

Stamford Engagement - Stakeholder Information Pack



Lincolnshire
Integrated Care Board

November 2024 – January 25



Introduction

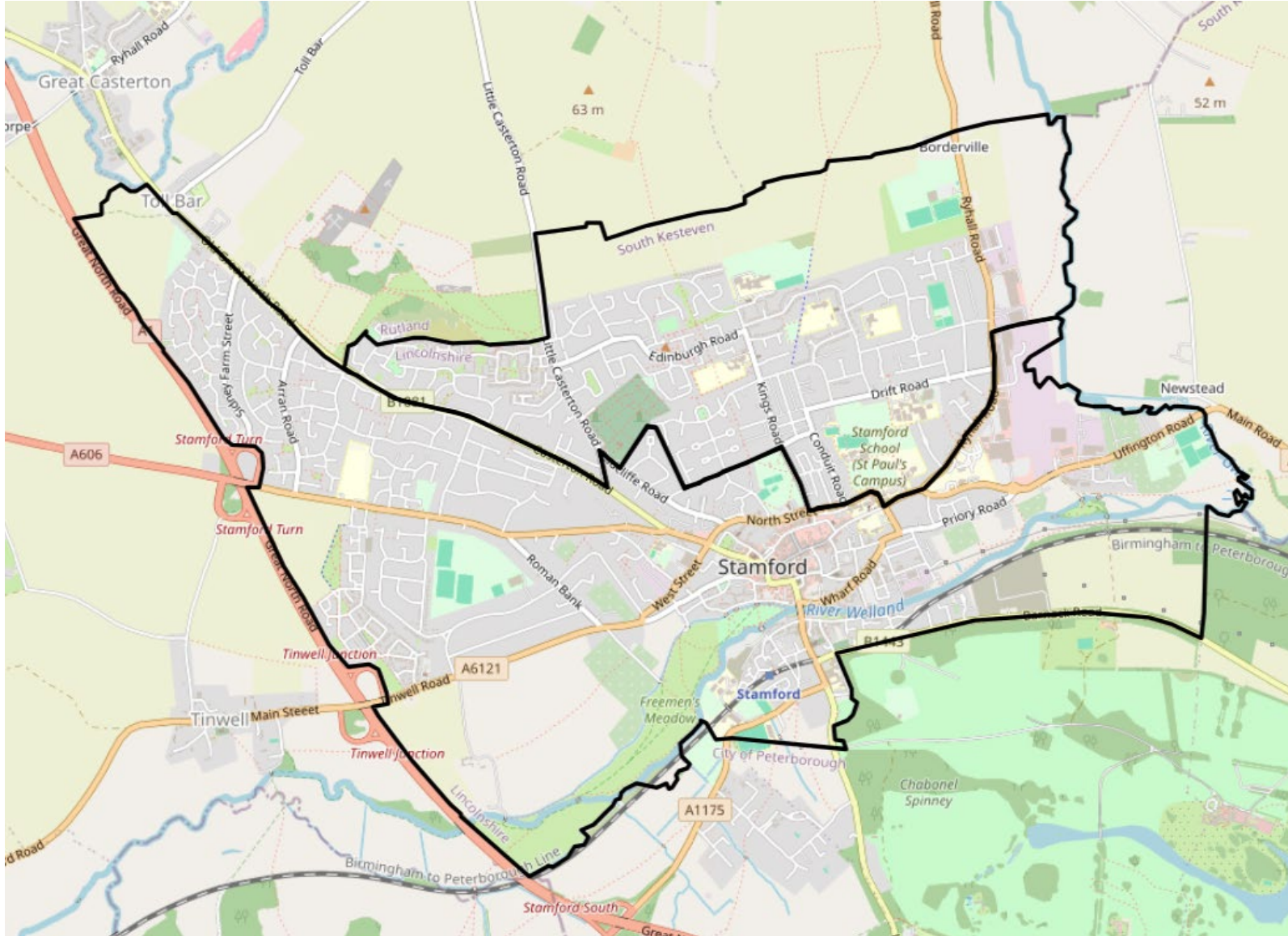
Back in 2021 there were significant concerns expressed about General Practice matters in Stamford along with the concerns about projected population growth. The NHS Lincolnshire Clinical Commissioning Group agreed to engage with the public when the time was right to do so. Given recovery process since COVID 19 and confirmation of the housing growth now is the right time to undertake this work. As the successor NHS authority, the ICB is committed to fulfilling the CCG's original agreement.

In July 2022 the Health and Care Act 2022 established the NHS Lincolnshire Integrated Care Board (ICB) as the successor NHS authority to the CCG in the county. The ICB has overall planning responsibility for the NHS in the Lincolnshire and a key part of this work is listening to and engaging with the public and their representatives about local health and the NHS. Several communities across the county have raised concerns on potential housing growth impact on the NHS and the ICB have also agreed to engage with them on this matter.

Purpose

In the context of the projected housing and population growth the ICB will engage with the public to understand their concern about the impact this may have on health and wellbeing services as the population grows. During the engagement the public may wish to discuss other concerns or issues they are having, and this will also be welcomed.

Population Overview



The resident population of Stamford in the 2021 Census was 20,749 (an increase of 5.3% from the 2011 Census).

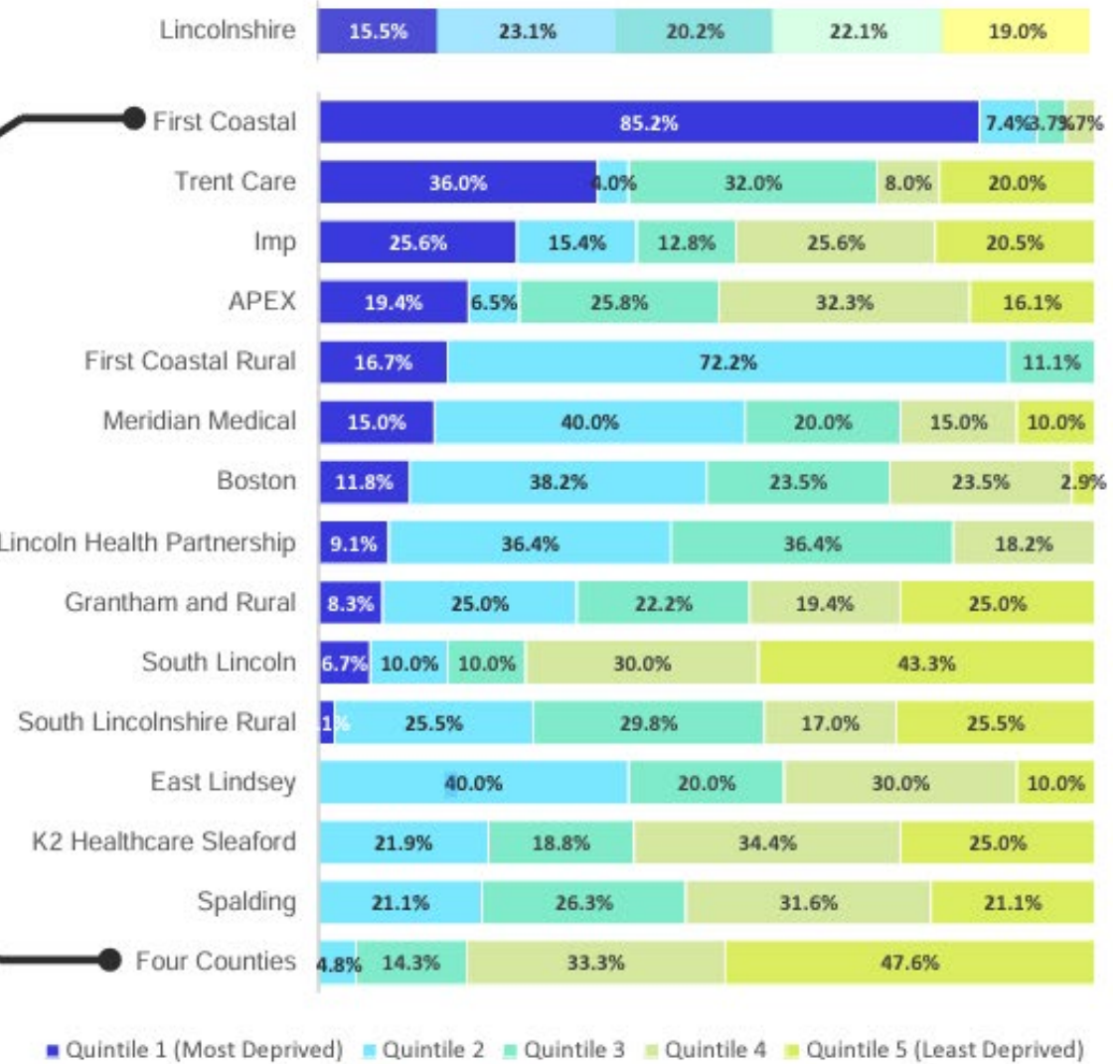
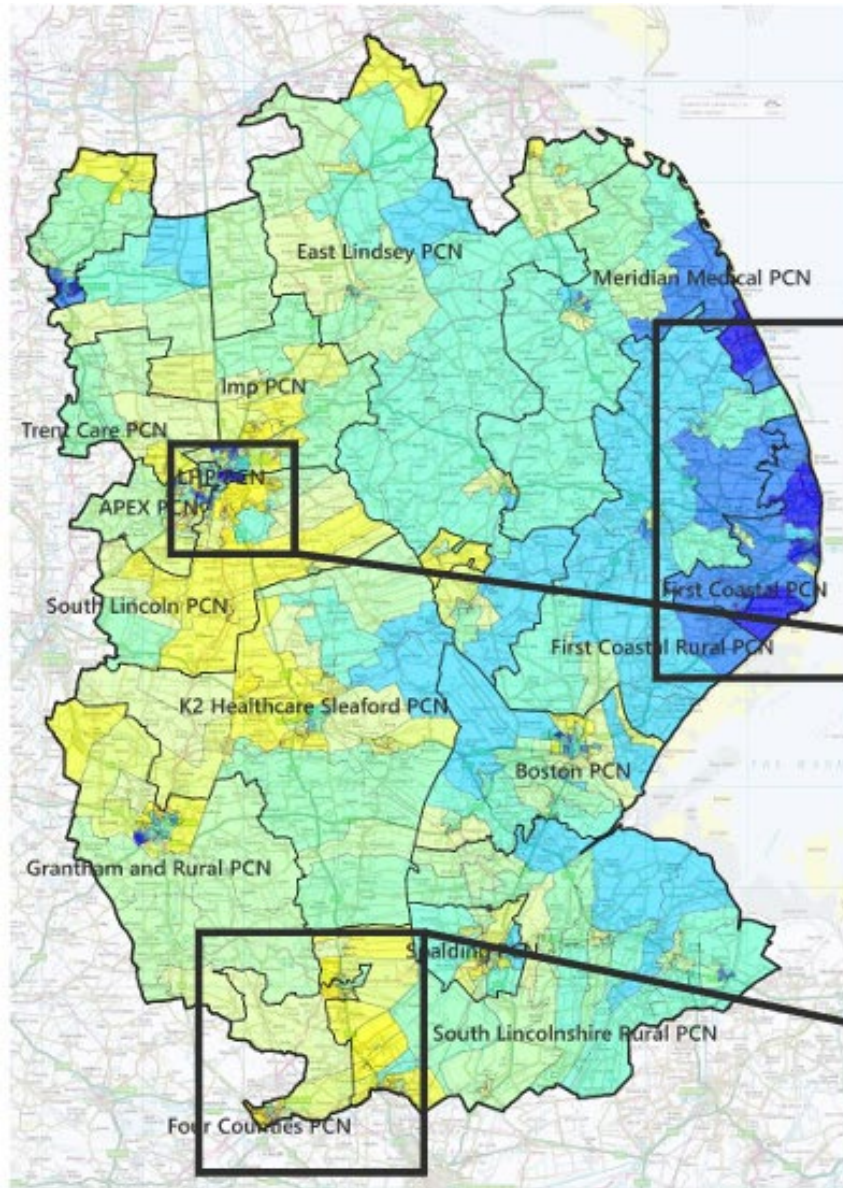
No Stamford residents live in one of the most deprived areas of England. More than half the population live in the least deprived areas of England.

27,089 patients are registered at the two General Practices in Stamford (Sheepmarket Surgery, and St. Mary's Medical Centre) – July 2024. There has been a gradual decrease in the number of patients registered at these practices, with many opting to register at the nearby Eppingham Medical Centre in Rutland.

More than 90% of Stamford residents are from a White British background.

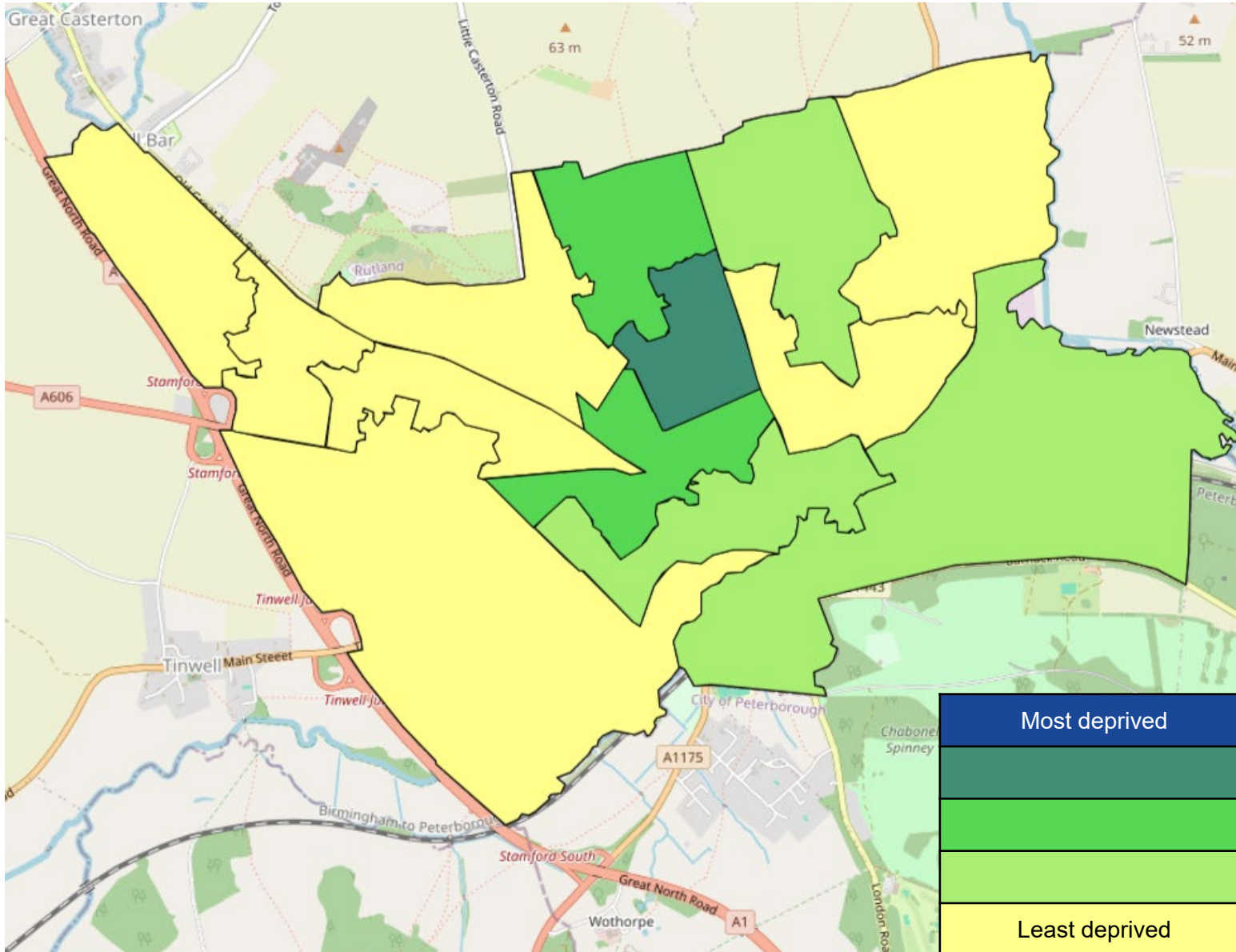
Sources: [Census 2021](#);
[Patients Registered at a GP Practice \(July 2024\)](#)

Deprivation Distribution In Lincolnshire



Data Provided by the Public Health Division Lincolnshire County Council

Deprivation in Stamford



There are no Lower Layer Super Output Areas (LSOA) in Stamford which are the most deprived in Lincolnshire.

The most deprived area covers the Bluecoat School and the surrounding residential streets.

Sources: [English Indices of Deprivation \(2019\)](#)

Life Expectancy and Healthy Life Expectancy (compared to England)

Middle Super Output Area (MSOA)	Female Life Expectancy	Female Healthy Life Expectancy	Male Life Expectancy	Male Healthy Life Expectancy
Stamford Central, West and South	85.7	71.0	83.3	68.9
Stamford North	83.9	66.7	79.3	65.3

Stamford Central, West, and South MSOA:

- Female and male life expectancy are statistically better than the England average of 83.2 years and 79.5 years for females and males, respectively.
- Female and male healthy life expectancy are statistically better than the England average of 64.8 years and 63.5 years for females and males, respectively.

Stamford North MSOA:

- Female and male life expectancy are statistically similar to the England average of 83.2 years and 79.5 years for females and males, respectively.
- Female and male healthy life expectancy are statistically better than the England average of 64.8 years and 63.5 years for females and males, respectively.

Better than the England average

Similar to the England average

Sources: [Local Health - Life Expectancy by MSOA](#);
[Office for National Statistics - Healthy Life Expectancy by MSOA](#)

Life Expectancy and Healthy Life Expectancy (compared to Lincolnshire)

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Stamford Central, West and South	85.7	71.0	83.3	68.9
Stamford North	83.9	66.7	79.3	65.3

Stamford Central, West, and South MSOA:

- Female and male life expectancy are statistically better than the Lincolnshire average of 82.8 years and 79.2 years for females and males, respectively.
- Female and male healthy life expectancy are statistically better than the Lincolnshire average of 64.6 years and 63.4 years for females and males, respectively.

Stamford North MSOA:

- Female life expectancy is statistically better than the Lincolnshire average of 82.8 years, but male life expectancy is statistically similar to the Lincolnshire average of 79.2 years.
- Female and male healthy life expectancy are statistically better than the Lincolnshire average of 64.6 years and 63.4 years for females and males, respectively.

Better than the Lincs average

Similar to the Lincs average

Sources: [Local Health - Life Expectancy by MSOA](#);
[Office for National Statistics - Healthy Life Expectancy by MSOA](#)

Life Expectancy and Healthy Life Expectancy (Lincolnshire Rank)

Middle Super Output Area (MSOA)	Female Life Expectancy	Female Healthy Life Expectancy	Male Life Expectancy	Male Healthy Life Expectancy
Skegness Town (Most Deprived MSOA in Lincs)	77.9	58.2	71.5	53.8
Stamford Central, West and South	85.7	71.0	83.3	68.9
Stamford North	83.9	66.7	79.3	65.3
Washingborough & Branston (Least Deprived MSOA in Lincs)	85.6	69.9	83.0	68.4

Females in Stamford Central, West and South MSOA live on average:

7.8 years longer than those in Skegness Town
12.8 years in health longer than those in Skegness Town

Males in Stamford Central, West and South MSOA live on average:

11.8 years longer than those in Skegness Town
15.1 years in health longer than those in Skegness Town

Females in Stamford North MSOA live on average:

6 years longer than those in Skegness Town
8.5 years in health longer than those in Skegness Town

Males in North MSOA live on average:

7.8 years longer than those in Skegness Town
11.5 years in health longer than those in Skegness Town

Better than the Lincs average

Similar to the Lincs average

Sources: [Local Health - Life Expectancy by MSOA](#);
[Office for National Statistics - Healthy Life Expectancy by MSOA](#)

Health Inclusion Groups

Health Inclusion Group	Stamford	Lincolnshire Average
CORE 20 (Most Deprived population)	0% (0/20,749)	14.5% (111,344/768364)
Military Veterans	7.8% (1,338/17,110*)	7.0% (44,812/640,215*)
Ethnic Minority (non-White British)	9.6% (1,991/20,750)	10.8% (82,644/768,364)
Disabled (under the Disability Act 2010)	16.9% (3,507/20,750)	20.1% (154,573/768,364)
Learning Disability	0.4% (99/27,817)	0.6% (4,884/814,152)
Severe Mental Illness	0.7% (193/27,817)	0.9% (6,950/814,152)

Generally, there is a smaller proportion of people in these health inclusion groups who live in Stamford than there are compared to the Lincolnshire average. The exception to this concerns military veterans, where a greater proportion of the Stamford population are a veteran compared to Lincolnshire. This may be explained by Stamford's proximity to RAF Wittering.

Please note these are estimates based on the most recent available data.

* Denotes the 'Does Not Apply' option removed – this includes children not of a military serving age.

Sources: [Census 2021](#); [QOF 22/23](#)

Projected Population Growth – New Housing Estates

Two new housing estates proposed for Stamford (Monarch Park and Stamford North) will add 2000 homes and approximately 3898 new residents to Stamford by 2038 (construction due to commence in 2027). An anticipated 1563 new patients will register at Stamford Surgery by April 2038 – a combination of new patients from the new housing estates and general increase in the GP registered population.

Date	SS Registered Population Projections	Projections for new residents from new housing developments registering at LHS	Combined Projected Population
01/04/2024	27131	-	27131
01/04/2026	27364	-	27364
01/04/2028	27577	78	27655
01/04/2030	27765	260	28025
01/04/2032	27938	261	28199
01/04/2034	28101	260	28361
01/04/2036	28262	260	28522
01/04/2038	28434	260	28694

Sources: [Patients Registered at a GP Practice](#)

Projected Housing Growth Overview

There are several planning applications for housing developments in Stamford – the most pressing relates to Stamford North/Quarry Farm which crosses the Lincolnshire-Rutland boundary with 1,950 additional homes – circa 4,770 residents.

There are also further developments at Exeter Fields, Kettering Road, Stamford East and off Uffington Road, and North Street and collectively all the developments equate to 2,653 new homes and an estimated population of 6350.

On 30 July 2024, the Secretary of State for Housing, Communities and Local Government announced that mandatory housing targets for local areas were going to be reinstated. The proposed targets are currently out for consultation. The new housing target figures require South

Sources: [Census 2021](#);
[Patients Registered at a GP Practice \(July 2024\)](#)

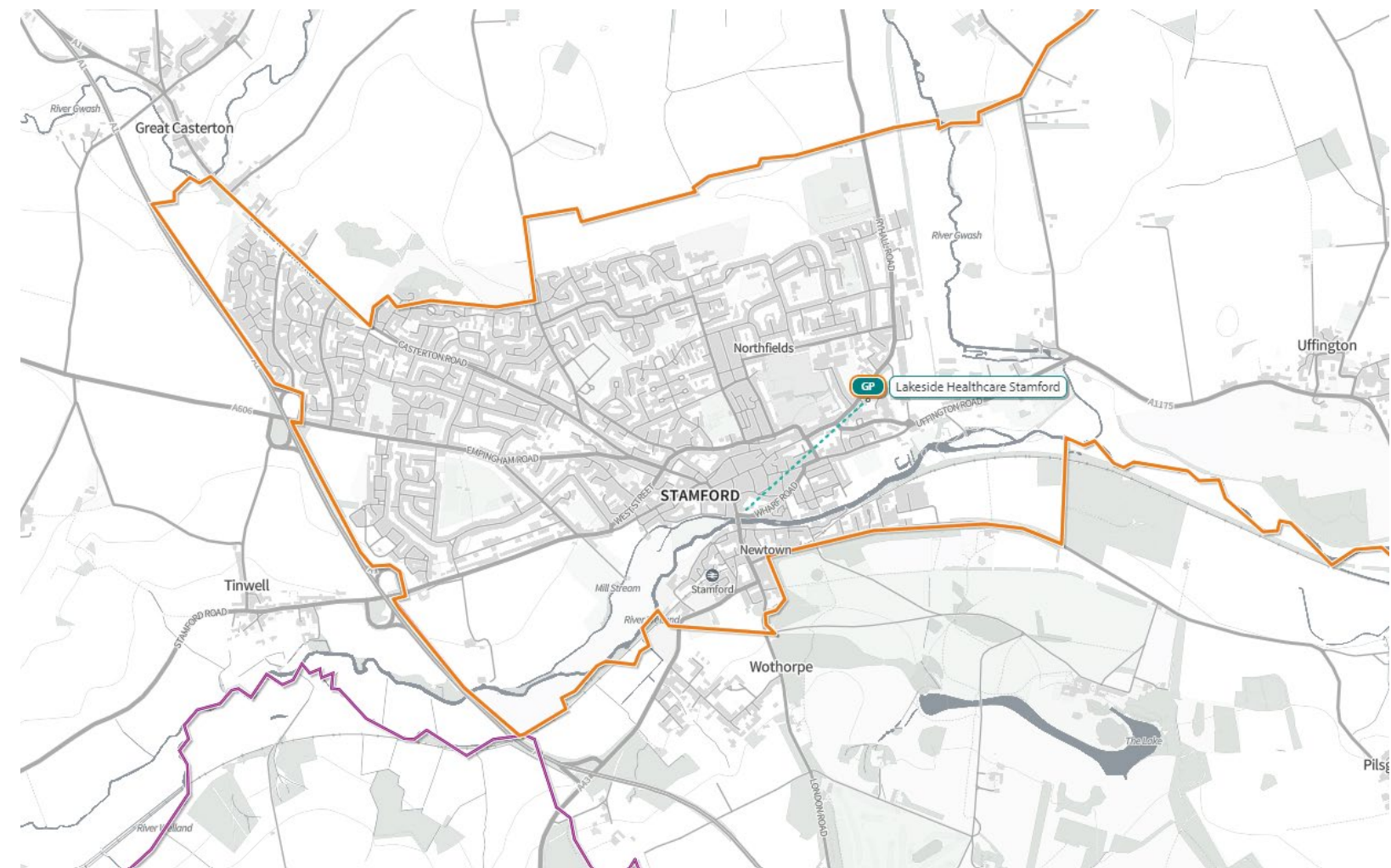
Projected Housing Growth Overview cont.

Kesteven District Council to build 912 new house per year, which is an increase of 225 house against the original requirement of 687. In Rutland the new target requires 264 houses to be built per year which is an increase of 141 against the original target.

Therefore, this could result in a further increase to the proposed number of planned new houses in Stamford, but this has not yet been confirmed.

The key aim is to understand the public thinking on the long-term growth and its potential impact on health and access to NHS Services, which is most important to the population for us to consider along with any other issue they would like to raise.

Sources: [Census 2021](#);
[Patients Registered at a GP Practice \(July 2024\)](#)



Burden of Disease – QOF Prevalence (22/23)

QOF Indicator	Stamford Surgery (%; number)	Lincolnshire ICB Average (%; number)
Asthma (6+ years)	8.1% (2,142)	7.3% (56,577)
Atrial Fibrillation (all ages)	2.9% (799)	2.8% (23,005)
Coronary Heart Disease (all ages)	3.5% (979)	4.0% (32,328)
Chronic Kidney Disease (18+ years)	7.5% (1,691)	7.2% (47,886)
COPD (all ages)	1.5% (429)	2.3% (19,073)
Depression (18+ years)	13.2% (2,985)	14.5% (95,953)
Diabetes (17+ years)	6.6% (1,523)	8.4% (56,393)
Epilepsy (18+ years)	0.7% (66)	0.9% (6,002)
Hypertension (all ages)	15.8% (4,400)	17.6% (143,657)
Learning Disability (all ages)	0.4% (99)	0.6% (4,884)
Mental Health (SMI – all ages)	0.7% (193)	0.9% (6,950)
Obesity (18+ years)	9.1% (2,060)	14.2% (94,193)
Osteoporosis (50+ years)	0.9% (131)	1.1% (4,077)

Sources: [Lakeside Healthcare Stamford 22/23 QOF results](#)

Prescribed Items (2021)

		Stamford Surgery	Lincolnshire
Cardiovascular Systems	Number of items	241,685	7,072,185
	Rate per 1,000 population	8279.4	8,741.9
Respiratory Systems	Number of items	46,260	1,334,441
	Rate per 1,000 population	1584.7	1,649.5
Musculoskeletal Systems	Number of items	19,837	541,888
	Rate per 1,000 population	679.6	669.8
Hypnotics and Anxiolytics	Number of items	11,871	288,543
	Rate per 1,000 population	406.7	356.7
Psychoses and Related Disorders	Number of items	5,427	199,958
	Rate per 1,000 population	185.9	247.2
Antidepressants	Number of items	58,010	1,608,933
	Rate per 1,000 population	1,987.3	1988.8

Better than the Lincolnshire average

Similar to the Lincolnshire average

Worse than the Lincolnshire average

Sources: [Four Counties PCN Profile \(LCC Public Health Department\)](#)

Health Outcomes of Interest

Cardiovascular Disease

Only 50.4% (890/1,765) of adults registered at Stamford Surgery who do not have a CVD diagnosis, but who have a QRISK score of 20% or more (indicating the patient has a 20% or greater chance of having a stroke or heart attack in the next 10 years), are on lipid lowering therapy. This is significantly worse than the Lincolnshire average of 62.3%. This may be related to the decrease in primary care provision in the past few years in Stamford, which may put those approximately 875 patients who are more likely to be admitted with an acute cardiovascular condition.

Asthma

According to QOF, asthma prevalence in patients aged 6 and over at Stamford Surgery (8.1%) is significantly higher than the Lincolnshire and national average. The Lincolnshire Joined Intelligence Dataset suggests 18.1% of patients registered at Stamford Surgery have asthma. Note these datasets are measured differently, with the Lincolnshire Joined Intelligence Dataset utilising data from secondary care and community care (amongst others).

The reason for the increased asthma prevalence is unclear, and will require further investigation. Stamford Surgery may be better at case finding and diagnosis, or there may be other reasons which suggest the local population is at an increased risk of contracting asthma.

Possible explanations that may contribute to this observation is that the A1, one of the busiest roads in England, runs past Stamford and the pollution arising from the motorway could be one of the contributing factors to a higher asthma prevalence. Stamford is also surrounded by arable land, where high levels of pollen and dust mites can contribute to developing or exacerbating asthma – especially in children and young people.

Sources: [CVD Prevent \(April 2023-March 2024\)](#);
[Lakeside Healthcare Stamford 22/23 QOF results](#);
[Lincolnshire Joined Intelligence Dataset \(April 2023 to March 2024\)](#)

Health Checks

Health Check	Stamford Surgery	Lincolnshire ICB Average
Learning Disability health check	84.4% (65/77)	83.6% (3628/4338)
Severe Mental Illness 6 health checks	87.4% (90/103)	74.3% (2284/3076)
Type 1 Diabetes – 8 care processes	48.0% (60*/125*)	45.0% (1,745*/3,875*)
Type 2 Diabetes – 8 care processes	64.5% (935*/1,450*)	57.9% (30,885*/53,350*)

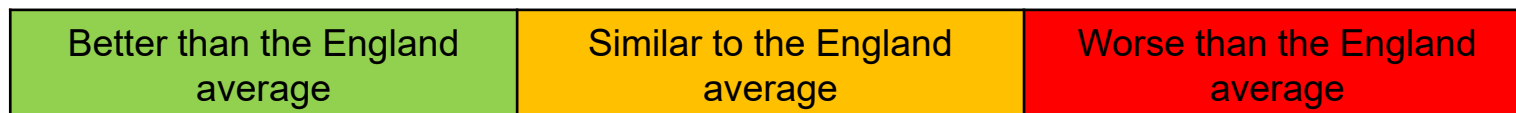
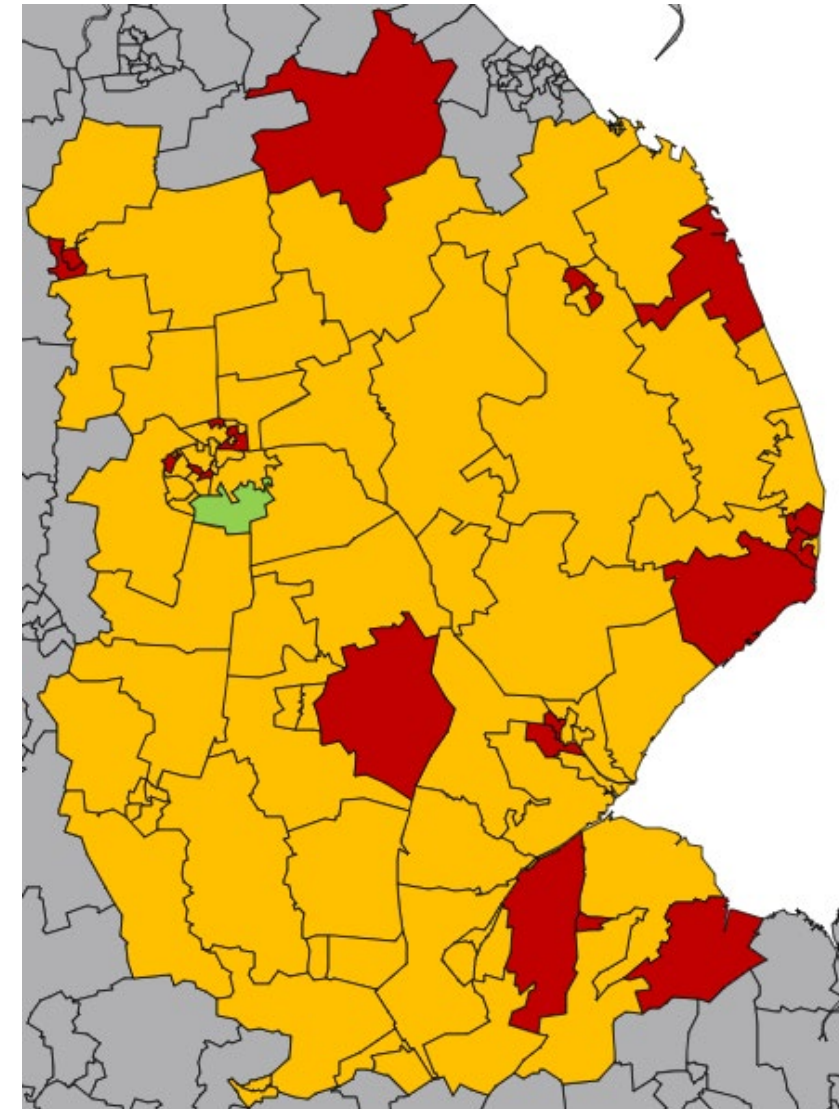
Generally, there is a greater proportion of the relevant population in Stamford who receive a health check for their various conditions.

Sources: [PCN DES dashboard 2023-2024 \(not publicly available\)](#);
[National Diabetes Audit \(Jan 2023 to March 2024\)](#)

*numbers rounded to nearest 5.

National Child Measurement Programme (NCMP) – Reception Overweight (including obesity)

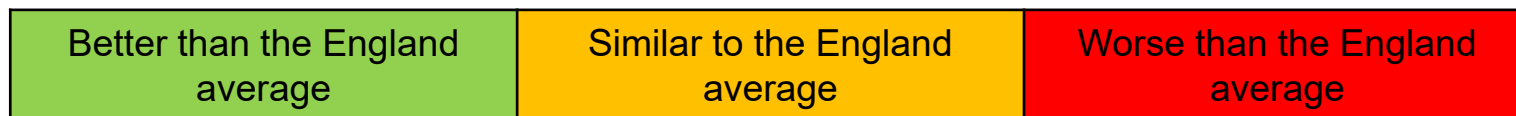
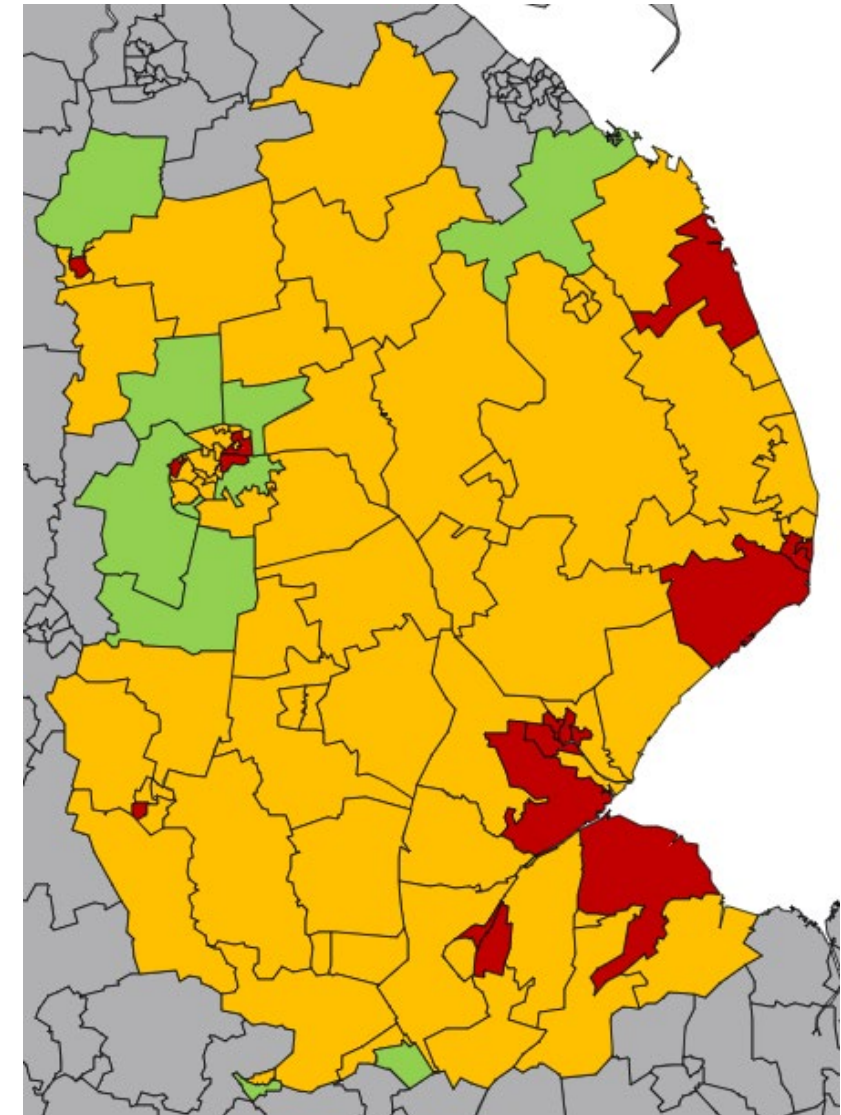
Middle Super Output Area (MSOA)	Reception overweight (including obesity)
Stamford Central, West and South	20.4%
Stamford North	20.5%



Sources: [NCMP 3-year pooled data \(20/21 to 22/23\)](#)

National Child Measurement Programme (NCMP) – Year 6 Overweight (including obesity)

Middle Super Output Area (MSOA)	Reception overweight (including obesity)
Stamford Central, West and South	28.8%
Stamford North	37.2%



Sources: [NCMP 3-year pooled data \(20/21 to 22/23\)](#)

Stamford Hospital Activity

Between October 2022 and September 2023:

- There were 6,197 attendances at the A&E (Minor Injuries Unit). 54.9% of service users were registered with Stamford Surgery.
- There were 582 day case activities. 25.8% of service users were registered with Stamford Surgery. Urology, plastic surgery, and orthopaedics were the specialists with the greatest level of activity.
- There were 17,628 outpatient appointments. 36.2% of service users were registered with Stamford Surgery. Physiotherapy, Urology, and Dermatology were the specialists with the greatest level of activity.

Waiting Lists

Length of time on a waiting list (as of 14/07/24)	Count of Open Patient Pathways for Stamford residents (% of total)	Count of Open Patient Pathways – Lincolnshire average (% of total)
Under 18 weeks	1689 (51.3%)	54,160 (50.1%)
18 to 52 weeks	1431 (43.5%)	48,588 (44.9%)
52 to 64 weeks	140 (4.3%)	4,352 (4.0%)
65 weeks or more	33 (1.0%)	999 (0.9%)
Total	3293	108,099

A greater proportion of Stamford residents have been on a waiting less than 18 weeks from referral.

The five specialities with the greatest number of open patient pathways for Stamford residents are: Trauma & Orthopaedics; Ear, Nose, and Throat (ENT); Ophthalmology; Cardiology; General Surgery (this category indicates further assessment required)

The five specialties with the greatest number of open patient pathways for Lincolnshire are: Ear, Nose, and Throat (ENT); Trauma & Orthopaedics; Ophthalmology; Gynaecology; Gastroenterology.

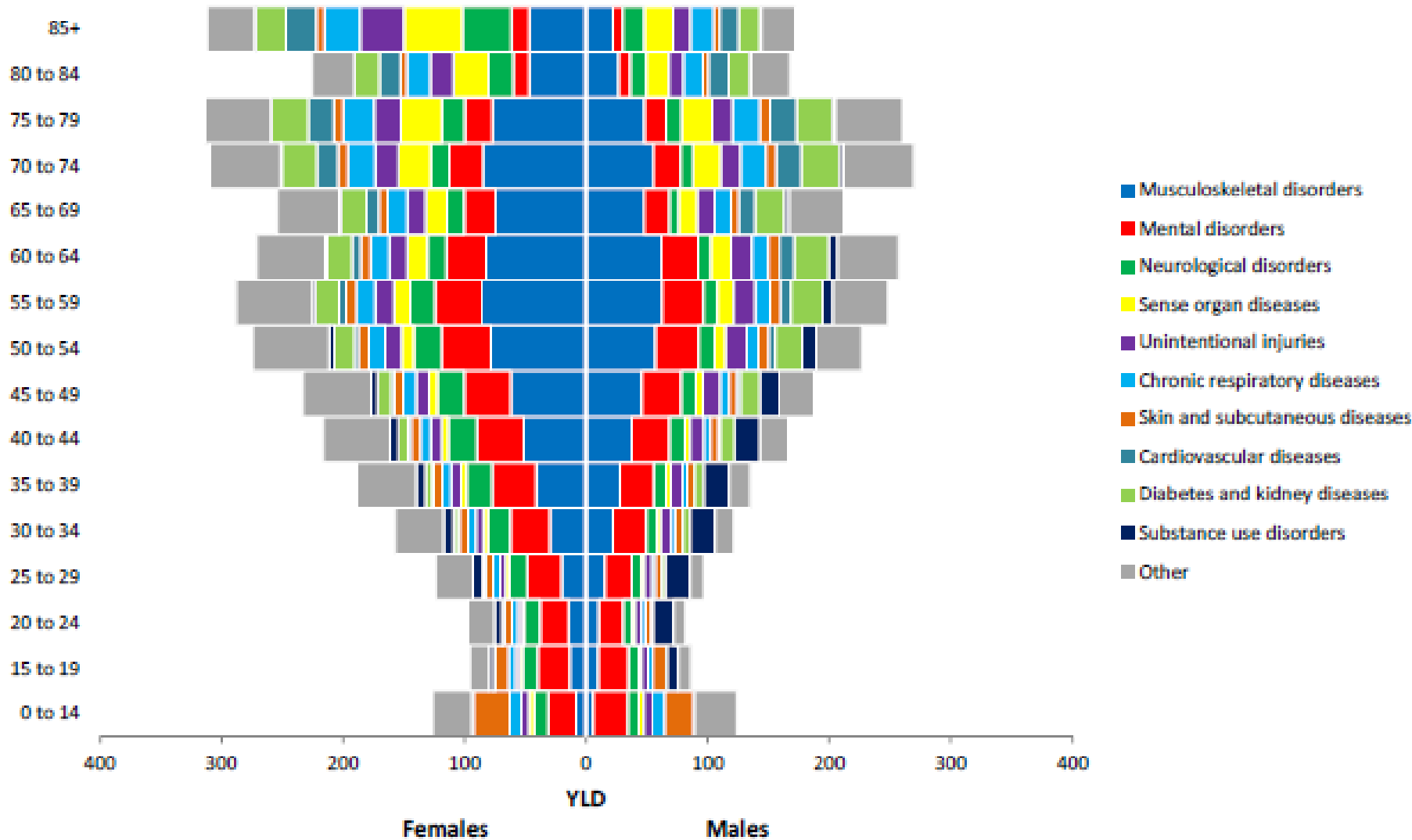
Sources: Waiting List Minimum Data Set (not publicly available)

Four Counties PCN – Patient Demographics from Experian

Population Segmentation Group	PCN Coverage %	Key Features	Communication Preferences	
			Prefer to be contacted by...	Does not prefer to be contacted by...
Aspiring Homemakers	21.4	Younger households Full-time employment Private Suburbs Affordable Housing Costs Starter Salaries	E-mail	Landline
Domestic Success	14.1	Families with children Upmarket suburban homes Owned with a mortgage High Internet Use Owns new technology	SMS E-mail	Mobile Landline
Suburban Stability	9.9	Families with children Upmarket suburban homes Owned with a mortgage High Internet Use Owns new technology	SMS E-mail	Mobile Landline
Senior Security	9.1	Elderly singles and couples Comfortable homes Additional pensions above state Don't like new technology Low mileage drivers	Landline Post Prefer not to be contacted	Mobile SMS E-mail
Country Living	7.6	Rural locations Higher self-employment High car ownership High use of Internet	Post Prefer not to be contacted	Mobile SMS
Penetration	62.1	Shows the proportion of the comparison area that is made up of your area's population for each Mosaic group.		

Sources: [Four Counties PCN Profile \(LCC Public Health Department\)](#)

Four Counties PCN – Years Lived with Disability



In the Four Counties PCN, musculoskeletal disorders (blue) and mental disorders (red) are the predominant causes of disability across most age groups for both males and females, with a noticeable prevalence in middle-aged groups (35-64). Neurological disorders (green) and sense organ diseases (yellow) also contribute significantly, particularly among older adults (65+).

Cardiovascular diseases (dark blue) and chronic respiratory diseases (teal) become more prominent in the elderly, while substance use disorders (navy blue) have a notable impact on younger adults and middle-aged groups.

Sources: [Four Counties PCN Profile \(LCC Public Health Department\)](#)

Four Counties PCN – Top 5 causes of death 2017-2021 by life stage

	Children and Young People	Working Age	Older People	Elderly	All People
1 st	Bone Cancer	Ischaemic Heart Diseases	Ischaemic Heart Diseases	Dementia	Ischaemic Heart Diseases
2 nd	Mesothelial And Soft Tissue Cancer	Digestive Cancer	Digestive Cancer	Cerebrovascular Diseases	Dementia
3 rd	Other Heart Disease	Lung Cancer	Lung Cancer	Ischaemic Heart Diseases	Digestive Cancer
4 th	Other Acute Lower Respiratory Infections	Liver Disease	Degenerative Disease	Degenerative Disease	Degenerative Disease
5 th	Respiratory Disease	Intentional Self-Harm	Respiratory Disease	Other Heart Disease	Cerebrovascular Diseases

Sources: [Four Counties PCN Profile \(LCC Public Health Department\)](#)