RUTLAND JOINT STRATEGIC NEEDS ASSESSMENT 2018

RUTLAND'S POPULATION

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FOREWORD

The purpose of the Joint Strategic Needs Assessment (JSNA) is to:

- To improve the health and wellbeing of the local community and reduce inequalities for all ages.

- To determine what actions the local authority, the local NHS and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing.

- To provide a source of relevant reference to the Local Authority, Clinical Commissioning Groups (CCGs) and NHS England for the commissioning of any future services.

The Local Authority and CCGs have equal and joint statutory responsibility to prepare a Joint Strategic Needs Assessment (JSNA) for Rutland, through the Health and Wellbeing Board. The Health and Social Care Act 2012 amended the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for Health and Wellbeing Boards in relation to JSNAs.

The JSNA offers an opportunity for the Local Authority, CCG and NHS England's plans for commissioning services to be informed by up to date information on the population that use their services. Where commissioning plans are not in line with the JSNA, the Local Authority, CCG and NHS England must be able to explain why.

EXECUTIVE SUMMARY

- The total population of Rutland in 2016 was 38,606, an increase of 1.5% since 2015. Rutland has an older population with almost a quarter (23.9%) of the population aged over 65 years, compared to 17.9% nationally.

- In 2016, the two wards with the highest populations are: Uppingham (4,788) and Oakham North West (4,461).

- The population of Rutland is projected to grow by 7.9% to 41,100 by 2039, an increase of 3,000 from 2016. Nationally the population is expected to increase at a faster rate, by 14.6% between 2016 and 2039.

- Nationally the over 65 population is predicted to grow by 53.5% and the over 85 population by 127.1% between 2016 and 2039. In Rutland, the over 65 population is predicted to grow at a slower rate than nationally, by 48.9% from 9,400 to 14,000 people, whilst the 85 and over population is predicted to grow at a faster rate than nationally, by 142.9%.

- The rise in Rutland's population is projected to gradually increase due to inward migration. The number of deaths is expected to exceed the number of births resulting in a fall in natural change.

- The military population accounts for 5.8% of the resident population in the county. In April 2018, there were 2,250 Armed Forces personnel and entitled civilian personnel registered in Rutland. 1,620 individuals (72%) were in the Armed Forces and 630 individuals (28%) were entitled civilian personnel. Entitled civilian personnel include service personnel family dependents and Ministry of Defence (MOD) employed civilian personnel who are entitled to care at MOD primary care facilities.

- HMP Stocken in Stretton, in the north east of the county, is a category C closed training prison. In December 2017, there were 841 male prisoners aged 21 and over in its care.

- The vast majority of Rutland residents live in less deprived areas; over 26,000 people (67.5% of the total population) live in neighbourhoods in the three least deprived deciles nationally. Just over 2,034 people live in neighbourhoods in the 50% most deprived deciles nationally, out of a total population of over 38,000.

- Overall, when looked at in the national context, Rutland is not particularly deprived. At a local authority level, using the overall Multiple Deprivation measure, the county is ranked 148th out of 152 upper tier authorities in England, where 1st is the most deprived.
    - o Within the Index of Multiple Deprivation, the Barriers to Housing and Services

domain appears to show some of the most extensive deprivation on a national scale, with 7 Lower Super Output Areas (areas with fairly consistent areas) in each of the top decile in England. This may be a result of the more rural nature of the county, and issues around dispersed population being able to access services, in addition to housing affordability.

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1.   Introduction

This chapter presents a comprehensive overview of the population in Rutland. The majority of indicators presented are from national sources so are subject to a time lag due to the time required for data collection, data analysis and publication. Where possible, comparisons have been made to national averages and local context has been included. We appreciate that this document uses technical language. This is due to the nature of the JSNA, which is intended for use by commissioning organisations such as local authorities and the NHS in developing their commissioning plans. One example is the use of statistical significance. A statistical significant result ensures the result is not likely to be caused by chance, for a given statistical significance level. Using these statistical tests improves the reliability of our evidence base which will help strengthen our commissioning based decisions

2.   Local Context

Rutland is a sparsely populated county with two market towns. Oakham is the larger of the two with the highest population density and is the main service centre for Rutland. Uppingham is the smaller of the towns and has a more limited range of facilities and fewer employment opportunities. Rutland has over forty villages which range in size from small hamlets with a few houses and no facilities to larger villages with a school, shop, post office, GP surgery and some employment opportunities. The county has large areas of farmland and is dominated by Rutland Water, an Anglian Water reservoir located at the centre of the county.

3.   Population Estimates

The Office for National statistics released 2016 population estimates on the 22th June 2017. These figures are released annually and are available on the ONS website[1]. The total population of Rutland in 2016 was 38,606, an increase of 1.5% since 2015. There are more males (19,744) than females (18,862) in Rutland. The population of males has risen by 1.8% and females by 1.1% since the previous year.

In 2016, 4.6% of the population was aged 0-4 (1,766 people), 18.0% was aged 5-19 (6,859 people), 53.4% was working age (20,320 people aged 20-64) and 23.9% was older than 65, this includes 3.3% of the total population that was aged 85 and over (1,249 people). Compared to nationally, Rutland has a higher proportion of the population aged over 65 and 85 respectively.[1]

The population pyramid below displays the 2016 population estimates by gender and five-year age band.

Figure 1 – Rutland 2016 population estimate by gender and five-year age band

2016 (bars) and 2015 (marks) population by sex and age
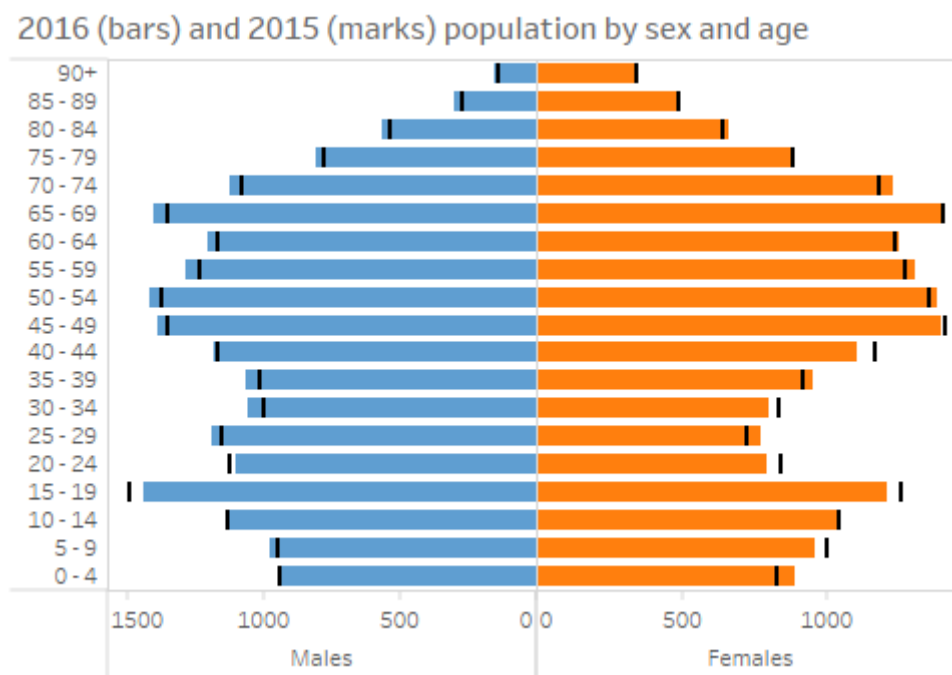
Source: ONS, 2017

The number of children aged 0-4 has increased by 3.9%. There has been an increase of 1.5% for working age population (aged 20-64) and 3.2% increase in the older population (aged 65 and over) since 2015.[1]

From the population pyramid above, Rutland has a higher number of males in 0-4 and 15-44 years age bands, while the age bands 55 and over have higher number of females than males. The number of people in the 15-24 years of age band experienced a decrease for both genders since 2015. Age bands 5-9, 30-34 and 40-44 years of age all saw a decrease for females since 2015. The number of people aged 65 and over experienced an increase in both genders across the age bands (3.2%).[1]

The 15-19 years of age band, the 45-54 years of age bands and the 65-69 years of age band have the highest population across all age bands. Rutland's ageing population has more females than males in the 85 plus age band (844 females compared to 457 males).[1]

3.1. Further information

For more detailed population estimate data, please view the dashboard at the link below:
https://public.tableau.com/profile/r.i.team.leicestershire.county.council#!/vizhome/2016DistrictPopulationEstimatesDashboard/2015-16PopulationEstimates

4.   Population Projections – 2016-39

The Office for National statistics released the 2014-based Subnational population projections on 25th May 2016[2]. The 2014-based population projections provide population figures by every year up to 2039. These projections provide estimates of the future population of English regions, local authorities and clinical commissioning groups. The projections are trend-based and demographic assumptions are based on levels of births, changing economic circumstances or other factors that might have on demographic behavior. The trends for these projections take into account information from the 2011 Census.

The population of Rutland is projected to grow by 7.9% to 41,100 by 2039, an increase of 3,000 from 2016. Nationally the population is expected to increase at a faster rate than Rutland, by 14.6% between 2016 and 2039. In Rutland, the number of females will grow to 20,000, an increase of 8.1% by 2039, whilst the number of males will grow to 21,100, and increase of 7.7% by 2039. The population pyramid below shows the 2039 Rutland population projections by gender and five-year age band.[2]
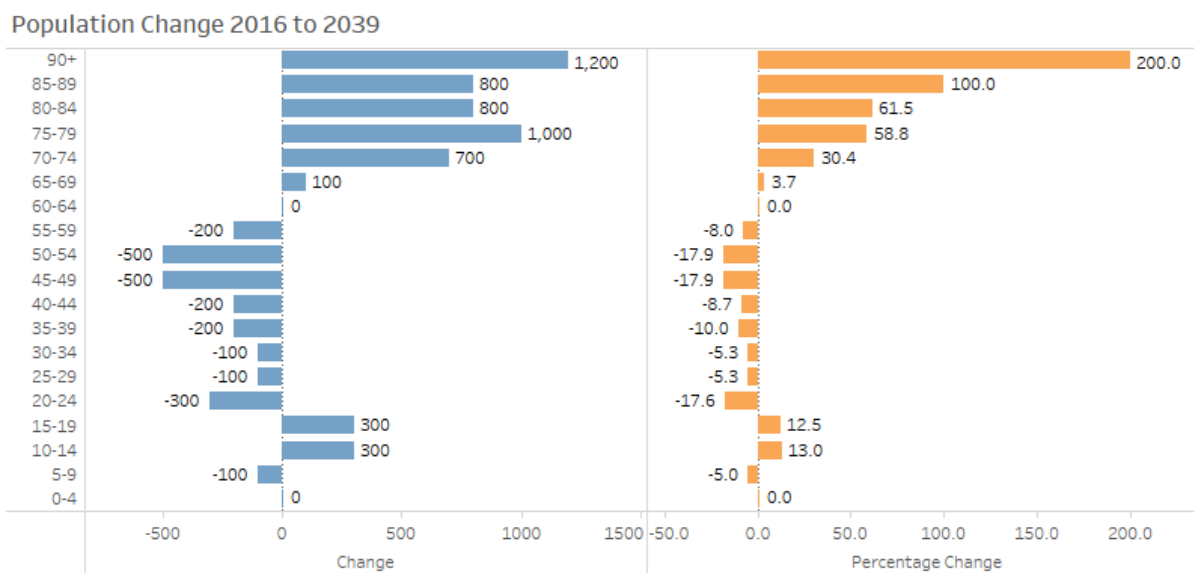
Figure 2 – Rutland 2039 population projection by gender and five-year age
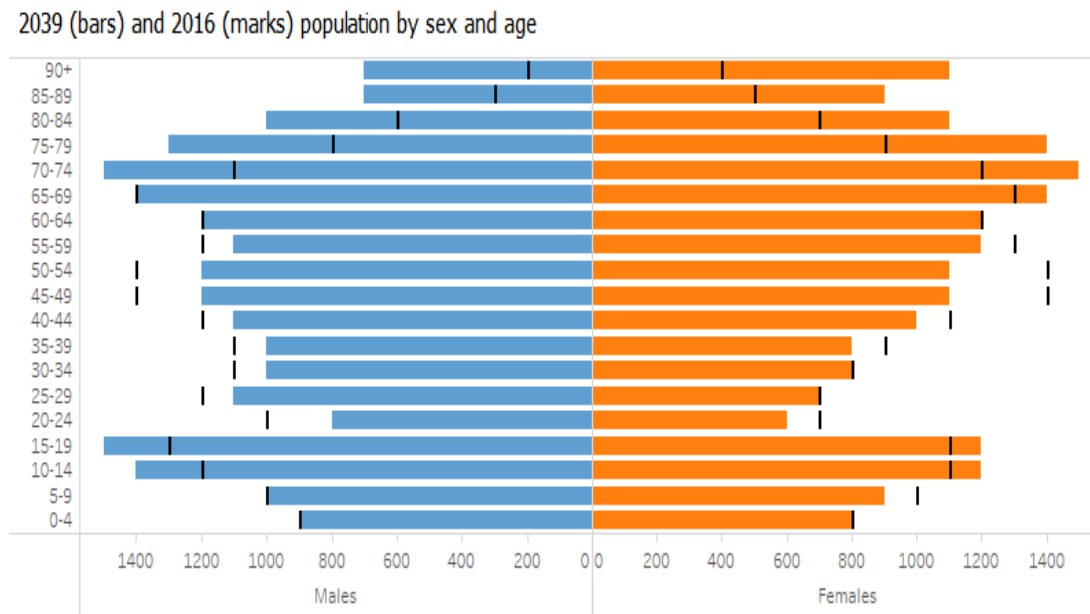
Source: ONS, 2016

The chart below shows the actual and percentage change between 2016 and 2039 for Rutland by five-year age band.

Figure 3 – Rutland 2016-39 population change by five-year age band

Population Change 2016 to 2039

Nationally the over 65 population is predicted to grow by 53.5% and the over 85 population by 127.1% between 2016 and 2039. In Rutland, the over 65 population is predicted to grow at a slower rate than nationally, by 48.9% from 9,400 to 14,000 people, whilst the 85 and over population is predicted to grow at a faster rate than nationally, by 142.9%. The largest change in population is the age band 90 years and over, an increase of 1,200. The population 45 to 49 and the 50-54 age bands are both projected to decrease by 17.9%. The younger population, aged 10 to 14 years and 15 to 19 years are predicted to grow by 13.0% and 12.5% respectively.[2]

5.   Components of Change – Population projections

The main components of population change are births, deaths, and migration.

Rutland's population is projected to continue to rise gradually over the time between 2016 and 2039. The charts show the number of deaths exceeds number of births resulting in a fall in natural change. Natural change is the difference between the number of deaths and the number of births in a population. The number of births per year is projected to remain at 300 per year by 2039. The number of deaths per year is projected to rise from 400 to 500 (25.0%) by 2039.[2]

Figure 4 – Components of change

Annual Change 2016 to 39   Cumulative Change 2016 to 39
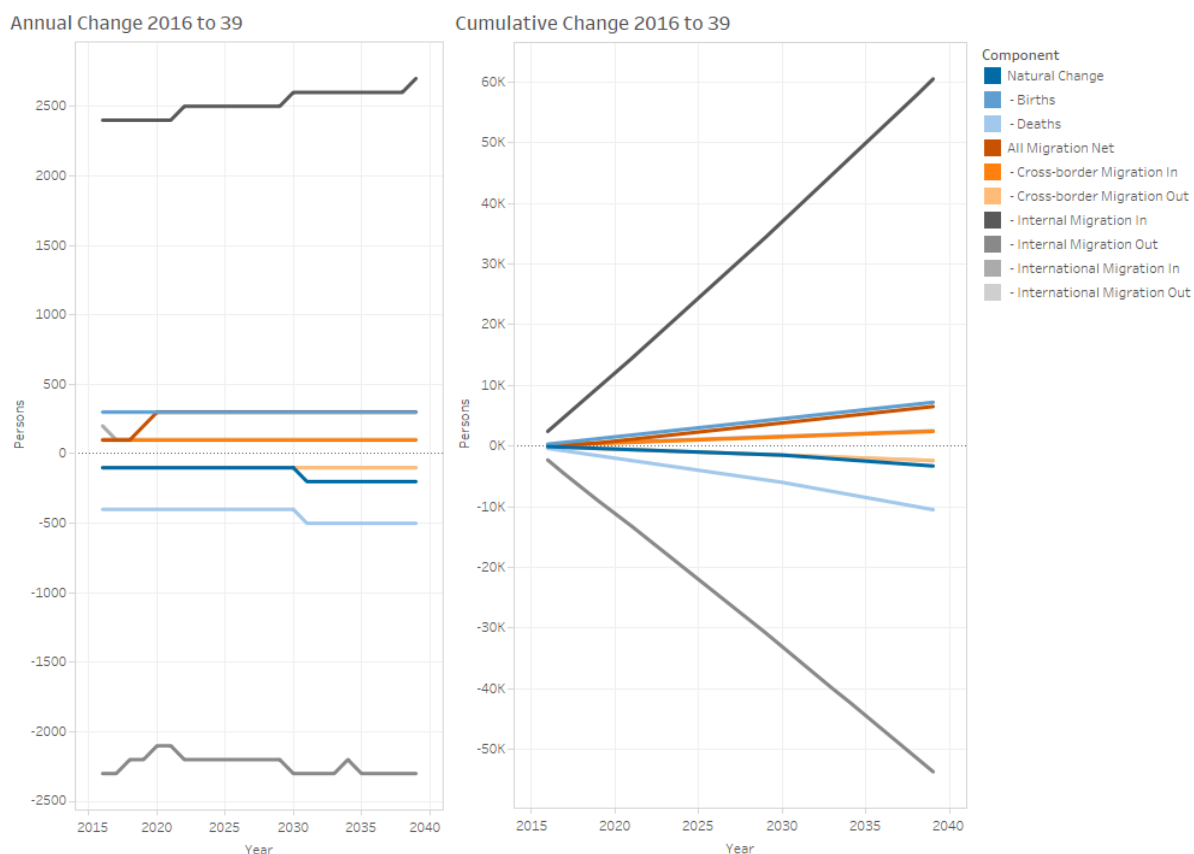
5.1. Migration

Net cross-border migration is due to rise from 100 to 300 per year by 2020 and then remain at this level. Whilst internal migration out is due to fluctuate over the years from 2,300 per year in 2016 to 2,100 in 2020 before settling at 2,300 per year in 2035. Internal migration is projected to rise from 2,400 in 2016 to 2,700 in 2039 (11.1%).[2]

It is expected that Brexit is likely to affect migration, but to what extent, is unknown. National figures from the ONS on long-term international migration showed that in 2016, 117,000 EU citizens emigrated (up 31,000 from 2015), the highest level for six years. The exodus was most marked among eastern Europeans, with a fall in immigration from the EU8 countries to 48,000 (down 25,000) and a rise in emigration to 43,000 (up 16,000).[3]

5.2. Impact of housing developments

The Local Plan sets out the planning policies for Rutland for the period to 2026. It is currently being reviewed and updated to extend the period to 2036. This will take into consideration the number of new homes needed within the county, which at October 2015 was set at c1500

(Housing Supply Background Paper, October 2015). Since this, the MOD confirmed plans to dispose of St Georges Barracks at North Luffenham. Rutland County Council is currently partnering with the MOD to look at a potential Garden Village development on this site, which would comprise of between 1500 and 3000 additional homes and align with associated infrastructure.

More information on the Local Plan Review and on the proposed St Georges Development can be found at:

https://www.rutland.gov.uk/my-services/planning-and-building-control/planning/planning-policy/local-plan/

https://www.stgeorgesrutland.co.uk/

5.3. Further information

For more detailed population projection data, please view the dashboard at the link below:

https://public.tableau.com/views/2014-basedPopulationProjections/2014-BasedPopulationProjections?:embed=y&:display_count=yes:showVizHome=no#

6. Births

In 2016 there were 336 live births in Rutland; this is a decrease of 4 births compared to the previous year. The General Fertility Rate (GFR) examines the number of live births occurring to females aged 11 years and over in the respective calendar year divided by female population aged 15-44 years in that area. Since 2014, the GFR in Rutland has remained stable and similar to the national average.[4]

The Total Fertility Rate (TFR) refers to the total number of children born or likely to be born to a woman in her life time if she were subject to the prevailing rate of age-specific fertility in the population. In 2016 the TFR was 2.01 in Rutland. This means in 2016, the average number of children born or likely to be born to a woman in her life time in Rutland was 2.01, higher than the national average of 1.81.[5]

6.1. Births by Age and Ethnicity

Both nationally and locally, mothers aged 30-34 years have had the highest birth rate over the last five years. Those aged 25-29 have the second highest birth rate, followed by those aged 35-39 years. In Rutland since 2013, the birth rate in those aged 35-39 has still remained higher than the national rate.[5] In 2016/17, almost a quarter (23.7%) of deliveries (which takes place anywhere other than at home or a non-NHS hospital) were from those aged 35 years or above, a similar

percentage to the national average of 21.6%.[4] Nationally the percentage of deliveries to women aged 35 years and above has increased year on year since 2014/15, however in Rutland the percentage has fluctuated. This is likely to be due to the small numbers involved.[4]

Mothers of black and minority ethnic (BME) background made up 6.7% of all deliveries in Rutland in 2016/17, this is around quarter the national average of 23.3%.[4] The 2011 Census tells us the percentage of the population from BME groups in Rutland is 2.9% whereas nationally the percentage is 14.6%.[6] This infers that both locally and nationally mothers of a BME background may be having more children than those from a non-BME background.

6.2.   Births by Health Issues

The percentage of caesarean sections in Rutland has fluctuated since 2014/15 whereas nationally the rate has been increasing year on year. The latest data shows in 2016/17, caesarean sections accounted for 28.8% of all births in Rutland; this is similar to the national average of 27.1%.[4]

The percentage of all live births at term with low birth weight (<2.5kg) was 2.67% in Rutland in 2016, similar to the national average of 2.79%.[4]

Between 2014/15 and 2016/17, the rate of hospital admissions for babies under 14 days has fluctuated in Rutland due to small numbers, whereas the national rate has increased year on year throughout this time. In 2016/17 the rate of hospital admissions of babies fewer than 14 days old in Rutland was 64.1 per 1,000 deliveries, similar to the national rate of 71.0 per 1,000 deliveries. This equates to 20 hospital admissions locally.[4]

7.   Deaths

Age-standardised mortality rates (ASMRs) are a better measure of mortality than simply looking at the number of deaths, as they take into account the population size and age structure. At a national level mortality rates have generally been decreasing. This is due to improved lifestyles and medical advances in the treatment and diagnosis of many illnesses and diseases. There have also been government initiatives to improve health through better diet and lifestyle.

Since 2004, the ASMR for all ages in Rutland has remained significantly lower than the national average. The latest data in 2015 shows when the ASMR is broken down into age groups, those under 65, between 65 and 74, between 75 and 84 and above 85 years all have a similar rate to the national average. This is likely to be due to Rutland's mortality rates based on relatively small populations, therefore rates are often subject to random fluctuations and are consequently less robust.

Compared to nationally, a smaller proportion of deaths occurred under to those aged under 65

and higher proportion of deaths occurred to those aged 85 and above. In 2015, one in ten (10.1%) of all deaths were from those aged under 65. This is significantly lower than the national percentage of 14.8% and has decreased year on year from 13.2% in 2012. Of all deaths in Rutland, almost half (46.6%) were from those aged 85 and above, this is significantly higher than the national percentage of 40.4%. The percentage of deaths in this age group has increased significantly over time.[7]

7.1. Deaths from causes considered preventable

The rate of mortality from causes considered preventable in Rutland has remained significantly lower than the national average over time, for both persons and males. In the last two recorded time periods for females (in 2013-15 and 2014-16), the rate of mortality from causes considered preventable has increased to similar to the national rate. This reflects an increase of 15 and 17 deaths compared to the counts of deaths in Rutland in 2012-14.[8]

7.2. Premature Mortality

Premature mortality is a high-level indicator of the overall health of a population, being correlated with many other measures of population health. Premature mortality examines all deaths under the age of 75. The rate of premature mortality in Rutland has remained significantly lower than the national average over time for both males and females. Both nationally and locally the rate for persons has decreased year on year from 2010-12.[9]

7.2.1. Deaths from Cancer

In Rutland, just under a third (30.1%) of all deaths were due to cancer in 2016. This is similar to the national percentage of 28.0%. In 2016 in the 65-74 age group in Rutland, just over half of deaths (53.4%) were due to cancer, this is similar to the national picture (44.1%). This is followed by 35.0% of deaths in those aged 75-84 years and a third (33.3%) of deaths in the under 65s in the county. Deaths from cancer in the 85 years and over age group accounted for 17.2% of all deaths in 2016.[7]

Mortality rates from cancer in those aged under 75 years have remained significantly better than the national average since 2001-03 (when the indicators were first recorded). Nationally, the rate of all premature deaths from cancer has decreased year on year since 2001-03, whereas the rate in Rutland has decreased year on year since 2011-13.[8]

The under 75 mortality rate from cancers considered preventable in Rutland has increased to perform similar to the national average for the two most recent time periods (2013-15 and 2014-16). In 2014-16, the rate of cancer deaths for those aged less than 75 was 100.0 per 100,000 population aged less than 75 years and the rate for those cancer deaths considered preventable

was 65.2 per 100,000 population aged less than 75 years. The difference in rate infers over half the cases of deaths from cancer are considered preventable in Rutland, this percentage is lower nationally.[8]

7.2.2. Deaths from Circulatory Disease

In Rutland, almost a quarter (24.5%) of all deaths were due to circulatory disease in 2016. This is similar to the national percentage of 25.5%. The percentage of deaths from circulatory disease in Rutland has significantly declined since 2004, a decline which is reflected nationally.[7]

As age increases, the percentage of deaths from circulatory disease also increases at a national level. However in Rutland in 2016, the highest percentage of deaths from circulatory disease (30.1%) was seen in the 75-84 age group whereas in the 85 year and over age group, less than a quarter of deaths (23.8%) were due to circulatory disease in Rutland. In both these age groups, over time there has been a significant decline in the percentage of deaths due to circulatory disease in Rutland. Across all age bands, the percentage of deaths from circulatory disease was similar to the national average.[8]

Mortality rates from cardiovascular disease in those aged under 75 years have remained significantly better than the national average for the last three time periods. In 2014-16, deaths from all cardiovascular disease for those aged less than 75 was 53.5 per 100,000 population aged less than 75 years, significantly better than the national rate of 73.5 per 100,000 population aged less than 75 years. In the same time period, deaths from cardiovascular disease considered preventable for those aged less than 75 was 37.4 per 100,000 population aged less than 75 years, similar to the national rate of 46.7 per 100,000 population aged less than 75 years. This infers a higher proportion of deaths from cardiovascular disease are considered preventable in Rutland compared to nationally.[8]

7.2.3. Deaths from Respiratory Disease

In 2016 in Rutland, 11.8% of all deaths were due to respiratory disease. his was similar to the national percentage of 13.7%. As age increases, the percentage of deaths from respiratory disease also increases at both a national and local level. In 2016 in Rutland, in the under 65s age group, the data for deaths from respiratory disease was suppressed due to small numbers. This percentage is 8.6% in the 65-74 age group, 11.7% in 75-84 age group and 13.9% in the 85 years and over age group. All age bands perform similar to the national percentage.[7]

Mortality rates from respiratory disease in those aged under 75 years have remained significantly better than the national average since 2001-03 (when the indicators were first recorded). However, the mortality rate from respiratory disease considered preventable for the latest two years (2013-15 and 2014-16) are similar to the national average. In 2014-16, respiratory deaths for

those aged less than 75 were 19.9 per 100,000 population aged less than 75 years and those considered preventable were 12.5 per 100,000 population aged less than 75 years. The difference in rate infers that over half of the cases of deaths from respiratory disease are considered preventable in Rutland and in England.[8]

7.3. Place of Death

Over a third (38.9%) of all deaths in Rutland in 2016 were in hospital, followed by in the home (27.7%) and in care homes (27.7%), hospices (3.2%) and other places (2.4%). This pattern of place of death is reflected nationally. The latest data shows Rutland has a significantly lower proportion of deaths occurring in hospital and a significantly higher proportion of deaths in care homes compared to nationally. Like nationally, in Rutland the trend is significantly decreasing over time for in-hospital deaths and significantly increasing over time for deaths in care homes, however hospitals are still the most common place to die in the county.[7]

In Rutland, over half (51.9%) of deaths in the under 65 years age group occurred in hospital in 2016, this is the highest percentage out of all age groups. The lowest percentage of in-hospital deaths occurred in those aged over 85 years. In 2016, less than a third of deaths (29.8%) in this age group were in hospital, significantly lower than the national percentage of 43.8%. The trend of in-hospital deaths has been significantly decreasing across the 65-74 age band and 85 and above age band over time.[7]

As age increases, the percentage of deaths in care homes increases. Almost half (45.7%) of all deaths in the 85 and above age bands occurred in care home, a significantly higher percentage to the national average (36.7%). The trend of care home deaths has been significantly increasing in the county across the 85 and above age band over time.[7]

Nationally the percentage of deaths at home decreases with age. In 2016 in Rutland, over a third (39.7%) of deaths in those aged 65-74 years died at home, similar to the national percentage of 30.3%. This was the highest percentage out of all age bands in Rutland residents. In those aged 85 and above, a quarter (24.5%) of all deaths were in the home. This is a significantly higher percentage compared to the national average (16.4%).[7]

In 2016, hospice deaths accounted for 3.2% of all deaths in Rutland, this is similar to the national percentage of 5.7%. In Rutland the trend is significantly increasing over time for deaths in hospices.[7]

8.   Life Expectancy

8.1.   Life Expectancy

Since 2010-12, life expectancy at birth for males and females in Rutland has remained significantly better than the national average.

In 2014-16, the average number of years a newborn in Rutland would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life was 82.1 years for males and 85.4 years for females. These figures are both better than the values for England (79.5 years and 83.1 years respectively).[8]

In 2014-16, life expectancy at birth for males in Rutland has shown a slight increase from 81.8 years in 2013-15 to 82.1 years in 2014-16. Life expectancy at birth for females in Rutland has shown a slight increase from 85.2 years in 2013-15 to 85.4 years in 2014-16. To note, life expectancy in females peaked in 2012-14 at 85.7 years. Nationally, life expectancy at birth has remained stable for males over the last two time periods and in females over the last three periods, at 79.5 and 83.1 years respectively.[8]

8.2.   Healthy Life Expectancy

In 2014-16, healthy life expectancy (HLE) at birth in Rutland is significantly better than the national average for both males and females.

In males, HLE at birth has decreased from 71.1 years in 2013-15 to 68.8 years in 2014-16. Throughout this time the England average has fallen from 63.4 years to 63.3 years. The HLE at birth for females in Rutland has decreased from 70.6 years in 2013-15 to 70.2 years in 2014-16. Nationally the healthy life expectancy at birth in females has declined from 64.1 years in 2013-15 to 63.9 years in 2014-16. In 2014-16, the HLE at birth for females is now higher than males. This was not the case in 2013-15.[8]

8.3.   Life Expectancy at 65

Since 2001-03 life expectancy at 65 for males and females in Rutland has remained significantly better than the national average.

Life expectancy at 65 for males in Rutland has remained at 20.2 years in 2013-15 and 2014-16. Life expectancy at 65 for females in Rutland has remained stable for the last three time periods 23.0 years. Nationally, male life expectancy at 65 is increasing while female life expectancy is stabilising. Male life expectancy at 65 in England has increased year on year from 16.3 years in 2001-03 to 18.8 years in 2014-16. Female life expectancy at 65 in England has remained stable at 21.1 years for the last three time periods.[8]

9. Protected characteristics

9.1. Ethnicity

The chart below shows the proportion of Rutland's population by broad ethnic group. The vast majority of the county population (97.1%) belong to White ethnicities, including White British and White Irish. This equates to almost 36,000 people. The next largest ethnic groups in Rutland are Asian and Mixed or Multiple Ethnic Group, which each constitute 1.0% of the population, followed by Black, with 0.7% and Other Ethnic Group with 0.2%.[6]

Figure 5 – Rutland population by broad ethnic group, 2011
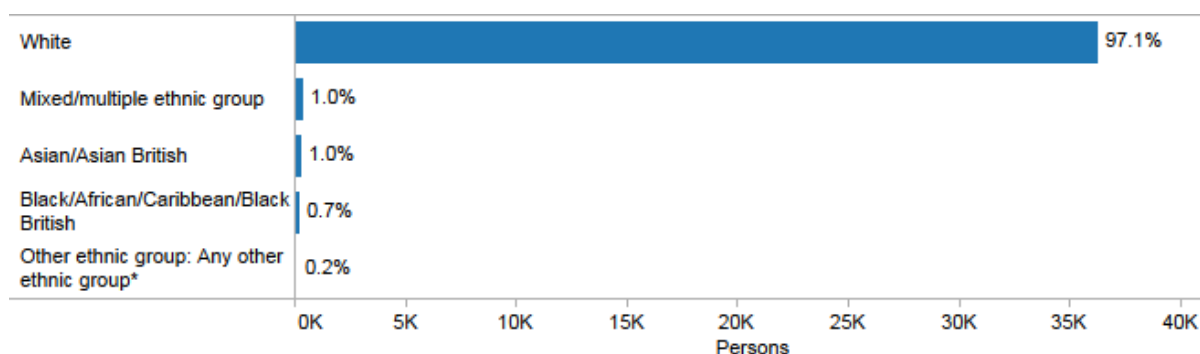
Source: 2011 Census, ONS

9.1.1. Main Language

Of the 36,309 people over the age of 3 in Rutland, 35,654 (98.2%) have English as their main language. This is followed by Other European language (EU), with 0.8% and East Asian Language, with 0.3%.[10]

**Table 1 – Rutland population by main languages, 2011**

English (English or Welsh if in Wales)	35,654
Other European language (EU)	291
East Asian language	112
Other European language (non EU)	49
South Asian language	40
French	39
Spanish	33
Other language	30
African language	28
Portuguese	22
West/Central Asian language	11
Arabic	0

Source: 2011 Census, ONS

9.2. Religion

The chart below shows the proportion of Rutland's population by religion. The largest religious group in the county is Christian, which constitutes 68.2% of the population. This is followed by No Religion, 23.4% and Religion not stated, 7.0%. Muslims and Other religion each constitute 0.4% of the Rutland population, followed by Buddhist (0.3%) and Hindu (0.2%).[11]

**Figure 6 – Rutland population by religion, 2011**
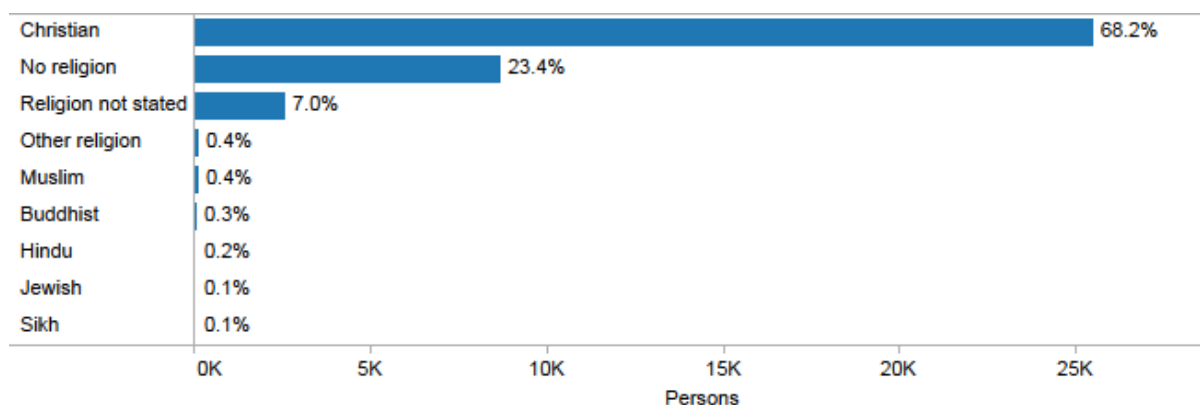
Source: 2011 Census, ONS

9.3. Disability

The chart below shows the proportion of Rutland's population by self-reported limiting long term illness. This is commonly used as a proxy for disability. In 2011, 15.5% of the county population considered themselves to have a condition that limited their day to day activities.[12]

Figure 7 – Rutland population by limiting long-term illness, 2011
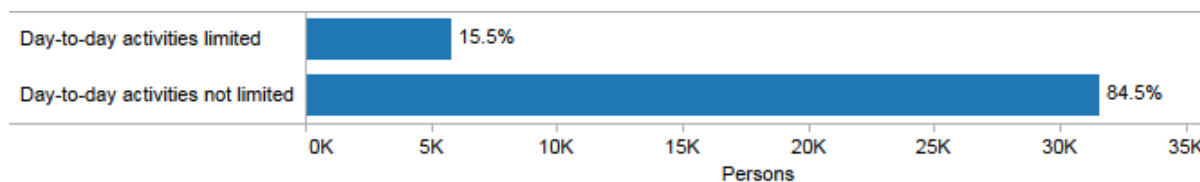
Source: 2011 Census, ONS

N.B. "Day-to-day activities limited" includes "limited a little/ limited lot"

9.4. Marriage and civil partnership

Marriage and civil partnership formation statistics are derived from information recorded when marriages and civil partnerships are registered as part of civil registration, a legal requirement. In 2015, there were 469 marriages and 2 civil partnership formations that took place in Rutland.[13] Please note this data refers to the area of occurrence of the marriage or civil partnership rather than the couple's area of residence.

9.5. Sexual identity

In 2016, 58,000 (1.6%) of the East Midlands population aged 16 and over identified themselves as lesbian, gay or bisexual (LGB), compared to 2.0% nationally. At a national level, more males (2.3%) than females (1.6%) identified themselves as LGB in 2016. The age range who were most likely to identify as LGB in 2016 were the 16 to 24 age group (4.1%). The population who identified as LGB in 2016 were most likely to be single, never married or civil partnered, at 70.7%.[14] Applying the national prevalence estimates of LGB individuals to the Rutland population aged 16 and above in 2016 would estimate there were 377 LBG males and 252 LGB females.

9.6. Further information

For more detailed Census 2011 data, covering the whole range of topics, please view the dashboard at the link below:

https://public.tableau.com/views/LAKeyStatsDashboard/Dashboard?:embed=y&:display_count=no&:showVizHome=no

10. Military population

Two British Army barracks are located in Rutland, Kendrew Barracks in Cottesmore and St

George's Barracks in North Luffenham. The data presented examines summary statistics on the number of serving UK Armed Forces personnel and entitled civilian personnel with a Defence Medical Services (DMS) registration. Entitled civilian personnel include service personnel family dependents and Ministry of Defence (MOD) employed civilian personnel who are entitled to care at MOD primary care facilities. Personnel with a DMS registration have their primary care (GP services) provided by the MOD rather than the NHS.

The military population accounts for 5.8% of the resident population in the county. The military population is younger and has a higher proportion of males compared to the resident population of Rutland. In April 2018, there were 2,250 Armed Forces personnel and entitled civilian personnel registered in Rutland. 1,620 individuals (72%) were in the Armed Forces and 630 individuals (28%) were entitled civilian personnel. Of those in the Armed Forces, 85% were male compared to a third of the entitled civilian personnel.[15]

11.   Prison population

NHS England Health and Justice is responsible for commissioning healthcare for children, young people and adults across secure and detained settings, which includes prisons, secure facilities for children and young people, police and court Liaison and Diversion services and immigration removal centres. The range of services which are directly commissioned for prisons include primary and secondary care services, public health including substance misuse services (under a Section 7a Agreement with the Department of Health), dental, ophthalmic services and mental health services.

HMP Stocken in Stretton, in the northeast of the county, is a category C closed training prison. The prison's operational capacity was 842 in October 2011.[16] In December 2017, there were 841 male prisoners aged 21 and over in its care.[17]

The table below shows the ethnicity of the prison population in December 2017 by broad ethnic group. The largest ethnic group was White with 69.9%, followed by Black with 11.4%, Asian with 10.9% and Mixed and multiple ethnic groups with 10.9%.[18]

Table 2 – HMP Stocken population by broad ethnic group, December 2017

White	Mixed/ Multiple ethnic groups	Asian/ Asian British	Black/ African/ Caribbean/ Black British	Other ethnic group	Not stated	Not recorded
588	54	92	96	8	3	0

12.   2011 Rural Urban Classification

It is important to distinguish between rural and urban areas when analysing social and economic statistics as the populations and businesses can differ in their makeup (for example rural areas tend to have higher proportions of older people). The opportunities, challenges and barriers for businesses, the services people receive and their quality of life can also differ markedly between rural areas and larger towns and cities.

ONS, May 2015

The 2011 Urban Rural Classification (RUC2011) was released by the Office for National Statistics in October 2013. This data updates the classification produced for the 2001 Census. The RUC2011 allows for a consistent rural/urban view of datasets. A suite of classifications has been produced for use at a variety of geographic levels, including ward, Lower Super Output Area (LSOA) and output area (OA). RUC2011 is a revised version of the classification produced after the 2001 Census. It was created by the Department of Town and Regional Planning at the University of Sheffield on behalf of a government working group.

RUC2011 for Lower Super Output Areas is built up from the OA level classification, with assignment to urban or rural made by reference to the category to which the majority of their constituent OAs is assigned.

Lower Super Output Areas (LSOAs)

LSOAs were designed to improve the reporting of small area statistics and are built up from groups of output areas (OA). LSOAs have a minimum population of 1,000 people and a maximum population of 3,000. They contain a minimum of 400 households and a maximum of 1,200 households. Where possible, LSOA boundaries follow natural boundaries such as roads and rivers.

More information on the ONS Area Classifications can be found here: https://www.gov.uk/government/statistics/2011-rural-urban-classification

### 12.1.   Exploring the Data

The map below displays 2011 Rural Urban Classification for Rutland at LSOA level. Rutland is predominantly rural by area. Overall, 3.3% of the total area of Rutland is classed as Urban City and Town, with a further 22.2% classed as Rural Town and Fringe and the remaining area (74.5%) classed as Rural Village and Dispersed.[19]

Urban areas (classed as areas with populations of 10,000 or more at the time of the 2011 Census) can be found in Oakham.

Rural Town and Fringe areas cover smaller settlements such as Uppingham, Langham, Ketton, Ryhall and Casterton. Finally, Rural Village and Dispersed parts of the classification cover the remaining areas of the county, encompassing small villages and hamlets.

Figure 8 - 2011 Urban Rural Classification by LSOA
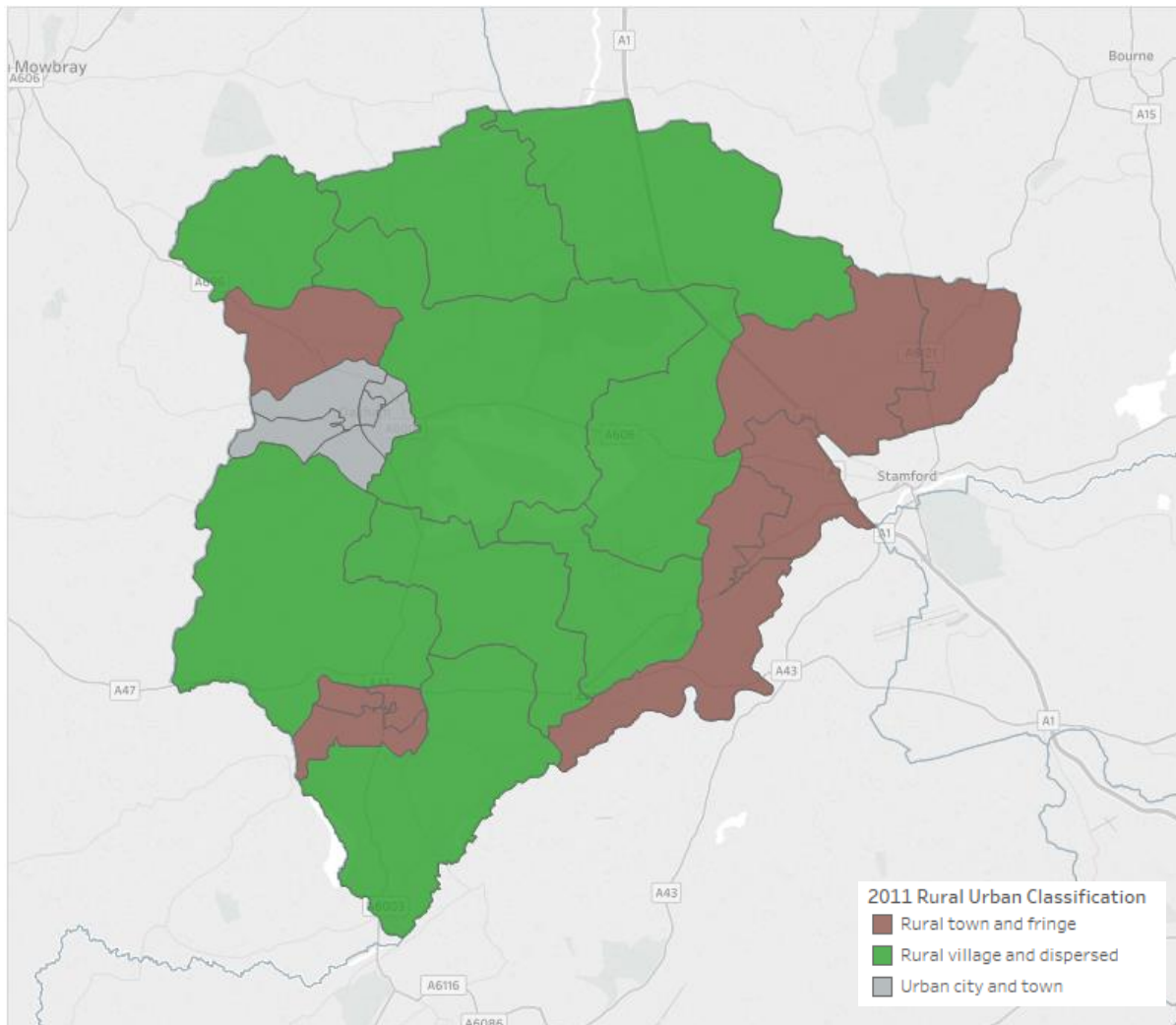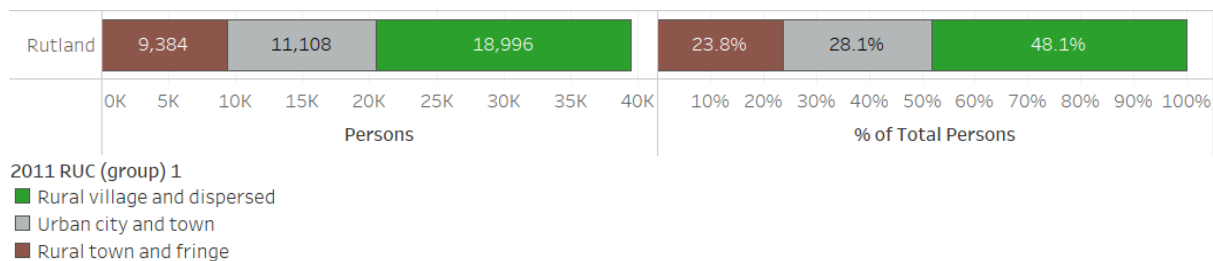

Source: 2011 Rural Urban Classification, ONS, 2013.

The chart below shows the total population of Rutland split by 2011 Rural Urban Classification. Looking at the population of Rutland by Rural Urban Classification, it is clear that while the county is rural in terms of area, half the population is concentrated within urban areas. Overall, 28.1% of the population of Rutland live in areas classed as Urban City and Town, while 23.8% live in Rural Town and Fringe and the remaining 48.1% live in areas classed as Rural Village and Dispersed.

Figure 9- 2016 Population estimates by 2011 Rural Urban Classification

| Rutland | 9,384 | 11,108 | 18,996 | | 23.8% | 28.1% | 48.1% |

2011 RUC (group) 1
- Rural village and dispersed
- Urban city and town
- Rural town and fringe

Source: 2011 Rural Urban Classification, ONS, 2013. 2016 mid-year population estimates, ONS, 2017.

The chart below shows the total Rutland population by age for Urban and Rural. Overall, rural areas tend to be the working age population. This is most noticeable in the 24-39 age bands. In comparison, urban areas tend to be either elderly or younger, with higher proportions in the 70-79 and 0-14 age bands. This is most noticeable in the 10-14 age band with 7.2% of the urban population falling within this band, compared with just 5.1% of rural areas. This is most likely due to the public schools in Oakham and Uppingham.

Figure 10- 2016 Population estimates by age by 2011 Rural Urban Classification
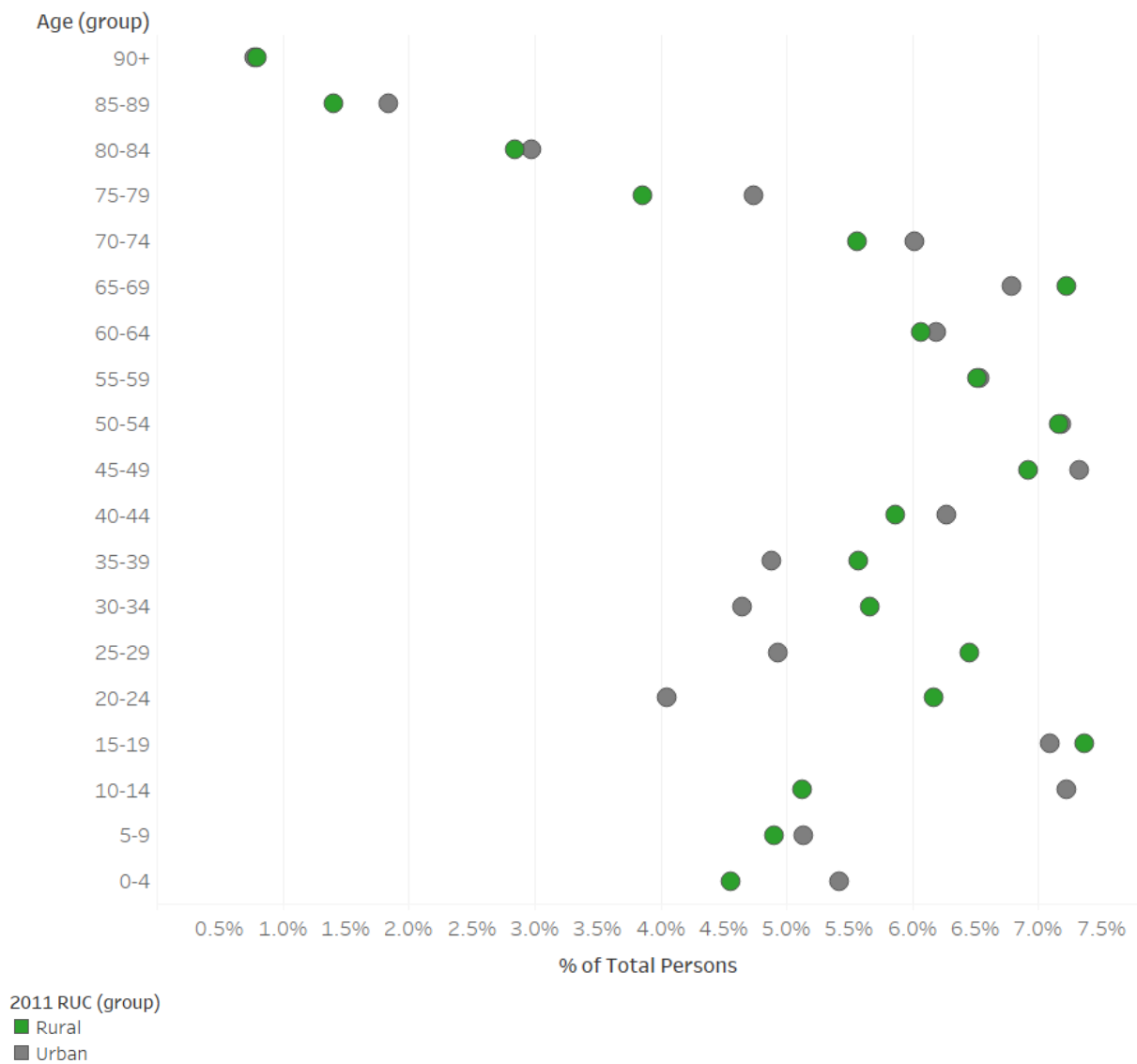
Source: 2011 Rural Urban Classification, ONS, 2013. 2016 mid-year population estimates, ONS, 2017.

12.2. Further Information

Access the 2011 Rural Urban Classification dashboard here:

https://public.tableau.com/views/2011RuralUrbanClassification/2011RUC?:embed=y&:display_count=yes:showVizHome=no#

13.   2011 Output Area Classification

In August 2014, the Office for National Statistics released the 2011 Output Area Classification (2011 OAC). This data updates the classification produced for the 2001 Census. The 2011 OAC categorises all UK output areas based on 2011 Census data on a wide range of socioeconomic and demographic topics. They aim to identify parts of the UK with similar characteristics using a defined set of supergroups, groups and subgroups.

13.1.   Further information

Background information on the ONS Area Classifications can be found here:

http://www.ons.gov.uk/ons/rel/regional-trends/area-classifications/2011-area-classification-for-output-areas/index.html

13.2.   Census Output Areas

Output areas (OAs) are created for Census data, specifically for the output of census estimates. The OA is the lowest geographical level at which census estimates are provided. They had approximately regular shapes and tended to be constrained by obvious boundaries such as major roads. OAs were required to have a specified minimum size to ensure the confidentiality of data. The minimum OA size was 40 resident households and 100 resident people but the recommended size was rather larger at 125 households. These size thresholds meant that unusually small wards and parishes were incorporated into larger OAs.

13.3.   Further information

Background information on census output areas can be found here:

http://www.ons.gov.uk/ons/guide-method/geography/beginner-s-guide/census/output-area--oas-/index.html

13.4.   Exploring the Data

The map below shows the distribution of 2011 OAC supergroups across Rutland. It is clear from the map that the majority of the area of Rutland is classified as Rural Residents, building on the analysis of rural classification above. In comparison, urban areas are more diverse in the types of

communities they contain.

Figure 11 - 2011 Output Area Classification by output area
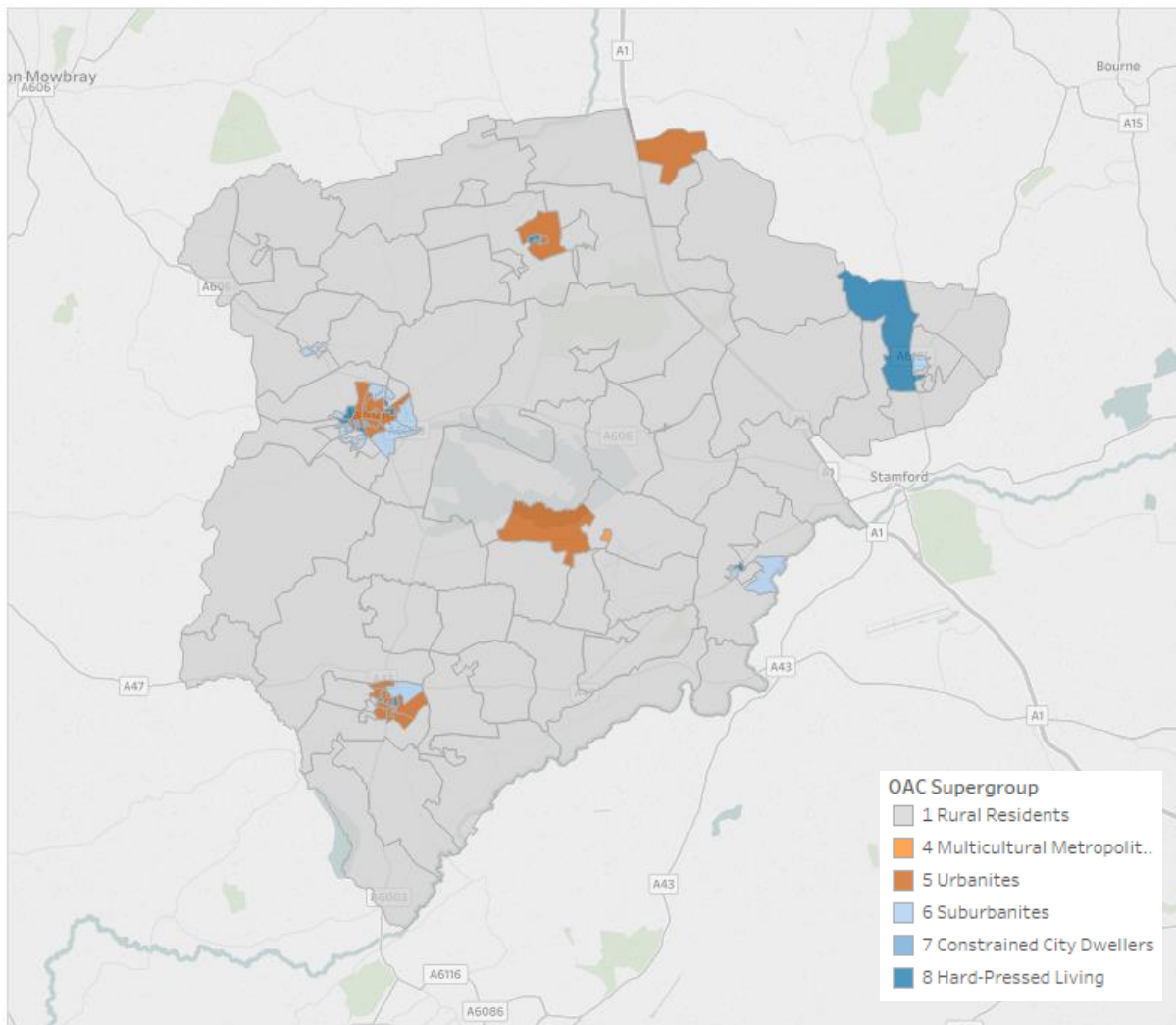
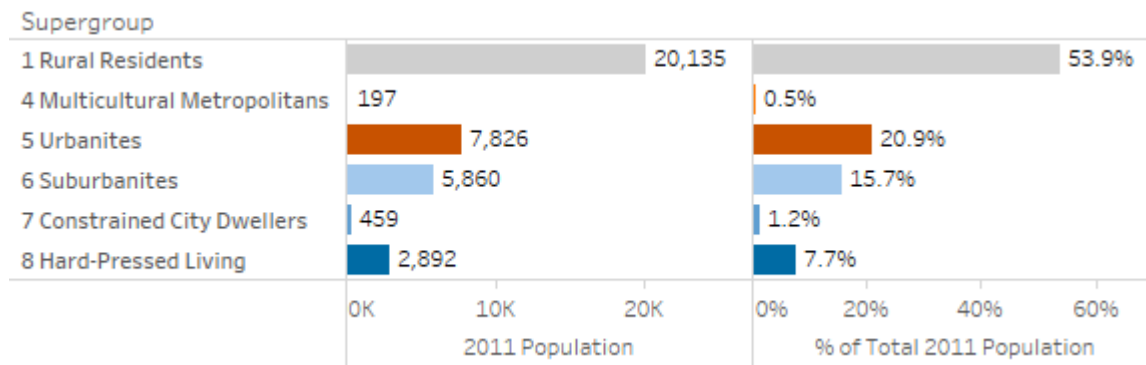Source: 2011 Output Area Classification, ONS, 2013.

Areas classed as Urbanites can, unsurprisingly, be found across the county in more central urban areas, while Suburbanites cover parts of the county in more peripheral urban areas.

Hard-Pressed Living occupy more peripheral, suburban areas of Oakham and Uppingham as well as Cottesmore, Ketton, Ryhall and Casterton.

The chart below shows the proportion of the Rutland population by 2011 OAC supergroup. Echoing the analysis of rural classification above, the majority of the population (53.9%) live in the largest area of Rutland classified as Rural Residents. 20.9% of the population (7,826 people) live in areas classified as Urbanites, 15.7% of the population (5,860 people) live in areas classified as

Suburbanites, and 7.7% of the population (2,892 people) live in areas classified as Hard-Pressed Living,

Figure 12- 2016 Population estimates by 2011 Output Area Classification[20]

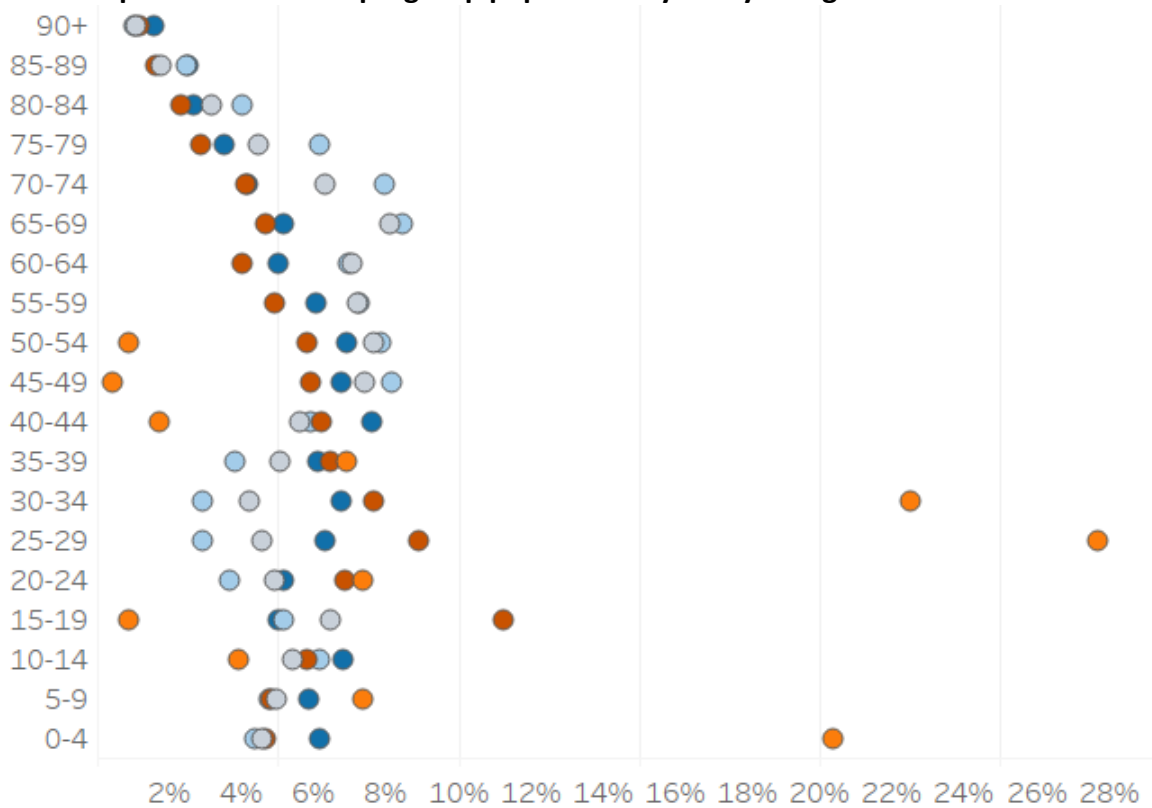| Supergroup	2011 Population	% of Total 2011 Population
1 Rural Residents	20,135	53.9%
4 Multicultural Metropolitans	197	0.5%
5 Urbanites	7,826	20.9%
6 Suburbanites	5,860	15.7%
7 Constrained City Dwellers	459	1.2%
8 Hard-Pressed Living	2,892	7.7%

Source: 2011 Output Area Classification, ONS, 2013. 2016 mid-year population estimates, ONS, 2017.

In terms of the broad age structure by the main OAC supergroups, Rural Residents areas tend to have higher proportions in middle age groups (approximately 45-74) and smaller proportions amongst children and younger adults groups (specifically under 15s and 20-39). Multicultural Metropolitans - whilst making up a small proportion of the population of the county as a whole - contain higher proportions of younger age groups, with the 25-29 and 30-24 age groups making up over 27% and 22% of the population respectively of these areas, and the 0-4 age group making up 20%. Multicultural Metropolitans are also much less likely to contain older age bands compared against other supergroups.

Elsewhere, areas classed as Urbanites tend to have higher proportions from teenage and working age bands (15-59) and lower proportions from older adults (75+), while for Suburbanites, the opposite is generally true. Finally, Hard-Pressed Living areas have the highest proportions of the 10-14 and 40-44 age bands, and lower proportions of older adults (60-79).

Chart 5 - Proportion of each supergroup population by five-year age band

Source: 2011 Output Area Classification, ONS, 2013. 2016 mid-year population estimates, ONS, 2017. N.B. Excludes supergroups with <5% of total Rutland population

14. Pen Portraits

For the 2011 OAC, pen portraits describe the characteristics of the different supergroup/group/subgroup clusters, and the radial plots illustrate for each of these clusters the values for each of the final census variables, using a scale to represent the difference (either positive or negative) from the UK mean and parent supergroup/group (if applicable) for that variable.

14.1. Further information

Full information on the 2011 OAC pen portraits can be found here:

http://www.ons.gov.uk/ons/guide-method/geography/products/area-classifications/ns-area-classifications/ns-2011-area-classifications/pen-portraits-and-radial-plots/index.html
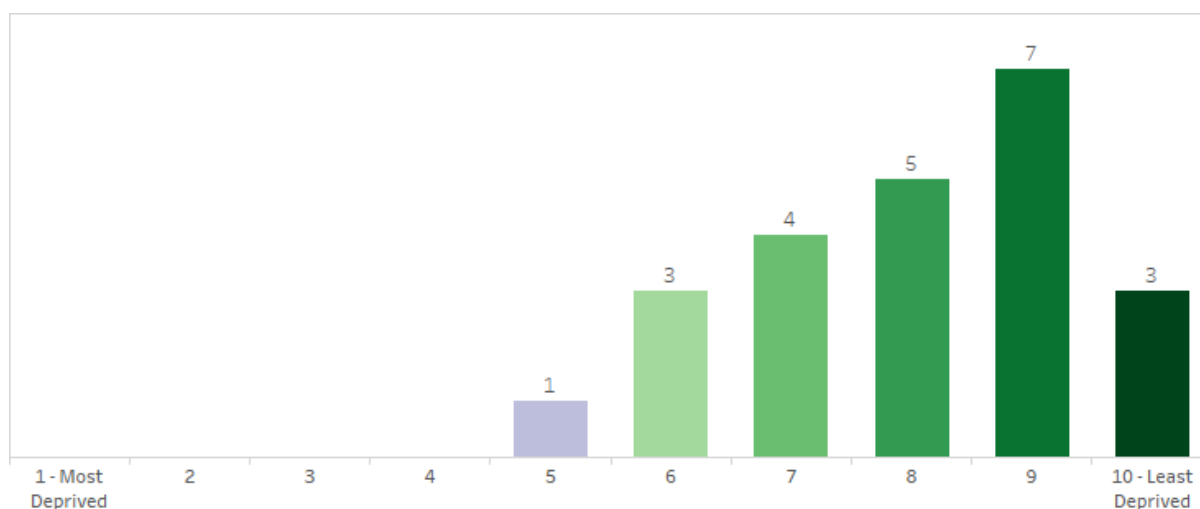
15. 2015 Indices of Deprivation

The English Indices of Deprivation 2015 (ID2015) are based on 37 separate indicators, organised across seven distinct domains of deprivation which are combined, using appropriate weights, to calculate the Index of Multiple Deprivation 2015 (IMD 2015).[21] This is an overall measure of multiple deprivation experienced by people living in an area and is calculated for every Lower layer Super Output Area (LSOA), or neighbourhood, in England. Every such neighbourhood in England is ranked according to its level of deprivation relative to that of other areas. It is important to note that these statistics are a measure of relative deprivation, not affluence, and to recognise that not every person in a highly deprived area will themselves be deprived. Likewise, there will be some deprived people living in the least deprived areas.

15.1. Exploring the Data

Overall, when looked at in the national context, Rutland is not particularly deprived. At a local authority level, using the overall Multiple Deprivation measure, the county is ranked 148th out of 152 upper tier authorities in England, where 1st is the most deprived.

The chart below displays the distribution of Rutland LSOAs nationally, using national rank for Multiple Deprivation to place each neighbourhood into deciles (10 percent bands), ordered from 1 (most deprived) to 10 (least deprived).

Figure 13 - ID2015 Multiple Deprivation national decile, LSOAs
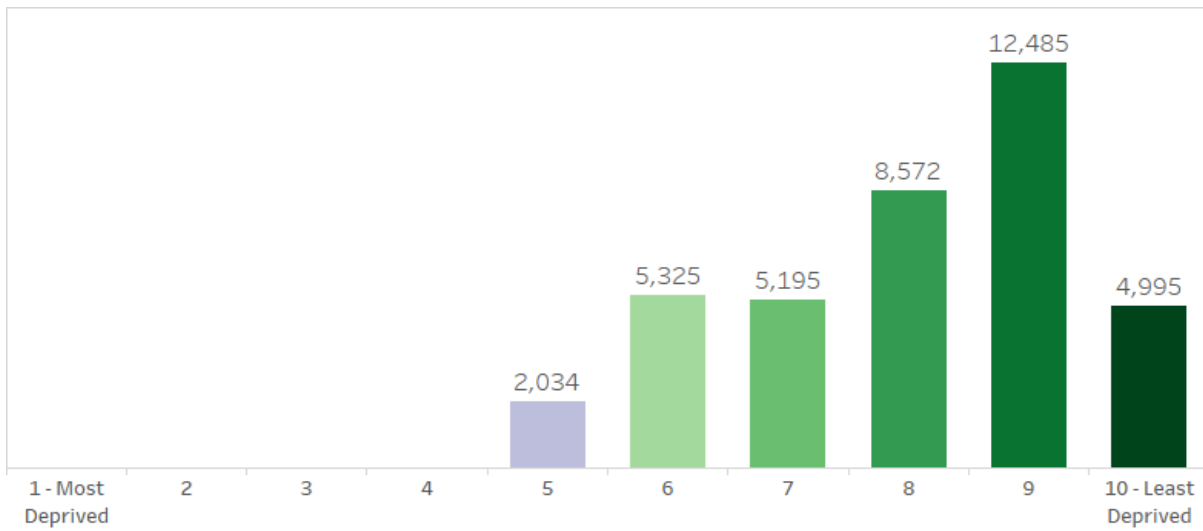

Source: Indices of Deprivation 2015, MHCLG, 2015.

From the chart, it is clear that overall, Rutland neighbourhoods fall in the less deprived deciles; 22

of the 23 LSOAs in the county fall within the 50% least deprived areas in England. However, while Rutland experiences low levels of deprivation overall, one neighbourhood in the county falls within the 50% most deprived in England. This area is Greetham LSOA.

The chart below displays the distribution of the Rutland population across national Multiple Deprivation deciles (10 percent bands), ordered from 1 (most deprived) to 10 (least deprived).

Figure 14- 2016 population by ID2015 Multiple Deprivation national decile, LSOAs
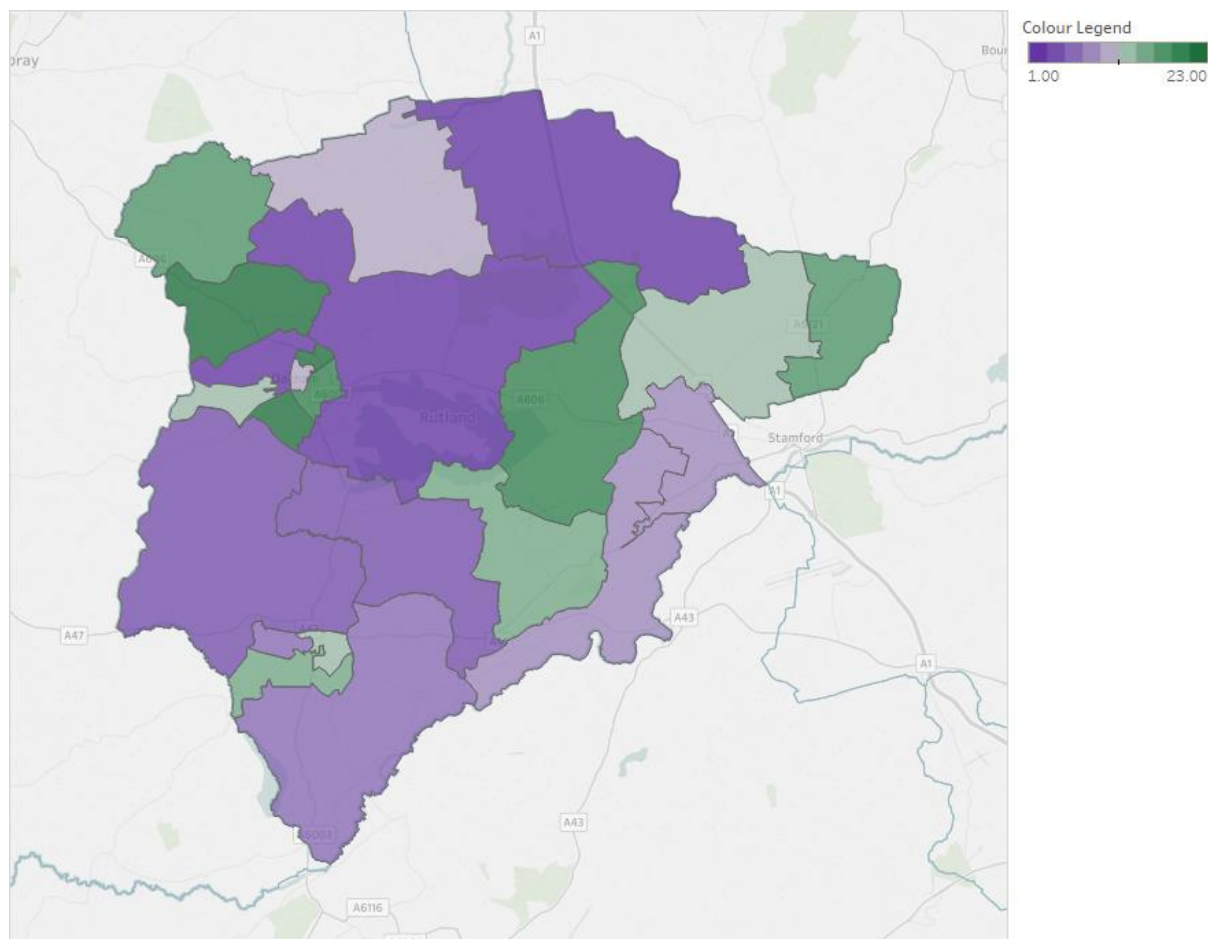

Source: Indices of Deprivation 2015, MHCLG, 2015. 2016 Mid-year population estimates, ONS, 2017.

As LSOAs have a fairly consistent population size (1,500 people on average), the distribution of the county population by national deciles is consistent with the distribution of LSOAs overall; just over 2,034 people live in neighbourhoods falling in the 50% most deprived deciles nationally, out of a total population of over 38,000. The vast majority of Rutland residents live in less deprived areas; over 26,000 people (67.5% of the total population) live in neighbourhoods falling in the three least deprived deciles nationally.

The map below displays the Multiple Deprivation rank for all Rutland LSOAs. This ranks each LSOA according to their overall score, from most (1) to least (23) deprived.

Figure 15 - ID2015 Multiple Deprivation county rank

Source: Indices of Deprivation 2015, MHCLG, 2015.

From the map, we can see that the LSOAs with the highest rank (dark purple) and therefore more deprived can generally be found in the main urban area such as Oakham North West as well as Exton, Greetham, Braunston and Belton, and Martinsthorpe. As LSOAs have broadly consistent populations and urban areas have higher population densities, these areas appear smaller on the map, compared with less densely populated rural areas.

In comparison, while some of the least deprived areas of the county can also be found in and around the main towns, such as Oakham South, Oakham North East, Oakham East, and in rural areas such as Normanton and Empingham, Langham, Ryhall and Whissendine.

15.2. Further information

Full information on the 2015 Indices of Deprivation can be found here:

https://public.tableau.com/views/ID2015DashboardFINAL/ID2015Dashboard?:embed=y&:display_count=yes&publish=yes:showVizHome=no#
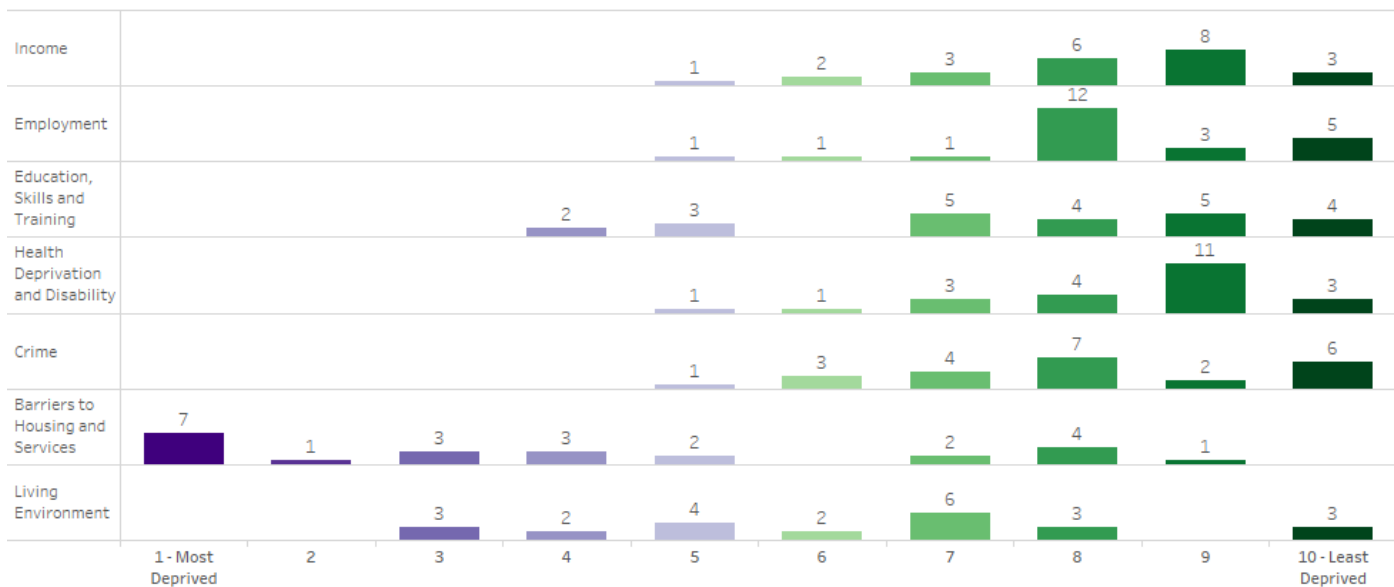
15.3. Deprivation Domains

The Index of Multiple Deprivation discussed above comprises of seven domains, each focusing on a specific aspect of deprivation. These domains cover:

- Income
- Employment
- Education, Skills and Training
- Health Deprivation and Disability
- Crime
- Barriers to Housing and Services
- Living Environment

Deprivation domains can be analysed in the same way as the Index of Multiple Deprivation. The charts below show Rutland LSOAs by their national decile for each of the ID2015 domains;

Figure 16- ID2015 Deprivation domain national decile, LSOAs

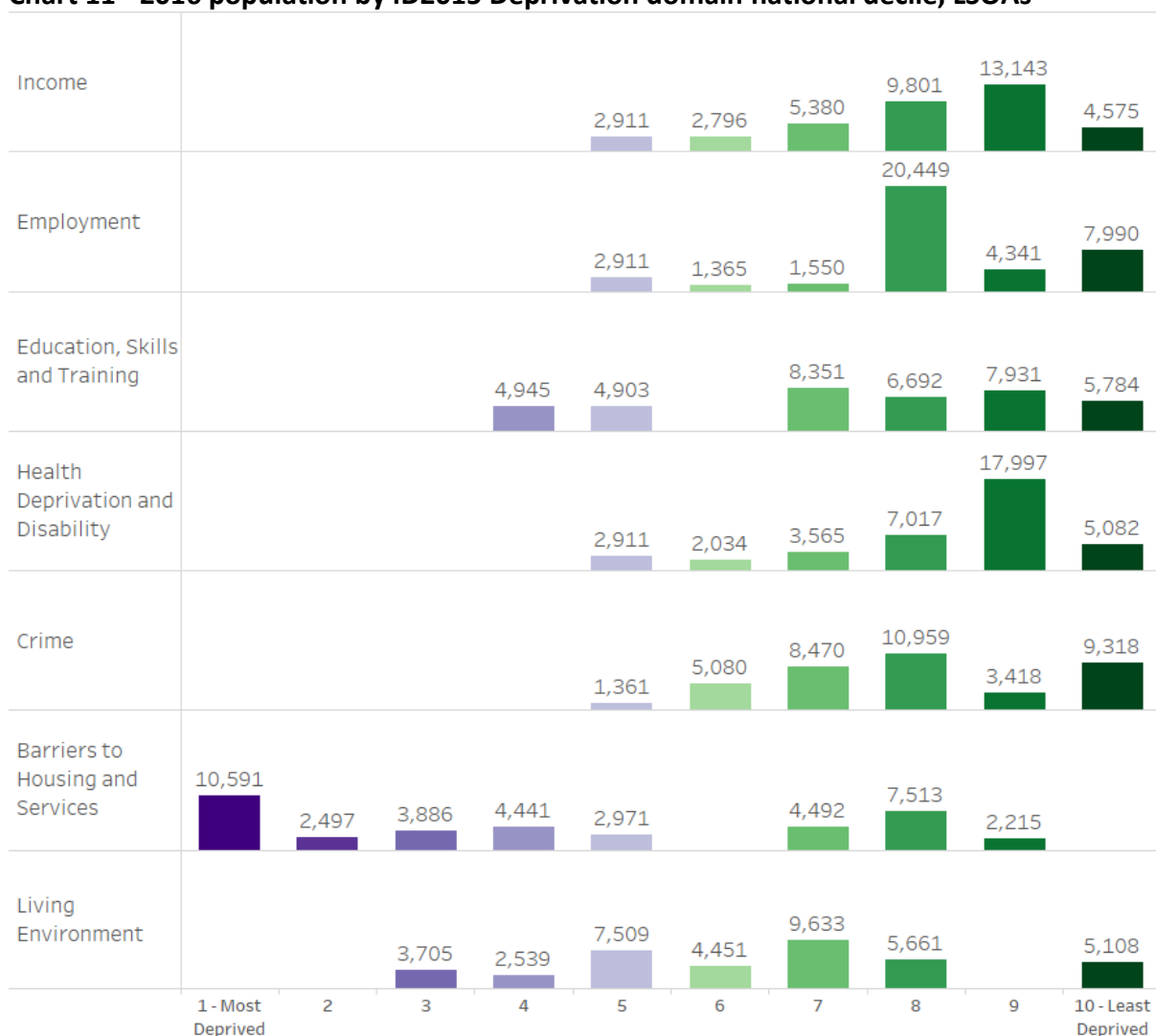Source: Indices of Deprivation 2015, MHCLG, 2015.

From the chart, it is clear to see that the same pattern is generally true for deprivation domains as for multiple deprivation; Rutland LSOAs tend to fall within lower national deciles, although there exists some pockets of significant deprivation within the county on a national scale.

For Income and Employment deprivation - as with multiple deprivation - there is one LSOA falling within the top 50% nationally. In comparison, Education, Skills and Training deprivation is somewhat more noticeable within the county; five LSOAs fall within the top 50% nationally.

The Barriers to Housing and Services domain appears to show some of the most extensive deprivation on a national scale, with 7 LSOAs in each of the top decile in England. The overall distribution is still skewed towards lower deciles, with 16 LSOAs in total in the top 50% nationally. This may be a result of the more rural nature of the county, and issues around dispersed population being able to access services, in addition to housing affordability.[22]

The chart below displays the distribution of the Rutland population across national deciles (10 percent bands) for each of the ID2015 domains, ordered from 1 (most deprived) to 10 (least deprived):

Chart 11 - 2016 population by ID2015 Deprivation domain national decile, LSOAs

Source: Indices of Deprivation 2015, MHCLG, 2015. 2016 Mid-year population estimates, ONS, 2017.

As mentioned above, as LSOAs have fairly consistent population sizes, the distribution of

population closely follows the distribution of LSOAs across the deciles. The vast majority of the Rutland population live in neighbourhoods in the less deprived deciles, but despite this, large numbers of people can be found living in neighbourhoods in the most deprived deciles nationally; most notably over 10,000 people who live in areas within the most deprived 10 percent of neighbourhoods nationally for Barriers to Housing and Services deprivation, with a further 2,000 people living in the second most derived decile. Meanwhile, there are over 23,000 people living in the top two deciles nationally for Health Deprivation and Disability, over 17,000 people living in the top two deciles nationally for Income, and over 13,000 living in the top two deciles nationally for Education, Skills and Training deprivation.

15.4. More Information

Further information and full datasets for the 2015 Indices of Deprivation can be found here:

https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015

16. Employment

Being unemployed for a long period is associated with both physical and mental health problems.

In Rutland in August 2016, 0.09% of people were in long-term unemployment. This is better than the England proportion of 0.37%. Meanwhile, 2.4% of Rutland's working age population were unemployed. This is better than the England value of 4.8%.

23 people aged 16-64 years in Rutland had been claiming Jobseeker's Allowance for more than 12 months. This equates to a crude rate of 1.0 per 1,000 population and is better than the England rate of 3.7 per 1,000 population.

In 2016/17, in Rutland, the gap in the employment rate between those with a long-term health condition and the overall employment rate was 30.1 percentage points. This is similar to the England value of 29.4 percentage points. For the same time period, the gap in the employment rate between those with a learning disability and the overall employment rate was 78.7 percentage points. This is worse than the England value of 68.7 percentage points.

In 2016, for Rutland, the ratio between the gross median hourly earnings for women and the gross median hourly earnings for men was 66.3% compared to England's value of 79.4%.

## Rate of Unemployment in Rutland 2011-18[23]

Upper Tier Authorities
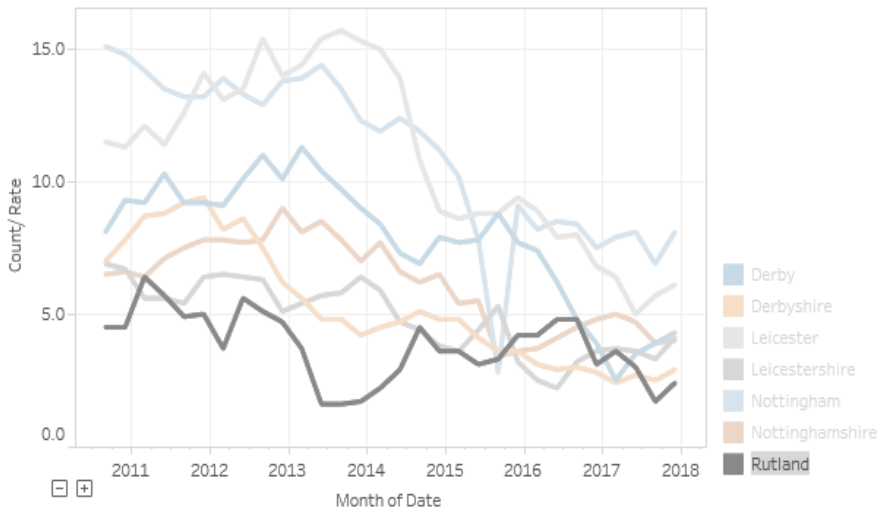
	June 2017	September 2017	December 2017
Derby	3.5	3.9	4.3
Derbyshire	2.7	2.5	2.9
Leicester	5.0	5.7	6.1
Leicestershire	3.6	3.3	4.1
Nottingham	8.1	6.9	8.1
Nottinghamshire	4.7	3.9	4.0
Rutland	3.0	1.7	2.4
LLEP	4.0	4.1	4.8
East Midlands	4.4	4.3	4.5
England	4.7	4.6	4.5
United Kingdom	4.7	4.6	4.5

The International Labour Organisation has collated data which shows the rate of unemployment of Upper Tier Counties in the Midlands. The graph above highlights Rutland's consistently low rate of unemployment from 2011 to 2018 in comparison to National and Regional averages.

Job Seekers Allowance JSA Claimants from July 2010 - April 2018[23]

Upper Tier Authorities
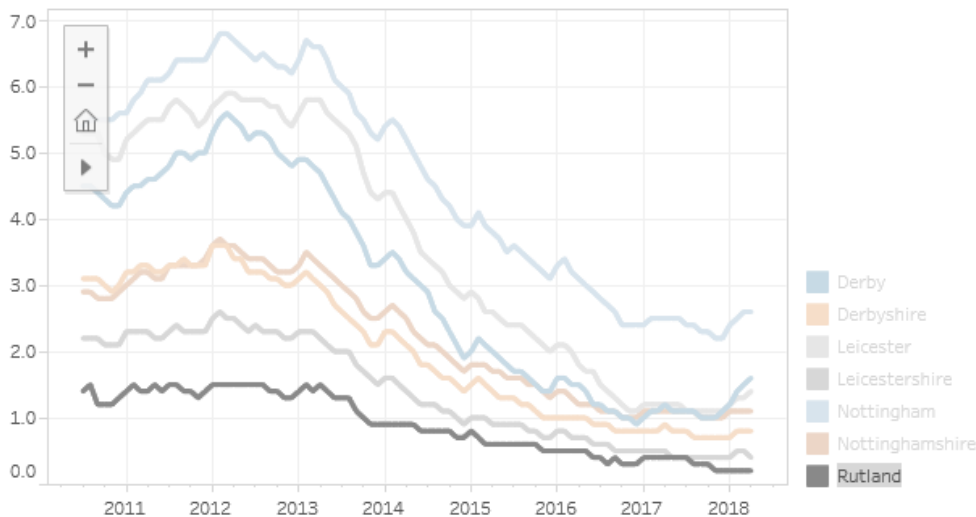
	February 2018	March 2018	April 2018
Derby	1.4	1.5	1.6
Derbyshire	0.8	0.8	0.8
Leicester	1.3	1.3	1.4
Leicestershire	0.5	0.5	0.4
Nottingham	2.5	2.6	2.6
Nottinghamshire	1.1	1.1	1.1
Rutland	0.2	0.2	0.2
LLEP	0.7	0.8	0.8
East Midlands	1.1	1.1	1.1
England	1.1	1.1	1.1
United Kingdom	1.1	1.1	1.1

The above chart shows the rate of people claiming Job Seekers Allowance (JSA) based on population.

An accurate measure to record the total amount of unemployment is by looking at the how many Job Seekers Allowance claimants there are.

Job Seekers Allowance is a benefit which is paid to help with living expenses whilst the claimant is

actively looking for work. The claimant must be aged 18 or over.

The Education and Skills Act made education or training compulsory for school leavers until the age of 17 from 2013 and in 2015 the age went up to 18 years of age. This would explain the drastic of drop of claimants between 2013 and 2015 across the Authorities in the above chart.

Rutland has generally had the lowest JSA claimant rate since 2011. Rutland's current rate for JSA claimants is 0.2, this is lesser than the current Regional and National rate of 1.1.

Benefit Claimants in Rutland, East Midlands and Great Britain November 2016[24]

% of main benefit claimants - not seasonally adjusted (November 2016)
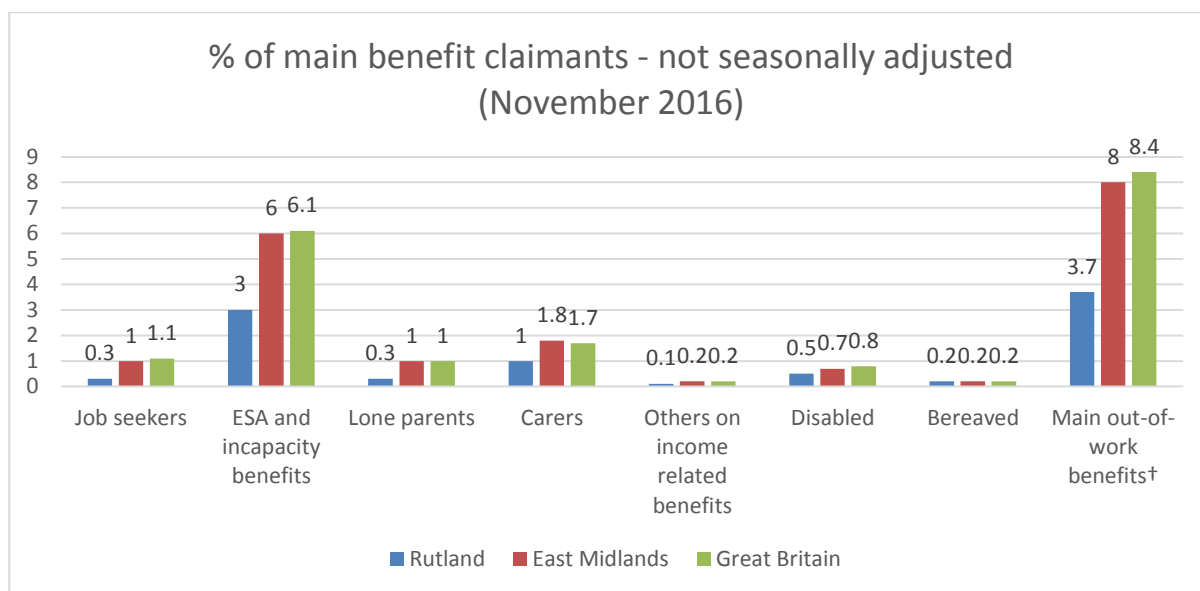
% is a proportion of resident population of area aged 16-64
†   -   numbers are for those aged 16 and over, % are for those aged 16-64

From the above chart, it is clear that Rutland has a lower rate of benefit claimants in every Benefit category.

Rutland's percentage differences compared to the United Kingdom and the East Midlands:

Jobseekers Allowance: The rate of Job Seekers Allowance claimants in Rutland were 72% less than in the United Kingdom overall.

ESA (Employment and Support Allowance) and incapacity benefits: Rutland had a 50% less rate of claimants compared to the Midlands and United Kingdom.

Lone Parents Benefits: There was a 50% less rate of Lone Parent Claimants in Rutland compared to the Midlands and United Kingdom.

Carers Benefits: The rate of Carers claiming benefits in Rutland were 41% less than in the United Kingdom.

Income related benefits: There were only half as many Income Related benefit claimants in Rutland compared to the Midlands and United Kingdom.

Bereaved Claimants: The rate of Bereaved Claimants were the same across Rutland, Midlands and

United Kingdom.

Main out of work benefits: From the above findings we can conclude that overall Rutland had a much lower rate of benefit claimants than both the Midlands and United Kingdom in 2016.

Employment in Rutland, Midlands and Great Britain January 2017 – December 2017[24]
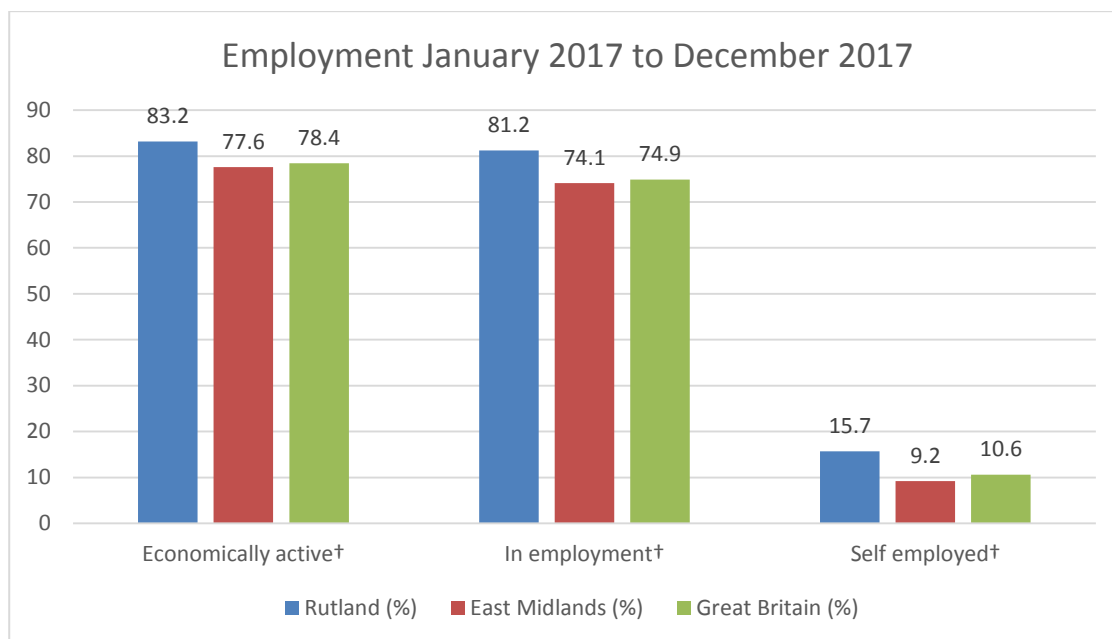
† - numbers are for those aged 16 and over, % are for those aged 16-64
§ - numbers and % are for those aged 16 and over. % is a proportion of economically active

Economically active:

Rutland have a higher rate of being economically active than the East Midlands and Great Britain. We can also see that a higher percentage of Rutland's residents were in employment compared to the Region and Nation.

In Employment:

Rutland also has a greater rate of people who are in employment aged between 16 to 64 years of age. Rutland have a 9.14% higher rate of employment compared the region and 8.07% greater compared to the United Kingdom.

Self Employed:

The rate of Self-employed residence in Rutland was noticeably higher with a rate which was 52.2% higher than the East Midlands and 39.78% higher when compared with the U.K.

Employees jobs in Rutland – 2016[24]

The below table shows Rutland's working population aged 16-64 categorised by type of industry.

The table compares Rutland's percentage rate against the East Midlands and Great Britain. The percentage difference has been calculated to illustrate the variance.

Employee jobs by industry	Rutland	East Midlands	Great Britain
	(%)	(%)	(%)
Mining and quarrying	2	0.2	0.2
Manufacturing	11.7	13.1	8.1
Electricity, gas, steam and air conditioning supply	0	0.7	0.4
Water supply; sewerage, waste management and remediation activities	1.5	0.6	0.7
Construction	4	5	4.6
Wholesale and retail trade; repair of motor vehicles and motorcycles	16.7	17.1	15.3
Transportation and storage	3	5.3	4.9
Accommodation and food service activities	13.3	7.5	7.5
Information and communication	2.3	2.2	4.2
Financial and insurance activities	0.5	1.5	3.6
Real estate activities	0.8	0.9	1.6
Professional, scientific and technical activities	6.7	6.5	8.6
Administrative and support service activities	3	9.5	9
Public administration and defence; compulsory social security	5.3	3.9	4.3
Education	15	8.7	8.9
Human health and social work activities	6.7	13.1	13.3
Arts, entertainment and recreation	2.3	2.2	2.5
Other service activities	2	1.8	2.1

The Majority of Rutland's jobs were in the following Industries:

Wholesale and retail trade; repair of motor vehicles and motorcycles **16.7%**

Education **15%**

Accommodation and food service activities **13.3%**

Manufacturing **11.7%**

The four most common industries in Rutland accounted for 56.7% of the overall jobs. All four

industries were higher in percentage than in Great Britain.

The industries being higher than the national percentage may be a key factor for Rutland's low Unemployment rate.

17.   Recommendations

- That further work is carried out to update population projections and changes in demographics, to inform future commissioning intentions and planning of services once more detail is known about the nature and extent of new developments.

- Carry out assessments of access to services and the likely impact on social care, health and wellbeing of Rutland's population as necessary once more detail is known about the nature and extent of new developments.

ASMR	Age-Standardised Mortality Rate
BME	Black and Minority Ethnic Groups
CCG	Clinical Commissioning Group
DMS	Defence Medical Services
GFR	General Fertility Rate
HLE	Healthy Life Expectancy
IMD	Index of Multiple Deprivation
LGB	Lesbian, Gay or Bisexual
LSOA	Lower Super Output Area
MOD	Ministry of Defence
NHS	National Health Service
NICE	National Institute for Health and Care Excellence
OAC	Output Area Classification
PHE	Public Health England
TFR	Total Fertility Rate

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https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates

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