

Troon and Villages - Locality Profile

A Management information release for Scotland

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Localities Profiles

Public Health Scotland

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Summary Table

Section	Indicator	Data Type	Time Period	Troon and Villages Locality	Ayr North Locality	Ayr South and Villages Locality	Girvan and South Carrick Locality	Maybole and North Carrick Locality	Prestwick and Villages Locality	South Ayrshire HSCP	Scotland
Demographics	Total population	count	2024	19,150	21,326	36,018	9,140	8,356	18,270	112,260	5,546,900
	Ratio male to female	ratio	2024	1:1.09	1:1.03	1:1.1	1:1.07	1:1.07	1:1.12	1:1.08	1:1.06
	Population over 65	%	2024	30.3	21.6	28.4	28.4	26.6	28.6	27.3	20.5
	Population in the least deprived SIMD quintile	%	2020	37.4	0	27.5	0	0	23.7	19.1	20
	Population in the most deprived SIMD quintile	%	2020	9.4	56.2	3.1	23.4	7.9	3.6	16.4	20

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Section	Indicator	Data Type	Time Period	Troon and Villages Locality	Ayr North Locality	Ayr South and Villages Locality	Girvan and South Carrick Locality	Maybole and North Carrick Locality	Prestwick and Villages Locality	South Ayrshire HSCP	Scotland
Housing	Total number of households	count	2024	9,719	12,276	16,600	4,950	4,318	8,911	56,774	2,740,513
	Households with single occupant tax discount	%	2024	38.5	45.3	34.2	37.3	35.2	36.2	38	38.4
	Households in Council Tax Band A-C	%	2024	44.2	74.4	37.3	72.9	60.5	35.1	51	58.5
	Households in Council Tax Band F-H	%	2024	23.5	3.3	27.6	3.8	10	15.3	16.3	13.9
Population Health	Male average life expectancy in years	mean	2020-2024*	78.7	71.2	79.1	74.3	76	79.2	76.8	77.2
	Female average life expectancy in years	mean	2020-2024*	82.2	77.4	81.9	79.8	81.8	82.8	81.3	81.1

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Section	Indicator	Data Type	Time Period	Troon and Villages Locality	Ayr North Locality	Ayr South and Villages Locality	Girvan and South Carrick Locality	Maybole and North Carrick Locality	Prestwick and Villages Locality	South Ayrshire HSCP	Scotland
	Deaths aged 15-44 per 100,000	rate	2022 - 2024	97.5	217.5	84.7	190.9	85.1	68	121.8	104.8
	Population estimated to have at least one LTC	%	2024/25	29.4	30.4	28.7	29.5	29	28.7	29.2	22.5
	Cancer registrations per 100,000	rate	2020 - 2022	594.7	668.8	605.5	640.9	533.8	632.4	615.4	629.7
	Anxiety, depression & psychosis prescriptions	%	2024/25	20.4	29.8	22.7	27.1	23.4	21.5	23.9	20.8

*at HSCP and Scotland level, the time period is a 3-year aggregate (2022-2024)

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Section	Indicator	Data Type	Time Period	Troon and Villages Locality	Ayr North Locality	Ayr South and Villages Locality	Girvan and South Carrick Locality	Maybole and North Carrick Locality	Prestwick and Villages Locality	South Ayrshire HSCP	Scotland
Lifestyle and Risk Factors	Alcohol-related hospital admissions per 100,000	rate	2023/24	428.3	1013	333.4	680.2	516.1	291.6	515.2	548.5
	Alcohol-specific mortality per 100,000	rate	2019 - 2023	13.4	36.7	10	19.9	31.9	14.3	18.8	21.8
	Drug-related hospital admissions per 100,000	rate	2021/22 - 2023/24	138.1	548.1	107.5	182.1	383.2	82.6	225.8	181.2
	Bowel screening uptake	%	2021 - 2023	70.6	58.4	71.5	69.3	66.9	71.6	68.5	66.4
Hospital & Community Care	Emergency admissions per 100,000	rate	2024/25	13,044	15,577	12,455	12,724	13,607	12,425	13,251	10,626
	Unscheduled bed days per 100,000	rate	2024/25	120,914	132,979	102,368	128,370	105,661	112,326	115,330	75,436

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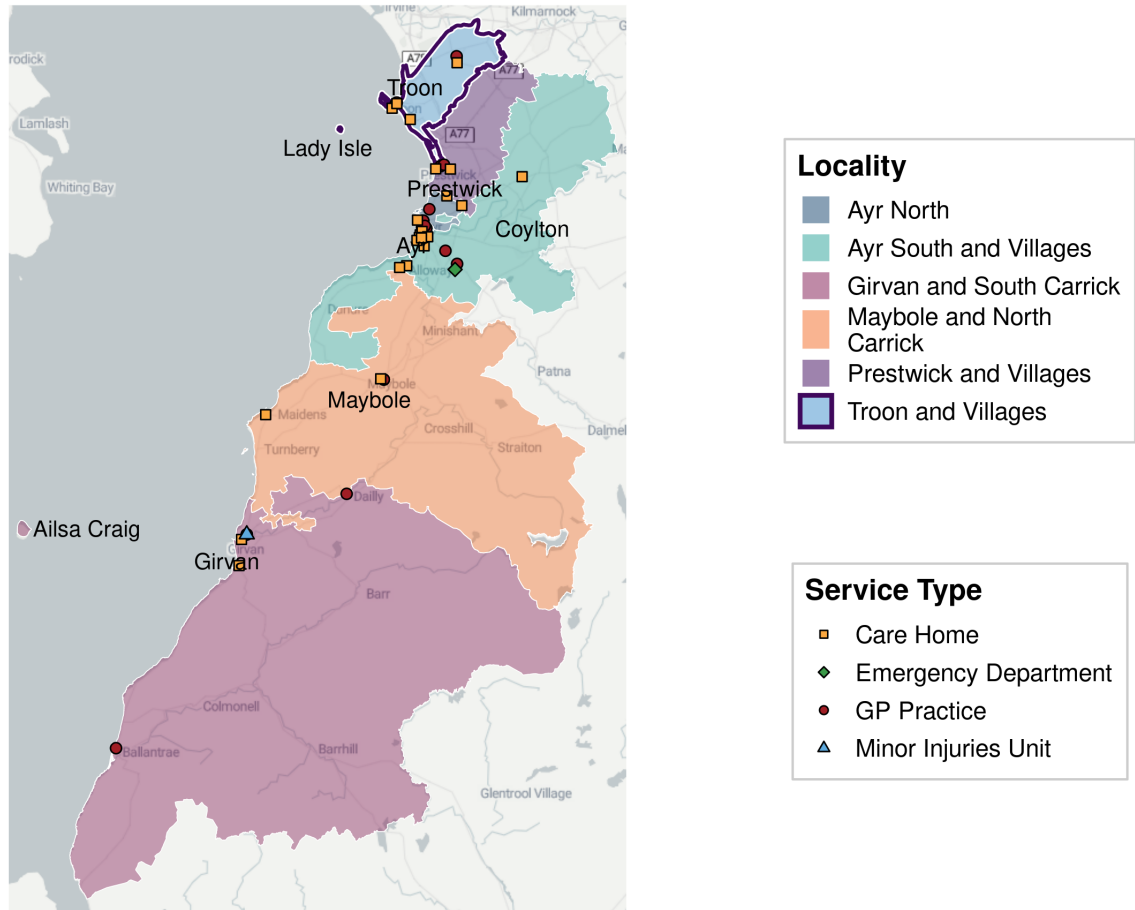
Section	Indicator	Data Type	Time Period	Troon and Villages Locality	Ayr North Locality	Ayr South and Villages Locality	Girvan and South Carrick Locality	Maybole and North Carrick Locality	Prestwick and Villages Locality	South Ayrshire HSCP	Scotland
	A&E attendances per 100,000	rate	2024/25	23,185	33,733	26,734	19,365	27,453	23,788	26,432	26,915
	Delayed discharges (65+) per 100,000	rate	2024/25	89,115	127,032	77,723	87,158	89,124	83,490	91,270	51,401
	Potentially Preventable Admissions per 100,000	rate	2024/25	2,042	2,837	2,035	2,090	2,094	2,146	2,215	1,694
Hospital (Mental Health) Care	Psychiatric patient hospitalisations per 100,000	rate	2021/22 - 2023/24	144.9	292	135.9	119	133.3	90	160.4	216.1
	Unscheduled bed days per 100,000	rate	2024/25	7,655	22,184	18,146	9,967	9,538	12,540	14,905	18,134

Notes for this profile

- All years shown are calendar years unless otherwise specified.
- Upper and lower 95% confidence intervals are shown throughout this document where available. In charts, these are displayed as shaded areas on either side of trend lines or as black error bars in bar charts. Confidence intervals show the range of possible values and a certainty that the true value falls within them.
- Definitions for the indicators shown are available in Appendix 1.
- Any zero figures for some indicators will indicate either suppression of small data or a complete lack of data available for this locality.

Services

Figure 1: Map of services by locality in South Ayrshire HSCP²



Source: Public Health Scotland

Table 1: Number of each type of service in Troon and Villages Locality²

Service Type	Service	Number
Primary Care	GP Practice	3
A&E	Emergency Department	0
	Minor Injuries Unit	0
Care Home	Elderly Care	4
	Other	1

Demographics

Summary

For the most recent time period available, Troon and Villages Locality had:

- A total population of **19,150** people, where **48%** were male, and **30.3%** were aged over 65.
- **37.4%** of people lived in the least deprived SIMD quintile, and **9.4%** lived in the most deprived quintile.

Population

In 2024, the total population of Troon and Villages locality was 19,150. The graph below shows the population distribution of the locality. Overall, **48%** of the population are male, and **52%** are female.

Figure 2: Population by age and sex.

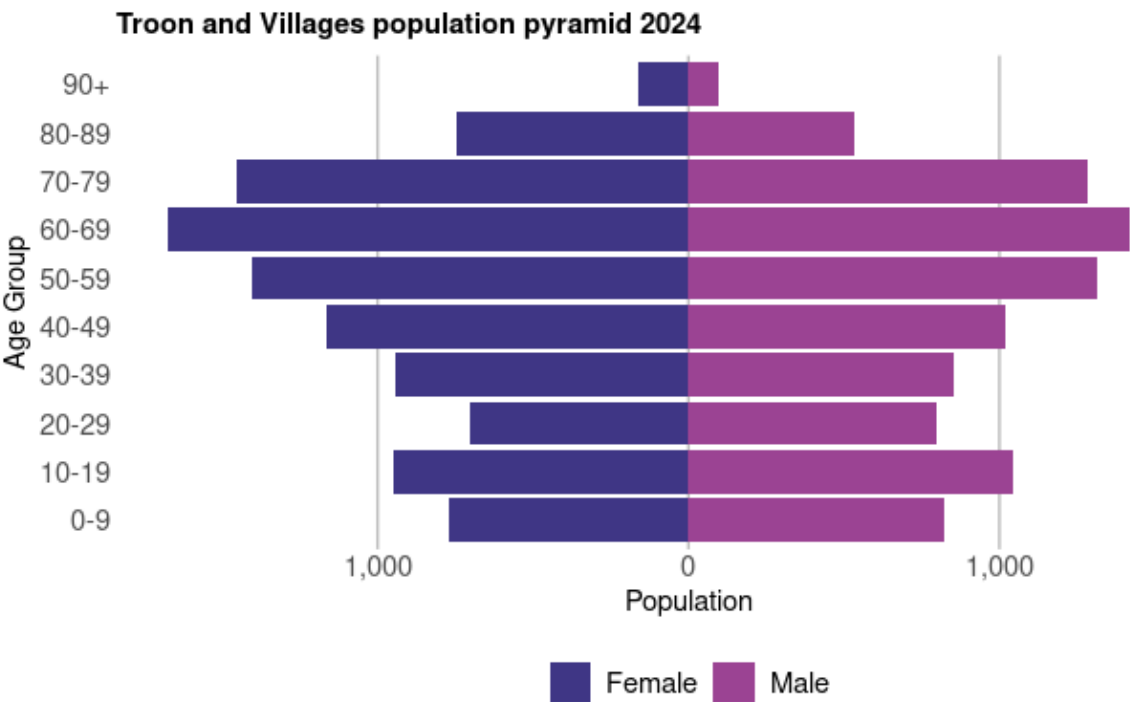


Figure 3 shows the historical population of Troon and Villages, along with the NRS population projections. The population has been rising. The population in Troon and Villages is estimated to increase by 0.2% from 2024 to 2033. *Please see the footnotes for more information on how the population projections were calculated¹.*

Figure 3: Population time trend and projection.

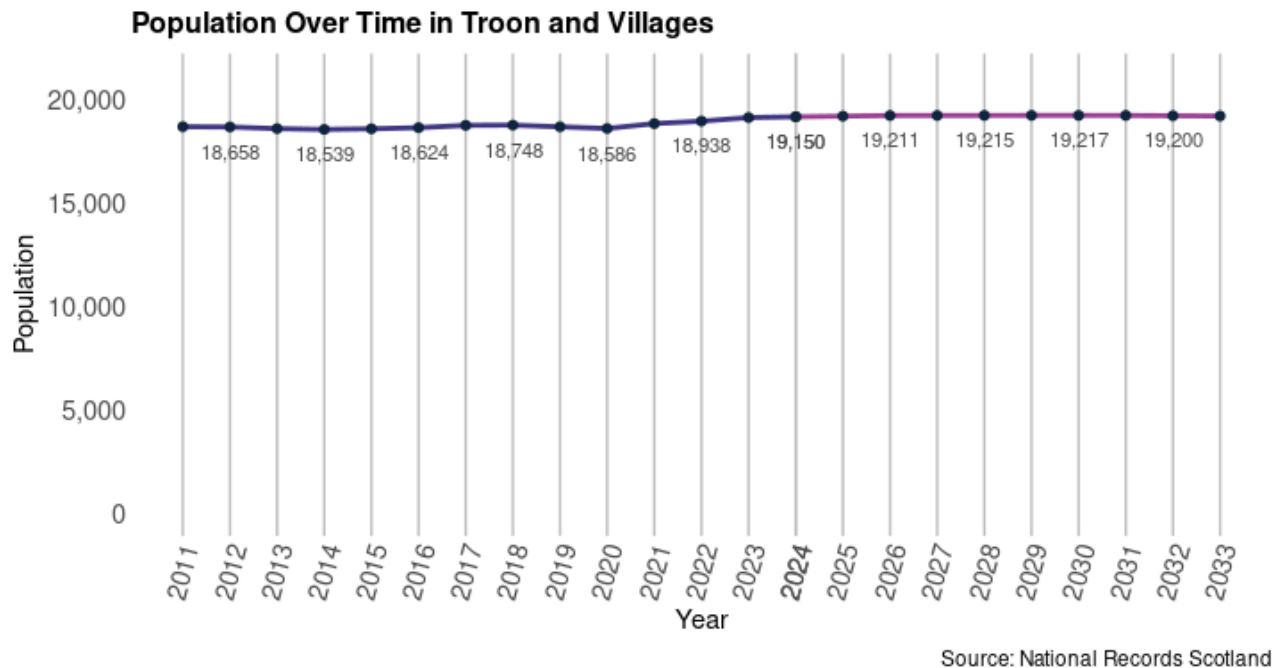
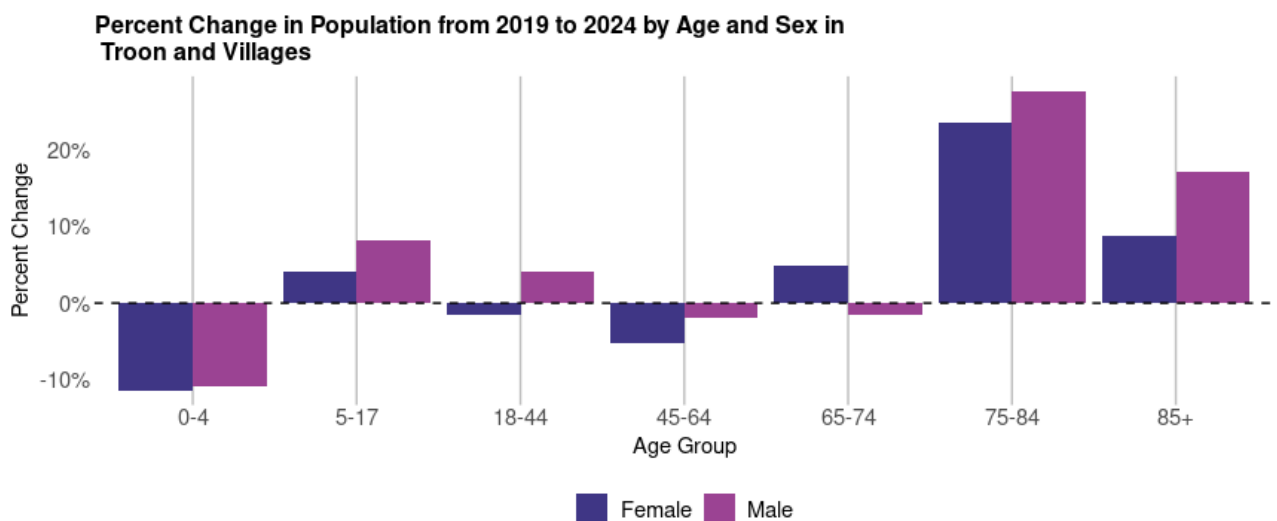


Figure 4 shows how the population structure has changed between 2019 and 2024.

Figure 4: Change in population structure over the last five years.

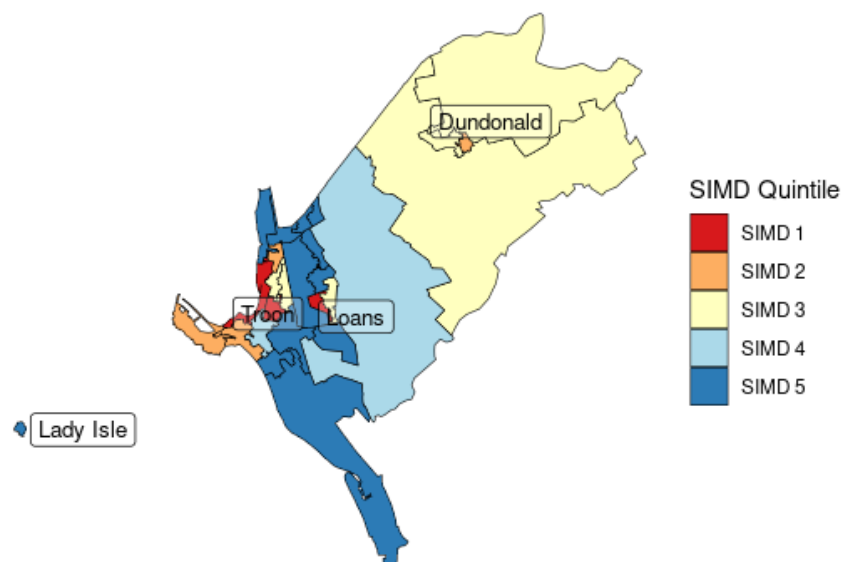


Deprivation

The following section explores the deprivation structure of Troon and Villages through the Scottish Index of Multiple Deprivation (SIMD). The SIMD ranks all datazones in Scotland by a number of factors; Access, Crime, Education, Employment, Health, Housing and Income. Based on these ranks, each datazone is then given an overall deprivation rank, which is used to split datazones into Deprivation Quintiles (Quintile 1 being the most deprived, and Quintile 5 the least). The most recent SIMD ranking was carried out in 2020. This section mainly focuses on the SIMD 2020 classifications, however, the 2016 classifications are used to assess how deprivation has changed in Troon and Villages when compared to the rest of Scotland.

Of the 2024 population in Troon and Villages, **9.4%** live in the most deprived Quintile (SIMD 1), and **37.4%** live in the least deprived Quintile (SIMD 5).

Figure 5: Map of Data Zones within Troon and Villages coloured by SIMD quintiles.



Source: Scottish Government, Public Health Scotland

Table 2 details the percentage of the locality's 2016 population living in the 2016 SIMD Quintiles, the percentage of the 2024 population living in the 2020 SIMD

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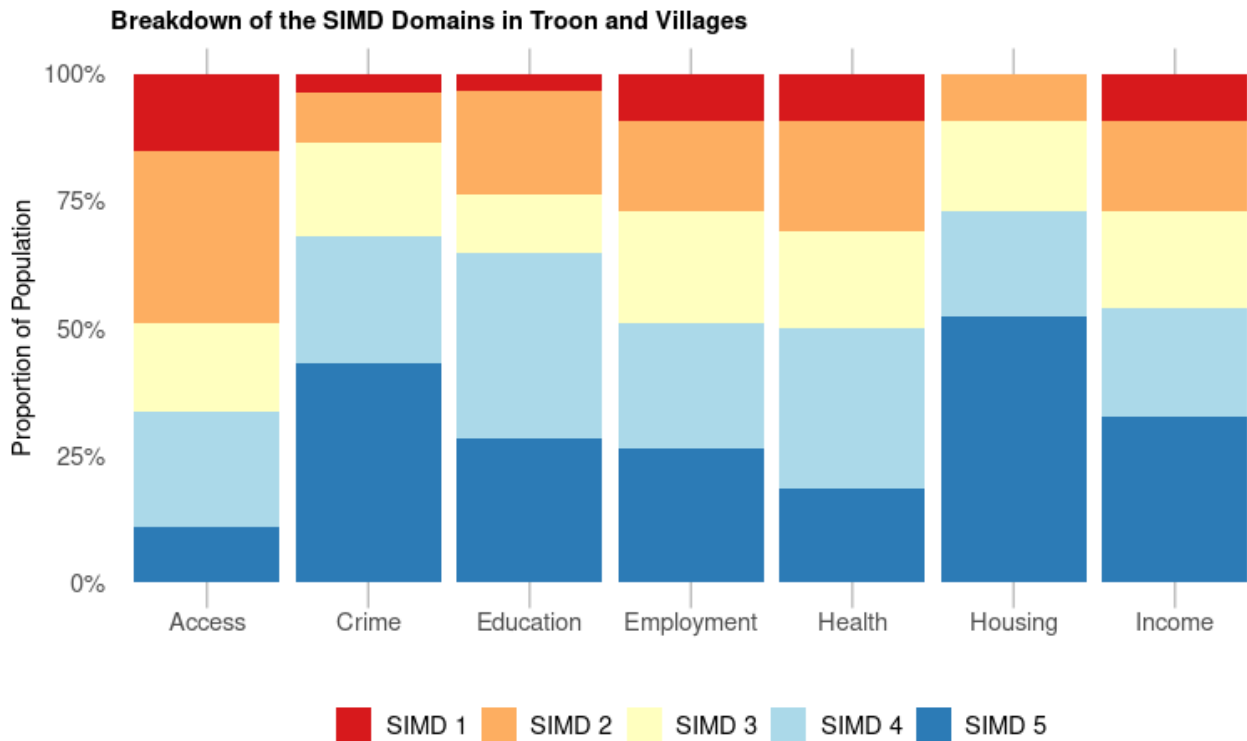
Quintiles, and their difference for comparison. Figure 6 then breaks down SIMD by domain in Troon and Villages.

Table 2: Percentage of the Troon and Villages population living in the 2016 and 2020 SIMD Datazone Quintiles in 2016 and 2024 respectively.

Quintile	Percent of 2016 Population (SIMD 2016 Ranking)	Percent of 2024 Population (SIMD 2020 Ranking)	Difference
SIMD 1	10.8%	9.4%	-1.4%
SIMD 2	14.8%	13.5%	-1.3%
SIMD 3	24.3%	23.3%	-1.0%
SIMD 4	9.9%	16.4%	6.5%
SIMD 5	40.2%	37.4%	-2.8%

Source: Scottish Government, Public Health Scotland, National Records Scotland.

Figure 6: Proportion of the population that reside in each 2020 SIMD quintile by domain in 2024.

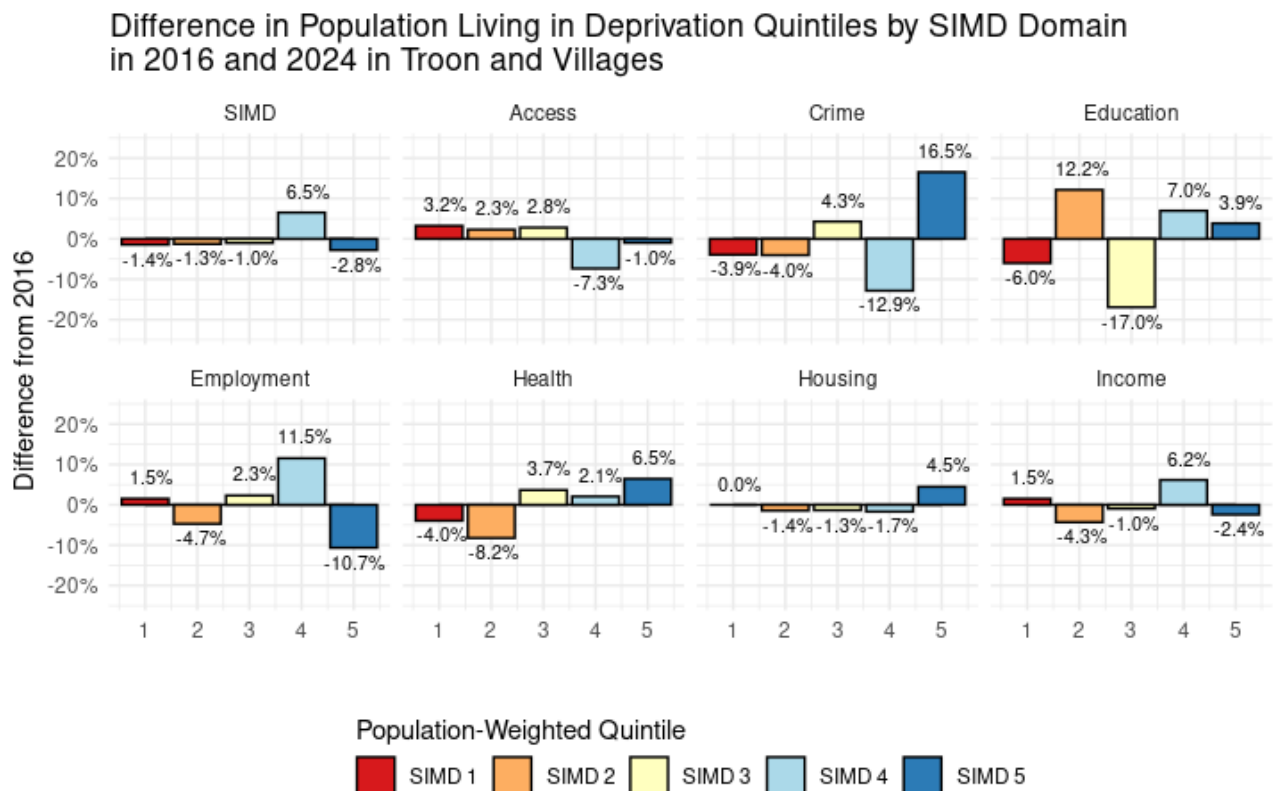


Source: Scottish Government, Public Health Scotland, National Records Scotland

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Figure 7 presents a comparison between the 2016 SIMD ranking applied to 2016 population estimates, and the more recent 2020 SIMD ranking applied to 2024 population estimates. The percentages of the population living within each SIMD quintile by domain were calculated using the 2016 and 2020 SIMD datazone classifications respectively. The differences in these percentages are plotted in Figure 7. Negative values on the y-axis indicate a decrease in the percent of the population living within a quintile, while positive values indicate an increase in the percent of the population living within a quintile. **Please note that quintiles have been weighted by the Scottish population so, any local changes in SIMD quintile do not necessarily indicate a difference in deprivation, but rather a difference in deprivation in comparison to the rest of Scotland.**

Figure 7: Percentage of population in 2016 and 2024 living in the 2016 and the 2020 SIMD quintiles by domain.



Source: Scottish Government, National Records Scotland

Housing

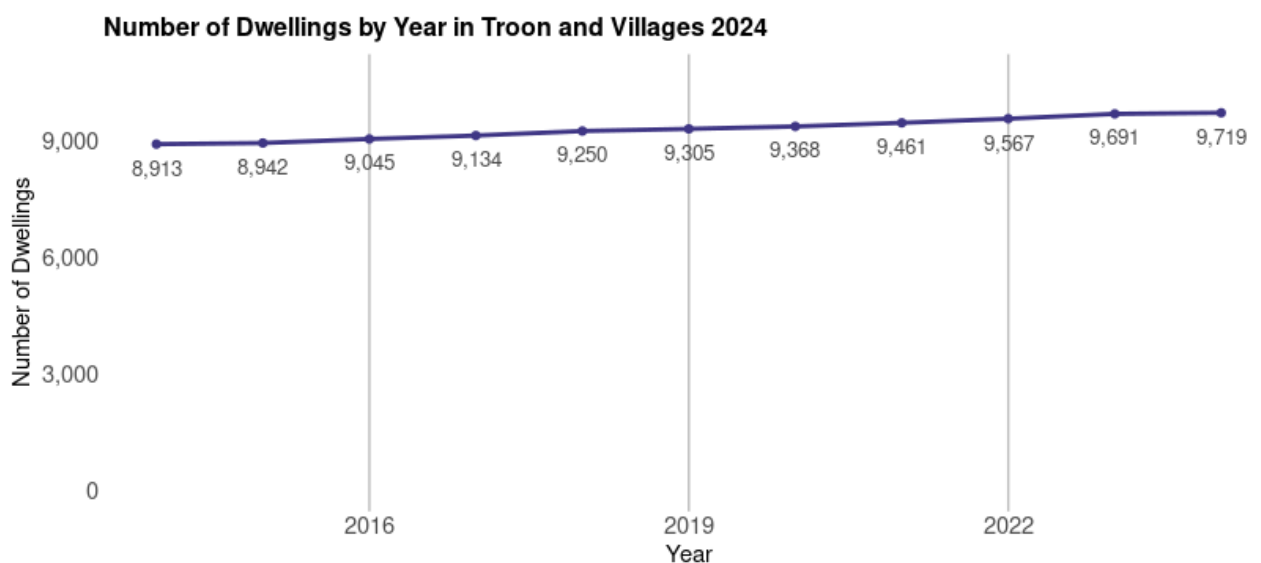
Summary

For the most recent time period available, Troon and Villages Locality had:

- **9,719** dwellings, of which: **96.1%** were occupied and **1.1%** were second homes.
- **38.5%** of dwellings received a single-occupant council tax discount, and **1%** were exempt from council tax entirely.
- **44.2%** of houses were within council tax bands A to C, and **23.5%** were in bands F to H.

The graph below shows the number of dwellings in Troon and Villages from 2014 to 2024.

Figure 8: Number of dwellings time trend.



Source: Council Tax billing system (via NRS)

Of the total number of dwellings in 2024, 38.5% (3,741 households) were occupied by an individual receiving a single-occupant council tax discount. Furthermore, 1% (98 households) were occupied and exempt from council tax.

There were 110 dwellings classed as a second home in 2024, these dwellings made up 1.1% of the households in Troon and Villages.

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Table 3: Breakdown of dwelling types by year for Troon and Villages locality.

Year	Total Dwellings	Occupied Dwellings	Vacant Dwellings	Single Occupant Tax Discount	Council Tax Exempt Dwellings	Second Homes
2014	8,913	8,651	172	3,198	83	90
2015	8,942	8,643	204	3,142	68	95
2016	9,045	8,711	235	3,207	68	99
2017	9,134	8,797	238	3,284	73	99
2018	9,250	8,899	242	3,374	76	109
2019	9,305	8,992	213	3,194	81	100
2020	9,368	8,999	269	3,319	78	100
2021	9,461	9,116	233	3,493	66	112
2022	9,567	9,188	259	3,530	74	120
2023	9,691	9,292	279	3,616	85	120
2024	9,719	9,341	268	3,741	98	110

Source: Scottish Assessors' Association (via NRS)

The proportion of households within each council tax band are displayed in the chart below, figures are shown in Table 4.

Figure 9: Breakdown of households by council tax band for Troon and Villages in 2024.

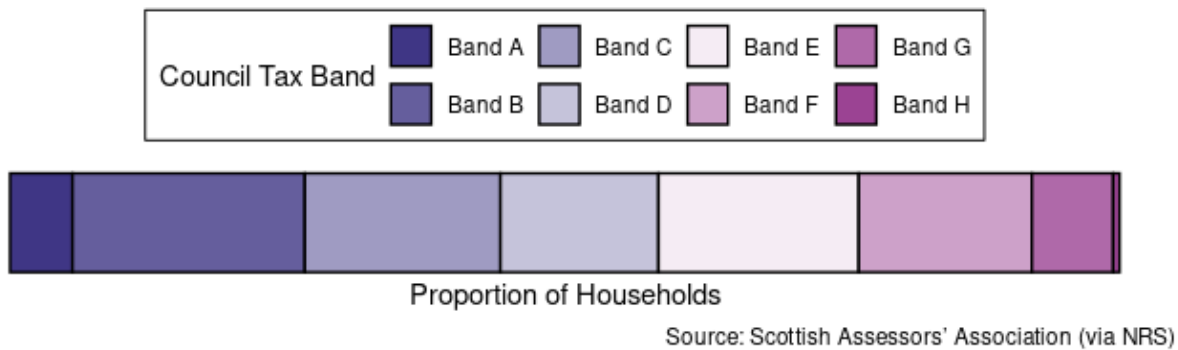


Table 4: Percentage of households by council tax band for Troon and Villages in 2024.

Tax Band	A	B	C	D	E	F	G	H
Percent of households	5.6%	20.9%	17.6%	14.3%	18.1%	15.6%	7.3%	0.6%

Source: Scottish Assessors' Association (via NRS)

Population Health

Summary

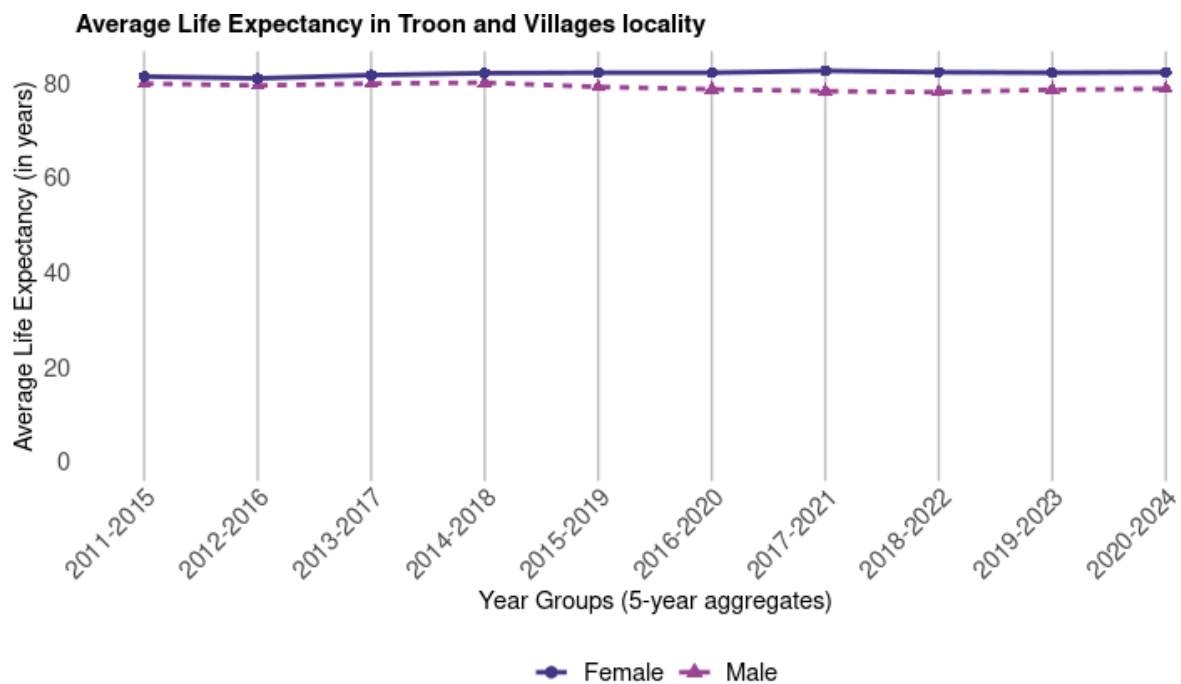
For the most recent time period available³, Troon and Villages Locality had:

- An average life expectancy of **78.7** years for males and **82.2** years for females, compared to the national average of 77.2 and 81.1 years of age respectively.
- A death rate for ages 15 to 44 of **97.5** deaths per 100,000 age-sex standardised population. This is lower than Scotland (105 deaths per 100,000)⁴.
- **29.4%** of the locality's population with at least one long term physical health condition. This is higher than Scotland (22.5%).
- A cancer registration rate of **595** registrations per 100,000 age-sex standardised population (compared to 630 in Scotland), and an early death rate (<75 years) from cancer of **111** per 100,000 age-sex standardised population (compared to 142 in Scotland)⁴.
- **20.4%** of the population being prescribed medication for anxiety, depression, or psychosis. This is a smaller proportion than Scotland (20.8%).

Life Expectancy

In the latest time period available from 2020-2024 (5-year aggregate), the average life expectancy in Troon and Villages locality was 78.7 years for men, and 82.2 years for women. A 10-year time trend can be seen in figure 10.

Figure 10: Average life expectancy in men and women over time



Source: ScotPHO

Table 5 provides the average life expectancy for men and women in different areas for the latest time period available.

Table 5: Average life expectancy in years for the latest time periods (2020-2024 aggregated years for the locality; 2022-2024 aggregated years for other areas).

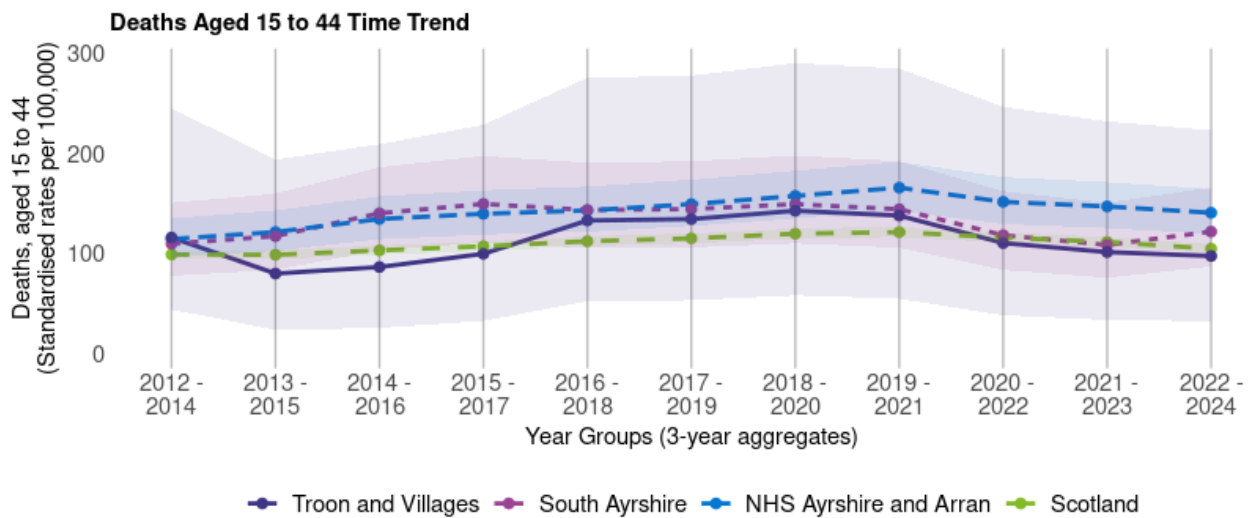
Sex	Troon and Villages	South Ayrshire	NHS Ayrshire and Arran	Scotland
Male	78.7	76.8	75.8	77.2
Female	82.2	81.3	80.0	81.1

Source: ScotPHO

Deaths, aged 15 to 44

The following chart shows a trend of death rates among people aged 15 to 44 per 100,000 age-sex standardised population⁴ by area. In the most recent aggregate time period available (2022 - 2024), the mortality rate in Troon and Villages locality was **97.5** deaths per 100,000 population.

Figure 11: Deaths aged 15 to 44 years by geographical area and over time.

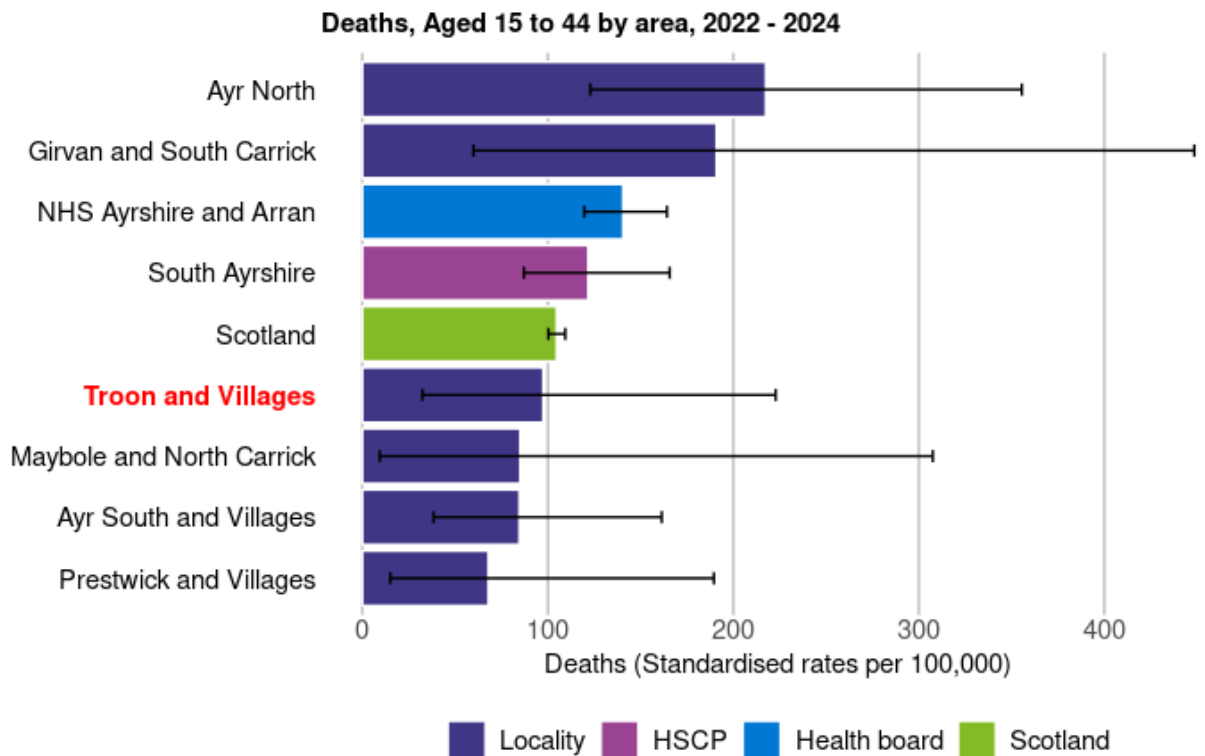


Source: ScotPHO

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Figure 12 provides comparisons of deaths at ages 15 to 44 across all areas including other localities in South Ayrshire HSCP. In 2022 - 2024, Troon and Villages had a lower rate than the rest of Scotland (97.5 compared to 105 deaths per 100,000).

Figure 12: Deaths at ages 15 to 44 by area for the latest time period available.

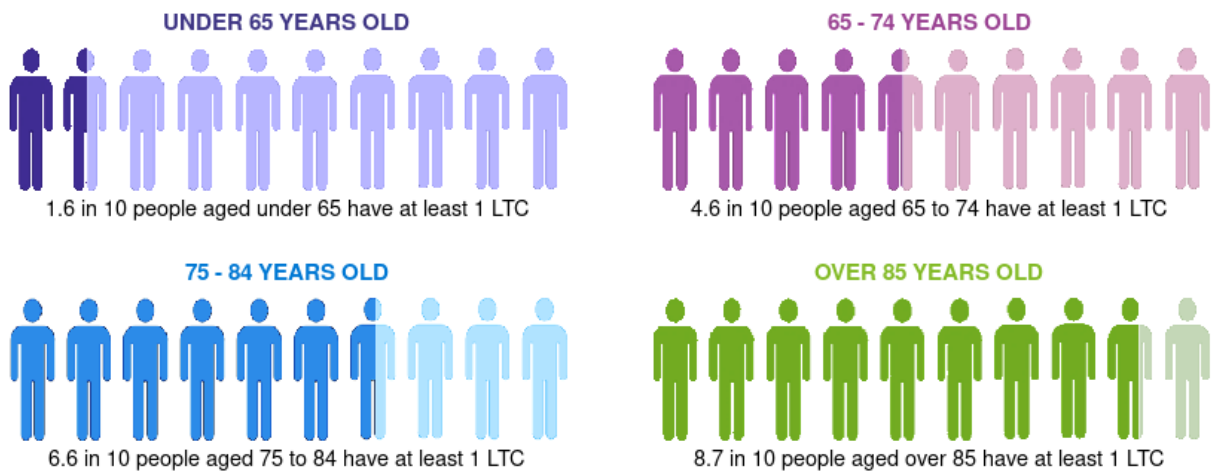


Source: ScotPHO

Long Term Physical Health Conditions and Multi-morbidity

The estimates in the following sections are based on an individual being hospitalised with a relevant condition *at any point* in the past. This methodology can lead to both undercounts and overcounts depending on the condition; see the footnotes for more details.⁵

In the financial year 2024/25, in Troon and Villages Locality, it is estimated that **29.4%** of the population had at least one physical Long Term Condition (LTC). These include cardiovascular, neurodegenerative, and respiratory conditions, as well as other organ conditions (namely liver disease and renal failure), arthritis, cancer, diabetes, and epilepsy. *Please note that estimates for this section are based on people who had contact with NHS services - see footnotes for further information and caveats on identifying LTCs.*⁵



The co-occurrence of two or more conditions, known as multi-morbidity, is broken down in Table 6, distinguishing between age groups. Overall, **3.7%** of those under 65 have more than one LTC, compared to **31.7%** of those over 65.

Table 6: Multi-morbidity of physical LTCs by age group in 2024/25

	Percentage over 65	Percentage under 65
1 LTC	27.1	12.8
2 LTCs	14.7	2.6
3 LTCs	8.6	0.7
4 or more LTCs	8.4	0.4

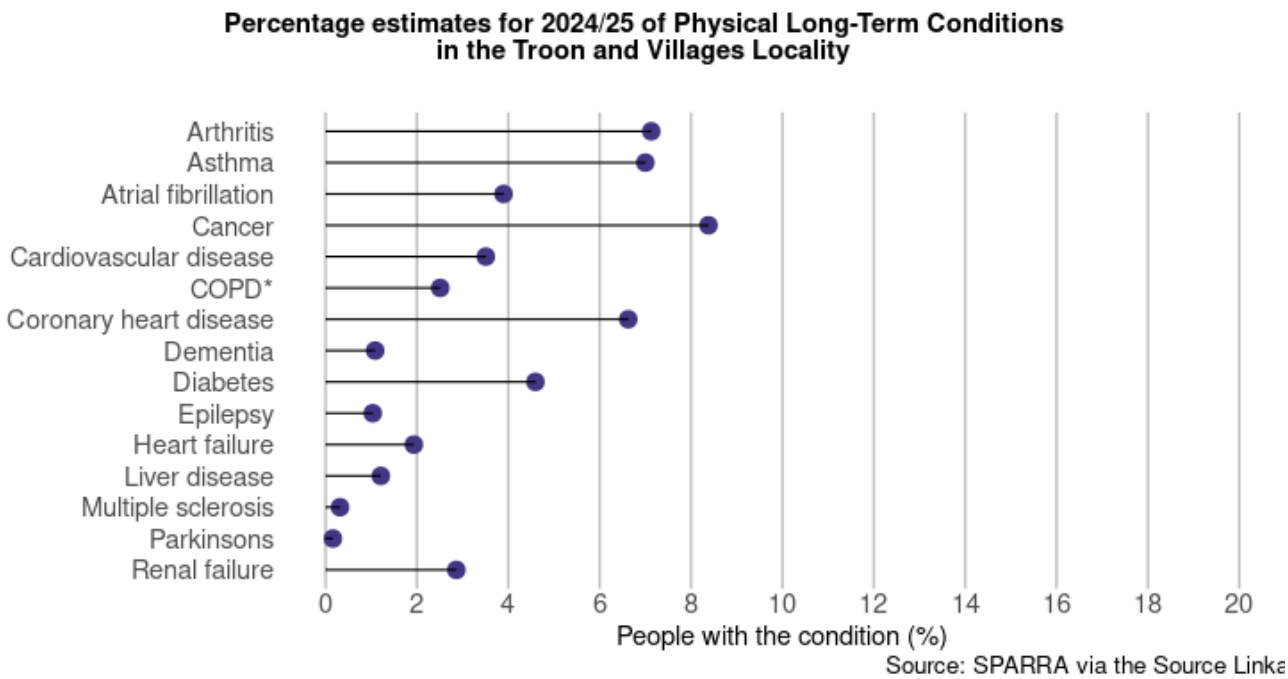
Most common physical Long Term Conditions (LTCs)

- Figure 13 shows the LTC estimates for Troon and Villages Locality in the financial year 2024/25 across all ages. This is based on whether someone has ever had a hospital admission for this condition.
- Table 7 orders the LTC estimates to show the five most common physical LTCs across all ages at the Locality, Partnership, and Scotland levels.

Below is a breakdown of estimated physical LTCs, for the financial year 2024/25.

Figure 13 shows the estimated percentage of different LTCs in Troon and Villages locality, and Table 7 illustrates the five most common physical LTCs across all ages at the locality, partnership, and Scotland levels.

Figure 13: The percentage of people with each physical LTC.



*COPD: Chronic Obstructive Pulmonary Disease

Table 7: Top five physical LTCs in, Troon and Villages Locality as a percentage of the population for 2024/25, compared to South Ayrshire HSCP and Scotland.

Troon and Villages Locality	South Ayrshire HSCP	Scotland
Cancer 8.38 %	Cancer 7.91 %	Arthritis 5.84 %
Arthritis 7.13 %	Asthma 7.44 %	Cancer 5.65 %
Asthma 7 %	Arthritis 6.87 %	Asthma 5.05 %
Coronary heart disease 6.63 %	Coronary heart disease 6.71 %	Coronary heart disease 4.7 %

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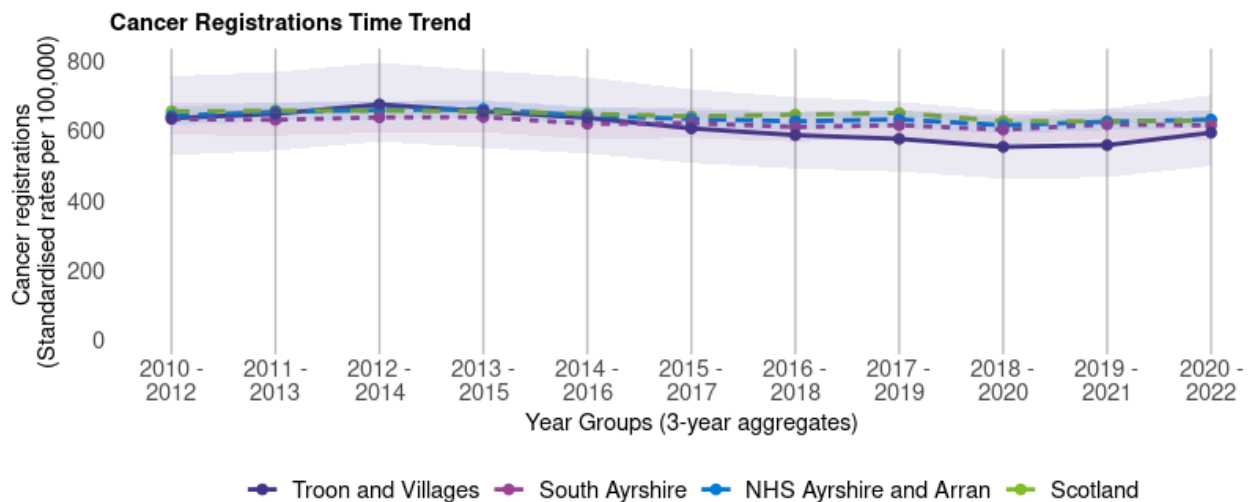
Troon and Villages Locality	South Ayrshire HSCP	Scotland
Diabetes 4.59 %	Diabetes 4.72 %	Diabetes 3.57 %

Source: Source Linkage Files

Cancer

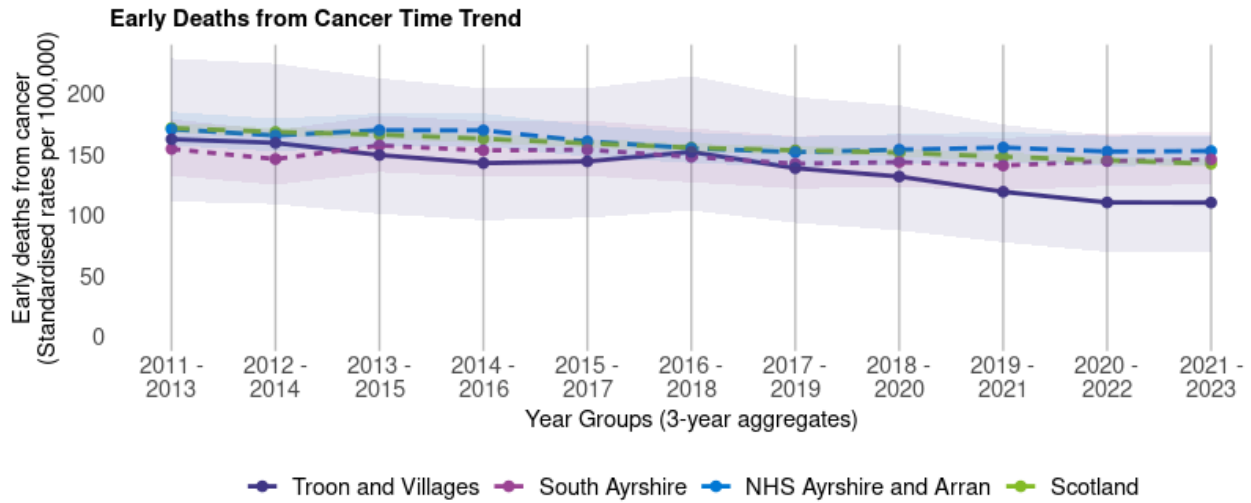
For the period 2020 - 2022, there were **147** new cancer registrations per year on average (a rate of **595** registrations per 100,000 age-sex standardised population) in Troon and Villages locality. For the period 2021 - 2023, there were also **111** early deaths per 100,000 from cancer in the locality, this is a **32%** decrease compared to the rate 10 years prior.

Figure 14: Cancer registration rate over time and by area.



Source: ScotPHO

Figure 15: Early deaths from cancer (<75 years) over time and by area.



Hospitalisations by condition

Patient hospitalisations can indicate how certain diseases have varying impacts on people's lives. In the latest time period available in Troon and Villages, the condition with the highest rate of hospitalisations was Coronary Heart Disease.

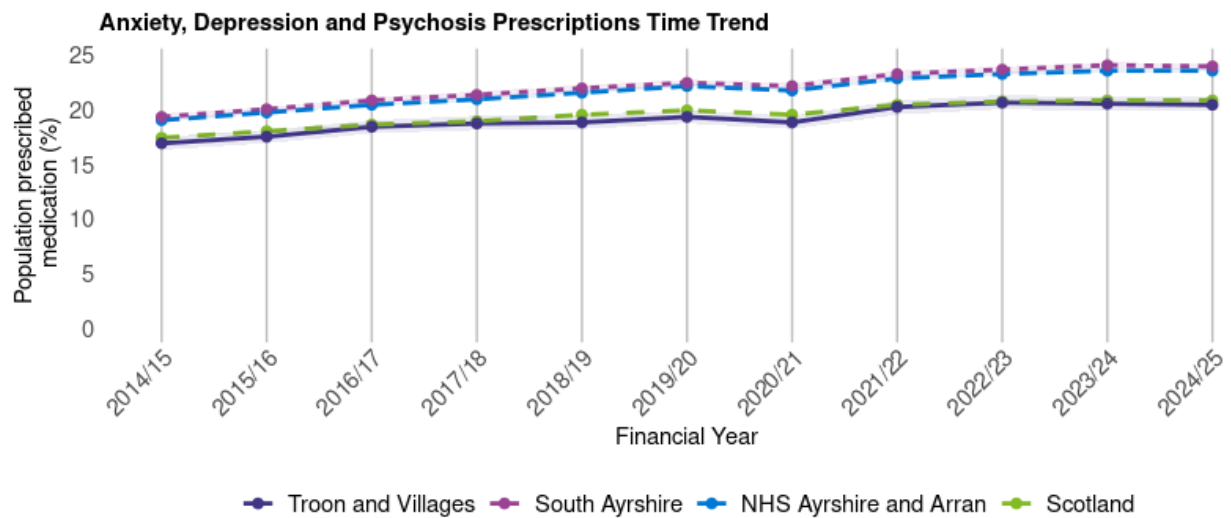
Table 8: Patient hospitalisations by condition and geographical area, age-sex standardised rates per 100,000.

Disease	Latest time period	Troon and Villages	South Ayrshire	NHS Ayrshire and Arran	Scotland
Asthma	2022/23 - 2024/25	85.4	98.8	106.5	81.2
Coronary Heart Disease	2022/23 - 2024/25	397.5	430.6	410.6	318.2
COPD	2022/23 - 2024/25	184.1	234.8	278.8	215.3

Anxiety, Depression and Psychosis (ADP) prescriptions

In 2024/25, **20.4%** of people were prescribed medication for anxiety, depression or psychosis in Troon and Villages Locality. This is a **3.5 percentage point increase** from the rate 10 years prior in 2014/15 which was 16.9%.

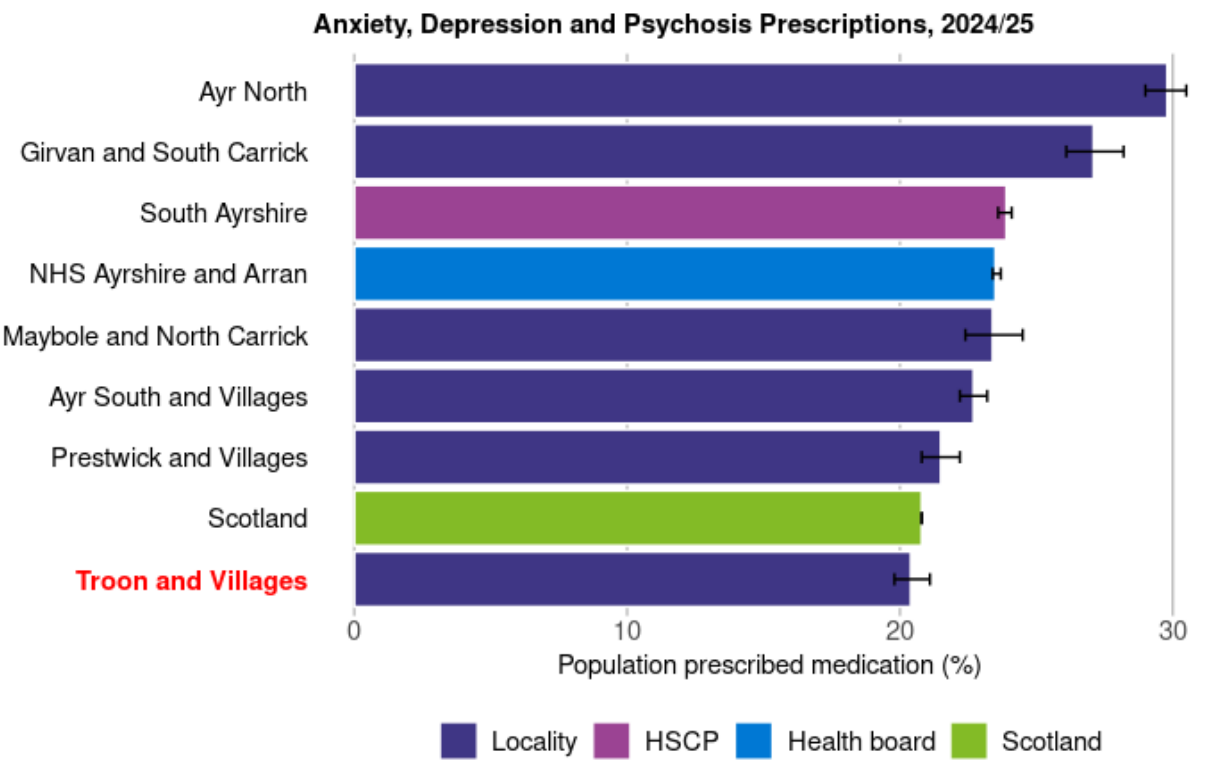
Figure 16: Anxiety, depression and psychosis prescriptions over time and by geographical area.



Source: ScotPHO

In 2024/25, Troon and Villages had a smaller proportion of the population being prescribed ADP medication compared to the rest of Scotland (20.4% compared to 20.8%).

Figure 17: Percentage population prescribed medication for anxiety, depression and psychosis by area for the latest period available.



Source: ScotPHO

Lifestyle and Risk Factors

Summary

Mental and physical well-being has close ties with people's lifestyles and behaviours. Financial security, employment and location are influences that often have a bearing on these choices. Issues can develop when alcohol, smoking or drug use shape lives. This section provides data on drug-related hospital admissions, alcohol-related hospital admissions, alcohol-specific deaths and bowel screening uptake, to give an overview of some of the lifestyles and behaviours for the Troon and Villages locality. These can give an idea of quality of life and prosperity.

For the most recent time period available³, Troon and Villages had:

- **428** alcohol-related hospital admissions per 100,000 age-sex standardised population. This is lower than Scotland (549 admissions per 100,000)⁴.
- **13.4** alcohol-specific deaths per 100,000 age-sex standardised population. This is lower than Scotland (21.8 deaths per 100,000)⁴.
- **138** drug-related hospital admissions per 100,000 age-sex standardised population. This is lower than Scotland (181 admissions per 100,000)⁴.
- **70.6%** uptake of bowel screening among the eligible population, compared to 66.4% in Scotland.

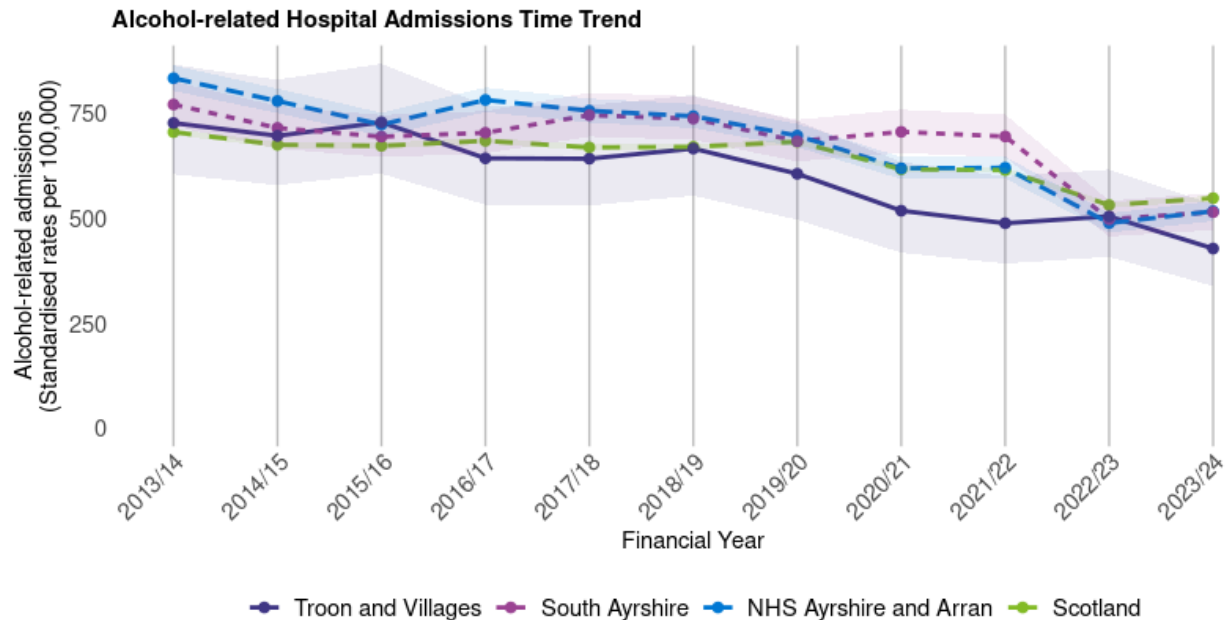
Alcohol-related Hospital Admissions

In 2023/24, the rate of alcohol-related admissions was **428** per 100,000 age-sex standardised population in Troon and Villages. This is a 41.2% decrease overall since 2013/14. Figure 18 shows a trend of alcohol-related hospital admissions for Troon and Villages locality compared with Scotland, South Ayrshire HSCP and NHS Ayrshire and Arran from financial year 2013/14 to 2023/24.

Figure 19 then compares different areas, including the other localities in South Ayrshire, for the latest financial year. This bar chart shows that in 2023/24, Troon and

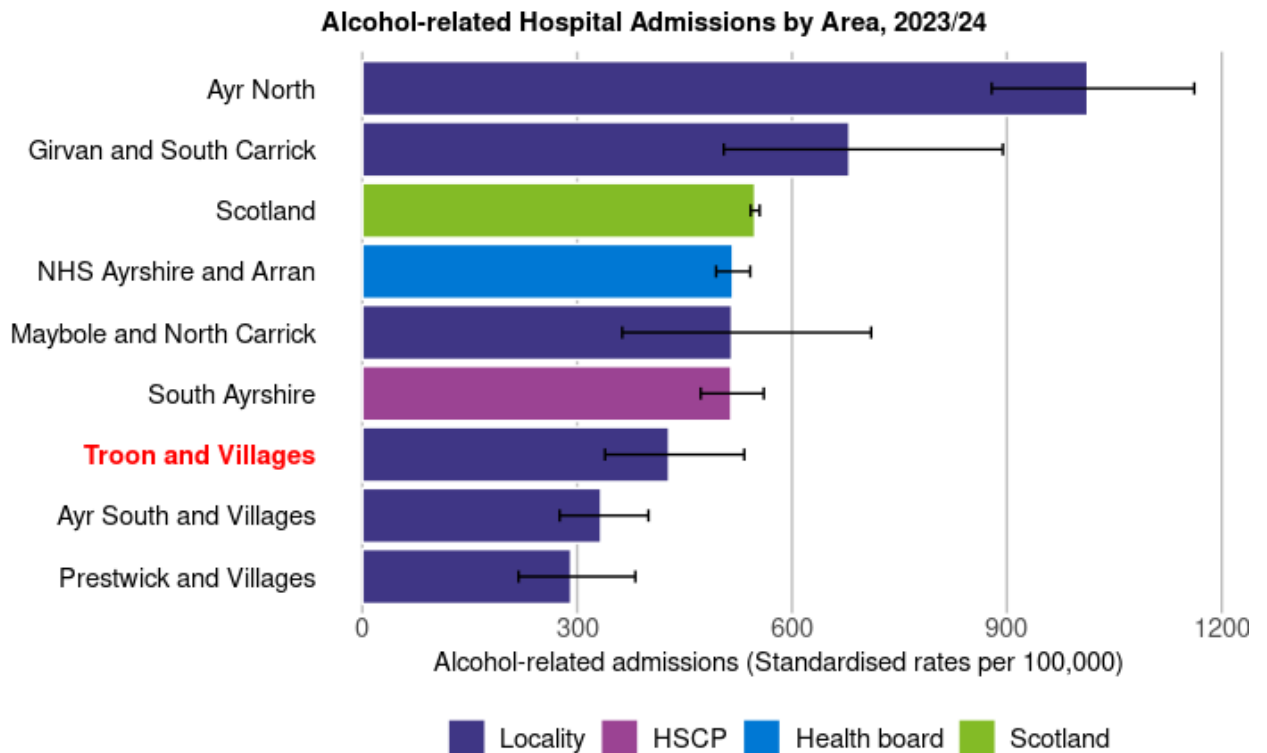
Villages locality had a lower alcohol-related hospital admissions rate compared to Scotland (428 and 549 admissions respectively).

Figure 18: Alcohol-related hospital admission rates by area and over time.



Source: ScotPHO

Figure 19: Alcohol-related hospital admissions by area for the latest time period.

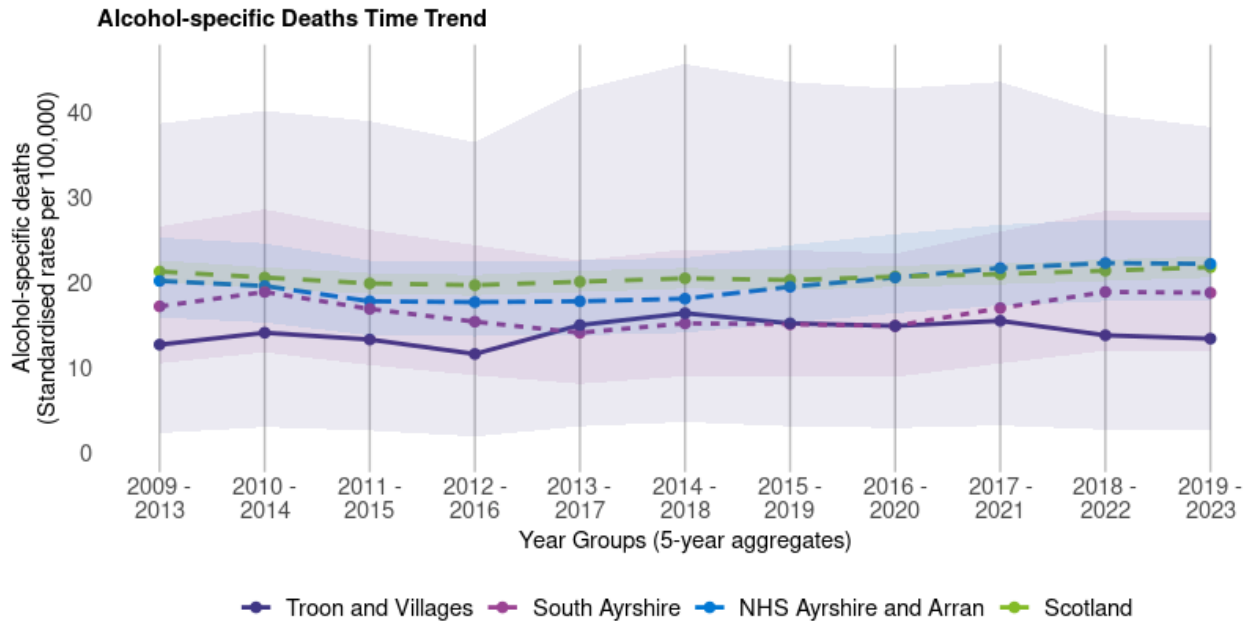


Source: ScotPHO

Alcohol-Specific Deaths

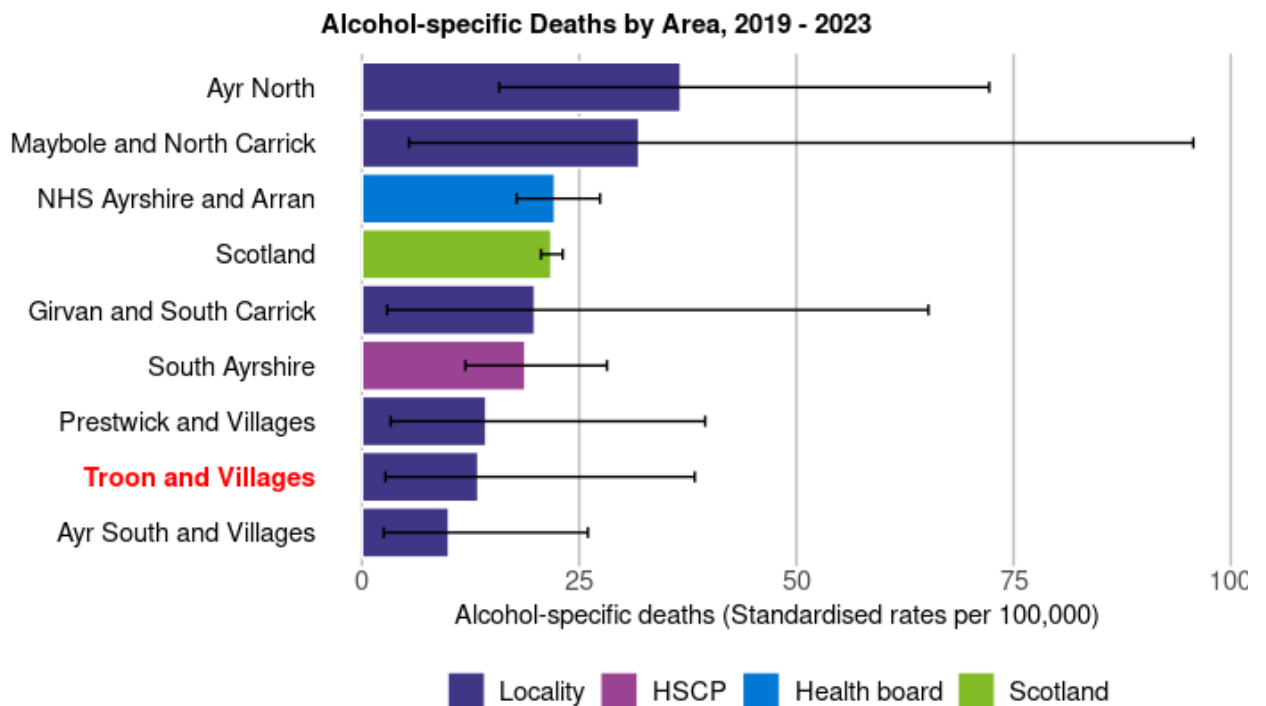
Data on alcohol-specific deaths is available as 5-year aggregates. In Troon and Villages, the latest rate of alcohol-specific deaths was **13.4** deaths per 100,000 age-sex standardised population. This is 5.5% higher than the rate in 2009 - 2013. Figure 21 also shows that the locality has a lower alcohol-specific death rate compared to Scotland overall (21.8 deaths per 100,000).

Figure 20: Alcohol-specific deaths by area and over time.



Source: ScotPHO

Figure 21: Alcohol-specific deaths by area for the latest time period available.



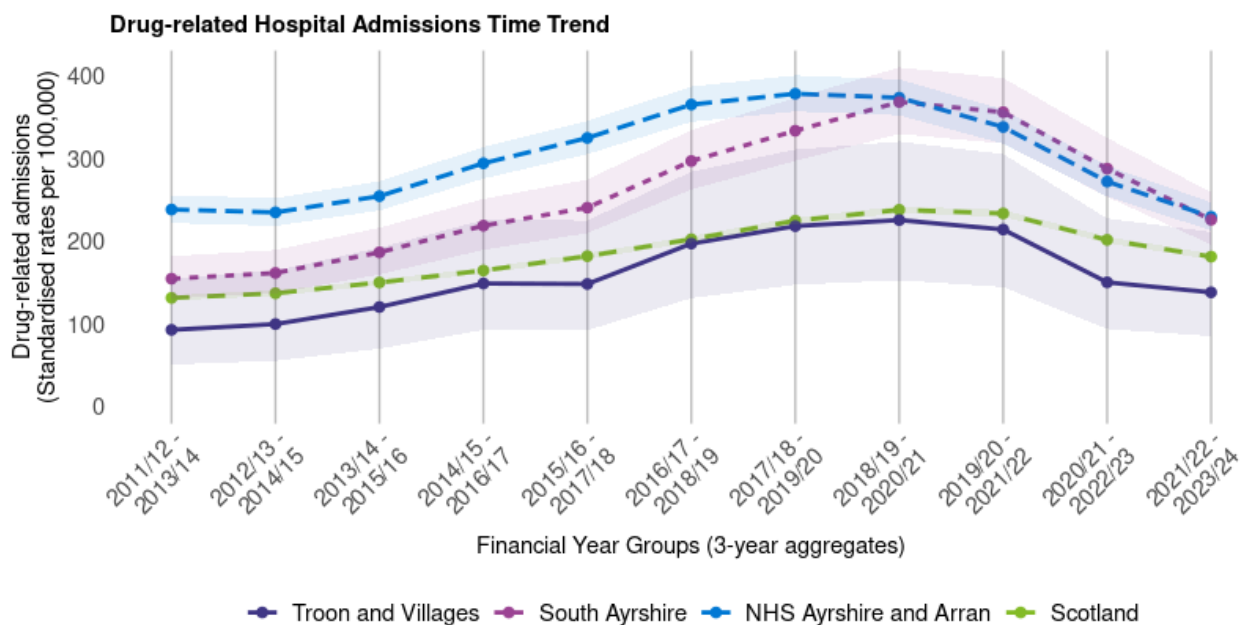
Source: ScotPHO

Drug-related Hospital Admissions

There were **138** drug-related hospital admissions per 100,000 age-sex standardised population⁴ in the Troon and Villages locality in the time period 2021/22 - 2023/24 (3-year financial year aggregate). This is a 48.8% increase since 2011/12 - 2013/14. A trend of the change in drug-related hospital admissions for the locality and comparable areas is shown in Figure 22 from 2011/12 - 2013/14 onward.

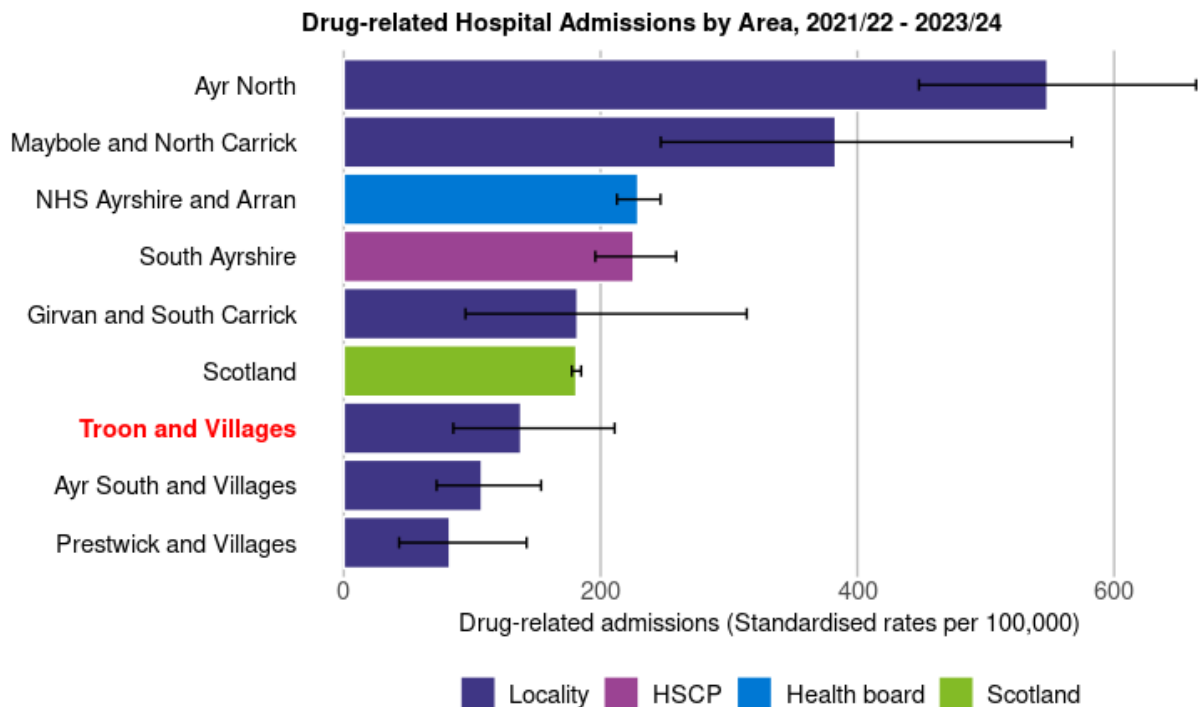
A comparison of areas at the most recent time period (2021/22 - 2023/24 aggregated financial years) is available in Figure 23. This shows the Troon and Villages locality has a lower rate of drug-related hospital admissions than Scotland (181 admissions per 100,000).

Figure 22: Drug-related hospital admission rates by area and over time.



Source: ScotPHO

Figure 23: Drug-related hospital admission rates by area for the latest time period available.



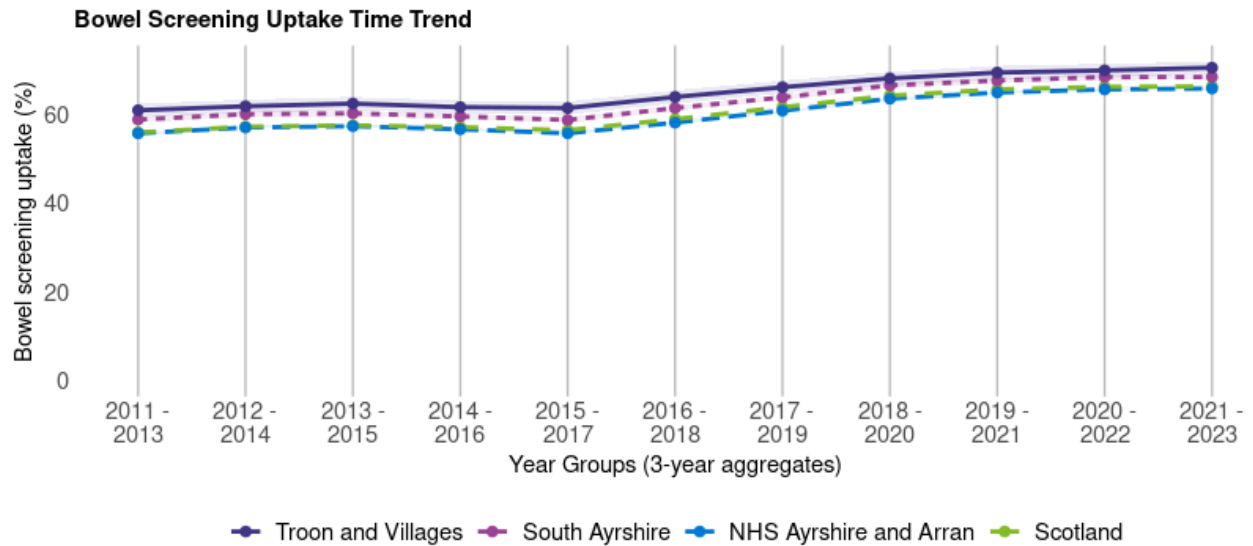
Source: ScotPHO

Bowel Screening Uptake

Bowel screening is offered every two years to eligible men and women aged between 50-74 years old. Eligible people are posted a test kit which is completed at home. Since 1st April 2013, those aged 75 and over can also self-refer and opt into screening.

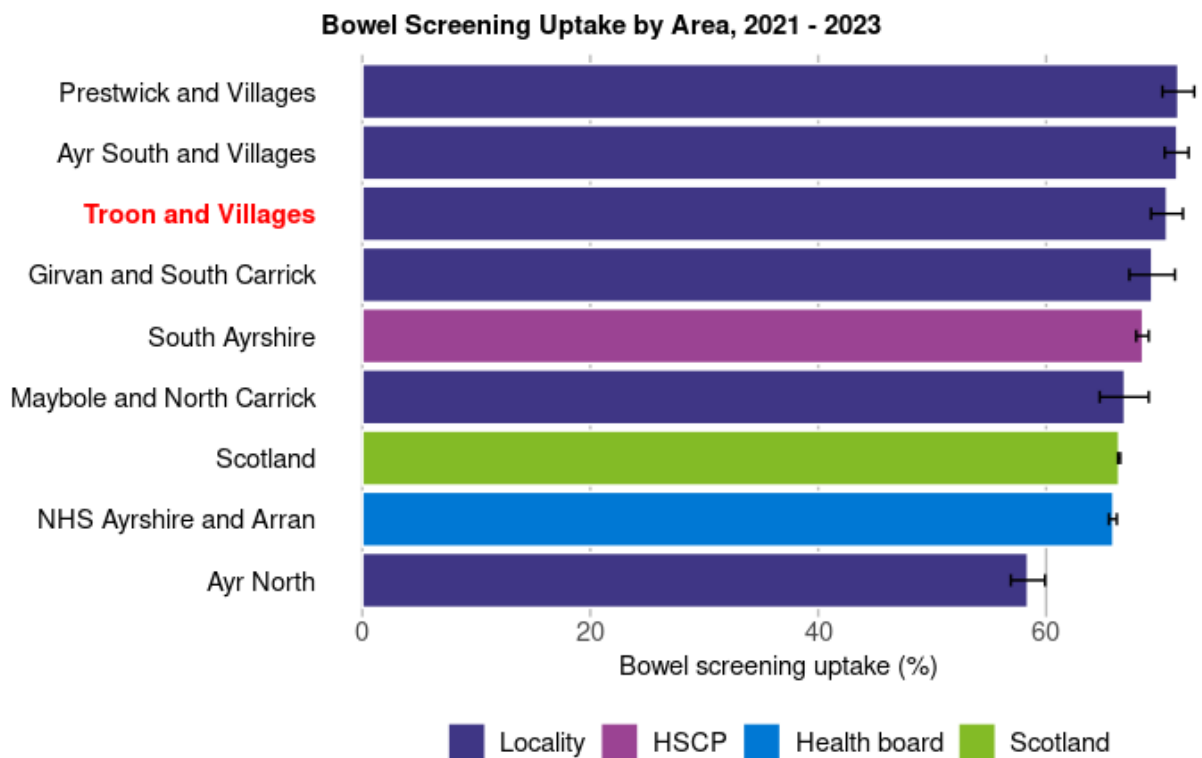
A trend of the percentage uptake of bowel screening among the eligible population is shown for Troon and Villages and comparable areas in Figure 24. Data is presented as 3-year aggregates. The 2021 - 2023 uptake rate for Troon and Villages is **70.6%**. This is a 9.6 percentage point increase since 2011 - 2013. As can be seen in Figure 25, in the latest estimate, the uptake in Troon and Villages was higher than the uptake in Scotland overall (66.4%).

Figure 24: Bowel screening uptake for eligible men and women, by area and over time.



Source: ScotPHO

Figure 25: Bowel screening uptake by area for the latest time period available.



Source: ScotPHO

Hospital and Community Care

Summary

For the most recent time periods available, Troon and Villages had:

- **13,044** emergency hospital admissions per 100,000 population, compared to 10,626 in Scotland.
- **120,914** unscheduled acute specialty bed days per 100,000 population, compared to 75,436 in Scotland.
- **23,185** A&E attendances per 100,000 population, compared to 26,915 in Scotland.
- **89,115** delayed discharge bed days per 100,000 population aged over 65, compared to 51,401 in Scotland.
- **2,084** emergency hospital admissions from falls per 100,000 population aged over 65, compared to 2,233 in Scotland.
- **95.7** emergency readmissions (28 day) per 1,000 discharges, compared to 103.1 in Scotland.
- **2,042** potentially preventable hospital admissions per 100,000 population, compared to 1,694 in Scotland.

Emergency Admissions

Figure 26 presents the emergency admissions rate per 100,000 population in the Troon and Villages locality from 2017/18 to 2024/25.

As presented in Figure 26, the emergency admissions rate in the Troon and Villages locality for 2024/25 is 13,044, a 16.9% decrease since 2017/18. The South Ayrshire HSCP rate is 13,251, a 17% decrease since 2017/18. The NHS Ayrshire and Arran health board rate is 13,526 in 2024/25, a 12.2% decrease since 2017/18 and the Scotland rate is 10,626, a 2.9% decrease since 2017/18.

Figure 26: Emergency admissions by geographical area

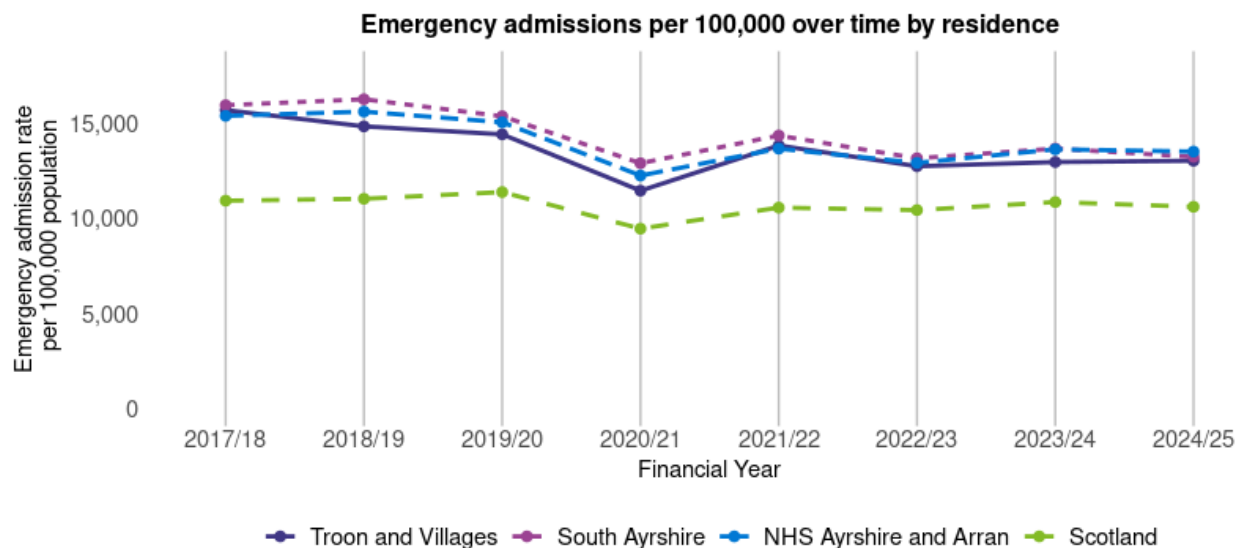
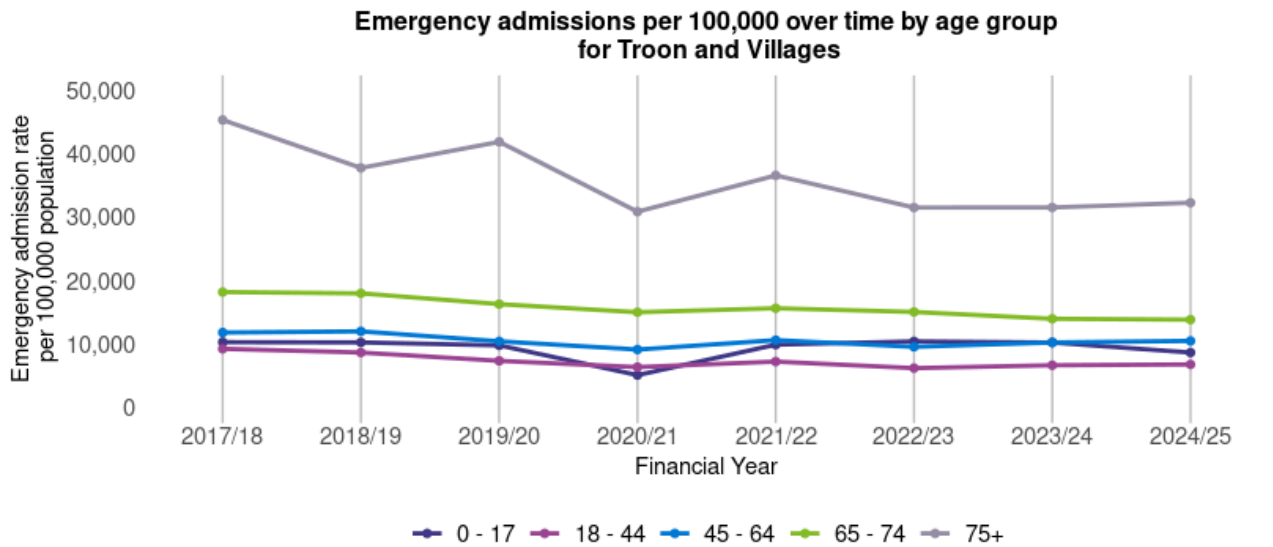


Figure 27 presents the emergency admissions rate per 100,000 population in the Troon and Villages locality from 2017/18 to 2024/25 by age group.

As presented in Figure 27, the highest emergency admissions rate for the Troon and Villages locality in 2024/25 is 32,294 per 100,000 population for the 75+ age group with a percentage decrease of 28.8% since 2017/18. The lowest emergency admissions rate for Troon and Villages in 2024/25 is 6,766 per 100,000 population for the 18 - 44 age group with a percentage decrease of 26.7% since 2017/18.

Figure 27: Emergency admissions by age group



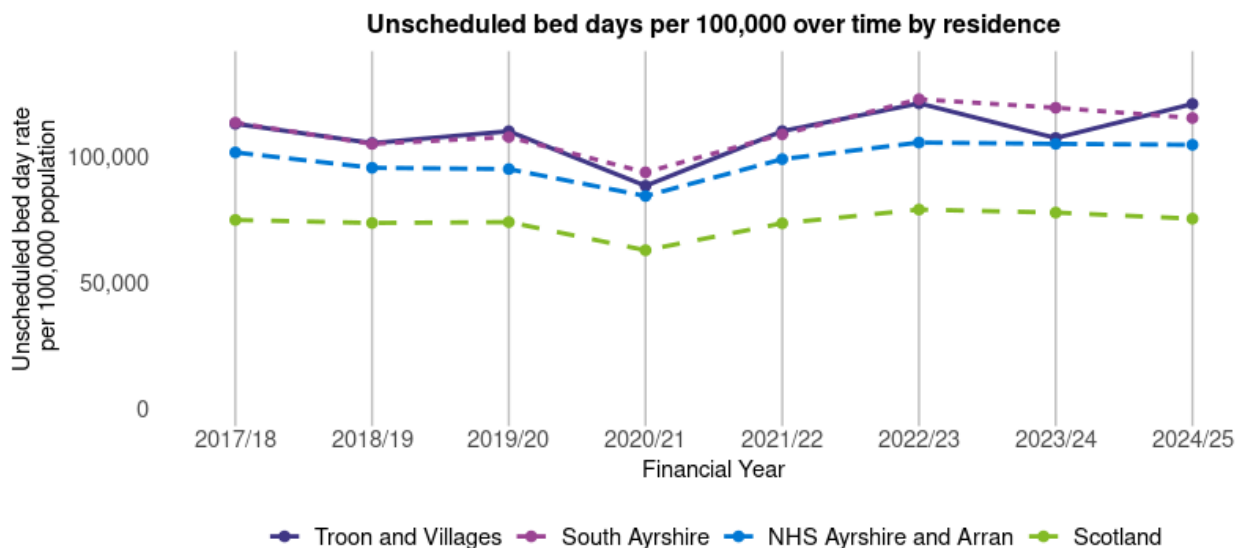
Source: PHS SMR01

Unscheduled Acute Bed Days

Figure 28 presents the unscheduled bed days rate per 100,000 population in the Troon and Villages locality from 2017/18 to 2024/25.

As presented in Figure 28, the unscheduled bed days rate in the Troon and Villages locality for 2024/25 is 120,914, a 7% increase since 2017/18 and the South Ayrshire HSCP rate is 115,330, a 1.7% increase since 2017/18. The NHS Ayrshire and Arran health board rate for 2024/25 is 104,703, a 3% increase since 2017/18 and the Scotland rate is 75,436, a 0.7% increase since 2017/18.

Figure 28: Unscheduled acute bed days by geographical area

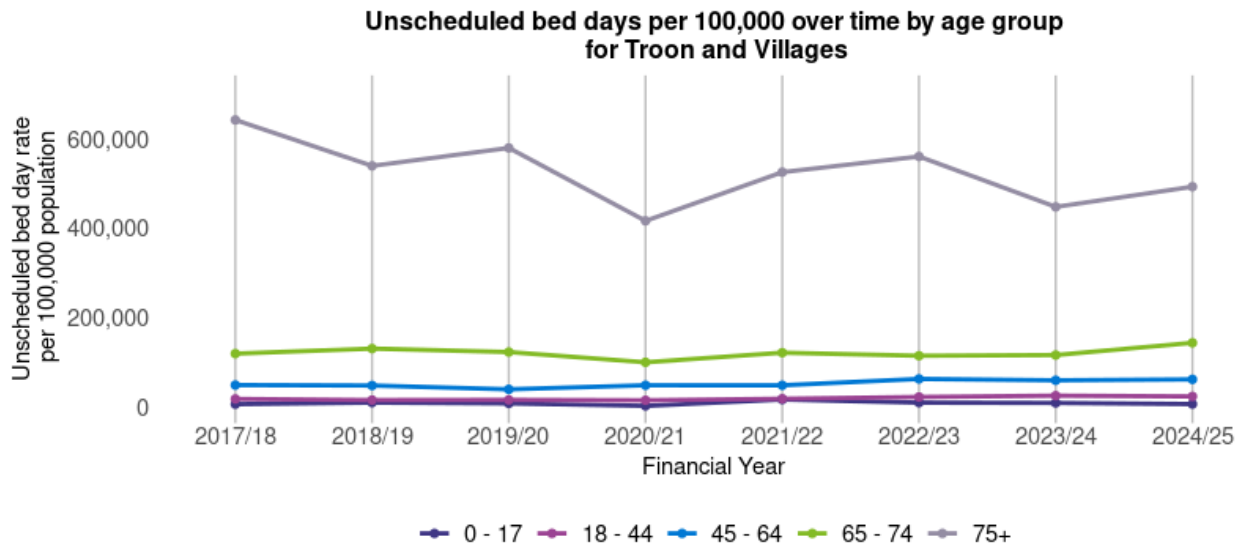


Source: PHS SMR01

Figure 29 presents the unscheduled bed days rate per 100,000 population in the Troon and Villages locality from 2017/18 to 2024/25 by age group.

As presented in Figure 29, the highest unscheduled bed days rate for the Troon and Villages locality in 2024/25 is 492,897 bed days per 100,000 population for the 75+ age group with a percentage decrease of 23.2% since 2017/18. The lowest unscheduled bed days rate for Troon and Villages in 2024/25 is 7,220 bed days per 100,000 population for the 0 - 17 age group with a percentage increase of 3.6% since 2017/18.

Figure 29: Unscheduled acute bed days by age group



A&E Attendances

Figure 30 presents the A&E attendance rate per 100,000 population in the Troon and Villages locality from 2016/17 to 2024/25.

As presented in Figure 30, the A&E attendance rate per 100,000 in the Troon and Villages locality for 2024/25 is 23,185, a 22.7% decrease since 2016/17 and the South Ayrshire HSCP rate is 26,432, a 23.6% decrease since 2016/17. The NHS Ayrshire and Arran health board rate for 2024/25 is 26,306, a 16.8% decrease since 2016/17 and the Scotland rate is 26,915, a 1.5% decrease since 2016/17.

Figure 30: A&E attendances by geographical area

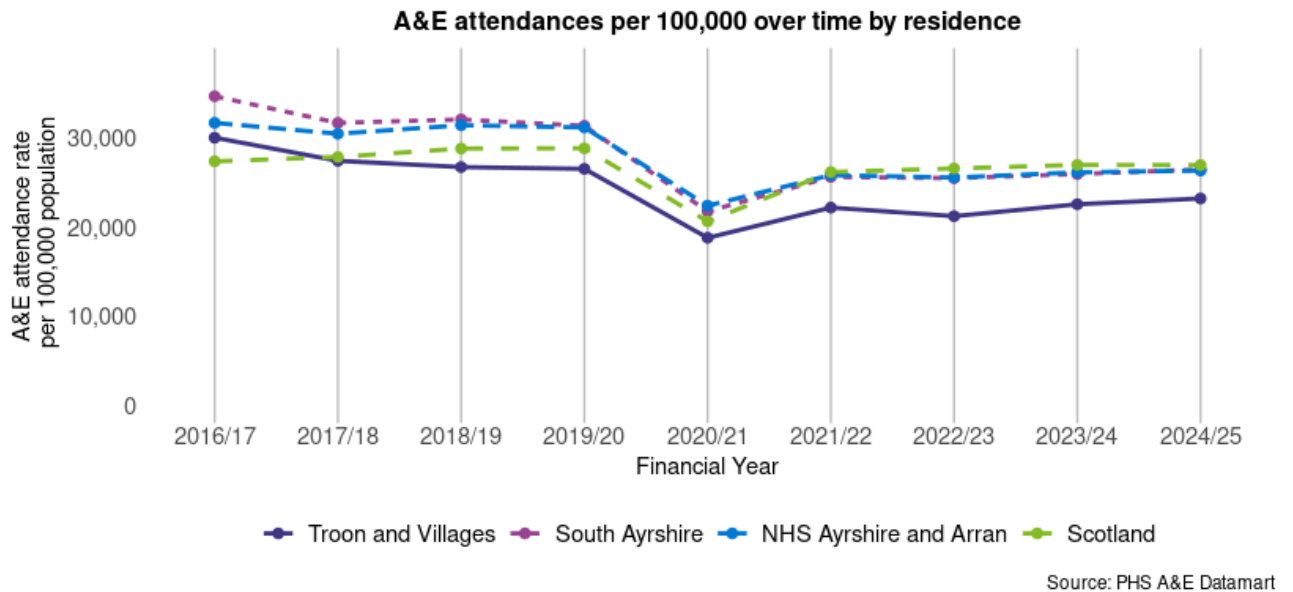
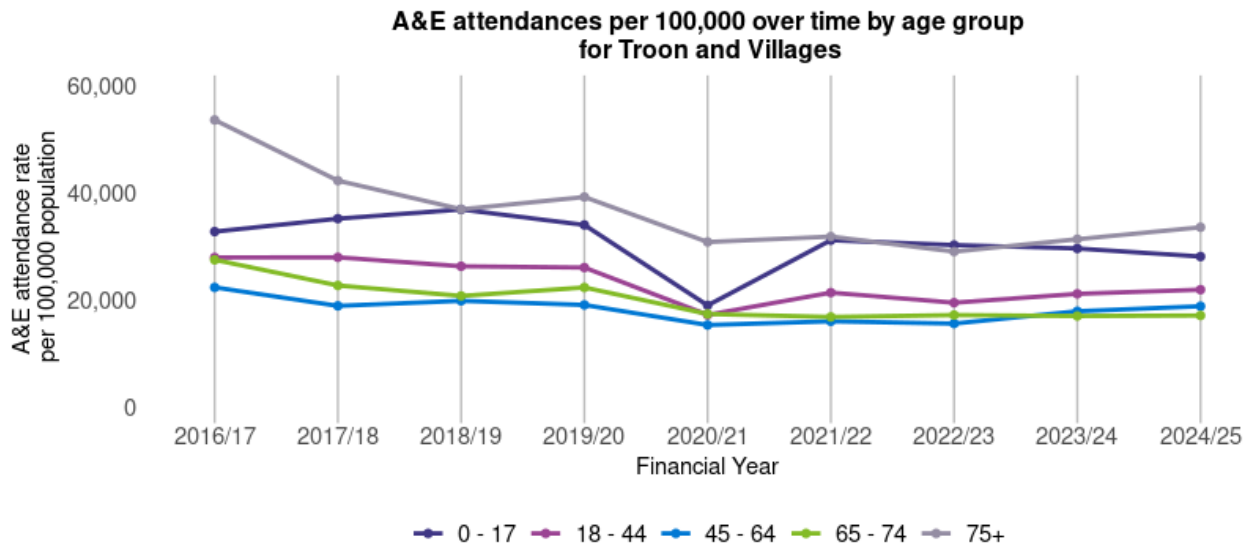


Figure 31 presents the A&E attendance rate per 100,000 population in the Troon and Villages locality from 2016/17 to 2024/25 by age group.

As presented in Figure 31, the highest A&E attendance rate for the Troon and Villages locality in 2024/25 is 33,645 per 100,000 population for the 75+ age group with a percentage decrease of 37.3% since 2016/17. The lowest A&E attendance rate for Troon and Villages in 2024/25 is 17,158 per 100,000 population for the 65 - 74 age group with a percentage decrease of 37.7% since 2016/17.

Figure 31: A&E attendances by age group

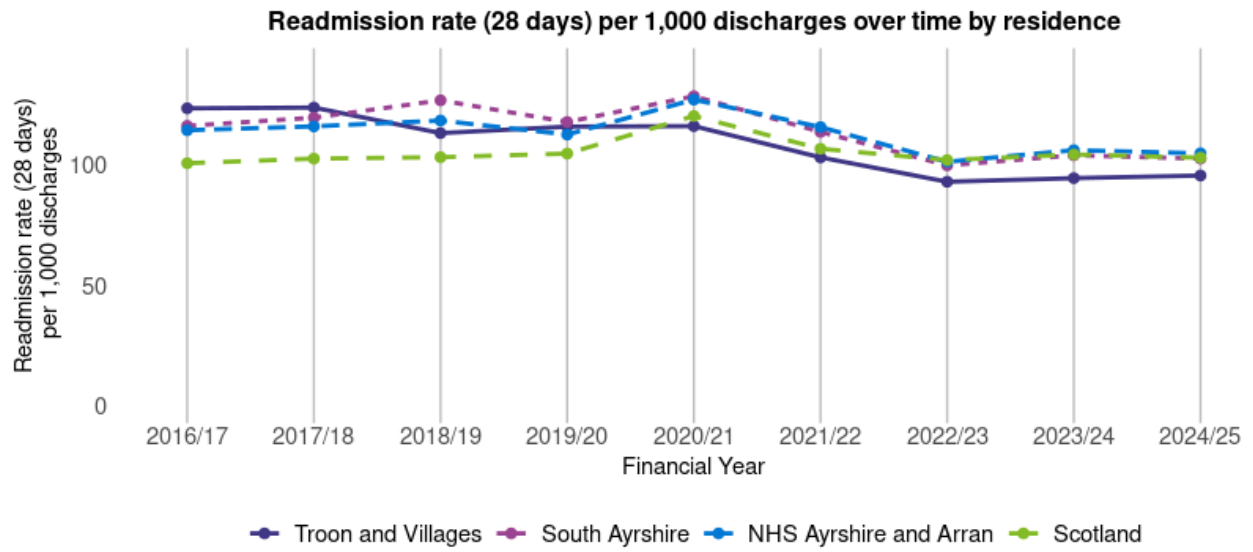


Emergency Readmissions (28 days)

Figure 32 presents the emergency readmission (28 days) rate per 1,000 discharges in the Troon and Villages locality from 2016/17 to 2024/25.

As presented in Figure 32, the emergency readmission (28 days) rate per 1,000 discharges in the Troon and Villages locality for 2024/25 is 95.7, a 22.6% decrease since 2016/17 and the South Ayrshire HSCP rate is 102.7, a 11.7% decrease since 2016/17. The NHS Ayrshire and Arran health board rate for 2024/25 is 104.9, an 8.4% decrease since 2016/17 and the Scotland rate is 103.1, a 2.3% increase since 2016/17.

Figure 32: Emergency readmissions (28 days) by geographical area



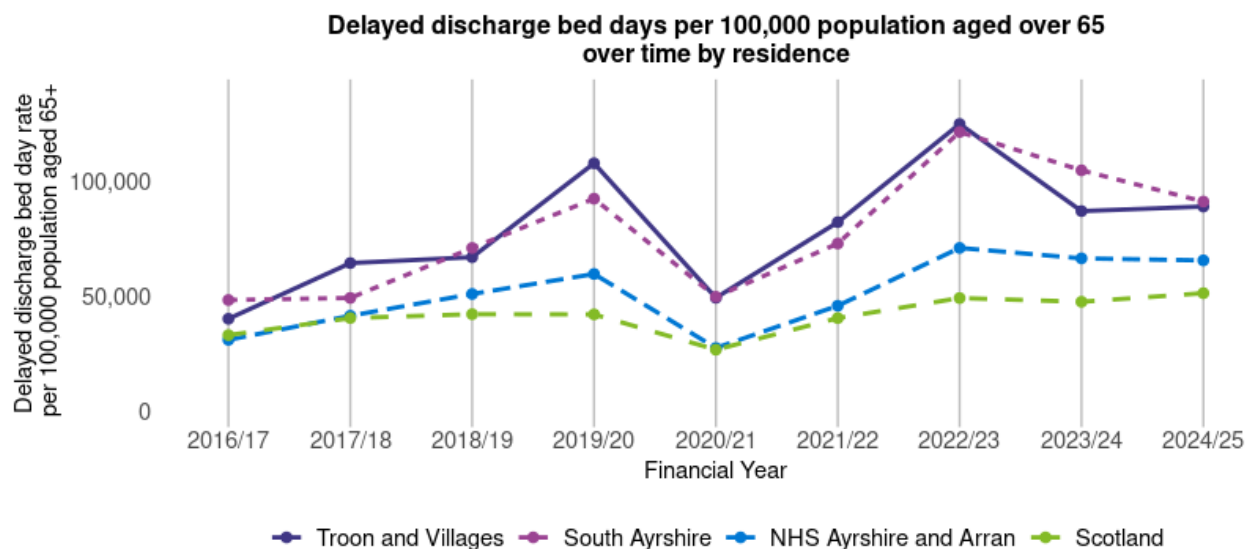
Source: PHS SMR01

Delayed Discharge Bed Days

Figure 33 presents the number of delayed discharge bed days per 100,000 population aged over 65+ in the Troon and Villages locality from 2016/17 to 2024/25.

As presented in Figure 33, the number of delayed discharge bed days per 100,000 population aged over 65+ in the Troon and Villages locality for 2024/25 is 89,115, a 121.4% increase since 2016/17 and the South Ayrshire HSCP rate is 91,270, an 88.5% increase since 2016/17. The NHS Ayrshire and Arran health board rate for 2024/25 is 65,672, a 111.2% increase since 2016/17 and the Scotland rate is 51,401, a 55.1% increase since 2016/17.

Figure 33: Delayed discharge bed days in the population aged 65+ by geographical area



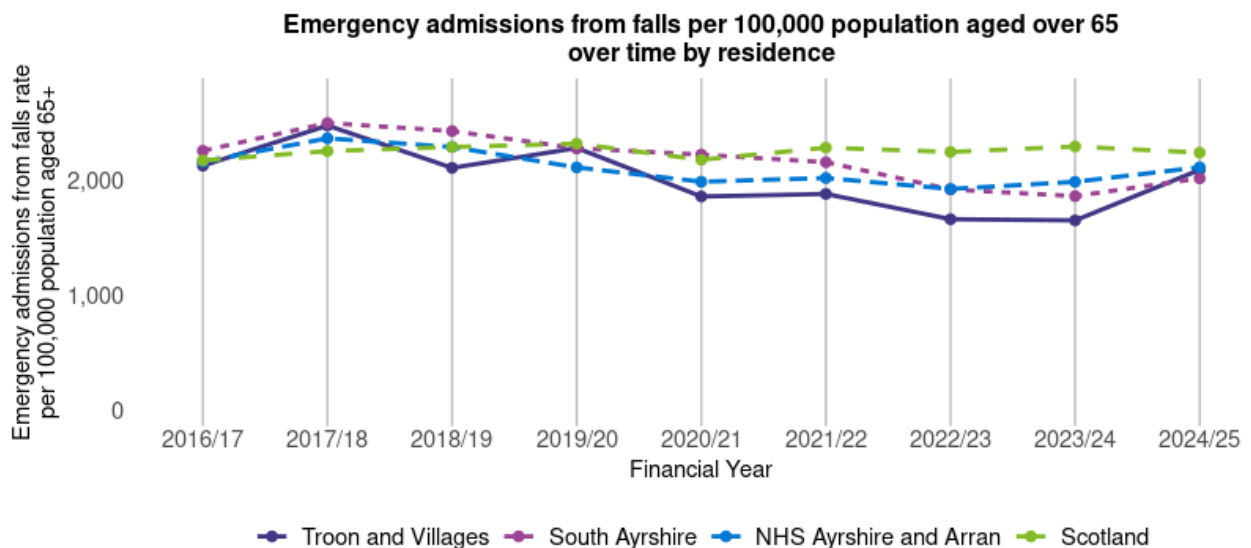
Source: PHS Delayed Discharges

Emergency admissions from a fall

Figure 34 presents the emergency admissions from falls rate per 100,000 population aged 65 and over in the Troon and Villages locality from 2016/17 to 2024/25.

As presented in Figure 34, the emergency admissions from falls rate per 100,000 population aged over 65+ in the Troon and Villages locality for 2024/25 is 2,084, a 1.7% decrease since 2016/17 and the South Ayrshire HSCP rate is 2,010, a 10.6% decrease since 2016/17. The NHS Ayrshire and Arran health board rate for 2024/25 is 2,106, a 2.2% decrease since 2016/17 and the Scotland rate is 2,233, a 3.1% increase since 2016/17.

Figure 34: Falls in the population aged 65+ by geographical area



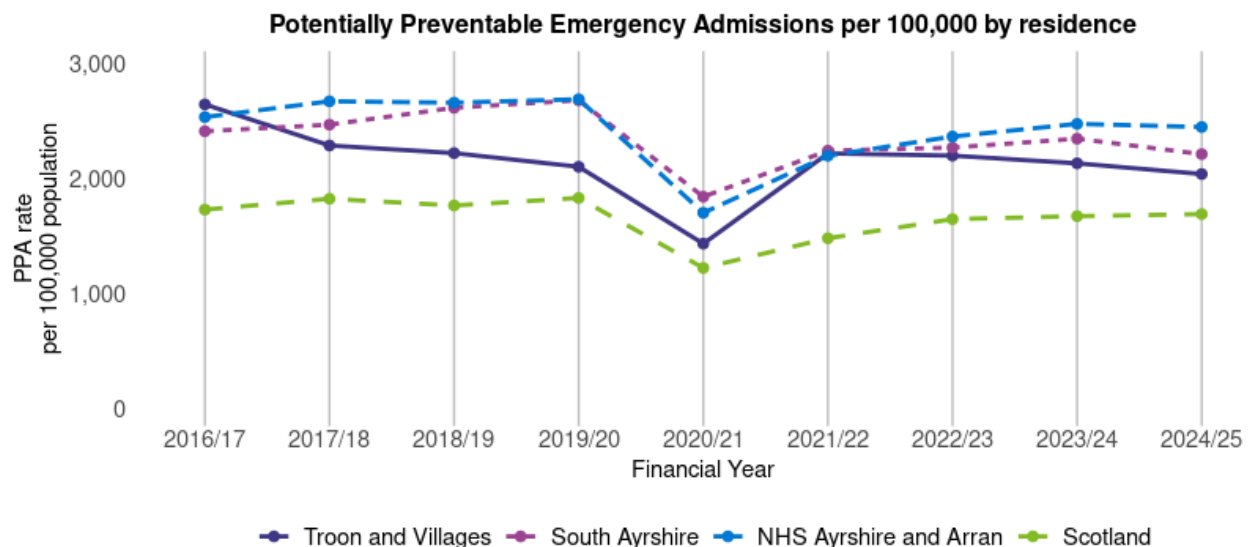
Source: PHS SMR01

Potentially Preventable Admissions (PPAs)

Information on the conditions included in Potentially Preventable Admissions (PPAs) is available in Appendix 3. In 2024/25, **58.6%** of PPAs in Troon and Villages were amongst those aged 65 and over, and **41.4%** were amongst those aged under 65.

Figure 35 presents the PPA rate per 100,000 population in the Troon and Villages locality from 2016/17 to 2024/25. The rate per 100,000 population for PPAs in the Troon and Villages locality for 2024/25 is 2,042, a 22.9% decrease since 2016/17 and the South Ayrshire HSCP rate is 2215, an 8.2% decrease since 2016/17. The NHS Ayrshire and Arran health board rate for 2024/25 is 2,451, a 3.4% decrease since 2016/17, 2024/25 and the Scotland rate is 1,694, a 2.3% decrease since 2016/17.

Figure 35: Potentially Preventable Admissions (PPAs) by geographical area



Source: PHS SMR01

Hospital Care (Mental Health Specialty)

Summary

This section looks at mental health-related unscheduled care indicators. For the most recent time period available, Troon and Villages had:

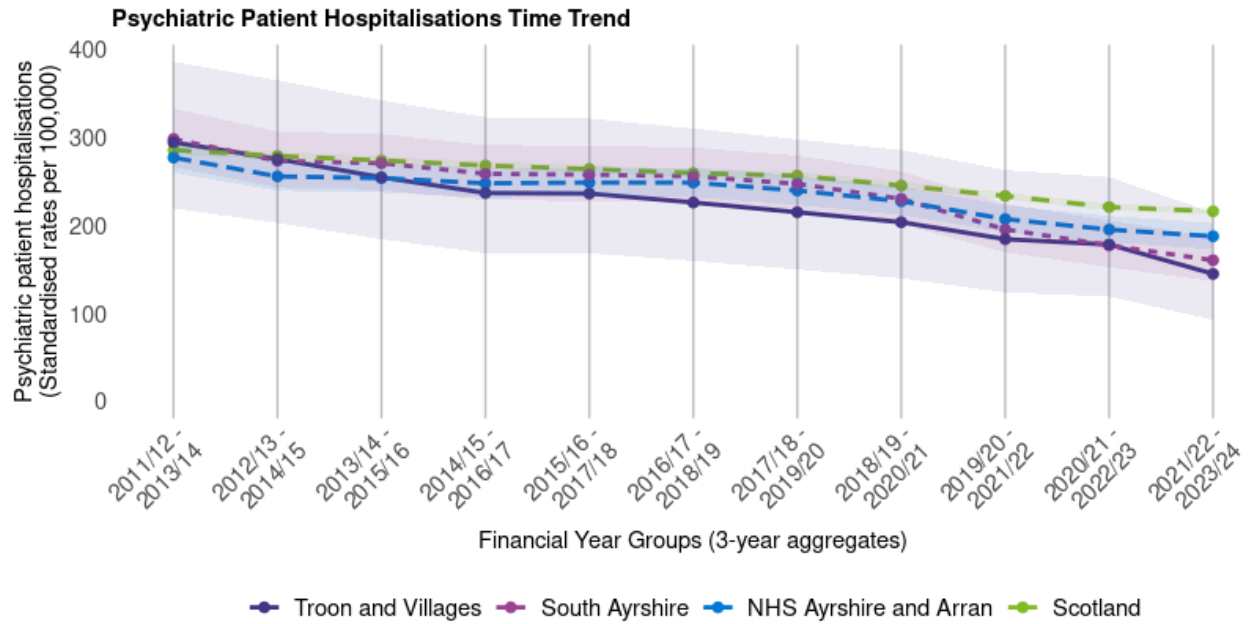
- **144.9** psychiatric patient hospitalisations per 100,000, compared to 216.1 in Scotland⁴.
- **7,655** unscheduled mental health specialty bed days per 100,000, compared to 18,134 in Scotland.

Psychiatric patient hospitalisations

Figure 36 presents the psychiatric patient hospitalisation 3-year aggregate rate per 100,000 population in the Troon and Villages locality from 2011/12 - 2013/14 to 2021/22 - 2023/24.

As presented in Figure 36, the 3-year aggregate psychiatric patient hospitalisation rate per 100,000 population in the Troon and Villages locality for 2021/22 - 2023/24 is 144.9, a 50.8% decrease since 2011/12 - 2013/14 and the South Ayrshire HSCP rate is 160.4, a 46.2% decrease since 2011/12 - 2013/14. The NHS Ayrshire and Arran health board the 3-year aggregate rate for 2021/22 - 2023/24 is 187.7, a 32.3% decrease since 2011/12 - 2013/14 and the Scotland the 3-year aggregate rate is 216.1, a 24.4% decrease since 2011/12 - 2013/14.

Figure 36: Psychiatric patient hospitalisations by geographical area

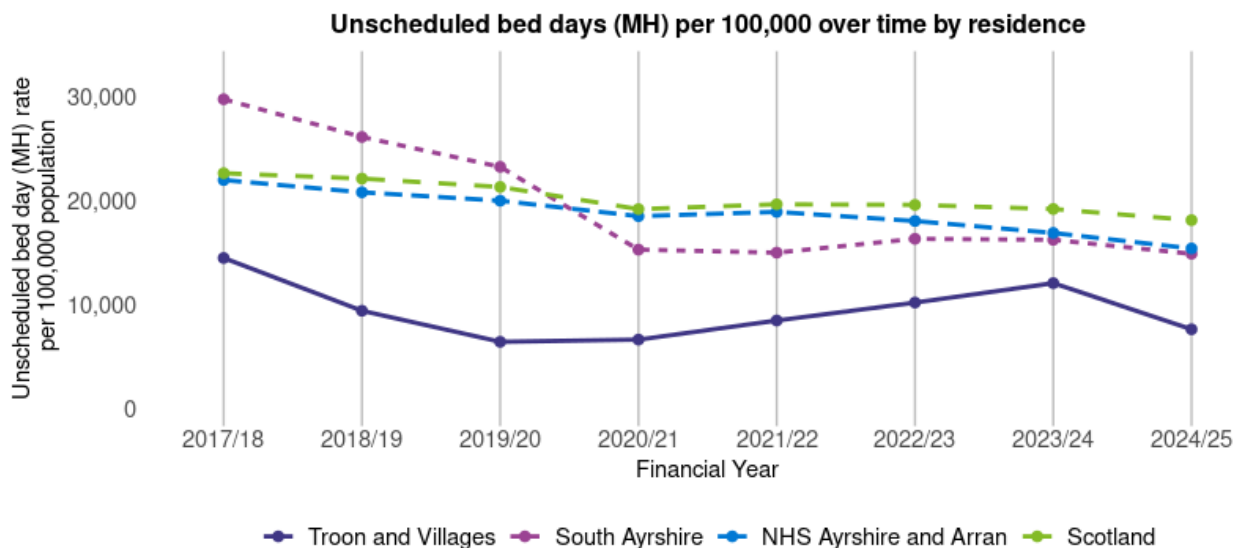


Unscheduled Mental Health Specialty Bed Days

Figure 37 presents the unscheduled mental health bed days rate per 100,000 population in the Troon and Villages locality from 2017/18 to 2024/25.

As presented in Figure 37 the unscheduled mental health bed days rate per 100,000 population in the Troon and Villages locality for 2024/25 is 7,655, a 47.2% decrease since 2017/18 and the South Ayrshire HSCP rate is 14,905, a 49.9% decrease since 2017/18. The NHS Ayrshire and Arran health board rate for 2024/25 is 15,414, a 29.9% decrease since 2017/18 and the Scotland rate is 18,134, a 19.9% decrease since 2017/18.

Figure 37: Unscheduled mental health specialty bed days by geographical area



Source: PHS SMR04

Child Health

Summary

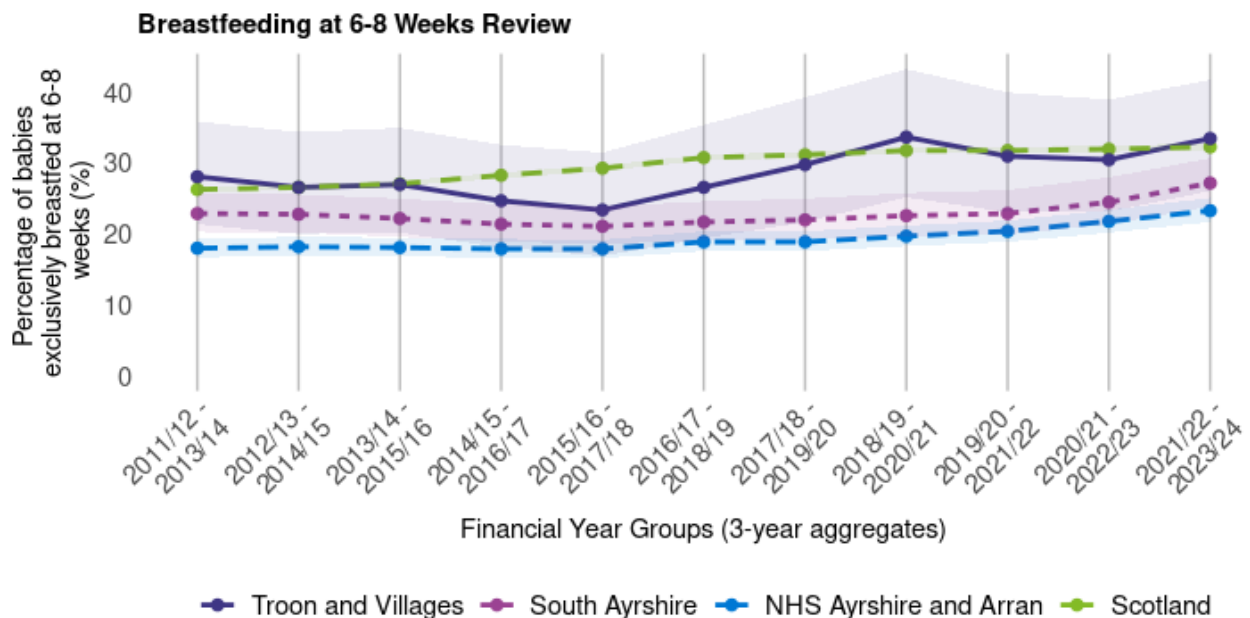
This section looks at indicators relating to children and young people's health outcomes. For the most recent time period available, Troon and Villages locality had:

- **33.5%** of babies being exclusively breastfed at the 6-8 week review, compared to 32.3% for Scotland overall.
- **5.8%** of mothers smoked at the time of the first antenatal booking appointment, compared to 9.6% for Scotland overall.
- a teenage pregnancy rate of **17.5** per 1,000 females aged 15-19, compared to 23.6 for Scotland overall.
- **98.8%** uptake of the 6-in-1 immunisation, compared to 96.2% for Scotland overall.
- **96.9%** uptake of the MMR immunisation at 24 months, compared to 93.2% for Scotland overall.
- **80.8%** of primary 1 children with no dental caries, compared to 73.9% for Scotland overall.
- **79.5%** of primary 1 children with a healthy weight, compared to 74.5% for Scotland overall.
- **10.3%** of children with one or more developmental concerns at the 27-30 month review, compared to 17.5% for Scotland overall.

Breastfeeding

In the latest time period available 2021/22 - 2023/24, the percentage of babies who were exclusively breastfed at 6-8 weeks in Troon and Villages locality was **33.5%**. Figure 38 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

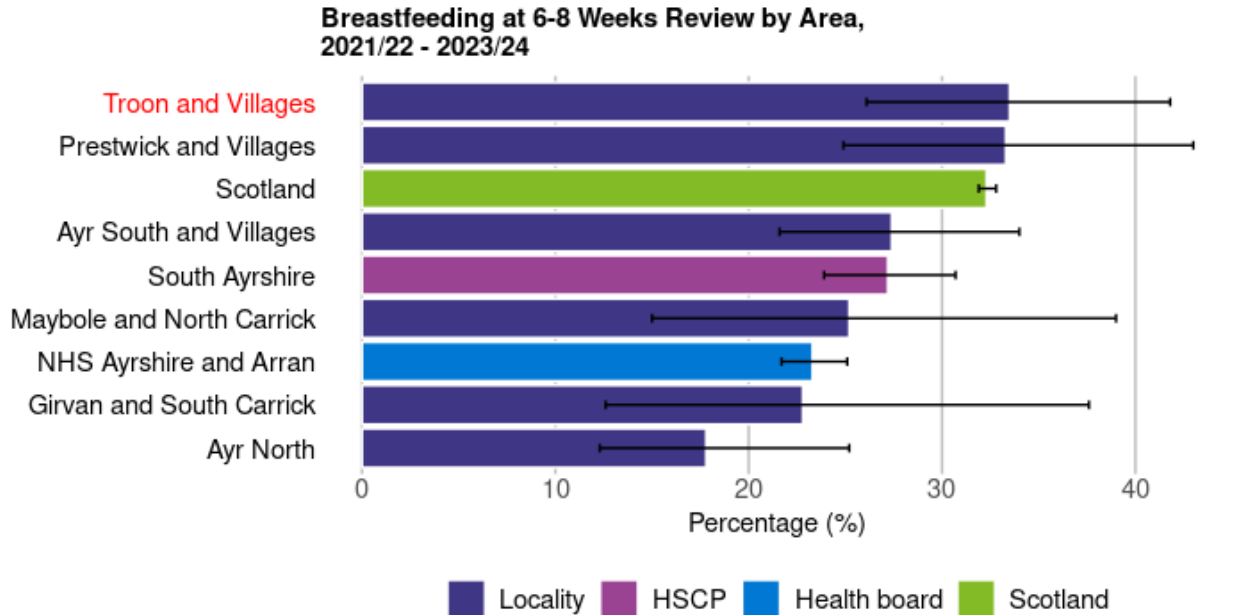
Figure 38: Percentage of babies exclusively breastfed at 6-8 weeks by geographical area.



Source: ScotPHO

Figure 39 provides comparisons of breastfeeding between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2021/22 - 2023/24, Troon and Villages locality had a higher rate than the rest of Scotland (33.5% compared to 32.3%).

Figure 39: Percentage of babies exclusively breastfed at 6-8 weeks by area for the latest time period available.



Source: ScotPHO

Smoking during pregnancy

In the latest time period available 2022 - 2024, the percentage of women smoking at the time of the first antenatal booking appointment in Troon and Villages locality was **5.8%**. Figure 40 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 40: Percentage of women smoking during pregnancy by geographical area.

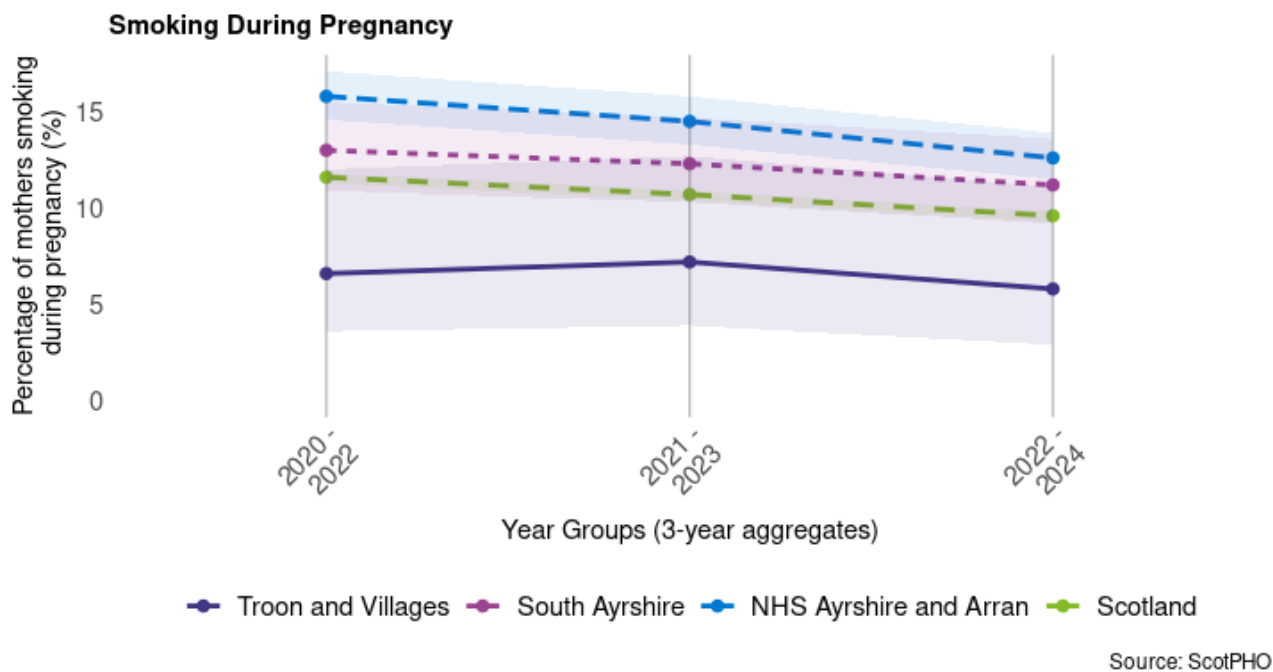
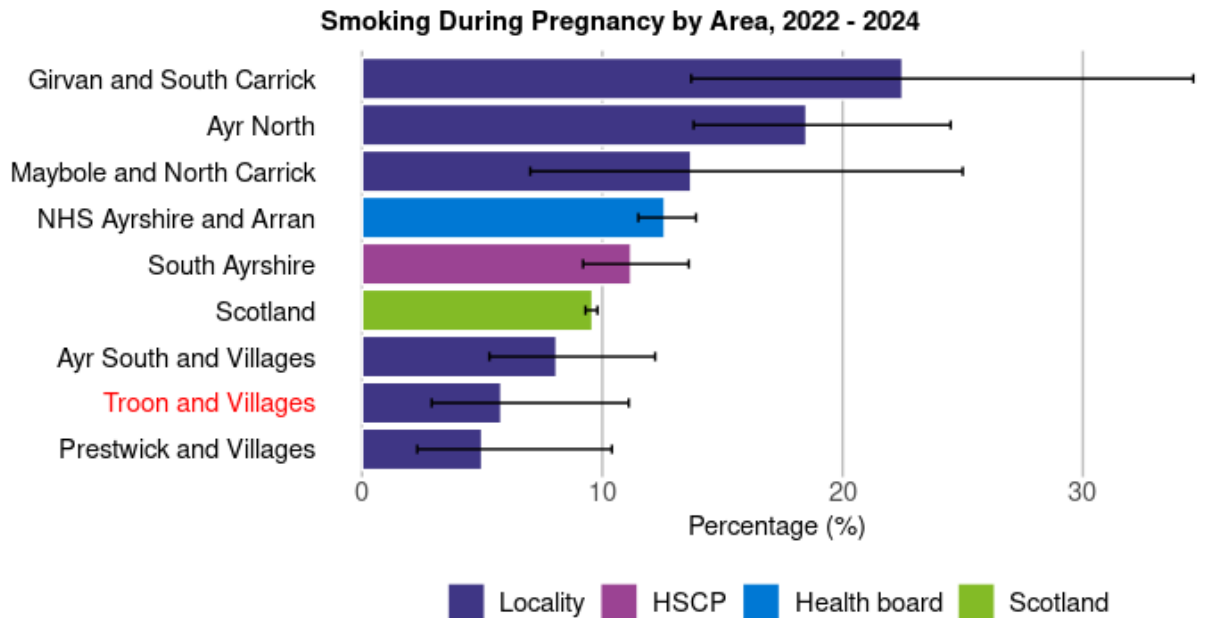


Figure 41 provides comparisons of smoking during pregnancy between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2022 - 2024, Troon and Villages had a lower rate than the rest of Scotland (5.8% compared to 9.6%).

Figure 41: Percentage of women smoking during pregnancy by area for the latest time period available.

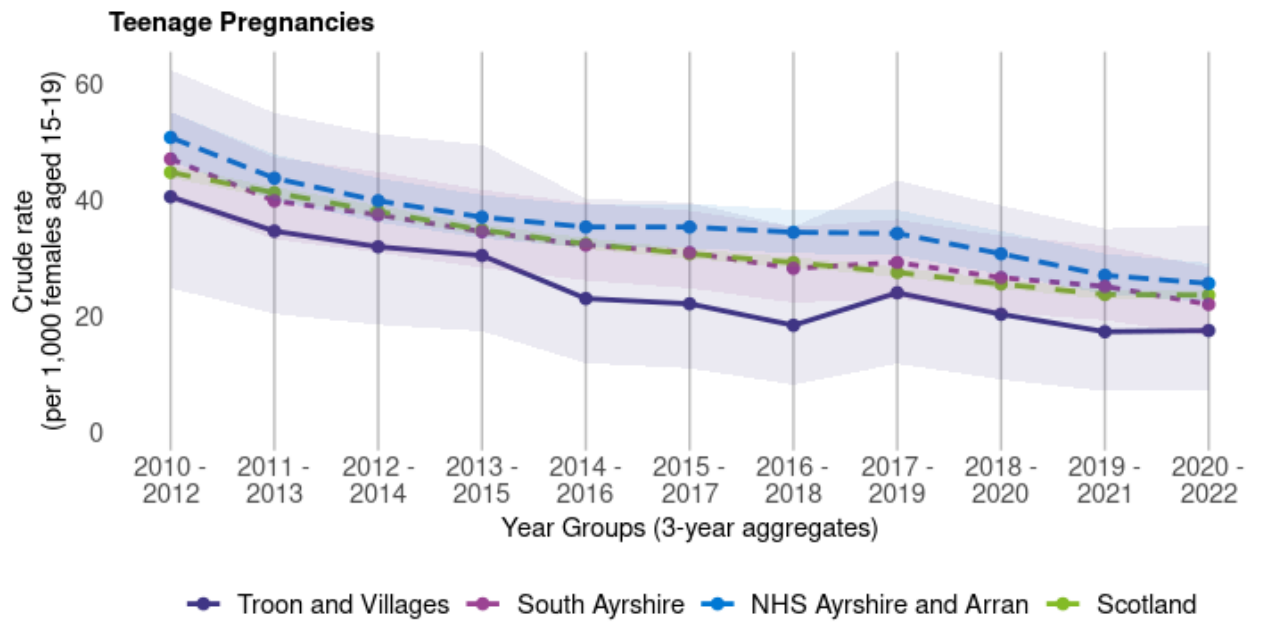


Source: ScotPHO

Teenage pregnancies

In the latest time period available 2020 - 2022, the rate of teenage pregnancies per 1,000 females aged 15-19 in Troon and Villages locality was **17.5**. Figure 42 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

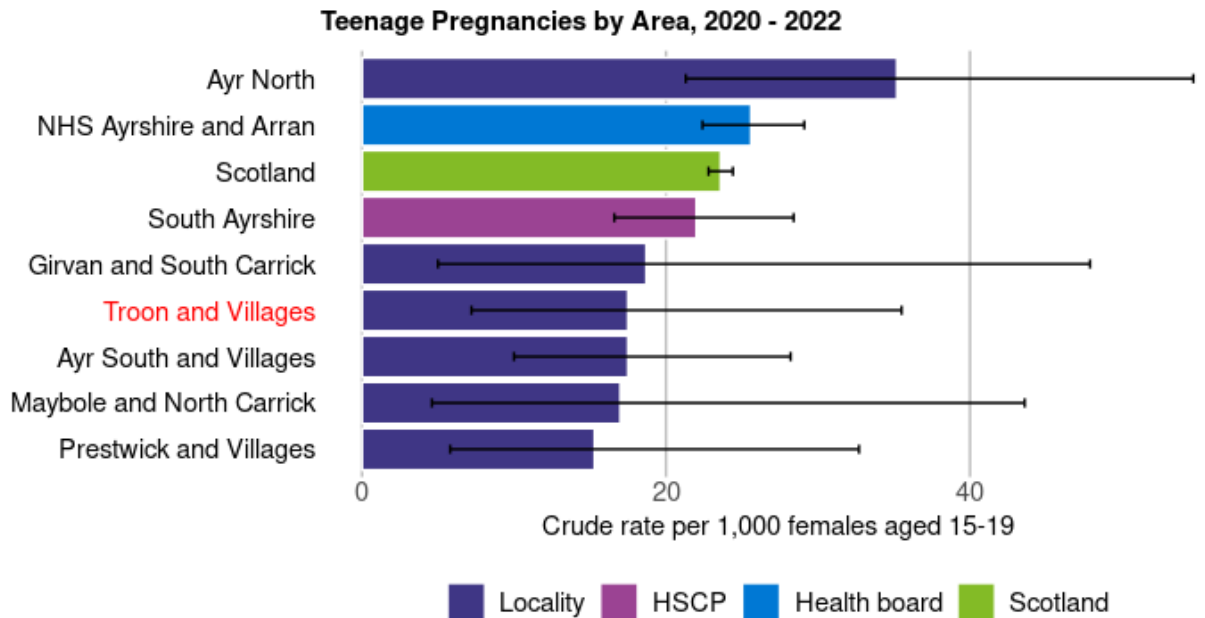
Figure 42: Rate of teenage pregnancies by geographical area.



Source: ScotPHO

Figure 43 provides comparisons of teenage pregnancy between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2020 - 2022, Troon and Villages had a lower rate than the rest of Scotland (17.5 per 1,000 females aged 15-19 compared to 23.6).

Figure 43: Rate of teenage pregnancies by area for the latest time period available.

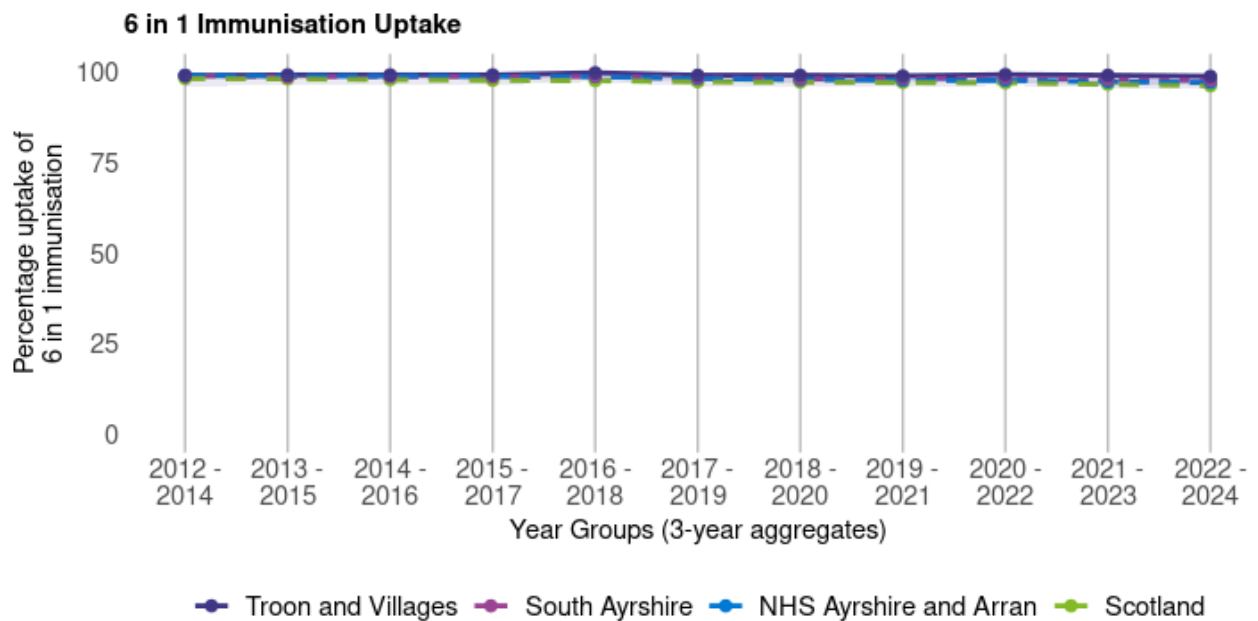


Source: ScotPHO

6 in 1 immunisation

In the latest time period available 2022 - 2024, the uptake of the 6-in-1 immunisation in Troon and Villages locality was **98.8%**. Figure 44 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

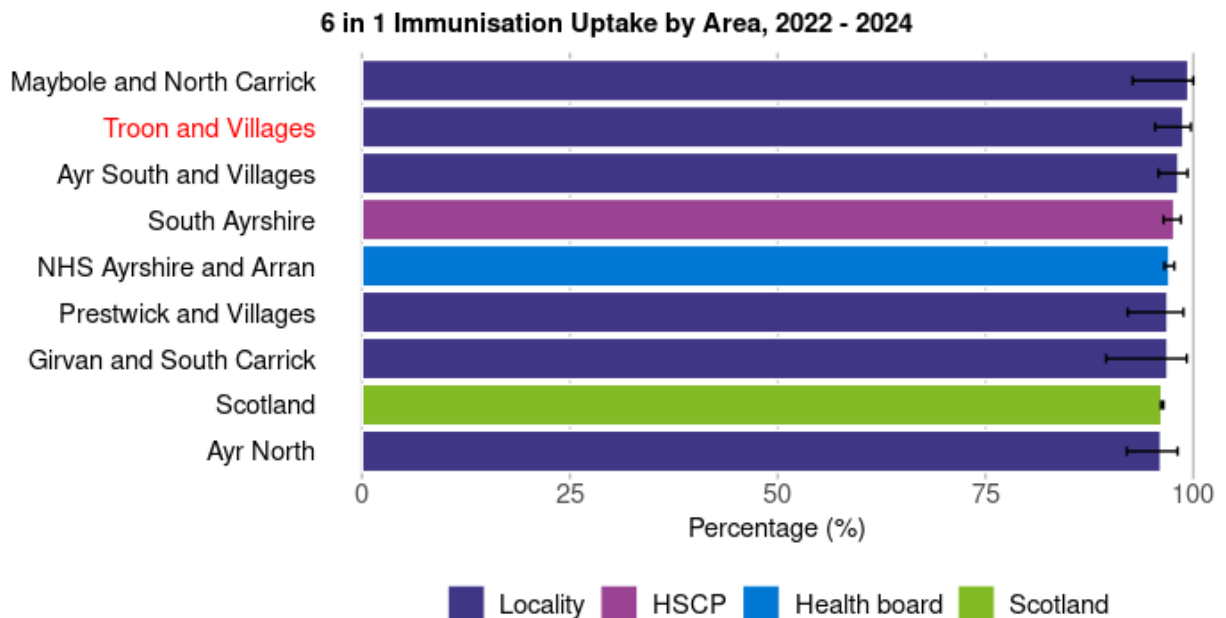
Figure 44: Percentage uptake of 6 in 1 immunisation by geographical area.



Source: ScotPHO

Figure 45 provides comparisons of the uptake of the 6-in-1 immunisation between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2022 - 2024, Troon and Villages had a higher rate than the rest of Scotland (98.8% compared to 96.2%).

Figure 45: Percentage uptake of 6 in 1 immunisation by area for the latest time period available.

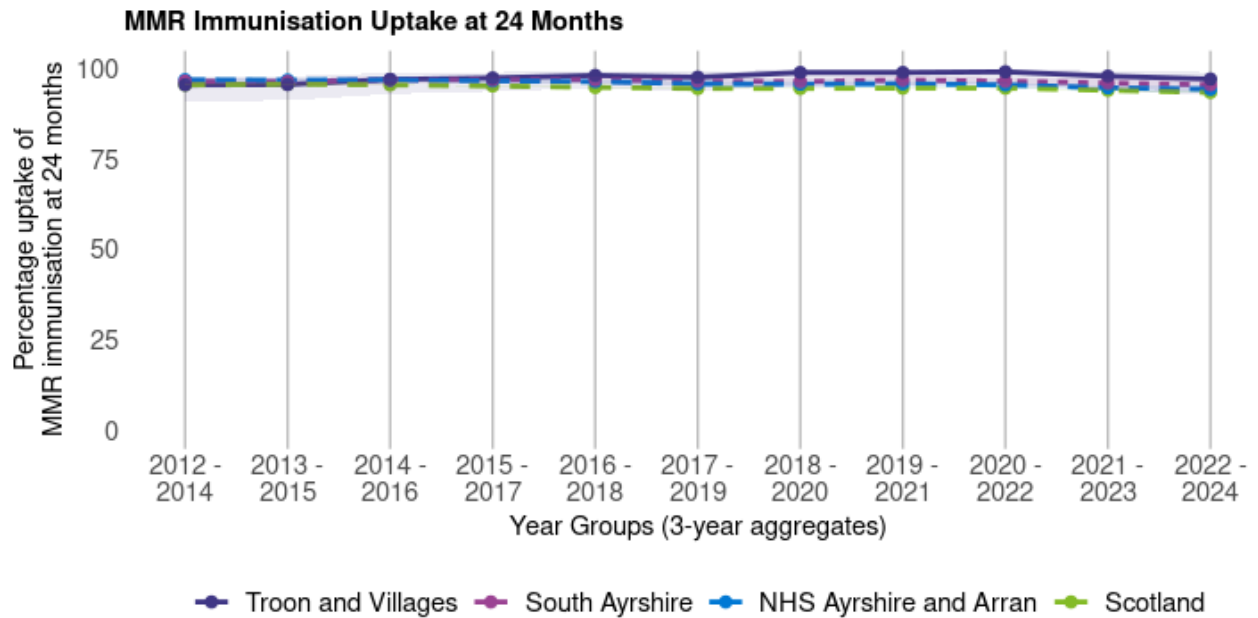


Source: ScotPHO

MMR immunisation at 24 months

In the latest time period available 2022 - 2024, the uptake of the MMR immunisation at 24 months in Troon and Villages locality was **96.9%**. Figure 46 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

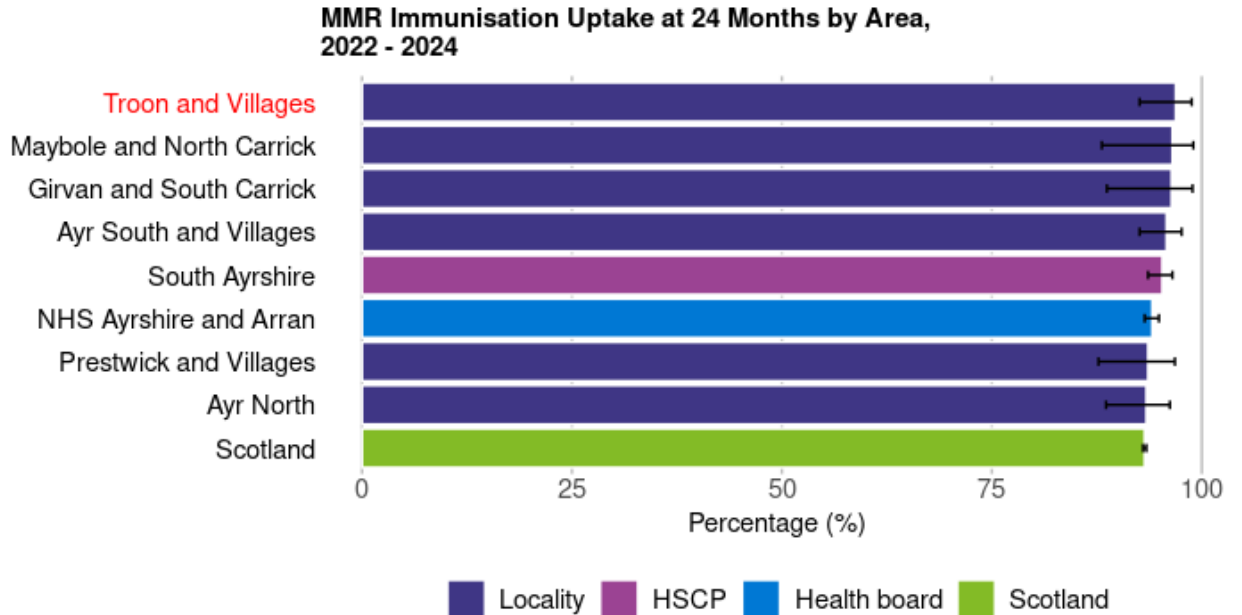
Figure 46: Percentage uptake of MMR immunisation at 24 months by geographical area.



Source: ScotPHO

Figure 47 provides comparisons of the uptake of MMR immunisation at 24 months between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2022 - 2024, Troon and Villages had a higher rate than the rest of Scotland (96.9% compared to 93.2%).

Figure 47: Percentage uptake of MMR immunisation at 24 months by area for the latest time period available.



Source: ScotPHO

Child dental health in primary 1

In the latest time period available 2023/24, the percentage of primary 1 children with no obvious dental caries in Troon and Villages locality was **80.8%**. Figure 48 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 48: Percentage of primary 1 children with no obvious dental caries by geographical area.

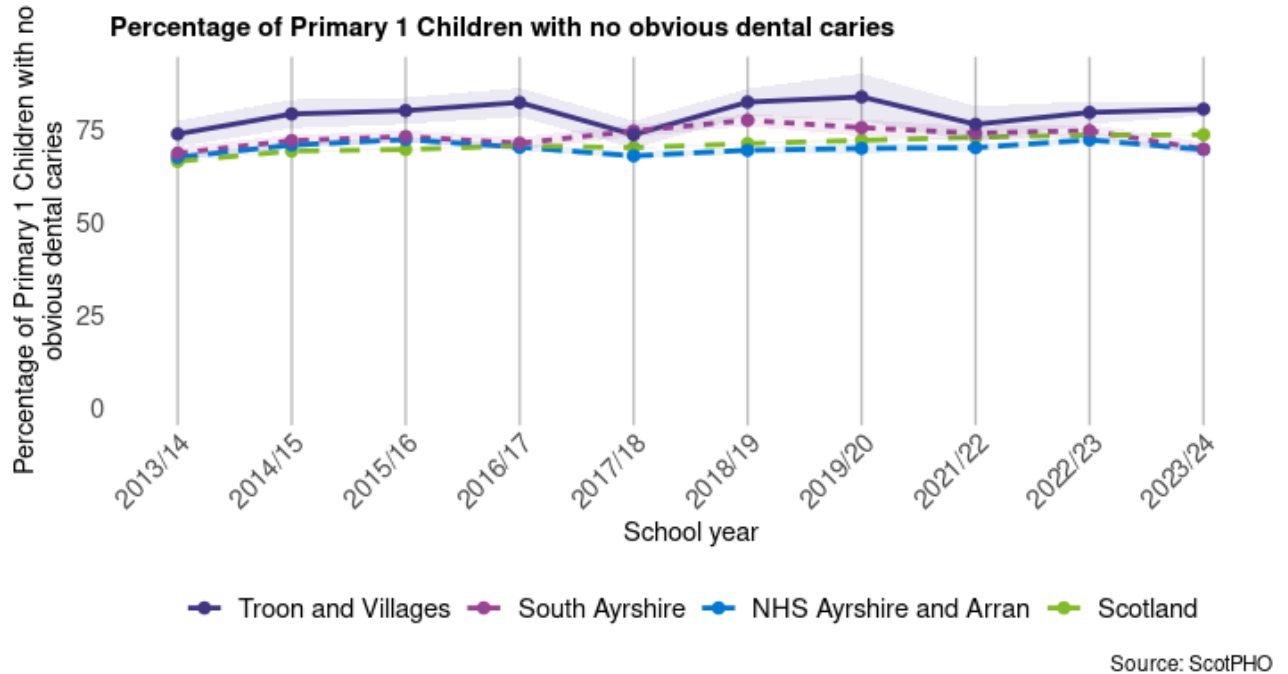
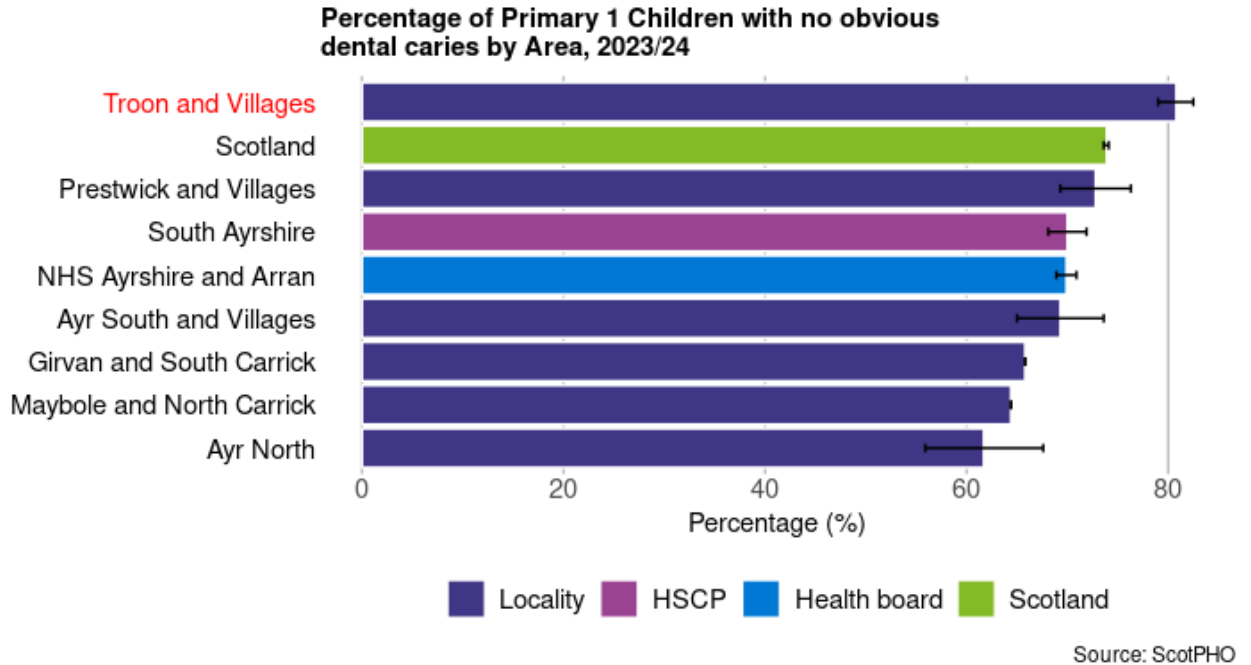


Figure 49 provides comparisons of the percentage of primary 1 children with no obvious dental caries between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2023/24, Troon and Villages had a higher rate than the rest of Scotland (80.8% compared to 73.9%).

Figure 49: Percentage of primary 1 children with no obvious dental caries by area for the latest time period available.



Child healthy weight in primary 1

In the latest time period available 2024/25, the percentage of primary 1 children with a healthy weight in Troon and Villages locality was **79.5%**. Figure 50 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 50: Percentage of primary 1 children with healthy weight by geographical area.

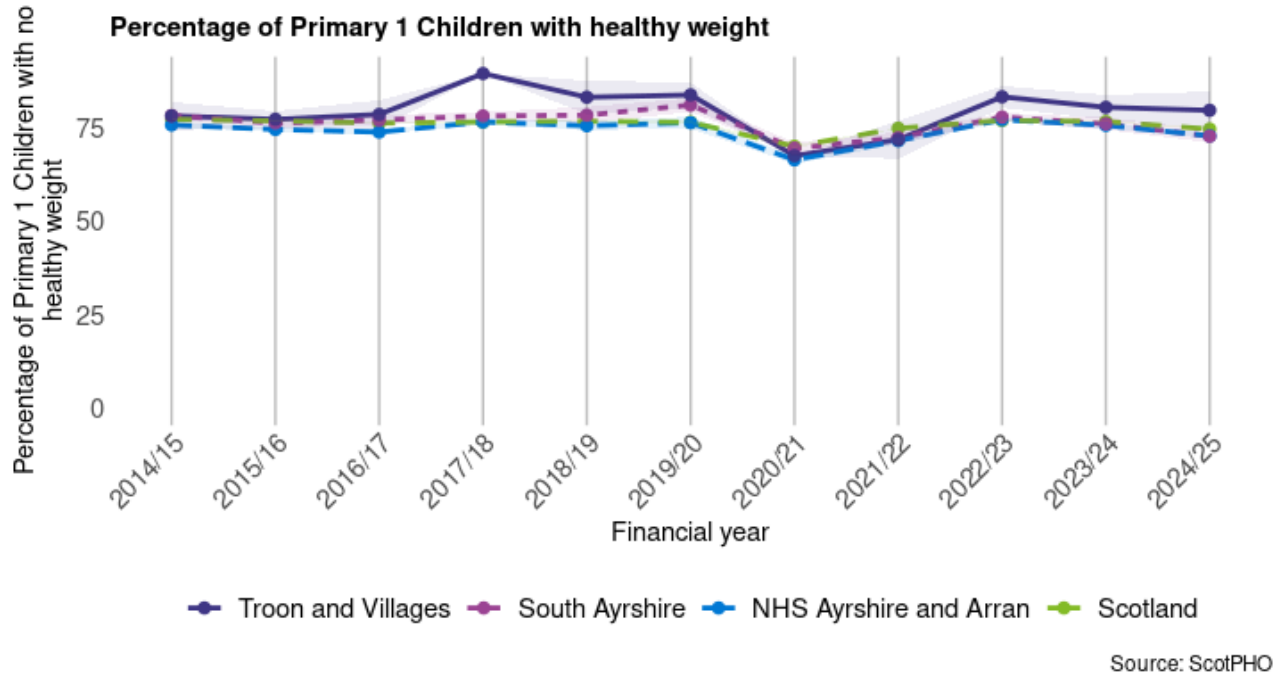
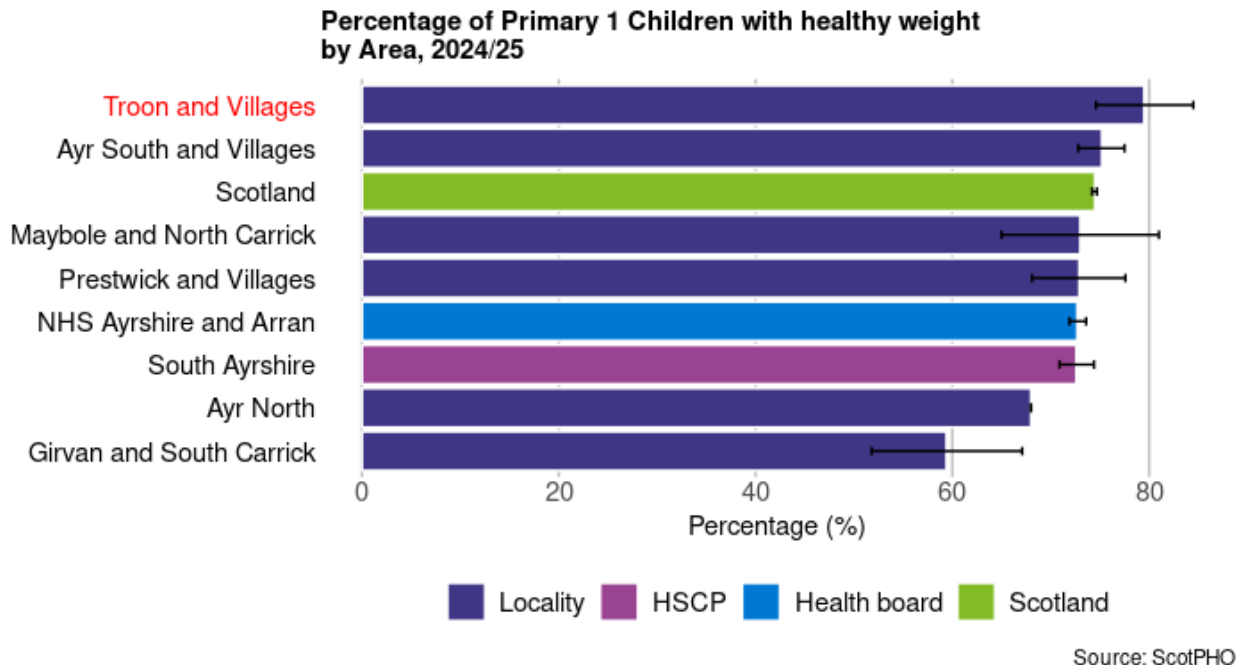


Figure 51 provides comparisons of the percentage of primary 1 children with a healthy weight between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2024/25, Troon and Villages had a higher rate than the rest of Scotland (79.5% compared to 74.5%).

Figure 51: Percentage of primary 1 children with healthy weight by area for the latest time period available.



Developmental concerns at 27-30 months

In the latest time period available 2021/22 - 2023/24, the percentage of children with one or more developmental concerns at 27-30 months in Troon and Villages locality was **10.3%**. Figure 52 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 52: Percentage of children with one or more developmental concerns (27-30 month review) by geographical area.

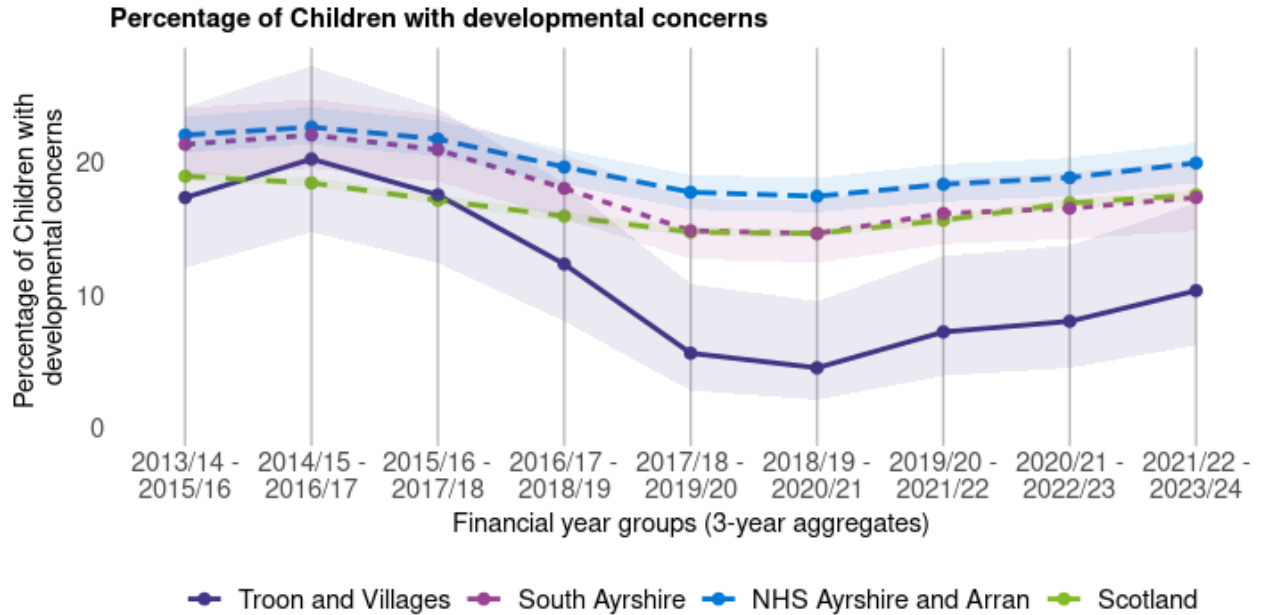
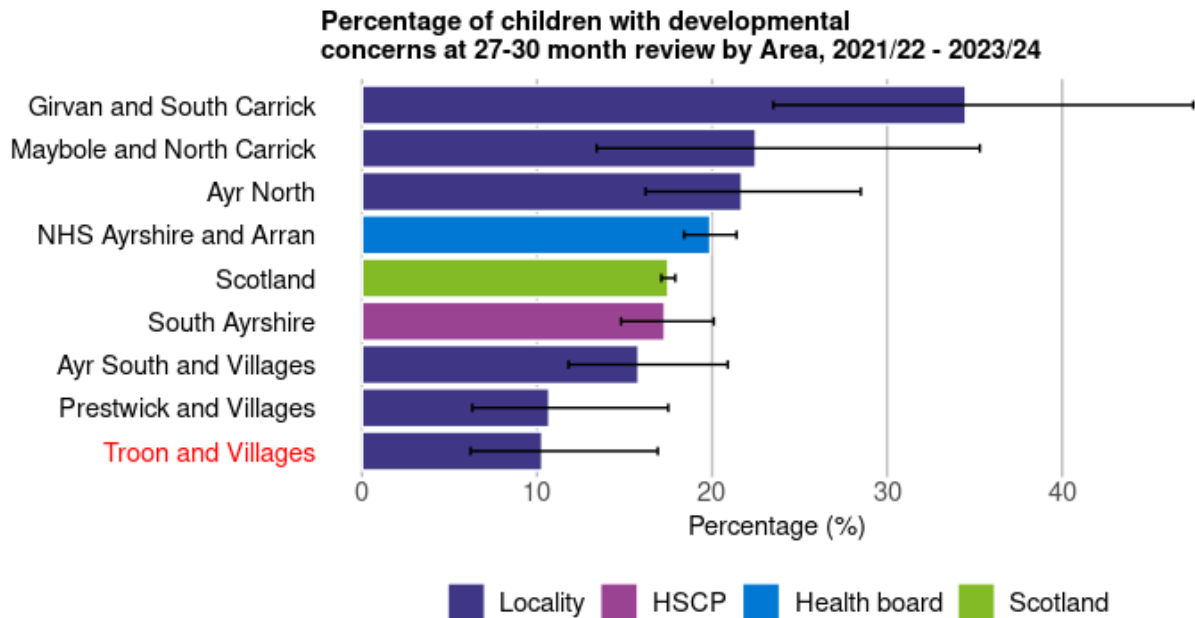


Figure 53 provides comparisons of the percentage of children with one or more developmental concerns at 27-30 months between the localities, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland. In 2021/22 - 2023/24, Troon and Villages had a lower rate than the rest of Scotland (10.3% compared to 17.5%).

Figure 53: Percentage of children with one or more developmental concerns (27-30 month review) by area for the latest time period available.



Source: ScotPHO

Economy and benefits

Summary

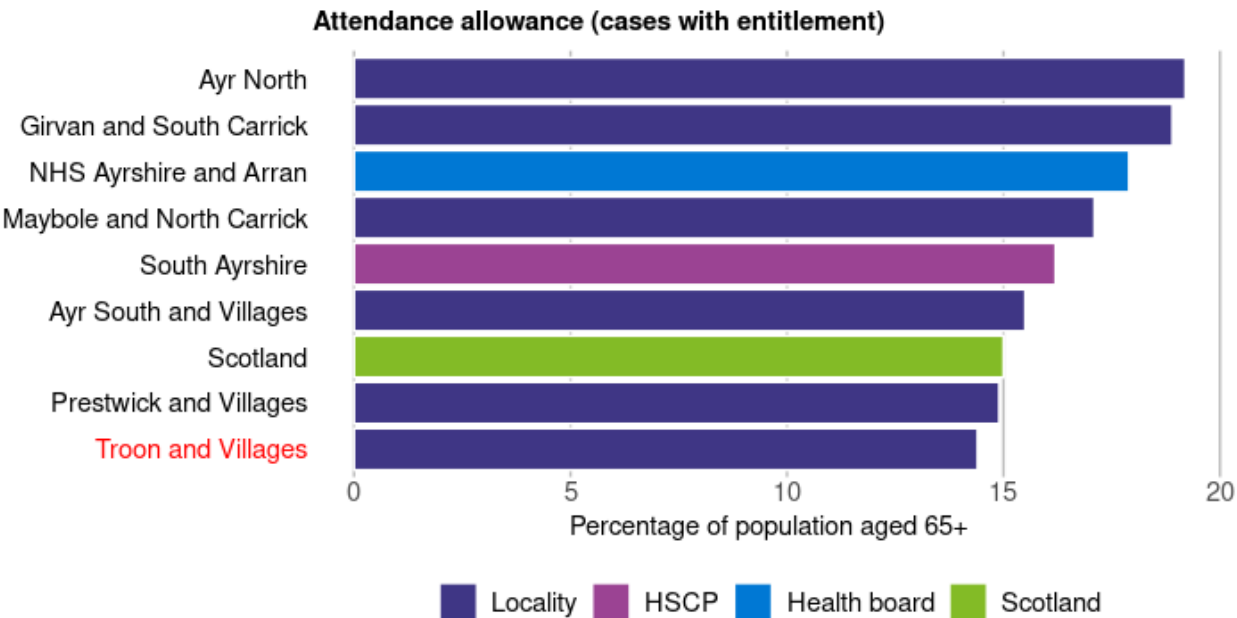
This section looks at the percentage of the population who receive different types of benefit. For the most recent time period available, Troon and Villages locality had:

- **14.4%** of people aged over 65 were in receipt of attendance allowance.
- **7.7%** of people aged over 65 were in receipt of pension credit.
- **10.4%** of people aged over 16 were in receipt of universal credit.

Attendance allowance

In February 2025, the percentage of the population aged over 65 in receipt of attendance allowance in Troon and Villages locality was **14.4%**. Figure 54 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 54: Percentage of the population aged 65+ in receipt of attendance allowance by geographical area.

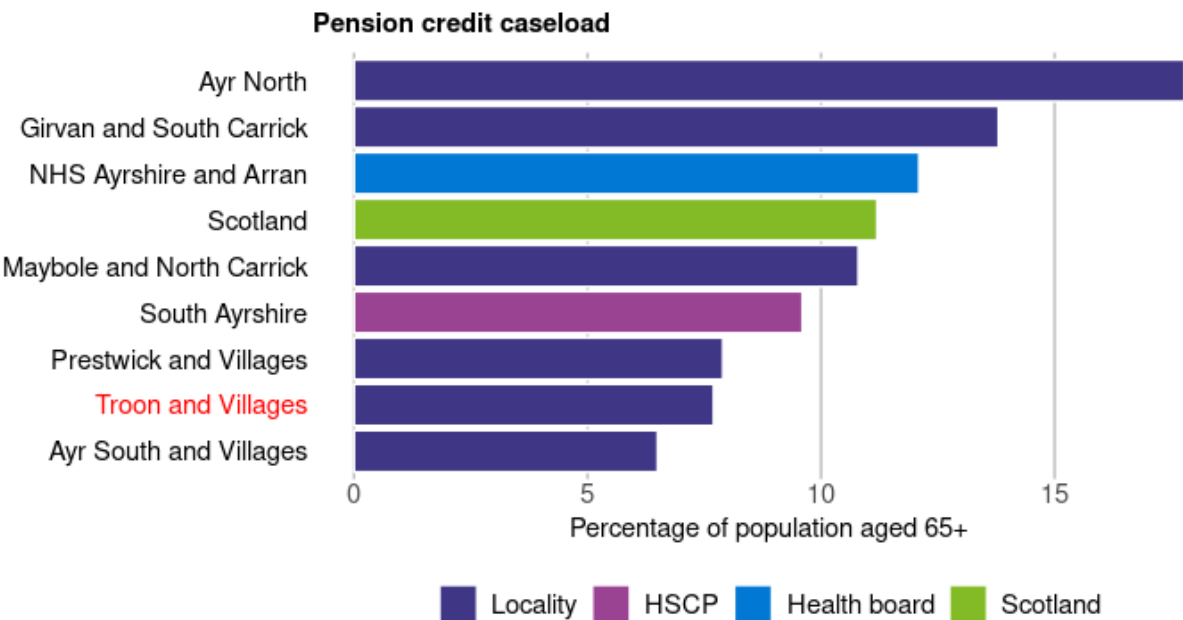


Source: UK Government Department for Work and Pensions

Pension credit

In November 2025, the percentage of the population aged over 65 in receipt of pension credit in Troon and Villages locality was **7.7%**. Figure 55 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 55: Percentage of the population aged 65+ in receipt of pension credit by geographical area

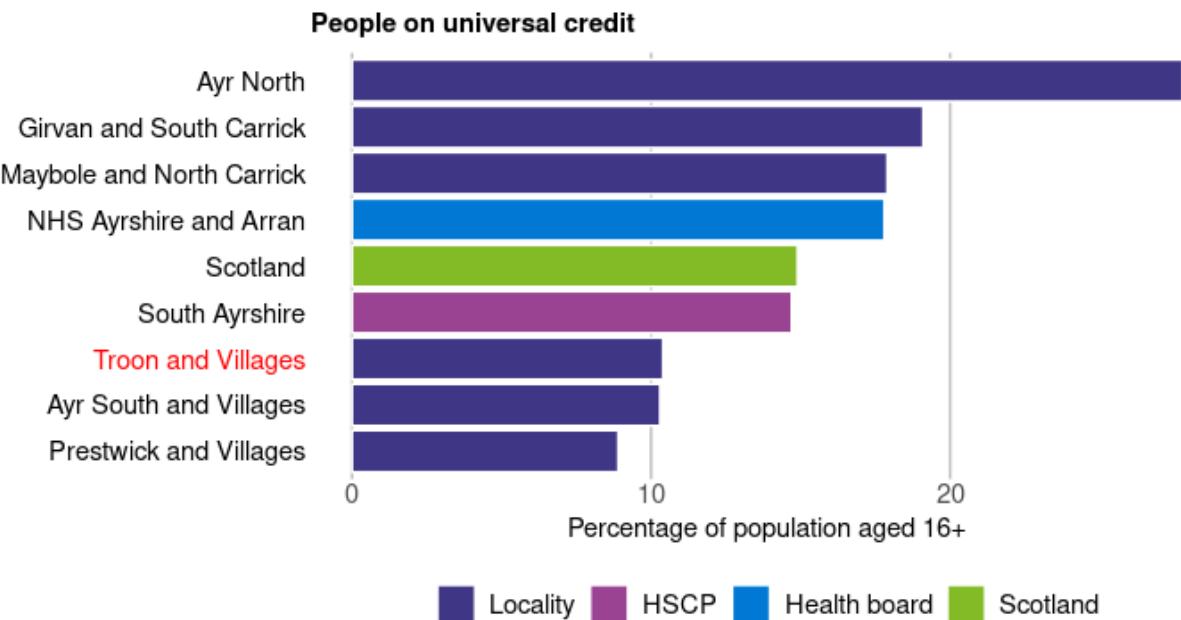


Source: UK Government Department for Work and Pensions

Universal credit

In February 2026, the percentage of the population aged over 16 in receipt of universal credit in Troon and Villages locality was **10.4%**. Figure 56 compares the locality, South Ayrshire HSCP, NHS Ayrshire & Arran and Scotland.

Figure 56: Percentage of the population aged 16+ in receipt of universal credit by geographical area



Source: UK Government Department for Work and Pensions

Footnotes

1. The National Records Scotland (NRS) does not currently provide population projections at the locality level. To explore how the population in Troon and Villages is expected to change in the future, the percent changes in population projection to 2025 for South Ayrshire by age group and gender were calculated using the NRS Local Authority Population Projections. These percent changes were then applied to the Troon and Villages 2022 mid-year population estimates (also split by age group and gender) to obtain population projection estimates for Troon and Villages, based on the projections for the HSCP and the current population structure of the locality.
2. Care Home data included in the Services Map and Table was sourced from the [Care Inspectorate](#). [GP Practice](#), [Hospital](#) and [A&E](#) data were sourced from Public Health Scotland Open Data platform. Only services within the physical boundary of the HSCP or Locality are included in the map and table, so there may be services outside South Ayrshire that residents use but are not shown. Information on access deprivation was taken from the [ScotPHO profiles](#) (The Scottish Public Health Observatory).
3. Sourced from [ScotPHO](#). More recent data may be available for the indicators elsewhere.
4. ScotPHO data is often reported using the European Age-Sex Standardised Rate per 100,000. This allows for comparisons across different areas to be made. For more information on how these rates are calculated, please refer to the [PHS website: Geography, population and deprivation support](#).
5. Data on physical long-term conditions (LTC) is sourced from the SPARRA LTC table via the Source Linkage Files (SLFs). These conditions are identified using ICD-9 and ICD-10 diagnosis codes on acute (SMR01) admissions which have occurred since 1981. This underlying methodology will result in undercounts where individuals have an LTC but don't have a hospitalisation, and undercounts when individuals have a relevant hospitalisation but subsequently have no other symptoms. These under and overcounts will vary in scale for each condition. Additionally, LTC rates are based on an adjusted population indicator in the Source Linkage Files, ensuring that the population sizes align more closely with official estimates.

Appendices

Appendix 1: Indicator Definitions

Indicator	Definition
A&E attendances	The rate of A&E attendances per 100,000 population, includes data from 'New' and 'Unplanned Return' attendances at A&E, i.e. excludes those who are 'Recall' or 'Planned Return'. This indicator only contains data from all sites that submit episode level data. This impacts Highland and Aberdeenshire partnerships in particular as they have a number of sites which submit aggregate data.
Alcohol-related hospital admissions	General acute inpatient and day case stays with diagnosis of alcohol misuse in any diagnostic position (ICD-10 code: E24.4, E51.2, F10, G31.2, G62.1, G72.1, I42.6, K29.2, K70, K85.2, K86.0, O35.4, P04.3, Q86.0, R78.0, T51.0, T51.1, T51.9, X45, X65, Y15, Y57.3, Y90, Y91, Z50.2, Z71.4, Z72.1). All rates have been standardised against the European standard population (ESP2013) and 2011-based population estimates.
Alcohol-specific deaths	Alcohol related deaths (based on new National Statistics definition): 5-year rolling average number and directly age-sex standardised rate per 100,000 population. (ICD-10 codes from the primary cause of death: E24.4, F10, G31.2, G62.1, G72.1, I42.6, K29.2, K70, K85.2, K86.0, Q86.0, R78.0, X45, X65, Y15).
Asthma patient hospitalisations	Patients discharged from hospital (annually) diagnosed with asthma: 3 year rolling average number and directly age-sex standardised rate per 100,000 population. All rates are standardised against the European standard population(ESP2013) and 2011-base population estimates.

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Indicator	Definition
	Patient is selected only once per year, based on their first asthma related hospital admission that year.
Bowel screening uptake	Bowel screening uptake for all eligible men and women invited (aged 50-74): 3-year rolling average number percentage. Eligible men and women are posted a guaiac-based faecal occult blood test kit (FOBT) which should be completed at home. This involves collecting 2 samples from each of 3 separate bowel movements. The kit is returned in a pre-paid envelope to the central screening centre in Dundee and tested for hidden traces of blood in the stool. Individuals who have a positive FOBT result are referred to their local hospital for assessment and, where appropriate, offered a colonoscopy as the first line of investigation.
Cancer registrations	New cancer registrations: 3 year rolling average number and directly age-sex standardised rate per 100,000 population. All rates have been standardised against the European standard population (ESP2013) and 2011-base population estimates. ICD10: C00-C96 excluding C44 (principal diagnosis only).
Chronic Obstructive Pulmonary Disease patient hospitalisations	Patients aged 16 and over discharged from hospital with COPD: 3-year rolling average number and directly age-sex standardised rate per 100,000 population.
Coronary Heart Disease patient hospitalisations	Patients discharged from hospital with coronary heart disease: 3-year rolling average number and directly age-sex standardised rate per 100,000 population. All rates have been standardised against the European standard population(ESP2013) and 2011-base population estimates. Patient is selected only once per year, based on their first CHD related admission to hospital that year.
Death, aged 15-44	Deaths from all causes (ages 15-44 years), 3 year rolling average number and directly age sex standardised rate per

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Indicator	Definition
	100,000 population. All rates have been standardised against the European standard population (ESP2013). Deaths assigned to year based on death registration date.
Delayed discharge bed days	The number of bed days occupied by people over the age of 65 experiencing a delay in their discharge from hospital, per 100,000 population. Includes the following reason groups: all reasons, health and social care, patient/carer/family-related and code 9s. Length of delay is calculated from the patient's ready for discharge date to either their discharge date within the specific calendar month or the end of the calendar month for patients who are still in delay.
Drug-related hospital admissions	General acute inpatient and day case stays with diagnosis of drug misuse in any diagnostic position (ICD10: F11-F16, F18, F19, T40.0-T40.9), 3-year rolling average number and directly age-sex standardised rate per 100,000 population. All rates have been standardised against the European standard population (ESP2013) and 2011-based population estimates.
Early deaths from cancer	Deaths from cancer (<75 years), 3 year rolling average number and directly age sex standardised rate per 100,000 population. All rates have been standardised against the European standard population (ESP2013). Death figures are based on year of registration.
Emergency admissions	Rate of emergency (non-elective) admissions of patients of all ages per 100,000 population, derived from data collected on discharges from non-obstetric and non-psychiatric hospitals (SMR01) in Scotland. Only patients treated as inpatients or day cases are included. The specialty of geriatric long stay is excluded. Data are reported by month of discharge.
Emergency admissions from a fall	Rate of acute emergency admissions (non-elective) of patients of all ages where a fall was logged as an ICD-10 code. ICD-10 codes W00-W19 were searched for in all

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Indicator	Definition
	diagnostic positions, in conjunction with the admission type codes 33 (Patient injury, home accident), 34 (Patient injury, incident at work) and 35 (Patient injury, other).
Emergency readmissions (28 day)	The rate of readmissions of all adults (18+) within 28 days of an admission per 1,000 discharges. An emergency readmission is where the subsequent admission is an emergency and occurs up to and including 28 days from the initial admission. The initial admission can be of any type but must end within the time period of interest.
Life expectancy, females	Estimated female life expectancy at birth in years, multi-year average (over 3 years for NHS Boards and Local Authorities, 5 years for Intermediate zones). Mortality data are based on year of registration. They also include non-Scottish residence so the number of deaths match those produced by NRS.
Life expectancy, males	Estimated male life expectancy at birth in years, multi-year average (over 3 years for NHS Boards and Local Authorities, 5 years for Intermediate zones) Mortality data are based on year of registration. They also include non-Scottish residence so the number of deaths match those produced by NRS.
People living in 15% most 'access deprived' areas	Number and percentage of population living in 15% most 'access deprived' areas (data zones) in Scotland. Calculated using 2011-base population estimates.
Physical Long-Term Conditions (LTCs)	Health conditions that last a year or longer, impact a person's life, and may require ongoing care and support. The LTCs presented are: Arthritis, Atrial Fibrillation, Cancer, Coronary Heart Disease, Chronic Obstructive Pulmonary Disease (COPD), Cerebrovascular Disease, Dementia, Diabetes, Epilepsy, Heart Failure, Liver Failure, Multiple Sclerosis, Parkinson's, and Renal Failure.

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Indicator	Definition
Population prescribed drugs for anxiety/depression/psychosis	Estimated number and percentage of population being prescribed drugs for anxiety, depression or psychosis.
Potentially Preventable Admissions (PPA)	Emergency admissions (non-elective) of patients of all ages for conditions based on 19 "ambulatory care sensitive conditions" from "The health of the people of NEW South Wales - Report of the Chief Medical Officer". These conditions result from medical problems that may be avoidable with the application of public health measures and/or timely and effective treatment usually delivered in the community by the primary care team. Please see complete list of ICD-10 codes included in Appendix 3.
Psychiatric patient hospitalisations	Patients discharged from psychiatric hospitals: 3-year rolling average number and directly age-sex standardised rate per 100,000 population. Data taken from SMR04. All rates have been standardised against the European standard population(ESP2013) and 2011-base population estimates. Patient is selected only once per year, based on their discharge date.
Unscheduled bed days	Rate of unscheduled bed days of patients of all ages per 100,000 population, derived from data collected on discharges from non-obstetric and non-psychiatric hospitals (SMR01) in Scotland. Only patients treated as inpatients or day cases are included. Bed days for each month have been calculated based on the month in which the bed days were occupied. This differs from other analysis where bed days are reported by the month of discharge.
Unscheduled bed days (Mental Health specialty)	Rate of unscheduled bed days of patients of all ages per 100,000 population. Includes all occupied bed days within a continuous hospital stay following an emergency or urgent admission. Episodes beginning with a transfer have also been

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Indicator	Definition
	included as many of these episodes will have started as unplanned acute admission. Bed days for each month have been calculated based on the month in which the bed days were occupied. This differs from other analysis where bed days are reported by the month of discharge.

Appendix 2: Date of Indicator Data Extractions

Section	Indicator	Date of data extraction
Demographics	Population structure	12/05/2026
Demographics	Population projection	12/05/2026
Demographics	SIMD2016	12/05/2026
Demographics	SIMD2020	12/05/2026
Housing	Household estimates	23/03/2026
Housing	Household in each council tax band	23/03/2026
Services	GP practice locations	24/03/2026
Services	Care Home locations	24/03/2026
Services	A&E locations	24/03/2026
Population Health	Life expectancy males	24/03/2026
Population Health	Life expectancy females	24/03/2026
Population Health	Deaths ages 15-44 years	24/03/2026
Population Health	Physical Long-Term Conditions	24/03/2026
Population Health	Cancer registrations	24/03/2026
Population Health	Early deaths from cancer	24/03/2026
Population Health	Asthma patient hospitalisations	24/03/2026
Population Health	Coronary Heart Disease patient hospitalisations	24/03/2026
Population Health	Chronic Obstructive Pulmonary Disease patient hospitalisations	24/03/2026

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Section	Indicator	Date of data extraction
Population Health	Population with a prescription for anxiety, depression or psychosis	24/03/2026
Lifestyle & Risk Factors	Alcohol related hospital stays	23/03/2026
Lifestyle & Risk Factors	Alcohol related mortality	23/03/2026
Lifestyle & Risk Factors	Drug-related hospital admissions	23/03/2026
Lifestyle & Risk Factors	Bowel screening uptake	23/03/2026
Hospital & Community Care	Emergency admissions (acute)	16/03/2026
Hospital & Community Care	Unscheduled bed days (acute)	23/03/2026
Hospital & Community Care	A&E Attendances	16/03/2026
Hospital & Community Care	Delayed discharges aged 65+	16/03/2026
Hospital & Community Care	Fall admissions aged 65+	16/03/2026
Hospital & Community Care	Emergency readmissions (28 day)	16/03/2026
Hospital & Community Care	Potentially Preventable Admissions (PPAs)	16/03/2026
Hospital Care (Mental Health Specialty)	Psychiatric patient hospitalisations	23/03/2026
Hospital Care (Mental Health Specialty)	Unscheduled bed days	23/03/2026

Appendix 3: Conditions included as Potentially Preventable Admissions (PPAs)

Condition	ICD10 codes included	Comments
Ear Nose And Throat	H66, J028, J029, J038, J039, J06, J321	
Dental	K02, K03, K04, K05, K06, K08	
Convulsions And Epilepsy	G40, G41, R56, O15	
Gangrene	R02	
Nutritional Deficiencies	E40, E41, E43, E550, E643, M833	
Dehydration And Gastroenteritis	E86, K522, K528, K529	
Pyelonephritis	N10, N11, N12	
Perforated Bleeding Ulcer	K250, K251, K252, K254, K255, K256, K260, K261, K262, K264, K265, K266, K270, K271, K272, K274, K275, K276, K280, K281, K282, K284, K285, K286	Excludes episodes with following main OPCS4 codes: S06, S57, S68, S70, W90, X11
Cellulitis	L03, L04, L080, L088, L089, L980	
Pelvic Inflammatory Disease	N70, N73	
Influenza And Pneumonia	J10, J11, J13, J181	
Other Vaccine Preventable	A35, A36, A370, A379, A80, B05, B06, B161, B169, B26	

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Condition	ICD10 codes included	Comments
Iron Deficiency	D501, D508, D509	
Asthma	J45, J46	
Diabetes Complications	E100, E101, E102, E103, E104, E105, E106, E107, E108, E110, E111, E112, E113, E114, E115, E116, E117, E118, E120, E121, E122, E123, E124, E125, E126, E127, E128, E130, E131, E132, E133, E134, E135, E136, E137, E138, E140, E141, E142, E143, E144, E145, E146, E147, E148	
Hypertension	I10, I119	Exclude episodes with following main OPCS4 codes: K01 - K50, K56, K60 - K61
Angina	I20	Exclude episodes with main OPCS4 codes: K40, K45 K49, K60, K65, K66
COPD	J20, J41, J42, J43, J44	J20 only included if secondary diagnosis has one of J41 - J44
Congestive Heart Failure	I110, I50, J81	Exclude episodes with following main OPCS4 codes: K01 - K50, K56, K60 - K61

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