

The Royal Borough of Windsor & Maidenhead Health and Wellbeing profile

Public Health 10/10/2025

Introduction

- This profile provides a summary of the health and wellbeing of the population of the Royal Borough of Windsor and Maidenhead (RBWM).
- It includes indicators that look across the life course of the population as well as demographic information, deprivation and health outcomes.
- Indicators have been grouped into five thematic areas: People and Place, Best Start in Life, Living Well, Healthy Ageing, and Healthy Place.
- The profile was created to support the development of RBWM Joint Health and Wellbeing Strategy 2026-2036.

Summary (1/2)

This slide provides a summary of the indicators included in the profile compared to England for the local authority.

Indicator	Timeperiod	Compared
MMR one dose (2 yrs)	2020/21	х
DTaP/IPV/Hib/HepB vaccine (2 yrs)	2020/21	x
Emergency admissions (<5 yrs)	2016/17 - 20/21	Worse
Emergency admissions for injuries (<5 yrs)	2016/17 - 20/21	Better
Emergency admissions for injuries (<15 yrs)	2016/17 - 20/21	Better
Emergency admissions for injuries (15-24 yrs)	2016/17 - 20/21	Similar
Reception: Prevalence of obesity	2021/22 - 23/24	Better
Reception: Prevalence of excess weight	2021/22 - 23/24	Better
Year 6: Prevalence of obesity	2021/22 - 23/24	Better
Year 6: Prevalence of excess weight	2021/22 - 23/24	Better
QOF: Asthma	2023/24	Lower
Life expetancy (female)	2016 - 20	Better
Life expetancy (male)	2016 - 20	Better
Unemployment	2021/22	Better
Long-term unemployment	2021/22	Better
QOF: Learning disability	2023/24	Lower
QOF: Hypertension	2023/24	Lower

Indicator	Timeperiod	Compared
QOF: Epilepsy	2023/24	х
QOF: Diabetes	2023/24	Lower
QOF: COPD	2023/24	Lower
QOF: Heart failure	2023/24	Higher
QOF: Coronary heart disease	2023/24	Lower
QOF: Cancer	2023/24	х
QOF: Atrial fibrillation	2023/24	Higher
QOF: Mental health	2023/24	Lower
QOF: Depression	2023/24	Similar
QOF: Smoking	2023/24	х
QOF: Obesity	2023/24	Lower
Cervical screening (25-49 yrs)	2023/24	х
Cervical screening (50-64 yrs)	2023/24	х
% Caring responsibility	2024	х
Emergency admissions	2016/17 - 20/21	Better
Emergency admissions for CHD	2016/17 - 20/21	Better
Emergency admissions for stroke	2016/17 - 20/21	Better

Compared with England or goal:		
■ Better Similar Worse Not compared		
■ Lower ■ Similar ■ Higher		
English local authority quintiles:		
■ 1 (worst) ■ 2 ■ 3 ■ 4 ■ 5 (best)		

Indicator	Timeperiod	Compared
Emergency admissions for heart attack	2016/17 - 20/21	Better
Emergency admissions for COPD	2016/17 - 20/21	Better
Emergency admissions for self harm	2016/17 - 20/21	Better
QOF: Stroke	2023/24	Lower
QOF: Dementia	2023/24	Higher
QOF: Chronic kidney disease	2023/24	Similar
QOF: Osteoporosis	2023/24	Lower
QOF: Rheumatoid arthritis	2023/24	Lower
Bowel cancer screening	2023/24	х
Breast cancer screening	2023/24	x
Emergency admissions for hip fracture	2016/17 - 20/21	Better
Deaths from all causes	2016 - 20	Better
Deaths under 75	2016 - 20	Better
Deaths preventable	2016 - 20	Better
Deaths from cancer	2016 - 20	Better
Deaths from cancer under 75	2016 - 20	Better
Deaths from circulatory disease	2016 - 20	Better

Summary (2/2)

This slide provides a summary of the indicators included in the profile compared to England for the local authority.

Indicator	Timeperiod	Compared
Deaths from circulatory disease under 75	2016 - 20	Better
Deaths from coronary heart disease	2016 - 20	Better
Deaths from stroke	2016 - 20	Similar
Deaths from respiratory disease	2016 - 20	Better
Fuel poverty	2023	5
Access to gardenspace	2020	2
Access to greenspace	2020	4
Access to secondary school	2019	Worse



Statistical, Census and electoral geographies

Data at several small area levels are used in this profile, these include:

- Lower Super Output Areas (LSOAs)
 - LSOAs have a population size of 1,000 to 3,000 people.
 - There are 89 2021 based LSOAs in RBWM.
- Middle Super Output Areas (MSOAs)
 - MSOAs have a population size of 5,000 to 15,000 people.
 - There are 18 2021 based LSOAs in RBWM.
- Electoral Wards
 - An electoral ward is an area from which one or more councillors are elected to represent residents on the local council.
 - There are 19 wards in RBWM.
- Postcodes
 - Postcodes are used to identify specific locations within the borough.
 - There are 7190 postcodes in RBWM.
- GP practices
 - This profile shows main GP practices in the borough.
 - There are 38 GP practices in RBWM.

Indicators explained

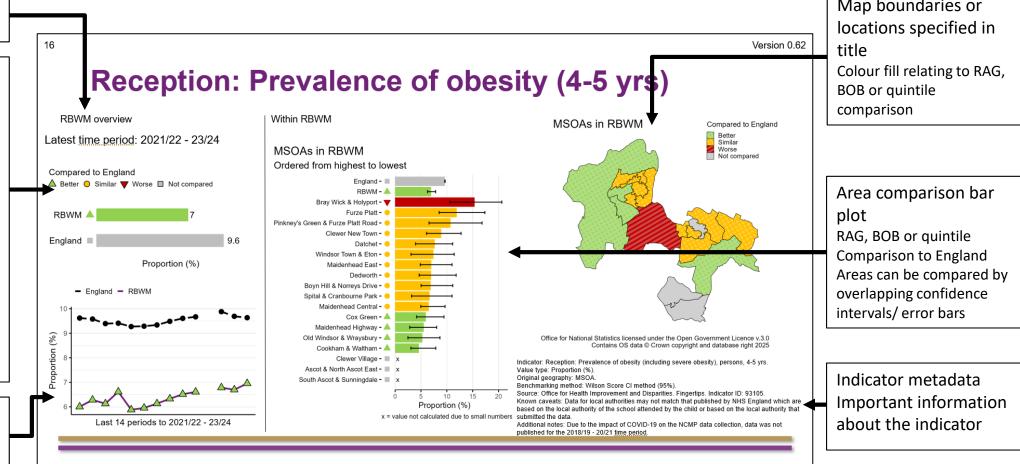
Latest time period for indicator

Latest value for RBWM compared to **England**

RAG

- Red = Worse
- Amber = Similar
- Green = Better BOB
- Dark blue = Lower
- Amber = Similar
- Light blue = Higher Quintiles
- Ouintile 1 is the worst performing
- Quintile 5 is the best performing.

RBWM trend over time compared to **England**



Map boundaries or

Contact details

For questions or additional information about these profiles, please contact:

Senior Public Health Analyst

Public Health

Royal Borough of Windsor and Maidenhead

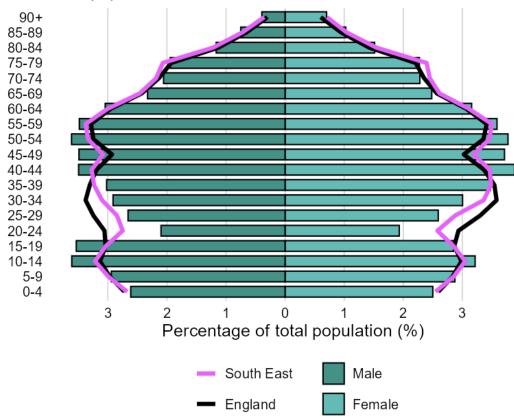
phi@rbwm.gov.uk

People and place

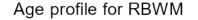
Population

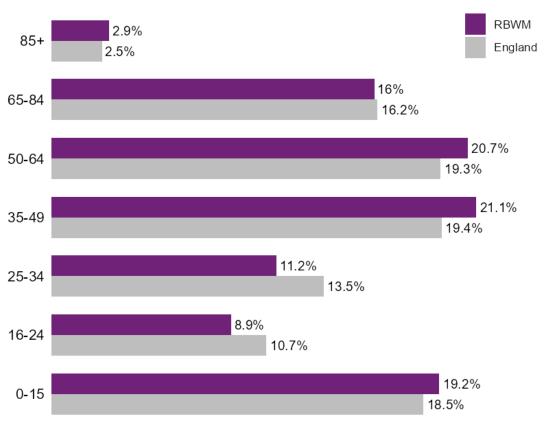
RBWM population pyramid

Total population: 155,239



Source: ONS population estimates mid-2023

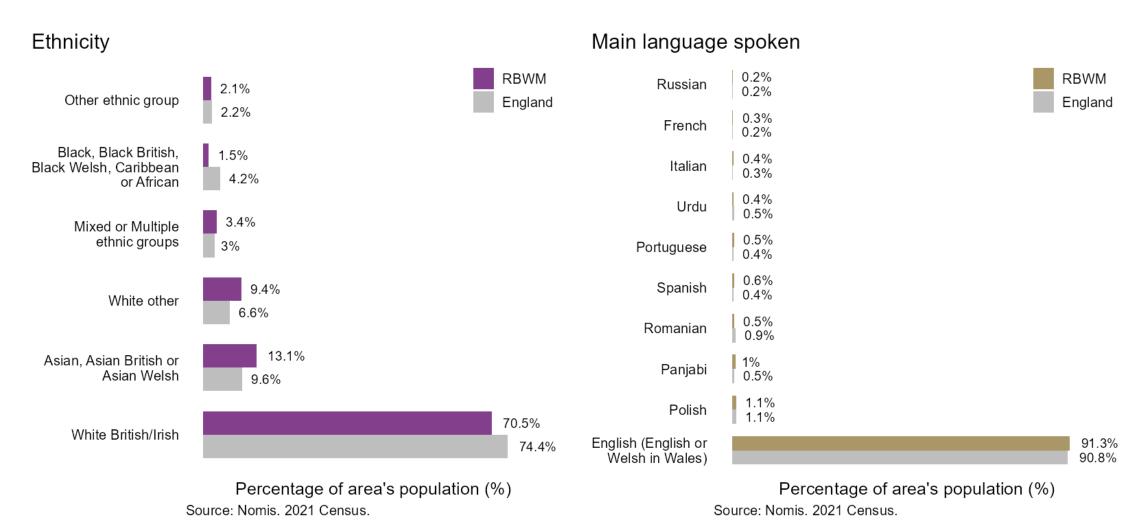




Percentage of area's population (%)

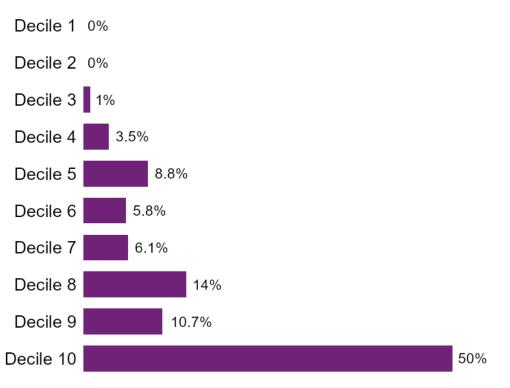
Source: ONS population estimates mid-2023

Ethnicity and main language



Deprivation

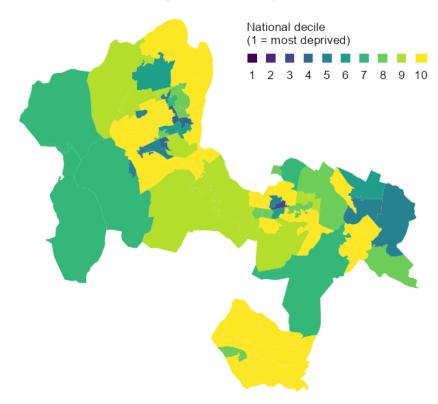
Percentage of population by deprivation decile for RBWM



Percentage of total population (%)

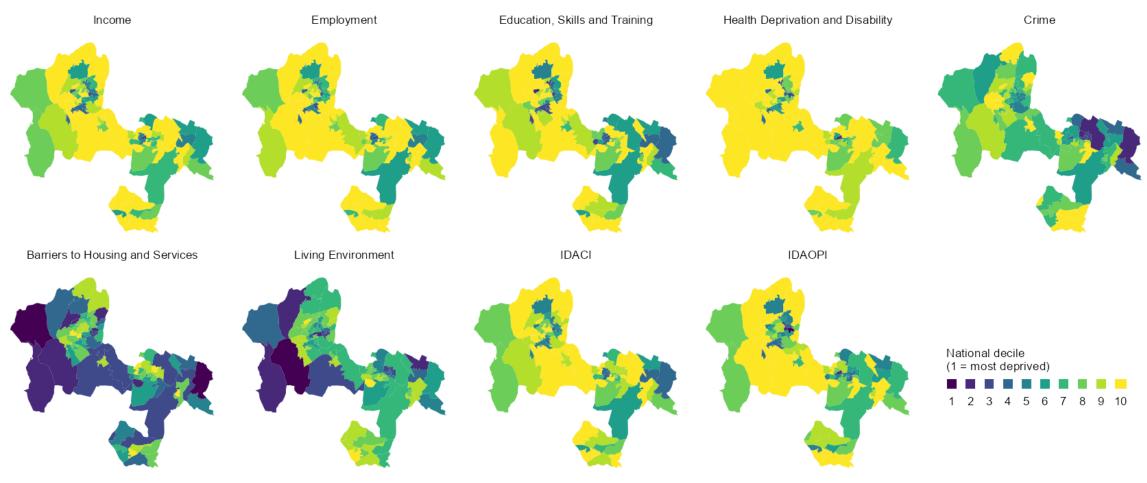
Source: ONS LSOA population estimates and Ministry of Housing, Communities and Local Government. English Indices of Deprivation 2019.

Overall deprivation (IMD) 2019
All LSOAs in RBWM.
Darker colours indicate higher levels of deprivation



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Deprivation domains



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Best start in life

MMR vaccination for one dose (2 yrs)

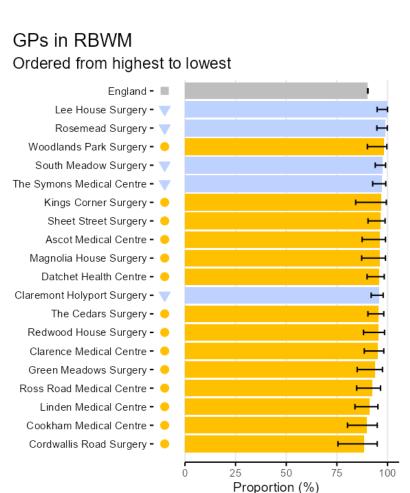
Within RBWM

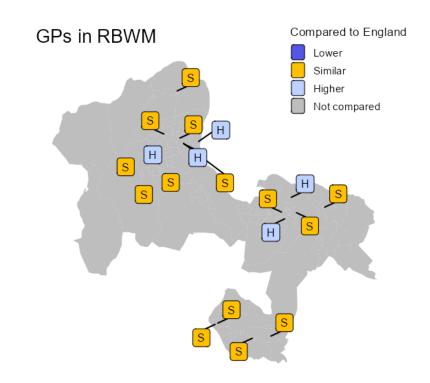
RBWM overview

Latest time period: 2020/21

Data unavailable for counties & UAs

Data unavailable for counties & UAs





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Indicator: MMR vaccination for one dose - registered population (persons), (2 yrs).

Context: MMR is the combined vaccine that protects against measles, mumps and rubella. The Department of Health have adopted the World Health Organisation's 95% target for vaccination coverage at national and local levels.

Value type: Proportion (%).

Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 92781.

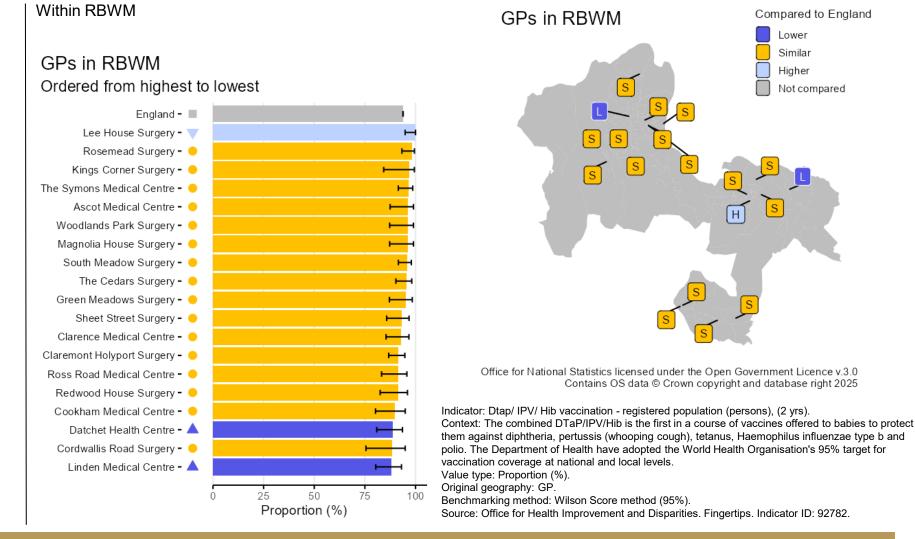
Dtap/ IPV/ Hib vaccination (2 yrs)

RBWM overview

Latest time period: 2020/21

Data unavailable for counties & UAs

Data unavailable for counties & UAs



Compared to England

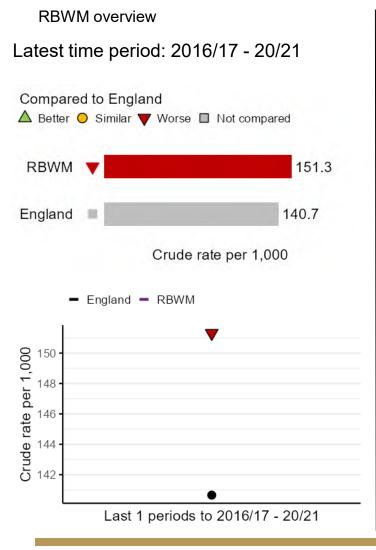
Not compared

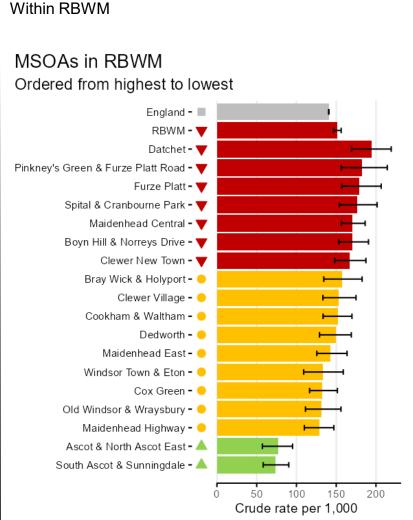
Lower

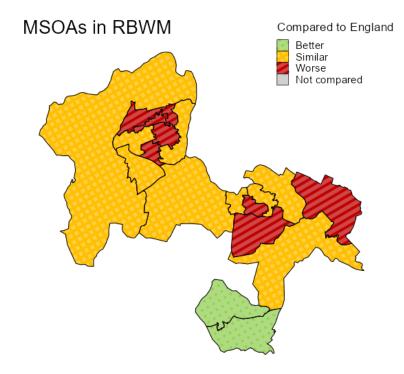
Similar

Higher

Emergency admissions (under 5 yrs)







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Indicator: Emergency hospital admissions, persons, under 5 yrs.

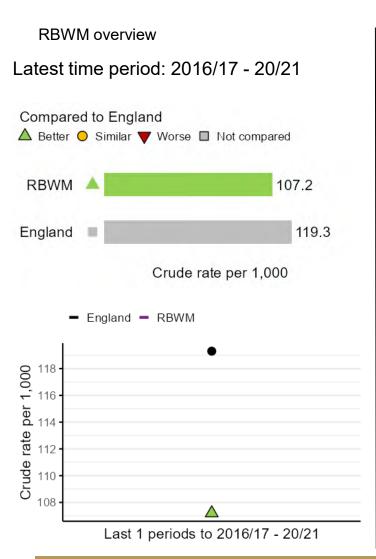
Value type: Crude rate per 1,000.

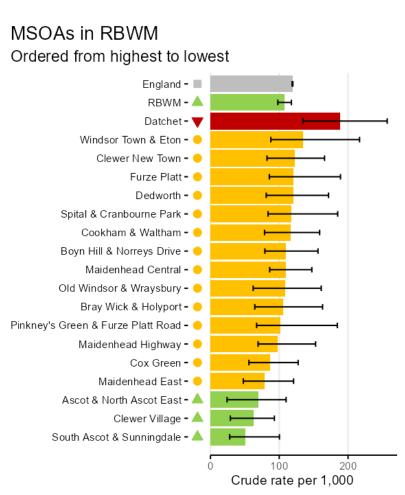
Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

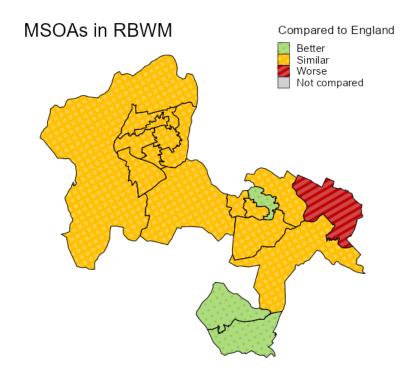
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93115.

Emergency admissions for injuries (under 5 yrs)





Within RBWM



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Indicator: Emergency hospital admissions for injuries, persons, under 5 yrs.

Value type: Crude rate per 1,000.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

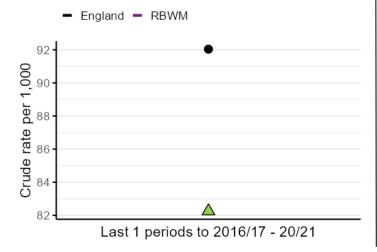
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93114.

Emergency admissions for injuries (under 15

Yrs RBWM overview

Latest time period: 2016/17 - 20/21

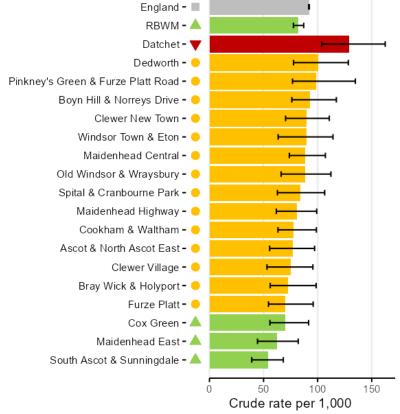


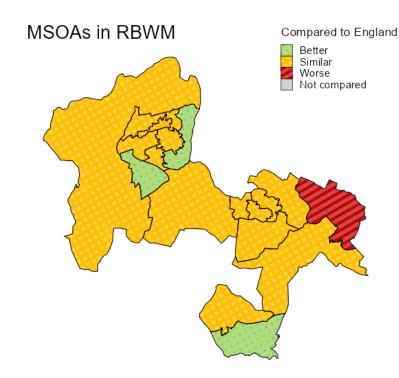




MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Emergency hospital admissions for injuries, persons, under 15 yrs.

Value type: Crude rate per 1,000.

Original geography: MSOA.

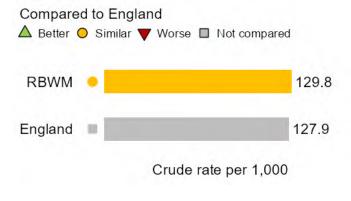
Benchmarking method: Byar's method method (95%).

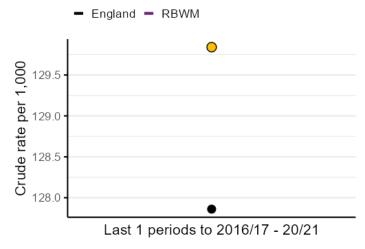
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93219.

Emergency admissions for injuries (15 to 24

yrs)
RBWM overview

Latest time period: 2016/17 - 20/21

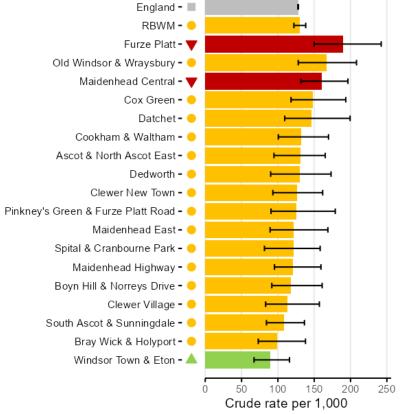


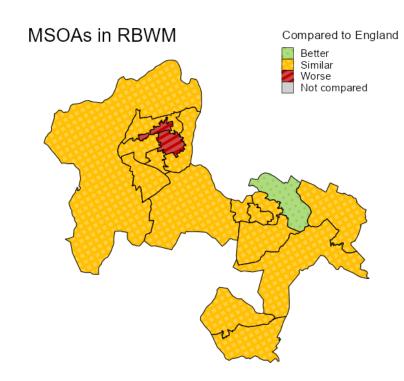




MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Emergency hospital admissions for injuries, persons, 15 to 24 yrs.

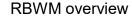
Value type: Crude rate per 1,000.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

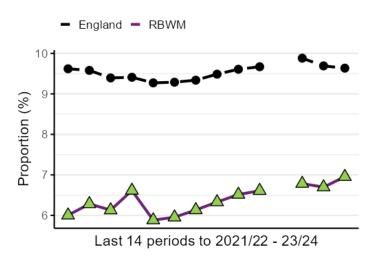
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93224.

Reception: Prevalence of obesity (4-5 yrs)



Latest time period: 2021/22 - 23/24

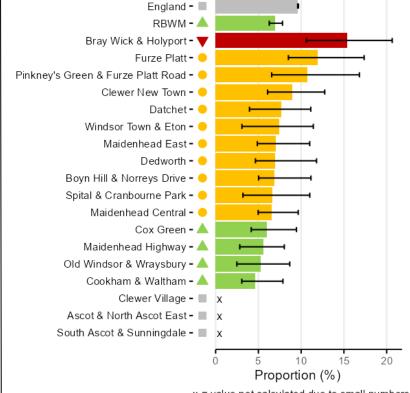




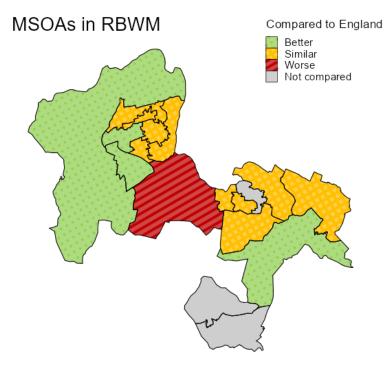
Within RBWM

MSOAs in RBWM

Ordered from highest to lowest



x = value not calculated due to small numbers submitted the data.



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Indicator: Reception: Prevalence of obesity (including severe obesity), persons, 4-5 yrs.

Value type: Proportion (%).

Original geography: MSOA.

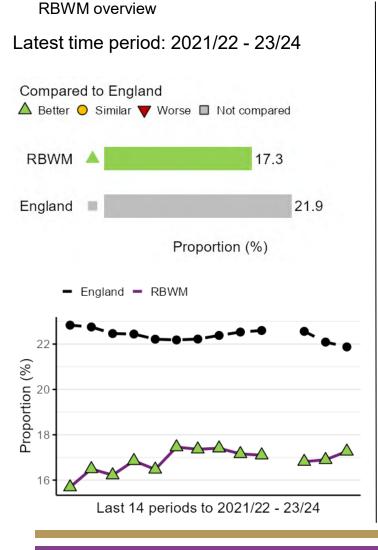
Benchmarking method: Wilson Score CI method (95%).

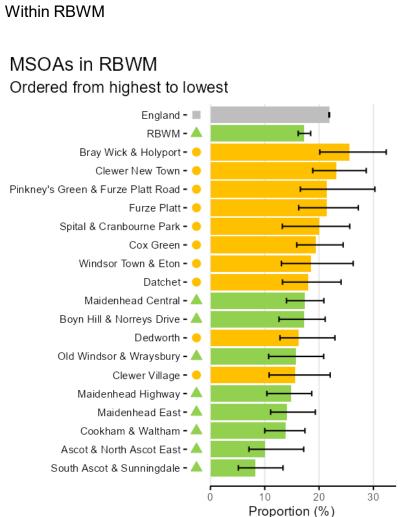
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93105.

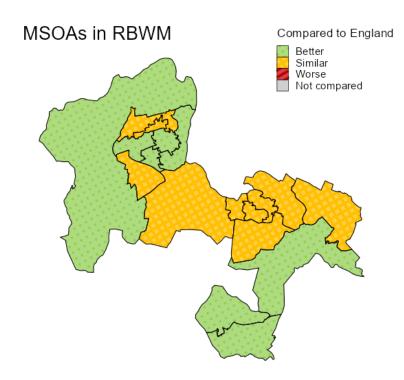
Known caveats: Data for local authorities may not match that published by NHS England which are based on the local authority of the school attended by the child or based on the local authority that submitted the data.

Additional notes: Due to the impact of COVID-19 on the NCMP data collection, data was not published for the 2018/19 - 20/21 time period.

Reception: Prevalence of overweight (4-5 yrs)







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Indicator: Reception: Prevalence of overweight (including obesity), persons, 4-5 yrs.

Value type: Proportion (%).

Original geography: MSOA.

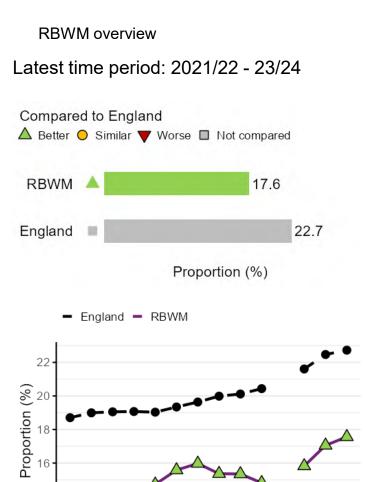
Benchmarking method: Wilson Score CI method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93106.

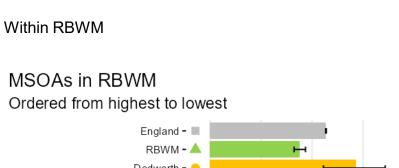
Known caveats: Data for local authorities may not match that published by NHS England which are based on the local authority of the school attended by the child or based on the local authority that submitted the data.

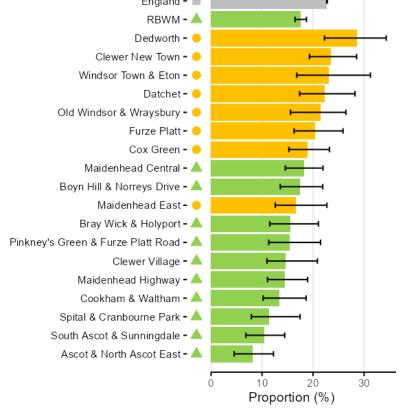
Additional notes: Due to the impact of COVID-19 on the NCMP data collection, data was not published for the 2018/19-20/21 time period.

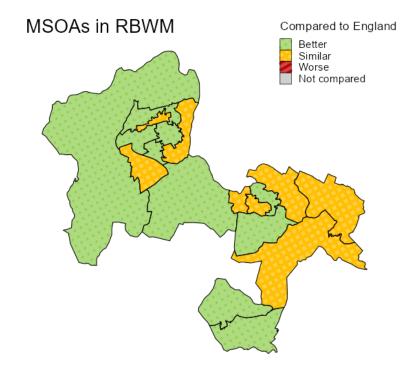
Year 6: Prevalence of obesity (10-11 yrs)



Last 14 periods to 2021/22 - 23/24







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Indicator: Year 6: Prevalence of obesity (including severe obesity), persons, 10-11 yrs.

Value type: Proportion (%).

Original geography: MSOA. Benchmarking method: Wilson Score CI method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93107.

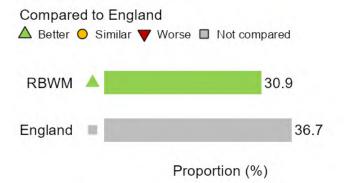
Known caveats: Data for local authorities may not match that published by NHS England which are based on the local authority of the school attended by the child or based on the local authority that submitted the data.

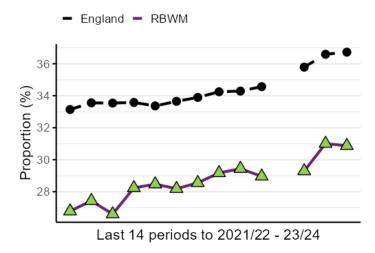
Additional notes: Due to the impact of COVID-19 on the NCMP data collection, data was not published for the 2018/19-20/21 time period.

Year 6: Prevalence of overweight (10-11 yrs)

RBWM overview

Latest time period: 2021/22 - 23/24

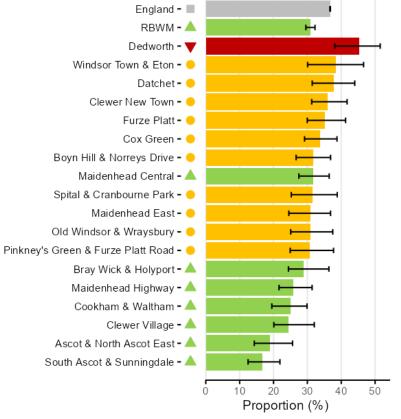


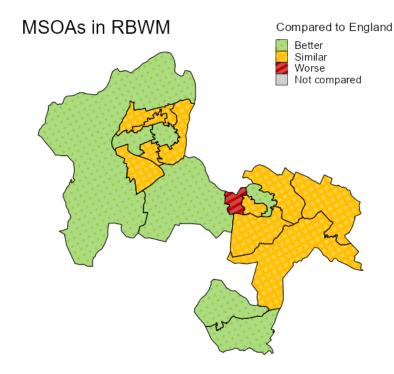


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Year 6: Prevalence of overweight (including obesity), persons, 10-11 yrs.

Value type: Proportion (%).

Original geography: MSOA.

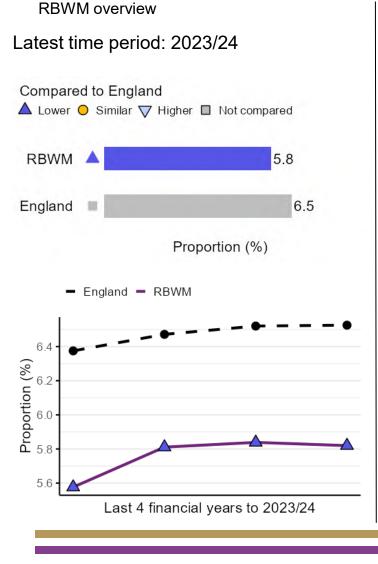
Benchmarking method: Wilson Score CI method (95%).

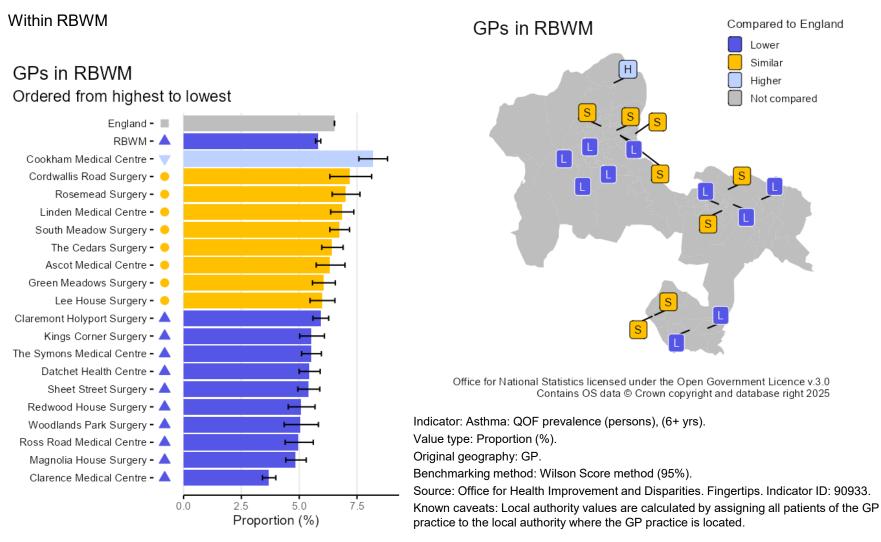
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93108.

Known caveats: Data for local authorities may not match that published by NHS England which are based on the local authority of the school attended by the child or based on the local authority that submitted the data.

Additional notes: Due to the impact of COVID-19 on the NCMP data collection, data was not published for the 2018/19-20/21 time period.

Asthma: QOF prevalence (6+ yrs)



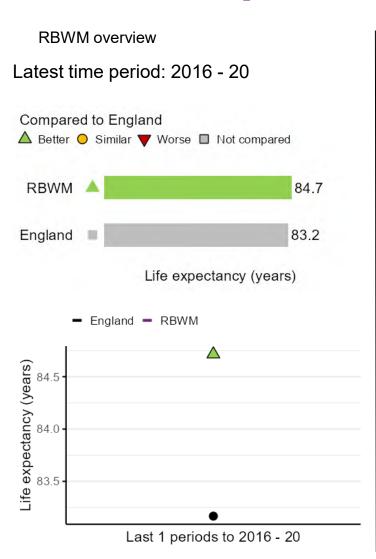


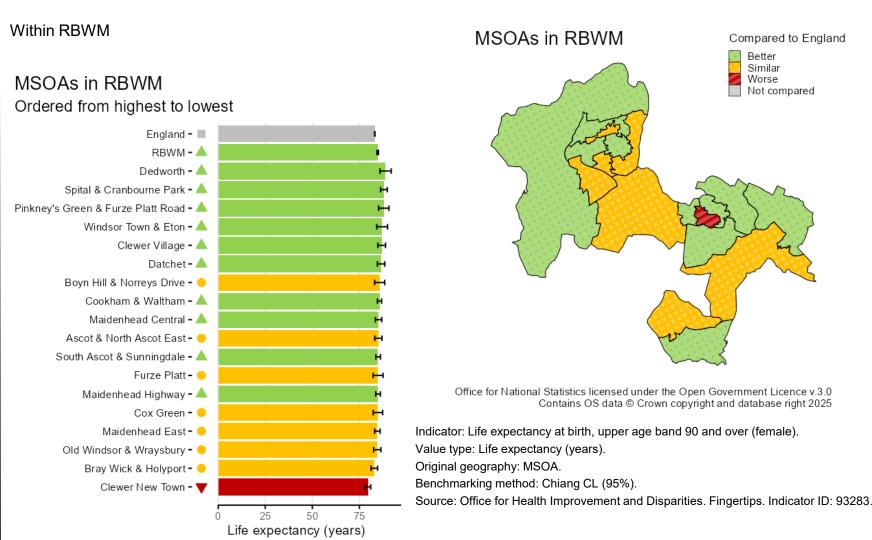
25

Version 1.0

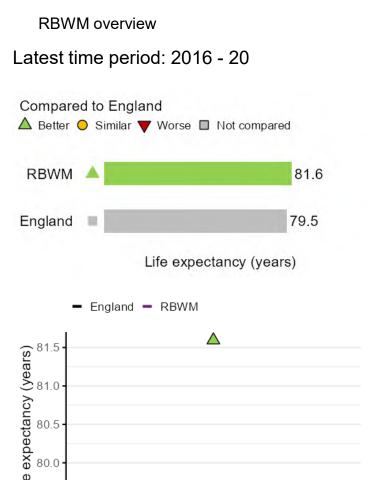
Living well

Life expectancy at birth (female)





Life expectancy at birth (male)

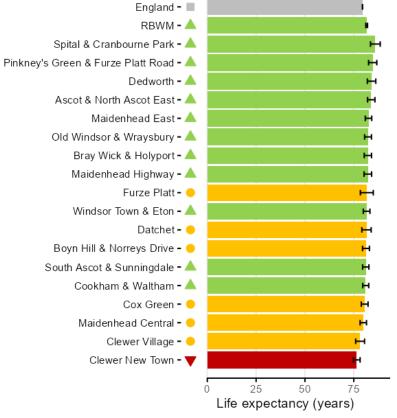


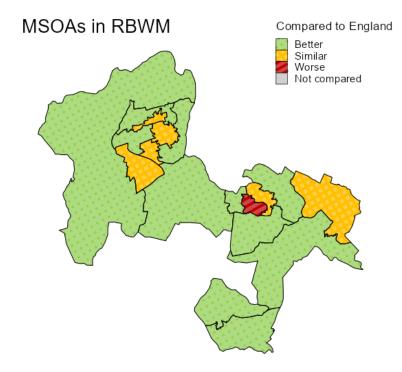
Last 1 periods to 2016 - 20



MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Life expectancy at birth, upper age band 90 and over (male).

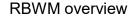
Value type: Life expectancy (years).

Original geography: MSOA.

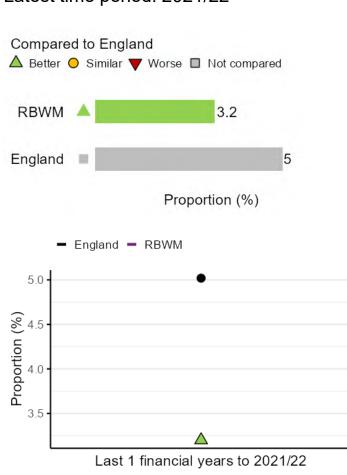
Benchmarking method: Chiang CL (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93283.

Unemployment (16-64 yrs)



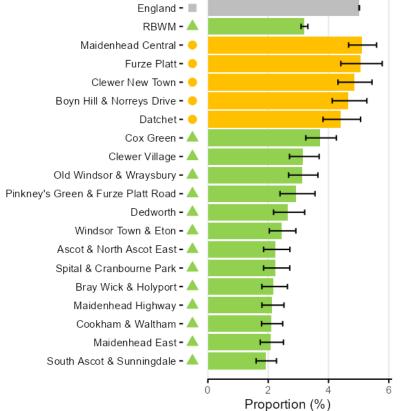
Latest time period: 2021/22

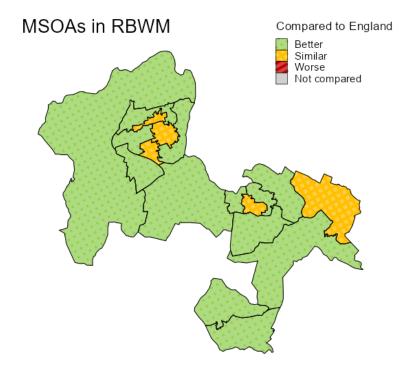


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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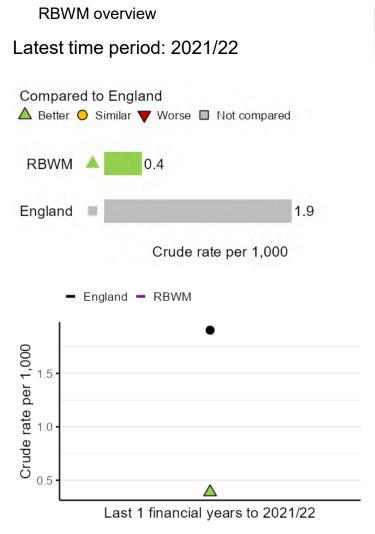
Indicator: Unemployment (Percentage of the working age population claiming out of work benefit) (persons), (16-64 yrs).

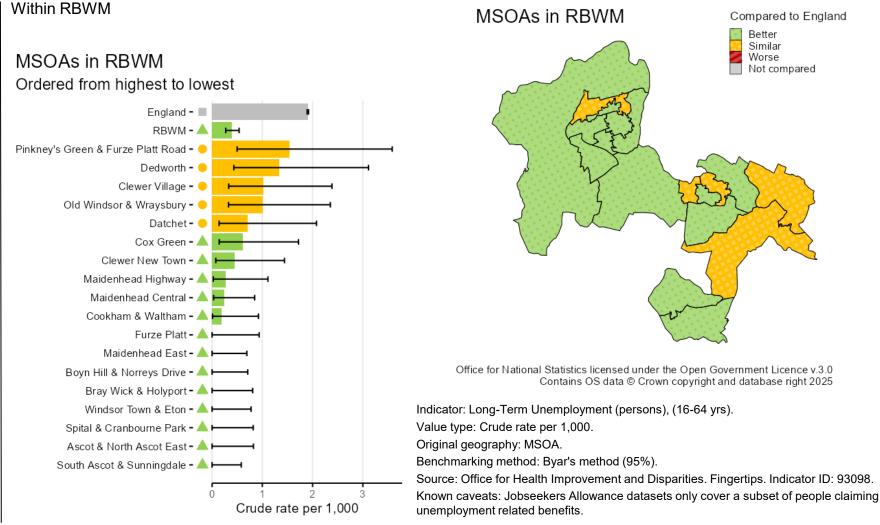
Value type: Proportion (%).
Original geography: MSOA.

Benchmarking method: Wilson Score CI method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93097.

Long-Term Unemployment (16-64 yrs)





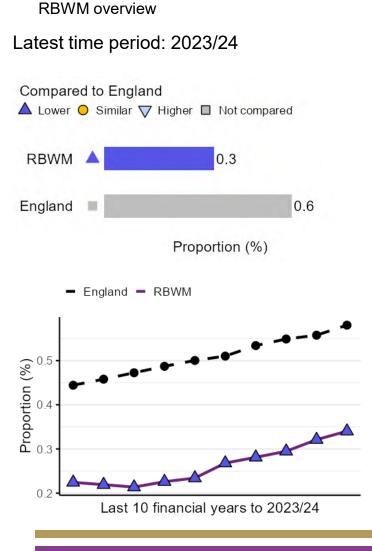
Compared to England

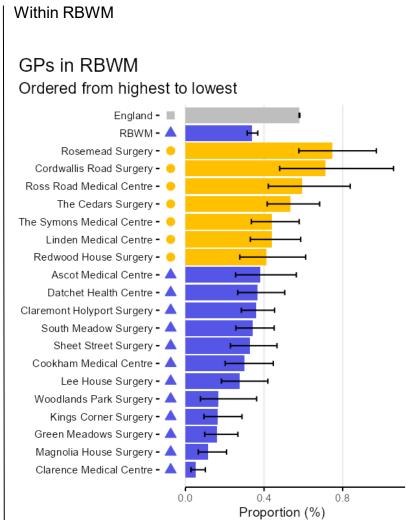
Not compared

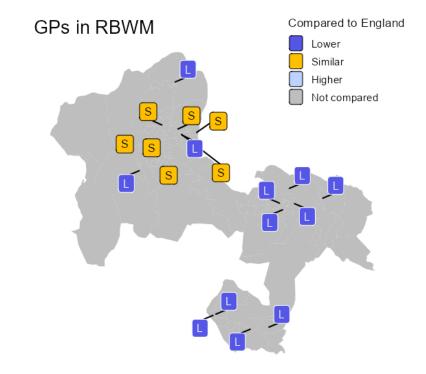
Better

Similar Worse

Learning disability: QOF prevalence







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Indicator: Learning disability: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

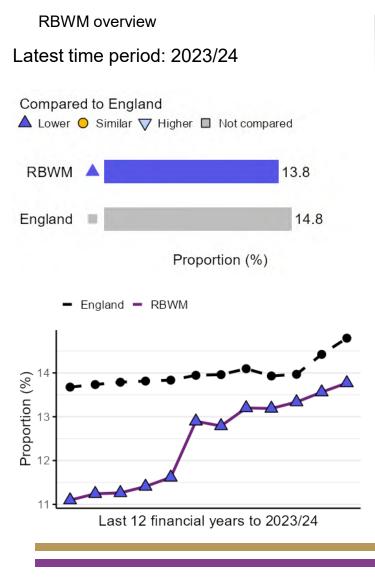
Benchmarking method: Wilson Score method (95%).

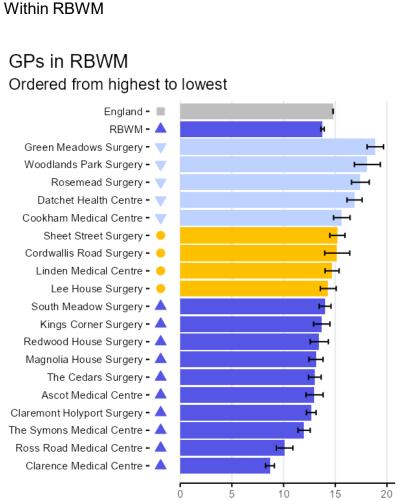
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 200.

Known caveats: Local authority values are calculated by assigning all patients of the GP

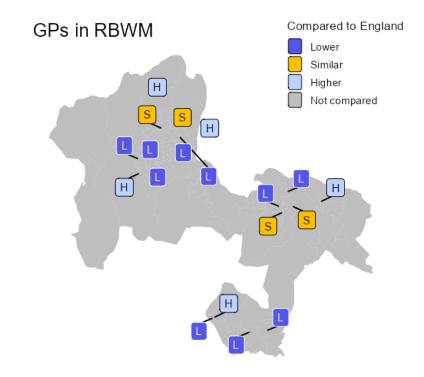
practice to the local authority where the GP practice is located.

Hypertension: QOF prevalence





Proportion (%)



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Indicator: Hypertension: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 219. Known caveats: Local authority values are calculated by assigning all patients of the GP

practice to the local authority where the GP practice is located.

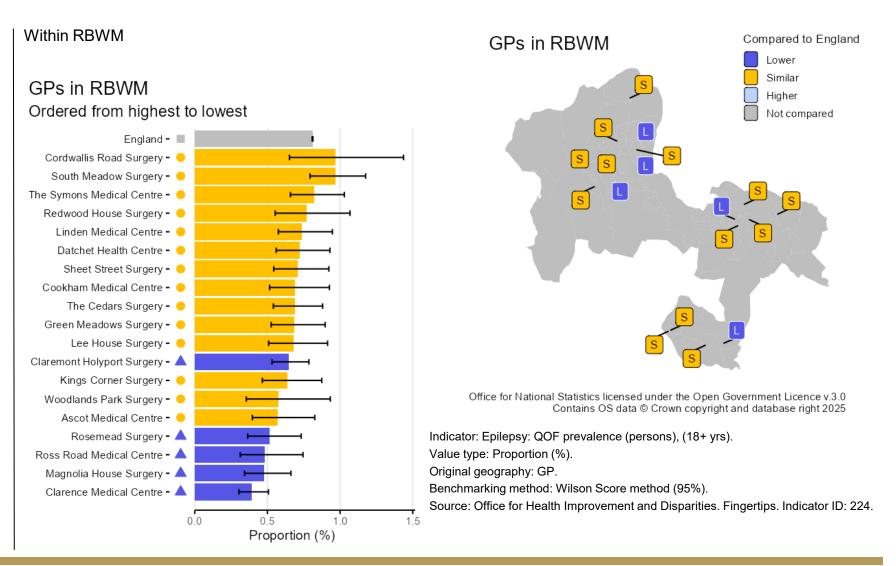
Epilepsy: QOF prevalence (18+ yrs)

RBWM overview

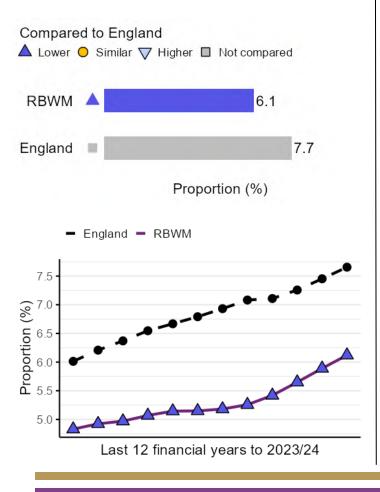
Latest time period: 2023/24

Data unavailable for counties & UAs

Data unavailable for counties & UAs

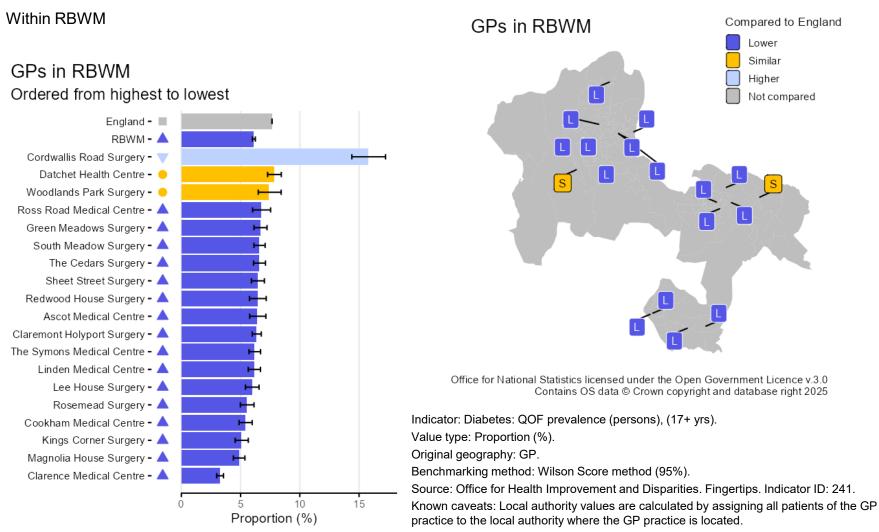


Diabetes: QOF prevalence (17+ yrs)



RBWM overview

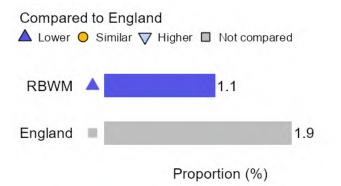
Latest time period: 2023/24

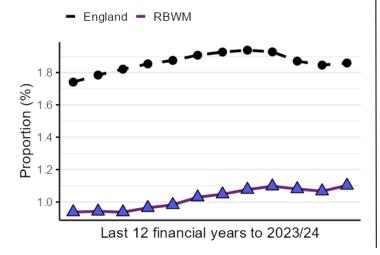


COPD: QOF prevalence

RBWM overview

Latest time period: 2023/24

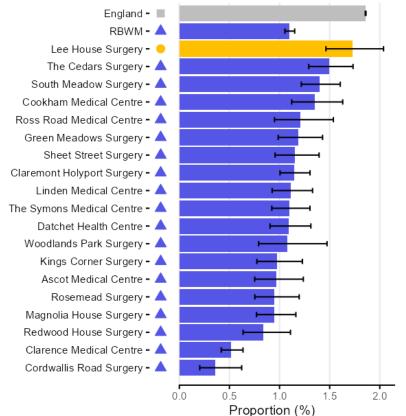


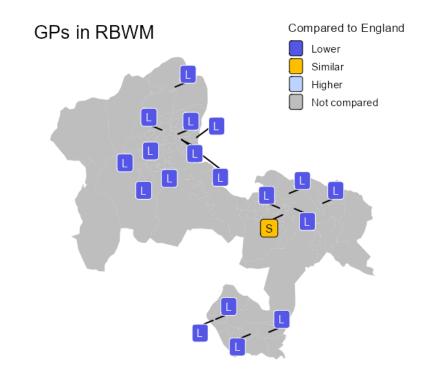


Within RBWM

GPs in RBWM

Ordered from highest to lowest





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Indicator: Chronic Obstructive Pulmonary Disease: QOF prevalence (persons), (all ages).

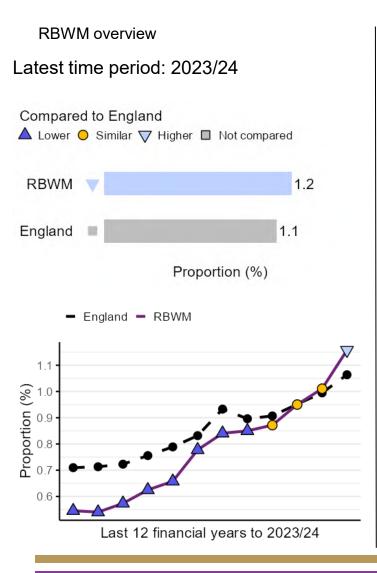
Value type: Proportion (%). Original geography: GP.

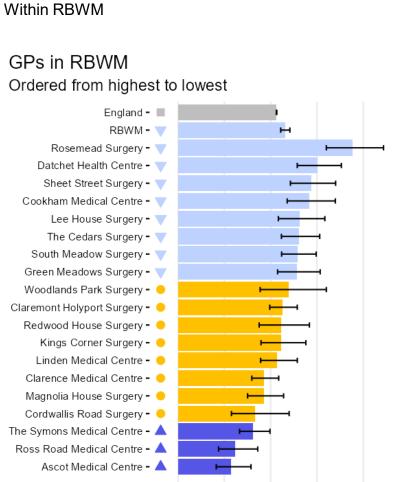
Benchmarking method: Wilson Score method (95%).

 $Source: Of fice for Health \ Improvement \ and \ Disparities. \ Fingertips. \ Indicator \ ID: 253.$

Known caveats: Local authority values are calculated by assigning all patients of the GP practice to the local authority where the GP practice is located.

Heart Failure: QOF prevalence



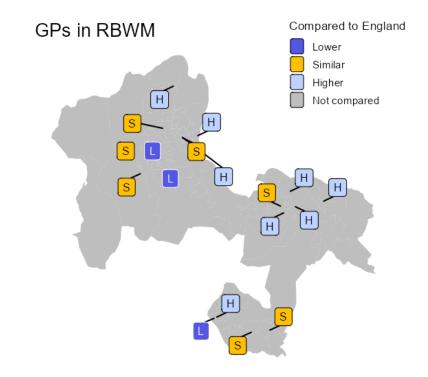


0.0

1.0

Proportion (%)

1.5



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Indicator: Heart Failure: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

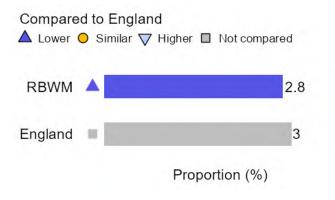
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 262. Known caveats: Local authority values are calculated by assigning all patients of the GP

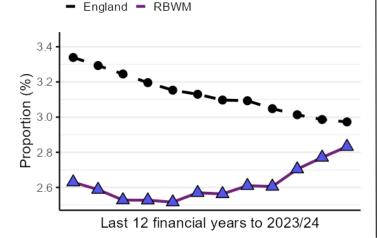
practice to the local authority where the GP practice is located.

CHD: QOF prevalence

RBWM overview

Latest time period: 2023/24

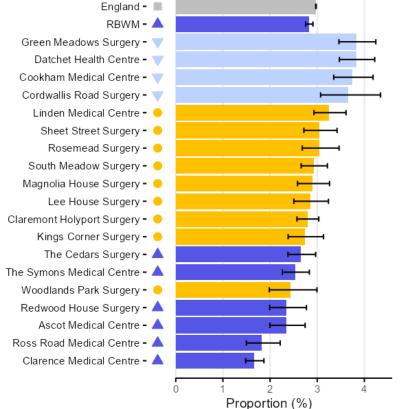


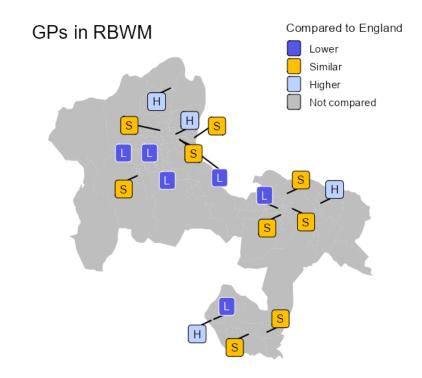


Within RBWM

GPs in RBWM

Ordered from highest to lowest





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Indicator: Coronary heart disease: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 273.

Known caveats: Local authority values are calculated by assigning all patients of the GP

practice to the local authority where the GP practice is located.

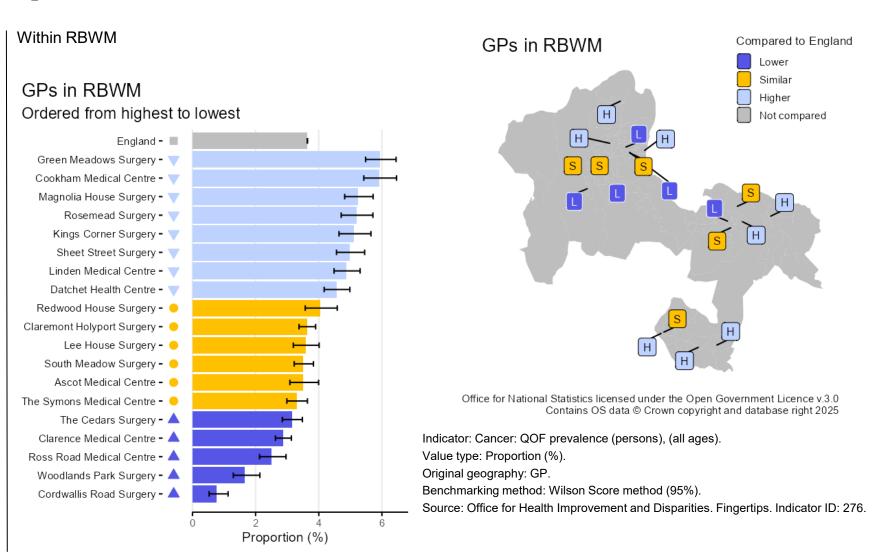
Cancer: QOF prevalence

RBWM overview

Latest time period: 2023/24

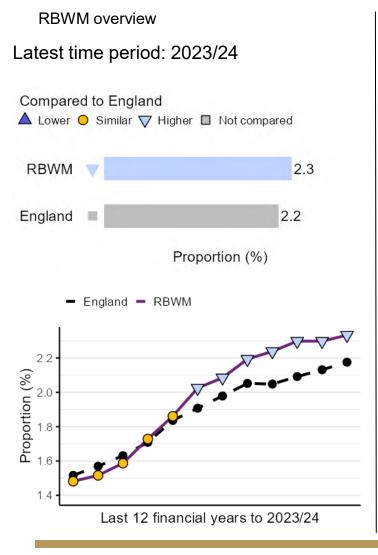
Data unavailable for counties & UAs

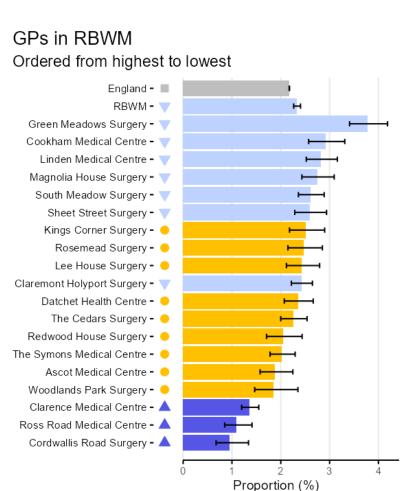
Data unavailable for counties & UAs

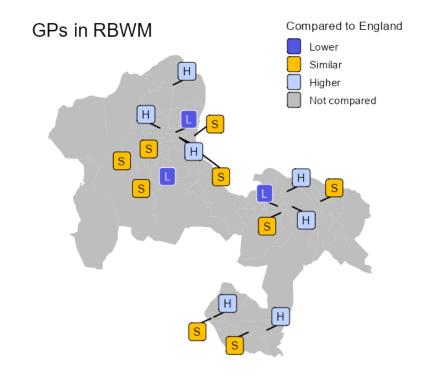


Atrial fibrillation: QOF prevalence

Within RBWM







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Indicator: Atrial fibrillation: QOF prevalence (persons), (all ages).

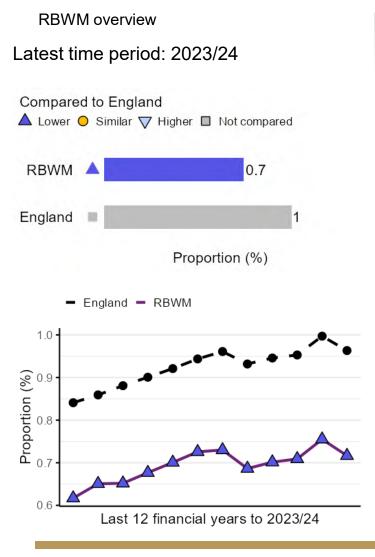
Value type: Proportion (%). Original geography: GP.

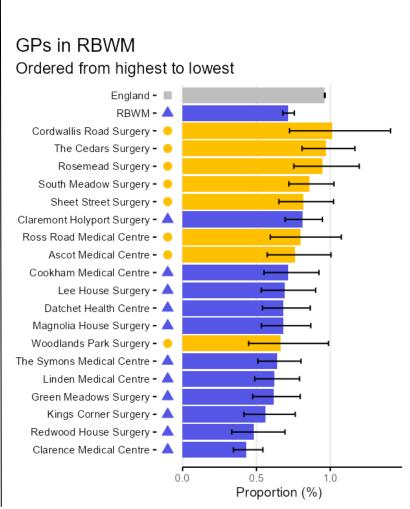
Benchmarking method: Wilson Score method (95%).

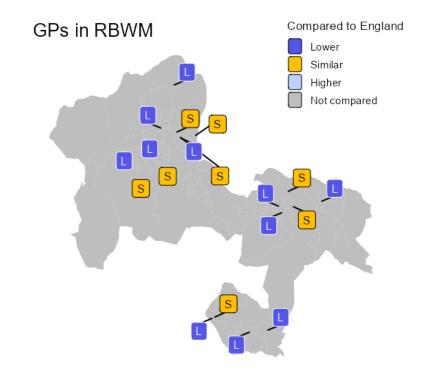
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 280. Known caveats: Local authority values are calculated by assigning all patients of the GP

Mental Health: QOF prevalence

Within RBWM







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Indicator: Mental Health: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

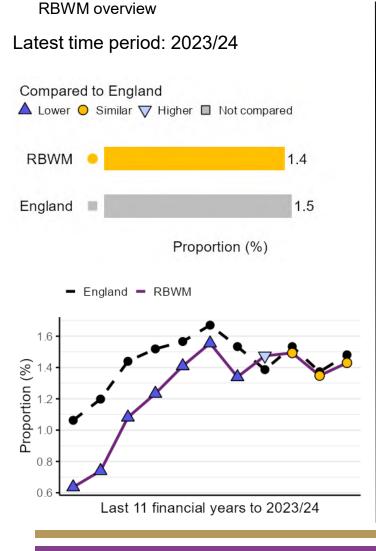
Benchmarking method: Wilson Score method (95%).

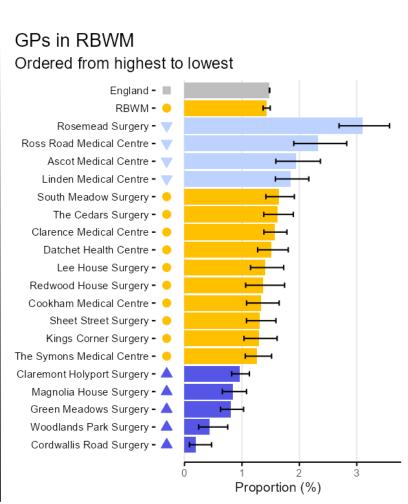
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 90581.

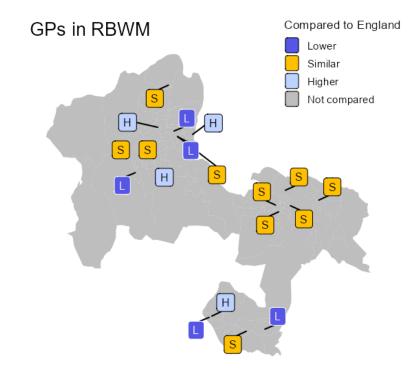
Known caveats: Local authority values are calculated by assigning all patients of the GP

Depression: QOF incidence (18+ yrs)

Within RBWM







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Indicator: Depression: QOF incidence - new diagnosis (persons), (18+ yrs).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 90646. Known caveats: Local authority values are calculated by assigning all patients of the GP

Smoking: QOF prevalence (15+ yrs)

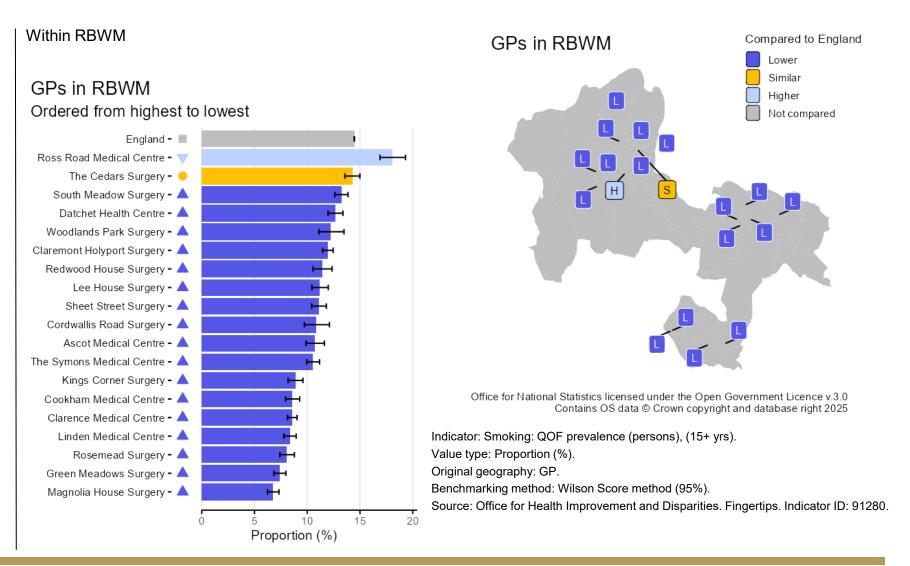
RBWM overview

41

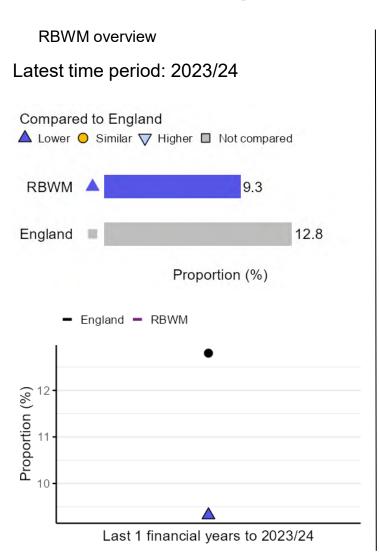
Latest time period: 2023/24

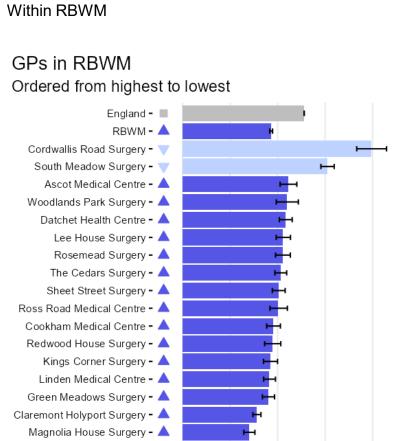
Data unavailable for counties & UAs

Data unavailable for counties & UAs



Obesity: QOF prevalence



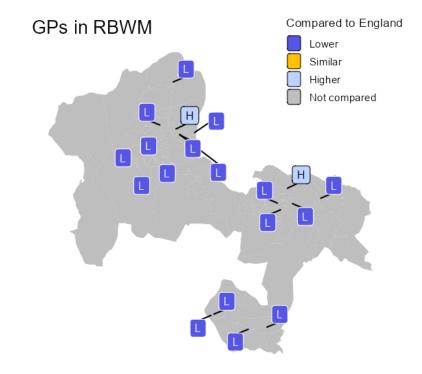


10

Proportion (%)

The Symons Medical Centre - 🛕

Clarence Medical Centre -



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Indicator: Obesity: QOF prevalence (persons), (18+ yrs).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 94136. Known caveats: Local authority values are calculated by assigning all patients of the GP

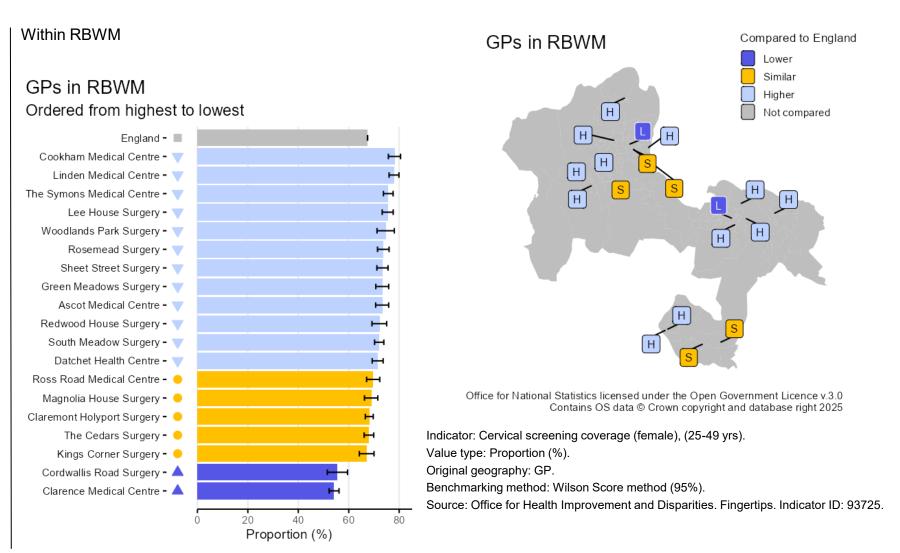
Cervical screening coverage (female) (25-49 yrs)

RBWM overview

Latest time period: 2023/24

Data unavailable for counties & UAs

Data unavailable for counties & UAs



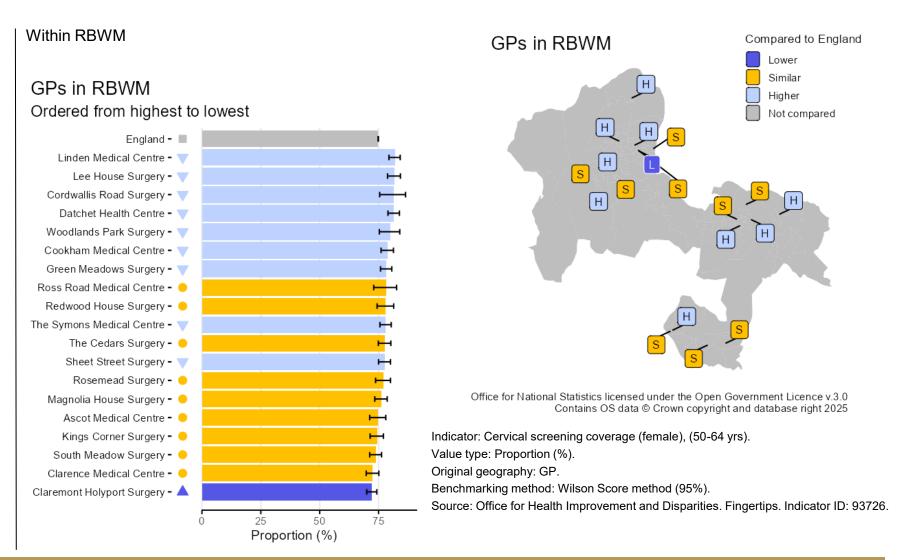
Cervical screening coverage (female) (50-64 yrs)

RBWM overview

Latest time period: 2023/24

Data unavailable for counties & UAs

Data unavailable for counties & UAs



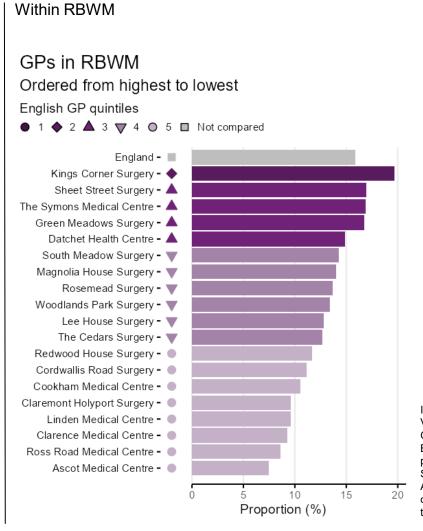
% with caring responsibility (16+ yrs)

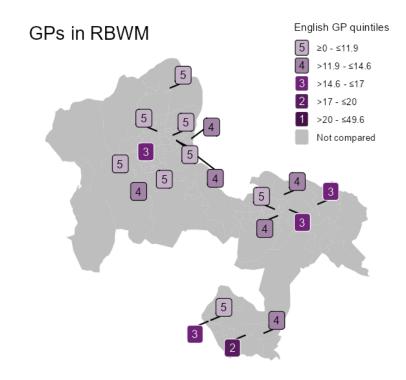
RBWM overview

Latest time period: 2024

Data unavailable for counties & UAs

Data unavailable for counties & UAs





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Indicator: % with caring responsibility (persons), (16+ yrs).

Value type: Proportion (%).

Original geography: GP.

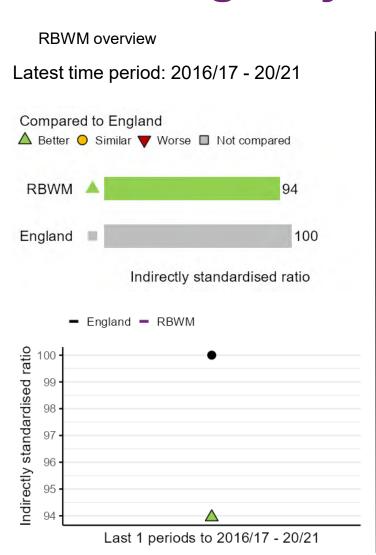
Benchmarking method: Quintiles created using sample quantiles, where quintile 1 is the worst performing.

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 352.

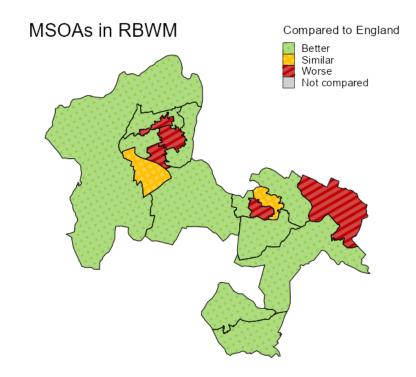
Additional notes: All results are based on weighted data. Weighting changes the data to account for differences between all patients at a practice and the sub-set of patients who actually take part in the survey.

Emergency admissions for all causes

Within RBWM







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Indicator: Emergency hospital admissions for all causes, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

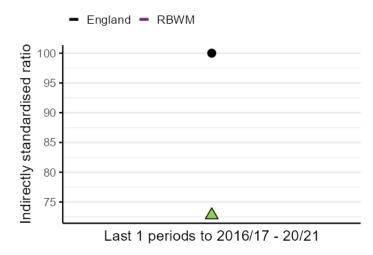
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93227.

Emergency admissions for CHD

RBWM overview

Latest time period: 2016/17 - 20/21

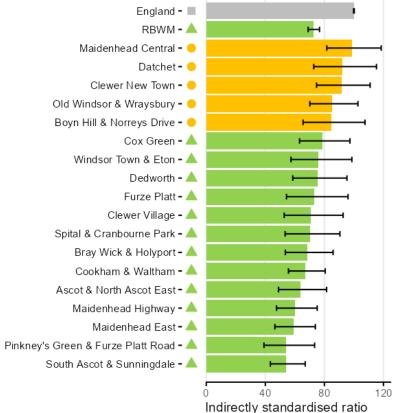


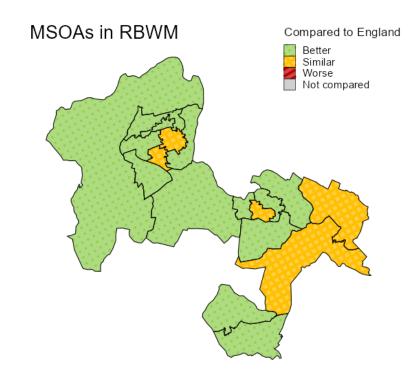


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: EEmergency hospital admissions for coronary heart disease, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

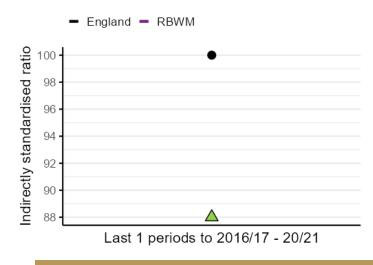
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93229.

Emergency admissions for stroke

RBWM overview

Latest time period: 2016/17 - 20/21

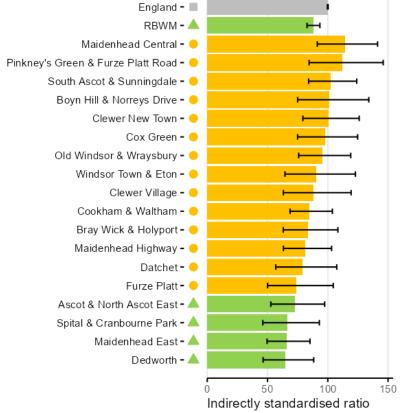


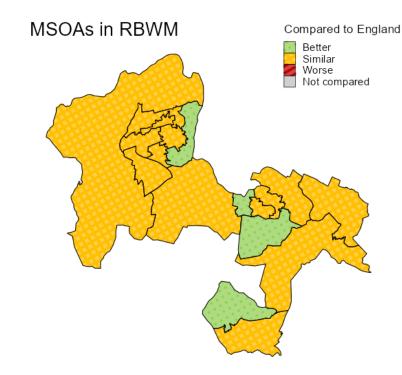




MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Emergency hospital admissions for stroke, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

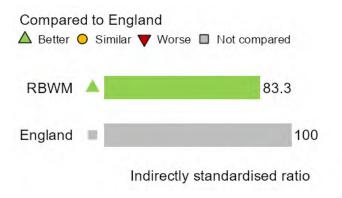
Benchmarking method: Byar's method method (95%).

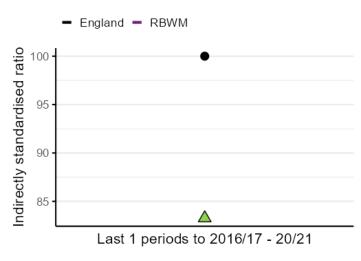
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93231.

Emergency admissions for heart attack

RBWM overview

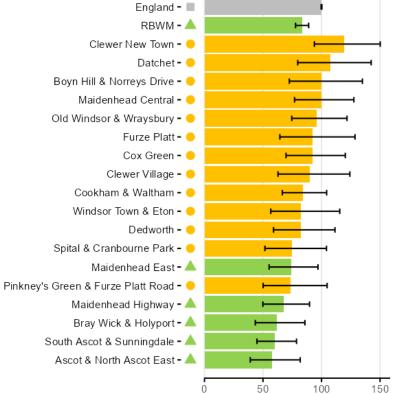
Latest time period: 2016/17 - 20/21



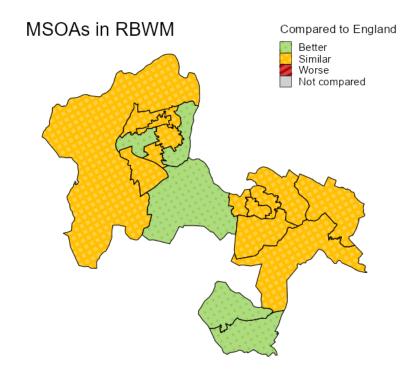


Within RBWM

MSOAs in RBWM Ordered from highest to lowest



Indirectly standardised ratio



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Indicator: Emergency hospital admissions for myocardial infarction (heart attack), persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

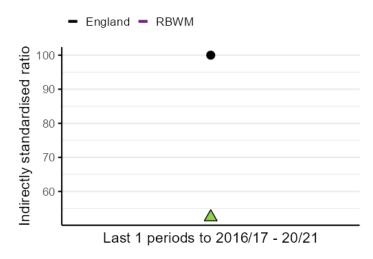
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93232.

Emergency admissions for COPD

RBWM overview

Latest time period: 2016/17 - 20/21

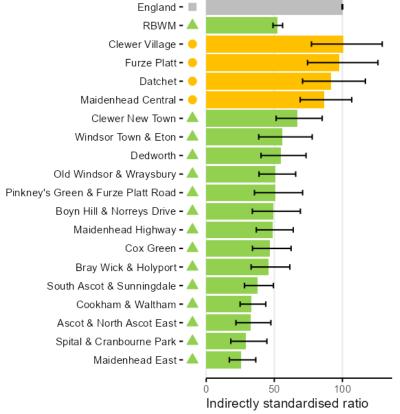


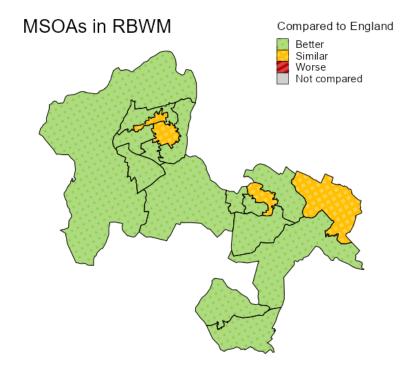


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Emergency hospital admissions for chronic obstructive pulmonary disease (COPD), persons, all ages.

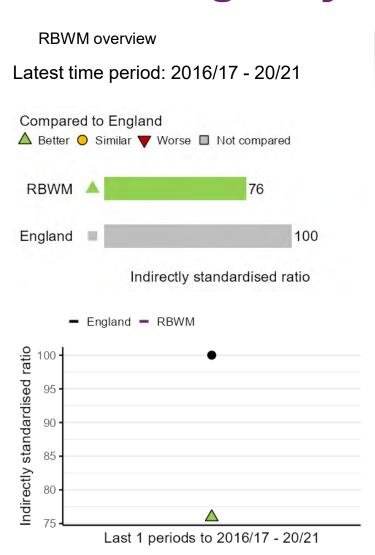
Value type: Indirectly standardised ratio.

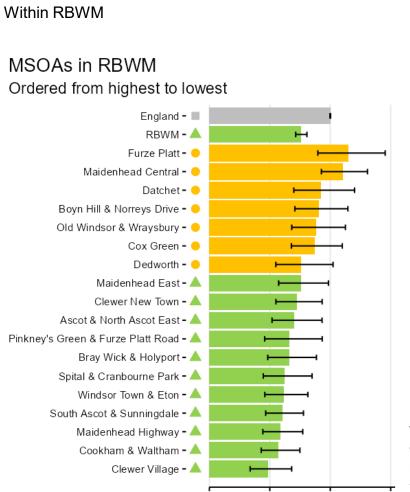
Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

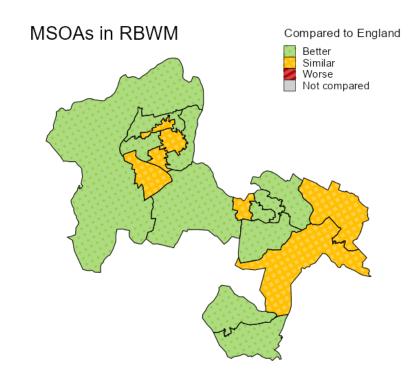
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93233.

Emergency admissions for self harm





Indirectly standardised ratio



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Indicator: Emergency hospital admissions for intentional self harm, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

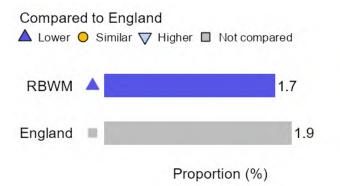
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93239.

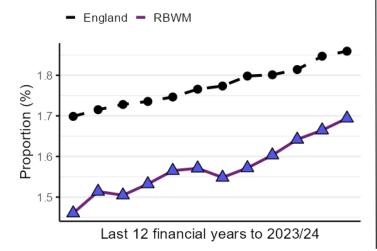
Healthy ageing

Stroke: QOF prevalence

RBWM overview

Latest time period: 2023/24

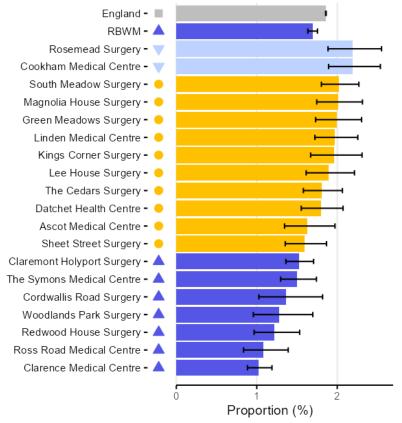


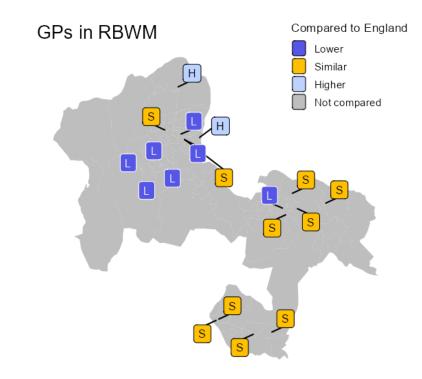


Within RBWM

GPs in RBWM

Ordered from highest to lowest





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Indicator: Stroke: QOF prevalence (persons), (all ages).

Value type: Proportion (%). Original geography: GP.

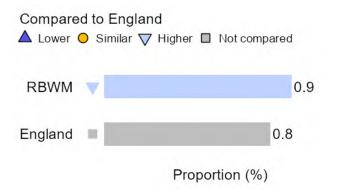
Benchmarking method: Byar's method method (95%).

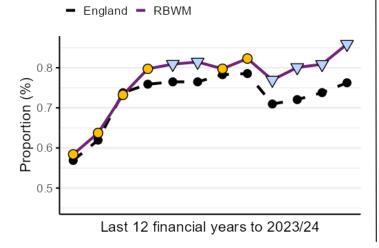
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 212. Known caveats: Local authority values are calculated by assigning all patients of the GP

Dementia: QOF prevalence

RBWM overview

Latest time period: 2023/24

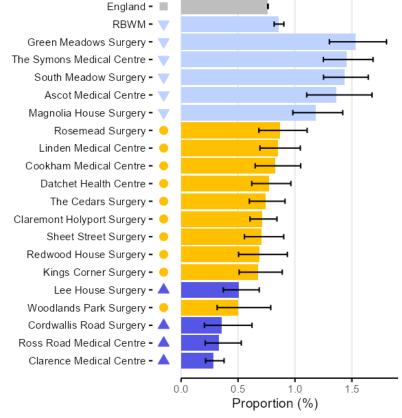


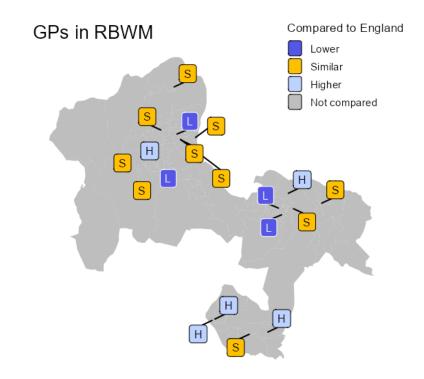




GPs in RBWM

Ordered from highest to lowest





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Indicator: Dementia: QOF prevalence (persons), (all ages).

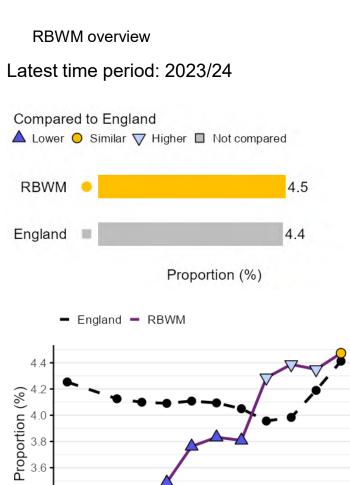
Value type: Proportion (%). Original geography: GP.

Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 247. Known caveats: Local authority values are calculated by assigning all patients of the GP

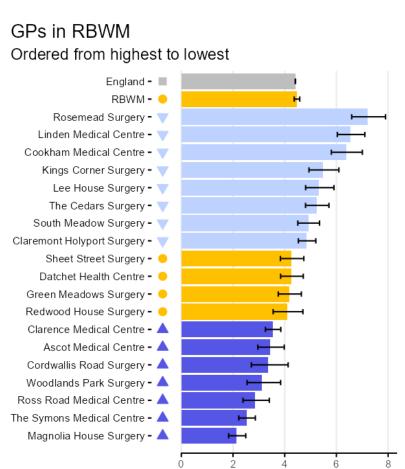
CKD: QOF prevalence (18+ yrs)

Within RBWM

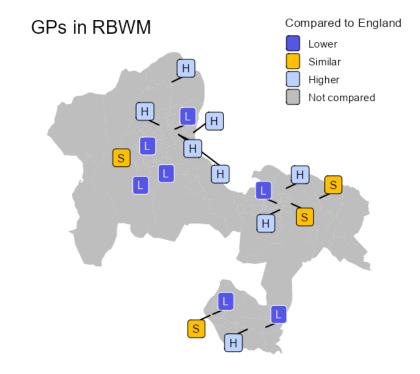


Last 11 financial years to 2023/24

3.4



Proportion (%)



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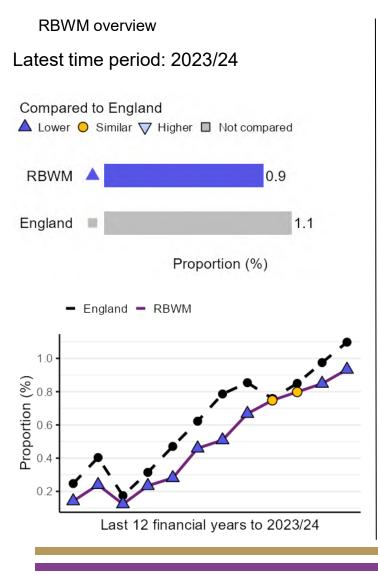
Indicator: Chronic Kidney Disease: QOF prevalence (persons), (18+ yrs).

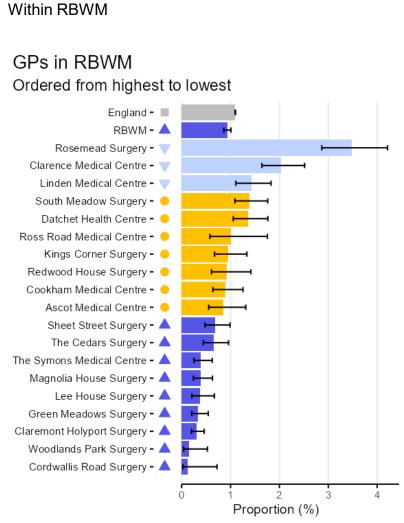
Value type: Proportion (%). Original geography: GP.

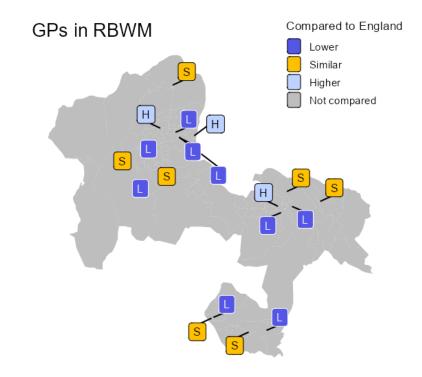
Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 258. Known caveats: Local authority values are calculated by assigning all patients of the GP

Osteoporosis: QOF prevalence (50+ yrs)







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Indicator: Osteoporosis: QOF prevalence (persons), (50+ yrs).

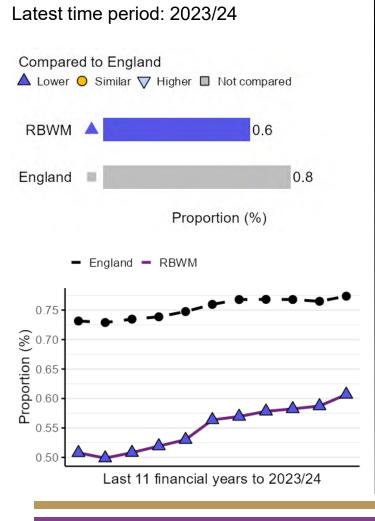
Value type: Proportion (%). Original geography: GP.

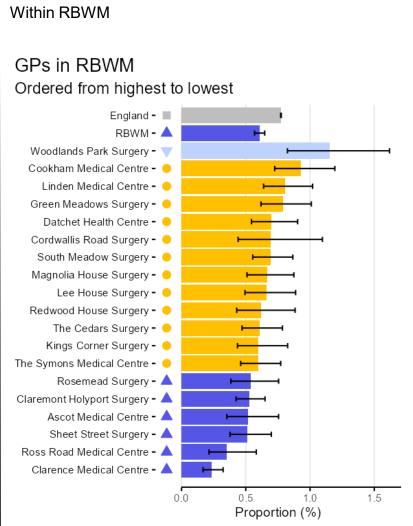
Benchmarking method: Wilson Score method (95%).

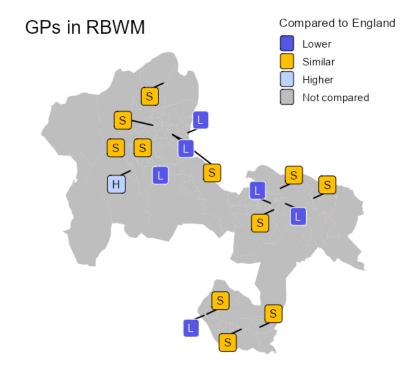
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 90443. Known caveats: Local authority values are calculated by assigning all patients of the GP

RBWM overview

Rheumatoid arthritis: QOF prevalence (16+ yrs)







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Indicator: Rheumatoid arthritis: QOF prevalence (persons), (16+ yrs).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 91269. Known caveats: Local authority values are calculated by assigning all patients of the GP

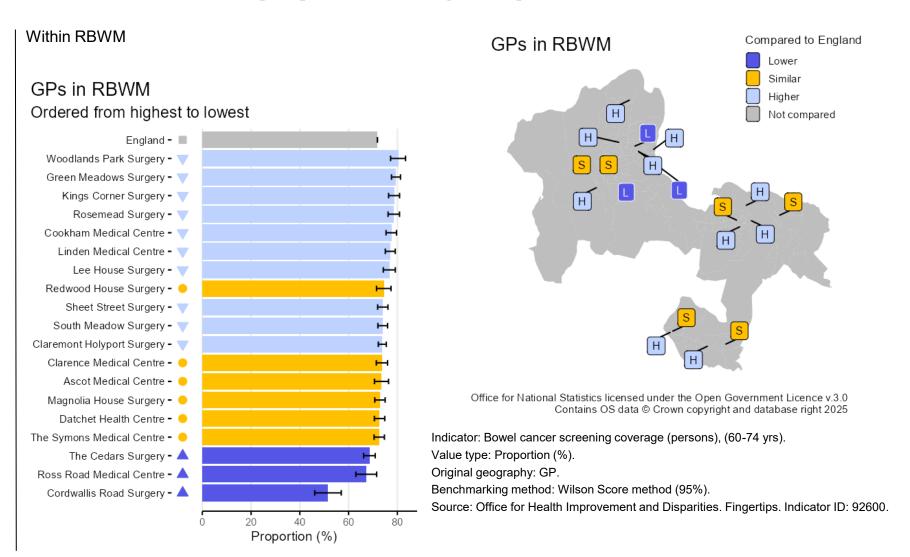
Bowel cancer screening (60-74 yrs)

RBWM overview

Latest time period: 2023/24

Data unavailable for counties & UAs

Data unavailable for counties & UAs



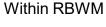
Breast screening (53-70 yrs)

RBWM overview

Latest time period: 2023/24

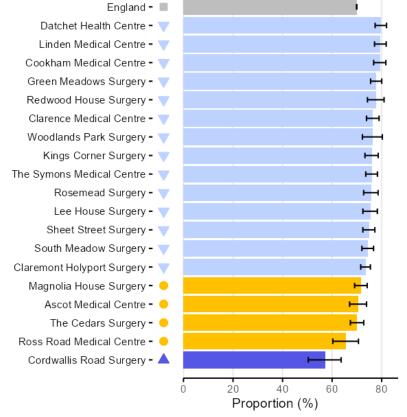
Data unavailable for counties & UAs

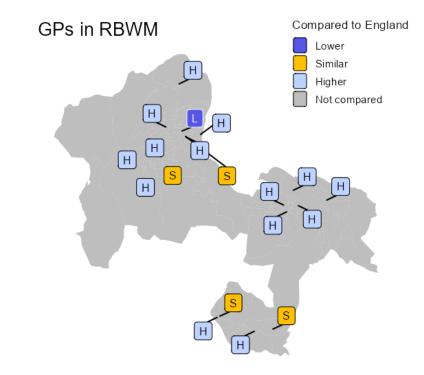
Data unavailable for counties & UAs



GPs in RBWM

Ordered from highest to lowest





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Indicator: Breast screening coverage (persons), (53-70 yrs).

Value type: Proportion (%). Original geography: GP.

Benchmarking method: Wilson Score method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 94063.

RBWM

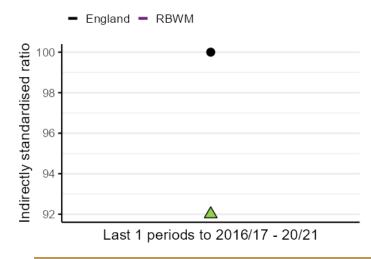
England

Emergency admissions for hip fracture (65 yrs+)



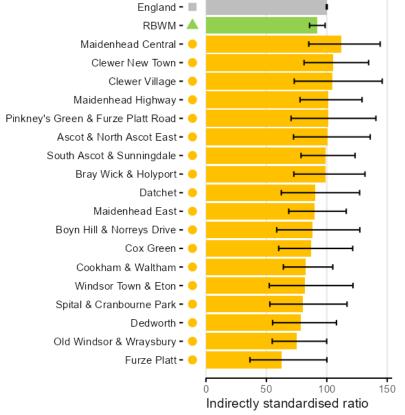
Indirectly standardised ratio

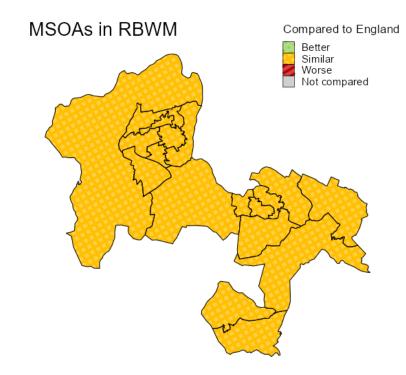
92





MSOAs in RBWM Ordered from highest to lowest





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Indicator: Emergency hospital admissions for hip fracture, persons, 65 yrs+.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

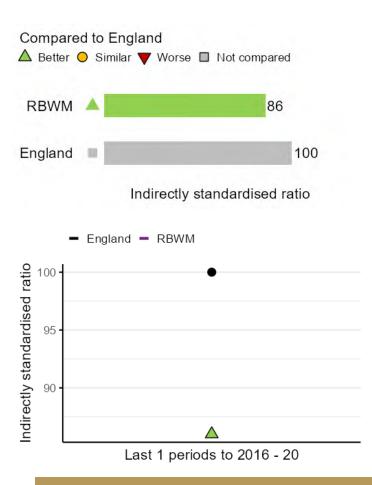
Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93241.

Deaths from all causes

RBWM overview

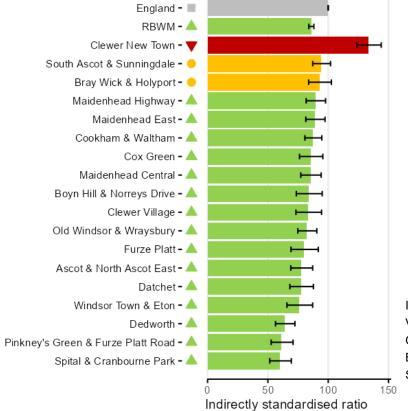
Latest time period: 2016 - 20

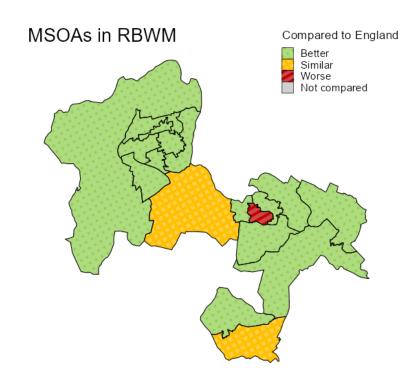




MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Deaths from all causes, persons, all ages.

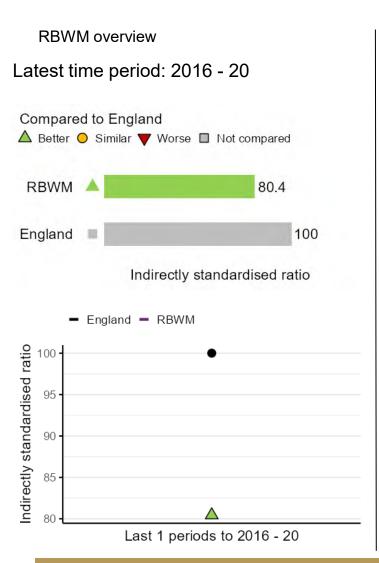
Value type: Indirectly standardised ratio.

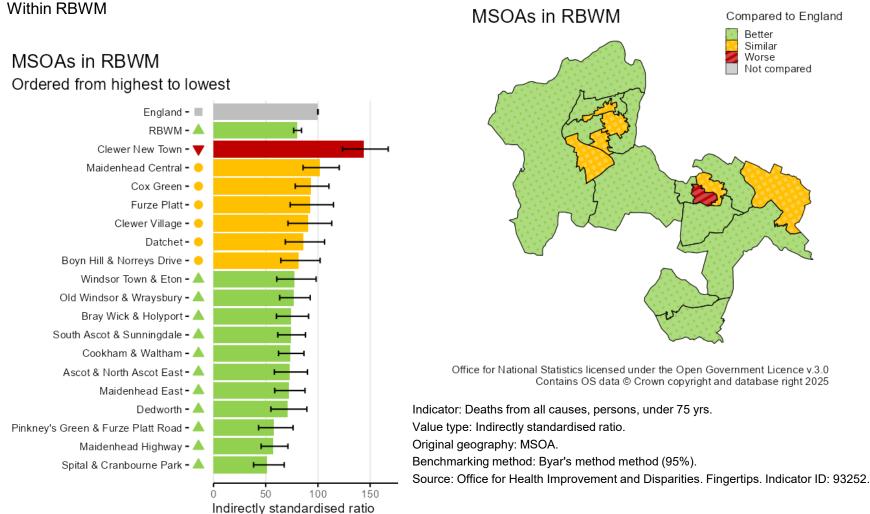
Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

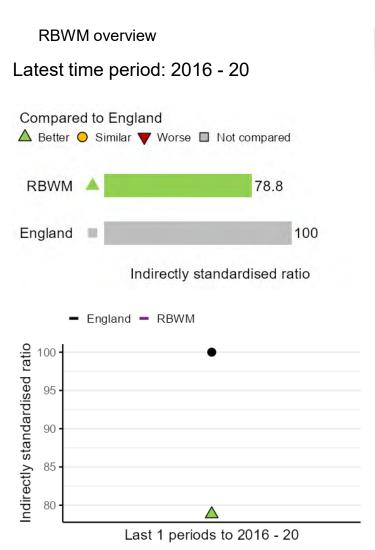
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93250.

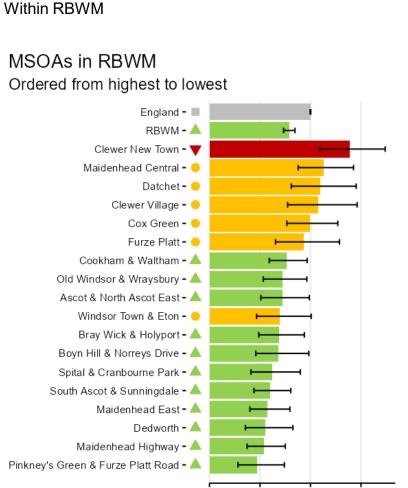
Deaths from all causes (under 75 yrs)



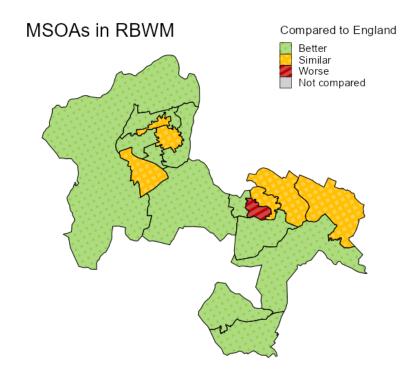


Deaths from preventable causes (under 75 yrs)





Indirectly standardised ratio



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Indicator: Deaths from causes considered preventable, persons, under 75 yrs.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

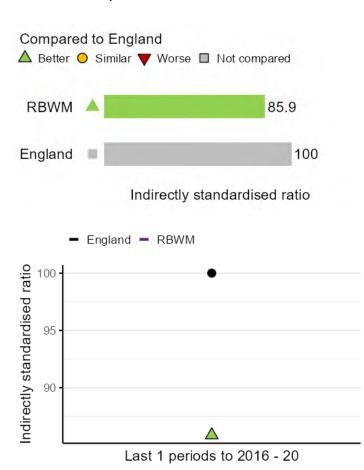
Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93480.

Deaths from all cancer

RBWM overview

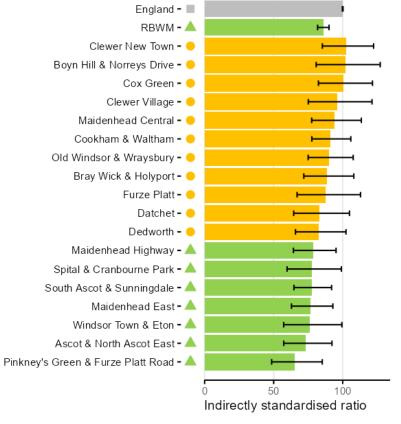
Latest time period: 2016 - 20

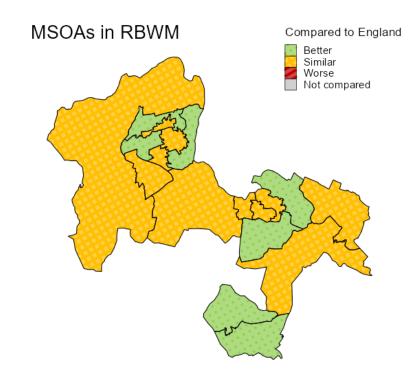


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Deaths from all cancer, persons, all ages.

Value type: Indirectly standardised ratio.

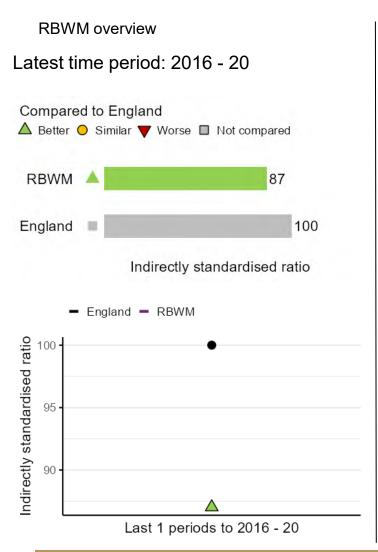
Original geography: MSOA.

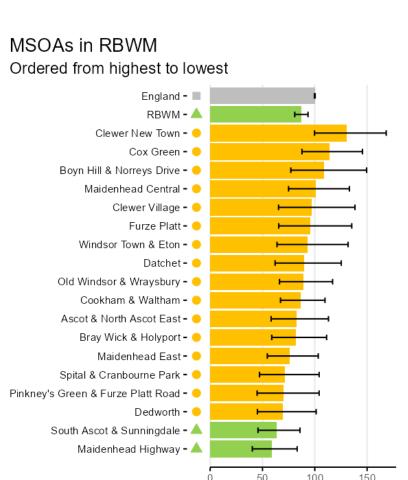
Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93253.

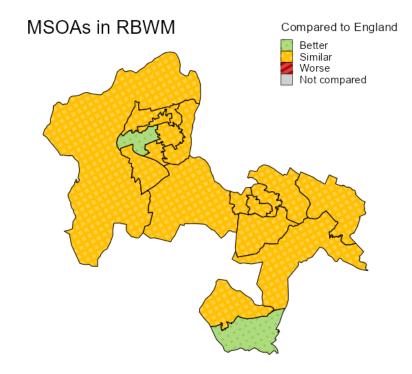
Deaths from all cancer (under 75 yrs)

Within RBWM





Indirectly standardised ratio



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Indicator: Deaths from all cancer, persons, under 75 yrs.

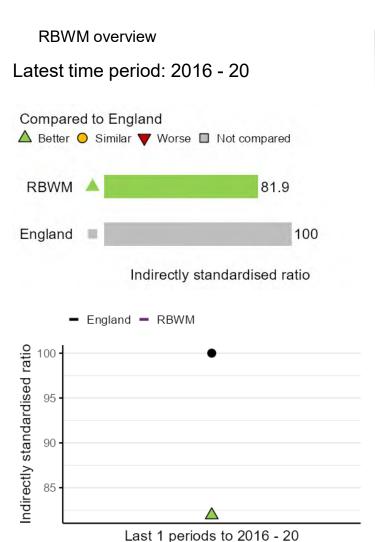
Value type: Indirectly standardised ratio.

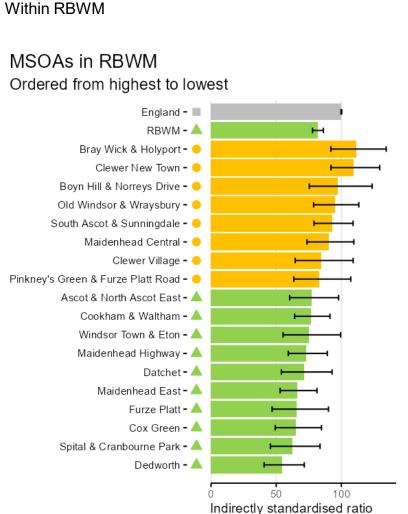
Original geography: MSOA.

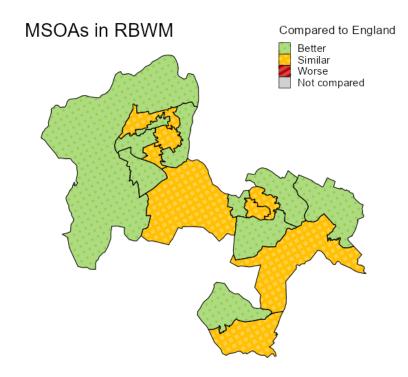
Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93254.

Deaths from circulatory disease







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Indicator: Deaths from circulatory disease, persons, all ages.

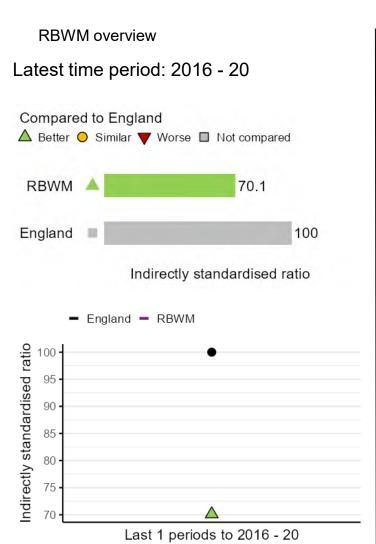
Value type: Indirectly standardised ratio.

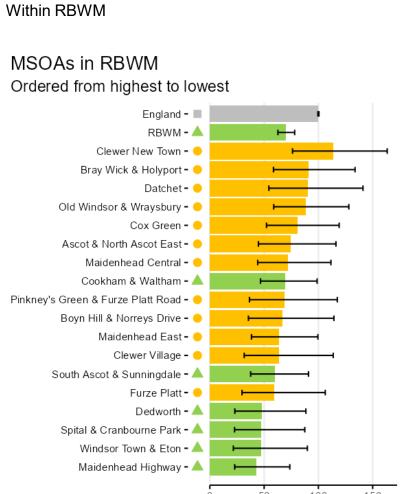
Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

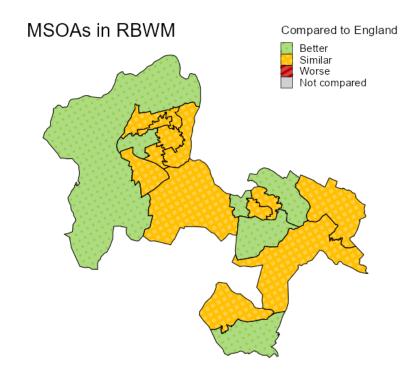
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93255.

Deaths from circulatory disease (under 75 yrs)





Indirectly standardised ratio



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Indicator: Deaths from circulatory disease, persons, under 75 yrs.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

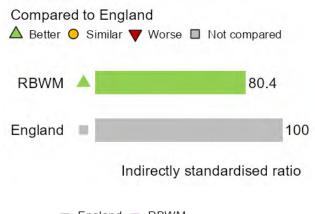
Benchmarking method: Byar's method method (95%).

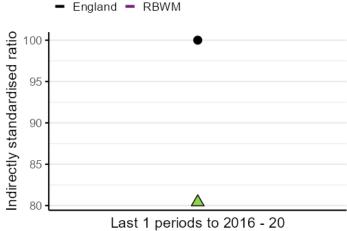
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93256.

Deaths from CHD

RBWM overview

Latest time period: 2016 - 20

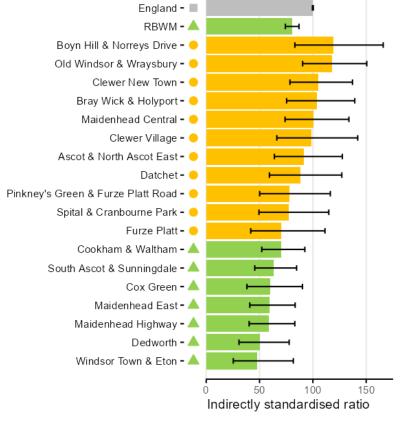


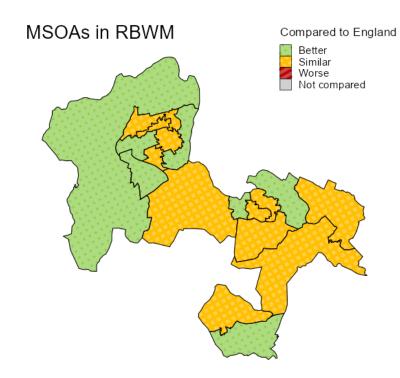


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Deaths from coronary heart disease, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

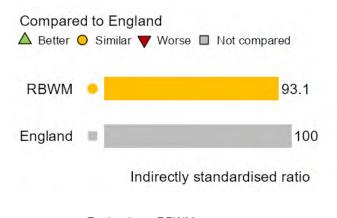
Benchmarking method: Byar's method method (95%).

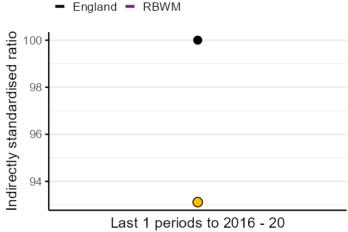
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93257.

Deaths from stroke

RBWM overview

Latest time period: 2016 - 20

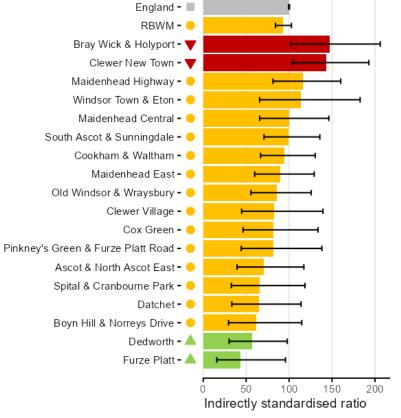


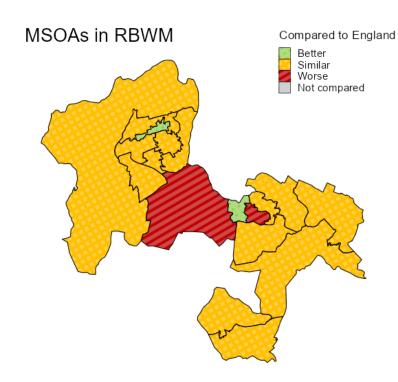


Within RBWM

MSOAs in RBWM

Ordered from highest to lowest





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Indicator: Deaths from stroke, persons, all ages.

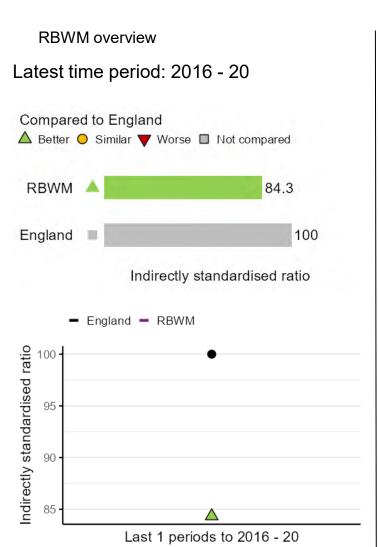
Value type: Indirectly standardised ratio.

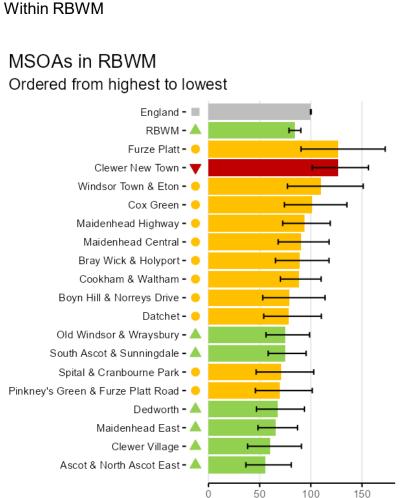
Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

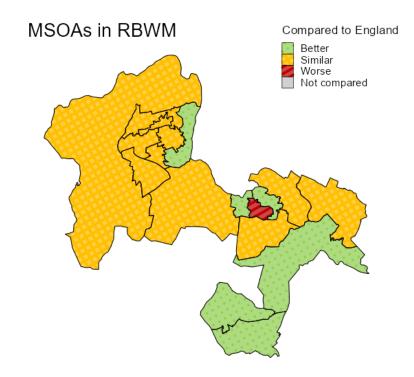
Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93259.

Deaths from respiratory diseases





Indirectly standardised ratio



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Indicator: Deaths from respiratory diseases, persons, all ages.

Value type: Indirectly standardised ratio.

Original geography: MSOA.

Benchmarking method: Byar's method method (95%).

Source: Office for Health Improvement and Disparities. Fingertips. Indicator ID: 93260.

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Healthy place

Version 1.0

Healthy place indicator signpost

English Housing Survey. Ministry of Housing, Communities and Local Government.

Version 1.0

Energy efficiency of housing. Nomis.

Housing Census maps. ONS.

Work Census maps. ONS.

Fuel poverty

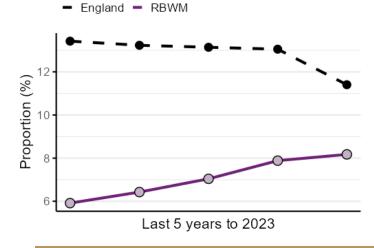
RBWM overview

Latest time period: 2023

English local authority quintiles



Proportion (%)

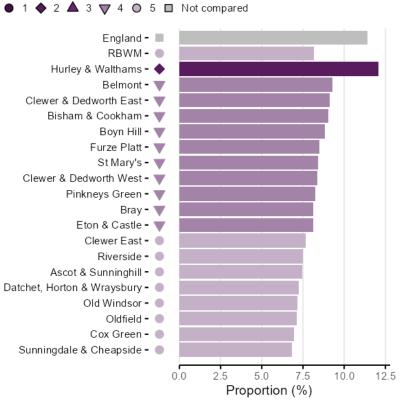


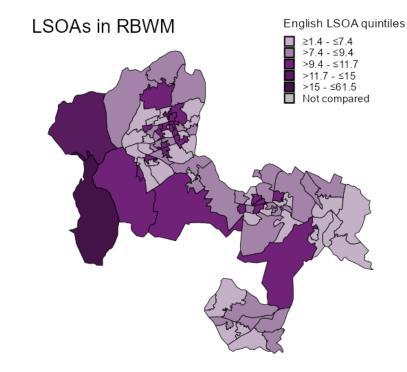
Within RBWM

Wards in RBWM

Ordered from highest to lowest

English Ward quintiles





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Indicator: Fuel poverty measured as low income low energy efficiency (LILEE).

Value type: Proportion (%) - Households.

Original geography: LSOA.

Benchmarking method: Quintiles created using sample quantiles, where quintile 1 is the

worst performing.

10.0 12.5 Source: Department for Energy Security and Net Zero. Sub-regional fuel poverty data.

Access to garden space

Within RBWM

RBWM overview

Latest time period: 2020

English local authority quintiles

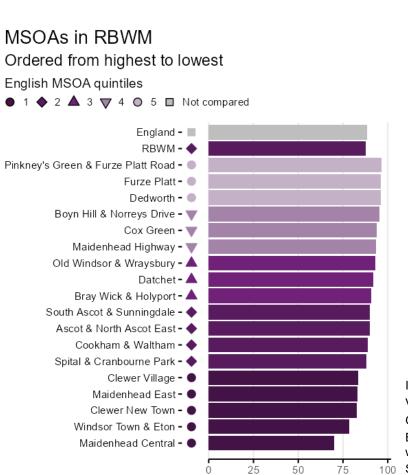
● 1 ◆ 2 ▲ 3 ▼ 4 ● 5 ■ Not compared

RBWM ◆ 87.8

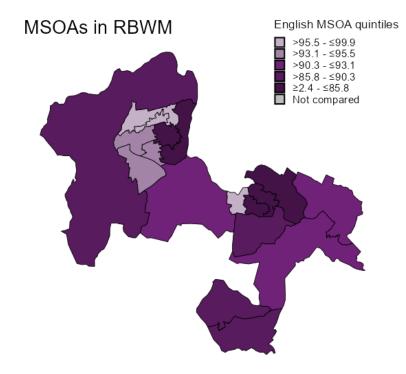
England ■ 88.4

Proportion (%)

No trend data available.



Proportion (%)



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Indicator: Access to garden space.

Value type: Proportion (%) - Addresses.

Original geography: MSOA.

Benchmarking method: Quintiles created using sample quantiles, where quintile 1 is the

worst performing.

Source: Office for National Statistics. Access to gardens and public green space in Great

Access to public green space

RBWM overview

Latest time period: 2020

English local authority quintiles

● 1 ◆ 2 ▲ 3 ▼ 4 ○ 5 □ Not compared

RBWM ▼

53.7

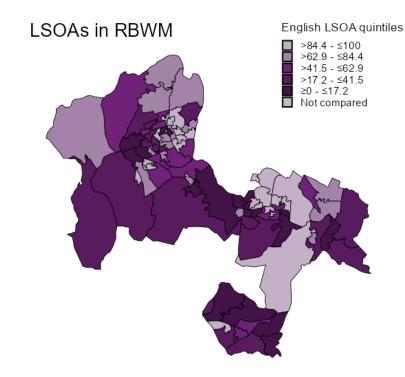
England ■

50.8

Proportion (%)

No trend data available.





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Indicator: Access to public green space (within a five-minute walk).

Value type: Proportion (%) - Addresses.

Original geography: Postcode.

Benchmarking method: Quintiles created using sample quantiles, where quintile 1 is the worst performing.

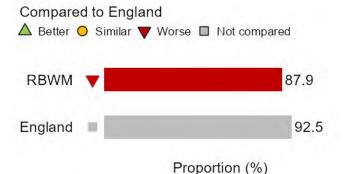
Source: Office for National Statistics. Access to gardens and public green space in Great Britain. Known caveats: Public green space access indicator is restricted to built up areas postcodes only.

Access to secondary school

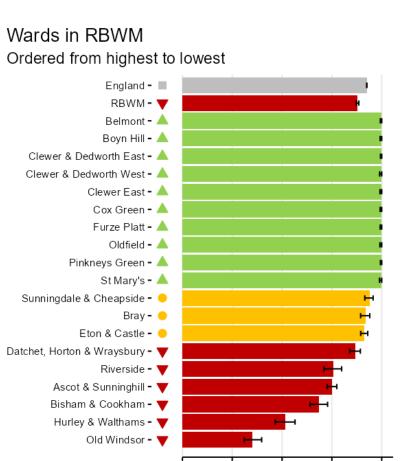
Within RBWM

RBWM overview

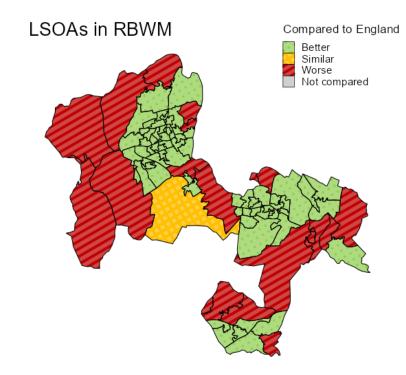
Latest time period: 2019



No trend data available.



Proportion (%)



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Indicator: Access to secondary school within 30 minutes by public transport or walking.

Value type: Proportion (%).
Original geography: Postcode.

Benchmarking method: Wilson Score method (95%).

Source: Department for Transport. Journey time statistics.

Additional notes: Service users able to access a secondary school within 30-minutes by

public transport or walking.

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Further information and resources

Indicator measures

The indicators in this profile use a variety of measures to present the data effectively, these include:

• Proportion or percentage (%): a way to show a part of a whole amount. For example, if 25 out of 100 people have a certain condition, that would be shown as 25%.

Version 1.0

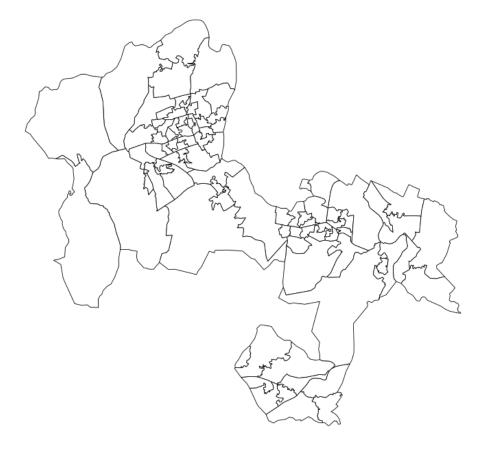
- Crude rate: a measure that shows the total number of events (like deaths, births, or disease cases) in a population over a specific time period. It's usually expressed per thousands of people to allow for easy comparison.
- Indirectly standardised ratio (ISR): a way to compare the rate of an event in a population to what would be expected if that population had the same age-specific rates as a standard population. It adjusts for differences in age structure, making comparisons between populations more meaningful. ISRs are often expressed as a ratio or percentage, where a value of 100 (or 1.0) means the observed rate is equal to the expected rate.

Benchmarking methods

- RAG comparison (Red, Amber, Green) indicates how well an area is performing compared to a
 benchmark, typically England. The comparison is created by comparing the area's value to a reference
 range, which is usually based on confidence intervals. Green shows a value that is better, red to a value
 that is worse and amber indicates that there is no difference when compared to the benchmark.
- BOB comparison (Blue, Orange, Blue) is used when a value judgement is not appropriate. Light blue indicators a higher value and dark blue indicates a lower value compared to a benchmark, typically England. Similar to the RAG method, a comparison is created by comparing the area's value to a reference range.
- Quintiles are created using a quantiling method and divide data into five equal groups. This creates
 relative rankings and distribution. Quintiles are often used highlight inequalities between groups or areas.
 Quintiles are used in this profile when the underlying data is not based on the population, for example
 households, or survey based data where we do not have access to the weightings
- An indicator is shaded grey where it is not possible to create a compariosn. This could be due to an area having no value or values where counts are below 10.

LSOA boundary map

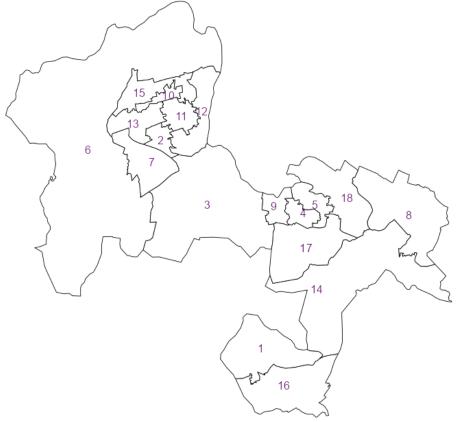
LSOAs in RBWM



Office for National Statistics licensed under the Open Government Licence v.3.0 Contains OS data © Crown copyright and database right 2025 There are 89 LSOAs in RBWM.

MSOA boundary map

MSOAs in RBWM



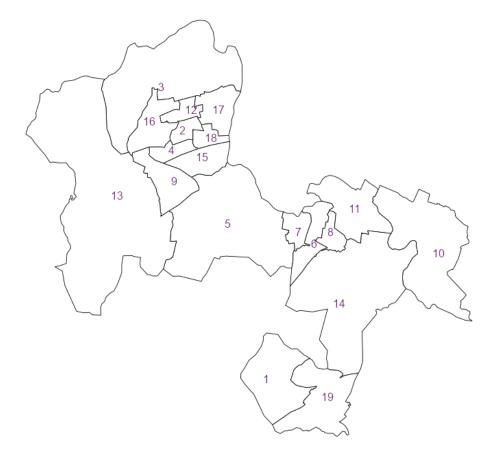
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- 1: Ascot & North Ascot East
- 2: Boyn Hill & Norreys Drive
- 3: Bray Wick & Holyport
- 4: Clewer New Town
- 5: Clewer Village
- 6: Cookham & Waltham
- 7: Cox Green
- 8: Datchet
- 9: Dedworth
- 10: Furze Platt
- 11: Maidenhead Central
- 12: Maidenhead East
- 13: Maidenhead Highway
- 14: Old Windsor & Wraysbury
- 15: Pinkney's Green & Furze Platt Road
- 16: South Ascot & Sunningdale
- 17: Spital & Cranbourne Park
- 18: Windsor Town & Eton

Ward boundary map

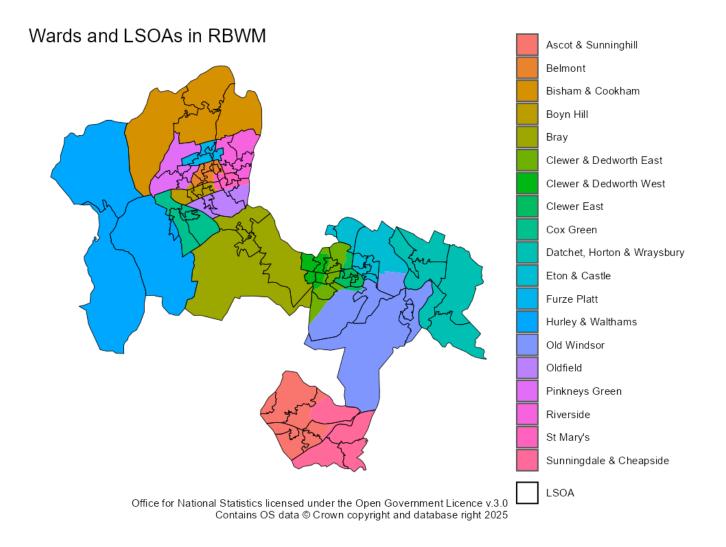
Wards in RBWM



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- 1: Ascot & Sunninghill
- 2: Belmont
- 3: Bisham & Cookham
- 4: Boyn Hill
- 5: Bray
- 6: Clewer & Dedworth East
- 7: Clewer & Dedworth West
- 8: Clewer East
- 9: Cox Green
- 10: Datchet, Horton & Wraysbury
- 11: Eton & Castle
- 12: Furze Platt
- 13: Hurley & Walthams
- 14: Old Windsor
- 15: Oldfield
- 16: Pinkneys Green
- 17: Riverside
- 18: St Mary's
- 19: Sunningdale & Cheapside

LSOA to Ward best fit boundaries



- There are 89 LSOAs in RBWM.
- There are 19 Wards in RBWM.
- LSOAs do not align exactly with electoral wards in RBWM.
- Best fit lookups are used when assigning LSOAs to wards.

Accessibility

- All plots include alternative text (alt text) that describes the visual content and includes relevant values where possible.
- To view the alt text: right-click on the image and select 'View Alt Text' to open the Alt Text pane.
- Shapes are used alongside colour on plots to show comparisons, ensuring accessibility for users who may have difficulty seeing different colours. For example, a RAG rating (Red, Amber, Green) is commonly used to show how an area's value compares to a benchmark, such as the England average:
 - Green indicates better performance
 - Amber indicates similar performance
 - Red indicates worse performance
- To support colour accessibility, shapes are also used to represent these ratings:
 - Triangle = better performance
 - Circle = similar performance
 - Triangle pointing downards = worse performance
 - Square = no comparison available

References

- The methodology for each indicator is based on published data and existing measures.
- Sources of methodology include Office for Health Improvement and Disparities, Office for National Statistics, and NHS Digital.
- Some indicator values may be different from published figures. This may be due to slight differences in numbers extracted or data being grouped into different time periods.
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- © Stadia Maps © OpenMapTiles © OpenStreetmap © Stamen Design

Resources

RBWM JSNA: RBWM's JSNA provides information used to assess the current and future health and wellbeing needs of the local population. It helps inform decisions about health priorities, service planning, and resource allocation to improve outcomes and reduce inequalities.