

Ageing Well

Positive trends

- Life expectancy is at its highest ever level in North Lincolnshire, with around 32,500 people aged 65 years or older. This is 23% more than in 2003, and compares with a national growth of 17%.
- North Lincolnshire already has an older than average population, with more people aged 55+ and 65+ than nationally.
- By 2026 there will be 6,770 people aged 85+, including 2930 people aged 90+. More than half of this projected growth will occur in our market towns and villages.
- This older population is becoming ethnically more diverse. In 2011, 3% of 65+ were from BME groups. This compares with 6% nationally. The largest BME community in this age group are White Europeans, who represent 2% of all 65+s in North Lincolnshire, 0.5% from our Asian and Black African communities.
- Of those asked, the majority of older people say they would prefer to remain in either paid or unpaid work post retirement age.
- And an increasing number of North Lincolnshire residents, 8%, do remain in some form of paid employment, post 65s mostly being involved in part time work. This is below the national average of 10.5%, although twice what it was in 2001, when 3.5% of this age group continued in paid work. Men are twice as likely as women to work beyond 65 years, (10.8% compared with 5.5%).
- The majority of this age group continue to enjoy good health, with the percentage of years spent in good health rising year on year.
- Whilst 60% of 85+s say they are living with conditions and disabilities which 'limit their daily activities a lot', more than 4 out of 5 of this age group continue to live independently at home, some with formal and informal support, and wish to remain there for as long as possible.
- The number of older people admitted into permanent care home placements funded by the local authority has been on a downward trajectory for a number of years and is lower than in similar local authorities, and is currently below 200 a year.
- Falls are a key risk factor associated with admission to residential and nursing home care. The number of older people admitted to hospital as a result of a fall injury, is below the national average in North Lincolnshire and is reducing year on year. However people aged 80+ remain at highest risk of admission following fragility fractures, with the highest rates observed in the most deprived areas of North Lincolnshire.
- North Lincolnshire service users are far more likely to express satisfaction with care and support services than nationally.
- Cancer survival rates amongst people aged 75+ are increasing year on year.

Key points

- North Lincolnshire has an older than average and increasingly ageing population and a higher proportion of people living will have at least 1 age related condition.
- More people aged 65+ continue to work in some form of paid or unpaid (often part time) employment than 10 years ago. This will rise between now and 2018, as the state pension age increases for both men and women.
- Yet many of our poorest and most vulnerable older residents may be unable to work up to and beyond state retirement age as a result of poor physical and mental health.
- Healthy life expectancy is between 8-10 years below the SPA in our most deprived communities.
- Targeting communities and GP practices for effective public health interventions in areas where lifestyle risk factors are high and disease detection rates are low, will need to form part of a long term strategy to improve the health and wellbeing of our older age group, and reduce inequalities in health.
- 85% of people aged 85+ live independently and wish to do so for as long as possible.
- Age friendly environments, including access to suitable housing, transport and public spaces will be required to underpin the prevention agenda.



Healthy Life Expectancy (HLE)

HLE is significantly below state pensionable age in North Lincolnshire for both men and women and below the national average.

	N Lincs		England
Males	62.5 yrs	Males	63.3 yrs
Females	62.3 yrs	Females	63.9 yrs

Challenging trends

- North Lincolnshire currently has a higher prevalence of life style and age related diseases and impairments, in the adult population, and thus a higher proportion of people approaching the last 5 years of their working lives managing a long term condition.
- This is reflected in lower than average healthy life expectancy and could have an impact on our capacity to deliver economic growth in the region, especially as the retirement age rises.
- These trends will also have implications for the health and wellbeing of unpaid carers, as an increasing number of older working age people will need to combine work with unpaid caring responsibilities.
- Women have a higher chance than men of providing care by the time they are 75 years old. Women are also more likely than men to give up work in order to care for sick or disabled relatives.
- In 2014/15 over 2980 older people in North Lincolnshire (9% of the 65+ population) had their care support needs funded by the local authority, an

increase on the previous year. 44% of this number were in receipt of long term home care, and 26% in receipt of long term residential care. Yet we know that short term care is effective in keeping people out of hospital and long term care.

- This figure also includes more than 1 in 4 (30%) of 85+ in North Lincolnshire, of which 400 fund their own care home placements. It is not known how many more of this age group fully fund their own home care, or what the service outcomes are for these 'self funders'.
- North Lincolnshire already has higher than average unscheduled hospital admission rates for people with acute and chronic long term conditions, including people with chronic lung disease, pneumonia and urinary tract infections. The highest rates are observed amongst the poorest residents of North Lincolnshire.
- 90% of older people who experienced an unplanned admission, were admitted from their own home, with the majority discharged back into their own home after a period of treatment.
- The number of people developing late onset dementia has risen with natural population aging, and, whilst this growth has occurred at a faster rate than nationally, the rise has not been as large as predicted.
- Currently there are an estimated 2,260 residents of North Lincolnshire living with dementia, of which more than 60% have been diagnosed and are being managed in primary care. This is in line with the local target set for 2015, but just below the national standard of 70%.

- Detection rates of other chronic conditions such as chronic lung disease, hypertension and atrial fibrillation in primary care are improving in North Lincolnshire, but remain below the national average. The focus on preventing or delaying the onset of these conditions in older age and intervening earlier where effective services are available will need to be maintained and strengthened.
- As models of care move 'closer to home' it is not clear how community dental services will meet the needs of this population. Currently, the provision of dentists per 100,000 population is much lower in North Lincolnshire (34) than the national average (44).
- Tackling loneliness and isolation in older age is a local and national priority, with an estimated 10% of 65+s in the UK self reporting as lonely all or most of the time.

People with **2+ chronic long term conditions** are more likely to have **emergency admissions** and **potentially preventable admissions**



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- Musculo-skeletal (MSK) conditions and falls place a significant economic burden on health and social care services and are the most common self-reported causes of long term chronic ill health and disability in the population and can contribute to poor mental health.
- In 2012/13 NHS spend on MSK in North Lincolnshire was £14.46 million, representing 5.1% of the total NHS budget locally and was nearly equivalent to the spend for cancer.

1 in 3 older people have
MSK which interferes
with daily life

Future Needs

Local consultations with residents suggest that future services should focus on providing:

- Care as close to home as possible, including more integrated health and social care support.
- More education and support about how to manage long term conditions and stay healthy. More outpatient appointments delivered closer to home.
- More opportunities to stay active and mobile. This is a specific issue for people living in care homes and people living in rural areas where transport may be less accessible
- More opportunities to stay connected socially whether through paid work, social or voluntary activity. This includes mentoring befriending and peer support opportunities, especially for those living in care homes.
- A wider range of supported housing provision in older age, including, step up and step down provision to help people to maintain their independence for as long as possible.
- More flexibility from employers to enable people in their middle years and older to combine caring responsibilities with paid work.
- For those in receipt of home based care, more consistency in the provision of care, and more flexibility in the times at which this is made available.
- More forward planning for service users and their carers in the event of an out of hours emergency.
- The number of older people in receipt of publicly funded care has increased in the last 12 months and it is likely that demands will increase further, as the number of people aged 90+ rises. The effects of this population change will vary from place to place in North Lincolnshire, and will need to be responded to appropriately.
- A key national and local priority for local authority and NHS services is to promote better self-care amongst the over 50s. This priority will take on greater urgency in North Lincolnshire, as some key lifestyle risk factors for poor health in the middle years and older age are above the national average, whilst detection rates of some conditions within primary care are below the national average.
- Population coverage of some key ageing well public health screening and immunisation programmes, including health checks are below the national average in North Lincolnshire and in some cases are falling, with variations in uptake between social groups. These trends will need to be considered as public health programmes are re-commissioned, or reviewed, or as national screening programmes are rolled out further.
- Specific attention needs to be paid by all services to older people with additional needs and co-morbidities including those with learning disabilities, chronic alcohol and substance misuse issues, mental health needs and complex physical conditions.
- Little is known about the oral health of our ageing populations. Above average prevalence of lifestyle related risk factors in the adult working age population, combined with a population that is living longer, suggests that demands on community dental services will increase.
- Degenerative conditions associated with old age may increase the need for a sustainable community transport system. This will enable them to keep their independence, be involved in the community with the potential to promote health and resilience and reduce social isolation.
- Those aged 65+ suffer a higher incidence of osteoarthritis and increased fragility fractures. More preventative work is required to raise awareness of how to promote bone strength universally and reduce secondary lifestyle related causes of osteoporosis.
- Inability to self-care also contributes to non-elective hospital admissions particularly for urinary tract infections, and diabetes. Self care models need to be

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targeted at those living in poverty, with lower levels of health literacy.

- There is a need to develop clear, accessible information and signposting appropriate to older people and a growing BME population.

People who take up exercise in their 60s are 3x more likely to remain healthy in their 70s

What's new in 2015/16 and planned for 2016/17

- A Falls prevention Group has been relaunched and an action plan to reduce falls in the community is under development with a focus on prevention.
- North Lincolnshire Council has signed up to the Dementia Action Alliance and is working towards Dementia Friendly Communities as part of the Adults Partnership.
- The launch of the North Lincolnshire Healthy Ageing Strategy (2015-2020), which has identified 4 priority areas:
 - 1) Wellbeing
 - 2) Self-care and independence
 - 3) Safe, age-friendly communities
 - 4) Prevention and community solutions

- Continued roll out of personal health budgets.
- Strengthening of community volunteering.
- A dial-a-ride transport service is being developed to increase access to services from remote and rural areas, and reduce social isolation.
- All people aged 75 and over can receive a free Wellbeing check to identify any areas of concern, and to provide advice and guidance. People are encouraged to register with their local Community Wellbeing Hub to enable them to access activities in their local area.
- 7 day a week hospital social work team, working 8am-8pm 365 days a year. Implementation of 5 well-being hubs and a number of mini-hubs to support the well-being agenda by providing access to range of services, advice and sign-posting to support well-being.
- A frail and elderly assessment unit was established at Scunthorpe General Hospital to provide a rapid assessment and management of the frail and elderly including mental health assessment to better manage mental health and dementia needs.
- An increase in community nursing capacity to manage people with acute care needs within the community setting
- The establishment of GP Care Networks to facilitate closing working between health and social care and to deliver services closer to home, and enable self-care and independent living.

Knowledge gaps:

- Purchasing patterns of private self-funders
- How older people and their carers are using personal budgets and what works best for them
- How person-centred information from local performance data can be captured and aggregated to inform future commissioning
- Models of social return on investment
- The likely funding implications of the Care Act for North Lincolnshire
- The oral health needs of the adult and ageing population including the equity and distribution of community dental services across North Lincolnshire
- The impact of new community care models on oral health community dental services and its offer to the elderly and frail

Useful weblinks to evidence

- [Adult Market Position Statement 2014](#)
- [Adult Market Position Statement, Complex Care 2014](#)
- [Residential Care Review 2014](#)
- [PHE Oral Health Needs Assessment 2015](#)
- [Ward profiles and locality profiles](#)

