

England Analysis: NHS Outcome Framework Health Inequalities Indicators 2016/17



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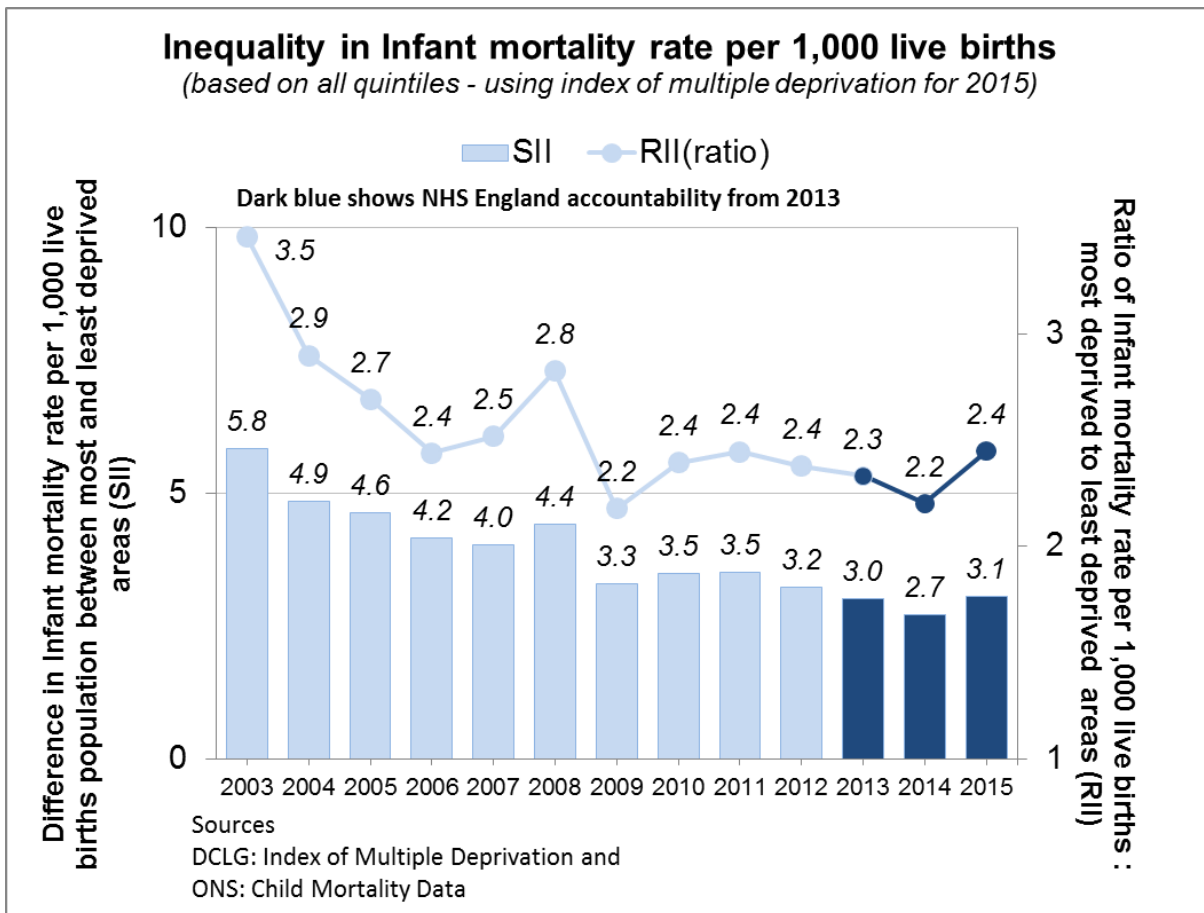
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A number of indicators show positive progress in reducing health inequalities, or positive change from the previous trend:¹

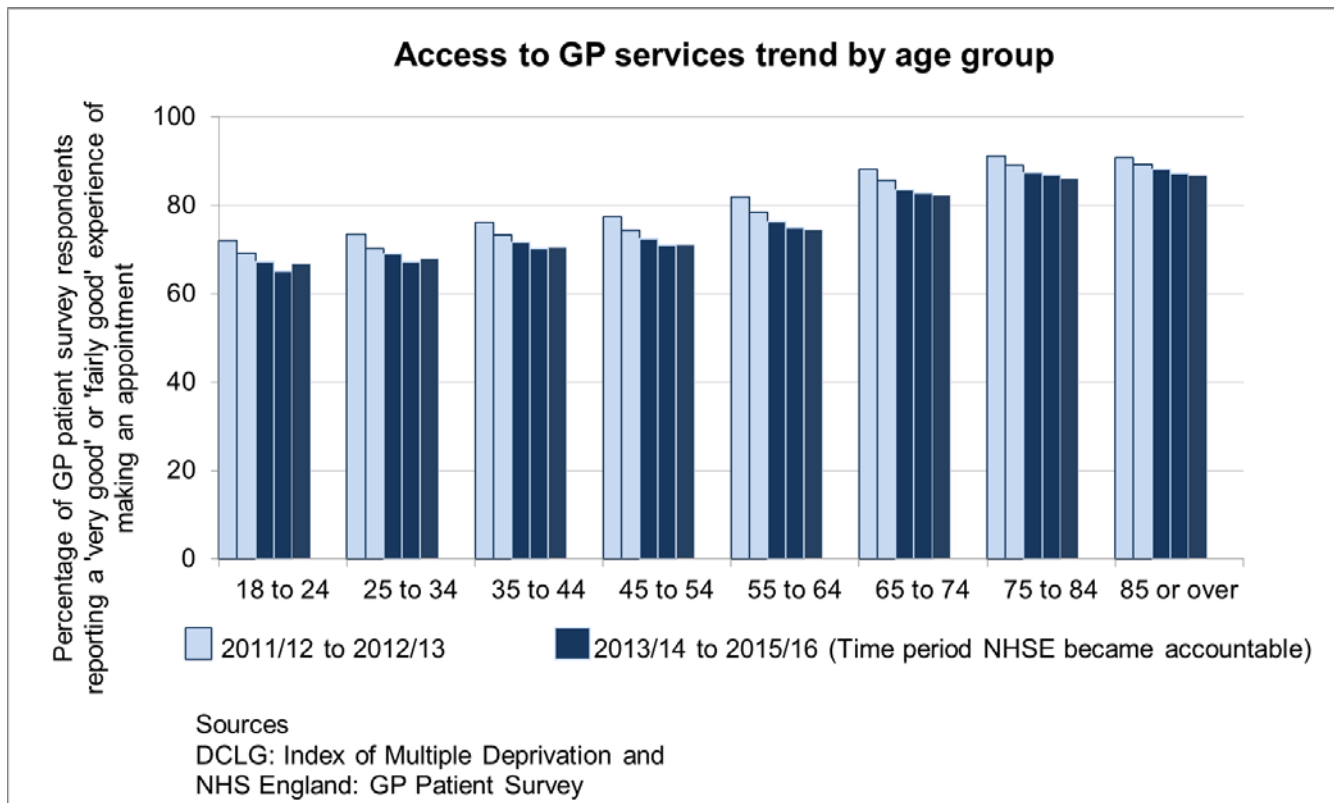
- **Infant mortality by deprivation** has narrowed in recent years (2011-2014), however there was a noticeable increase in 2015. Previous to 2011, there were similar increases in 2008 and 2010 but these did not lead to an increasing trend. The greatest reductions in the infant mortality rate, over the longer term, were for the most deprived cohort of the population.



- **Health Related Quality of Life:** For people with long-term conditions, the gap between most Black and Minority Ethnic (BME) groups, reporting the lowest scores for health-related quality of life, and White British people narrowed. However, in 2015/16 there were increases in health inequalities for Bangladeshi people and Gypsies and Irish Travellers compared to White British people.
- **Experience of GP Services:** There were slight improvements in reported satisfaction of GP services, between 2014/15 and 2015/16, for the youngest two age groups (18-24 and 25-34). Over the same period, there was also a slight improvement in the experience of bisexual people compared to heterosexual people.
- **Access to GP services:** A high proportion of people reported their experience of making a GP appointment as 'very good' or 'fairly good' across all age groups.

¹ Where the inequalities gap reduced by over 1% between 2014/15 and 2015/16 or a showed consistent decreasing trend.

The chart below shows increasing satisfaction levels for 2015/16 for 18-24 year olds and 25-34 year olds.



For the following indicators, the change in the health inequality gap, between the most and least deprived areas, is consistent with the previous flat trend or previous widening trend²:

- **Potential Years of Life Lost (PYLL)** for causes considered amenable to healthcare, showed little change (2013 to 2014);
- **Emergency admissions for acute conditions** that should not usually require hospital admission, showed consistent widening (2013 to 2015).

For GP patient experience indicators, the picture is complex. For the years referenced below since 2013, the health inequalities gap for patients reporting 'very good' or 'fairly good' experiences of their GP surgery has remained fairly static.³ However, there are a number of exceptions, for example:

² Change in inequality gap between -1% and +1% between 2014/15 and 2015/16.

³ Unless otherwise stated, the time period referenced is between 2013/14 to 2015/16.

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- whilst the experience of people in Black and Minority Ethnic Groups, who reported the lowest scores, compared to White British people, has remained fairly static, it has worsened for Bangladeshi people and Gypsies and Irish Travellers;
- whilst the experience of lesbian and gay people, who reported the lowest scores, compared to heterosexual people has remained fairly static, the experience has improved for bisexual people;
- across age groups, between 2014/15 and 2015/16, experience improved for the youngest two age groups (18-24 and 25-34), after worsening between 2013/14 and 2014/15 for these two groups.

For the following indicators, between 2014/15 and 2015/16, the change in the health inequality gap by area of deprivation worsened slightly⁴:

- **Health-Related Quality of Life for people with long-term conditions** showed a slight increase in the health inequalities gap between 2013/14 and 2015/16;
- **Unplanned Hospitalisation for Chronic Ambulatory Care Sensitive Conditions**, the health inequalities gap no longer showed a decreasing trend but instead flattened out between 2014/15 and 2015/16.

For the following indicators, the change in the health inequality gap between 2013/14 and 2015/16 showed poorer relative progress;⁵

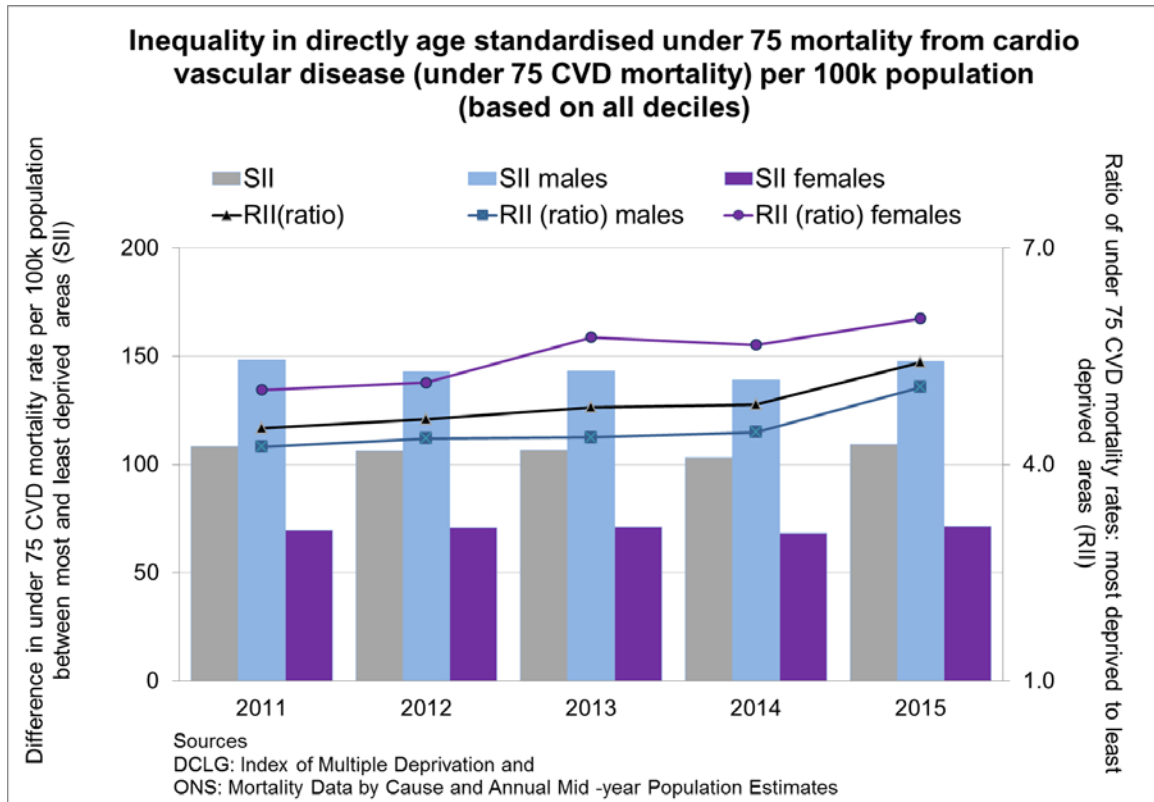
- **Life expectancy at 75** by deprivation for both females and males;
- **Under 75 cancer mortality** by deprivation between 2014 and 2015;
- People who reported their **experience of GP services** as 'very good' or 'fairly good' by deprivation;⁶
- **Under 75 mortality from cardiovascular disease** by deprivation.⁷

⁴ Change in inequality gap between -1% and +1% between 2014/15 and 2015/16.

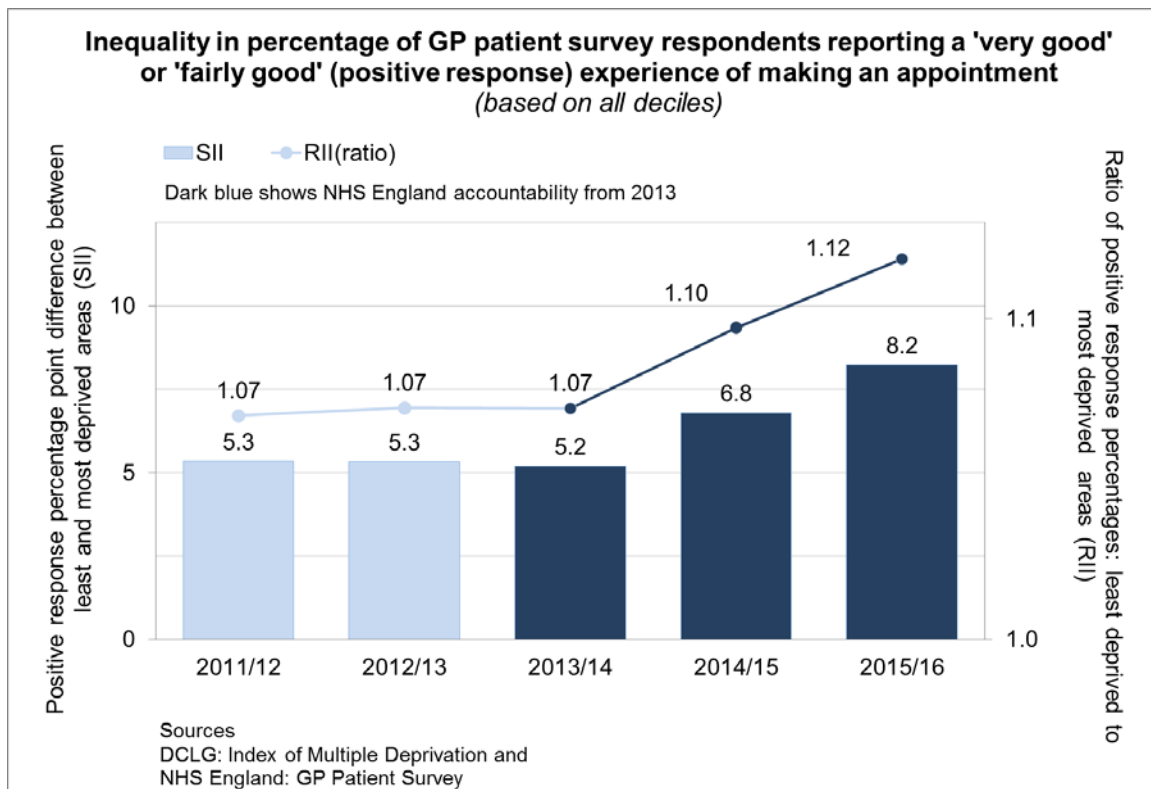
⁵ Inequalities gap increased by over 1% between 2014/15 and 2015/16, or where there is a consistent increasing trend.

⁶ Source: <https://gp-patient.co.uk/>

⁷ Note that since overall CVD mortality has been reducing, the effect has been to increase the relative ratio.



- Access to GP appointments:** The gap between the most and least deprived areas worsened for those reporting 'very good' or 'fairly good' access to GP appointments.⁸



⁸ Source: <https://gp-patient.co.uk/>