

# Intelligence unit bulletin

Edition 1: June 2018

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This is the first of a series of quarterly bulletins to share the work of the intelligence unit with colleagues within the council and CCG. If you have any queries about our work, or feedback on this bulletin, please get in touch: [researchteam@herefordshire.gov.uk](mailto:researchteam@herefordshire.gov.uk) or call (26)1944.

**NB. Some items of work are for internal business intelligence purposes and have not been approved for publication, so please do not share this document outside the organisation.**

## Recently completed work

### Older people's integrated needs assessment (OPINA)

The local context of a population that already has an older age profile than nationally, and which is expected to grow more rapidly – particularly in the oldest ages, is well known. The needs assessment therefore focused on the key issues affecting the health and wellbeing of people aged 65+ living in Herefordshire. It was jointly commissioned by Herefordshire Council and CCG.

- Fuel poverty
- Dementia
- Frailty
- Falls & fractures
- Informal carers
- Social care
- Loneliness
- Physical activity
- Digital exclusion



The full report, including a more detailed summary of these issues and associated recommendations, is published at <https://factsandfigures.herefordshire.gov.uk/about-a-topic/older-people>

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## Adults with learning disabilities needs assessment

A needs assessment for adults with learning disabilities was commissioned in 2017 to inform the LD strategy.

Just under 900 adult patients of Herefordshire GPs were registered as having a learning disability in 2015/16 – less than a quarter of the estimated total number living in the county (3,600 people). There is not expected to be any notable change in the number registered by 2035, but those who are will have a much older age profile than currently – and likely more complex needs related to their age. Herefordshire Council provides long-term social care support to around 600 adults because of a learning disability – nine per cent more than in 2009/10.

Key findings included:

- Although a higher proportion of adults with LD receive an annual health check than in comparator areas, the rate has fallen below that reported nationally. There is also no information available about the results of health checks, or whether subsequent treatment plans have been put in place as per NICE guidelines.
- The uptake of cancer screening amongst eligible adults with learning disabilities is low, which is reflected in the relatively low cancer prevalence, suggesting late or missed diagnosis. As a result, outcomes are likely to be poorer and premature mortality from cancer more likely.
- According to CQC reports on care homes and home care providers, Herefordshire is providing some of the best care for adults with LD in the West Midlands. At the same time, expenditure locally is lower than elsewhere – highlighting the good value for money obtained for services supporting adults with LD in the county.
- Improved recording and sharing of information, for example of young people leaving full-time education and of disaggregated health records, would improve the understanding of the needs of and outcomes for the LD population as a whole.



Full and summary reports can be found at

<https://factsandfigures.herefordshire.gov.uk/about-a-topic/vulnerable-people/adults-with-learning-disabilities.aspx>.

## Understanding Herefordshire 2018: JSNA annual summary

The annual JSNA is a broad statement of health and wellbeing needs of Herefordshire and its population, with a focus on the wider determinants of health. It highlights the key findings from all of the intelligence that has been generated over the previous year.

The OPINA and LDNA findings were major components of this year's JSNA; other areas to note are:

Strengths	Challenges
<ul style="list-style-type: none"> <li>- Low unemployment</li> <li>- Homelessness rates have fallen and are relatively low</li> <li>- Overall life expectancy &amp; healthy life expectancy is high</li> <li>- Relatively low, and falling, mortality &amp; premature mortality</li> <li>- Adults are more likely to be physically active than nationally</li> <li>- Low numbers of teenage pregnancies</li> <li>- Breastfeeding is more common, and is increasing</li> <li>- Childhood immunisation rates (except HPV) are at least as good as nationally</li> <li>- Children do well at school, on average</li> <li>- Low STI rates</li> </ul>	<ul style="list-style-type: none"> <li>- One of the lowest average earnings in the country</li> <li>- Worst housing affordability in the West Midlands</li> <li>- High likelihood of digital exclusion</li> <li>- Inequalities in               <ul style="list-style-type: none"> <li>➤ Education: disadvantaged children and those who speak English as an additional language do less well at school</li> <li>➤ Health: people in the most deprived areas are more likely to die of cancer, heart disease, stroke or respiratory disease. They can also expect to live 3-4 years less than those in the least deprived.</li> <li>➤ Lifestyle: people in the most deprived areas are more likely to experience hospitalisation related to smoking or alcohol</li> </ul> </li> </ul>



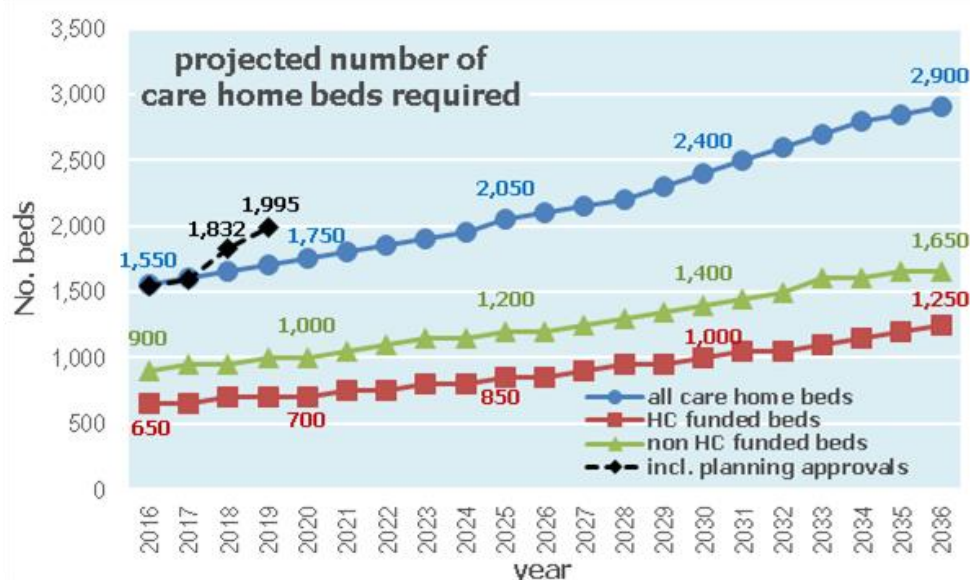
Understanding Herefordshire 2018 is published on the facts and figures about Herefordshire website: <https://factsandfigures.herefordshire.gov.uk/understanding-herefordshire>

## Future demand for care homes

Projections of the number of care home places needed in Herefordshire, taking account of expected demographic changes, indicate that:

- The total requirement will increase from 1,550 in 2016 to 1,800 in 2021 (+250; 3% per year), and to 2,900 by 2036 (+1,350; 5% per year). Existing planning applications would deliver almost 2,000 by 2019.
- An estimated 40 per cent of beds in 2016 were funded by Herefordshire Council. In the absence of any other information, the projections assume this will remain the same. HC-funded beds are more likely to be residential than nursing (60:40), whilst non HC-funded are equally split.

- As of 2016, 56 per cent of care home beds were residential and 44 per cent were nursing. Changes in the age structure alone would suggest that the proportion of nursing home beds will need to increase slightly in future.
- The proportion of people living with dementia in a Herefordshire care home is predicted to increase from 77 to 79 per cent; with the number almost doubling from 1,200 in 2016 to 2,300 in 2036.
- Just over a third of all care homes (36 per cent) are located in the Hereford & surrounds area, just under a quarter (23 per cent) are located in each of the north and south Herefordshire areas and just under a fifth were located in the east Herefordshire area.



Contact [Richard Wilding](#), Intelligence Analyst for further details.

*NB. These projections are based on the 2014-based population projections, but it is unlikely that the slower growth suggested by the 2016-based ones (see below) will have much impact on these since the older population is less sensitive to changes in the underlying assumptions*

## Self-funders' audit

Part of a wider piece of work to better understand the extent and implications of self-funders, an audit has been done of cases where the funds of people who had been paying for their own residential or nursing care place had dropped below the threshold required to be eligible for local authority funding.

Between 2/10/17 and 7/3/18, 19 such cases were considered by panel: an average of one a week, or five per cent of all panel cases; 18 were audited. Findings include:

- At the point of transition, 22% were assessed as needing a nursing placement; 78% residential
- The average age that self-funders entered a care home (85.6) was similar to the age for LA funded clients (85 for residential; 86 for nursing)
- There was considerable variation in the time taken for clients to deplete their funds – ranging from just 2 months to 5½ years

- The panel agreed to pay an average of £550 per week (ranging from £470 to £730) towards the cost of clients' care – 23% less than the average they paid as self-funders
  - In seven cases (39%) panel decided to pay above LA rates
  - Third party top-ups were agreed for four cases – although these collapsed for two due to lack of affordability
- Two cases resulted in the client moving from their originally chosen home to an alternative, where care was provided at the standard local authority rate.

The next phase of the work includes surveys of care homes and domiciliary care providers asking them about the current extent of their client base who are not funded by Herefordshire Council – due to be completed in July.



Contact [Katie Spanjers](#), Intelligence Analyst for further details.

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## Latest population estimates

The Office for National Statistics (ONS) published its annual estimates of the number of people living in the UK and its local authorities in June.

- Herefordshire's resident population was 191,000 in mid-2017; an increase of 1,500 people (0.8%) from the revised estimate of 189,500 in mid-2016.
- This is the largest annual growth since 2007-08 – the main reason being a return to pre-recession levels of net migration from elsewhere in the UK (around 800 more people moving in that out). The 9% growth between 2001 and 2017 overall, however, is still lower than the 12% seen in England and Wales as a whole.
- International migration remains the biggest driver of population growth in the county (as it has been since 2005): 1,000 more people from overseas moved here in 2016-17 than moved out. There were around 400 fewer births (1,700) than there were deaths (2,100) during the year.
- The age structure is still older than nationally: 24% aged 65+ (45,800 people; 6,100 aged 85+), compared to 18% in England and Wales. The number of older people has grown by 36% since 2001, compared with a 28% increase nationally.
- There remains a similar proportion of under-16s (17%) as nationally (19%), with numbers continuing their gradual rise since 2011 (currently 31,900) – although still 2,100 (6%) fewer than in 2011.
- The number of people aged 16-64 remains fairly level (113,400), following the increase seen between 2005 and 2007 due to international migration of younger adults. The county has a lower proportion of younger working age adults (from the age of 16 to mid-forties) compared with England & Wales as a whole, but has a higher proportion of older working age adults (mid-forties to 64).



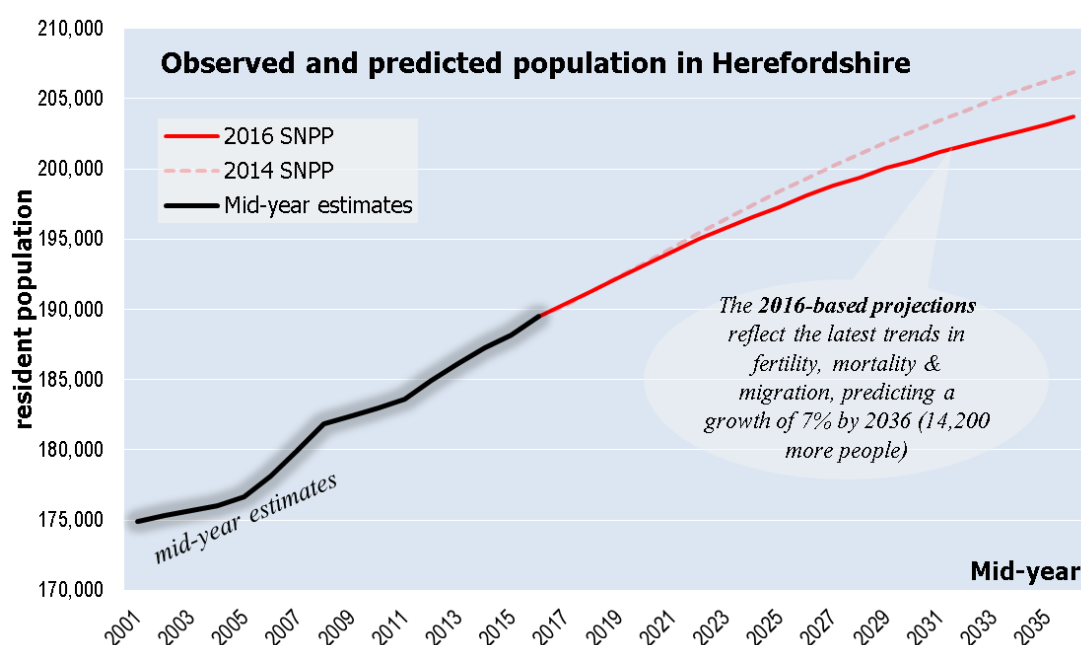
See the [population overview](#) page of the facts and figures website for more detail and the raw data. The *Population of Herefordshire* report will be updated in July.

## New sub-national population projections

New, 2016-based, population projections published by the Office for National Statistics (ONS) in May suggest slower growth than the previous (2014-based) projections. This is because of assumptions about lower future levels of fertility and international migration, and an assumption of a slower rate of increase in life expectancy.

The total population of Herefordshire is projected to increase from 191,000 people in 2017 to 194,100 by 2021 (an increase of two per cent); and to 203,700 people by 2036 (an increase of seven per cent), equivalent to an average annual growth of 0.35 per cent per year over this 20-year period. This is a lower projected annual rate of growth than England as a whole (0.5 per cent per year).

These projections serve as a baseline scenario; they don't attempt to predict the impact that future government or local policies (such as on housing development), changing economic circumstances or other factors might have.



See the [future population](#) page of the facts and figures website. We'll be doing some further analysis on the implications of the new projections on household growth.

## ASC dashboards

Including further refinements to the methodology and presentation, the residential/nursing and domiciliary care dashboards are being produced monthly in line with the DLT schedule – this month's include data up to the end of May.



The dashboards are currently circulated to specific officers, but we would like to publish them on Sharepoint. In the meantime, contact [researchteam@herefordshire.gov.uk](mailto:researchteam@herefordshire.gov.uk).

## Corporate consultation process

A reminder that all requests to undertake a formal public consultation should be logged via the [consultation logging form](#) on Sharepoint as early as possible so that we can work together to ensure it is meaningful and meets the council's legal responsibilities. There is [guidance](#) designed to help you think about what you need to do and should be referred to when completing the form.

## Work in progress...

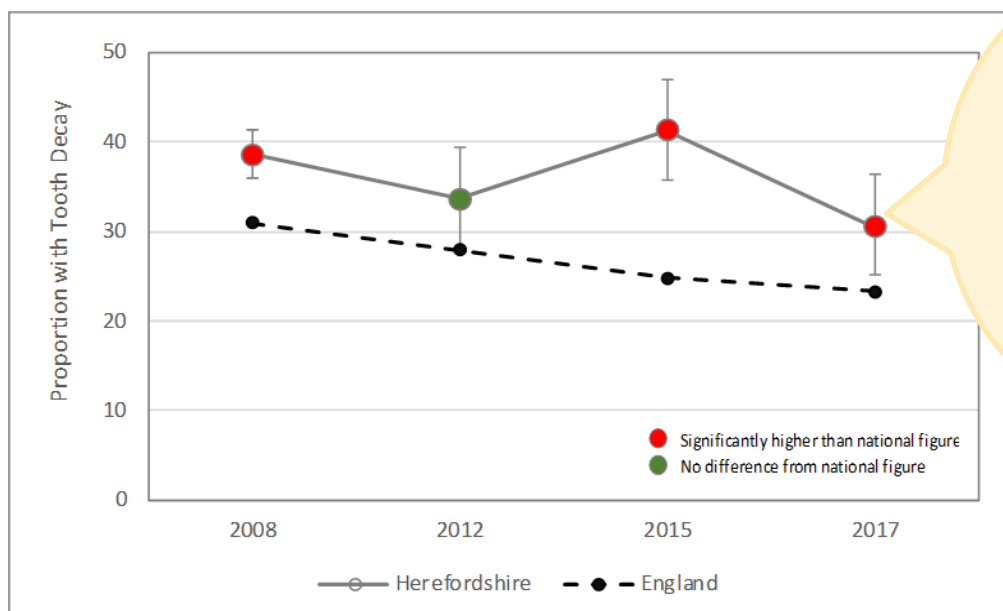
### Domestic abuse analysis

We're working with commissioners to provide some updated analysis of the prevalence and activity around domestic abuse, and scoping some more detailed work to try and better understand the cohort of people who are affected.

### Latest dental health analysis

Results from the latest Oral Health Survey of five year-olds have been published by Public Health England which, at first glance, suggest that there has been a considerable improvement locally. The data indicates that 30 per cent of children had some form of tooth decay in 2017, compared to 41 per cent in 2015 as reported in *Understanding Herefordshire 2018*. However, it's important to note that this difference is not statistically significant. What we can say is:

- there has been no significant change in the local proportion of 5 year old children with some form of tooth decay over the last 10 years
- five year old children in Herefordshire generally have poorer dental health than that reported nationally



Confidence intervals represent uncertainty around an estimate based on a sample. When the upper limit of one year is higher than the lower limit of another, we can't say that the true figures are different.

**Proportion of 5 year old children with some form of tooth decay in Herefordshire and England (data source: PHE)**



We'll be analysing this in more detail as part of the children's needs assessment, and will update the [dental health](#) page of the facts and figures website with the latest results.



## Children's integrated needs assessment

Work is underway on the four workstreams of the children's integrated needs assessment, working closely with the lead client and subject matter experts for each workstream. The draft SEND analysis is expected in July, with the full needs assessment scheduled for September.



Obesity and dental health

Emergency and elective hospital admission rates (0-19 years)

SEND (EHCP cohort)

Early help, CIN, CP, LAC

A closer look



A Deep dive

