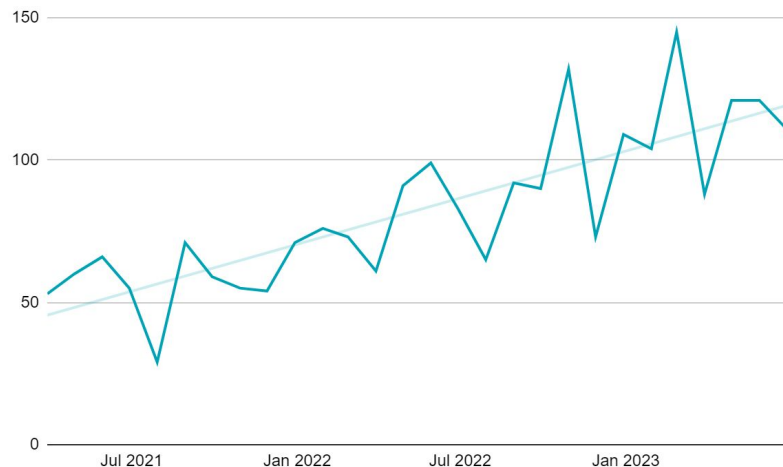
The rate of referrals to Children and Adolescent Mental Health Services (CAMHS) for children and young people living in Cheam and South Sutton between April 2021 and July 2023 is 1,779 per 10,000. This is below the Sutton average (2,095 per 10,000), but above the South West London average (1,560 per 10,000). Rates have increased year on year for the past three financial years. Between April 2021 and July 2023, the number of monthly referrals being made for children and young people in the INT, has more than doubled (Fig. 15.)

In Cheam and South Sutton, between April 2021 and July 2023, more referrals for CAMHS came from the north of the INT (Fig. 16) and were disproportionately likely for the following demographic groups (following a similar pattern to elsewhere in Sutton and SWL):

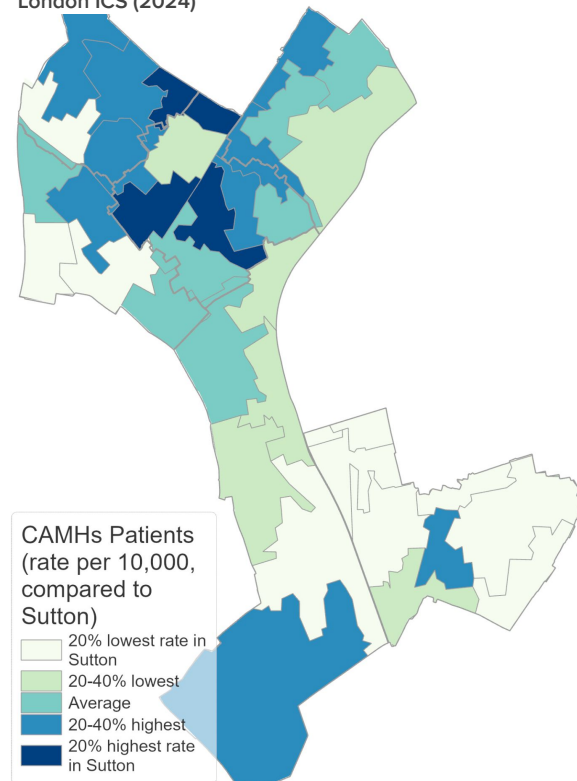
- White British children and young people, accounting for 62.8% of referrals
- Young people aged 12-18, accounting for 75.6% of referrals, with a particular peak at 15.
- Girls, accounting for 60.5% of referrals

This suggests an area of focus could be on ensuring equitable access to mental health support for children from Asian, Black, Mixed/ Multiple and Other ethnic groups, boys, and increasing prevention activities for younger children.

▼ Fig. 15. Number of referrals for CAMHS for children and young people living in Cheam and South Sutton INT. Source: South West London ICS (2024)



▼ Fig. 16. The rate of CAMHS patients (per 10,000), shown compared to elsewhere in Sutton. Source: South West London ICS (2024)



Green spaces and physical activity

People who exercise regularly have a lower risk of developing illnesses such as coronary heart disease, stroke, type 2 diabetes and some forms of cancer. Physical activity can also improve self-esteem, mood, sleep quality and energy levels as well as reducing the risk of stress, clinical depression, dementia and Alzheimer's disease.

[17.1% of adults in Sutton were physically inactive in 2022/23](#). This is significantly better than England (22.6%) and London (23.7%). Assuming a similar proportion of Cheam and South Sutton INT's population are physically inactive, 7,765 adults are estimated to fall into this group.

71% of households in Cheam and South Sutton INT are within a 5 minute walk of a park (lower than the borough average of 79%), as shown by Fig. 17, with particularly low levels of green space in the south, in parts of Cheam and Belmont.

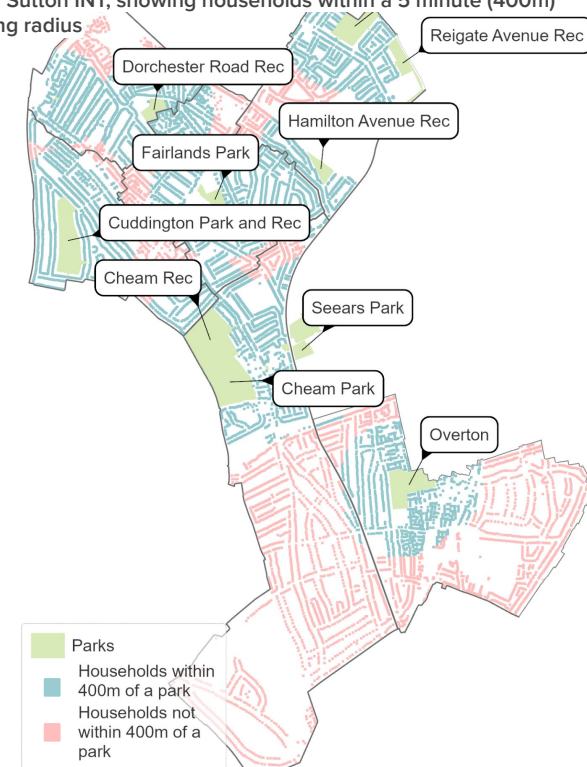
The profile for physical inactivity (2022/23) indicates that nationally:

- Females were more likely to be inactive than males (39%, compared to 34% of males)
- The percentage of population that are physically inactive increases with age: among 16-34 year olds, 30% are physically inactive, rising to 57% in people aged 75+
- Among people with a disability, physical inactivity rose to 52%
- People in lower socio-economic groups are less likely to be active (47% among people in routine occupations or long-term unemployment, compared to 27% at among people in managerial, administrative and professional occupations)

More information is in the [Annual Public Health Report 2023/24](#), which focused on physical activity.

In Cheam and South Sutton PCN, [8.5% of patients aged 18 and over have a BMI greater than or equal to 30](#) (as of 2022/23). Obesity and poor diet are linked with type 2 diabetes, high blood pressure, high cholesterol and increased risk of respiratory, musculoskeletal and liver diseases. Obese people are also at increased risk of certain cancers.

▼ Fig. 17. A map of parks and green spaces within Cheam and South Sutton INT, showing households within a 5 minute (400m) walking radius



Tobacco and e-cigarette use

Tobacco (adults)

In Sutton, as of 2021/22, [12.8% of adults were current smokers](#). This is below the England (13.6%) and London averages (14.9%). The percentage of smokers is declining, having fallen from 17.7% in 2013/2014. Applying this figure to Cheam and South Sutton INT, there are an estimated 5,713 current smokers within the area.

Fig. 18 shows that the percentage of active smokers within the INT has decreased from 2019 (15.4%) to 2023 (9.7%), according to the responses received as part of the GP Patient Survey.

Vaping (adults)

Vaping prevalence in England in 2021 was between 6.9% and 71%, depending on the survey, which equates to between 3.1 and 3.2 million adults who vape. Applying this figure to Cheam and South Sutton INT, there are an estimated 3,124 adults using a vape in the area.

Tobacco (young people):

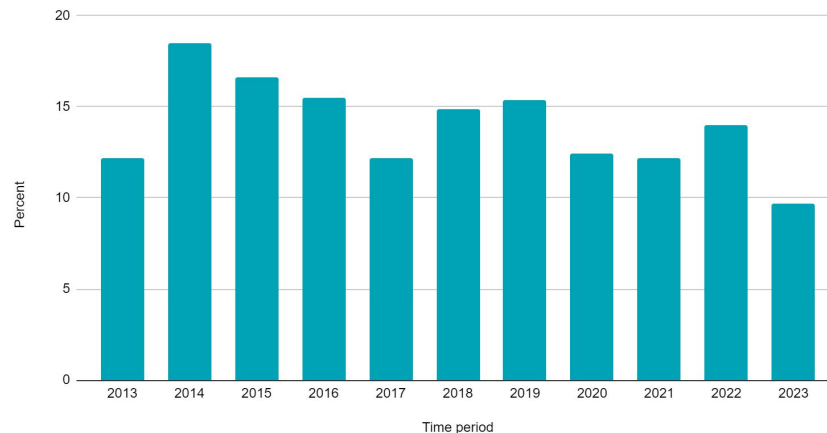
[In England](#) in 2021, 12% of pupils between the age of 11-15 have ever smoked, 3% are current smokers, and 1% are regular smokers. There has been a steady decline since 1996, when 49% of pupils had smoked at least once. Applying this 12% to Cheam and South Sutton INT, 407 young people have tried smoking.

Vaping (young people):

[In England](#) in 2021, in children aged 11-15 e-cigarette use (vaping) has increased to 9%, up from 6% in 2018 and around 1 in 5 (21%) 15-year old girls were classified as current e-cigarette users. Applying this to Cheam and South Sutton INT would mean 305 young people vape.

▼ Fig. 18: Percentage of adults who were current smokers, 2013-2022. Source: [Local Tobacco Control Profiles, OHID \(2023\)](#)

Active Smokers in CASS INT per year (Percentage of responses to GP Patient Survey)



Data note: The General Practice Patient Survey has been used as the prevalence indicator to allow INT specific profiles of current smokers to be viewed. Other smoking prevalence indicators such as the Annual Population Survey do not show prevalence at the same level of granularity.

Loneliness

National and local picture on loneliness

Since the Covid pandemic, the ONS has tracked the percentage of [adults reporting feeling lonely](#) always, often or some of the time. Over the last four years, across Great Britain, it has been on an upward trend. Although there is limited local data to help us understand the picture in Sutton, the map on the right (Fig. 19) highlights neighbourhoods in the INT where the risk of loneliness may be higher, based on the demographics of residents living there. The area in **dark blue** in Belmont, is estimated to be the 20% most at risk in Sutton, and therefore residents may benefit from opportunities to increase their social connections.

This data has been created to fill a gap in publicly available data. Ten indicators have been identified which can increase a person's risk of loneliness, using the [Campaign to End Loneliness](#)' summary of risk factors. **It is intended to give an indication of where in the borough may be more vulnerable to loneliness, rather than be a definitive indicator, to help services target support to residents.** More information on how risk has been calculated is in Appendix 4.

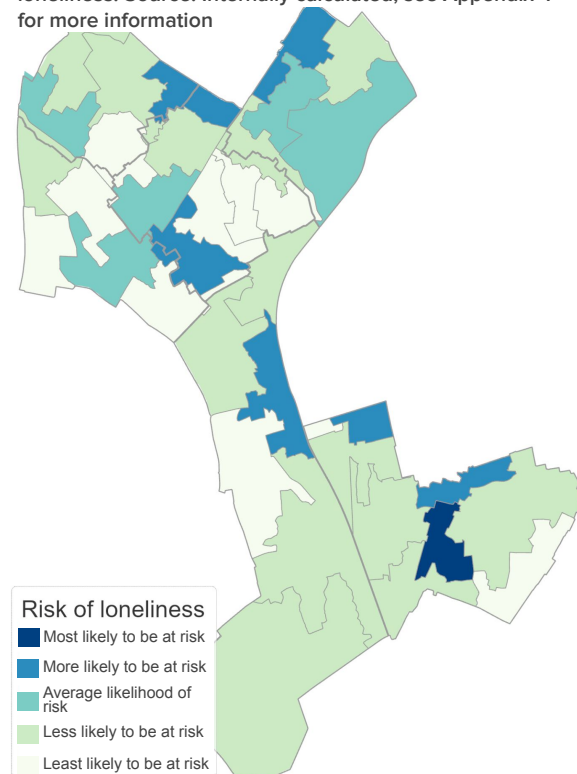
Loneliness occurs when people [lack the social connections they need](#). It can make them feel isolated and disconnected.

Although everyone can feel lonely, prolonged or intense loneliness [can harm our health and wellbeing](#). This may result in:

- Reduced self-confidence
- Poor sleep quality, and
- Increased risk of a range of conditions including; depression and/or anxiety, high blood pressure and stress levels (and an increased risk of stroke and cardiovascular disease), dementia and early mortality.

Loneliness can also affect our education and employment, with loneliness in children linked to lower educational attainment, and less motivation at work for adults. It has been estimated that severe loneliness costs someone around £10,000 per year due to its combined impact on their health, wellbeing and work.

▼ Fig. 19. A map of Cheam and South Sutton INT, showing the neighbourhoods most at risk of residents experiencing loneliness. Source: Internally calculated, see Appendix 4 for more information

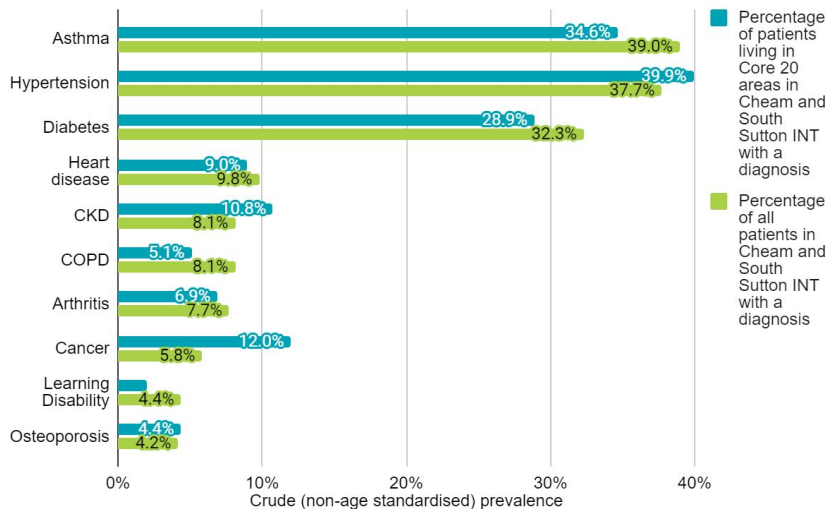


Health inequalities and long term conditions

23,027 residents fall into South West London ICS' target population (Core 20+5) for reducing health inequalities in Cheam and South Sutton INT (40.1% of residents, compared to 49.7% across Sutton). Fig.20 shows where these residents live within the INT area. People in this cohort may be at risk of poorer health because of;

- Behavioural/ lifestyle factors (i.e. are heavy drinkers, obese or a smoker),
- A pre-existing condition (high blood pressure or a mental health condition), or
- Living in an area within the 20% most deprived nationally (a 'Core 20 area').

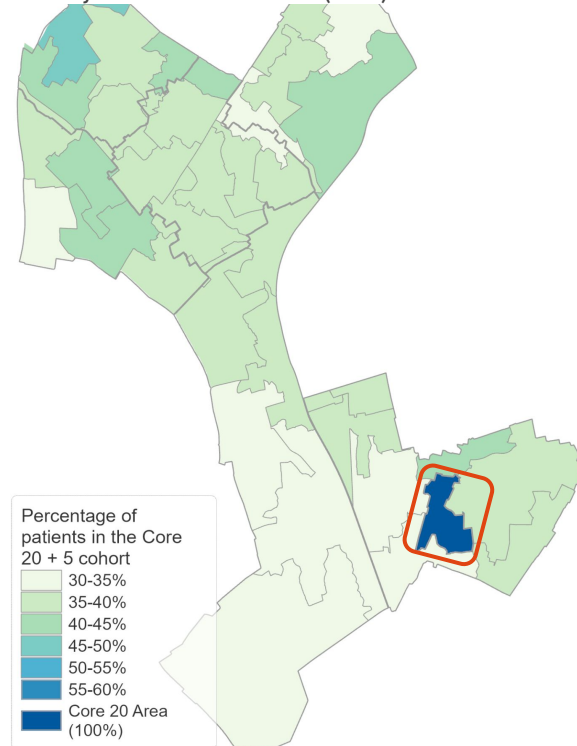
Although not an indicator of absolute poor health, Fig. 20 can help target services and initiatives to reduce health inequalities, for example focusing on the neighbourhood highlighted in Belmont, with the highest percentage of patients in the cohort. Fig. 21 shows the ten conditions with the highest prevalence (non-age standardised) in Cheam and South Sutton INT, comparing prevalence among all residents, to those living in the 20% most deprived areas, highlighting the health inequalities that exist in the INT.



◀ Fig. 21. Long-term conditions with the highest prevalence amongst patients in Cheam and South Sutton INT, comparing patients living within Core 20 areas, and the average across all other areas in the INT. Source: South West London ICS (2024).

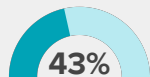
Data note: this data source uses a wider definition for conditions (e.g. not just patients on the QOF register), and therefore numbers may be higher than reported elsewhere in this pack. This data was included to highlight the health inequalities experienced within the INT.

▼ Fig. 20. A map of Cheam and South Sutton INT, showing the percentage of patients who are in South West London's target cohort to reduce health inequalities, as of January 2024. Source: SWL ICS (2024)



Health inequalities and LTCs: diabetes care processes

3,015 Sutton residents living in Cheam and South Sutton (CASS) INT have a diabetes diagnosis* as of March 2024 (a crude prevalence of 510.6 per 10,000, compared to 574.7 per 10,000 in Sutton). Prevalence is increasing over time. Complications of diabetes are not inevitable. The NHS has identified [interventions](#) which have a high impact in preventing or delaying complication, including '[care processes](#)'.



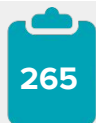
Completed all eight primary care processes (2023/24) ●**

- Care process completion in Cheam and South Sutton is below both the Sutton and South West London average. Recording has improved in the past three financial years. Completion ranges from 25.1% to 52.5% (for all Sutton residents) among Cheam and South Sutton PCN surgeries. This suggests there could be potential for practices to explore what works well elsewhere, and that there are opportunities across the board in Sutton to improve completion rates.



Completed a urine albumin test - the lowest recorded care process (2023/24)

- It is unclear why this care process has such low completion rates, but the issue is not unique to the INT and is reflected across SWL and [nationally](#). Better understanding of barriers to completion may be beneficial. Non-completion increases the risk of [early kidney disease being missed](#), highlighting the need for improvement in this area.



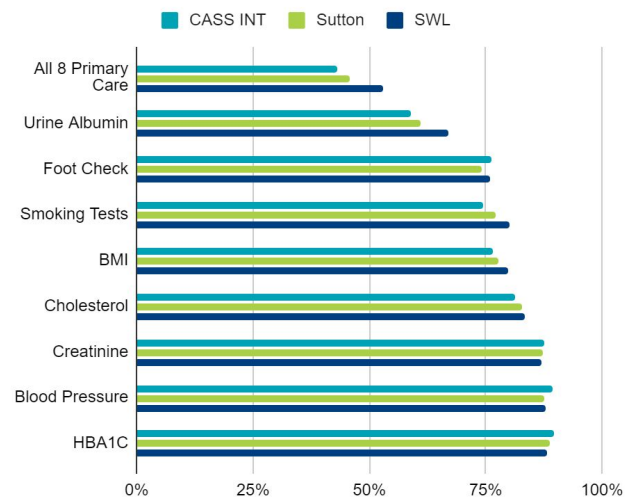
People were newly diagnosed in 2023/24

- These people may need additional support navigate their diagnosis, and manage their condition well. This should include a referral to a diabetes education programme.

A population health approach to improving outcomes

- To improve uptake, and help reduce ethnic, age and socio-economic inequalities, targeted initiatives to increase completion could focus on:
 - People aged 20-39, who were least likely to have all care processes recorded (28.6%) (in contrast to those aged 60-79 (47.9%), who were most likely to receive all care processes);
 - People from White ethnic groups (41.3%) and Black ethnic groups (41.9%), who were least likely to have all care processes recorded in 2023/24 (versus 46.0% of people from Asian ethnic groups);
 - Residents in Core20 areas (44.7% have all care processes completed, versus 43.0% elsewhere).
- This suggests practices could benefit from systematically identifying patients who fall into these demographic groups to take a population health approach to improving diabetes care process completion, with the view of improving outcomes locally.

▼ Fig. 22. CASS INT residents completing care processes, compared to Sutton and London in 2023/24

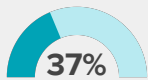


Source: South West London ICS - Long Term Conditions Monitoring Dashboard, Diabetes Care Processes (2024) * Type 1 and 2, and on the [QOF register](#)

** ● = below the Sutton average. Unless specified, data on this page looks at the resident population of the INT (pg. 7), not registered patient population of the PCN.

Health inequalities and LTCs: diabetes treatment targets

3,015 Sutton residents living in Cheam and South Sutton (CASS) INT have a diabetes diagnosis* as of March 2024. Prevalence is increasing over time. Complications of diabetes are not inevitable. Keeping blood sugar, blood pressure and cholesterol under control reduces the risk of complications developing. These make the three diabetes treatment targets, and are a high impact [intervention](#) identified by the NHS. [Evidence](#) shows that people who achieve all treatment targets over the long term have a longer life expectancy. Achievement of all targets also reduces costs to primary care by around £1,000 per year, per patient. An exploration of treatment target achievement in Cheam and South Sutton INT is below, and shown compared to Sutton and South West London in Fig. 23.



Met all treatment targets in 2023/24 ●**

- The percentage of residents meeting their treatment targets in Cheam and South Sutton is slightly above the Sutton and South West London averages. Target achievement in 2023/24 was higher than 2022/23. There is variation in the percentage of patients achieving treatment targets by surgery in the PCN, ranging from 32.7% to 40.7% (for all Sutton residents). Further analysis may be beneficial to identify causes of this disparity, and help identify strategies to address it.



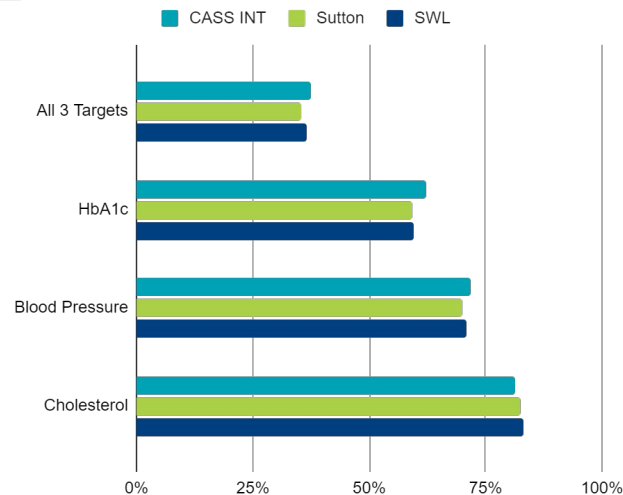
HbA1c was the target most missed in 2023/24

- Within the INT, HbA1c was the target most missed [increasing the risk of foot/ eye damage, heart attack and stroke](#), this finding is consistent with elsewhere in Sutton and SWL. Whilst the percentage of people meeting their HbA1c target has increased over the last financial year, the finding suggests people with diabetes may need additional support to manage their care.

A population health approach to improving outcomes

- Supporting the groups identified on the previous page to complete care processes may have a knock-on positive effect on treatment target achievement.
- Additionally, targeted programmes taking a **population health** approach to support people with diabetes to meet their treatment targets could focus on:
 - People aged 20-69 are least likely to achieve their treatment targets (13.6%). In contrast, those aged 70-89 were most likely to meet their treatment targets (49.8%)
 - 29.8% of people from Black ethnic groups achieved their treatment targets, lowest of all ethnic groups (in contrast, people from Asian ethnic groups were most likely to meet the targets (43.8%))
- Residents in Core20 areas (36.2% achieve all targets, compared to 37.4% in all other areas). This is better than elsewhere in Sutton (32.6% in Core20 areas, 36.0% elsewhere).

▼ Fig. 23. CASS INT residents achieving treatment targets, compared to Sutton and London in 2023/24



Source: South West London ICS - Long Term Conditions Monitoring Dashboard, Diabetes Care Processes (2024) * Type 1 and 2, and on the [QOF register](#)

** ● = above Sutton average. Unless specified, data on this page looks at the resident population of the INT (pg. 7), not registered patient population of the PCN.

Health inequalities and long term conditions: outcomes in Cheam and South Sutton



Respiratory - a Cheam and South Sutton view

6,876 residents have a diagnosed respiratory condition*. 6,422 of these people have asthma (724, or 11.2%, aged below 18). 727 people have Chronic Obstructive Pulmonary Disease (COPD) (411, or 56.5%, are over 75). 273 have both.

Asthma

- 17.1% of patients are current smokers, above the borough average, and a high impact group to target stop smoking campaigns to reduce future health risks.
- Asthma diagnoses have declined since 2020. A further c.2,550 patients may have undiagnosed asthma. Under 15s and adults in their 40s are most at risk. Undiagnosed asthma can lead to [issues with sleep/ tiredness, with knock on impacts on people's school, work and social lives](#), and often [mental health](#).

COPD

- 37.2% of COPD patients are recorded as current smokers, c. 2-3x higher than the local average, further increasing their risk of poor health.
- It is estimated c.700 patients have undiagnosed COPD. Those aged 40-64 are at most risk. Late diagnosis increases the risk of [poor health** as individuals are less likely to exercise due to breathlessness caused by COPD](#).



Hypertension - a Central Sutton view

7,323 residents have hypertension (high blood pressure)*, of whom, 66% have met their blood pressure targets (similar to 64% in Sutton and SWL).

- People from Black ethnic groups, and people aged 80+ are least likely to hit their blood pressure target. People from White ethnic groups are at the highest risk of hospital admission. These groups may benefit from additional support.
- Conversely, those aged 65 to 79 are most likely to meet their blood pressure target, as well as those from Mixed ethnic groups. There may be opportunities to learn from what is working with these groups.

Source: South West London ICS (2024)

* And are on the [Quality & Outcomes Framework \(QOF\) register](#)

** Data from March 2023, up to and including February 2024

*** High blood pressure, heart disease, obesity and diabetes

Preventable mortality among people under the age of 75

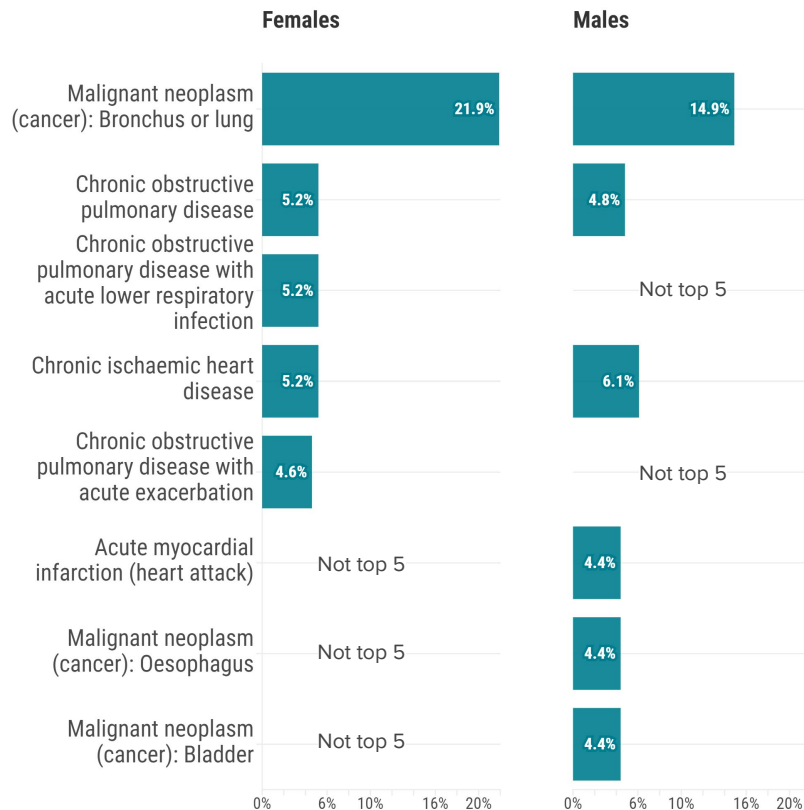
A [preventable death](#) is one which could have been mainly avoided through effective public health and primary prevention interventions, before the onset of diseases or injuries. [Examples of preventable mortality](#) include cardiovascular disease and some types of cancer.

As in other parts of the borough, males account for a bigger proportion of preventable deaths than females. This difference is likely attributed to a combination of biological, behavioral, and societal factors. Men tend to engage in riskier behaviors such as higher rates of smoking and alcohol consumption, and are more likely to encounter occupational hazards. At the same time, they may be less inclined to engage with preventive measures, or seek support for mental and physical health concerns. This highlights the necessity of ensuring timely access to services for men to reduce health complications and to facilitate earlier detection and treatment.

The top five conditions, shown by Fig.22, include cancer (particularly lung cancer, the top cause of preventable mortality for both males and females), chronic obstructive pulmonary disease (COPD) and heart disease. These conditions are all, at least partially, related to behaviours such as smoking, low levels of physical activity and obesity. [Nationally, people living in the most deprived areas are more at risk of dying from an avoidable cause](#). This reinforces the importance of effective programmes to reduce smoking prevalence, increase physical activity and reduce obesity to help reduce health inequalities in CASS INT.

Data note: This data is locally calculated and cannot be compared to national figures. Covid-19 remained the highest preventable death in this timeframe, but due to the vaccination not being widely available for part of the time period covered by the data, it has been removed.

▼ Fig. 22. Top 5 causes of preventable mortality amongst under 75s living in the INT, as a proportion of all preventable deaths in this cohort. Source: Primary Care Mortality Data 2020-2022 (2024), internally calculated rates



Appendices

Cheam and South Sutton

Appendix 1 - Public Health Resources

[Pharmaceutical Needs Assessment \(PNA\)](#)

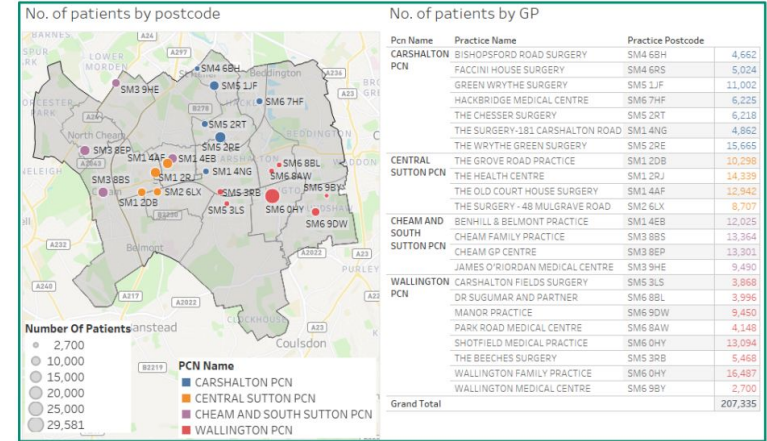
In 2022 Sutton refreshed its PNA. The PNA is a report on the pharmaceutical service needs of a local population. It is used to identify any gaps in current services or improvements that could be made in future pharmaceutical service provision.

For further information on Pharmacies or topics covered in this report please click on the title link to be sent to the document

[Sutton's Strategic Needs Assessment – Borough Profile 2023 \(SSNA\)](#)

This Strategic Needs Assessment summarises the latest key data about Sutton to provide a high-level update on local needs. The report includes insights into the demographics of residents, their health and wellbeing, and Sutton as a place

Figure 1: Wards and PCNs in Sutton PNA



There is variation in household composition across the borough, which may affect demand for services

Across the borough, most households have two adults. Three wards have majority households of a different composition to the borough average²⁶.

- Hackbridge (one adult under 65)
- St Helier East (two or more adults, with children under 16)
- St Helier West (two or more adults, with children under 16)

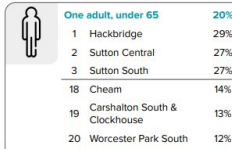
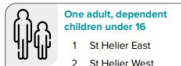


Figure 16: Household composition by ward. Source: ONS, 2022

Appendix 1 - Public Health Resources

[Annual Public Health Report 2022/23 \(APHR\)](#)

The Annual Public Health report looks at how we can meet the needs of our communities and tackle the barriers preventing them from being active.

Physical activity remains a key priority for Sutton, particularly in the context of an increasingly overburdened health and care system, a growing cost of living crisis and in the wake of the COVID-19 pandemic.

Priority 2: Active Places

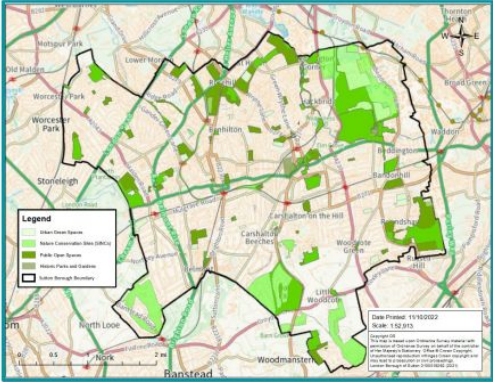
Sutton has a wealth of places where people can be active and incorporate physical activity into their daily lives. These include parks, green spaces, allotments, sports facilities and the natural and built environment.

Residents living in the borough can enjoy more than 464 hectares of parks and open space, (including formal parks, wildlife areas, lakes and waterways) and many do, with almost 90% of Sutton residents saying that they visit parks each year, and 51% of families saying they go to local playgrounds with their children²⁵.

24 hour gyms have entered the leisure market in Sutton and the use of green spaces has been revolutionised by events like parkrun. Health apps, digital fitness programmes and gamification (e.g. [Geocaching](#)) have also helped to broaden the appeal of outdoor activities.

However, with increasingly constrained resources there are challenges. This section explores these issues and showcases some of local assets that are encouraging more people to play sport and be physically active in Sutton.

Map to show parks and open spaces in Sutton



Legend

- Active Open Spaces
- Nature Conservation Sites (SSSIs)
- Parks Open Spaces
- Sutton Parks and Gardens
- Sutton Borough Boundaries

Leaflet | Map data © OpenStreetMap contributors, Imagery © Mapbox

Leaflet | Map data © OpenStreetMap contributors, Imagery © Mapbox

Leaflet | Map data © OpenStreetMap contributors, Imagery © Mapbox

Appendix 2: Ethnicity

Fig. 23: Maps of Cheam and South Sutton INT, showing the percentage of residents from a) Asian ethnic groups and b) Black ethnic groups, excluding White British (ONS, 2023)

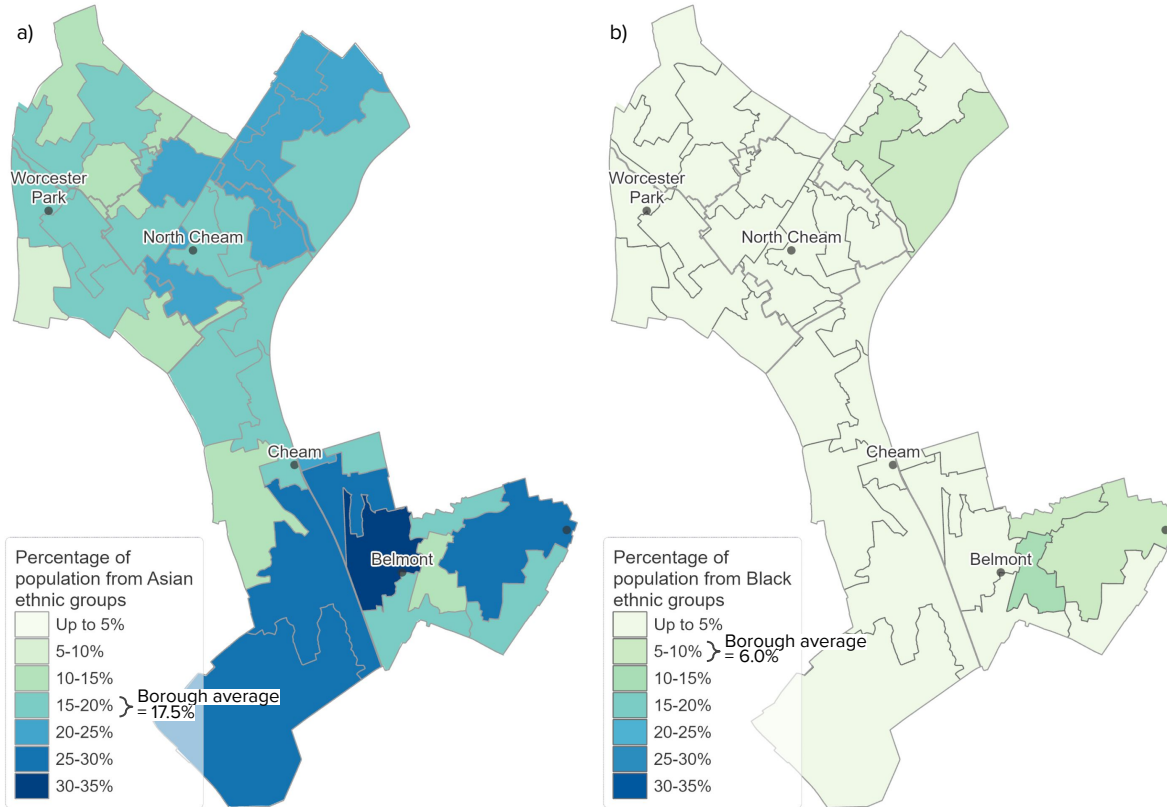
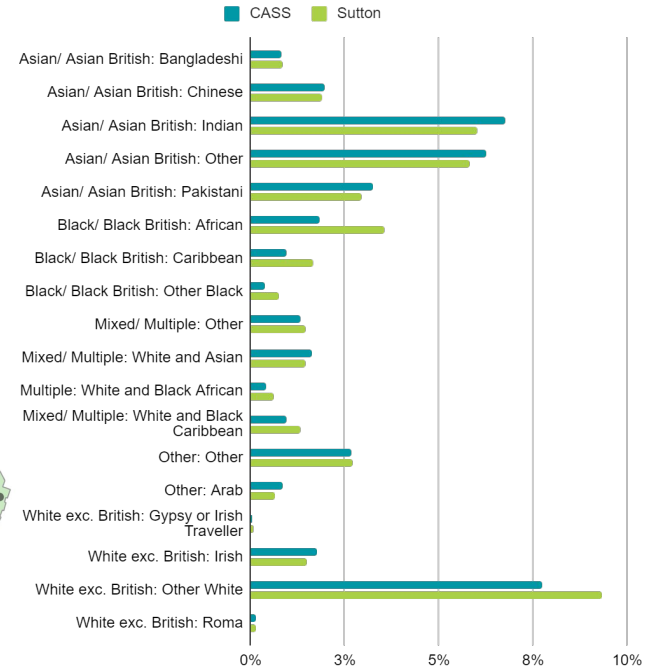


Fig. 24: The percentage of residents from all ethnic groups excluding White British (ONS, 2023)



Appendix 3: Digital Exclusion

Digital exclusion method

The [NHS highlights the following barriers](#) which can increase a person's risk of being digitally excluded:

Risk factor	Indicator	Source (date)
Older people	Percentage of people over 65 by LSOA	Census (March 2021)
People in lower income groups	Percentage of people employed receiving UC by LSOA	DWP (February 2023)
People without a job	Percentage unemployed by LSOA	Census (March 2021)
People in social housing	Percentage of households socially rented by LSOA	Census (March 2021)
People with disabilities	Percentage people whose day to day life is limited a little or a lot by LSOA	Census (March 2021)
People with fewer educational qualifications	Percentage of people with level 1 qualification, or no qualifications	Census (March 2021)
People living in rural areas	N/A	N/A
Homeless people	Data not available at small enough level	N/A
People whose first language is not English	Percentage first language not English	Census (March 2021)

Each LSOA in Sutton has been ranked according to each indicator. From this, an average rank for each LSOA was calculated from all indicators, and 'rank of ranks' created to show areas most at risk of digital exclusion.

Appendix 4: Loneliness

Loneliness method

Ten indicators have been identified which can increase a person's risk of loneliness, using the [Campaign to End Loneliness](#)' summary of risk factors.

Risk factor	Indicator	Source (date)
Age	Percentage of residents aged 16-24 Percentage of residents aged 65+	Census, ONS (March 2021)
Living with a mental health condition	Percentage of residents reporting their day to day activities are limited a little or a lot	Census, ONS (March 2021)
Are renting	Percentage of households renting from private or social landlords	Census, ONS (March 2021)
Carers	Percentage of residents reporting to provide unpaid care	Census, ONS (March 2021)
Single parents	Percentage of households composing a lone parent and child(ren)	Census, ONS (March 2021)
People from Asian, Black, Mixed/ Multiple and Other ethnic groups	Percentage of residents from Asian, Black, Mixed/ Multiple and Other ethnic groups	Census, ONS (March 2021)
Lower income households	Percentage of residents receiving Universal Credit	DWP (February 2024)
New parents	Percentage of residents aged 0-2 (in order to identify areas with a higher percentage of new parents)	Census, ONS (March 2021)
Migrants	Percentage of residents born outside of the UK	Census, ONS (March 2021)
Living alone	Percentage of households composing one person	Census, ONS (March 2021)

Each LSOA in Sutton has been ranked according to each indicator. From this, an average rank for each LSOA was calculated from all indicators, and 'rank of ranks' created to show areas most at risk of digital exclusion.

Appendix 5a - Diabetes eight care processes

Fig. 26a. Source: SWL ICS (2024)

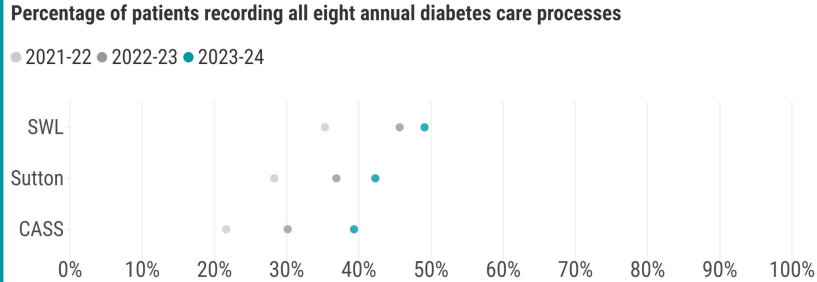
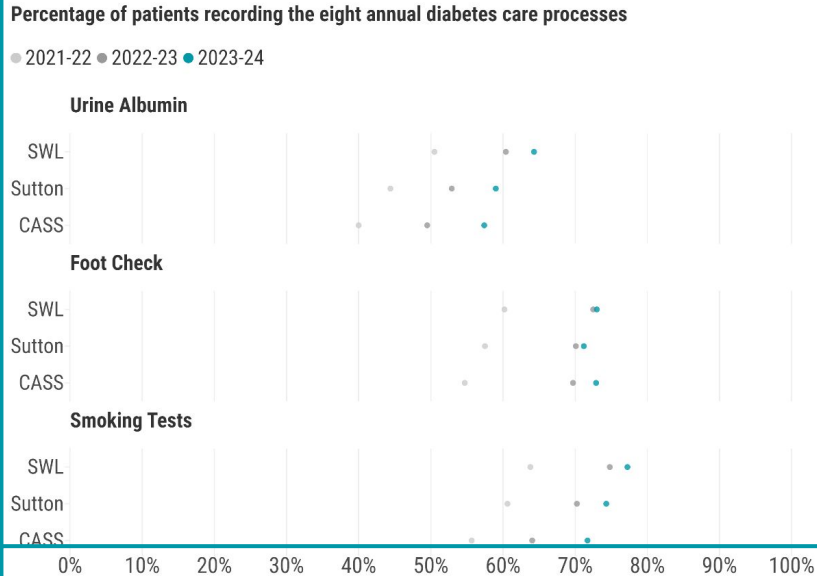
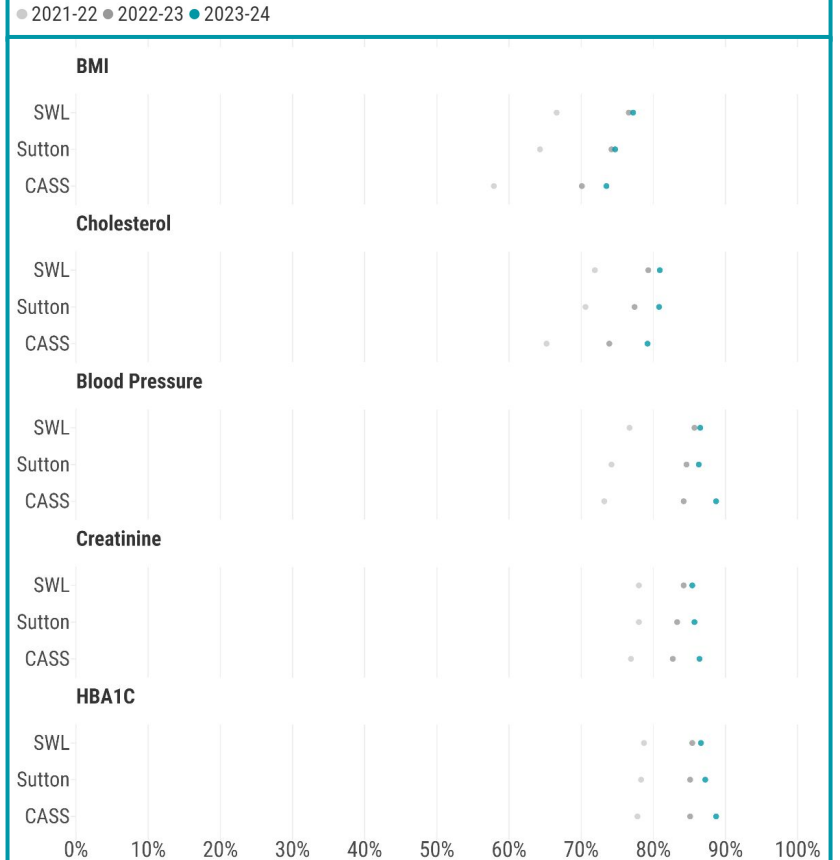


Fig. 26b. Source: SWL ICS (2024)



Percentage of patients recording the eight annual diabetes care processes (cont.)



Appendix 5b - Diabetes three treatment targets

Fig. 25a. Source: SWL ICS (2024)

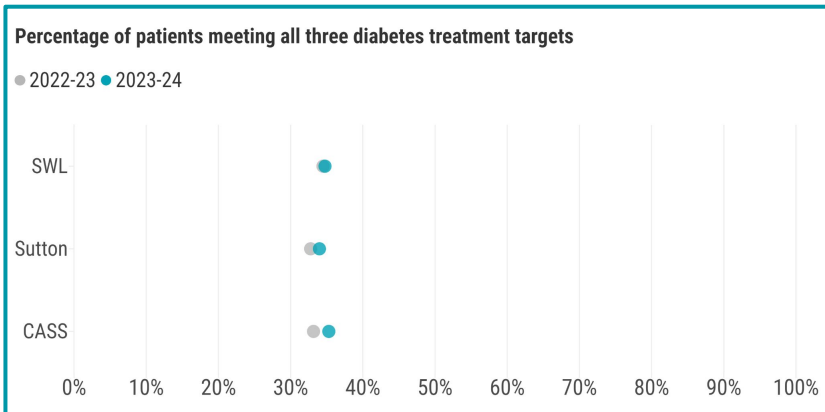


Fig. 25b. Source: SWL ICS (2024)

