

## Business Intelligence Hub

### Joint Health and Wellbeing Strategy 2022-2032:

Performance Monitoring for March 2024 Board.

Indicator Trends – Reduce Health Inequalities in specific groups.

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### Contents

Goal 6: Reduce health inequalities in specific groups .....	2
Gap in employment rate for mental health clients and the overall employment rate .....	2
Gap in employment rate for those with learning disabilities and the overall employment rate ..	3
Excess under 75 mortality rate in adults with severe mental illness (New definition from Aug 2021).....	4

## Goal 6: Reduce health inequalities in specific groups

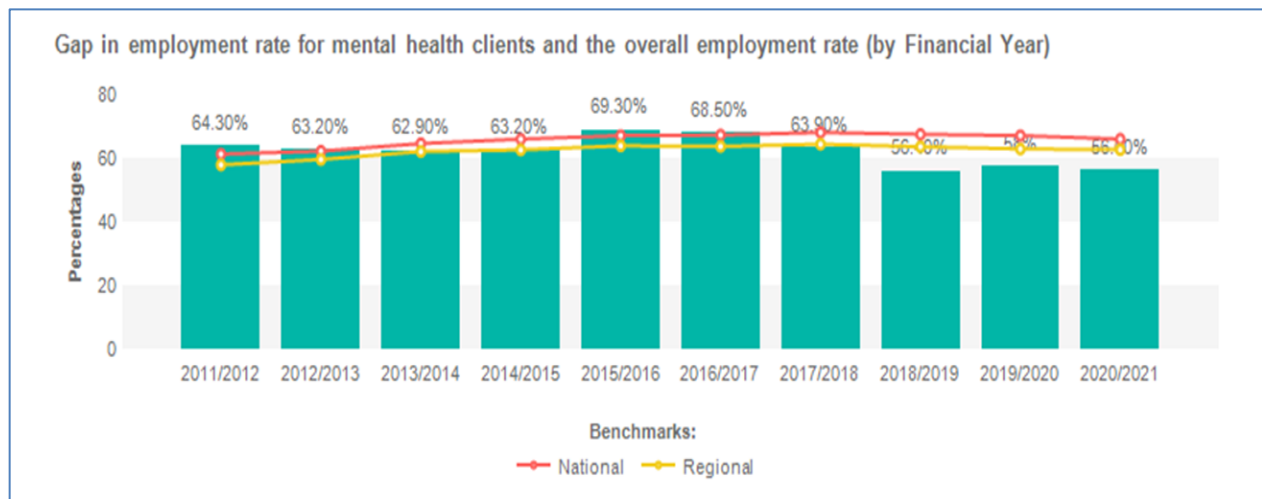
### Gap in employment rate for mental health clients and the overall employment rate

This indicator<sup>1</sup> identifies the gap in the employment rate for those who are in contact with secondary mental health services and the overall employment rate.

The most recent data for York (2021/22) shows a 64.8 percentage points gap between the employment rate for people in contact with secondary mental health services (17%) and the overall employment rate (81.8%).

The gap in York is slightly lower compared with the national (69.4%) and regional (66.3%) gaps. The gap is larger for males in York (69.9%) compared with females (60.8%). This pattern can also be seen in the national and regional data.

Prior to 2021/22, the definition of someone in contact with mental health services was related to the Care Programme Approach (CPA) rather than the Community Mental Health Framework so trend data for this indicator prior to 2021/22 is not directly comparable with the current value. For reference, however, the trend data for the period 2011/12 to 2020/21 is shown below. Using this previous definition there had been a reduction in the gap in York from a peak of 69.3% in 2015/16 to 56.6% in 2020/21.



<sup>1</sup> The percentage point gap between the percentage of adults (aged 18 - 69) in contact with secondary mental health services at the end of the reporting period who are recorded as being employed and the percentage of all respondents (aged 16 - 64) in the Labour Force Survey classed as employed.

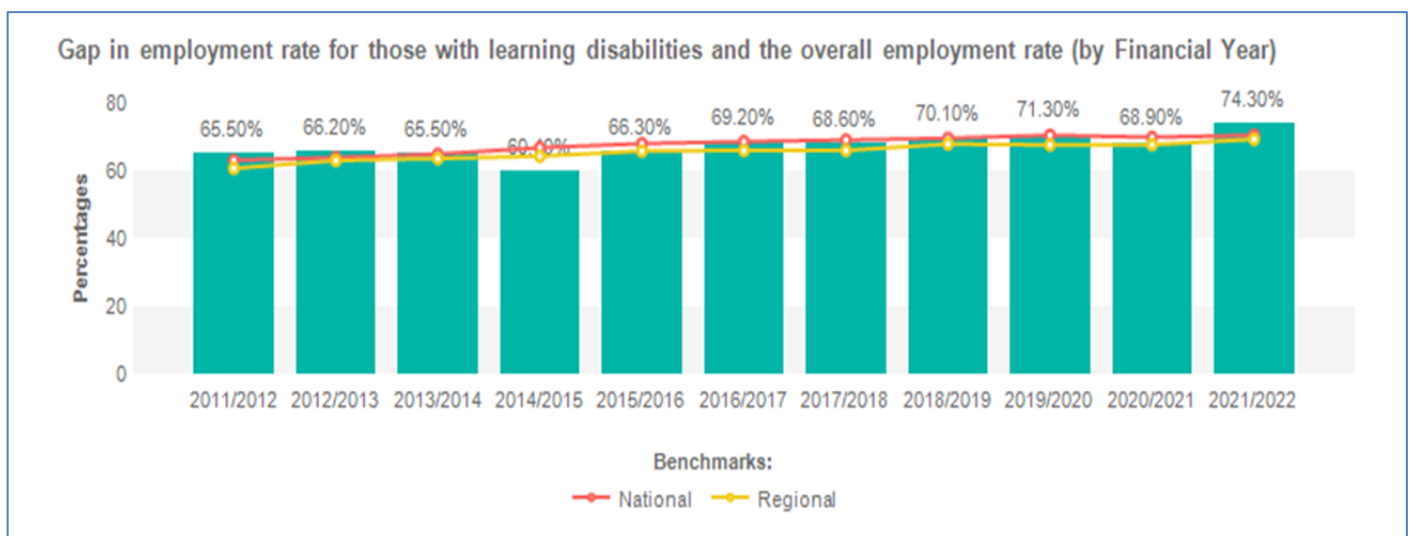
## Gap in employment rate for those with learning disabilities and the overall employment rate

This indicator<sup>2</sup> identifies the gap in the employment rate between those who are in receipt of long-term support for a learning disability (aged 18 to 64) and the overall employment rate.

The most recent data for York (2021/22) shows a **74.3** percentage points gap between the employment rate for people in receipt of long term support for a learning disability (7.5%) and the overall employment rate (81.8%).

The gap in York is wider than the national (70.6%) and regional (69.4%) averages. The gap is larger for males in York (77%) compared with females (73%). This pattern can also be seen in the national and regional data.

Trend data for the period 2011/12 to 2021/22 is shown below. The gap has risen steadily from a low point of 60.4% in 2014/15 to the current value of 74.3% in 2021/22.



<sup>2</sup> The percentage point gap between the percentage of working age learning disabled clients known to Councils with Adult Social Services Responsibilities (CASSRs) in paid employment (aged 18 to 64, this includes clients who received long term support during the year and appear in the LTS001a measure (table 1a) of the annual statutory return on Short and Long Term Support (SALT) with a primary support reason of Learning Disability Support. Support settings Nursing, Residential, and Community are included; Prison setting is excluded.), and the percentage of all respondents in the Labour Force Survey classed as employed (aged 16 to 64).

## Excess under 75 mortality rate in adults with severe mental illness (New definition from Aug 2021)

This indicator is a measure of excess premature mortality experienced by adults with severe mental illness compared with adults without severe mental illness<sup>3</sup>.

For the most recent three year period 2018-2020 (shown as 2020/21 on the chart below) the excess mortality for people with severe mental illness(SMI) in York is **425.3%**. This is a higher level of excess mortality compared with national (389.9%) and regional (344.2%) averages.

The breakdown of the excess mortality percentage is as follows<sup>4</sup>.

- The directly age standardised rate of premature mortality per 100,000 of adults with SMI is **1,699.2**
- The directly age standardised rate of premature mortality per 100,000 of adults without SMI is **323.5**.
- The difference between the two is **1,375.7**.
- The difference divided by the non-SMI rate (323.5) and expressed as a % is **425.3%**

Trend data is available for 4 years. The excess rate in York has increased from 385.5% in 2018/19 to the present value of 425.3% in 2020/21.

The excess mortality rate is higher amongst males in York (443.9%) compared with females (431%).

One of the key risk factors is that people with a long-standing mental health problem are twice as likely to smoke, with the highest rates among people with psychosis or bipolar disorder. This is monitored elsewhere in the Joint Health and Wellbeing Strategy (Goal 3: Reduce smoking rates).

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<sup>3</sup> SMI is defined as having a referral to secondary mental health services in the five years preceding death.

<sup>4</sup> The difference in the DSR of premature mortality in adults (age 18-74) with SMI and that in adults (age 18-74) without SMI, divided by the DSR of premature mortality for adults (age 18-74) without SMI, expressed as a percentage.  $((\text{DSR-SMI} - \text{DSR-nSMI}) / \text{DSR-nSMI}) * 100$

Excess under 75 mortality rate in adults with serious mental illness (New definition from Aug 2021) (by Financial Year)

