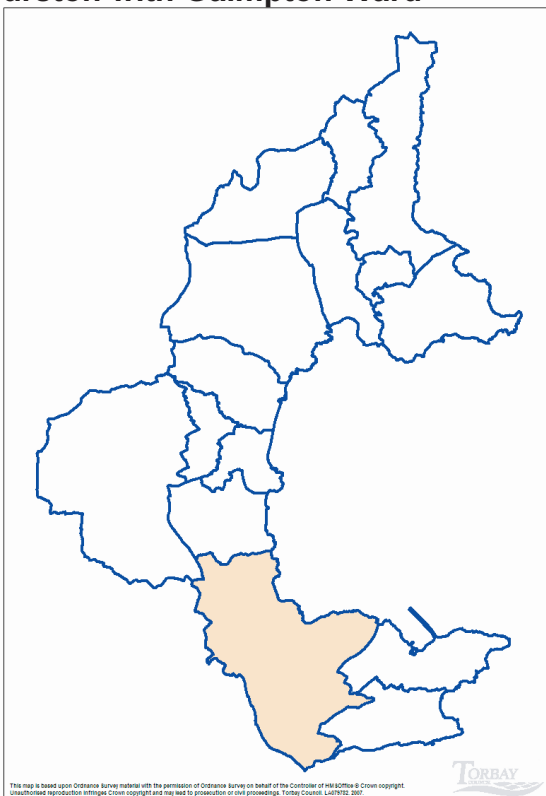


Overview

Churston with Galmpton is one of six wards in the town of Paignton, with over half (51.2%) of residents in the ward attending a GP practice in the Paignton South zone. Interestingly, 34.2% attend a practice in the Brixham zone and 14.1% a GP in the Paignton North zone.

Out of 15 wards, Churston with Galmpton ranks as the 1st (top) healthiest in Torbay. The level of health and well being has been measured using a combination of health, social and demographic indicators. Out of a total of 157 indicators, Churston with Galmpton had 14 that were significantly *worse or higher* than the England average and 29 that were significantly *better or lower* than the England average, with the remaining 114 not showing any significance.

Churston with Galmpton Ward



Joint Strategic Needs Assessment

- Churston with Galmpton has fewer challenges than those in other parts of Torbay.
- There is a higher than national proportion of people aged 75 and over.

- There is a higher prevalence of residents with a limiting long term illness.

How you can help

Elected members have strong links to local people and understand the needs of the community. They have an opportunity to give a voice to those who are seldom heard but frequently have the greatest need.

- Understand your ward needs.
- Be aware of the overall Torbay picture.
- Use your influence to promote health, wellbeing and independence to reduce inequalities.

Practical activities could include:

1. Engagement with your own community to identify projects that could improve the health and well being of your own ward.
2. Use of Community Partnership meetings to debate and agree projects.

For an assessment of the suitability & sustainability of any potential projects, please forward the proposed details to the relevant Community Partnership – log on to: www.torcom.org.uk to find your Local Community Partnership.

Consider

How might the projects impact on, not only this ward, but also on Torbay's health and wellbeing as a whole?

15 indicators have been chosen as the most important for Torbay overall for health related issues. Economic issues have already been highlighted in the ward profiles – available at www.torbay.gov.uk/wardprofiles.

A high level summary of 15 of the 157 indicators for Churston with Galmpton are given overleaf. The indicators are compared against both the England and Torbay averages.

How to interpret:

First look at the circle to see how this ward is doing. This can then be compared to the England average (central vertical line). The best ward in the Bay is to the far right, and the worst ward to the far left. The diamond represents where Torbay as a whole sits compared to the England average. The associated colour coding represents the relative level of statistical significance associated to the indicator, with **green** indicating a significantly 'better or lower' than the England figure, and **red** a significantly 'worse or higher' figure. No colouring shows that there is no statistical significance for that indicator.

Please note that assumptions of 'better or lower' or 'worse or higher' have been made on the basis of an increase or decrease in expected demand for services.

Indicator		Ward Value	Torbay Value	England Value	Churston-with-Galmpton
Outcomes	1. Male Life Expectancy	79.5	76.5	76.9	
	2. Female Life Expectancy	84.6	81.7	81.1	
	3. Suicides and undetermined injuries	*	12.3	8.5	
Demography	4. Proportion of population aged 75+	17.4	11.5	7.8	
	5. Proportion of all persons aged 50 and over, living alone	20.2	25.6	24.2	
	6. Child Poverty	0.0	26.1	28.5	
Health status of the population	7. Smoking Prevalence	15.1	26.7	26.0	
	8. Obesity in Children	7.5	12.9	13.2	
	9. Obesity in Adults	19.5	19.4	21.8	
	10. Alcohol related liver disease	*	212.4	100.0	
	11. Teenage conceptions	16.4	46.6	41.6	
	12. Pregnancy Conditions (elective)	145.5	195.1	100.0	
	13. Injuries and Poisonings	114.5	128.7	100.0	
Social Context	14. Mental or behavioural disease code for IB / SDA	17.9	43.6	29.3	
	15. IB / SDA benefit claimants	6.4	10.1	7.2	

- ◇ Torbay Figure, Not significantly different from the England figure.
- Ward Figure, Not significantly different from the England figure.
- ◆ Torbay Figure, Significantly 'Better or Lower' than the England figure.
- Ward Figure, Significantly 'Better or Lower' than the England figure.
- ◆ Torbay Figure, Significantly 'Worse or Higher' than the England figure.
- Ward Figure, Significantly 'Worse or Higher' than the England figure.
- * Numbers are too small to include

Ward Worst England Average Ward Best

NOTES ON ABOVE INDICATORS:

1. Male Life Expectancy at birth in years (based on 2003 - 2005 data).

2. Female Life Expectancy at birth in years (based on 2003 - 2005 data).

3. Suicides and undetermined injuries all ages DASR per 100,000 (based on 2003-2005 data).

4. Proportion of population aged 75+ in 2007 - based on registered patient distribution model. (2004 based, 2006 Sub National Population Projections). ONS.

5. Proportion of all persons aged 50 and over, living alone (2001 Census). ONS.

Glossary :
DASR - Direct Age Standardised Rate.
SAR - Standardised Admission Rate.

6. Proportion of children (0-19) living in the top quartile of areas most deprived for, Income deprivation affecting children, Index of Multiple Deprivation 2004. Office of the Deputy Prime Minister (now Department for Communities and Local Government).

7. Estimates of Healthy Lifestyle Behaviours - Smoking Prevalence (NatCen Synthetic Estimates of Healthy Lifestyle Behaviours at Ward Level from HSE, Adults 16+) .

8. Obesity in Children - taken from height and weight measurements of children in Reception and Year 6 (2006).

9. Estimates of Healthy Lifestyle Behaviours - Obesity in Adults (NatCen Synthetic Estimates of Healthy Lifestyle Behaviours at Ward Level from HSE, Adults 16+).

10. Alcohol related liver disease hospital admissions (SAR) - (2004/05 - 2006/07).

HSE - Health Survey for England
IB / SDA - Incapacity Benefit / Severe Disablement Allowance.

11. Teenage conceptions (<18 rate per 1,000) - (2003 - 2005).

12. Elective (planned) admissions (2006) for Pregnancy Conditions. One of the top 10 causes of elective admission. Principally terminations.

13. Injuries and Poisonings - non-elective admissions (SAR) - (2006).

14. Proportion of claimants of Incapacity Benefit / Severe Disablement Allowance (IB / SDA) with mental or behavioural disease code for claim reason (Nov 2006). Department of Work and Pensions.

15. Proportion of working age population in receipt of IB / SDA (Nov 2006). Department for Work and Pensions. Working age population based on 2001 Census ONS.

ONS - Office for National Statistics

For further information, please contact the Public Health Team at Torbay Care Trust

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