Integrated Neighbourhood Team Population Profile

Wallington

How to use this document

The Wallington INT Population Profile forms part of <u>Sutton's Strategic Needs</u> <u>Assessment</u>, building on the <u>Borough Profile</u> 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 Wallington.

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 Wallington



Population

- Over the next decade, Wallington INT is projected to increase more slowly than the Sutton average. The population of children is likely to decline, as seen elsewhere in Sutton.
- The population of Wallington INT is less diverse than the Sutton average. This masks variation: a higher percentage of people from non-White British ethnic groups than the borough average live in Beddington South & Roundshaw.



Place

- 6,523 residents of the INT live in neighbourhoods that are estimated in the 20% most at risk of digital exclusion in Sutton
- 12.9% of residents are in receipt of Universal Credit, comparable to Sutton, but this rises to 18.2% in South Beddington & Roundshaw



Health and care

- Start well: At least one third of children in the INT are overweight and obese at age 10-11.
- Live well: 30,039 (43.3%) people in Wallington INT are in South West London Integrated Care System's target population for reducing health inequalities
- Age well: Preventable mortality is lower across Wallington INT, than across Sutton as a whole.

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Public Health, Sutton Council.

Wallington INT

Overview of Wallington INT



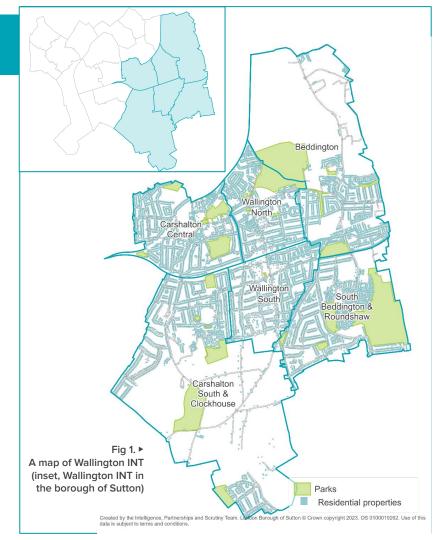
Wallington INT covers the east of the borough of Sutton, and is made up of six wards: Carshalton Central, Carshalton South and Clockhouse, Wallington North, Wallington South, Beddington and South Beddington & Roundshaw.



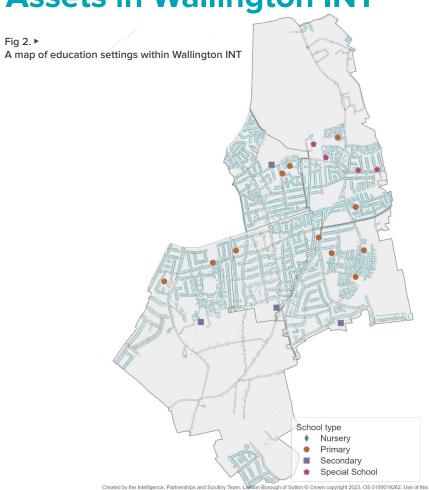
Just over <u>69,000 residents</u> live in Wallington INT, 24% of whom are under the age of 18, and 17% over 65.



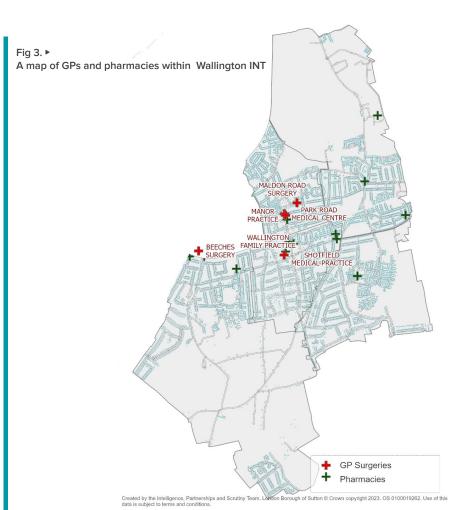
There are 22 parks within the INT area, including Beddington Park, stretching between Wallington North and Beddington wards.



Assets in Wallington INT



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PCN patient population by ward

Patients do not map neatly to specific ward or INT areas, 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 were residing.

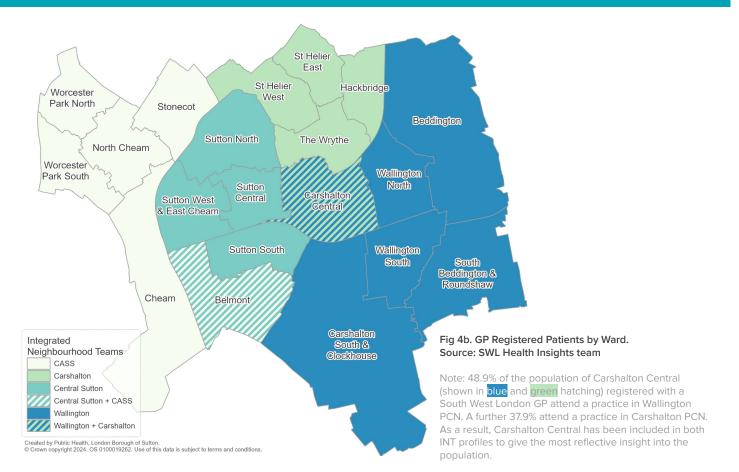
The matrices below (Fig.4) show the patients for each PCN by their ward of residence within Sutton. This excludes all patients registered at a postcode outside of the borough. The red and orange coloured circles highlight the dominant PCN population within a ward. These dominant populations have been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

	PCN					
Ward (2022)	CARSHALTON PCN	CENTRAL SUTTON PCN	CHEAM AND SOUTH SUTTON PCN	WALLINGTON PCN		
Beddington	366 (3.2%)	. (0.3%)	. (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%)	• (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%)	. (0.4%)	. 31 (0.3%)	10,003 (97.1%)		
St Helier East	12,355 (93.5%)	· (1.6%)	· 183 (1.4%)	• (3.5%)		
St Helier West	12,124 (81.9%)	• 1,435 (9.7%)	• 793 (5.4%)	• (3.0%)		

	PCN				
Ward (2022)	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%)	· (1.9%)	• 923 • (6.9%)	
Wallington North	2,252 (17.4%)	. 101 (0.8%)	. (0.5%)	10,539 (81.3%)	
Wallington South	• (3.0%)	. 121 (0.9%)	. (0.3%)	12,331 (95.8%)	
Worcester Park North	. (1.4%)	· (1.6%)	3,885 (96.6%)	. (0.4%)	
Worcester Park South	. (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



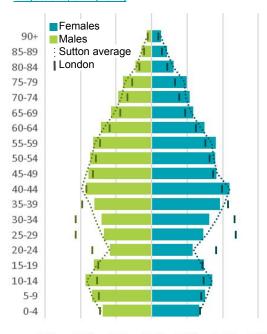
People

Wallington INT

INT area map and population

Population: Approximately <u>one third of Sutton's population live in the six wards</u> making up Wallington INT (Fig. 5).

Fig 6. Population profile of residents in Wallington, by five year age band. Source: <u>Identified Capacity</u>
Projections, GLA (2023)



0.0% 2.0%

4.0%

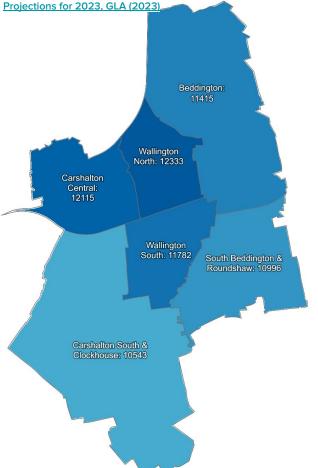
6.0%

Fig.6 shows the structure of the resident population of Wallington INT compared to the Sutton average. There are peaks of population in ages 10 -14 years and 40 - 49 years.

There is a noticeable waist to the pyramid at age 20 - 24 years. This is due to young adults moving out of the borough, most likely to attend university elsewhere. As there is no university in Sutton, there is not a corresponding influx of young people in this age group.

11,462 adults living in the INT area are over the age of 65 (16.6% of the population, slightly higher than the average across Sutton, of 15.5%).

Fig 5. A map showing the six electoral wards in Wallington INT and population estimates for each. Source: <u>Identified Capacity</u>



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INT Population

Wallington INT Residents

Resident population and projected growth					
	2023	2028	2033		
Sutton	213,580	215,882 (□ 1.1%)	217,178 (□ 1.7%)		
Wallington INT	69,185	69,712 (□ 0.8%)	69,454 (□ 0.4%)		

Population change: In the last decade, Wallington INT's population has increased by 8.2%, compared to 9.6% in Sutton, 7.2% in London and 6.5% in England.

Source: Identified Capacity Projections. GLA, 2023

Population projections: Over the next decade the INT's population is predicted to increase more slowly than the Sutton (1.7%, on average across all age groups) and London (4.9%) averages. However, at a more local level, South Beddington and Roundshaw ward is anticipated to have a 2.6% decrease in population, which is the second largest decrease of all Sutton wards.

Children and Young People

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

	2023	2028	2033
Sutton	49,004	46,294 (□ 5.5%)	43,183 (□ 11.9%)
Wallington INT	15,861	14,961 (□ 5.7%)	13,838 (□ 12.8%)

Population: 22.9% of the population of Wallington INT are aged 17 and under, which is the same as borough average (22.9%). Ward population is shown in Fig. 3.

Population change: In the last decade, Wallington INT's population of children and young people aged 0 - 17 increased by 7.9%, compared to 9.9% across Sutton. Across the borough, the increase in the population of children and young people has been driven by migration, rather than an increase in birth rate. More detail on the INT's fertility rate is shown on slide 11.

Population projections: Over the next decade the INT's population of children is projected to decline, in line with the rest of the borough. However, the population of children and young people is forecast to decrease at a faster rate in Wallington INT than across the borough as a whole. This is expected to be as a result of a continuing decline in the birth rate, and lower levels of projected migration.

Fertility Rate

Please note: this is a locally calculated rate and cannot be compared to national rates.

In Sutton, the fertility rates (FR) have been decreasing slowly over the past few years. In 2021, the FR for Sutton was 47.28 per 1,000 live births, whilst the FR for Wallington INT in the same year was 45.81 per 1,000 live births.

In 2022, there were 642 live births and 7 stillbirths within the Wallington INT. The majority of the live births in Wallington INT were born to mothers in Carshalton Central (122 births) followed closely by Wallington North (120 births) and South Beddington & Roundshaw (112 births). The lowest number of births were in Carshalton South & Clockhouse with 83 live births. The mean age of mothers in Wallington INT for 2022 is 31.97 years (range 15 to 46 years) and the median age is 32 years old.

Fig. 7 shows the FR per 1,000 live births in each LSOA between January to December 2021. The LSOA that each birth is shown in is based on the mother's LSOA of residence. The fertility rate ranges from 16.3 per 1,000 to 86.2 per 1,000 across the INT. The LSOAs with the highest FRs are in Wallington North, Beddington and South Beddington and Roundshaw. The LSOAs with the lowest FRs are within Carshalton Central, Carshalton South and Clockhouse, Wallington South and South Beddington and Roundshaw. Fig. 8 shows the changes in fertility rate from 2018 to 2021.

Fig 8. A graph
A graph
showing the
Fertility rate per
1,000 live births
by ward and
calendar year.
Source:
Internally
calculated

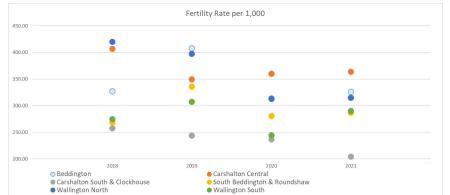
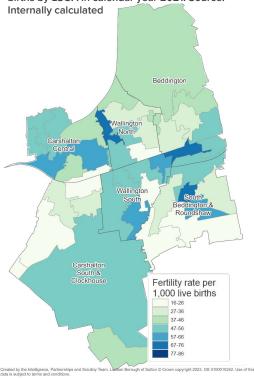


Fig 7. A map to show the fertility rate per 1,000 live births by LSOA in calendar year 2021. Source:



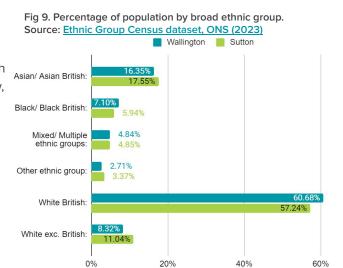
Methodology: the general fertility rates have been calculated using the number of live births to mothers between 15 and 49 years of age (source: ONS Birth Registrations) in the LSOA divided by the LSOA population from either the ONS mid-year population estimates (based on 2011 Census, pre-2021) or the 2021 Census (for 2021).

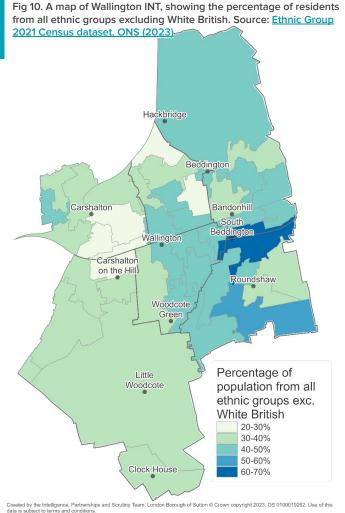
Ethnicity

Sutton's population has become more ethnically diverse in the past decade. 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%. This change in the ethnic makeup of the borough has happened faster than previous estimates had predicted and in 2021, 57% of the Sutton's population was White British.

Across the six wards in Wallington INT, the population is less ethnically diverse than the borough average, with 61% being White British. Figure 9 provides more detailed information by broad ethnic group, showing that Wallington INT also has a higher percentage of Black/Black British residents (7.1%) compared to the borough average (5.9%).

The level of ethnic diversity varies among neighbourhoods, as shown in Figure 10. In parts of South Beddington and Roundshaw, up to 61% of residents come from Asian, Black, Mixed/Multiple, Other, and White (excluding British) ethnic groups. In contrast, the percentage is less than 30% in the Carshalton area. Further information is available in Appendix 2.





Migration and English as a Second Language

Migrant Population

352 people living in Wallington INT have migrated to the area from another country. Wallington has a comparatively smaller migrant population (0.53%) than Sutton (0.80%) according to the 2021 Census data. Fig. 11 shows that whilst England and Sutton have a comparable migrant population proportionally, London's is significantly higher.

Roma, Gypsy & Traveller Population

321 people living in Sutton identified as Roma in the 2021 Census, with a further 130 identifying as Gypsy or Irish Traveller. In Wallington INT, 0.1% of the population identify as Roma and 0.03% as Gypsy or Irish Traveller. Roundshaw MSOA has the greatest population of Roma (0.2%) and Roundshaw and Orchard Hill, Woodcote Green and Clockhouse MSOAs have the highest populations of Gypsy or Irish Travellers (0.1%).

English as an Additional Language

As of 2021, over 80 languages were spoken in the borough. The top five languages (excluding English) spoken in Sutton were Tamil, Polish, Urdu, Bulgarian and Romanian. **10.7% of Wallington INT's population didn't speak English as their first language**, this is statistically different to Sutton's 13.8% (p < 0.01).

For Wallington INT, the top 3 groups of languages spoken were: Tamil, 'Other European languages' and 'Other South Asian languages'. Wallington, Sutton and London all have higher percentages of people who speak English as an additional language compared to England (Fig. 12).

Residents with low or no English Proficiency

There are 950 residents in Wallington INT who do not speak English or do not speak English well. The greatest proportion of these residents are in South Beddington and Roundshaw and Beddington. Public data does not tell us what language these residents speak as their first language.

Fig 11. Migrant population in Wallington, compared to Sutton, London and England averages. Source: Migrant Indicator 2021 Census dataset, ONS (2023)

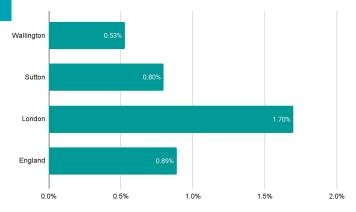
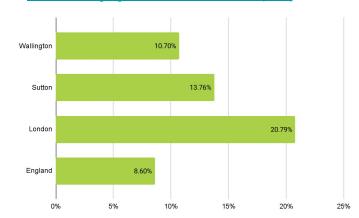


Fig 12. Population for whom English is a second language compared to Sutton, London and England averages. Source: Household Language 2021 Census dataset, ONS (2023)



^{*} 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

Carers

Carers

In Wallington INT, 5,434 people recorded that they were an unpaid carer in the 2021 Census; 8.14% of the population. This is higher than the average in Sutton (7.58%) and London (6.78%), but comparable to the average across England (8.28%).

Nationally, the proportion of people who take care of others without getting paid increases with age. This finding is reflected in Wallington INT, where adults between the ages of 50 and 64 are most likely to be unpaid carers, with 15.5% of adults in this age group undertaking this role. Although a smaller proportion of adults over 65 years report being unpaid carers, they are more likely to spend over 50 hours per week providing care (shown in Fig. 13). Carers UK have highlighted that providing unpaid care for more than 20 hours per week can have a severe impact on carers' health, well-being, and their ability to manage their work responsibilities.

Young Carers

In Wallington INT, 394 children and young people aged 5 to 24 years (data is not collected for children younger than 5 years) reported they were a carer in the 2021 Census, or 0.63% of the cohort. There is a lower percentage of young carers in Wallington INT than Sutton (1.86%), London (1.88%) and England (2.03%) (Fig. 14).

Considerations

In England and Sutton, a lower proportion of people identified themselves as unpaid carers during the Census in 2021 compared to 2011. This might be because the latest Census took place during the Covid-19 pandemic when lockdowns made it more challenging for some people to provide unpaid care, especially if they were caring for someone they didn't live with. Additionally, some people don't recognise the unpaid care they provide, particularly if they are care for a family member, friend, or neighbour. This means that the number of unpaid carers in Wallington INT is likely to be an underestimate and more people could benefit from additional advice and support.

Fig 13. Percentage of population providing unpaid care in Wallington, by hours provided. Source: <u>Unpaid Carers 2021 Census dataset</u>, <u>ONS</u> (2022)

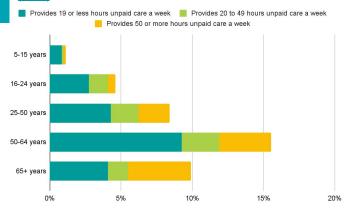
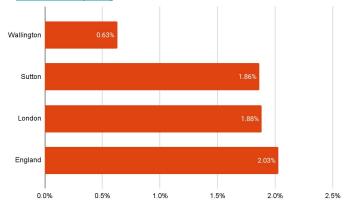


Fig 14. Percentage of population aged under 25 who provide unpaid care in Wallington, compared to Sutton, London and England averages. Source: <u>Age and Unpaid Carers 2021 Census dataset</u>, ONS (2023)



Place

Wallington

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.

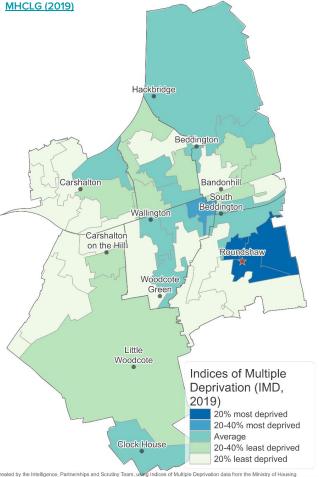
The <u>Index of Multiple Deprivation</u> (IMD) is the official measure of relative deprivation for small areas in England. The indices are based on 39 separate indicators, organised across seven distinct domains of deprivation.

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 one of these is in Wallington INT, in South Beddington & Roundshaw ward.

The map on the right (Fig. 15) shows this area of deprivation in more detail (the darker areas on the map). These three small areas* in Wallington INT (all within South Beddington and Roundshaw ward) are in the 20% most deprived of all areas in England. Breaking this down further, one of these three (shown by the orange star on dark blue) is within the most deprived 10% of all areas in England (and the only LSOA in Sutton to be).

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 15. A map of Wallington INT, showing the most deprived 20% of all neighbourhoods in England (Core20 areas). <u>Source: IMD 2019.</u>



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^{*} Lower layer super output areas or LSOAs

^{**}According to the Core20 Health Insights dashboard, as of 3 May 2023

Child poverty

Poverty

Poverty in childhood may negatively affect child development and education outcomes. Children living in poverty face significant inequalities. Economic hardship can result in inadequate nutrition and increased health risks leading to poor health outcomes while educational disparities hinder their academic achievements and future prospects. Social exclusion and stigma can impact emotional well-being and development.

Between 2015 and 2020, it was estimated that around 30% of children lived in poverty in the borough, declining to 25% in 2021. Although subject to geographical variation, this equates to 3,965 children within Wallington INT. Data for 2021 is less reliable than previous years as a result of quality issues caused by the pandemic. Whilst data suggests that there has been a 5% decline in the number of children living in poverty, it is likely that this figure may have been exaggerated by the impact of Covid-19 and changes in employment and benefit usage.

Fig. 16 shows the levels of income deprivation affecting children across the Wallington INT area.

Material Deprivation

Material deprivation for children is assessed on access to 12 elements including:

- a warm winter coat for each child,
- fresh fruit and vegetables eaten by children every day,
- enough bedrooms for every child of 10 or over of a different sex to have their own bedroom
- Celebrations on special occasions such as birthdays, Christmas or other religious festivals

The Department of Work and Pensions estimate the numbers of children falling below the thresholds of low and severe income and material deprivation. Post pandemic these numbers have increased by 1% from 2021 to 2022.

Applying the 2022 estimates to the Wallington INT population of children and young people aged <18:

- 634 (4%) children and young people are below the threshold for severe low income and material deprivation
- 1,744 (11%) children and young people are below the threshold for relative low income and material deprivation (Source: DWP, 2023)

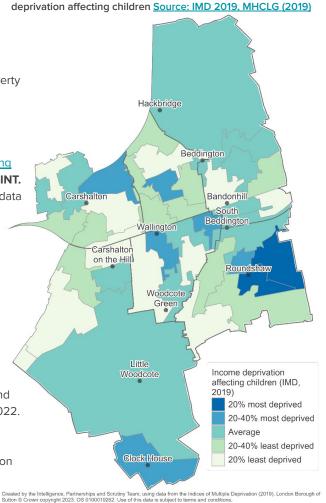


Fig 16. A map of Wallington INT, showing levels of income

Fuel poverty

<u>Fuel poverty</u> occurs when a household cannot afford to adequately heat their home or meet basic energy requirements. Households in fuel poverty are at risk of living in cold homes (which can have significant consequences for health and wellbeing) and often experience increasing levels of debt. Fuel poverty is driven by three factors: household income, the affordability of energy, and the energy efficiency of a home.

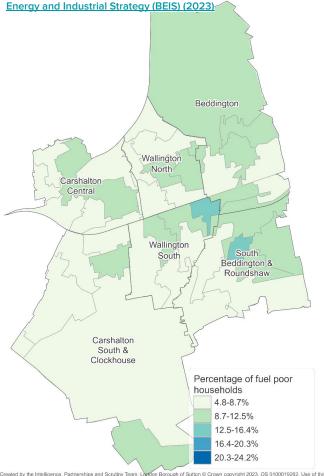
Fuel poverty in England is measured using the Low Income Low Energy Efficiency Indicator (LILEE). A household is considered to be fuel poor if:

- They are living in a property with a fuel poverty energy efficiency rating of band D or below,
 and
- When they spend the required amount to heat their home, they are left with a residual income below the official poverty line.

LILEE is calculated using household income, household energy requirements and fuel prices. Based on this indicator, fuel poverty varies from 5-16% of households in Wallington INT (as shown by Fig.17), and 5-24% of households across the whole borough. Estimates of fuel poverty at LSOA should be treated with caution. The estimates are to look at general trends and identify area of particularly high or low fuel poverty. They should not be used to compare LSOAs due to small sample sizes and consequent instability in estimates

Fig. 17 shows that in Wallington INT, over 11% of households were estimated to be fuel poor as of 2020 (the most recent data set which was released in April 2022) and up to 16% in some small areas. Since 2020, the price of energy has increased significantly leading charities to warn it is likely this number has double through 2022, putting some groups of residents such as people with disabilities, older residents and children, at additional risk.

Fig 17. A map of fuel poverty Wallington INT, compared to the borough. Source: <u>Fuel poverty statistics</u>, <u>Department for Business</u>,



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Education

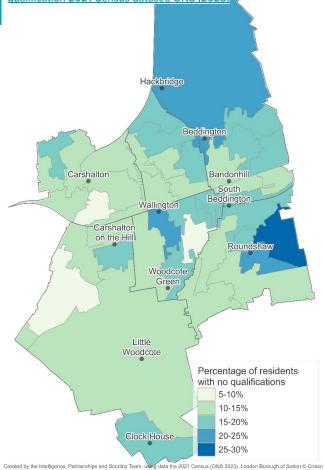
Education and health go hand in hand and there is good evidence that people with higher levels of education tend to live longer, have better health and make healthier choices. Education also plays a key role in shaping opportunities, employment options and income. It is a powerful tool that can help lift people out of poverty and reduce inequalities in society.

As in the rest of Sutton, residents in the Wallington INT area tend to be highly educated, with a significantly higher percentage of those aged 18 + having Level 4 qualifications (41.1%, 21,014 people) than across England (34.0%). 37.7% of residents (19.276 people) have Level 1 to 3 qualifications, compared to 40.0% across England. Qualification levels are further explained in Appendix 5.

At the other end of the spectrum, 14.2% of residents (7,287 people) in Wallington INT have no qualifications:

- 3,555 of these people are over the age of 65 (making up 32.5% of the population with no qualifications), which puts them at additional risk of digital exclusion (more detail on page 21).
- The map in Fig. 18 shows that there is geographical variation in the percentage of residents with no qualifications, with as many as 27% of residents over 18 not having qualifications in an area of Roundshaw (shown by the darkest shape on the map).
- Across Sutton, people with no or low levels of qualifications are slightly more likely to be female than male, and more likely to be from White and 'Other' ethnic groups.

Fig 18. The percentage of residents over 18 with no qualifications by neighbourhood in Wallington INT. Source: Highest level of qualification 2021 Census dataset, ONS (2023)



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Digital exclusion

Local picture on digital exclusion

In Wallington INT, approximately 6,600 residents (9% of the resident population) live in four neighbourhoods (three in Roundshaw and one in Woodcote Green) estimated to be in the 20% of most at risk of digital exclusion in Sutton (Fig 19). For more information about how digital exclusion has been calculated see Appendix 3.

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.

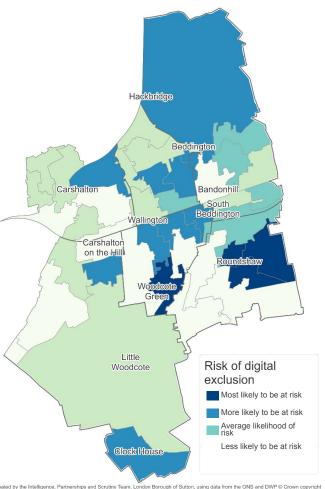
Not having the necessary digital skills and access to technology, often referred to as 'digital exclusion', can significantly affect a person's life.

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 19. A map of Wallington INT, the neighbourhoods most at risk from



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Economic activity

Economic activity in Sutton has historically been higher than the London and England averages (Fig. 20). In the 12 months to December 2022, 83% of 16-64 year olds were economically active (109,500 people of 131,600 16-64 year olds), compared to 79% in London and England.

Although fewer people are economically inactive, of those that are, a higher percentage who live in Sutton want a job compared to those that live elsewhere (39%, compared to 17% in London and 18% in England), meaning 8,500 people aged 16-64 want a job.

The Census provides insight on economic activity at a point in time for Wallington INT. As of March 2021, 62.9% of the population aged 16+ were economically active, lower than the average in Sutton (64.5%), but above the England (58.6%) average.

12 neighbourhoods in Wallington INT have amongst the lowest levels of economic activity in Sutton (Fig.21), particularly around Roundshaw and south of Wallington, but the reasons why vary, reflecting differing local demographics. Economic inactivity around Roundshaw can be attributed to higher levels of long-term sickness and disability, and people looking after the house or home. South of Wallington it is due to high percentages of residents being retired.

Fig 20. Economic activity amongst adults aged 16-64 (2020-2022). Source: Annual Population Survey, ONS (2022)

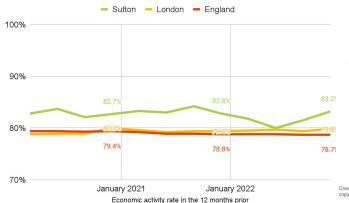
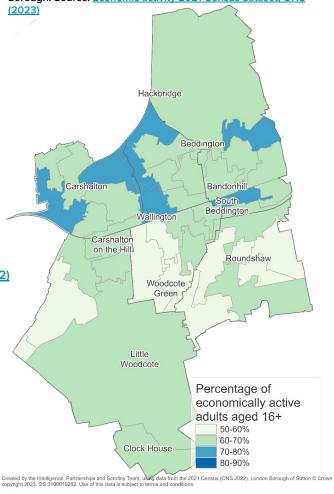


Fig 21. A map of economic activity in Wallington INT, compared to the borough. Source: Economic activity 2021 Census dataset, ONS



Low income

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

Working age adults

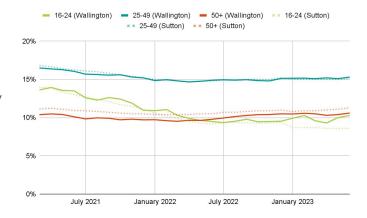
- In June 2023, 12.9% of residents in Wallington INT were in receipt of Universal Credit,
 comparable to the Sutton average (13.0%), and slightly below the England average (14.6%).
- Within Wallington INT, residents of South Beddington and Roundshaw are the highest claimants of Universal Credit with 18.2% of residents in receipt.
- During the pandemic, uptake of Universal Credit increased significantly because of the impact Covid-19 had on the economy (this was seen across England, and reflected in Sutton and Wallington INT). Since March 2021, uptake of Universal Credit has started to decline, particularly among young adults (Fig. 22), but remains above pre-pandemic levels.
- 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 June 2023, the greatest proportion of residents claiming Out of Work benefits were in Beddington South (3.7% of all working age adults) and Wallington South (3.4%); noticeably higher than the Sutton average (2.9%) but lower than the London average (4.9%).

Older adults

- As of August 2022, 958 residents within Wallington INT received Pension Credit (8.4% of over 65s, compared to 9.4% across Sutton).
- It is estimated that 30% of people eligible for Pension Credit do not claim it: in Sutton, Wallington South and Roundshaw, both within Wallington INT are thought to particular hotspots for low levels of take-up (source: Low Income Family Tracker)

Fig 22. Universal Credit uptake by age group in Wallington INT, compared to Sutton as a whole (March 2021 - February 2023).

<u>Source: Universal Credit uptake Department for Work and Pensions</u>, 2023)



Housing

Wallington INT

There are **26,087 households** in Wallington INT with at least one usual resident



6,833 people live on their own (26% of the population, comparable to the Sutton average, and below the 30% across England)

Source: <u>Household composition 2021 Census dataset</u>, <u>ONS</u> (2022)



3,924 households rent from social landlords (15%, compared to 14% in Sutton, and 17% in England)

Source: Household tenure 2021 Census dataset, ONS (2023)



3,058 people over **65** live on their own (12% of households, comparable to elsewhere in Sutton)



3,176 households include lone parents (12% of households, comparable to elsewhere in Sutton)

Source: <u>Household composition 2021 Census dataset</u>, <u>ONS</u> (2022)

* Data is not available for smaller areas

London Borough of Sutton



Across the borough*, 199 households were homeless between July & September 2022 (down 3% compared to the same period in 2021). Black African & Black Caribbean groups are disproportionately likely to be homeless (19% of the homeless population in Sutton, compared to just 6% of the borough's population)

Source: Tables on homelessness, DLUHC (2022)

940 households in Sutton* were in emergency and temporary accommodation (EA and TA) placements as of 31 March 2023, with 2,386 people (up 10% on the same point in 2022)

Two thirds of households include children, with 1,125 children living in EA and TA (up 5% on 2022)

Source: Data from Encompass

Between October and December 2022, there were **12 rough sleepers** in Sutton*



7 of these people were new rough sleepers, 4 were intermittent rough sleepers, and 1 was classed as living on the streets

Source: Rough sleeping in London, GLA (2023)

Health and Care

Wallington

Health across the life course

Our health is influenced across the life course by the social determinants such as deprivation, housing, unemployment, education and living conditions. Our health is measured at different points across our life course depending on engagement with services. The health and wellbeing of residents of Wallington INT at different stages across the life course is shown below.



17.9% of children in reception were overweight or obese, rising to 33.8% by year six. Wallington INT has a higher proportion of children aged 4 - 5 years who are obese than the Sutton average



14,344 adults are estimated to be physically inactive within Wallington INT, despite 83% of households living within 5 minutes walk of a park.



8.5% of patients aged 18 or over registered with Wallington PCN GPs are classified as obese



Wallington INT scores <u>80.5 on</u> average for the rate of emergency hospital admissions for intentional self-harm (all ages) by wards, standardised to England (100)



It is estimated that 13,331 residents in Wallington INT will experience a mental health problem of some kind each year



46% of residents in Wallington INT are considered in South West London ICS' target population (Core20 + 5) for reducing health inequalities (compared to 50% across Sutton)



Wallington INT has a <u>lower rate of</u>
<u>hospital admissions for alcohol</u>
<u>related conditions</u>, at 76.3 on
average (standardised to England, =
100)



11.8% of the population aged 16+ are smokers, below both the Sutton (12.6%), South West London (13.1%) and England (13.6%) averages



In Wallington INT, 1,337 residents registered with a GP have an electronic frailty index (eFI) score indicating 'severe frailty'



The <u>rate of preventable mortality in</u> <u>Wallington INT is 79.2</u>, lower than the Sutton (83.9), but subject to variation across the wards (range: 55.2 - 99.8, standardised to England, = 100)

Childhood Obesity

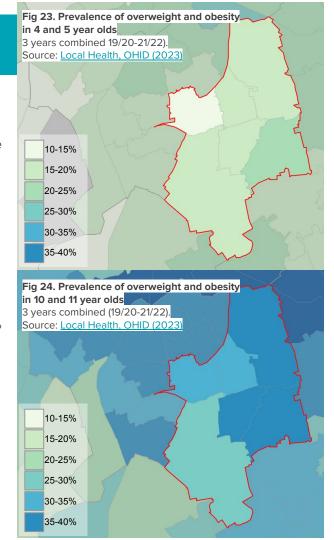
Nationally, nearly a third of children aged 2 to 15 are overweight or obese with children becoming obese at earlier ages and staying obese for longer. Evidence suggests that children who are obese continue to struggle with obesity as an adult. This puts them at a higher risk of developing serious long-term 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.

A lower percentage of children are obese in Sutton compared to the national and regional averages, with 16.2% of Reception-aged children overweight or obese (compared to 22.3% across England), increasing with age to 36.3% at Year 6 (compared to 37.8% across England).

Amongst Reception-aged children in Wallington INT (Fig. 23), the percentage of children who are overweight or obese varies from 14.8% of 4 to 5 year olds in Carshalton Central, to a high of 24.0% in South Beddington and Roundshaw (the latter is above the national and regional averages).

South Beddington and Roundshaw also has the highest percentage of children obese at Year 6 (37.5%) but at least a third of children in all wards within the INT are obese by 10 or 11 years old (Fig. 24).

The rates of overweight and obesity among children are highest in the most deprived areas, both locally and nationally. The maps in Fig.20 and Fig.21 highlight this situation in Wallington INT.



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, 9,043 adults are estimated to fall into this group.

83% of households in Wallington INT being within a 5 minute walk of a park (higher than the borough average of 79%), as shown by Fig. 22.

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.

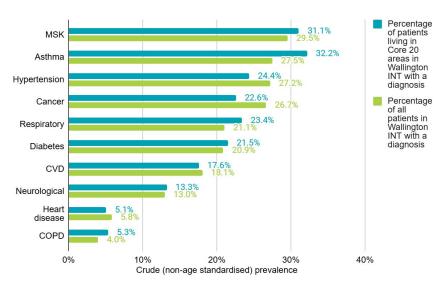
In Wallington PCN, <u>8.5% of patients aged 18 and over have a BMI greater than or equal to 30</u> in the previous 12 months (2021/22). Obesity and poor diet are linked with type 2 diabetes, high blood pressure, high cholesterol and increased risk of respiratory, musculoskeletal and liver diseases. Obese people are also at increased risk of certain cancers.

Fig 25. A map of parks and green spaces within Wallington INT, showing households within a 5 minute (400m) walking radius The Grange and Manor Park and St Margarets Pool Riverside Walk Wrythe Recreation Ground Lakeside Pond Queen Elizabeth Walk War Memorial Gardens, Carshalton Carshalton Park Mellows Park Warren Park Jubilee Gardens Roundshaw Playing Field Stanley Park Rec Roundshaw Park Courtney Crescent Great Woodcote Park Queen Marys Park Oaks Park Households not within 400m of a park Households within 400m of a park Corrigan Avenue Rec 400m from a park Created by the Intelligence, Partnerships and Scrutiny Team, using data the 2021 Census (ONS 2023). London Borough of Sutton © Crown copyright 2023, OS 0100019262. Use of this data is subject to terms and conditions.

Health inequalities and long term conditions

30,039 residents fall into South West London ICS' target population (Core 20+5) for reducing health inequalities (46.0% of residents, compared to 49.3% across Sutton). They may be at risk of poorer health as a result of behavioural or lifestyle factors (i.e. are heavy drinkers, obese or a smoker), because of a pre-existing condition (high blood pressure or a mental health condition), or because they live in an area that is within the 20% most deprived nationally (Core 20 Area). Although not an indicator of absolute poor health, Fig. 26 can help target services and initiatives to reduce health inequalities, for example focusing on the neighbourhoods highlighted in the boxes (three in South Beddington and Roundshaw, two in Wallington South and one in Wallington North) with the highest percentage of patients in the cohort.

Fig. 27 shows the ten long term conditions with highest crude prevalence in Wallington INT, comparing the average across all residents to those living in the 20% most deprived areas, showing health inequalities in the INT



◆ Fig. 27 Long-term
conditions with the highest
prevalence amongst patients
in Wallington INT, comparing
patients living within Core 20
areas, and the average
across all other areas in the
INT. Source: South West
London ICS (2023)

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 26. A map of Wallington INT, showing the percentage of patients who are in South West London's target cohort to reduce health inequalities. Source: SWL ICS (2023) Beddington North Carshalton Central Wallingt Carshalton Percentage of South & Clockhouse patients in the Core 20 + 5 cohort 30-35% 35-40% 40-45% 45-50% 50-55% 55-60% Core 20 Area (100%) Created by the Intelligence, Partnerships and Scrutiny Team. Landon Borough of Sutton @ Crown copyright 2023. OS 0100019262. Use of this

Health inequalities and LTCs: diabetes care processes

3,930 Sutton residents living in Wallington INT have a diabetes diagnosis* as of March 2024 (a crude prevalence of 568.0 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 <u>interventions</u> which have a high impact in preventing or delaying complication, including '<u>care processes</u>'.



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

Care process completion in Wallington is above the Sutton average, but below the South West London average. Recording has
improved in the past three financial years. Completion ranges from 9.2% to 65.7% (for all Sutton residents) among Wallington 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.

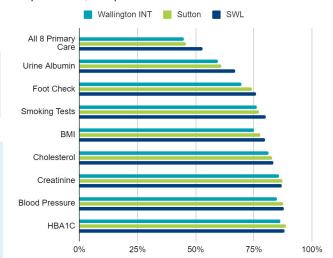


People were newly diagnosed in 2023/24 These people may need additional support navigate their diagnosis, and manage their condition well. This should include a referral to a diabetes education programme.

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:
 - Residents living in Core20 areas, of whom 27.5% have had all care processes recorded, compared to 47.1% living in all other areas of the INT. This is compared to 42.0% in Core20 areas on average across Sutton and 46.5% in all other areas. It is the largest gap seen among all INTs.
 - o People aged 20-39, the least likely age group to have all care processes recorded (20.6%).
 - People from Mixed (38.0%, Other (41.4%) and Black (41.9%) ethnic groups (versus 45.6% of people from Asian and White ethnic groups)
- 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. Wallington 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

** • = comparable to 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

3,930 Sutton residents living in Wallington 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 <u>intervention</u> identified by the NHS. <u>Evidence</u> 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 Wallington 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 Wallington 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 Wallington PCN, ranging from 17.7% to 50.0% (for all Sutton residents). Further analysis may be beneficial to identify causes of this disparity, and help identify strategies to address it.

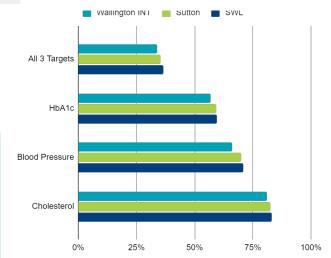


HbA1c was the target most missed in 2023/24 Within the INT, HbA1c was the target most missed <u>increasing the risk of foot/ eye damage, heart attack and stroke</u>, this finding is consistent with elsewhere in Sutton and SWL. Whilst the percentage of people meeting their HbA1c target has increased over 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:
 - Closing the gap between those living in Core20 areas, and not: 25.6% of people living in Core20
 areas achieve all treatment targets, compared to 34.9% in all other areas. The gap is around 3x larger
 than the average in Sutton
 - People from Black ethnic groups (28.4% of whom achieve all treatment targets, in contrast to 36.0% of people from Mixed/ Multiple ethnic groups
 - People aged 20-59 (21.3% of whom achieve all treatment targets, in contrast to 45.0% of those aged 70-89)

▼ Fig. 23. Wallington 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

**
= comparable to 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 long term conditions: outcomes in Wallington



Respiratory - a Wallington view

9,555 residents have a diagnosed respiratory condition*. 8,975 of these people have asthma (1,093 or 12.2%, aged below 18). 994 people have Chronic Obstructive Pulmonary Disease (COPD) (487, or 49.0%, are over 75). 414 have both.

Asthma

- 11.1% of patients are current smokers, comparable to the borough average, but a high impact group to target stop smoking campaigns to reduce future health risks.
- Asthma diagnoses have declined since 2020. A further 2,166 patients may have undiagnosed asthma. Children aged 0-14 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

- 25.5% of COPD patients are recorded as current smokers, around double the local average, further increasing their risk of poor health.
- A further 700 patients may have undiagnosed COPD. People aged 40-65 are most at risk. Late diagnosis increases the risk of <u>poor health** as individuals are less likely to exercise due to breathlessness caused by COPD.</u>



Hypertension - a Wallington view

9,224 residents have hypertension (high blood pressure)*, of whom, 58% have met their blood pressure targets (slightly below the 64% in Sutton and SWL).

- People from; Black ethnic groups, aged under 40, males, and those living in more deprived areas are least likely to hit their blood pressure target. These groups may benefit from additional support.
- Conversely, those; from White and Asian ethnic groups, and those aged 65-79 are most likely to meet their blood pressure targets. 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

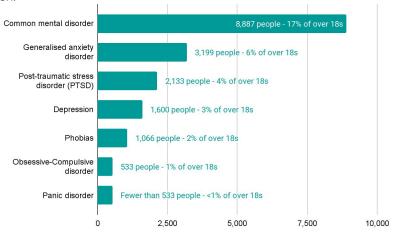
^{**} Data from March 2023, up to and including February 2024

Mental Health

Adults

Based on the Adult Psychiatric Morbidity Survey (ONS, 2014), it is estimated that 1 in 4 people will experience a mental health problem of some kind each year, equivalent to 13,331 residents in Wallington INT.

The number of people estimated to experience different forms of mental health problems in any given week in Wallington is shown in Fig. 28. Mental health disorders are more prevalent amongst women than men, with 1 in 5 women reporting symptoms of a common mental disorder, compared to 1 in 8 men.



Children and Young People

Figures to show the prevalence of mental health disorders in children and young people are based on the Mental Health of Children and Young People in England Survey - Wave 3 Follow Up (NHS Digital, 2022).

It is estimated that 18% of children aged 7 -16 years had a probable mental health disorder. This is equivalent to 1,706 children in Wallington INT. Further estimates suggest that 22% of young people aged 17 - 24 years had a probable mental health disorder, equivalent to 1,233 residents of Wallington INT.

In young children aged 7 - 10 years, the prevalence of a mental health disorder was nearly twice as high in boys (19.7%) as in girls (10.5%). In children aged 11 - 16 years prevalence rates were found to be similar (18.8% boys, 22.0% girls). In young people aged 17 - 24 year, much higher rates were observed in young women (31.2%) than young men (13.3%).

The Survey found that whilst 1 in 5 7 - 16 year olds lived in households that experienced a reduction in household income in the last year, this rose to 1 in 4 (28.6%) among children with a probable mental disorder, approximately 488 children and young people.

Fig 28. Estimated prevalence of adult mental health disorders in any given week, based on the projected population of Wallington INT in 2023. Source: Adult Psychiatric Morbidity Survey, ONS (2014) and Identified Capacity Projections for 2023, GLA (2023)

Self-harm in Sutton



All Ages

In 2021/22 the rate of emergency hospital admissions for intentional self-harm (all ages) in Sutton was 113.6 per 100,000. This is lower than England (163.9 per 100,000) but higher than London (80.0 per 100,000).

Fig. 29 shows the rate of emergency hospital admissions for intentional self harm (all ages) by wards in Wallington INT, standardised to England (100). Wallington INT scores 80.5 on average, meaning the rate of admissions due to intentional self harm is around 20% below the England average, but there is variation by ward, with Wallington North scoring above the England average at 102, or 2% higher than the national average.

Children and Young People

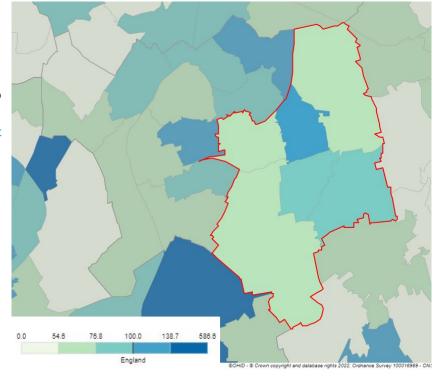
In 2021/22 Sutton's rate of hospital admissions as a result of self-harm (10 - 24 year olds) was 345.8 per 100,000. This is lower than England (427.3 per 100,000) but higher than London (229.7 per 100,000).

Hospital admissions as a result of self harm vary across the age groups with a peak in 15 - 19 year olds:

- 10 14 year olds: 276.6 per 100,000
- 15 19 year olds: 557.8 per 100,000
- 20 24 year olds: 159.8 per 100,000

Admissions for young women are much higher than admissions for young men.

Fig 29. Emergency hospital admissions for intentional self harm (all ages), 2016 to 2017, to 2020 to 2021. Source: Local Health, OHID (2022)



Suicide



Between 2019-2021, there were 56 deaths by suicide in Sutton. The Sutton suicide rate has increased in recent years from 7.5 per 100,000 in 2015-17 to its current rate of 10.6 per 100,000 in 2019-21. This is higher than London (7.2 per 100,000) but similar to England (10.4 per 100,000). The England rate has shown a slow increase from 9.6 per 100,000 in 2015-17, to 10.4 per 100,000 in 2019-21. The London rate, in contrast, is decreasing from 8.6 per 100,000 in 2015-17 to 7.2 per 100,000 in 2019-21.

The current cost of living crisis, the stressors that challenge traditional male roles such as unemployment and divorce, the issues faced by those who are neurodiverse or identify as LGBTQ+ are all risk areas that are increasingly being seen as factors in recent suicides.



An audit of suicides occuring between 1st April 2018 to 31st March 2023 concluded that of the 17 suicides of Wallington INT residents which were confirmed by the Coroner's Office:

- 76.5% of deaths by suicide occurred in men (approximately 3 out of every 4 suicides)
- The greatest proportion of suicides occurred in individuals aged 55 64 years (23.5%).
- 100% of suicides occurred at home
- Hanging was the most prevalent method of suicide (58.8%) followed by poisoning (17.6%).

Source: Primary Care Mortality Database.

These findings are consistent with national findings. It should be noted that the proportion of suicides in younger and older age groups are increasing.

Sutton's suicide prevention strategy aims to reduce the number of suicides and prevalence of self-harm in Sutton by the end of 2025 compared to present levels.

Every year approximately 19 people will take their own life. Many more will attempt suicide each year, with more than 1 in 20 people making a suicide attempt at some point in their lives. Self-harm is more common than suicide, with 1 in 14 people self-harming over their life-time.





Crime and health

The effects of crime, particularly crime committed by one person against another, may lead to lasting harm. The severity of the crime is not proportionate to the harm it may cause. Victims of crime may suffer short or long-term ill-health including developing depression or anxiety-related illnesses, insomnia, post-traumatic stress disorder and suicidal ideation.

Children and young people exposed to adverse childhood experiences (ACEs) such as violence or abuse are more likely to suffer from poor health outcomes such as chronic disease and mental health disorders than the general population.

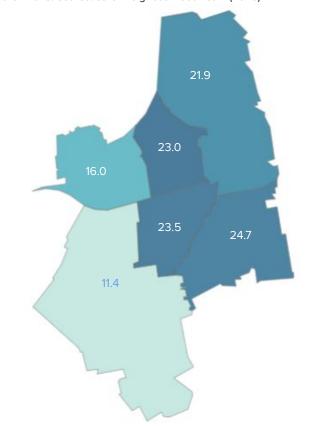
Violence against the person offences include homicide, violence with injury and violence without injury. All of which have a detrimental effect on the physical and mental health and wellbeing of an individual.

There were 1,357 offences of violence against the person in Wallington INT in 2022-23. This is a decrease of 2.5% on the previous 12 month period. Rates by Ward are seen in Fig. 32.

Domestic Abuse: in 2022-23, there were 603 counts of domestic abuse (9.0 per 1,000) including 146 counts of domestic abuse violence with injury (2.2 per 1,000). The rate of domestic abuse has decreased by 4.3% compared to the previous 12 months.

Drug Possession: in 2022-23, there 137 drug offences recorded involving the possession of drugs by Wallington INT residents (2.0 per 1,000 population). Beddington (3.5 per 1,000) and South Beddington & Roundshaw (3.3 per 1,000) had the highest rates of offences. The rate of drug possession offences has decreased by 28.6% compared to the previous 12 months.

Fig 30: Violence Against the Person rate per 1,000, April 2022 - March 2023. Source: Safer Neighbourhood Team (2023)



Source: https://public.tableau.com/app/profile/metropolitan.police.service/viz/MonthlyCrimeDataNewCats/Coversheet

Substance Misuse

Current trends in substance use: the most recent survey on <u>Smoking.</u> <u>Drinking and Drug Use among Young People in England</u> (2021) showed that in the last year:

 Approximately 10.4% of young people aged 11-15 years had taken any drug (excluding new psychoactive substances (NPS)) in the last year.

Data from the <u>Crime Survey for England and Wales (2022)</u> found that in the last year:

- approximately 18.6% of adults aged 16-24 years and,
- approximately 9.2% of adults aged 16-59 years

reported drug use in the year ending June 2022. The group with the highest reported drug use in the last year was aged 20-24 years (23.3%).

Dependence: the latest information on drug dependence in England is reported in the <u>Adult Psychiatric Morbidity Survey 2014</u>. The survey found that 3.1% of adults showed signs of dependence on drugs, including 2.3% who showed signs of dependence on cannabis only and 0.8% with signs of dependence on other drugs.

By applying the information collected from national surveys to Wallington INT's population it would suggest that amongst:

Children and young people aged 11-15 years

• 513 (10.4%) took drugs (excluding NPS) in the last year

Young people aged 16-24 years

- 1,217 (18.6%) used drugs in the last year
- 308 (4.7%) had frequent drug use in the last year

Residents aged 16-59 years

- 3,651 (9.2%) used drugs in the last year
- 1,032 (2.6%) had frequent drug use in the last year

Adult residents (age 16 and over)

- 1,710 (3.1%) show signs of dependance on drugs
- 1,269 (2.3%) of these people show signs of dependance on cannabis.
- 441 (0.8%) show signs of dependence on other drugs

Alcohol use

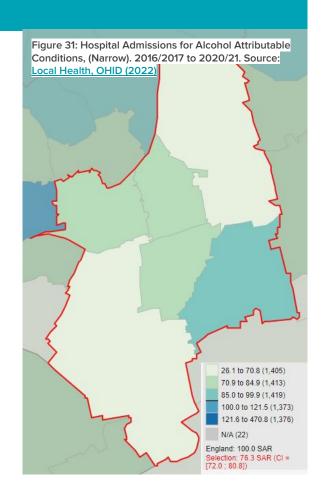
In England, alcohol is the leading cause of ill-health, disability and death in people aged 15 - 49 years. Alcohol has been identified as a causal factor in over 200 medical conditions including heart disease, depression, liver disease and mouth, throat, stomach, liver and breast cancers.

21% of the adult population in England regularly drink at levels that increase their risk of ill health. This equates to 11,584 residents in Wallington INT aged 16 and over.

In England and Wales, adults aged 16 -59 who reported drinking alcohol three or more days per week in the last month, were more than twice as likely to have used any drug, especially Class A drugs and cannabis.

Dependence: The latest information on alcohol dependence in England is reported in the <u>Adult Psychiatric Morbidity Survey 2014</u>. The survey found that 1.9% of men and 0.6% of women aged 16+ indicated probable dependence on alcohol using the AUDIT tool (Score 20+). This equates to 499 men and 174 women in Wallington INT. Probable dependence was most prevalent in men aged 35 to 44 years and women aged 16 to 24 years.

Fig. 31 shows the rate of hospital admissions for alcohol attributable conditions by wards in Wallington INT, standardised to England (100). Wallington INT scores 76.3 on average, meaning the rate of admissions due for alcohol attributable conditions is approximately 24% below the England average. There is, however, variation by ward, with South Beddington and Roundshaw scoring 92.3, just 8% below the national average.



Tobacco and E-cigarette use

Tobacco (adults)

In Sutton, as of 2021/22, <u>12.8% of adults were current smokers</u>. 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 Wallington INT, there are an estimated 6,555 current smokers within the area.

Fig. 32 shows that the percentage of active smokers within the INT has decreased from 2020 to 2022 (13.9% to 10.6%) according to the responses received as part of the GP Patient Survey.

Vaping (adults)

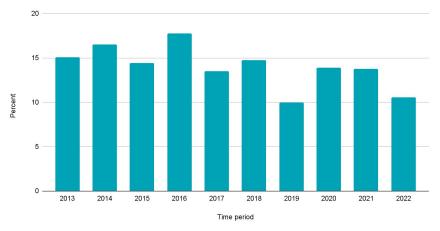
Vaping prevalence in England in 2021 was between <u>6.9% and 7.1%</u>, depending on the survey, which equates to between 3.1 and 3.2 million adults who vape. Applying this figure to Wallington INT, there are an estimated 3.733 adults using a vape in the area.

Tobacco (young people):

<u>In England</u> 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 to Wallington INT, 456 young people have tried smoking.

Fig. 32: Percentage of adults who were current smokers, 2013-2022. Source: <u>Local Tobacco Control Profiles</u>, OHID (2023)

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



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 Wallington INT would mean 654 young people vape.

Age well



Pneumococcal disease describes infections caused by *Streptococcus pneumoniae*, such as sinusitis, otitis media, pneumonia, bacteraemia and meningitis. 72.5% of Wallington PCN patients over 65 had received a pneumococcal vaccine.



As of June 2023, 502 people living in Wallington INT have a Dementia diagnosis (0.73% of the resident population). Evidence suggests only 70.9% of the affected population have a diagnosis, meaning 214 people could be living without a diagnosis.



49.4% of patients aged 80 across Wallington INT received a shingles vaccination between the ages of 70 and 79, similar to the England average of 56.6%. There is considerable variation between GP surgeries, with as few as 1 in 3 patients in some practices receiving a vaccination.



The electronic frailty index (eFI, via SWL's Health Insights) is a tool that can be used to identify people as they progress through different levels of frailty, and is based on a person's needs, rather than service use. In Wallington INT, as of June 2023 1,337 residents registered with a GP have an eFI score indicating 'severe frailty'. 65% (868) are female and 35% (469) are male).



3,058 adults over the age of 65 live alone in Wallington INT, equating to 12% of all households in the INT area, comparable to the borough average (also 12%). These residents are at a higher risk of experiencing loneliness and social isolation.



In Wallington INT, the <u>rate of hip fractures in those aged</u> <u>65+ is 96.8</u> (comparable to the rate across England, which is normalised to 100). There is variation by ward, with falls estimated to be c.20% higher than the national average in Carshalton Central (a rate of 119.6).

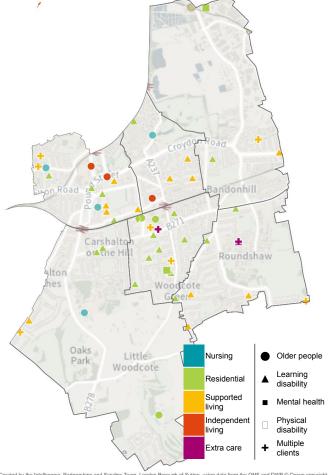
Bed based care

There are 53 bed based care facilities in the Wallington INT area, out of 142 in Sutton (37% of all facilities in the borough are in Wallington INT). For comparison, there are 15 bed based care facilities in Carshalton, 17 in CASS, and 57 in Central Sutton. A breakdown by type of provision and INT is in Appendix 4, and is available in the Council's Market Position Statement. More detail about the provision in Wallington INT is below.

Fig. 33 shows that southern Wallington and Carshalton are particularly well-served for residential and supported living bed-based care within the INT area, but there are fewer nursing homes and independent living facilities in this part of the borough. In total, there are:

- 4 nursing care homes for older people, each specialising in dementia
- 25 residential care homes of which:
 - 19 are for people with learning disabilities
 - 2 support people people with mental health challenges,
 - 3 support older people (2 of which with a dementia speciality); and
 - 1 supports people with physical disabilities
- 19 supported living providers (known to the Council), including:
 - 13 that specialise in supporting people with learning disabilities 0
 - 2 that specialise in supporting people with physical disabilities
 - 1 that specialises in supporting people with dementia; and 0
 - The remaining 3 support people with a range of needs, including learning and 0 physical disabilities, sensory impairments, mental health and dementia
- 3 independent living facilities for people over 55
- 2 extra care facilities; one specialising in supporting people; with learning disabilities, needing reablement, and people with dementia, and another supporting older people.

Fig 33. A map of bed based care facilities in Wallington INT (as of April 2023)



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Life Expectancy

Life expectancy is the average number of years a person could expect to live based on contemporary mortality rates. Life expectancy at birth is the number of years, for a particular area and time period, that a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life.

The figures reflect the mortality of those living in the area in each time period not the life expectancy of those born in the area as they are likely to live elsewhere during their lifetime and the mortality rates of the area are liable to change.

Life expectancy at birth for males in Wallington INT is comparable to Sutton, with the exceptior of in Carshalton South and Clockhouse, which has higher life expectancy at birth than the average. Life expectancy at birth varies by 2.1 years across the INT (with the lowest, 80.0 years, in Wallington South, and the highest, 82.1 years, in Carshalton South and Clockhouse) (Fig. 34).

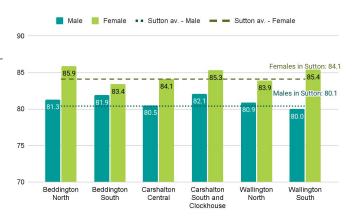
Life expectancy at birth for females in Wallington INT is also comparable to that seen across the borough, with the exception of Wallington South, which has higher life expectancy at birth than the average.

Life expectancy at birth varies by 2.5 years across the INT (with the lowest, 83.4 years, in Beddington South, and the highest, 85.9 years in Beddington North) (Fig.34).

The biggest gap in life expectancy at birth between males and females is in Wallington South, with a gap of 5.4 years. The smallest is in Beddington South, with a gap of 1.5 years.

Fig 34. Life expectancy in Wallington INT by ward, 2016-2020. Source: Local Health, OHID (2023)

NB: data is only available by pre April 2021 wards



Preventable mortality among people under the age of 75

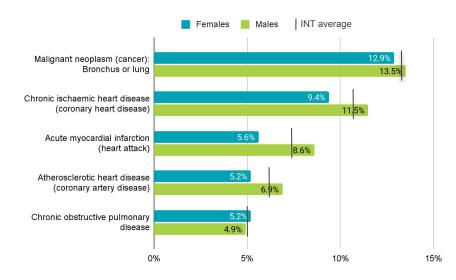
A <u>preventable death</u> is one which could have been mainly avoided through effective public health and primary prevention interventions, before the onset of diseases or injuries. <u>Examples of preventable mortality</u> include include cardiovascular disease and some types of cancer.

The five causes of preventable death with the highest prevalence (as a proportion of all preventable deaths) in Wallington INT, as shown by Fig.22, 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 Wallington INT.

The data also highlights an inequality between the sexes, with more preventable deaths among males under 75 than females. Lung cancer, heart disease and attack and coronary artery disease are all more likely amongst males than females in Wallington.

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.

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



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.

Appendices

Wallington

Appendix 1 - Public Health Resources

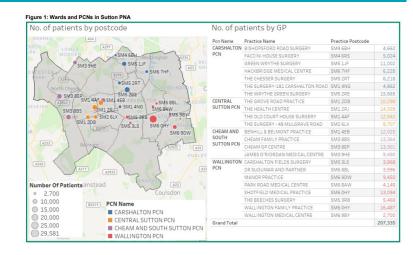
Pharmaceutical Needs Assessment (PNA)

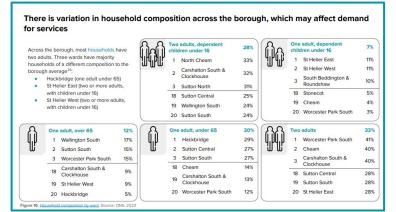
In 2022 Sutton refreshed its PNA. The PNA is a report on the pharmaceutical service needs of a local population. It is used to identify any gaps in current services or improvements that could be made in future pharmaceutical service provision.

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





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.

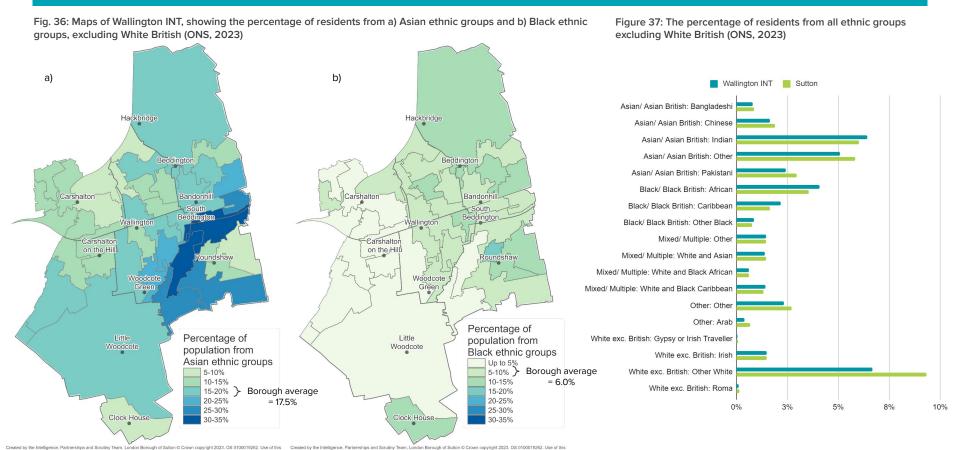
24 hour gyms have entered the leisure market in Sutton and the use of green spaces has been revolutionised by events like parkrun. Health apps, digital fitness programmes and gamification (e.g. <u>Geocaching</u>) have also helped to broaden the appeal of outdoor activities.

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.



Appendix 2: Ethnicity

data is subject to terms and conditions



data is subject to terms and conditions

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	% of people over 65 by LSOA	Census (March 2021)	
People in lower income groups	% of people employed receiving UC by LSOA	DWP (February 2023)	
People without a job	% unemployed by LSOA	Census (March 2021)	
People in social housing	% of households socially rented by LSOA	Census (March 2021)	
People with disabilities	% people whose day to day life is limited a little or a lot by LSOA	Census (March 2021)	
People with fewer educational qualifications	% 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	% 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 - Bed-based care provision by INT

	Extra Care	Independent Living	Supported Living	Residential Care	Nursing Care	Total by INT
Carshalton	0	9	2	4	0	15
CASS	0	0	8	5	4	17
Central Sutton	2	9	14	22	10	57
Wallington	2	3	19	25	4	53
Total by provision	4	21	43	56	18	142

Appendix 5: Qualification Levels in England

Level 1

Level 1 qualifications are:

- first certificate
- GCSE grades 3, 2, 1 or grades D, E, F, G
- level 1 award
- level 1 certificate
- level 1 diploma
- level 1 ESOL
- level 1 essential skills
- level 1 functional skills
- level 1 national vocational qualification (NVQ)
- music grades 1, 2 and 3

Level 2

Level 2 qualifications are:

- CSE grade 1
- GCSE grades 9, 8, 7, 6, 5, 4
 or grades A*, A, B, C
- intermediate apprenticeship
- level 2 award
- level 2 certificate
- level 2 diploma
- level 2 ESOL
- level 2 essential skills
- level 2 functional skills
- level 2 national certificate
- level 2 national diploma
- level 2 NVQ
- music grades 4 and 5
- O level grade A. B or C

Level 3

Level 3 qualifications are:

- A level
- access to higher education diploma
- advanced apprenticeship
- applied general
- AS level
- international Baccalaureate diploma
- level 3 award
- level 3 certificate
- level 3 diploma
- level 3 ESOL
- level 3 national certificate
- level 3 national diploma
- level 3 NVQ
- music grades 6, 7 and 8
- T Level
- tech level

Level 4

Level 4 qualifications are:

- certificate of higher education (CertHE)
- higher apprenticeship
- higher national certificate (HNC)
- level 4 award
- level 4 certificate
- level 4 diploma
- level 4 NVQ

Level 5

Level 5 qualifications are:

- diploma of higher education (DipHE)
- foundation degree
- higher national diploma (HND)
- level 5 award
- level 5 certificate
- level 5 diploma
- level 5 NVQ

Level 6

Level 6 qualifications are:

- degree apprenticeship
- degree with honours for example bachelor of the arts (BA) hons, bachelor of science (BSc) hons
- graduate certificate
- graduate diploma
- level 6 award
- level 6 certificate
- level 6 diploma
- level 6 NVQ
- ordinary degree without honours

Level 7

Level 7 qualifications are:

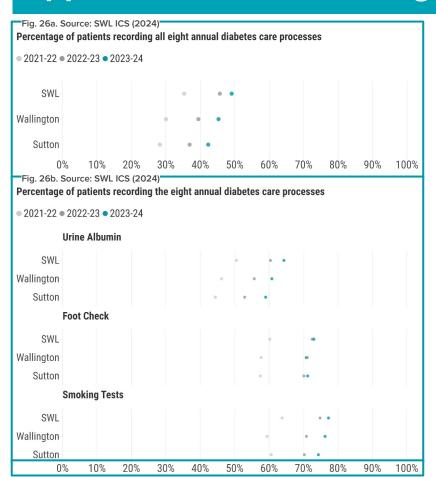
- integrated master's degree, for example master of engineering (MEng)
- level 7 award
- level 7 certificate
- level 7 diploma
- level 7 NVQ
- master's degree, for example master of arts (MA), master of science (MSc)
- postgraduate certificate
- postgraduate certificate in education (PGCE)
- postgraduate diploma

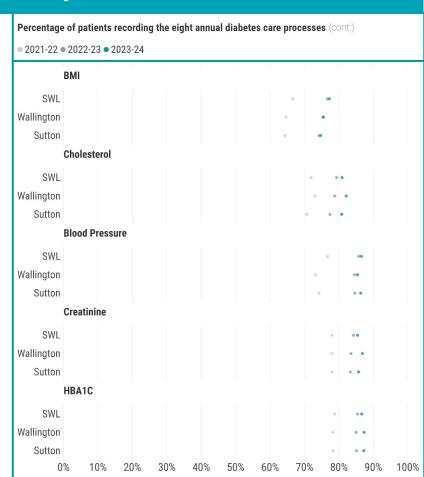
Level 8

Level 8 qualifications are:

- doctorate, for example doctor of philosophy (PhD or DPhil)
 - level 8 award
 - level 8 certificate
 - level 8 diploma

Appendix 6a - Diabetes eight care processes





Appendix 6b - Diabetes three treatment targets

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

