Public Health Department, Shropshire Council

Older People's Needs Assessment 2019

March 2019

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1 Summary

1.1 Current population

- Shropshire's population in 2017 was 317,459 and it is estimated that 24% (76,030) were aged 65 or over. 26% of the female population are aged 65 or over, compared to 22% of men. Additionally, 3.1% of the population (9,978) are aged 85 or over – 6,407 of these are women (64%).
- Shropshire has an older population than England, with 24% of its population aged 65 or over and 1.2% aged 90 or over, in comparison to 18% and 0.9% in England.
- Since 2010 the number of people in Shropshire aged 65 or over has increased from 62,149 (20.4% of the population) to 76,030 (23.9%) in 2017 – a greater increase in the same period than the West Midlands (16.8% to 18.4%) and England (16.3% to 18%).
- In the West Midlands local authorities, Shropshire has the second highest percentage of its population that is aged 65 or over, and of all England authorities, Shropshire has the thirteenth highest.
- Of the 76,030 people that are aged 65 and over, the place plan areas with the highest percentage were Bridgnorth (9.1%), South Shrewsbury (9%), North East Shrewsbury (7.2%), Ludlow (6.6%), Market Drayton (6.5%) and rural Shrewsbury area (6.2%). In contrast, Highley (1.3%), Market Drayton (1.4%), Broseley (1.8%) and Pontesbury & Minsterley (1.9%) have a smaller percentage of the 65 and over population.
- Of the 9,978 people that are aged 85 and over, the place plans with the highest percentage were South Shrewsbury (10.3%), Bridgnorth (8.8%), West & Central Shrewsbury (7.9%), Ludlow (7.6%) and North East Shrewsbury (6.2%). In contrast, Highley (1%), Broseley (1.3%) and Much Wenlock (1.4%) have a smaller percentage of the 85 and over population.

1.2 Population projections

- Shropshire's overall population is projected to grow from 313,700 in 2017 to 337,300 by 2037, with the 65 and over population set to raise by 48% from 75,600 to 112,100 – this projection will mean this age group will increase from 24% to 33% of Shropshire's total population.
- In the same period, the 85 and over population will raise by 135% from 10,000 to 23,500, taking it from 3% of Shropshire's population to 7% in 2037.
- The 65 and over population increase between 2017 and 2037 is similar for men (51%) and women (45%), but the change between 2017 and 2037 for 85s and over is greater for males (169%) than females (114%).
- Shropshire's 65 and over population will increase more than the West Midlands, and the over 85 population will increase above the West Midlands and also England.

1.3 Census data

- The 2011 population census showed Shropshire has a fairly rural population that is spread out across the county as Shropshire's population density was 0.96 persons per hectare compared to the 4.06 in England.
- Over half of the over 16 population stated they were married or in a civil partnership, 9.5% were divorced and 7.9% were widowed.
- Of nearly 130,000 households in Shropshire, 13.9% of these were one-person households with someone aged 65 and over, and 11% of households were families 65 and over.
- 98% of Shropshire's population is classified as being from a 'white' ethnic group and this is higher than the England and Wales average of 85.9%.
- 106,909 (35%) of Shropshire residents claimed to have good health, 41,475 (13.5%) claimed to be in fairly good health and 15,436 (5%) claimed to be in bad or very bad health
- 56,826 (18.6%) of Shropshire residents stated they had a limiting long-term illness, with 23,290 (3.2%) of the working age population claiming to have this
- 34,260 Shropshire residents (11.2%) stated that they provide unpaid care to family members, friends, neighbours or others due to their long term physical or mental ill health or disability or problems due to old age

1.4 Index of Multiple Deprivation (IMD)

- In the 2015 IMD only 9 lower level super output areas in Shropshire fell within the most deprived fifth of all of those in England and of the 152 local authorities, Shropshire ranked as the 115th most deprived area, but, there are still pockets of deprivation within Shropshire.
- Comparing deprivation relative to Shropshire rather than to England would mean that 58,924 people live in the most deprived quintile in Shropshire – 11,874 of these people are aged 65 or over (3.7% of Shropshire's population) – although there are significantly less of the 65 and over population who are from the most deprived quintile compared to other quintiles.
- One of the sub domains of the IMD is barriers to housing and services (which includes shops, practices and hospitals) – and 15,256 people 65+ (4.8% of the whole population) live in the most deprived quintile in Shropshire, although this percentage is statistically similar to the other quintiles.
- In the health deprivation and disability domain, there are significantly less people aged 65+ (11,908, 3.8% of the population) in the most deprived quintile in Shropshire compared to other quintiles.
- There are also significantly less people aged 65+ (11,682, 3.7% of Shropshire's population) in the most deprived quintile compared to other quintiles in terms of the income deprivation affecting older people domain

1.5 Health Indicators

- Life expectancy in Shropshire for both males (80.5 years) and females (83.7 years) is significantly higher than England
- Shropshire is also significantly higher than England in the number of years a person would expect to live in good health for males (65.4 years) and females (67.6 years)

- Shropshire is also significantly above England in the number of years at age 65 a male would live (19.2 years) and females (21.5 years).
- Men from the most deprived decile in Shropshire would expect to live 3.7 years less than men from the least deprived decile, whilst for a woman this gap is 2.5 years.
- Shropshire's death rates per 100,000 people aged 65+ are significantly lower than England's for both cancer and respiratory disease, whilst it is statistically similar for cardiovascular disease and suicide.
- Over half of people aged 65 or over who die get to do so in the person's usual place of residence, which is significantly better than the region and England.
- In 2016/17 Shropshire's excess winter deaths for people aged 85+ was around 30% although it is higher for males (35.7%) than females (27.7%), and this is on par with England. Over 3 years of data there is less variation between males and females.
- In 2016, the government stated that 13.1% of Shropshire households – 17,670 out of 135,084 - were estimated to be in fuel poverty, which is lower than West Midlands but higher than England (11.1%).

1.6 Primary Care Data

- 4.5% of Shropshire's population aged 65+ (3,458 people) were recorded on the GP register as having dementia which is statistically higher than England.
- The directly age standardised rate of admissions for people with a mention of dementia aged 65+ was 4.5% which was significantly lower than West Midlands and England, but the rates have been increasing.
- In vaccinations aimed at older people, Shropshire's rates are significantly higher rates than England for pneumococcal (71.9%), flu (74.1%) and shingles (56.4%), although the coverage for shingles has fallen each year since it was introduced.
- Shropshire's rate of hip fractures in people aged 65 and over per 100,000 (550) is statistically similar to England and has reduced in the last 2 years, however, the rate for males (311) is significantly lower than for females and the male rate is significantly lower than England's.
- Over the last 5 years Shropshire's coverage for the 40-74-year-old population receiving an NHS health check (43.4%) was significantly worse than West Midlands and England.

1.7 Quality and Outcomes Framework (QOF) Data

- In Shropshire, hypertension (16.2%) was the disease with the highest prevalence on disease registers and prevalence in Shropshire was significantly higher than the West Midlands and England.
- The second most prevalent disease was depression (9.9%) which was significantly higher than either England or the West Midlands
- Third most prevalent was obesity (9.8%) which was significantly higher than England but lower than the West Midlands.
- The fourth most prevalent disease was diabetes which was similar to England but significantly lower than the West Midlands.

1.8 A&E Data

- In the last 4 financial years there were 93,437 attendances of Shropshire patients aged 65 or over at A&E or MIUs
- These attendances were made by 44,544 unique patients. Over half of attendances (23,608) were individuals attending once in this period, while nearly a quarter (10,098) attended twice. 112 people (0.3%) attended A&E 15 or more times in this period, which included 7 people attending over 50 times.
- 54% of attendances were female
- 9,564 attendances (10.2%) were people aged 90 and over, while 246 (0.3%) were people aged 100 and over.
- There were more attendances in 2017/18 than other years and in this year there were more in every month than in the equivalent month of the other years.
- Self referrals (41.7%) and emergency services (39%) were the most common source of referral in attendances.
- 42% of attendances resulted in an admission by the same health provider, 30% were discharged without follow up, with 12% discharged to be followed up by a GP and 12% referred to another health professional.
- Statistically more attendances came from older people from the least deprived local quintile (22.5%), however, when the rate of attendances per 1,000 population is considered, there was a significantly higher rate among the most deprived quintile – 267.9 compared to the Shropshire average of 229.4.
- There were significantly more A&E attendances from the Bridgnorth (11.8%) place plan area than any other, while the South Shropshire (8.9%) place plan area had significantly more than anywhere else. Considering the rate per 1,000, the Bridgnorth place plan area is still the area with the significantly highest rate of attendances, while Oswestry Town, Highley, West and Central Shrewsbury, South & East Oswestry, Ludlow, North East Shrewsbury, Whitchurch and Pontesbury & Minsterley place plan areas have significantly higher rates than the Shropshire average.

1.9 Inpatient Data

- Between 1st April 2014 and 31st March 2018 there were 133,463 inpatient spells for patients aged 65 and over.
- These inpatient spells were made up of 47,542 unique patients. 40.4% were admitted once in this period, 23.9% were admitted twice and 13.3% were admitted three times. Meanwhile while 457 individuals (1%) had 16 or more spells and 28 individuals had over 50 spells and 5 people had over 80 spells.
- The gender split was around 50:50, although there tended to be more male inpatient spells between 66 and 81 years of age, but by the age of 90 years old there were 5,806 females compared to 3,324 males.
- In total, 9,130 attendances (6.8%) were patients aged 90 or more and 201 (0.2%) were people aged 100 or more.
- 89% of episodes were referred from their usual place of residence and 10.7% were from another NHS hospital provider.
- The admission source was a waiting list in over a third of cases, while just under a quarter came from an A&E or dental casualty department.

- 87.7% of patients were discharged to their usual place of residence, 3.6% went to other hospital providers and 2.4% died.
- Nearly 93% of spells were discharged following clinical advice, with 0.4% discharging themselves / a relative or advocate.
- In the four financial years there were more inpatient discharges in 2017/18 than any other and 9 of the months in this year had more discharges than the equivalent month of the other financial years.
- Just over a quarter of inpatients (33,778) were under the general medicine specialty, with 14.4% under gastroenterology and 11.8% under trauma and orthopaedics.
- There were statistically more planned same day inpatient spells (46.3%), while non-elective emergencies (41.7%), elective procedures (10.5%) and non-elective non-emergencies (1.5%) made up the rest.
- The length of stay was under a day in 54.1% of cases, while 8.7% stays were for one day and in total 110,290 (82.6%) inpatient stays were for under a week. In contrast, there were 3,127 (2.3%) stays that lasted over 4 weeks, including 410 (0.3%) over 8 weeks, are 35 which were over 15 weeks.
- The average length of stay was 3.7 days, however, this varied between type of admission with elective admissions being 3.7 days, non-elective emergency being 7.3 days, and non-elective non-emergency being 17.1 days.
- During the inpatient spell, over 28% of episodes had two procedures or interventions carried out, compared to 26% who didn't have any, while 16% had one intervention. 2,802 episodes (2%) had 8 or more interventions.
- There were significantly more inpatients from the least deprived quintile (23.6%), however, looking at this as a rate per 1,000 population shows there was a statistically higher rate in the most deprived quintile (514 per 1,000) compared to Shropshire as a whole (450.3 per 1,000) and the least deprived quintile (472.7 per 1,000).
- A significantly higher percentage of admissions came from people living in the South Shrewsbury place plan area (10%), with the North East Shrewsbury area (8.9%) second. However, when the rate per 1,000 population was calculated, the Pontesbury and Minsterley, Highley, North East Shrewsbury, Wem, West and Central Shrewsbury, South Shrewsbury, Shrewsbury, Whitchurch and Albrighton place plan areas have significantly higher rates than the Shropshire average.

1.10 Outpatient Data

- Between 1st April 2014 and 31st March 2018 there were 617,431 outpatient appointments for patients aged 65 and over, however, this was made up of 64,959 unique NHS numbers.
- In this period, 14.5% attended only one appointment, 11% attended two, while over a third attended ten or more appointments, including 691 individuals (1.1%) who attended fifty or more appointments and 35 individuals (0.1%) who attended a hundred or more.
- 64.3% of appointments were a face to face follow up one, with 33.9% a first attendance face to face.
- Just over 70% of patients had routine appointments, 27% had urgent appointments and 2.3% were under the two week wait.

- Over half of attendances resulted in another appointment being given, while 20.4% would have another appointment being made in future and 28.7% resulted in discharge from care.
- The referral was made from a GP in 46.7% of attendances, 31% from a non A&E consultant, 11% were from a different consultant to this one and 3.6% came from A&E.
- 53% of outpatients were women and 47% men and there were more women attending at all ages, with the gap increasing with age and by 90 or over there were 15,283 women and 7,859 males (2.5% and 1.3% of all attendances).
- In total there 23,142 attendances (3.7%) for people aged 90 or over and there were 241 attendances for people aged 100 and over.
- There were more attendances in 2016/17 (167,746), than in other years, this was followed by 156,319 in 2017/18 with the two previous years lower.
- The main specialty of the consultant seen for appointments was trauma and orthopaedics (17.1%) which was significantly highest, with ophthalmology (15.8%) and general medicine (13.4%) next, although there were a wide range of other specialties. However, the most common treatment specialty was ophthalmology (16.3%), followed by trauma and orthopaedics (15.9%), while there were a large range of other treatment specialties.
- 72.2% of appointments didn't have a procedure or diagnostic test carried out, although 13.1% had one, 8% had two and 1.4% (8,435) had five or more.
- Statistically more appointments were from patients living in the least deprived quintile in Shropshire (25%) and the number decreases as deprivation increases with the most deprived quintile the lowest (16.5%). However, when a rate per 1,000 population was calculated Shropshire had an average of 2090.7 per 1,000 and, the least deprived quintile (2316.8 per 1,000) and the most deprived quintile (2196.2 per 1,000) were significantly above Shropshire.
- The place plan areas which accounted for the most appointments were South Shrewsbury (56,822, 9.8%), North East Shrewsbury (49,442, 8.5%), Bridgnorth (45,794, 7.9%) and Shrewsbury (40,973, 7%). However, when a rate per 1,000 population was calculated Pontesbury and Minsterley, South and East Oswestry, Oswestry Town, West and Central Shrewsbury, North East Shrewsbury, Wem, Albrighton, Shrewsbury, Highley, South Shrewsbury and Ellesmere place plan areas have significantly higher rates than Shropshire (2090.7 per 1,000 population).

1.11 Drugs and Alcohol

- According to Public Health England, there were only 7 adults aged over 60 who were in treatment for drugs in 2016/17, which was 1% of all clients.
- Public Health England data showed there were 82 people aged 60 or more in treatment for alcohol, which was 17% of the entire client base – this was more than the national figure of 12%.
- Separate data from the Shropshire recovery partnership looking at individuals in treatment where alcohol was the main drug of choice showed that around 15% of the males and females in treatment were aged 55-64 and 6% and 9% respectively were aged 65+.
- Shropshire has a significantly worse age standardised rate than England for admission episodes for alcohol-related conditions - for persons aged 65+, for

males aged 65+ and for females aged 65+ and these rates have increased in the recent periods.

1.12 Crime

- Crime data from the Athena crime database from between 1st October 2017 and 31st October 2018 in Shropshire found that there were 12,350 crimes where the victim lived in Shropshire and 20% of these involved a victim aged 55 or over. Of these, where the victim lived in Shropshire and is 55 or over, 19% involved violence against the person, 18% were burglary, 17% were theft and 16% were arson and criminal damage, 15% were non-crimes and 9% vehicle offences.
- Of the prevalent crimes where a high percentage of the victims were a person aged 55 or over, the most common type of crime was a burglary and also of the near 300 adult protection crimes, 48% were victims aged 55 and over.

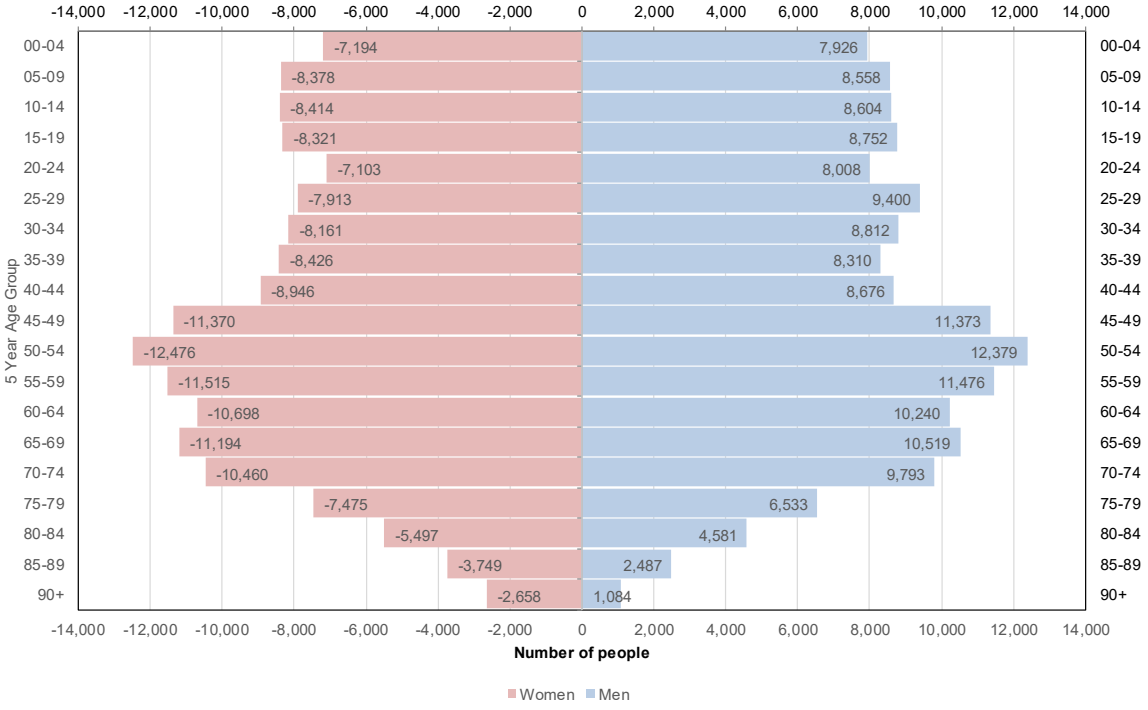
2 The Older Population

2.1 Current Population

2.1.1 Population Structure

In 2017, Shropshire had a total population of 317,459 people, with the population evenly split between men (49.6%) and women (50.4%). However, Shropshire has a high percentage of the population who are 65 or over (76,000, 24%), with there being a higher percentage of the female population who are 65 or over (26%) compared to men (22%). There are also 3,742 people (1.2% of the total population) that are aged 90 or over – with again more women than men. Figure 1 shows the Shropshire population in 2017 for men and women for each 5-year age group and this shows higher numbers at the mid to bottom part of the graph which are the older population and that the female population is larger than the male population from the 50-54 age group onwards.

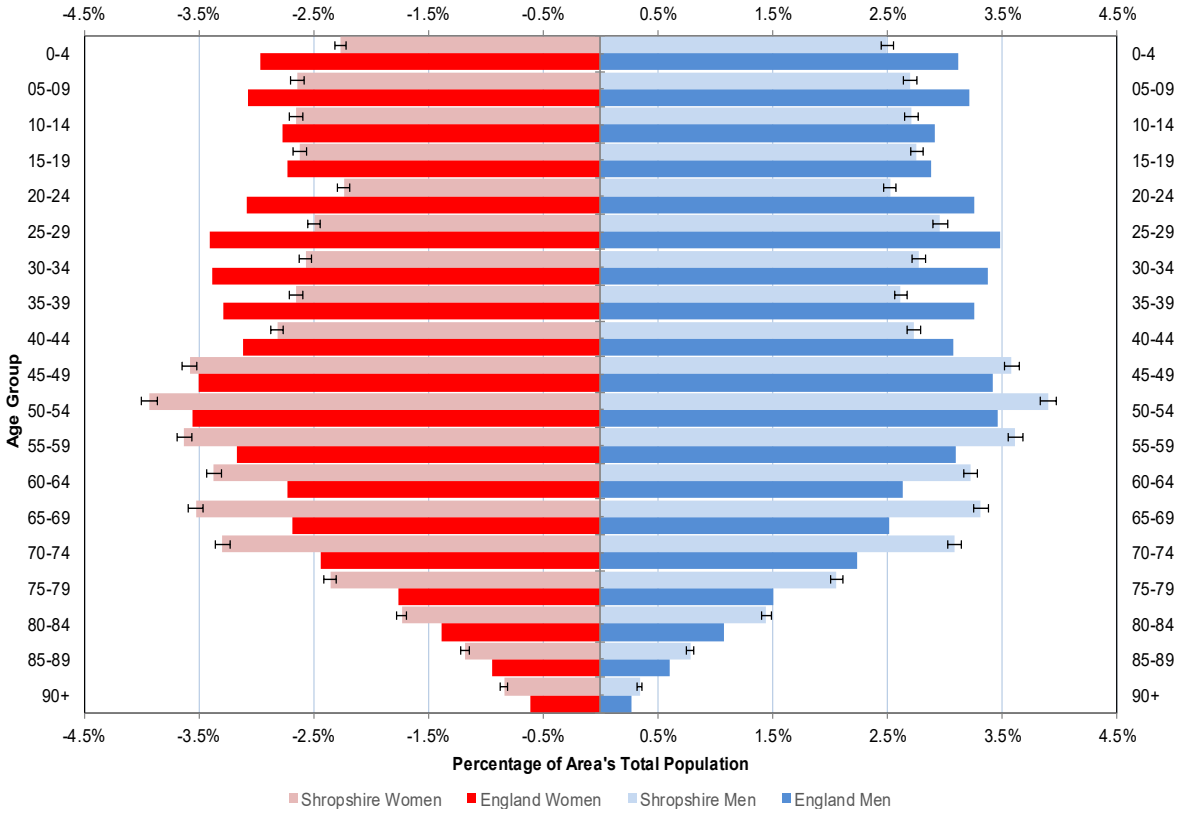
Figure 1: Shropshire Population Pyramid 2017



Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 2 shows the percentage of the overall population for each age group and gender for Shropshire (pale colours) against England (strong colours). This shows that Shropshire seems to have significantly fewer people to England in most age groups between 0 and 44 for both genders, but from the 45-49 age group onward Shropshire has significantly higher percentages than England – in fact in Shropshire 24% of the population is aged 65 or over and 1.2% aged 90 or over in comparison to 18% and 0.9% in England.

Figure 2: Shropshire Population Pyramid 2017 compared to England



Source: Shropshire Mid-Year Population Estimates 2017, ONS

2.1.2 Percentage of the Population Aged 65+

Table 1 shows that since 2010 the percentage of the population aged 65 or over increased every year for Shropshire, West Midlands and England, however the increase has been greater in Shropshire and the percentage in this age groups is significantly higher than the other two throughout, culminating in 23.9% in 2017.

Table 1: Trends in Percentage of Shropshire's Population Aged 65 and Over

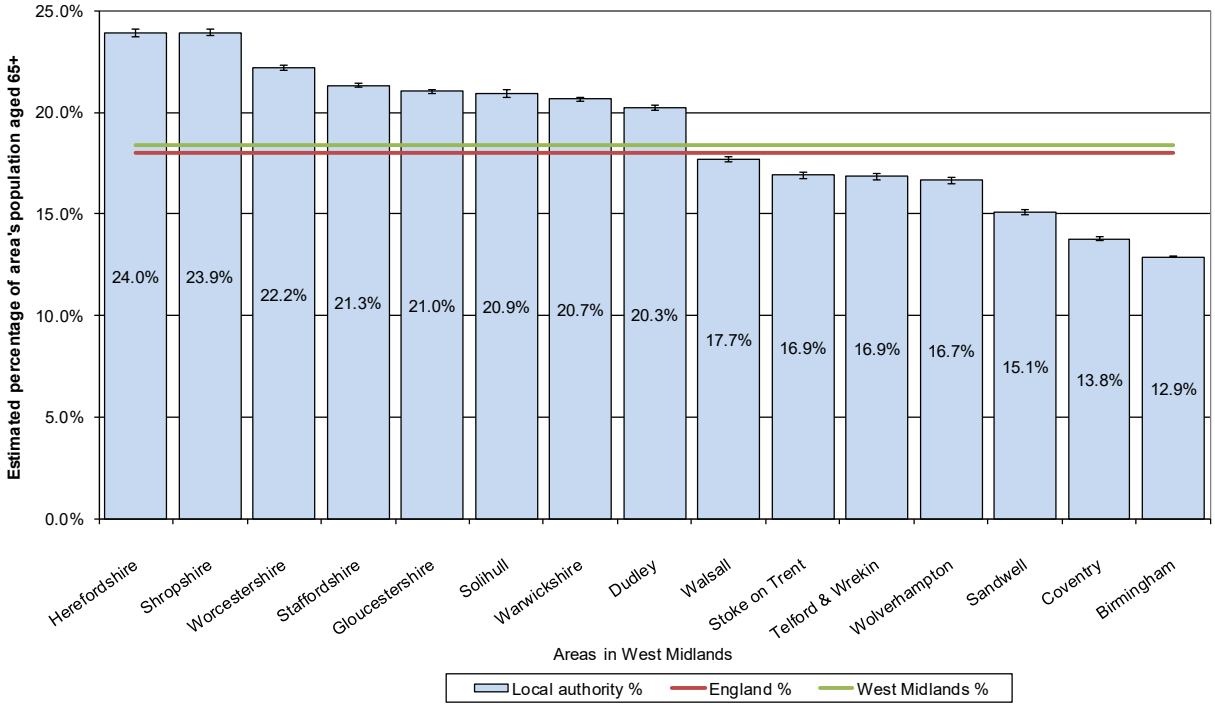
Period	Shropshire: population aged 65+	Shropshire: % of population aged 65+	West Midlands: % of population aged 65+	England: % of population aged 65+
2010	62,149	20.4%	16.8%	16.3%
2011	63,929	20.8%	17.0%	16.4%
2012	66,485	21.6%	17.4%	16.9%
2013	68,683	22.2%	17.7%	17.3%
2014	70,902	22.8%	18.0%	17.6%
2015	72,720	23.3%	18.2%	17.7%
2016	74,302	23.6%	18.3%	17.9%
2017	76,030	23.9%	18.4%	18.0%

Source: Public Health Outcomes Framework, Supporting Information, 2018

In the percentage of the population aged 65 or over, Shropshire has the second highest percentage of the 15 areas in the West Midlands region and the thirteenth highest in England. Figure 3 shows the West Midlands areas, with Herefordshire and

Shropshire having the two highest percentage of their populations aged 65+, which is statistically significantly higher than the other areas as well as the West Midlands and England averages. In comparison, Telford and Wrekin has 16.9%.

Figure 3: Percentage of Population Aged 65+ in 2017



Source: Public Health Outcomes Framework, Supporting Information, 2018

2.1.3 Population by Place Plan Area

Figure 4 shows a map of the 23 place plan areas in Shropshire which are mainly around some of the largest settlements. As Shrewsbury has the highest population, there are a few smaller place plans around it – North East Shrewsbury, West and Central Shrewsbury, South Shrewsbury and Shrewsbury, which encompasses the more rural areas around Shrewsbury.

Figure 4: Shropshire Place Plan Areas

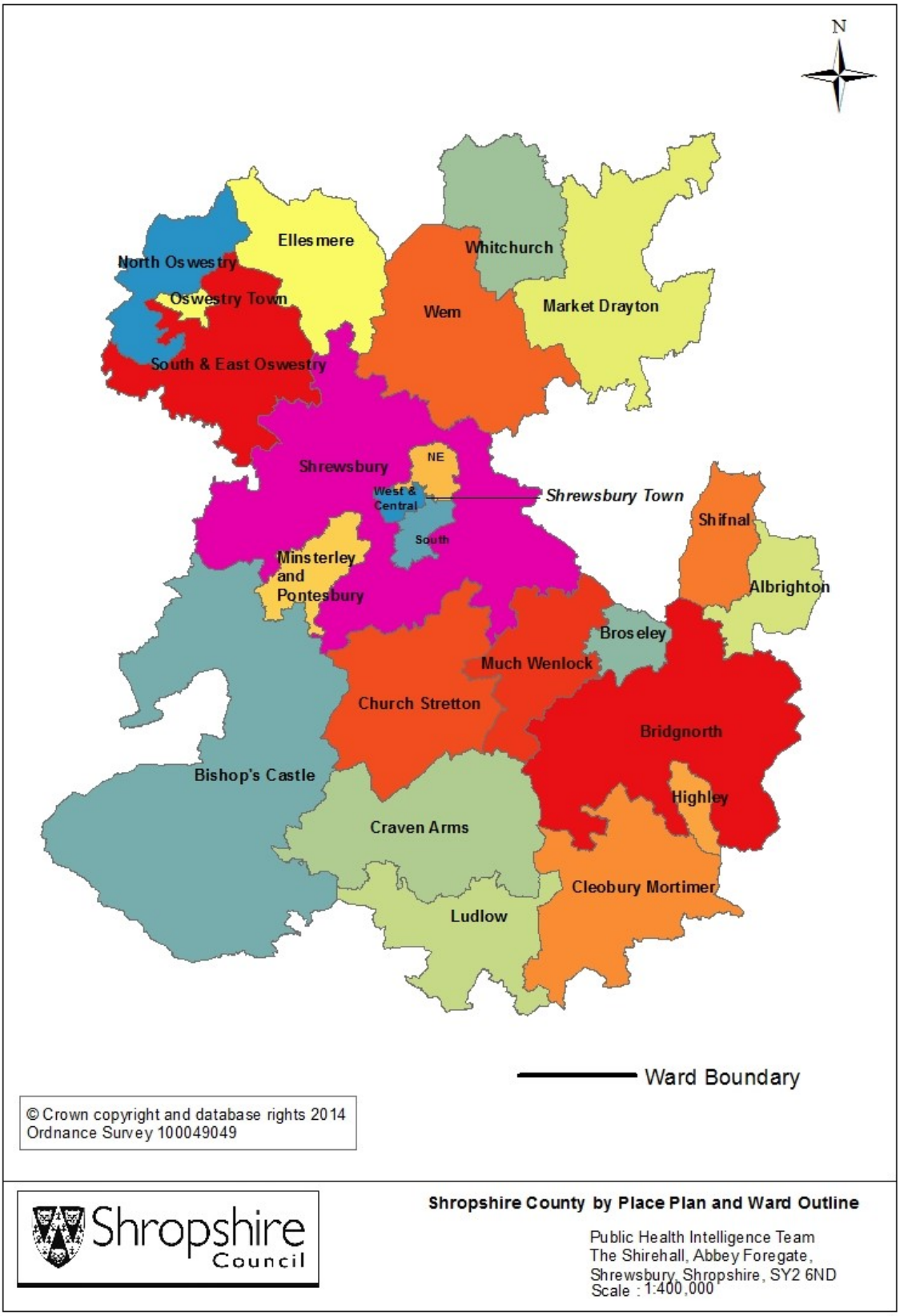


Table 2 shows the population of Shropshire by board age group in each of the 23 place plan areas and also the percentage of Shropshire's population that is in each. While just under a quarter of the population are aged 65 and over and 3% aged 85 and over, the different place plans areas have quite different numbers.

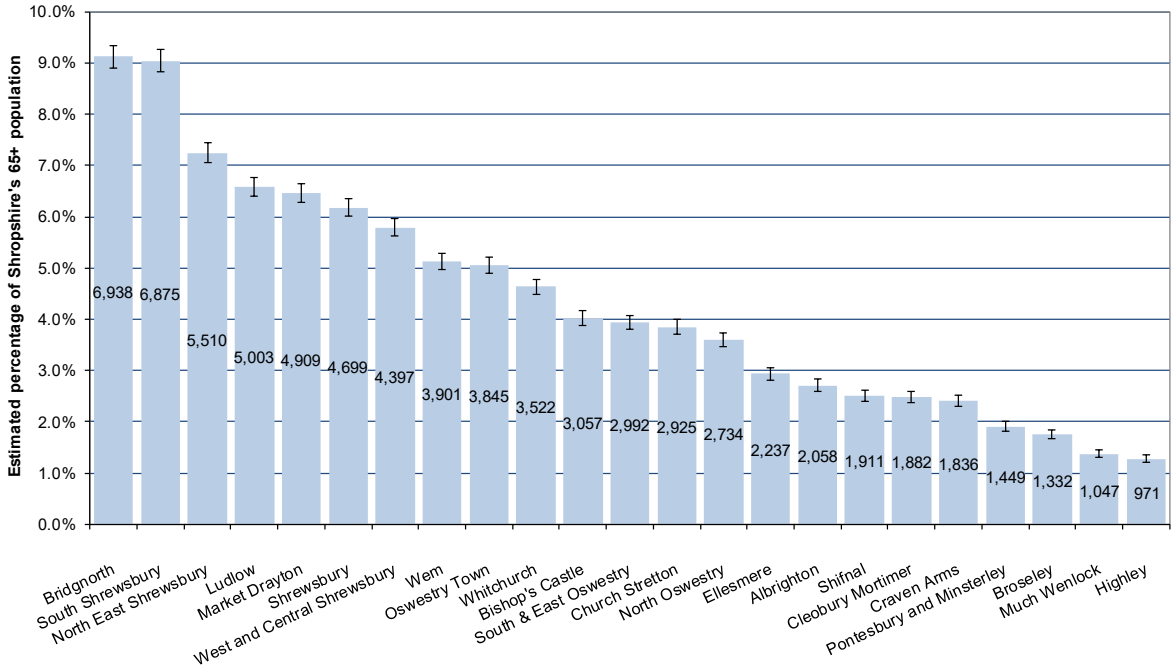
Table 2: Population by Age Group and Place Plan Area

	Population Number in each Place Plan Area				Percentage of Age Group's Population in each Place Plan Area			
	0-64	**65+**	**85+**	**Total**	**0-64**	**65+**	**85+**	**Total**
Albrighton	6,530	2,058	321	8,588	2.7%	2.7%	3.2%	2.7%
Bishop's Castle	7,656	3,057	342	10,713	3.2%	4.0%	3.4%	3.4%
Bridgnorth	18,013	6,938	881	24,951	7.5%	9.1%	8.8%	7.9%
Broseley	4,331	1,332	126	5,663	1.8%	1.8%	1.3%	1.8%
Church Stretton	6,168	2,925	413	9,093	2.6%	3.8%	4.1%	2.9%
Cleobury Mortimer	4,993	1,882	198	6,875	2.1%	2.5%	2.0%	2.2%
Craven Arms	4,825	1,836	234	6,661	2.0%	2.4%	2.3%	2.1%
Ellesmere	7,165	2,237	259	9,402	3.0%	2.9%	2.6%	3.0%
Highley	2,745	971	98	3,716	1.1%	1.3%	1.0%	1.2%
Ludlow	11,917	5,003	760	16,920	4.9%	6.6%	7.6%	5.3%
Market Drayton	18,546	4,909	582	23,455	7.7%	6.5%	5.8%	7.4%
Much Wenlock	2,301	1,047	143	3,348	1.0%	1.4%	1.4%	1.1%
North East Shrewsbury	26,802	5,510	619	32,312	11.1%	7.2%	6.2%	10.2%
North Oswestry	8,785	2,734	322	11,519	3.6%	3.6%	3.2%	3.6%
Oswestry Town	14,176	3,845	563	18,021	5.9%	5.1%	5.6%	5.7%
Pontesbury & Minsterley	4,137	1,449	196	5,586	1.7%	1.9%	2.0%	1.8%
Shifnal	6,588	1,911	213	8,499	2.7%	2.5%	2.1%	2.7%
Shrewsbury	15,087	4,699	580	19,786	6.2%	6.2%	5.8%	6.2%
South & East Oswestry	9,779	2,992	355	12,771	4.1%	3.9%	3.6%	4.0%
South Shrewsbury	19,264	6,875	1,030	26,139	8.0%	9.0%	10.3%	8.2%
Wem	13,279	3,901	497	17,180	5.5%	5.1%	5.0%	5.4%
West & Central Shrewsbury	17,166	4,397	784	21,563	7.1%	5.8%	7.9%	6.8%
Whitchurch	11,176	3,522	462	14,698	4.6%	4.6%	4.6%	4.6%
Grand Total	**241,429**	**76,030**	**9,978**	**317,459**	100.0%	100.0%	100.0%	100.0%

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 5 shows the percentage of the 65 and over population (76,030 people) which reveals that significantly more of the 65+ age group are in the Bridgnorth and South Shrewsbury place plan areas while Highley and Much Wenlock place plan areas have significantly less of the 65+ age group.

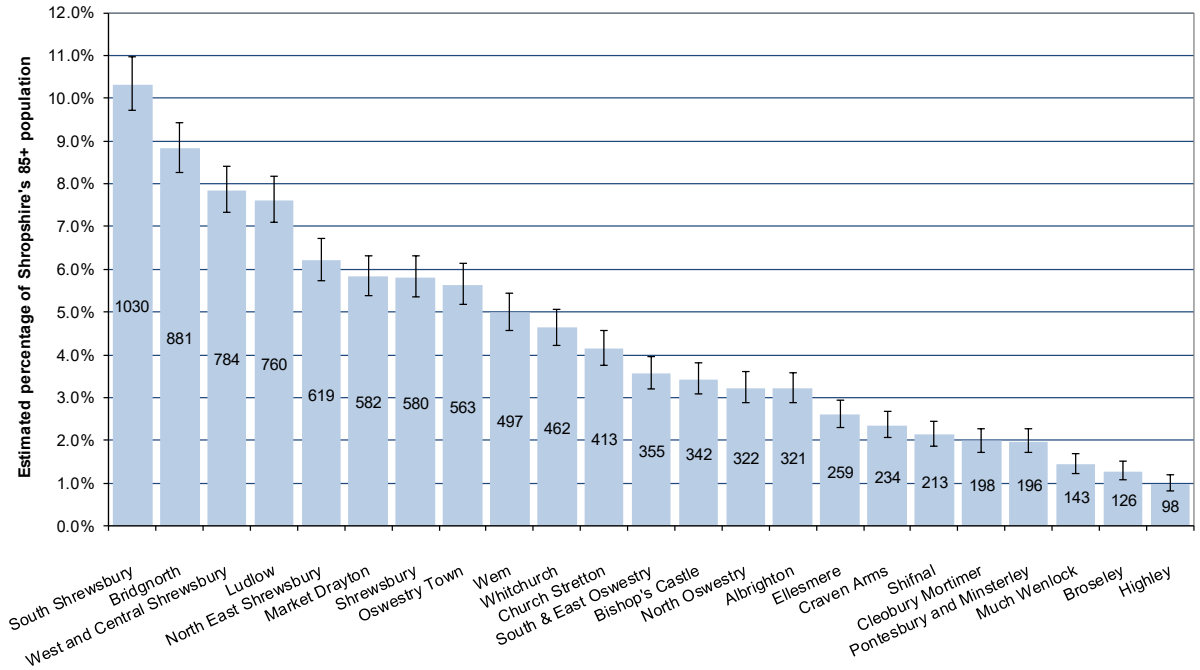
Figure 5: Percentage of 65+ Population by Place Plan Area



Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 6 shows the percentage of the 85 and over population (9,978 people) which reveals that significantly more of the 85+ age group are in the South Shrewsbury place plan area, with Bridgnorth, West and Central Shrewsbury and Ludlow having significantly more than other areas while Highley, Broseley and Much Wenlock place plan areas have significantly less of the 85+ age group compared to the others.

Figure 6: Percentage of 85+ Population by Place Plan Area



Source: Shropshire Mid-Year Population Estimates 2017, ONS

2.2 Estimated Population Projections

Table 3 shows the office of national statistics (ONS) population projections for Shropshire by age group between 2017 and 2037 which was based upon the 2014 population. This shows the overall population numbers, the percentage that each age group makes up of the overall population and the percentage change in the numbers from 2017. In this time, it is estimated that Shropshire's overall population will increase from 313,700 to 337,300 (increase of 7.5%), while the 65+ population will increase from 75,600 to 112,100 (increase of 48%) and the 85+ population will increase from 10,000 to 23,500 (an increase of 135%).

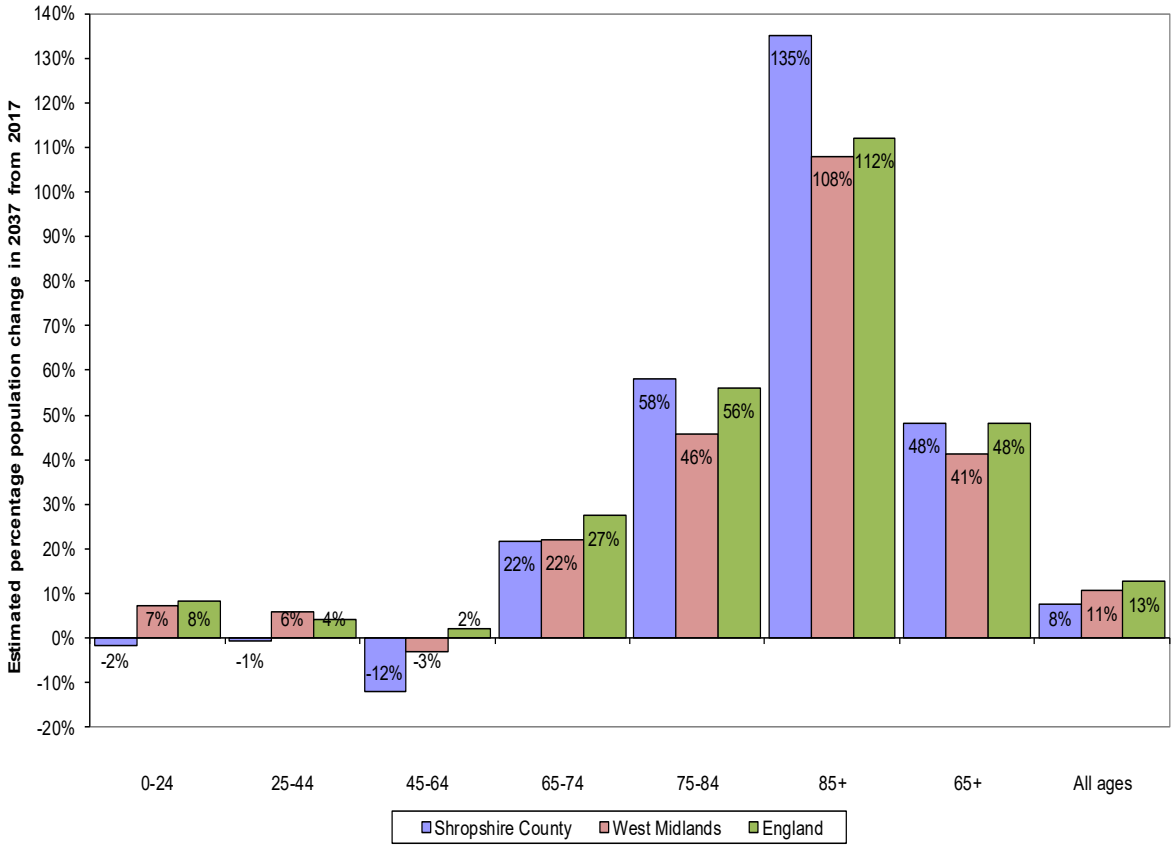
Table 3: Population Projections for Shropshire 2017-2037

	Projected population in age group							
Year	**0-24**	**25-44**	**45-64**	**65-74**	**75-84**	**85+**	**65+**	**All ages**
2017	80,100	67,600	90,200	41,500	24,100	10,000	75,600	313,700
2022	78,800	69,100	89,500	41,500	30,400	11,900	83,800	320,800
2027	79,100	68,700	86,200	43,700	35,100	14,700	93,500	327,400
2032	79,200	67,900	81,500	48,900	35,600	19,700	104,200	332,800
2037	78,600	67,200	79,400	50,500	38,100	23,500	112,100	337,300
	Percentage of overall population in each age group in the period							
2017	26%	22%	29%	13%	8%	3%	24%	100%
2022	25%	22%	28%	13%	9%	4%	26%	100%
2027	24%	21%	26%	13%	11%	4%	29%	100%
2032	24%	20%	24%	15%	11%	6%	31%	100%
2037	23%	20%	24%	15%	11%	7%	33%	100%
	Percentage change in age group from 2017							
2017								
2022	-2%	2%	-1%	0%	26%	19%	11%	2%
2027	-1%	2%	-4%	5%	46%	47%	24%	4%
2032	-1%	0%	-10%	18%	48%	97%	38%	6%
2037	-2%	-1%	-12%	22%	58%	135%	48%	8%

Source: Shropshire Population Projections, 2014 based, ONS

Figure 7 shows how the population is estimated to change from 2017 to 2037 for Shropshire, West Midlands and England and in these 20 years it is estimated that in the future there will be fewer people aged under 65 in Shropshire, unlike the West Midlands and England. In comparison, the over 65 population will increase by 48% in Shropshire compared to 41% in the West Midlands and 48% in England and there will be a 135% increase in people aged 85+ in Shropshire compared to 108% for West Midlands and 112% in England respectively.

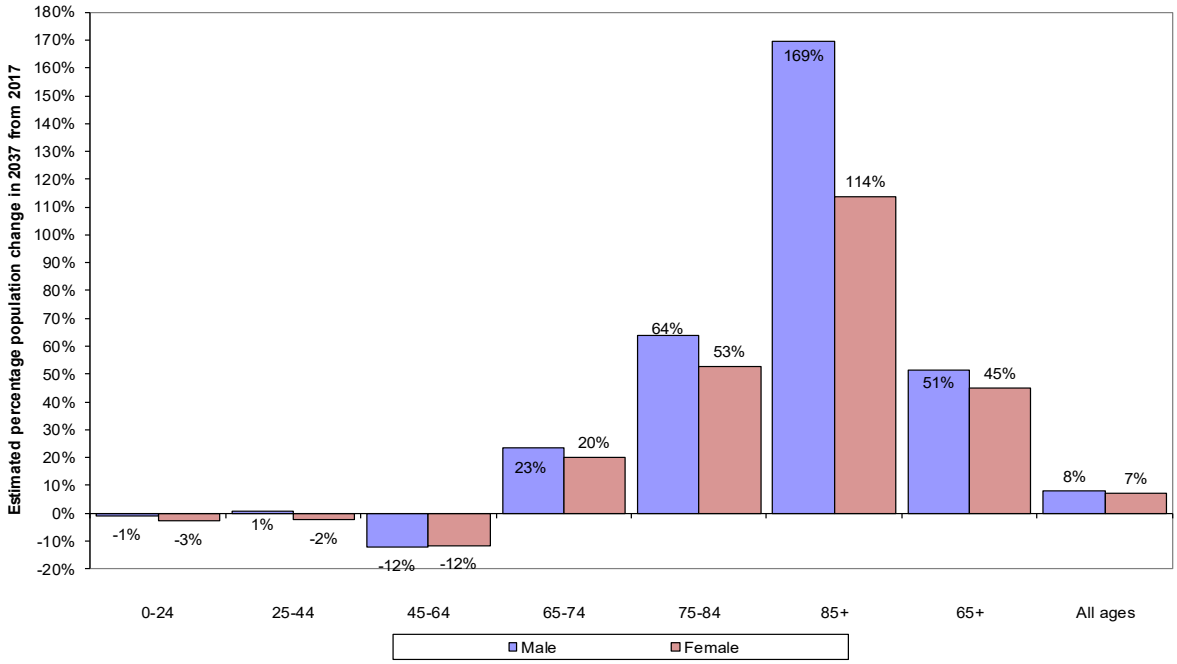
Figure 7: Population Change from 2017 to 2037 for Shropshire, West Midlands and England



Source: Shropshire Population Projections, 2014 based, ONS

Figure 8 shows the population change for Shropshire for men and women between 2017 and 2037 and again for both, the population aged under 65 will reduce, while it will increase in the 65+ population and particularly in the 85+ population. The male population is estimated to increase more than the female population for those aged 65 or more and particularly for those aged 85 or more.

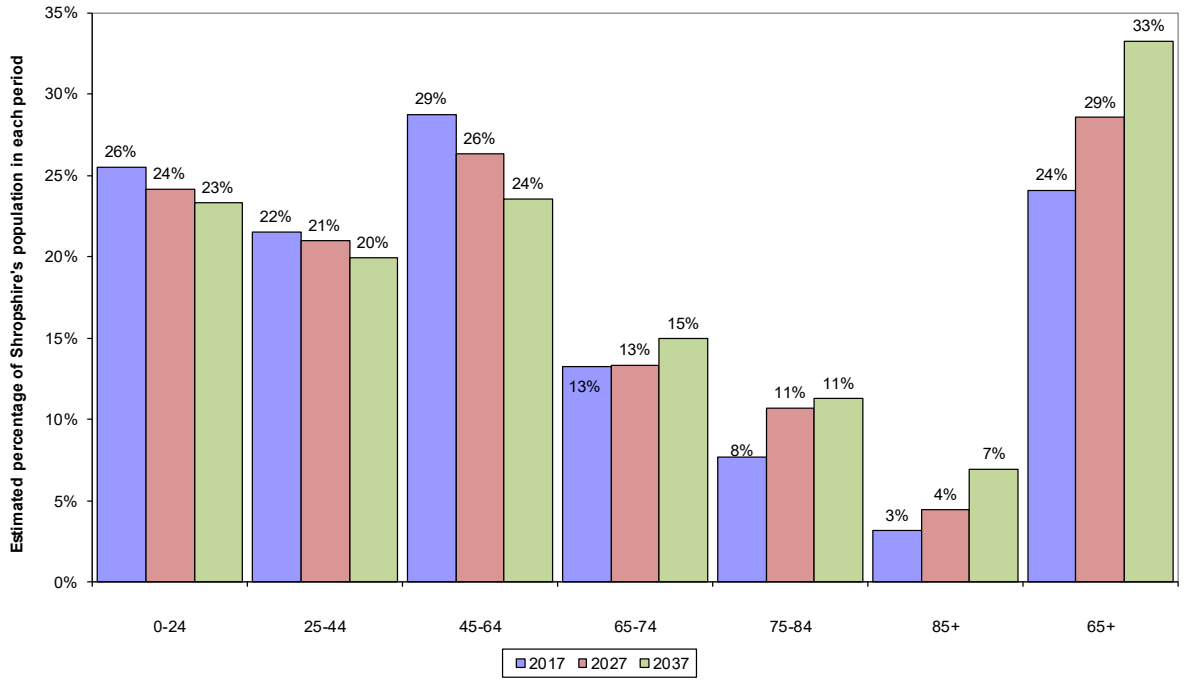
Figure 8: Population Change for Men and Women in Shropshire 2017-2037



Source: Shropshire Population Projections, 2014 based, ONS

Figure 9 shows the estimated percentage of Shropshire's population that will be made up from each age group 10 and 20 years into the future. The percentage that are from the below 65 age group will fall in the future, with the 65+ age group increasing from 24% of Shropshire's population in 2017, to 29% in 2027 and 33% in 2037, while the 85+ age group will increase from 3% to 4% and 7% respectively and these increases are likely to have a significant impact.

Figure 9: Percentage of Shropshire Population by Age Group 2017-2037



Source: Shropshire Population Projections, 2014 based, ONS

2.3 Census data

The national census is carried out by ONS and takes place every 10 years and last took place in 2011 and it provides a comprehensive picture of the whole population as the same questions are asked to everyone. Because some of the population data has already been covered with more recent data, this section won't cover some of those sections, but will look at other highlights.

- Shropshire's population rose from 283,173 in 2001 to 306,100 in 2011, an increase of 8%
- The population density in Shropshire was 0.96 persons per hectare compared to 4.06 in England as a whole
- The percentage of people aged over 65 living in Shropshire had risen by 24% from 2001, compared to 10.9% in England and Wales
- The number of people aged 85 and over increased by 35% from 6,211 in 2001 to 8,400 in 2011, compared to a 24% rise in England and Wales
- Of the 252,979 Shropshire residents aged 16 and over, 51.6% stated they were married or in a civil partnership, 29.1% stated they were never married / never in a same sex civil partnership, 9.5% were divorced, 2% were separated while 7.9% (19,896) were widowed.
- There were 129,674 households in Shropshire in 2011, compared to 117,301 in 2001, an 11% increase compared to an 8% increase in England and Wales
- Of the 129,674 households, 38.6% were owned outright, 30.6% owned with a mortgage or loan and 0.6% were a shared ownership. Of the others, 15% were rented with a private landlord, 8.5% socially rented, 5% rented from the council and 1.8% were living rent free.
- 125,546 (96.8%) households have central heating, while 4,128 (3.2%) do not.
- 13.9% of Shropshire households were one-person households aged 65 and over, and 11% of households were families 65 and over
- 95.3% of Shropshire's residents were born in the UK, with 0.7% being resident in the UK for less than 2 years, 1.5% resident between 2 and 10 years and 2.5% being resident 10 years or more
- Shropshire has a high percentage of people with Christian faith, with 68.7% of residents following the religion. This is followed by 22.8% of residents who stated that they have no religion and 7.3% who did not state a religion.
- 98% of Shropshire's population is classified as being in a 'white' ethnic group. This was reduced from 98.8% in 2001, though this is still higher than the England and Wales average of 85.9%. 'Asian' or 'Asian British' ethnic groups have the next largest number of people in Shropshire with 1% of the population
- 106,909 (35%) of Shropshire residents claim to have good health, 41,475 (13.5%) claim to be in fairly good health and 15,436 (5%) claim to be bad/very bad health
- 56,826 (18.6%) of Shropshire residents stated they had a limiting long-term illness, with 23,290 (3.2%) of the working age population claiming to have this
- 34,260 Shropshire residents (11.2%) stated that they provide unpaid care – to family members, friends, neighbours or others due to long term physical or mental ill health or disability or problems due to old age
- Of the 129.674 households, 42.2% had 1 car or van, 30.8% had 2 while 15.8% of households did not have any cars or vans.

3 Deprivation and The Older Population

The index of multiple deprivation (IMD) is an index calculated on the 32,844 lower level super areas (LLSOAs) in England and was last carried out in 2015. LLSOAs contain between 1,000 and 3,000 people and between 400 to 1,200 households. IMD is calculated from 37 indicators which measure deprivation scores across seven areas (called domains), which are weighted as follows:

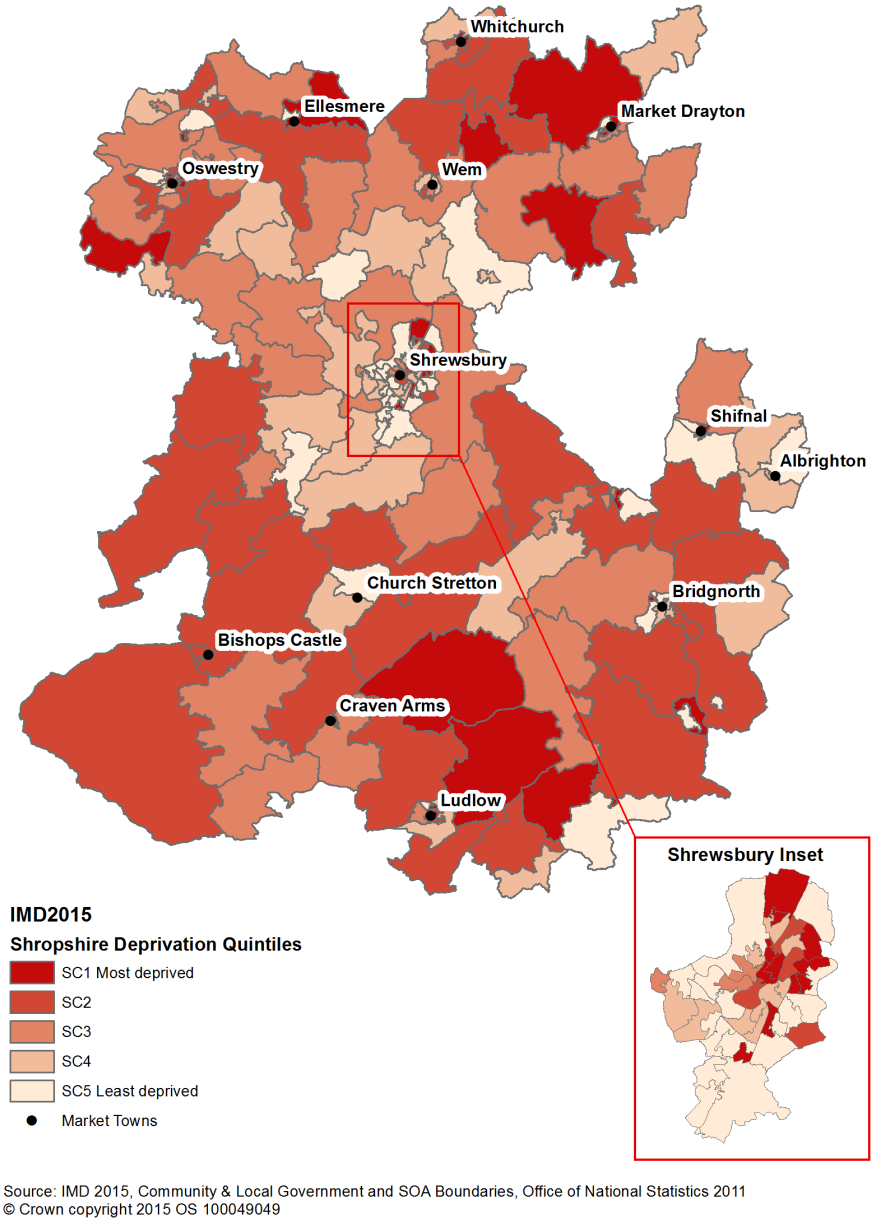
- Income (22.5%)
- Employment (22.5%)
- Health and disability (13.5%)
- Education, skills and training (13.5%)
- Barriers to housing and services (9.3%)
- Crime (9.3%)
- Living environment (9.3%)

Each LLSOA is allocated an IMD score, which is weighted on the basis of its population. Of the 32,844 LLSOAs in England; only 9 in Shropshire County fell within the most deprived fifth of all LLSOAs in England and of the 152 county and local authorities ranked on the public health outcomes framework, Shropshire ranked as the 115th most deprived. To get a more meaningful local picture, each LLSOA in Shropshire County was ranked from 1 (most deprived in Shropshire) to 193 (least deprived in Shropshire). Shropshire LLSOAs were then divided into local deprivation quintiles which are used for profiling and monitoring of health and social inequalities in Shropshire County (1 being the most deprived fifth of local areas and 5 the least).

3.1 Overall Local Index of Multiple Deprivation

Figure 10 shows a map of Shropshire with the 193 LLSOAs in Shropshire being ranked according to their overall local IMD quintile, with the most deprived areas of Shropshire (SC1) in dark red and the least deprived areas in white.

Figure 10: Shropshire: Local Index of Multiple Deprivation Quintiles 2015



Source: IMD 2015, Community & Local Government and SOA Boundaries, Office of National Statistics 2011
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Table 4 shows the population of Shropshire by broad age group in each of local IMD quintile and also the percentage of Shropshire's population that is in each. Overall nearly a fifth of the population are in each of the deprivation quintiles, although there are significantly less people in the most deprived quintile than the others and there are then significantly less people from the second most deprived quintile than the other three. Just under a quarter of the population are aged 65 and over, with 3% aged 85 and over, with there being significantly more in these groups from the least deprived quintiles, than the most deprived ones.

Table 4: Population by Age Group and Local IMD Quintile

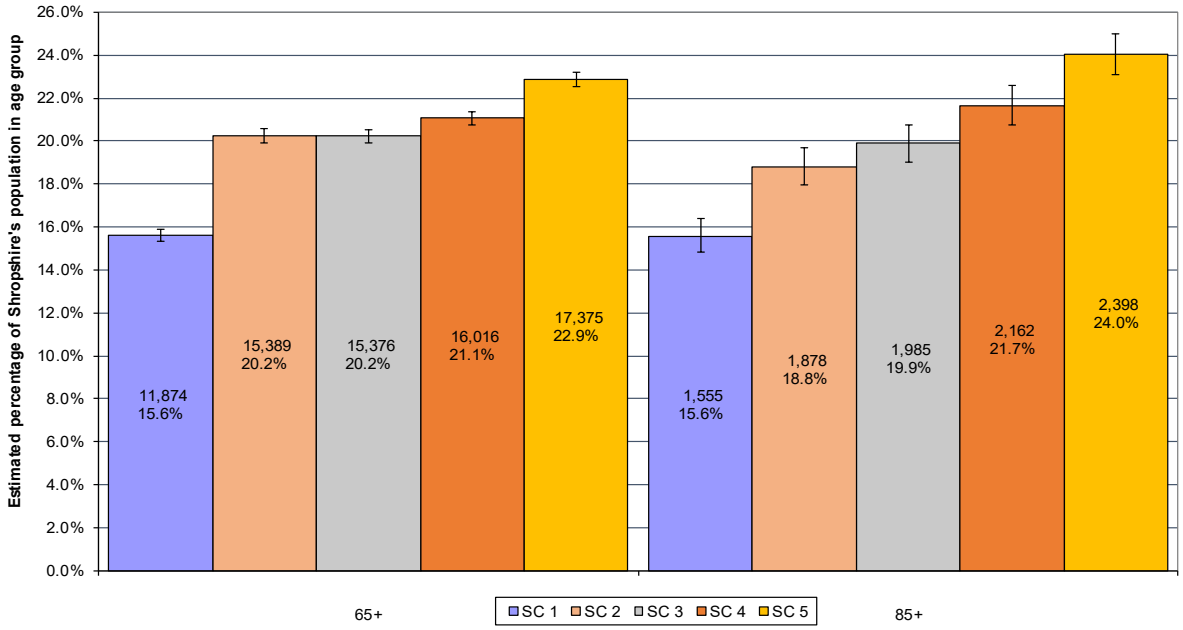
	Population Number in each local deprivation quintile				Percentage of Total Population in each local deprivation quintile			
	0-64	65+	85+	Total	0-64	65+	85+	Total
SC 1	47,050	11,874	1,555	58,924	14.8%	3.7%	0.5%	18.6%

SC 2	45,603	15,389	1,878	60,992	14.4%	4.8%	0.6%	19.2%
SC 3	50,147	15,376	1,985	65,523	15.8%	4.8%	0.6%	20.6%
SC 4	49,839	16,016	2,162	65,855	15.7%	5.0%	0.7%	20.7%
SC 5	48,790	17,375	2,398	66,165	15.4%	5.5%	0.8%	20.8%
Total	**241,429**	**76,030**	**9,978**	**317,459**	**76.1%**	**23.9%**	**3.1%**	**100.0%**

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 11 shows of the 65 and over population (76,030 people) and the 85 and over population (9,978 people), the percentage of those that live in each local IMD quintile which reveals that of these age groups there are more people in the least deprived quintile than any other, and there are significantly less people in the most deprived quintiles in both age groups.

Figure 11: Population from Older Age Groups by Local IMD Quintile



Source: Shropshire Mid-Year Population Estimates 2017, ONS

To further assess deprivation among older people, other domains and sub-domains have been analysed which could affect older people.

3.2 Barriers to Housing and Services Domain

The barriers to housing and services domain is made up of geographical barriers like road distances to a post office, a school, a general store or a GP surgery and wider barriers like household overcrowding, homelessness and housing affordability. Table 5 shows the population of Shropshire by broad age group in each of the local barriers to housing and services quintiles and also the percentage of Shropshire's population that is in each. Overall nearly a fifth of the population are in each of the deprivation quintiles, although there are significantly less people in the most deprived and least deprived quintiles than the others which are significantly similar.

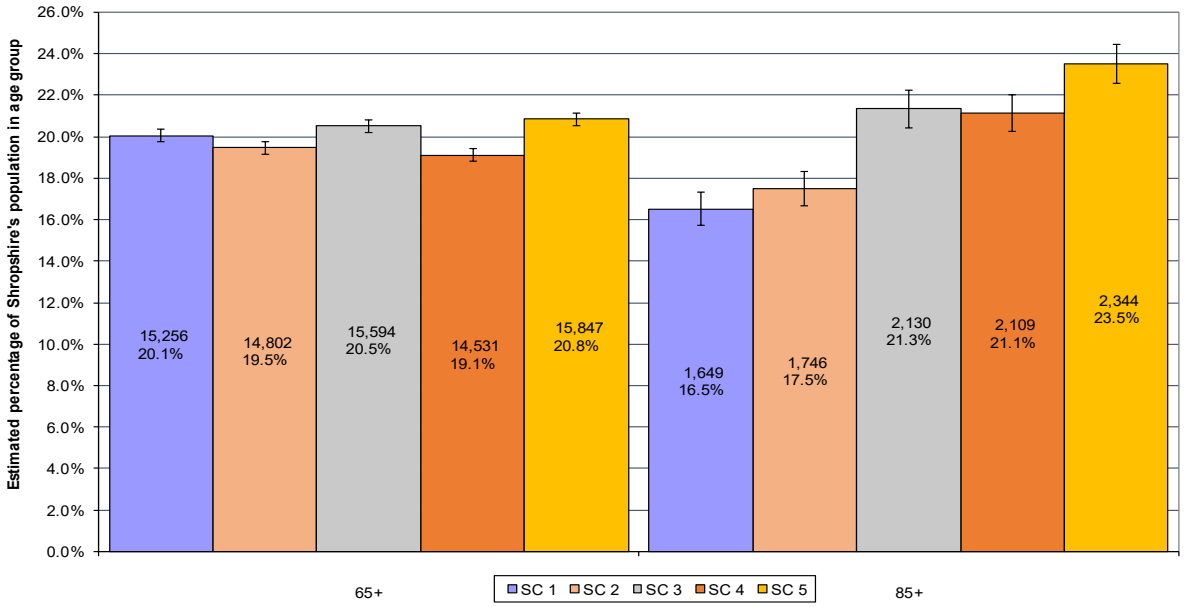
Table 5: Local Barriers to Housing and Services Quintile by Age

	Population Number in each local deprivation quintile				Percentage of Total Population in each local deprivation quintile			
	0-64	**65+**	**85+**	**Total**	**0-64**	**65+**	**85+**	**Total**
SC 1	46,586	15,256	1,649	61,842	14.7%	4.8%	0.5%	46,586
SC 2	49,083	14,802	1,746	63,885	15.5%	4.7%	0.5%	49,083
SC 3	47,811	15,594	2,130	63,405	15.1%	4.9%	0.7%	47,811
SC 4	51,098	14,531	2,109	65,629	16.1%	4.6%	0.7%	51,098
SC 5	46,851	15,847	2,344	62,698	14.8%	5.0%	0.7%	46,851
Total	241,429	76,030	9,978	317,459	76.1%	23.9%	3.1%	241,429

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 12 shows of the 65+ population (76,030 people) and the 85+ population (9,978 people), the percentage of those that live in each local quintile of barriers to housing and services. For those aged 85 and over there are significantly less people from the two most deprived quintiles than the middle and the second least deprived quintile and again these are significantly less than the least deprived quintile.

Figure 12: Percentage of Population from Older Age Groups by Local Barriers to Housing and Services Quintiles



Source: Shropshire Mid-Year Population Estimates 2017, ONS

3.3 Local Health Deprivation and Disability Domain

Another of the domains of the overall IMD is the Health Deprivation and Disability Domain, this measures morbidity, disability and premature mortality. Table 6 shows the population of Shropshire by broad age group in each of local health deprivation and disability quintiles and the percentage of Shropshire's population that is in each. Overall nearly a fifth of the population are in each of the deprivation quintiles. Just under a quarter of the population are aged 65 and over, with 3% aged 85 and over, with there being significantly less people in the over 65 age group from the most deprived quintile.

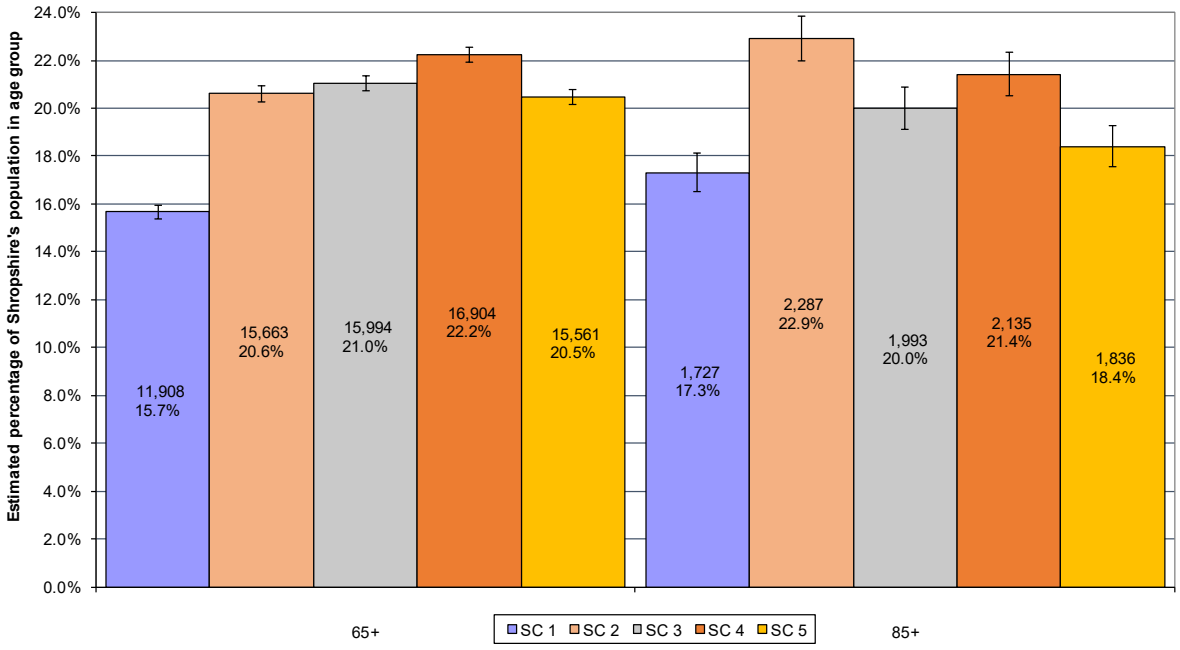
Table 6: Local Health Deprivation and Disability Quintile by Age

	Population Number in each local deprivation quintile				Percentage of Total Population in each local deprivation quintile			
	0-64	**65+**	**85+**	**Total**	**0-64**	**65+**	**85+**	**Total**
SC 1	49,798	11,908	1,727	61,706	15.7%	3.8%	0.5%	19.4%
SC 2	46,235	15,663	2,287	61,898	14.6%	4.9%	0.7%	19.5%
SC 3	47,557	15,994	1,993	63,551	15.0%	5.0%	0.6%	20.0%
SC 4	46,659	16,904	2,135	63,563	14.7%	5.3%	0.7%	20.0%
SC 5	51,180	15,561	1,836	66,741	16.1%	4.9%	0.6%	21.0%
Total	241,429	76,030	9,978	317,459	76.1%	23.9%	3.1%	100.0%

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 13 shows of the 65 and over population (76,030 people) and the 85 and over population (9,978 people), the percentage of those age groups that live in each local quintile and in the 65 and over population, significantly less live in the most deprived local health deprivation and disability quintile.

Figure 13: Percentage of Population from Older Age Groups by Local Health Deprivation and Disability Quintile



Source: Shropshire Mid-Year Population Estimates 2017, ONS

3.4 Local Living Environment Deprivation Domain

The living environment deprivation domain is made up of two sub-domains, firstly the 'indoors' living environment - which measures things like the proportion of houses without central heating, or the proportion of social and private homes that fail to meet a standard – while the 'outdoors' sub-domain measures air quality based on emissions rates and road traffic accidents involving injury. Table 7 shows the Shropshire population by broad age group in each of the local living environmental deprivation quintiles and the percentage that is in each. Overall nearly a fifth of the population are in each of the deprivation quintiles, although there are significantly less of the overall number in the most deprived quintile. Just under a quarter of the population are aged 65 and over, with 3% aged 85 and over.

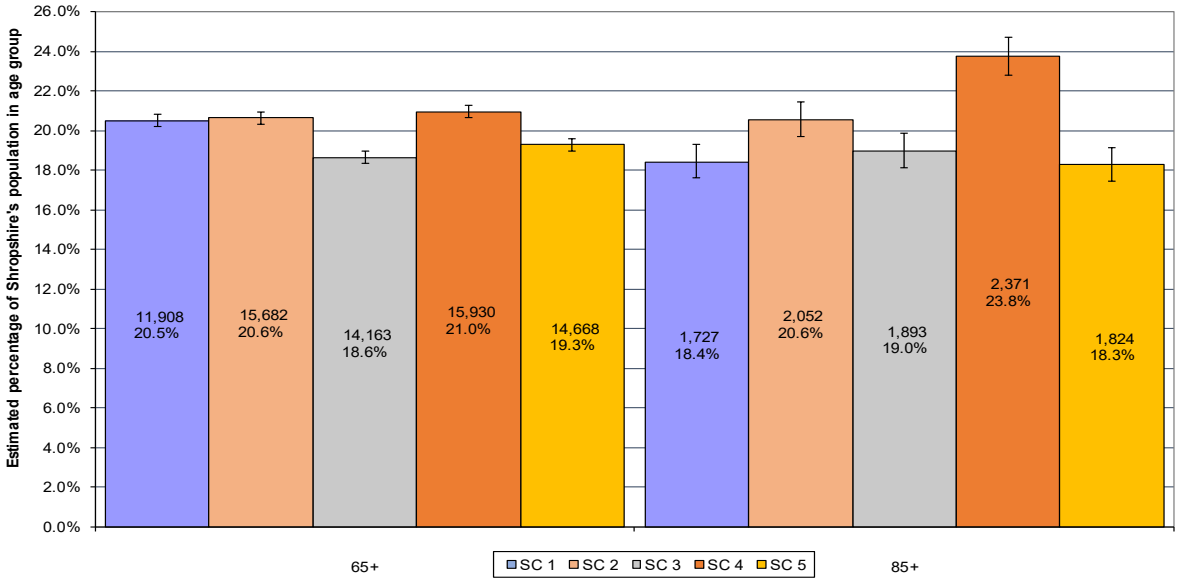
Table 7: Local Living Environment Deprivation Quintile by Age

	Population Number in each local deprivation quintile				Percentage of Total Population in each local deprivation quintile			
	0-64	**65+**	**85+**	**Total**	**0-64**	**65+**	**85+**	**Total**
SC 1	43,353	15,587	1,838	58,940	13.7%	4.9%	0.6%	18.6%
SC 2	50,061	15,682	2,052	65,743	15.8%	4.9%	0.6%	20.7%
SC 3	51,368	14,163	1,893	65,531	16.2%	4.5%	0.6%	20.6%
SC 4	48,632	15,930	2,371	64,562	15.3%	5.0%	0.7%	20.3%
SC 5	48,015	14,668	1,824	62,683	15.1%	4.6%	0.6%	19.7%
Total	241,429	76,030	9,978	317,459	76.1%	23.9%	3.1%	100.0%

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 14 shows of the 65 and over population (76,030 people) and the 85 and over population (9,978 people), the percentage of those age groups that live in each local quintile and in the 85 and over population, significantly more live in the second least deprived local living environment deprivation quintile.

Figure 14: Percentage of Population from Older Age Groups by Local Living Environment Deprivation Quintile



Source: Shropshire Mid-Year Population Estimates 2017, ONS

3.5 Local Income Deprivation Affecting Older People Index

The income domain of the IMD has two sub-indices which are concerned with income deprivation among children and income deprivation affecting older people (IDAOPI). The IDAOPI measures the proportion of all those aged 60 or over who experience income deprivation, which can include those people that are out-of-work or those in work but on low wages (who satisfy means tests). Table 8 shows the population by age group in each of local IDAOPI quintile and the percentage too. Nearly a fifth of the population are in each quintile, but there are significantly less people in the most deprived quintile than the others and there are then significantly less people from the middle quintile than the other three. Just under a quarter of the population are aged 65 and over, with 3% aged 85 and over, with there being significantly less of the over 65 population from the most deprived quintile.

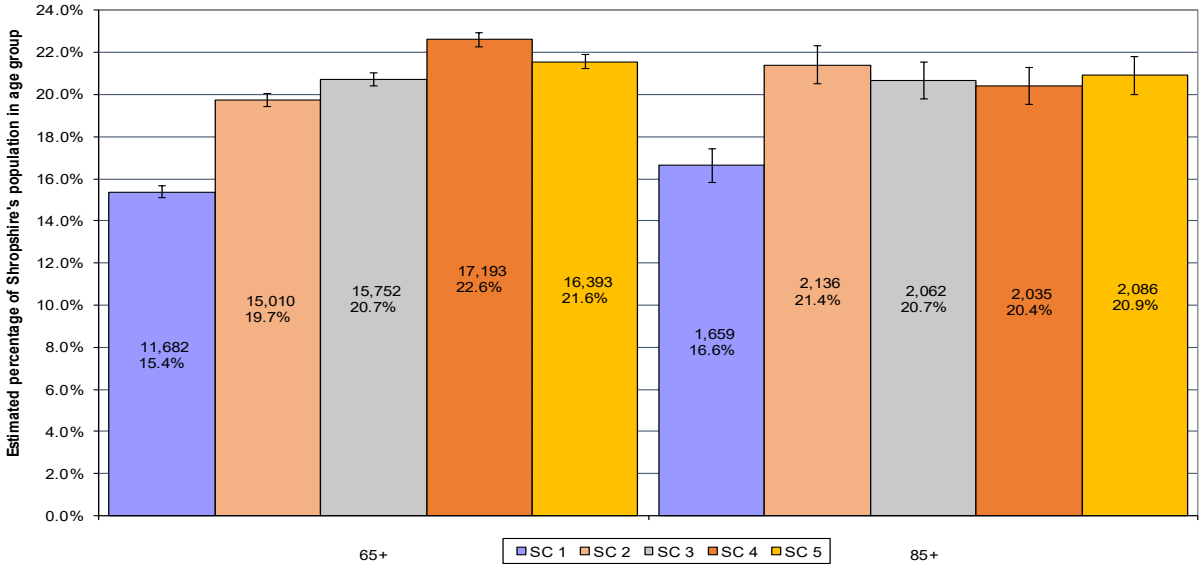
Table 8: Population by Age Group and Local IDAOPI Quintile

	Population Number in each local deprivation quintile				Percentage of Total Population in each local deprivation quintile			
	0-64	**65+**	**85+**	**Total**	**0-64**	**65+**	**85+**	**Total**
SC 1	49,053	11,682	1,659	60,735	15.5%	3.7%	0.5%	19.1%
SC 2	50,396	15,010	2,136	65,406	15.9%	4.7%	0.7%	20.6%
SC 3	46,271	15,752	2,062	62,023	14.6%	5.0%	0.6%	19.5%
SC 4	47,275	17,193	2,035	64,468	14.9%	5.4%	0.6%	20.3%
SC 5	48,434	16,393	2,086	64,827	15.3%	5.2%	0.7%	20.4%
Total	**241,429**	**76,030**	**9,978**	**317,459**	**76.1%**	**23.9%**	**3.1%**	**100.0%**

Source: Shropshire Mid-Year Population Estimates 2017, ONS

Figure 15 shows of the 65 and over population (76,030 people) and the 85 and over population (9,978 people), the percentage of those that live in each local IDAOPI quintile. For both, there are significantly less people in the most deprived quintile.

Figure 15: Percentage of Population from Older Age Groups by Local IDAOPI Quintile



Source: Shropshire Mid-Year Population Estimates 2017, ONS

4 Health Outcomes

4.1 Public Health Outcomes Framework Data: Life Expectancy

The data in this section is from the public health outcomes framework for Shropshire as of November 2018. The indicators show (where available) Shropshire's figures, the West Midlands region, England's and how Shropshire's figures are benchmarked against England's.

Figure 16 shows the average number of years a person would expect to live from birth based on contemporary mortality rates. Males and Females in Shropshire have significantly life expectancy than their equivalents in West Midlands and England.

Figure 16: Life Expectancy at Birth

Indicator	Period	Shropshire Value	Region Value	England Value	Significant Difference to England
Male Life Expectancy at birth	2014-16	80.5	78.8	79.5	Higher
Female Life Expectancy at birth	2014-16	83.7	82.7	83.1	Higher

Source: Public Health Outcomes Framework, 2018

Figure 17 shows the heathy expectancy – that is the average number of years a person would expect to live in good health based on contemporary mortality rates and prevalence of self-reported good health – and again Shropshire male and female residents would expect to live healthier for longer than those in the West Midlands and England.

Figure 17: Healthy Life Expectancy

Indicator	Period	Shropshire Value	Region Value	England Value	Significant Difference to England
Male Life Expectancy at birth	2014-16	65.4	62.6	63.3	Higher
Female Life Expectancy at birth	2014-16	67.6	63.2	63.9	Higher

Source: Public Health Outcomes Framework, 2018

4.2 Public Health England Data: Older People's Health and Wellbeing

The data in this section is from the older people's health and wellbeing section of fingertips data on the Public Health England website as of November 2018. The indicators show (where available) Shropshire's figures, the West Midlands region, England's and how Shropshire's figures benchmarked against England's.

Figure 18 shows some supporting information which have also appeared in previous sections. The first indicator is the percentage of the population that is aged 65 or more, which is 23.9% for Shropshire, 18.4% for West Midlands and 18% for England which means Shropshire has a significantly higher rate than England. The second indicator in this table is the overall IMD2015 score for Shropshire (16.7) which is the 115th most deprived local authority, whilst England's score is 21.8.

Figure 18: Supporting Information

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Supporting information - % population aged 65+	2017	76,030	23.9%	18.4%	18.0%	Higher
Supporting information – IMD 2015 score	2015	-	16.7	-	21.8	Not compared

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 19 detail the average number of years at 65 years old a male and female would survive based on mortality rates for the area, and both men and women in Shropshire would expect to live longer than their compatriots in West Midlands and England. Women in Shropshire are significantly more likely to live longer than men.

Figure 19: Life Expectancy at 65

Indicator	Period	Shropshire Value	Region Value	England Value	Significant Difference to England
Life expectancy at 65 (Male)	2014 – 16	19.2	18.5	18.8	Better
Life expectancy at 65 (Female)	2014 – 16	21.5	21.0	21.1	Better

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 20 shows inequalities in life expectancy at birth for men and women in Shropshire in the period 2014-16 and this shows that for men, those from the least deprived decile would expect to live 3.7 years longer than those from the most deprived decile, while for women, the gap is 2.5 years.

Figure 20: Inequalities in Life Expectancy at Birth

Indicator	Period	Shropshire Value
Inequality in life expectancy at birth LA (Male)	2014 - 16	3.7
Inequality in life expectancy at birth LA (Female)	2014 - 16	2.5

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 21 shows the rate of death among people aged 65 and over per 100,000 population aged 65+ for three of the major diseases for 2014-16. For cardiovascular disease, Shropshire's rate of 1,124.6 per 100,000 is slightly lower than England's and the West Midland's, but it is still statistically similar. For Shropshire both rates per 100,000 for Cancer (1036.4) and Respiratory Disease (557) and significantly lower than the West Midlands and England.

Figure 21: Rate of Death by Cause per 100,000 population Aged 65+

Rate of Deaths from disease among people aged 65 years and over	Period	Shropshire		Region Rate	England Rate	Significant Difference to England
		Count	Rate			
Cardiovascular Disease	2014 - 16	2,441	1,124.6	1165.1	1149.2	Similar
Cancer	2014 - 16	2,243	1,036.4	1132.6	1115.2	Better
Respiratory Disease	2014 - 16	1,206	557.0	634.8	629.1	Better

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 22 shows the rate of suicides per 100,000 population aged 65+. For men there were 25 suicides between 2013-17 which gives Shropshire a rate of 15.1 which

is slightly higher but not significantly so, than West Midlands and England. The data is unavailable for the same period for women and the 2011-15 figures for areas were combined into a regional rate of 3.9 per 100.000 which is similar to England.

Figure 22: Suicide Rate for 65+ per 100,000

Indicator	Period	Shropshire		Region Rate	England Rate	Significant Difference to England
		Count	Rate			
Male Suicide crude rate 65+ years: per 100,000 (5 year average)	2013 - 17	25	15.1	12.7*	12.4	Similar
Female Suicide crude rate 65+ years: per 100,000 (5 year average)	2011 - 15	Data unavailable		3.9	4.4	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 23 shows the percentage of deaths among people aged 65 and over that occur at home, in their care home or religious establishment – this is important for end of life care as it's been found that people would prefer to die in familiar surroundings. Shropshire's figure of 54.1% is significantly higher than West Midlands and England.

Figure 23: Percentage of Deaths in Person's Usual Place of Residence for People aged 65 and over

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
% deaths in usual place of residence among people aged 65 years and over	2016	1,619	54.1%	45.0%	47.2%	Better

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 24 looks at excess winter deaths among persons aged 85 or over between August and July – calculated as a ratio by looking at the average number of deaths that occur over winter against the average number of deaths that occur in the non-winter period – having a low number is better. For Shropshire, the ratio is statistically similar to West Midlands and England for males, females and persons over the most recent year and the last 3 years combined.

Figure 24: Excess Winter Deaths for 85+

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Excess winter deaths 1 year	2016-17	141	30.9%	30.6%	30.8%	Similar
Excess winter deaths Male 1 year	2016-17	65	35.7%	27.4%	27.4%	Similar
Excess winter deaths Female 1 year	2016-17	76	27.7%	32.6%	33.0%	Similar
Excess winter deaths 3 years	2014-17	381	28.1%	28.2%	29.3%	Similar
Excess winter deaths Male 3 years	2014-17	135	26.0%	25.9%	26.8%	Similar
Excess winter deaths Female 3 years	2014-17	246	29.4%	29.7%	30.9%	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 25 shows data that is related to issues outside of health, although it is slightly old. The first is the percentage of households in an area that experience fuel poverty

– this considers income, fuel prices and fuel consumption – in Shropshire in 2016, 13.1% of households – 17,670 out of 135,084 - were determined to be in fuel poverty which is below the West Midlands rate but above England's. The second indicator is the percentage of people aged 65+ who received winter fuel payments in 2011/12 and Shropshire's 98.8% is significantly higher than both the West Midlands and England. The final indicator on the table is the number of people aged 65+ in receipt of attendance allowance, per 1,000 from the department of work and pensions. Shropshire's rate of 151.5 per 1,000 is lower but significantly similar to England, but significantly lower than the West Midlands.

Figure 25: Fuel Poverty and DWP data

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Fuel poverty	2016	17,670	13.1%	13.7%	11.1%	Not compared
% of people aged 65+ receiving winter fuel payments	2011/12	61,470	98.8%	96.4%	96.7%	Better
People aged 65+ in receipt of Attendance Allowance per 1,000	May 2014	10,070	151.5	165.5	149.9	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 26 show three indicators that are related to social care, but again are slightly old. The first shows that the percentage of social care clients aged 65+ receiving self-directed support in Shropshire in 2013/14 was 61% which is significantly lower than West Midlands and England. The second indicator reveals that 99.6% of Shropshire's over 65 population and their carers receive self-directed support, which was significantly better than regionally and nationally. Shropshire has significantly lower rate of older people supported by adult social care throughout the year per 100,000 than West Midlands and England.

Figure 26: Social Care Indicators

Social Care Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
% Social Care clients aged 65+ receiving Self Directed Support	2013/14	1,715	61.0%	67.6%	66.3%	Worse
Proportion of people using social care who receive self-directed support, and those receiving direct payments	2015/16	1,137	99.6%	89.6%	88.6%	Better
Older people (65+) supported throughout the year per 100,000	2013/14	4,315	6,284	9,405	9,781	Lower

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 27 shows that 4.5% of Shropshire's population aged 65+ were recorded as having dementia on the GP practice disease register which is higher than the West Midlands and England. In 2016/17, the directly age standardised rate of emergency admissions for people with a mention of dementia aged 65+ was significantly lower than West Midlands and England which is a positive, however, the trend has been for rates increasing.

Figure 27: Dementia Indicators

Dementia Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Recorded prevalence (aged 65+)	Sep 2017	3,458	4.51%	4.2%	4.3%	Higher
Directly Age Standardised rate of emergency admissions (aged 65+)	2016/17	1,934	2,613	3,645	3,482	Lower

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 28 shows that the pneumococcal (PPV) vaccination coverage among those 65+ for Shropshire was 71.9% - which hasn't significantly changed in the last 8 years – but this is significantly higher than West Midlands and England. The influenza vaccination coverage for those eligible at 65+ was 74.1% in Shropshire in 2017/18 which is again significantly higher than West Midlands and England – Shropshire's figure was significantly higher this year than the two previous years. The third indicator here is from the public health outcomes framework is the percentage of people aged 70 who have received a shingles vaccine and Shropshire's 56.4% is significantly better than the West Midlands and England, however, the percentage vaccinated has fallen significantly each year since introduction.

Figure 28: Vaccination Coverage against Disease

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Population vaccination coverage – PPV (aged 65+)	2017/18	44,450	71.9%	68.7%	69.5%	Higher
Population vaccination coverage - Flu (aged 65+)	2017/18	57,132	74.1%	71.8%*	72.6%	Higher
Population vaccination coverage – Shingles (70 years old)	2016/17	2,095	56.4%	47.7%	48.3%	Higher

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 29 shows the age standardised rate of hip fractures among people 65 and over. Shropshire's rate is similar to England's and has come down from the two previous years, although not significantly. The male rate is significantly better than England and West Midlands and has again come down from previous years, but the female rate is significantly higher than the male rate in all three areas, and Shropshire's female rate is statistically similar to West Midlands and England.

Figure 29: Emergency Hospital Admissions for Hip Fractures People Aged 65 and Over, Directly Age Standardised Rate per 100,000

Indicator	Period	Shropshire		Region Rate	England Rate	Significant Difference to England
		Count	Rate			
Hip fractures in people aged 65 and over	2016/17	407	550	Not stated	575	Similar
Hip fractures in people aged 65 and over (Male)	2016/17	93	311	424	408	Better
Hip fractures in people aged 65 and over (Female)	2016/17	314	724	704	693	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 30 shows the cumulative percentage of the eligible population aged 40-74 who have received an NHS health check over 5 years – health checks can help identify early signs of poor health to prevent diseases – Shropshire's figures are significantly worse than both the region and England's.

Figure 30: Percentage of Eligible Population Who Received a Health Check

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Cumulative percentage of the eligible population aged 40-74 who received an NHS Health check	2013/14 - 17/18	42,829	43.4%	48.2%	44.3%	Worse

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 31 shows the crude rate per 100,000 of sight loss in people aged 65+ due to age related degeneration (AMD) - if take up of sight tests is improved than this could detect problems that can cause sight loss. Shropshire's rate is statistically similar to West Midlands and Shropshire.

Figure 31: Rate of Sight Loss Due to Age Related Macular Degeneration

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Preventable sight loss related to AMD, rate per 100,000	2016/17	68	91.5	87.4*	111.3	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 32 shows indicators that are related to care outside of hospital, although these are from 2013/14. Shropshire's rate per 100,000 of permanent admissions to residential and nursing homes for people aged 65+ was significantly lower than England's. The next measure shows the proportion of older people offered reablement services following discharge with Shropshire's 1.7% (155 patients) being significantly worse than West Midlands and England. The final indicator shows the proportion of those older people offered reablement services following discharge (155 patients), who were still at home 91 days after discharge – and Shropshire's figure of 77.4% (120 people) was similar to West Midlands and England – this shows the impact of rehabilitation and support.

Figure 32: Care outside Hospital in 2013/14

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Permanent admissions to residential and nursing care homes per 100,000 aged 65+	2013/14	500	728	663	651	Worse
The proportion of older people aged 65 and over offered reablement services following discharge from hospital.	2013/14	155	1.7%	3.4%	3.3%	Worse

Indicator	Period	Shropshire		Region Value	England Value	Significant Difference to England
		Count	Value			
Proportion of those older people offered reablement who were still at home 91 days after discharge	2013/14	120	77.4%	82.4%	82.5%	Similar

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 33 shows the results of the 2013/14 crime survey for England and Wales which asked older people's perception of their safety in difference situations – the vast majority of people felt safe, however, there is a large drop off between the older people who felt safe during the day and at night.

Figure 33: Crime Survey for England and Wales 2013/14

Indicator	England Value
Older people's perception of community safety - safe in local area during the day	96.9%
Older people's perception of community safety - safe in local area after dark	62.8%
Older people's perception of community safety - safe in own home at night	93.3%

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

Figure 34 shows that Shropshire has a significantly higher health related quality of life for older people than the West Midlands and England – this is an average health status score from responses to a GP patient survey which looks at mobility, self-care, usual activities, pain and anxiety

Figure 34: Health Related Quality of Life for Older People

Indicator	Period	Shropshire Value	Region Value	England Value	Significant Difference to England
Health related quality of life for older people	2016/17	0.761	0.721	0.735	Better

Source: Older People's Health and Wellbeing Profile, Public Health England. Fingertips Data, 2018

5 Shropshire 2016/17 QOF Profile

5.1 Introduction

The Quality and Outcomes Framework (QOF) was introduced as part of the new General Medical Services (GMS) contract on 1 April 2004. The objective of the QOF is to improve the quality of care patients are given by rewarding practices for the quality of care they provide to their patients - an incentive payment scheme. In October 2017, NHS Digital published the results of the QOF 2016-17. Among the various indicators published were prevalence rates that were based on the number of patients recorded on the disease registers as a percentage of the total list size.

In addition, NHS Digital produced prevalence rates in some diseases based on estimates of appropriate age-banded list size information of clinical registers:

- Rheumatoid Arthritis registers are based on patients aged 16 and over.
- Diabetes registers are based on patients aged 17 and over.
- Obesity, epilepsy, chronic kidney disease and depression registers are based on patients aged 18 and over.
- Osteoporosis registers are based on patients aged 50 and over
- Cardio-vascular disease registers are based on patients aged between 30-74

There are some points to consider when looking at the prevalence rates:

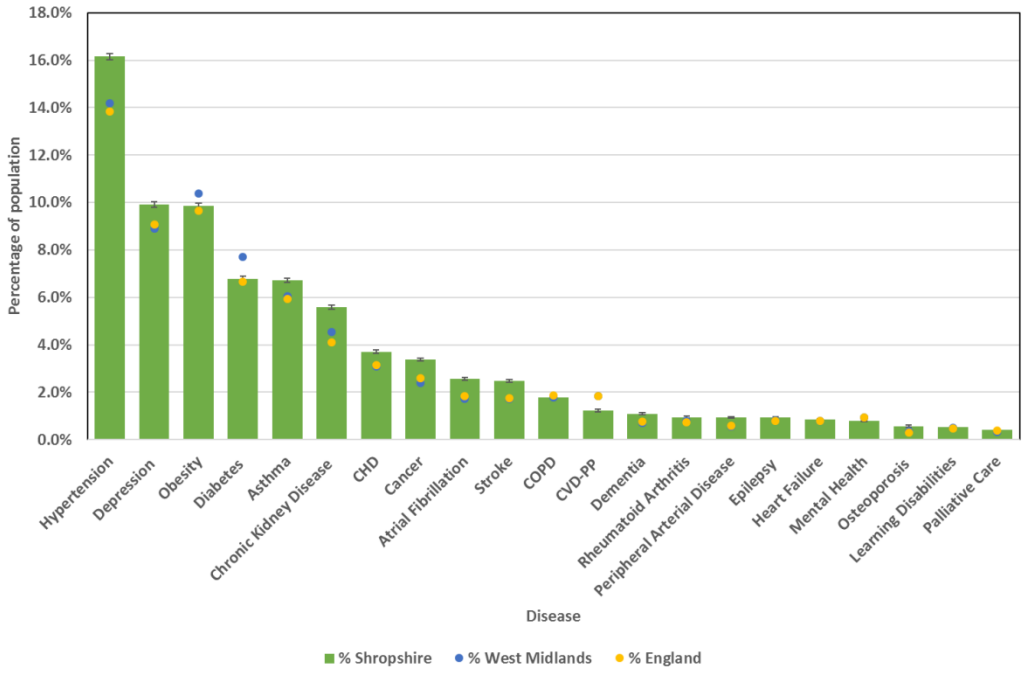
- The prevalence figures are based on the practices recording diseases properly on their registers, so it is possible that in some areas prevalence could be lower due to poor recording on the disease registers rather than actual prevalence.
- Secondly there may be some differences between these rates and actual prevalence rates because of coding or definitional issues.
- Thirdly, there can be definitional differences, for example when comparing QOF prevalence with expected prevalence rates using public health models, i.e. to be on the QOF obesity register, patients need to be aged 18 or over, and have a body mass index greater than or equal to 30 recorded in the previous 15 months.
- Fourthly this looks at prevalence in the population and doesn't take into account the different demographics of the areas i.e. some might have a far higher proportion of their population aged over 70, compared to others, which would mean those CCGs had higher prevalence in some areas.

5.2 Prevalence of Disease in Shropshire Registered Population in QOF register compared to the NHS England West Midlands sub-region and England.

Figure 35 shows the prevalence of diseases on the QOF register in 2016/17 in Shropshire CCG's registered population across the 21 disease areas on the QOF in comparison to NHS England West Midlands (blue dot) and England (yellow dot). In Shropshire, hypertension was the disease with the highest prevalence on the disease register with 16.2%, which was significantly higher than the West Midlands and England. Second highest were depression (9.9%) and obesity (9.8%) which were proportionately similar in Shropshire; however, obesity in Shropshire was

significantly higher than England but lower than the West Midlands and depression was significantly higher in Shropshire compared to either England or the West Midlands. Prevalence was significantly higher in Shropshire compared to either the West Midlands or England in several QOF indicators except for mental health and CVD-PP, which were significantly lower in Shropshire; COPD prevalence in Shropshire was significantly lower than England whilst diabetes was significantly higher in the West Midlands compared to Shropshire.

Figure 35: Shropshire CCG Prevalence of Disease in registered population in QOF Register, 2016-17



Data source: NHS Digital 2016-17

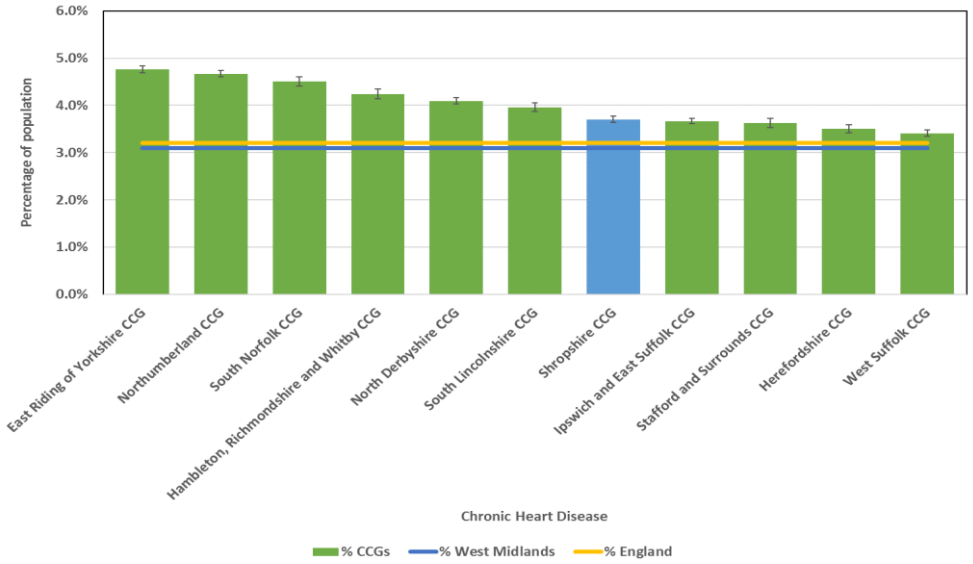
5.3 Prevalence of Disease in Shropshire Registered Population in QOF register, compared to similar CCGs

Subsequent analysis compares Shropshire's QOF prevalence to the West Midlands commissioning region and England as well as to ten other similar CCG's. According to the office of national statistics Shropshire CCG's population and geography makes it similar to several other CCGs, with the first 10 being:

- East Riding of Yorkshire CCG
- Hambleton, Richmondshire and Whitby CCG
- Northumberland CCG
- North Derbyshire CCG
- Stafford and Surrounds CCG
- Herefordshire CCG
- South Lincolnshire CCG
- Ipswich and East Suffolk CCG
- South Norfolk CCG
- West Suffolk CCG

Figure 36 shows the prevalence of coronary heart disease on the QOF register in 2016/17. Shropshire (3.7%), was significantly higher than the West Midlands region and England, as were all the similar CCGs. Shropshire's prevalence was similar to two other CCGs – Staffordshire & Surrounds and Ipswich & East Suffolk.

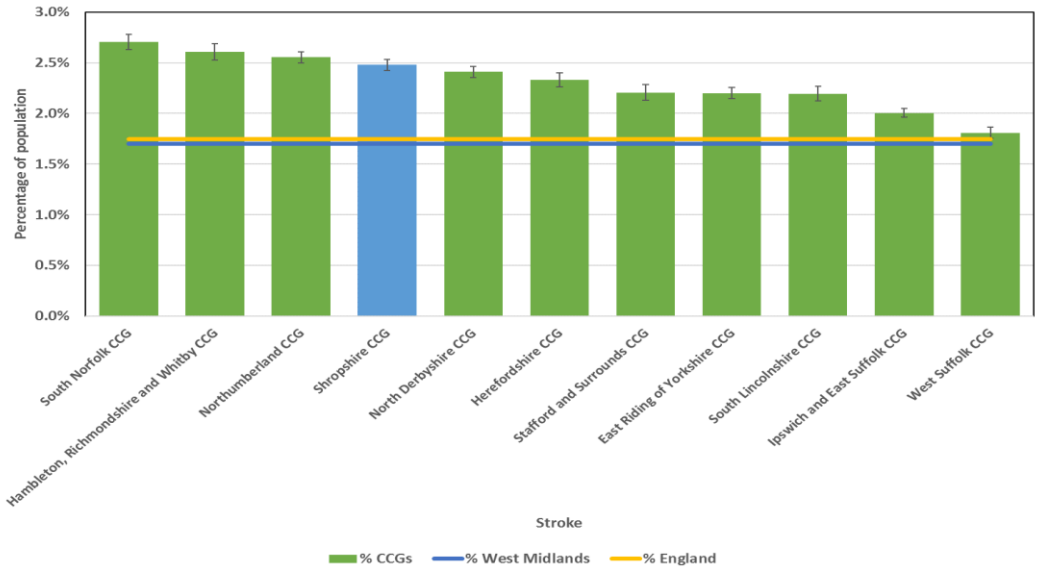
Figure 36: Shropshire CCG Prevalence of Coronary Heart Disease in registered population on QOF Register 2016/17



Data source: NHS Digital 2016-17

Figure 37 shows the prevalence of Stroke or Transient Ischaemic Attacks (TIA) on the QOF register in 2016/17. Shropshire's prevalence of 2.5% was significantly higher than England and the West Midlands prevalence as were all of the similar CCGs. Shropshire's prevalence was statistically similar to three similar CCGs.

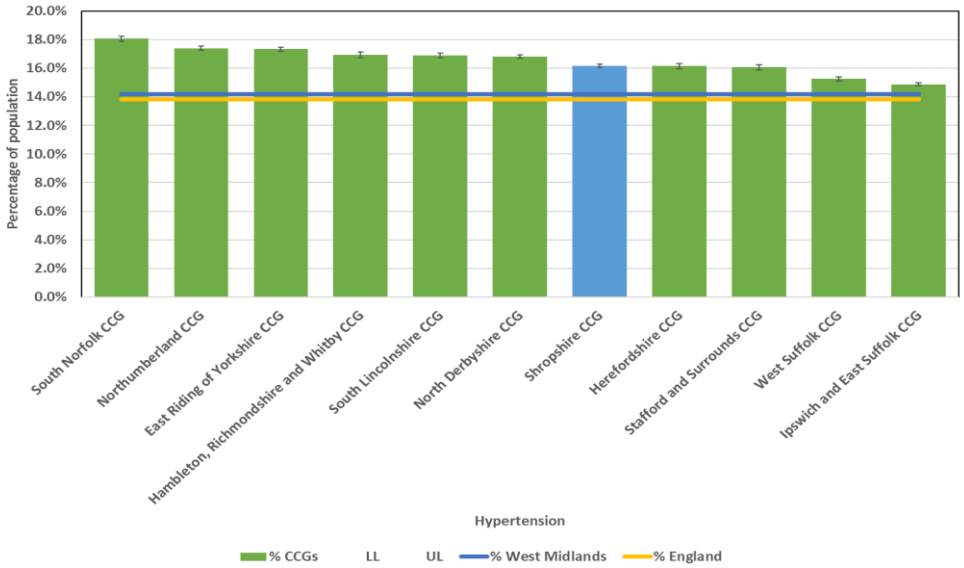
Figure 37: Shropshire CCG Prevalence of Stroke or TIA in registered population on the QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 38 shows Shropshire's prevalence of hypertension on the QOF register in 2016/17 was 16.2%, which was significantly higher than the West Midlands region and England (as were all of the similar CCGs), but this was similar to Staffordshire & Surrounds and Herefordshire CCGs.

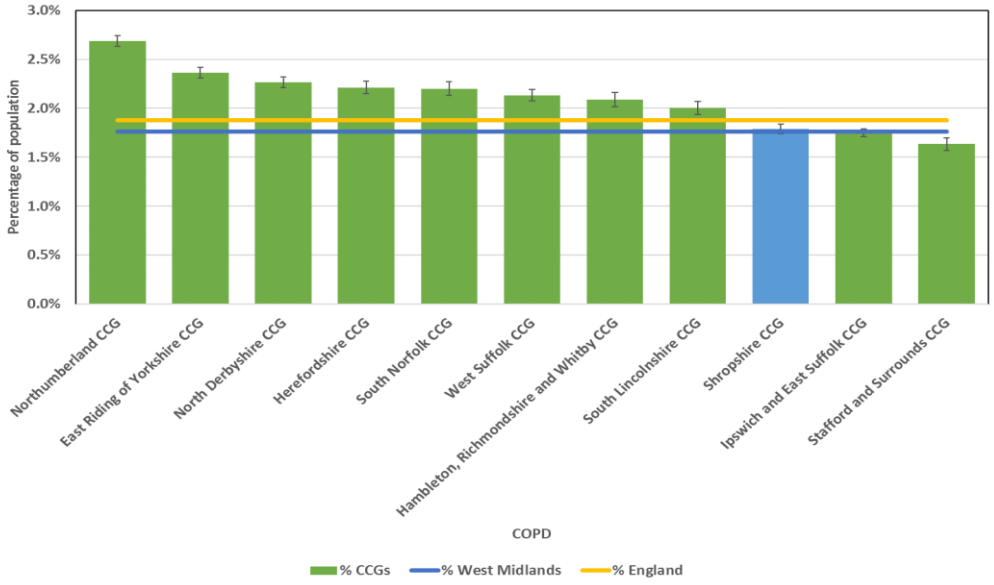
Figure 38: Shropshire CCG Prevalence of Hypertension in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 39 shows the prevalence of COPD on the QOF register in 2016/17 and Shropshire's prevalence (1.8%) was similar to the West Midlands region but lower than England but statistically similar to Ipswich & East Suffolk CCG.

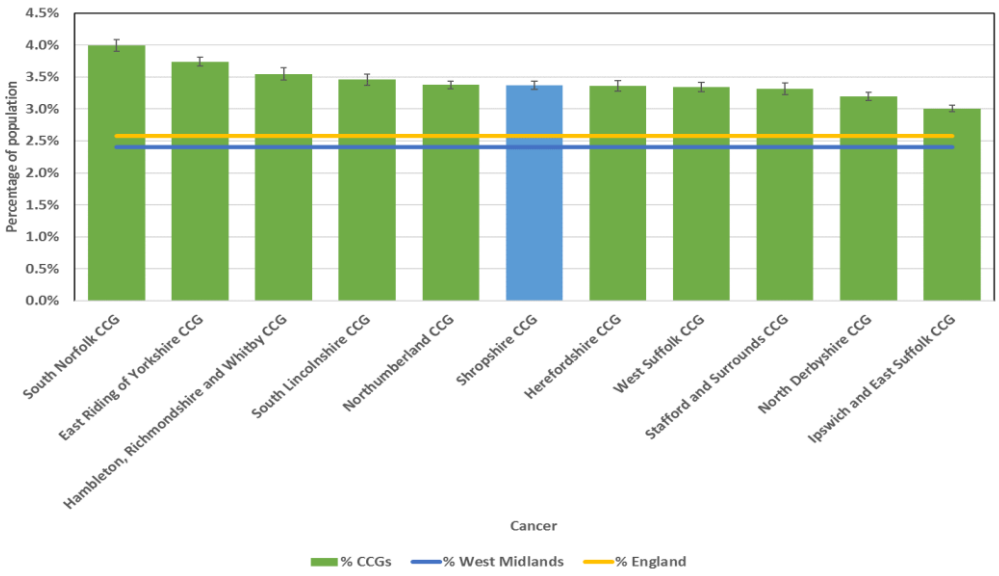
Figure 39: Shropshire CCG Prevalence of COPD in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 40 shows the prevalence of cancer on the QOF register in 2016/17 and Shropshire's prevalence of 3.4% was significantly higher than both the West Midlands region and England, but statistically similar to five similar CCGs.

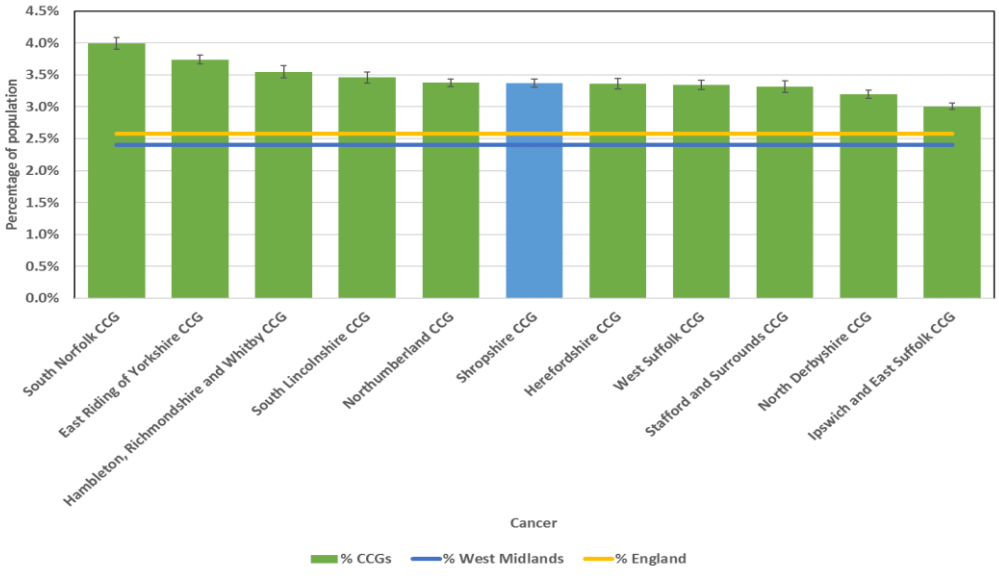
Figure 40: Shropshire CCG Prevalence of Cancer in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

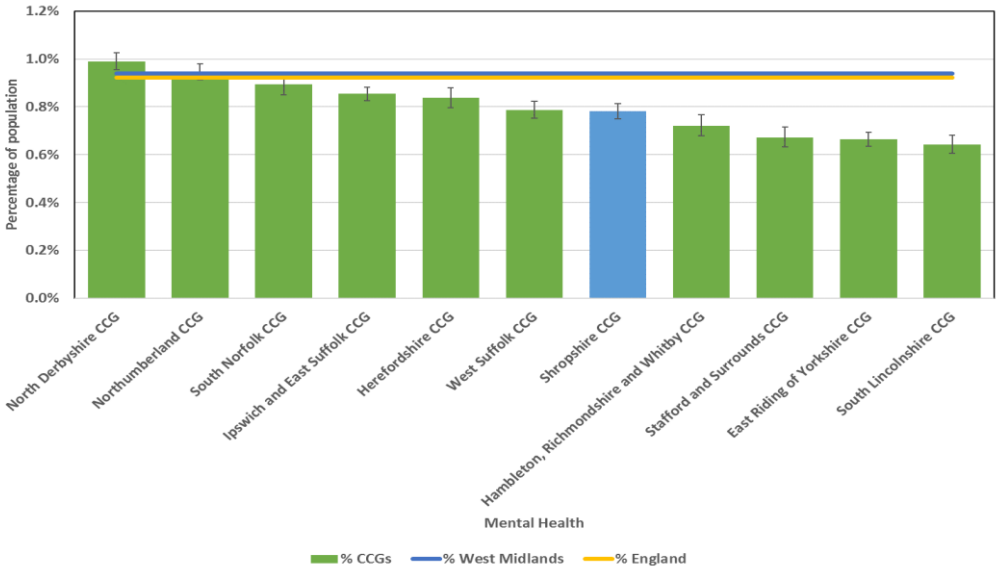
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.

Figure 41: Shropshire CCG Prevalence of Mental Health in registered population on QOF register, 2016-17 2016-17



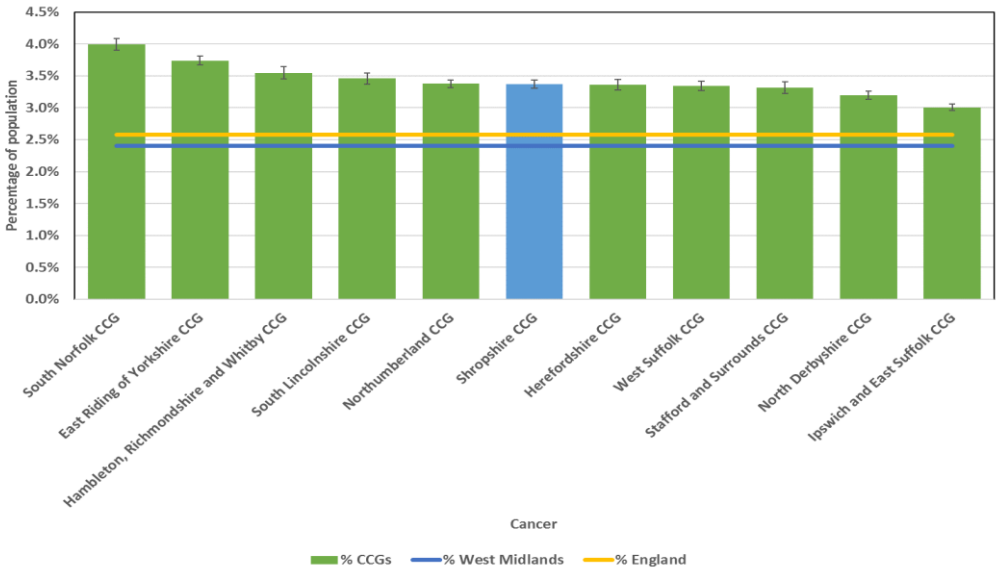
Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.



Data source: NHS Digital 2016-17

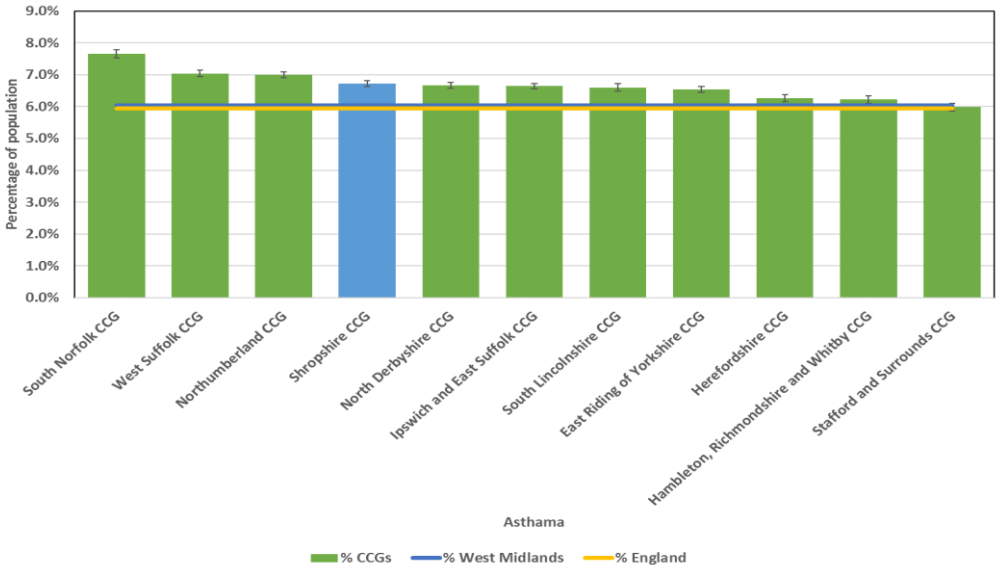
Figure 42 2016-17



Data source: NHS Digital 2016-17

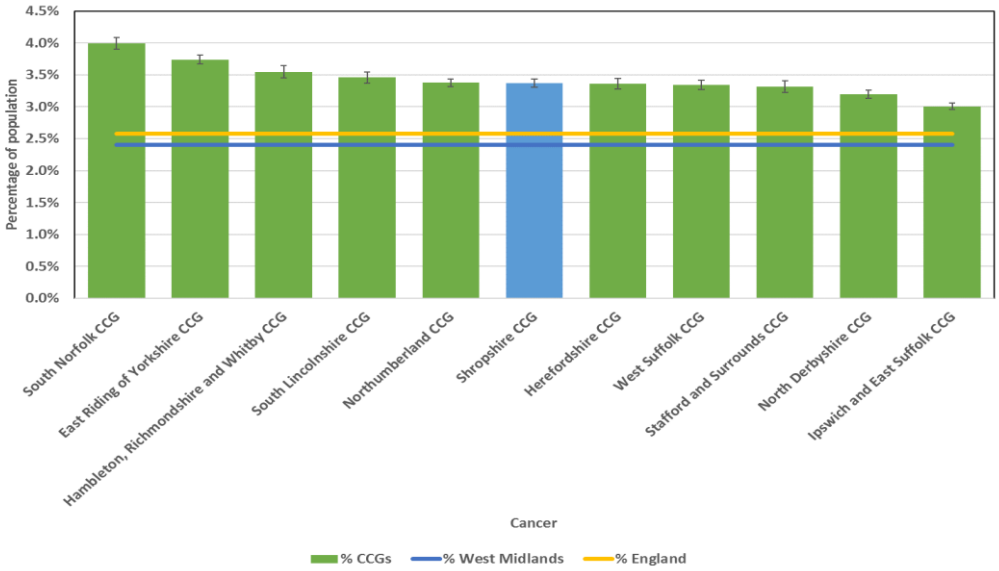
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows asthma prevalence in 2016/17, and Shropshire's prevalence (6.7%) was significantly higher than both the West Midlands region and England as were nine of the similar CCGs. Prevalence was similar to three similar CCGs - Ipswich & East Suffolk, North Derbyshire and South Lincolnshire.

Figure 42: Shropshire CCG Prevalence of Asthma in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 43 2016-17

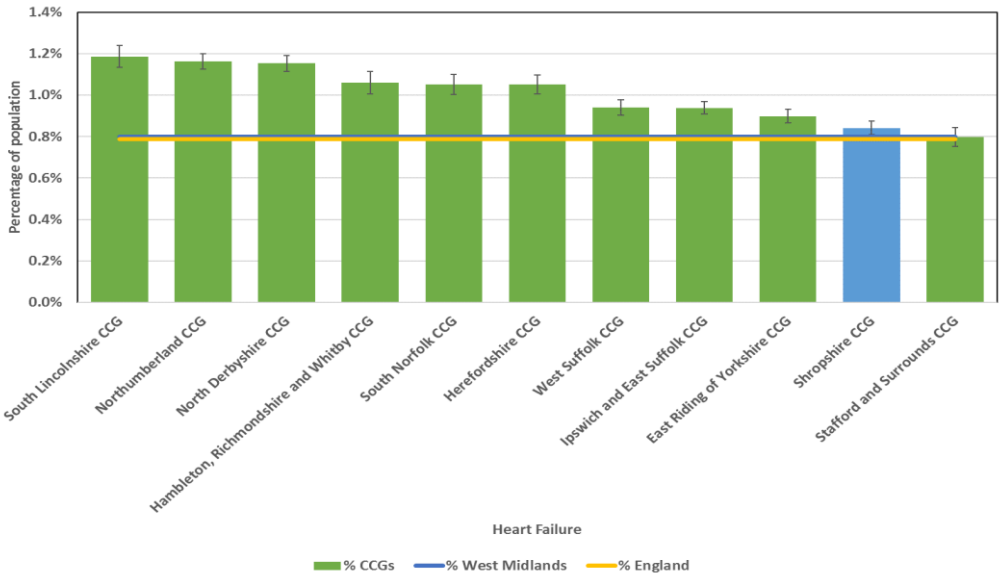


Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.

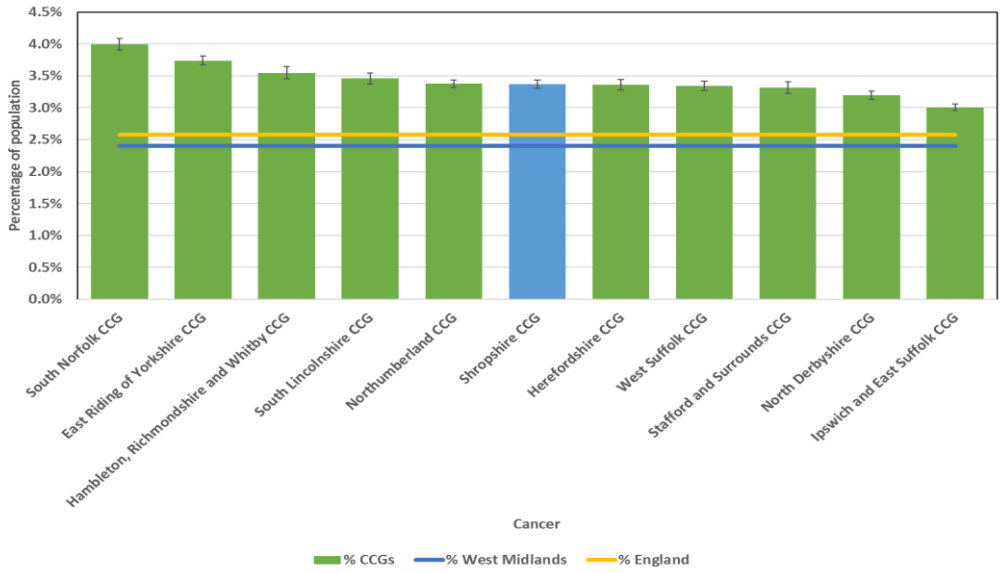
shows the QOF register had Shropshire's prevalence of heart failure in 2016/17 as 0.8%, which was significantly above the West Midlands and England, but statistically similar to Stafford & Surrounds and East Riding of Yorkshire CCGs.

Figure 43: Shropshire CCG Prevalence of Heart Failure in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

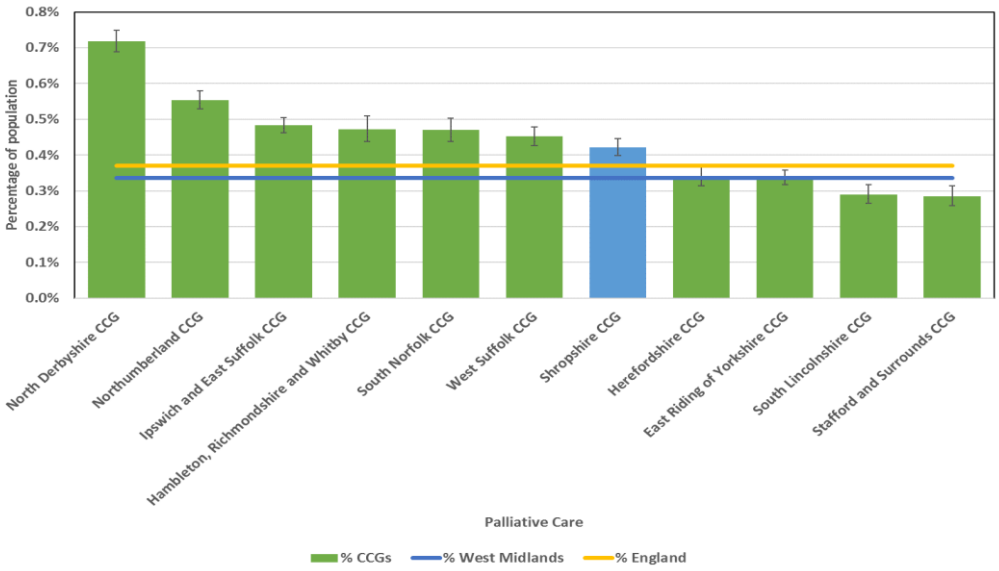
Figure 44 2016-17



Data source: NHS Digital 2016-17

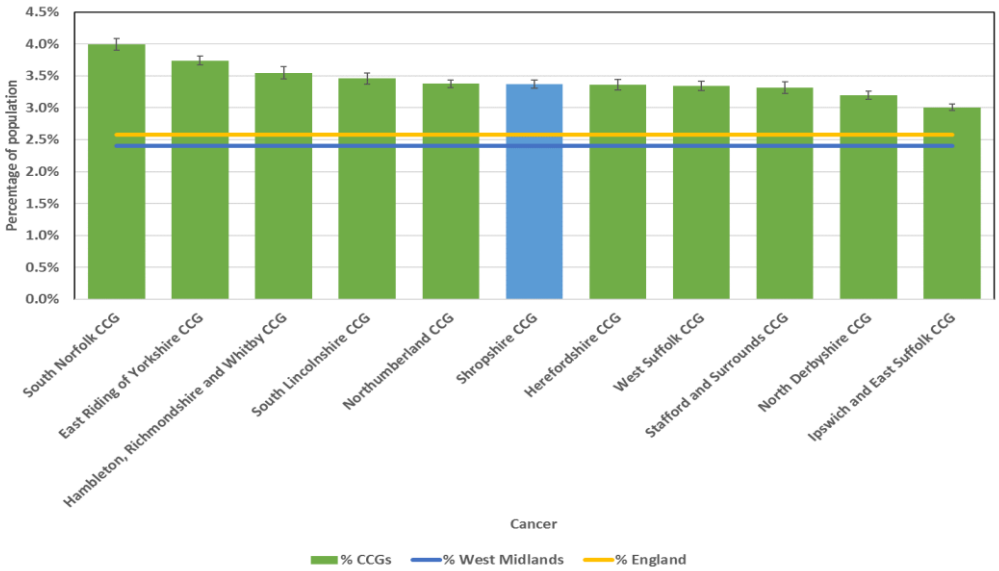
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows the prevalence of palliative care on the QOF register in 2016/17. Shropshire's rate of 0.4% was significantly higher than England and the West Midlands. Shropshire was similar to South Norfolk, Hambleton, Richmondshire & Whitby and West Suffolk CCGs.

Figure 44: Shropshire CCG Prevalence of Palliative Care in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

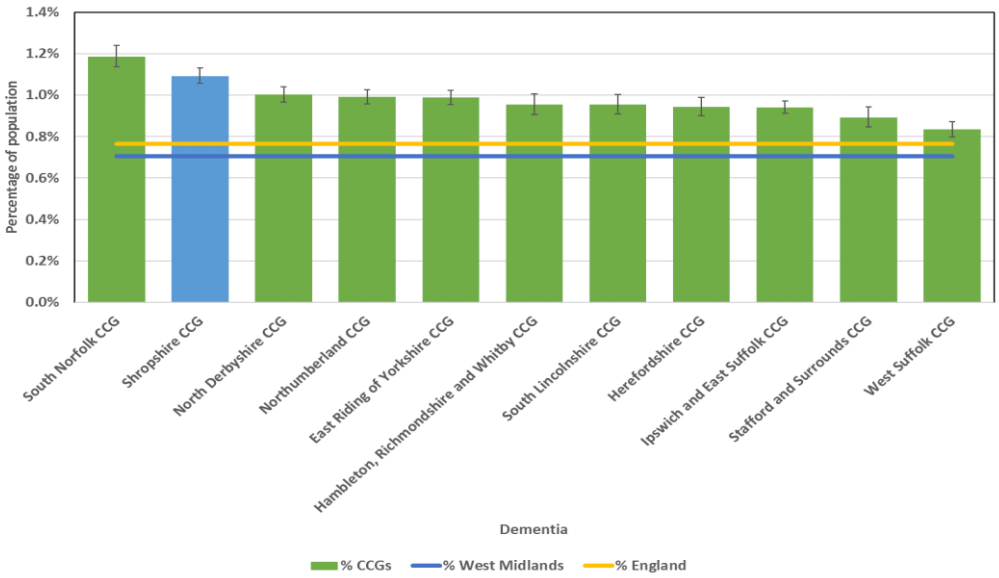
Figure 45 2016-17



Data source: NHS Digital 2016-17

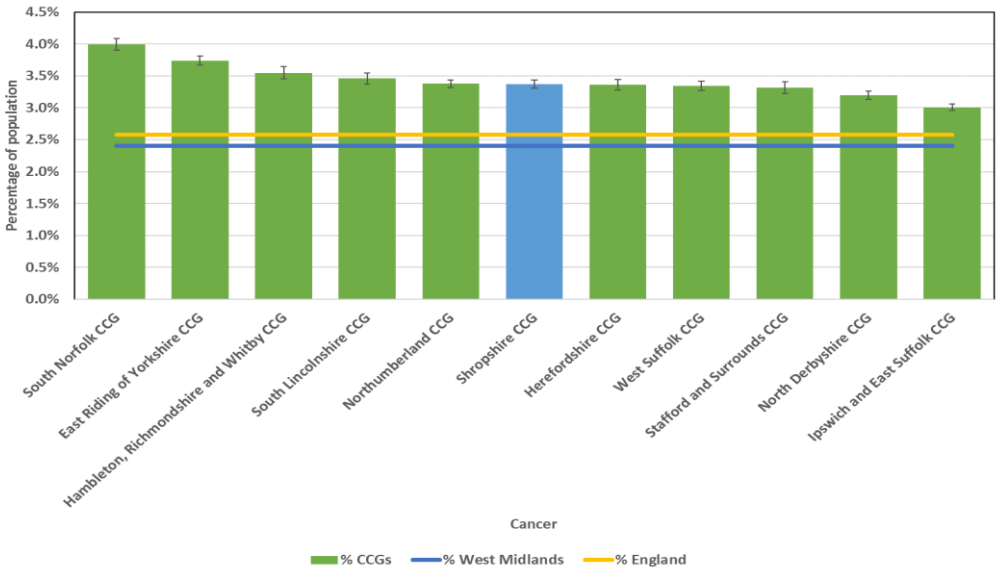
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows that Shropshire's prevalence of dementia on the QOF register in 2016/17 was 1.1%, which was significantly higher than the West Midlands region, England. Nine of the 10 CCGs were lower than the Shropshire prevalence.

Figure 45: Shropshire CCG Prevalence of Dementia Care in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

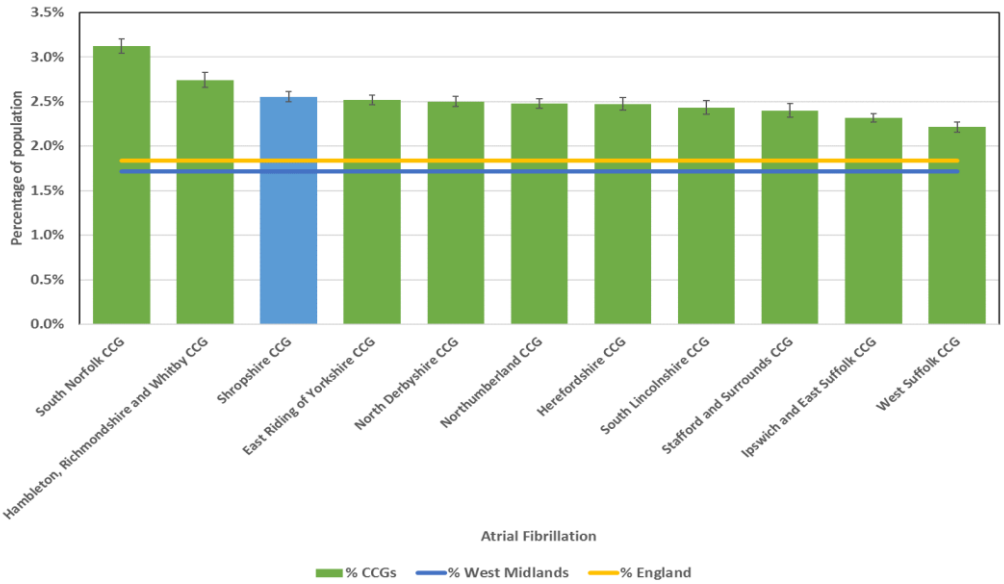
Figure 46 2016-17



Data source: NHS Digital 2016-17

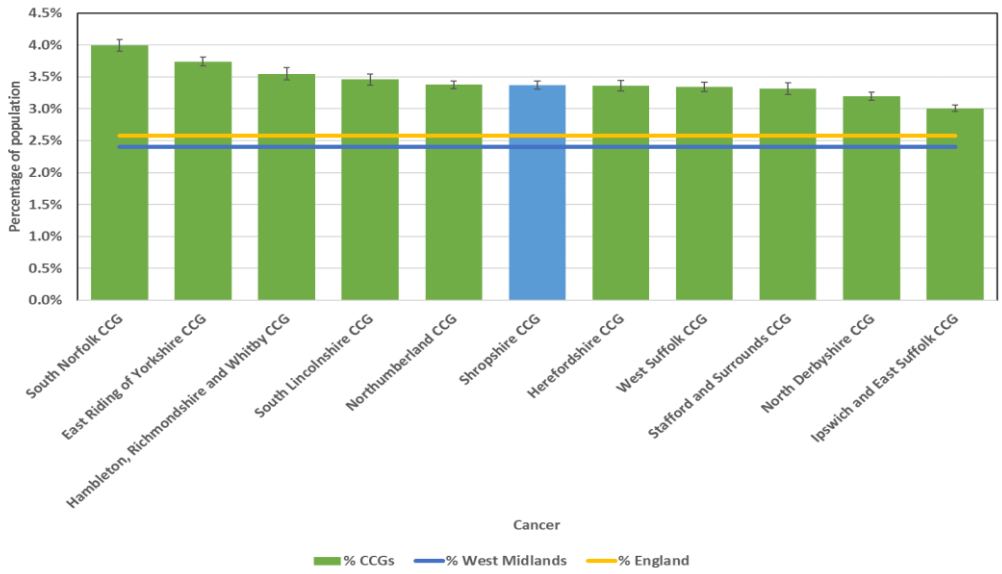
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows atrial fibrillation prevalence on the QOF register in 2016/17. Shropshire's prevalence of 2.6% was significantly higher than both the West Midlands region and England. Five CCGs were similar to the Shropshire prevalence; whilst three were significantly lower and two were significantly higher.

Figure 46: Shropshire CCG Prevalence of Atrial Fibrillation in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

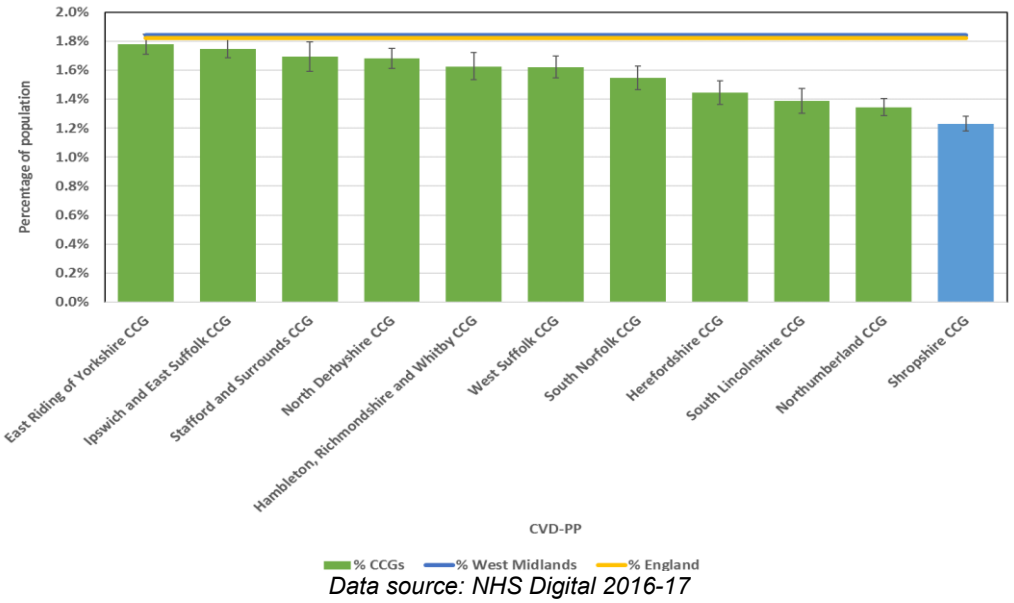
Figure 47 2016-17



Data source: NHS Digital 2016-17

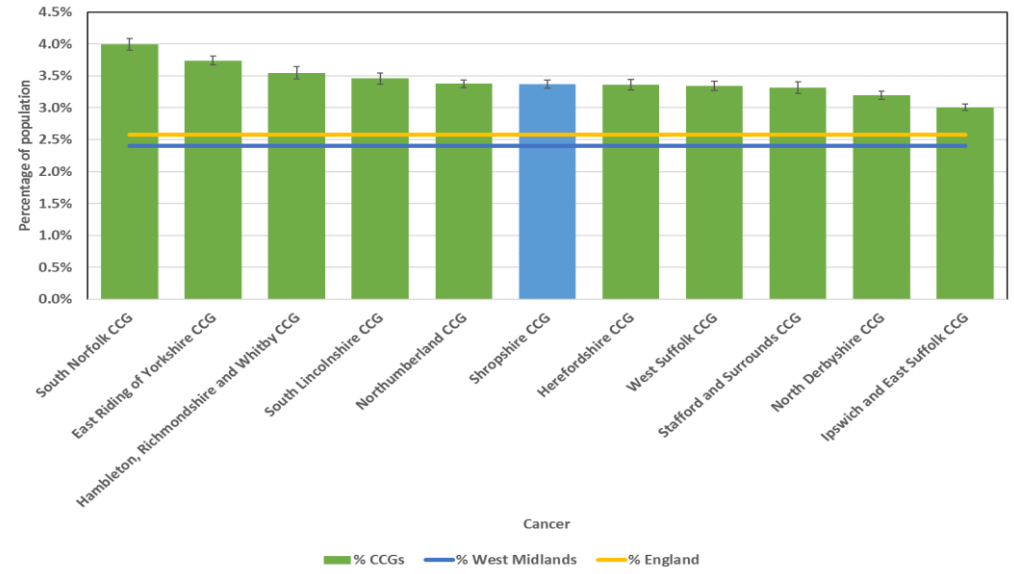
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows the prevalence of cardiovascular disease primary prevention on the QOF register in 2016/17. Shropshire's rate of 1.2% was significantly lower than the West Midlands region, England and all the similar CCGs.

Figure 47: Shropshire CCG Prevalence of Cardiovascular disease primary prevention in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

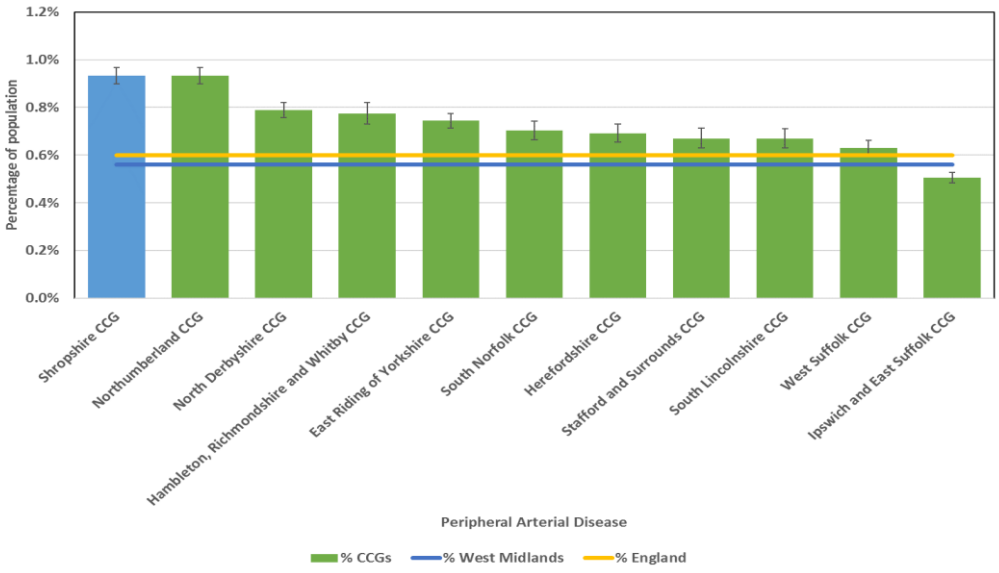
Figure 48 2016-17



Data source: NHS Digital 2016-17

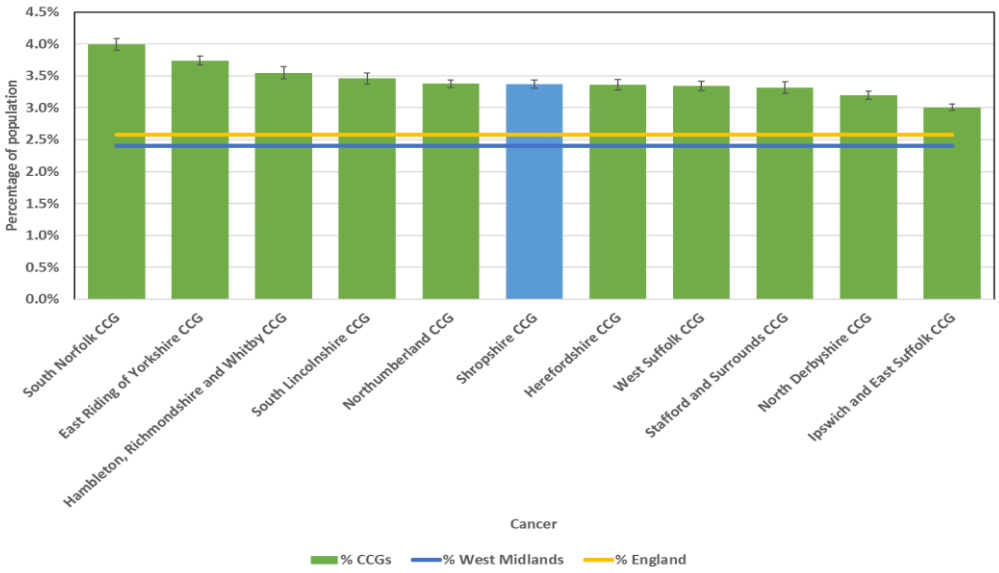
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
 shows the prevalence of peripheral arterial disease on the QOF register in 2016/17. Shropshire's prevalence (0.9%) was similar to Northumberland but significantly higher than the West Midlands, England and nine of the similar CCGs.

Figure 48: Shropshire CCG Prevalence of Peripheral Arterial Disease in registered population on QOF Register, 2016-17



Data source: NHS Digital 2016-17

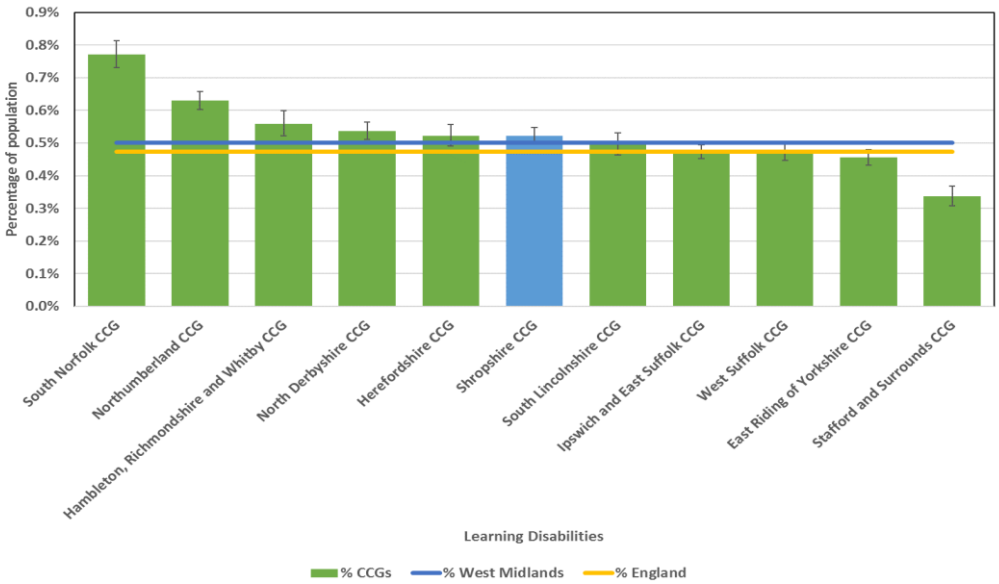
Figure 49 2016-17



Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
shows the learning difficulties prevalence on the QOF register among the 18+ population in 2016/17. Shropshire's prevalence (0.5%) was similar to the West Midlands, England as well as six of the other similar CCGs.

Figure 49: Shropshire CCG Prevalence of Learning Difficulties in estimated population on QOF Register, 2016-17

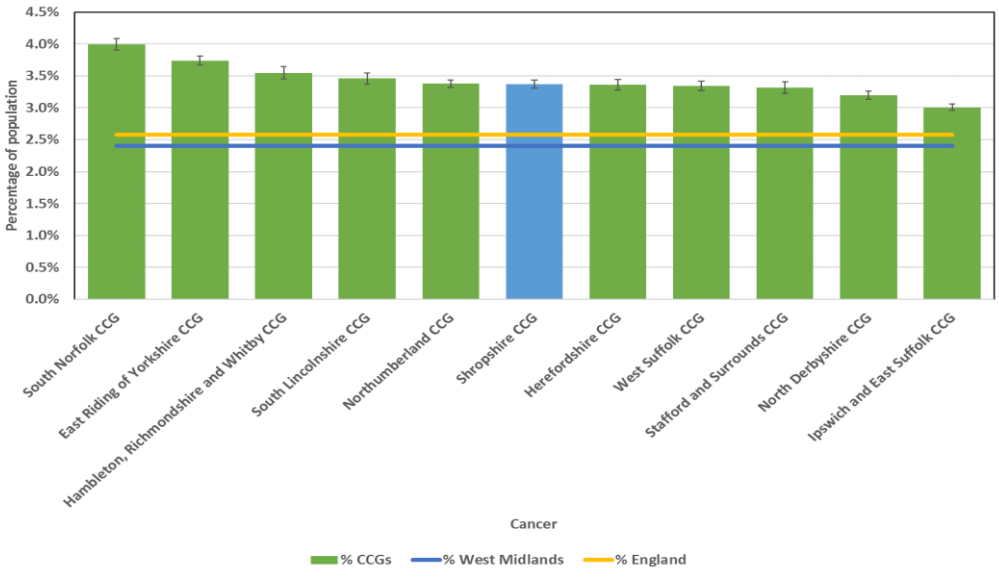


Data source: NHS Digital 2016-17

6 Prevalence of Disease in QOF register compared to similar CCGs in certain age specific populations

The rest of the QOF indicators look at the prevalence on disease registers but instead of looking at the whole of the registered population look at the estimated population of a certain age.

Figure 50 2016-17

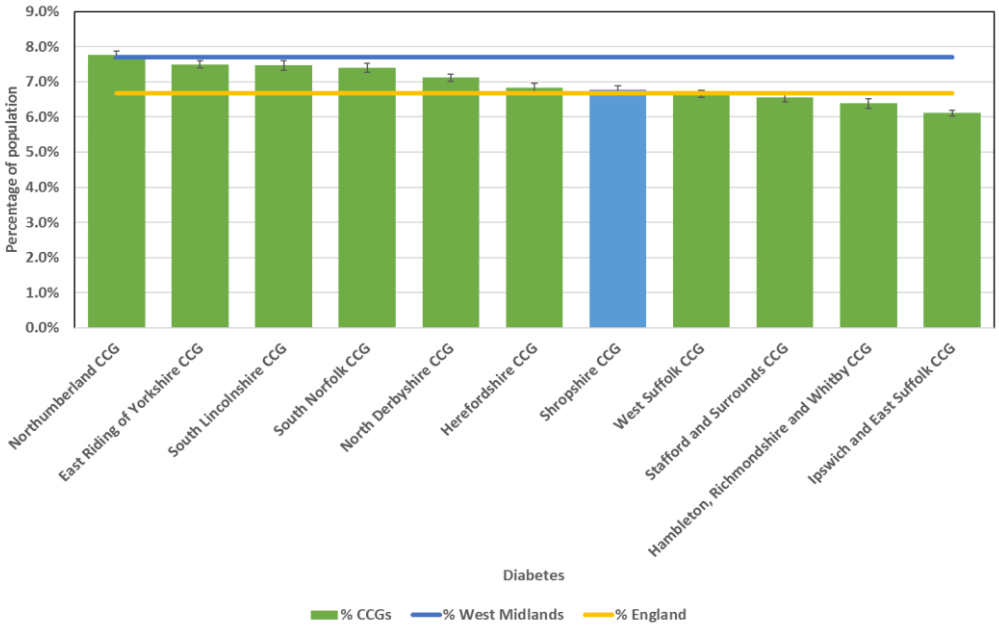


Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.

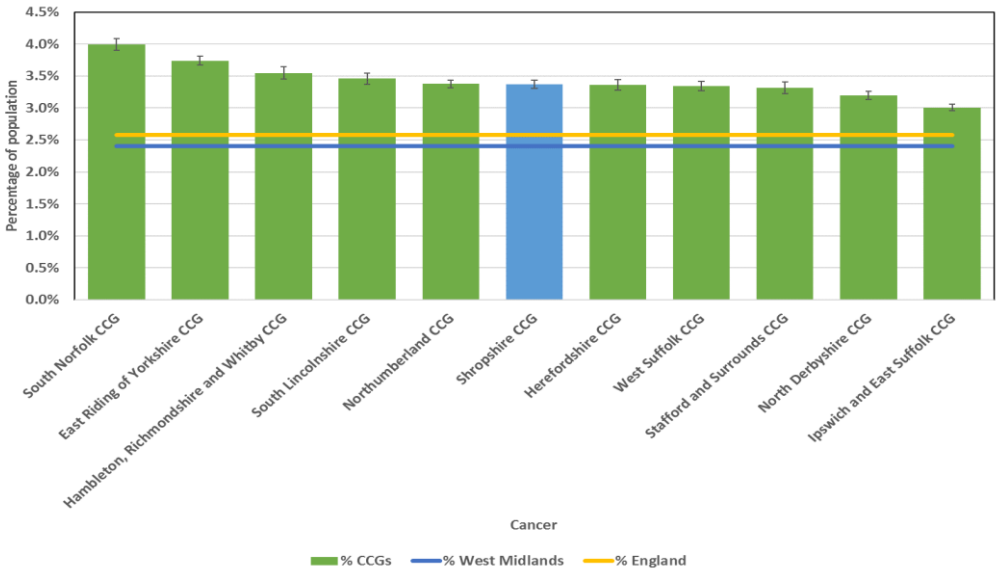
shows the prevalence of diabetes on the QOF register among the estimated population aged 17 years plus in 2016/17. Shropshire's prevalence was 6.8% which was significantly lower than the West Midlands region but significantly higher than England. Three similar CCGs were similar to the Shropshire prevalence, and two were significantly lower - while, five CCGs were significantly higher.

Figure 50: Shropshire CCG Prevalence of Diabetes Mellitus in estimated population aged 17+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

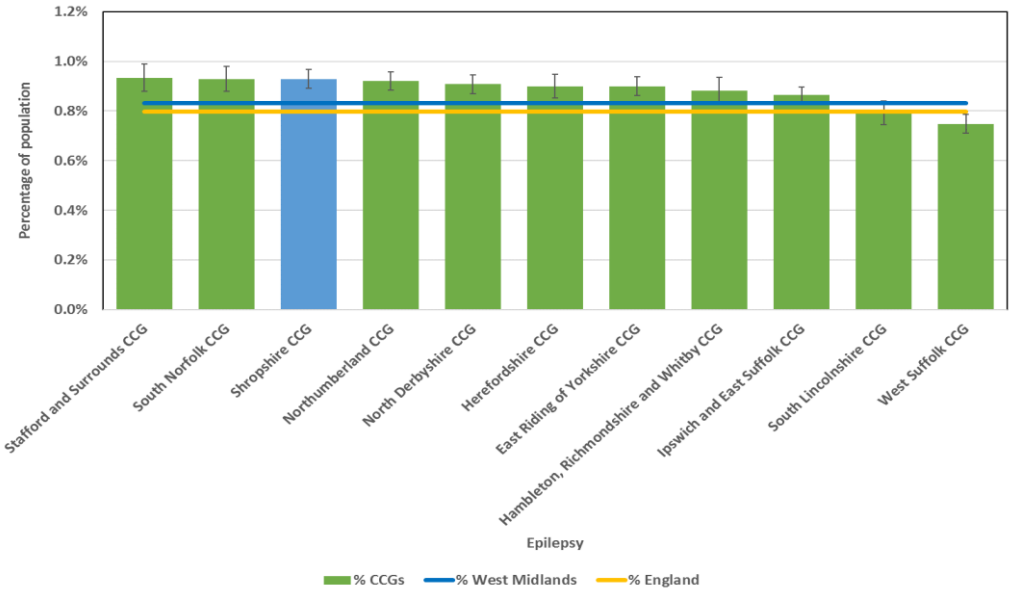
Figure 51 2016-17



Data source: NHS Digital 2016-17

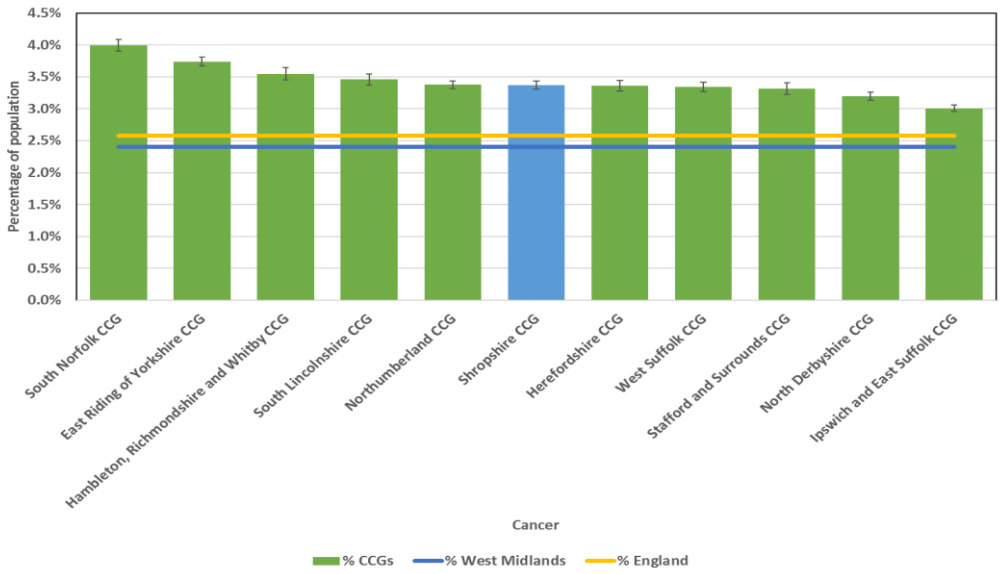
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
shows the prevalence of epilepsy on the QOF register among the 18+ population in 2016/17. Shropshire's prevalence (0.9%) was significantly higher than the West Midlands and England, but similar to eight other similar CCGs.

Figure 51: Shropshire CCG Prevalence of Epilepsy in estimated population aged 18+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

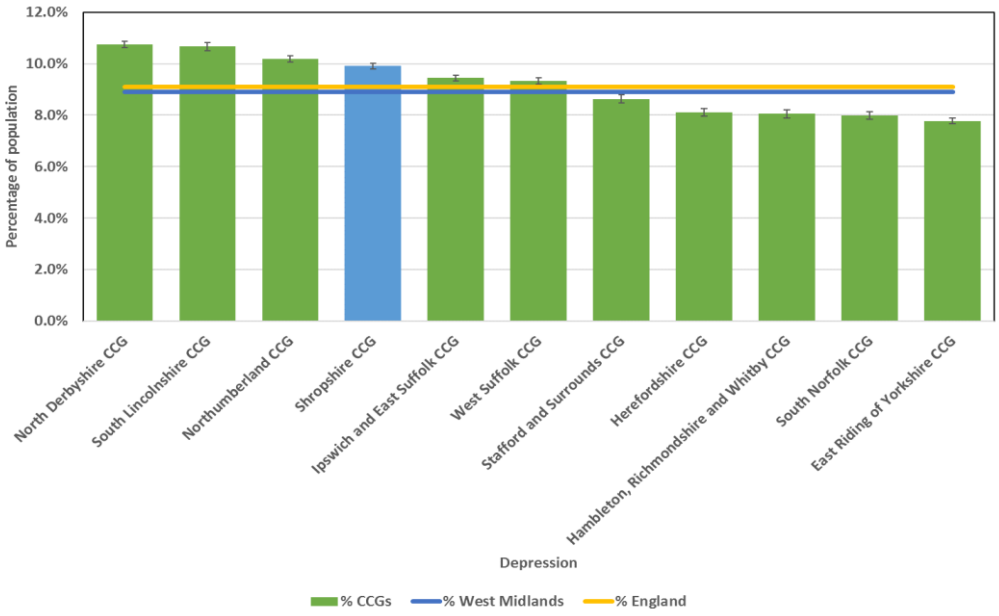
Figure 52 2016-17



Data source: NHS Digital 2016-17

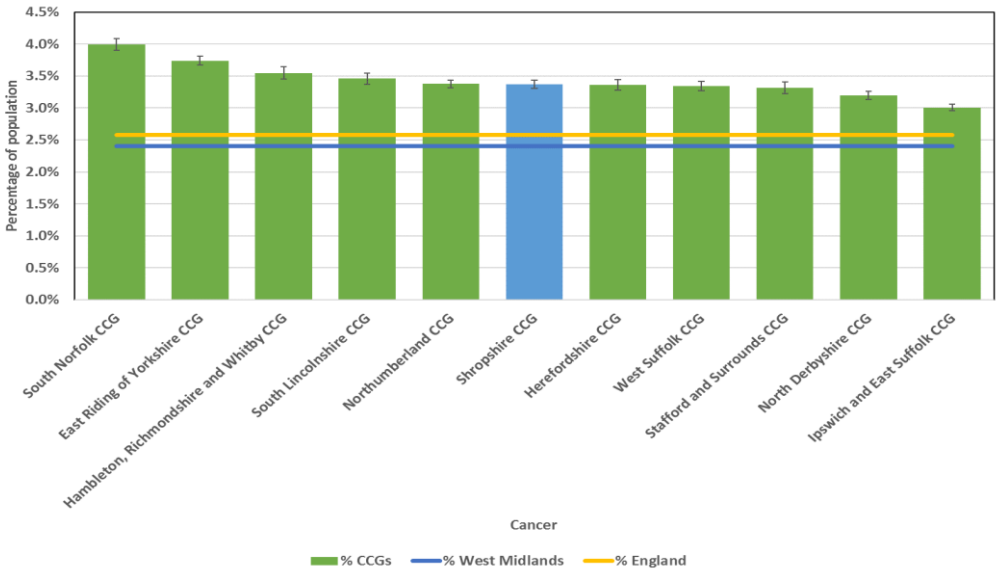
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
shows the prevalence of depression on the QOF register in 2016/17 in Shropshire's 18+ population. Shropshire's rate of 9.9% was significantly higher than England the West Midlands region as were five of the similar CCGs. Seven CCGs were significantly lower than the Shropshire prevalence with Northumberland, North Derbyshire and South Lincolnshire significantly higher.

Figure 52: Shropshire CCG Prevalence of Depression in estimated population aged 18+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 53 2016-17

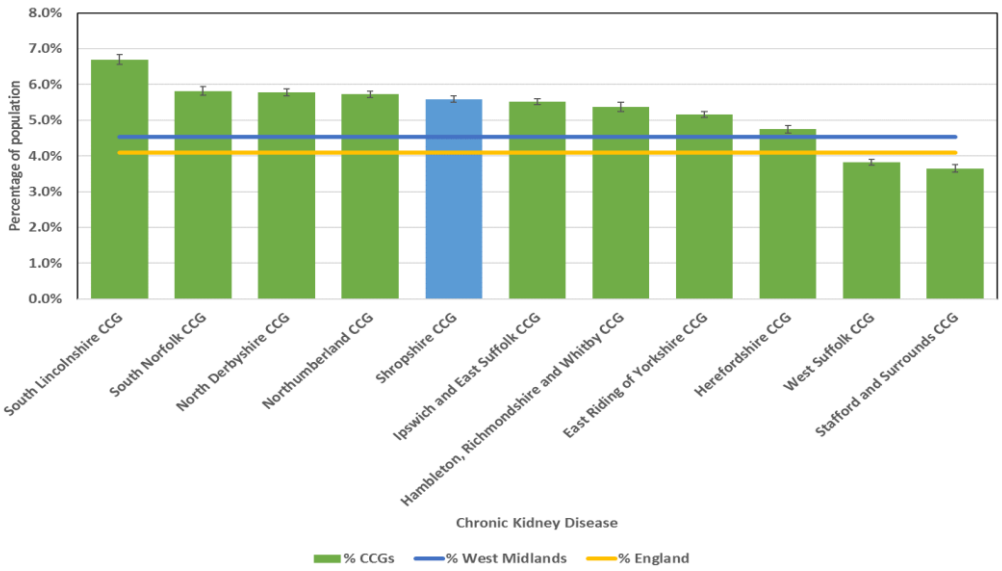


Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.

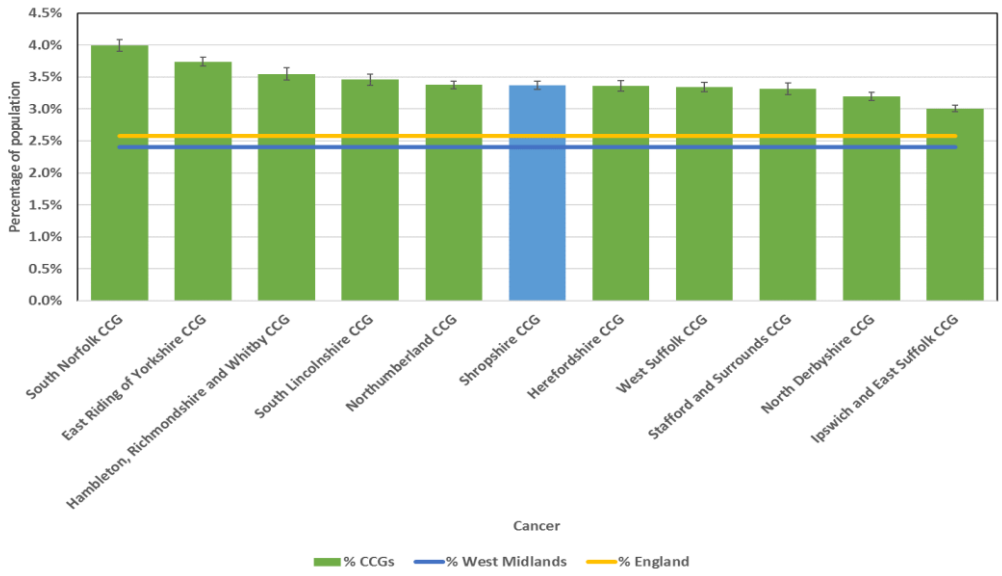
shows the prevalence of CKD on the QOF register in 2016/17 among the estimated population aged 18+. Shropshire's rate (5.6%) was significantly higher than the West Midlands and England and four similar CCGs. Three of the other CCGs were similar to Shropshire, while three were significantly lower.

Figure 53: Shropshire CCG Prevalence of Chronic Kidney Disease (CKD) in estimated population aged 18+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

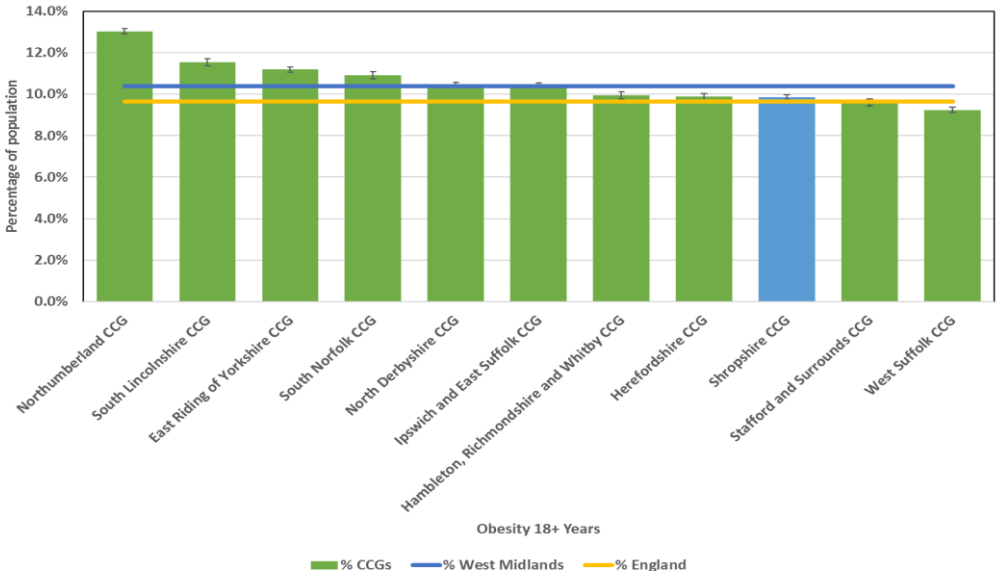
Figure 54 2016-17



Data source: NHS Digital 2016-17

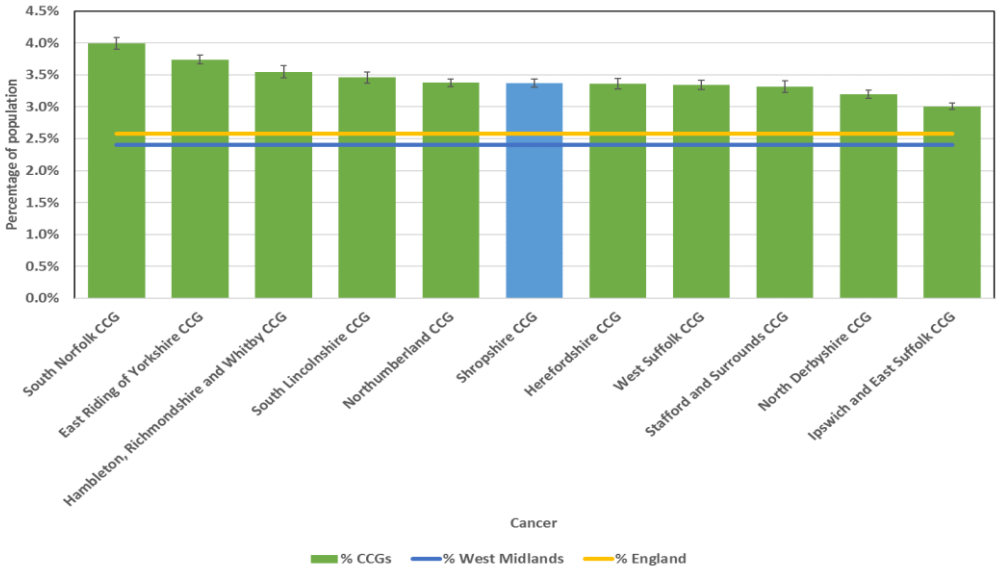
Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
shows the prevalence of obesity among those aged 18+ on the QOF register in 2016/17. Shropshire's prevalence (9.8%) was significantly lower than the West Midlands, but similar to England, as well as three similar CCGs - Hambleton, Richmondshire and Whitby, Stafford and Surrounds and Herefordshire.

Figure 54: Shropshire CCG Prevalence of Obesity in estimated population aged 18+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

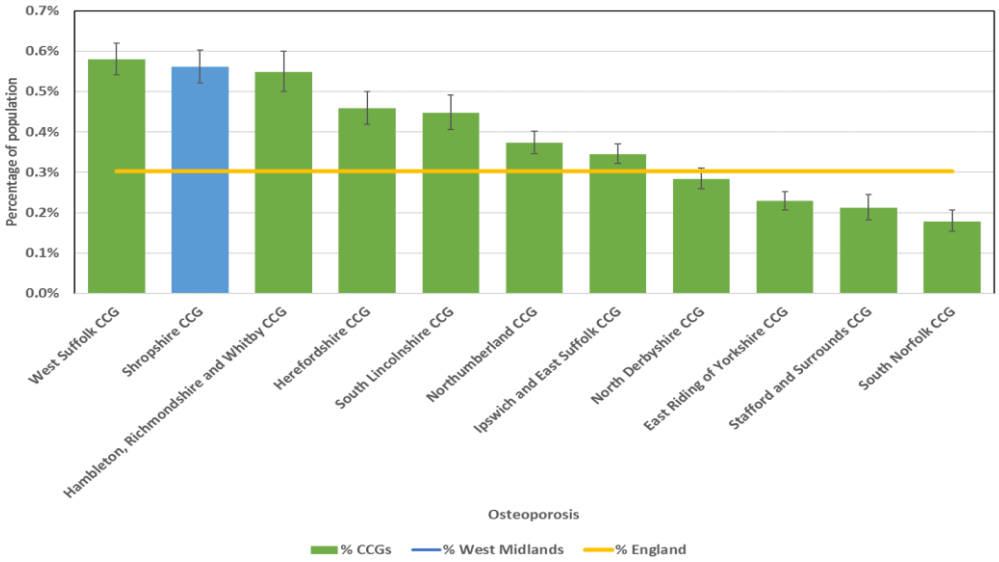
Figure 55 2016-17



Data source: NHS Digital 2016-17

Figure 41 shows the prevalence of mental health on the QOF register in 2016/17. Shropshire's prevalence of 0.8% was significantly lower than both the West Midlands region and England. The Shropshire prevalence was similar to three similar CCGs - Hambleton, Richmondshire & Whitby, Herefordshire and West Suffolk.
shows that Shropshire's prevalence of osteoporosis in the over 50 year old population in 2016/17 was 0.6%, which was significantly higher than the West Midlands, England and eight of the similar CCGs, whilst Hambleton, Richmondshire & Whitby and West Suffolk were similar to Shropshire.

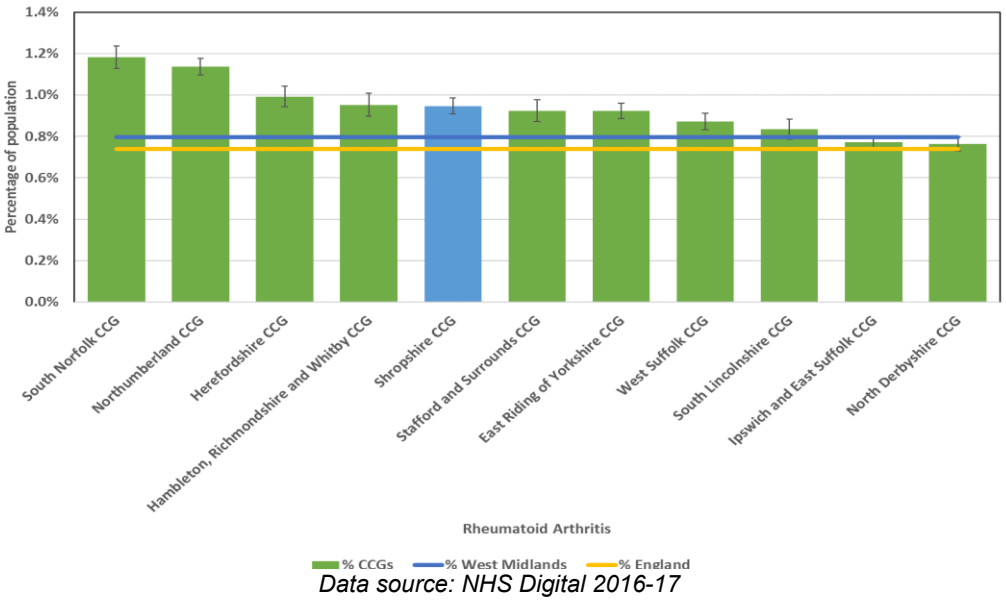
Figure 55: Shropshire CCG Prevalence of Osteoporosis in estimated population aged 50+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

Figure 56 shows the prevalence of rheumatoid arthritis among the 16+ population on the QOF register in 2016/17. Shropshire's prevalence was 0.9%, which was significantly higher than the West Midlands, England and three similar CCGs, while it was statistically similar to five other CCGs and significantly lower than two more.

Figure 56: Shropshire CCG Prevalence of Rheumatoid Arthritis in estimated population aged 16+ years old on QOF Register, 2016-17



Data source: NHS Digital 2016-17

7 Health Use by Shropshire Patients Aged 65 and over

7.1 Accident and Emergency Use

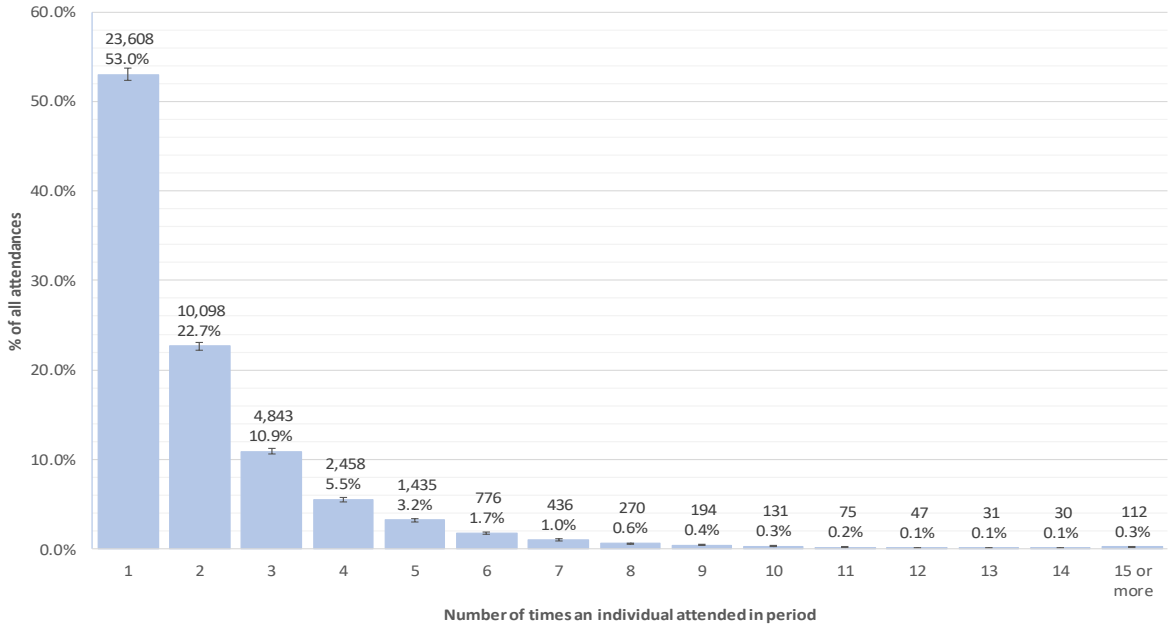
An extract from SUS was taken of Shropshire patients aged 65 or over who had attended accident and emergency units, consultant led or minor injury units between 1st April 2013 and 31st March 2018 – this revealed 93,437 attendances in total.

7.1.1 Number of times individuals attended

In the period there were 93,437 attendances at A&E, which was made up of 44,544 unique NHS numbers, while a further 322 attendances did not have a NHS number recorded, so on average a person will have attended A&E twice in this period.

Figure 57 shows the number of times individuals attended A&E in this period as a percentage of all attendances. Over half of attendances (23,608) were people attending just once over 5. financial years, while 22.7% (10,098) of people attended twice. However, 112 people (0.3%) attended A&E 15 or more times in this period, which included 7 people attending over 50 times.

Figure 57: Times Patients Attended A&E Between April 2013 and March 2018

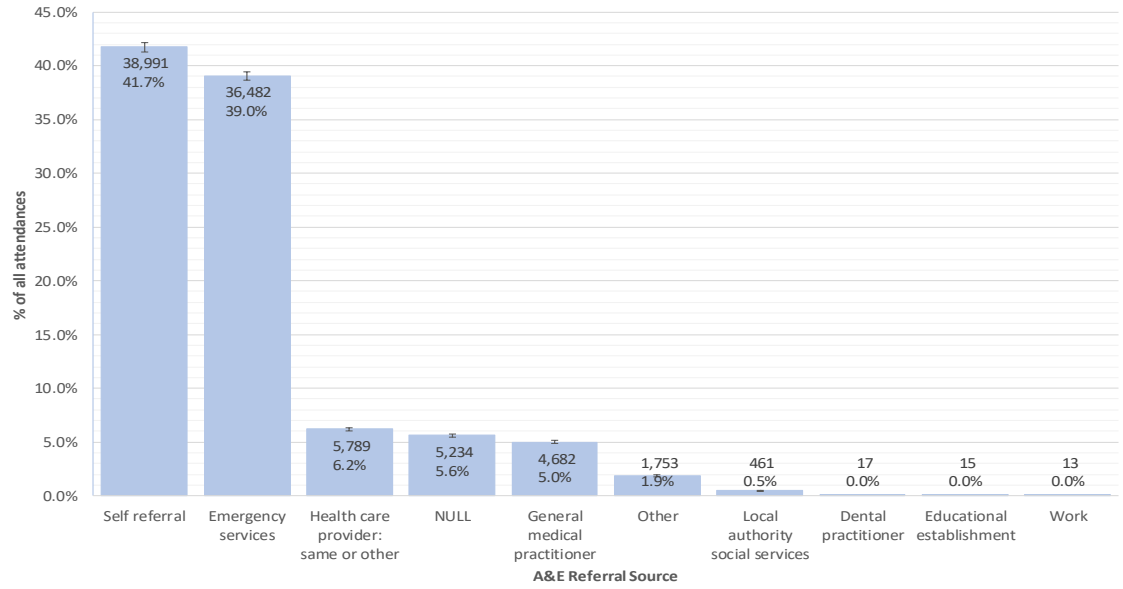


Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.2 Referral Source

Figure 58 shows that self-referrals (41.7%) and the emergency services (39%) were the main sources for A&E attendances.

Figure 58: Source of Referral for Patients who Attended A&E Between April 2013 and March 2018

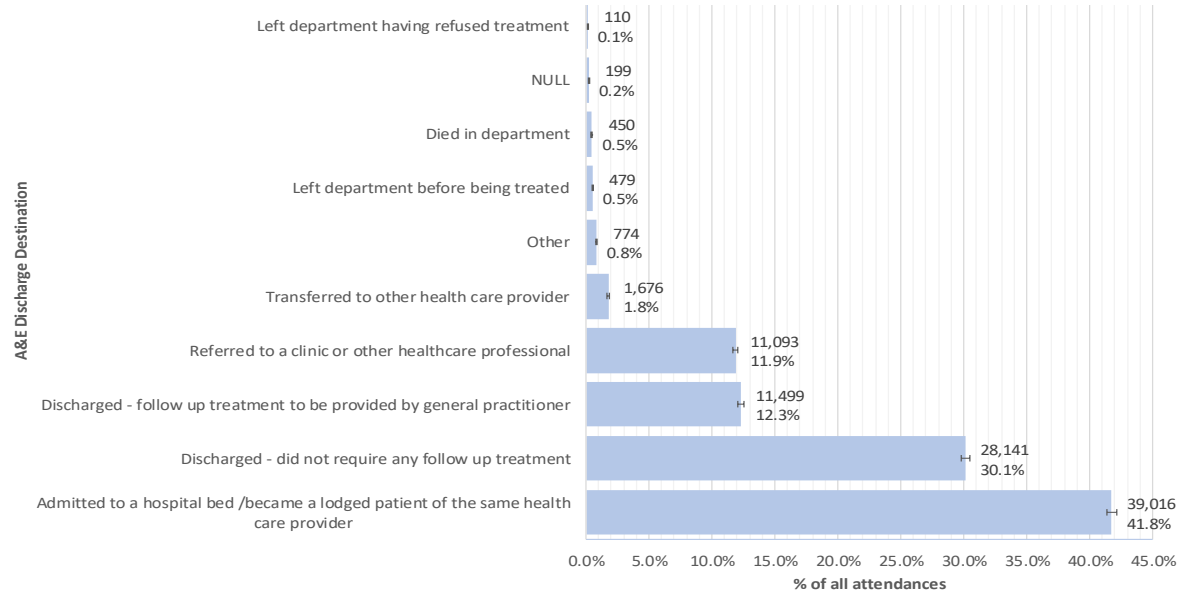


Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.3 Discharge Method

Figure 59 shows where patients went after A&E and being admitted by that health provider (41.8%) was the most frequent, while 30.1% were discharged without follow up, 12.3% were discharged with follow up by a GP, 11.9% were referred to another health professional and 1.8% were transferred to another provider.

Figure 59: Discharge Destination of Patients who Attended A&E Between April 2013 and March 2018



Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.4 Ethnicity

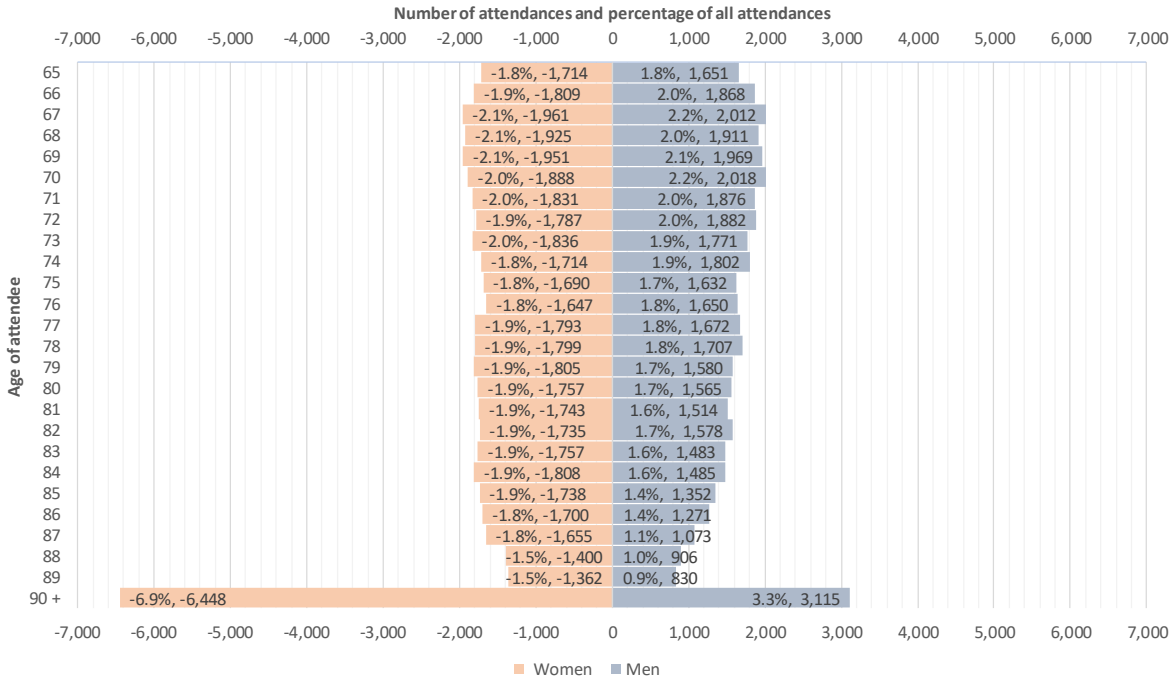
Of the 93,437 attendances, the majority (87.9%) were people classified as British and 2.9% of the attendees were from another ethnicity but 9.2% weren't recorded.

7.1.5 Age and Gender

Of the attendees 53.8% were female and 46.2% were male. For each year of age, there were over 3,000 attendances between those aged 65 and 85, and 9,564 (10.2%) attendances among people aged 90 and over and 246 (0.3%) attendances for people aged 100 and over.

Figure 60 shows the number of attendances and percentage of all attendances for males and females by age. While between 66 and 75 there are more attendances for women than men, this gap then narrows before reversing after 83 years old, but, the most noticeable difference is in the people aged 90 or over, with 6,448 (6.9%) women and 1,651 (1.8%) males – in comparison there are 1,029 males and 2,603 females aged 90 or over, which is 1.4% and 3.5% of the over 65 population respectively according to the 2016 mid-year population estimate.

Figure 60: Age and Gender of Patients who Attended A&E Between April 2013 and March 2018



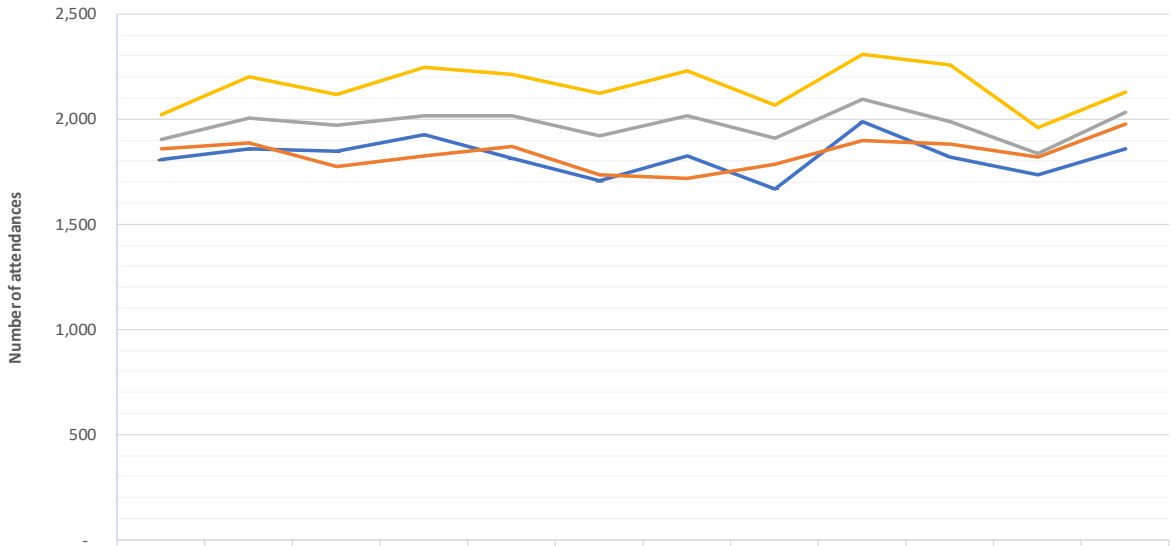
Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.6 Month of attendance

Figure 61 shows the month of attendance in each of the four financial years and from this it is evident that the number of attendances among the over 65 age group have increased in every month over time. While December is the month with the highest

number of attendances in each financial year, the number doesn't seem to be greatly increased over other months.

Figure 61: Number of Patients who Attended A&E by Month Between April 2013 and March 2018



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2014/15	1,808	1,856	1,849	1,927	1,813	1,706	1,827	1,665	1,990	1,818	1,736	1,857
2015/16	1,860	1,886	1,776	1,825	1,869	1,734	1,717	1,784	1,900	1,878	1,819	1,978
2016/17	1,904	2,002	1,971	2,016	2,016	1,922	2,013	1,911	2,096	1,987	1,835	2,030
2017/18	2,022	2,198	2,114	2,244	2,210	2,120	2,227	2,065	2,307	2,259	1,961	2,129

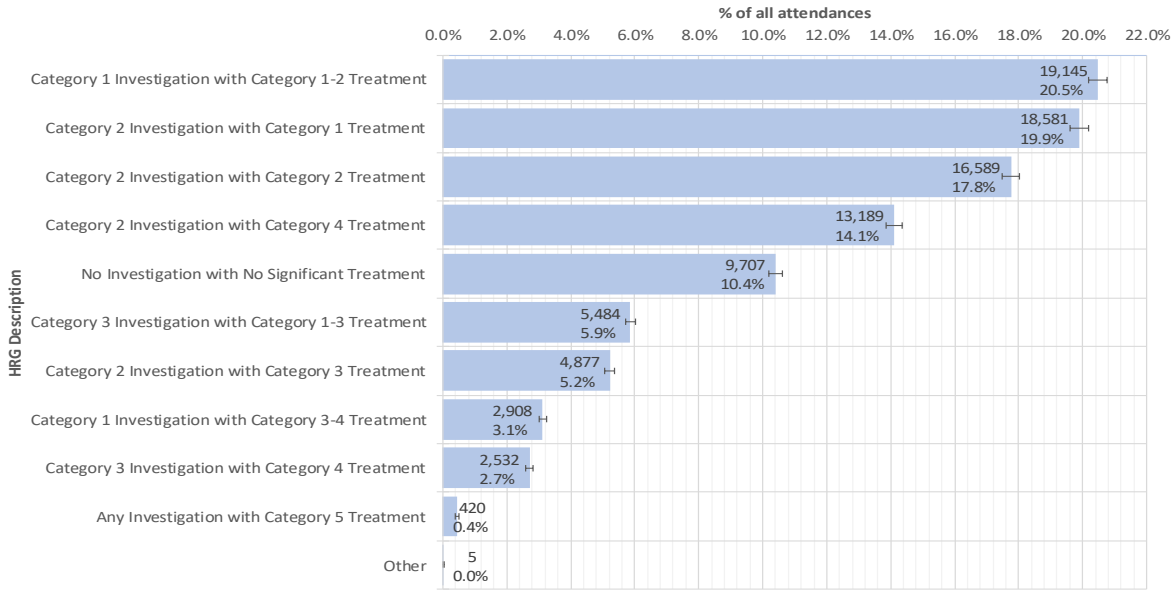
Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.7 Investigation and Treatment

Investigations are coded between 1 and 3, with 1 being simpler investigations such as biochemistry, 2 including haematology and toxicology and 3 including ultrasound and MRIs. Treatments are coded between 1 and 5, with 1 containing bandages or wound cleaning, 2 including wound closure or physio, 3 including minor surgery or the dressing of a major wound, 4 incorporating blood transfusions or a lumbar puncture and finally 5 including resuscitation or recombinant thrombolysis.

Figure 62 shows that the most significant outcome was for a category 1 investigation with category 1 or 2 treatment (20.5%), followed by a category 2 investigation with a category 1 treatment (19.9%). The fourth most frequent outcome was for a category 2 investigation with category 4 treatment (14.1%), while only 0.4% of cases involved category 5 treatments. Over 10% of attendances (9,707) involved no investigation or significant treatments.

Figure 62: Investigation and Treatment HRG for Patients who Attended A&E Between April 2013 and March 2018

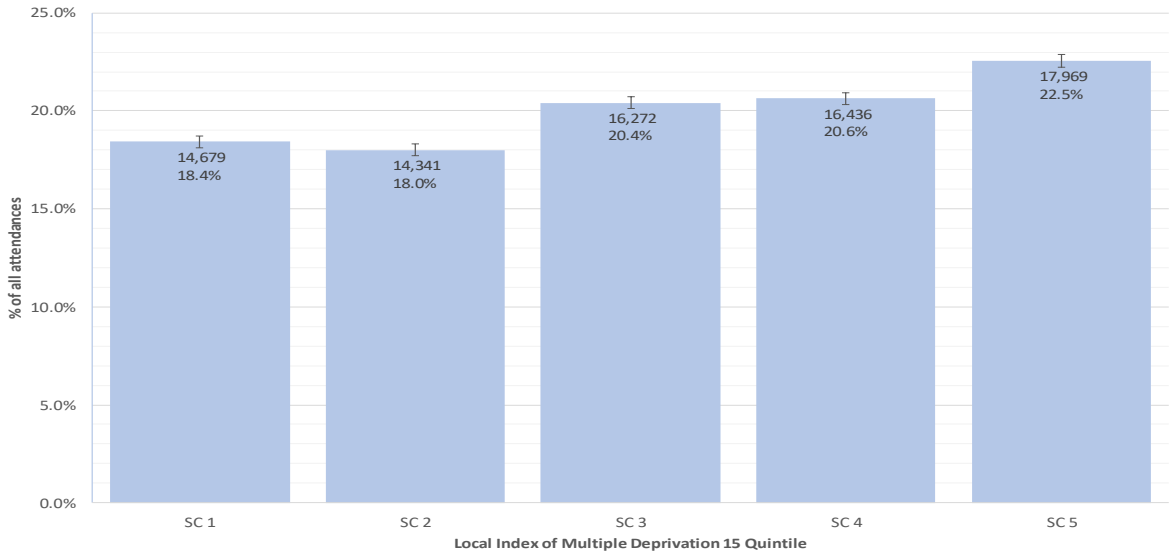


Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.8 Local Index of Multiple Deprivation (IMD)

Figure 63 shows there are statistically more attendances in the least deprived quintile (22.5%) than the others, while the second least deprived quintile and the middle quintile are statistically similar, but significantly higher than the two most deprived quintiles. The caveats to this are that there could be more older people who are from the least deprived groups and second, this could be due to nursing homes location.

Figure 63: Local IMD Quintile for Shropshire Patients who Attended A&E between April 2013 and March 2018

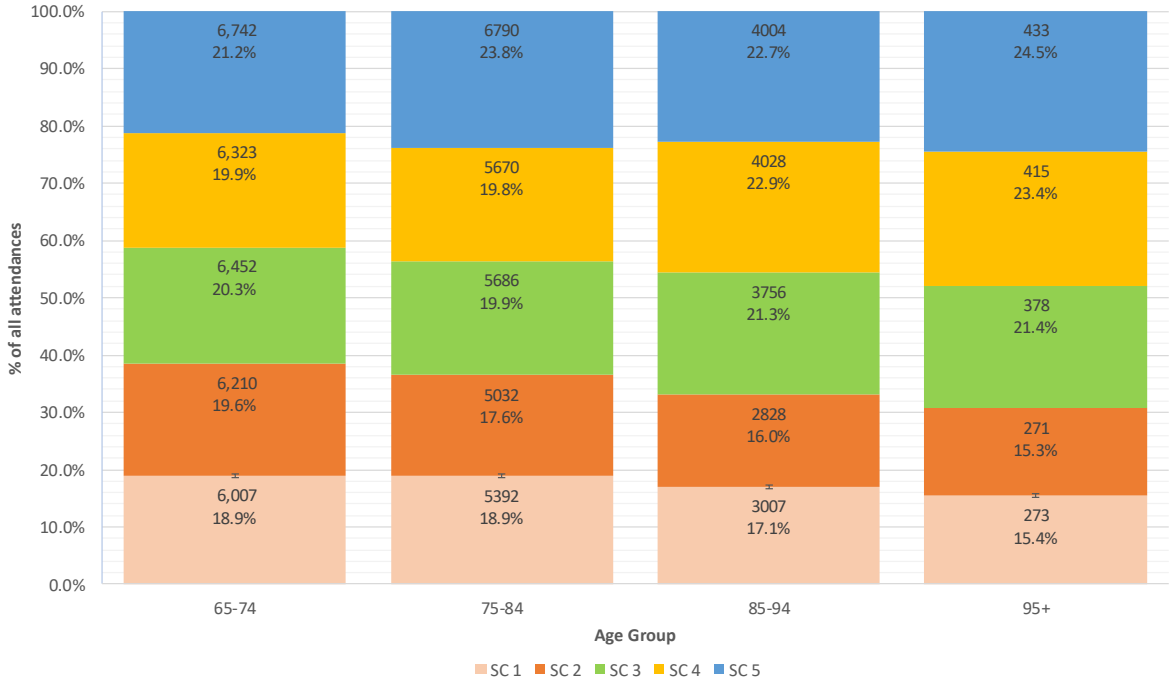


Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

Figure 64 shows the IMD quintile of the total number of attendees in four age groups:

- In the 65-74 age group (31,734 attendances), there were significantly fewer from the most deprived areas (18.9%) while there are significantly more attendances from the least deprived quintile than all but the middle quintile.
- In the 75-84 age group (28,570 attendances), there are significantly more attendances from the least deprived quintile (23.8%) than any other quintile, while the second most deprived quintile (17.6%) has significantly fewer attendances than the others.
- In the 85-94 age group (17,623 attendances), the second least deprived quintile (22.9%) and the least deprived quintile (22.7%) have significantly more attendances than the others, while there are significantly fewer attendances in the two most deprived quintiles (17.1% and 16%).
- Finally, in the 95 and over age group (1,770 attendances), there are again significantly fewer attendances from people from the most deprived quintile (15.4%) and second most deprived quintile (15.3%) than the others, which are significantly similar.

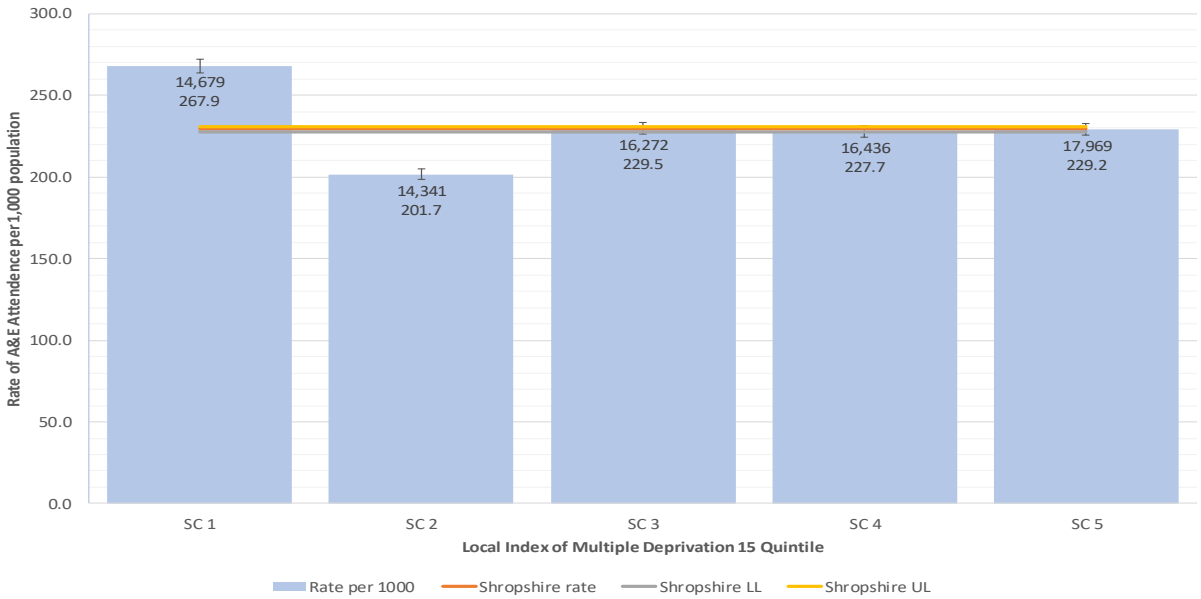
Figure 64: IMD Local Quintile by Age group for Shropshire Patients who Attended A&E Between April 2013 and March 2018



Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

Figure 65 shows a breakdown of the A&E attendances by IMD quintiles but as a rate per 1,000 population aged 65+ (5 years) for each quintile – this reveals that Shropshire's attendance rate was 229.4 per 1,000, with the rate statistically higher than this in the most deprived quintile (267.9 per 1,000), although rates in the second most deprived quintile were significantly lower (201.7 per 1,000), which was lower than the other 3 quintiles.

Figure 65: Local IMD Quintile for Shropshire Patients who Attended A&E between April 2013 and March 2018 - Rate per 1,000 Population

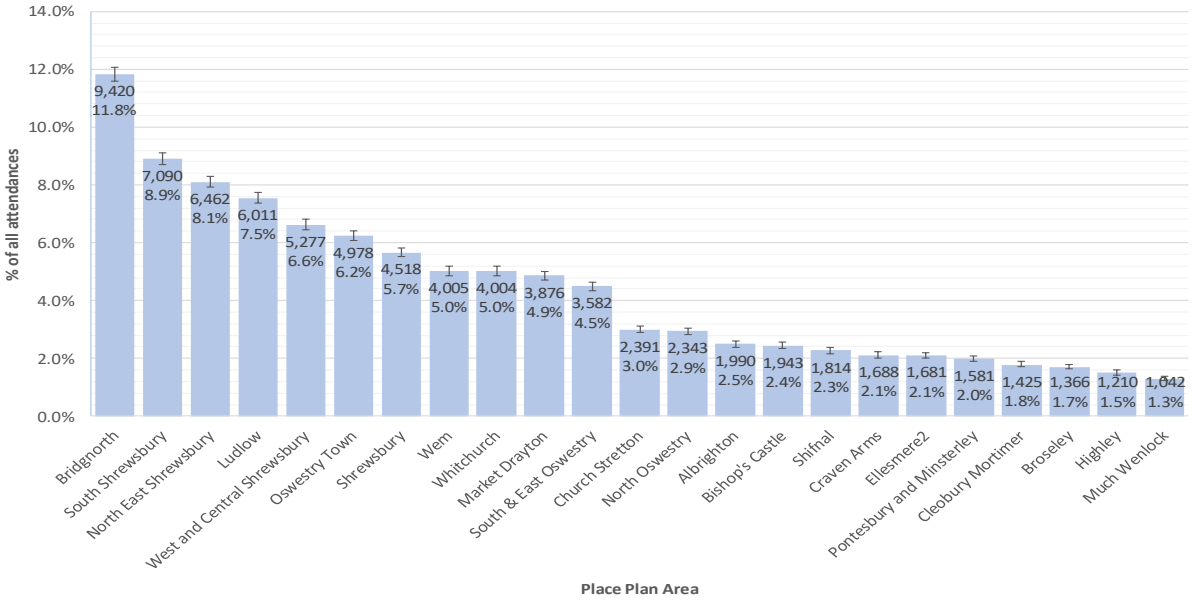


Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.1.9 Place Plan

Figure 66 shows the percentage of all A&E attendances by each place plan area and this reveals that the place plan area which had the significantly highest percentage of all was the Bridgnorth one (9,420 attendances, 11.8%) – South Shropshire was the second highest (7,090, 8.9%). In contrast, the Cleobury Mortimer, Broseley, Highley and Much Wenlock areas accounted for under 2% of attendances each.

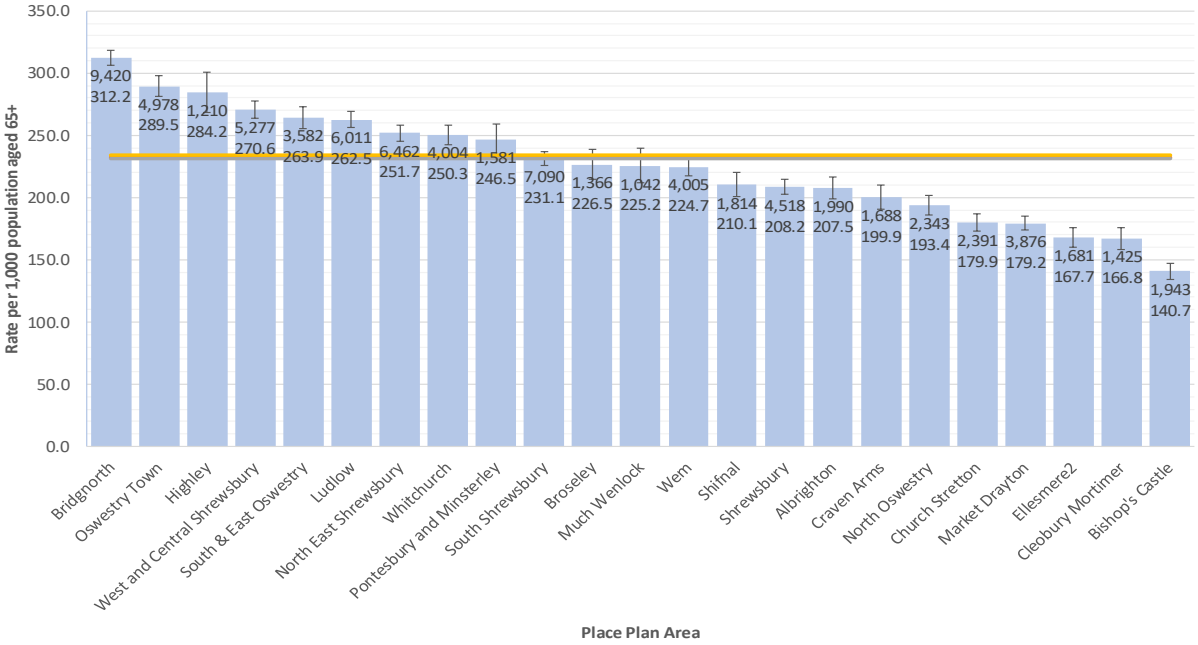
Figure 66: Place Plan Area of Shropshire Patients who Attended A&E Between April 2013 and March 2018



Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

Figure 67 shows the rate of A&E attendances per 1,000 population aged 65 or over by place plan area and this reveals that the Bridgnorth area the significantly highest rate, while Oswestry Town, Highley, West and Central Shrewsbury, South & East Oswestry, Ludlow, North East Shrewsbury, Whitchurch and Pontesbury & Minsterley place plan areas have significantly higher rates than the Shropshire average.

Figure 67: Place Plan Area of Shropshire Patients who Attended A&E Between April 2013 and March 2018 - Rate per 1,000 Population



Source: Shropshire CCG patients, A&E dataset from SUS, NHS Digital, 2013/14 to 2017/18

7.2 Inpatient data

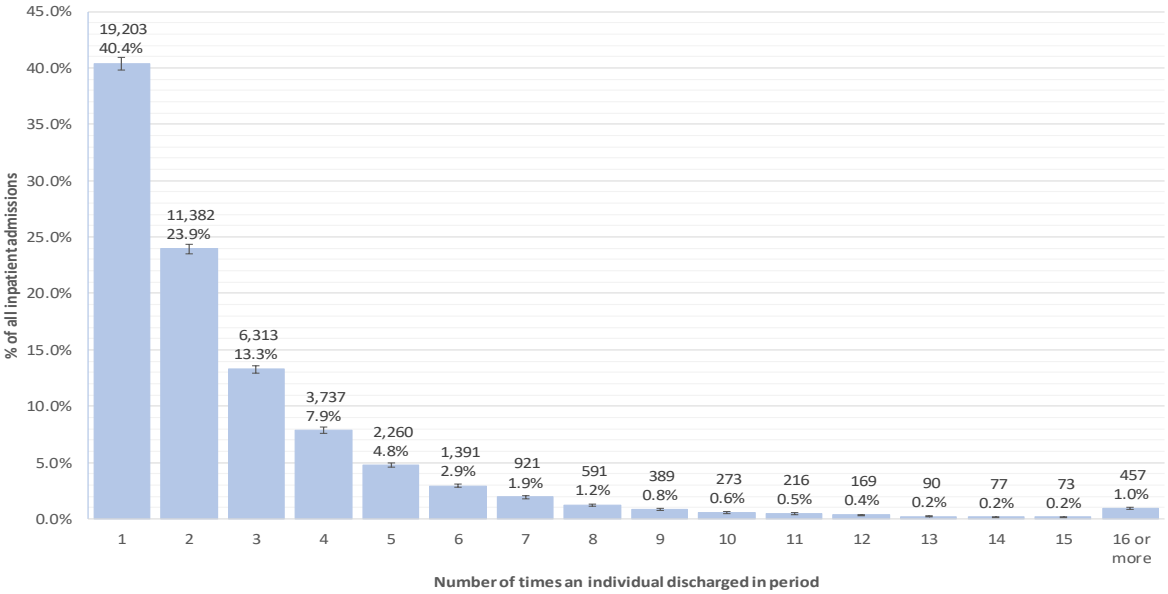
An extract from SUS was taken of Shropshire patients aged 65 or over who had been admitted as an inpatient and were discharged from there between 1st April 2014 and 31st March 2018 – this revealed 133,463 inpatient spells in total.

7.2.1 Number of times individuals were admitted

In the period there were 133,463 inpatient spells for patients aged 65 and over, however, this was made up of 47,542 unique NHS numbers, while a further 638 episodes did not have a NHS number recorded, so on average a person would have been admitted just under 3 times in this period.

Figure 68 shows the number of times individuals were discharged from a hospital spell in this period as a percentage of the unique individuals. Most individuals were only in hospital for 1 spell (19,203, 40.4%), while 23.9% (11,382) had 2 spells and 13.3% (6,313) individuals had 3 spells. 457 individuals (1%) had 16 or more spells in hospital in this 4-year period, however 28 had over 50 spells and 5 had over 80.

Figure 68: Times Patients were Discharged as an Inpatient Between April 2014 and March 2018

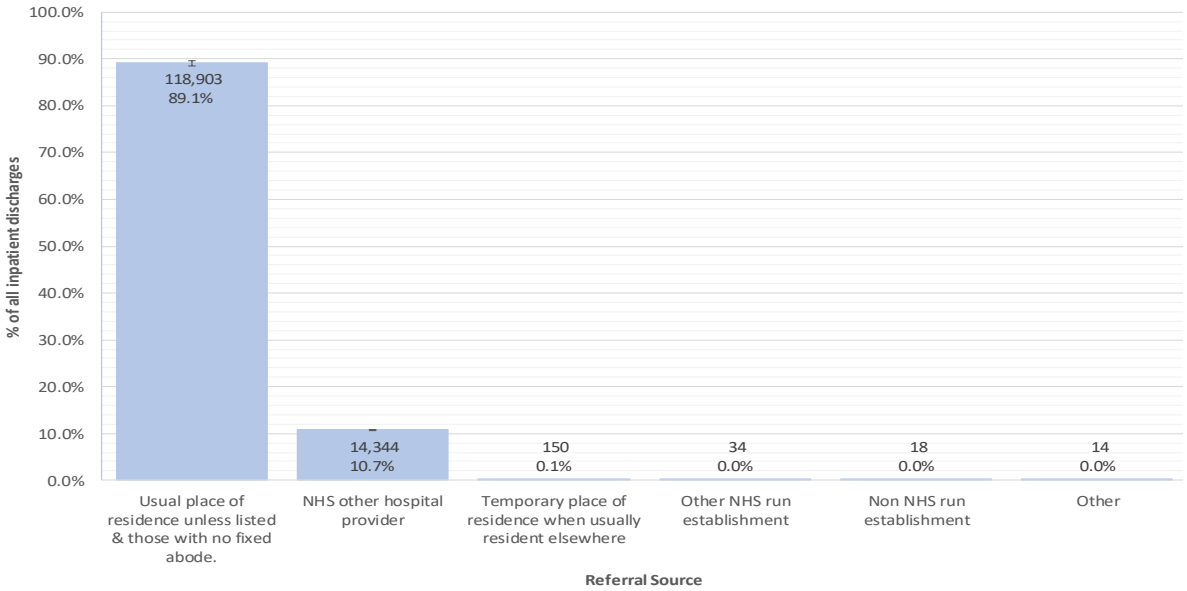


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.2 Referral Source

Figure 69Figure 58 shows that in 89.1% of episodes, the usual place of residence was the admission source, while 10.7% were from another NHS hospital provider.

Figure 69: Source of Referral for Patients who were Discharged as an Inpatient Between April 2014 and March 2018

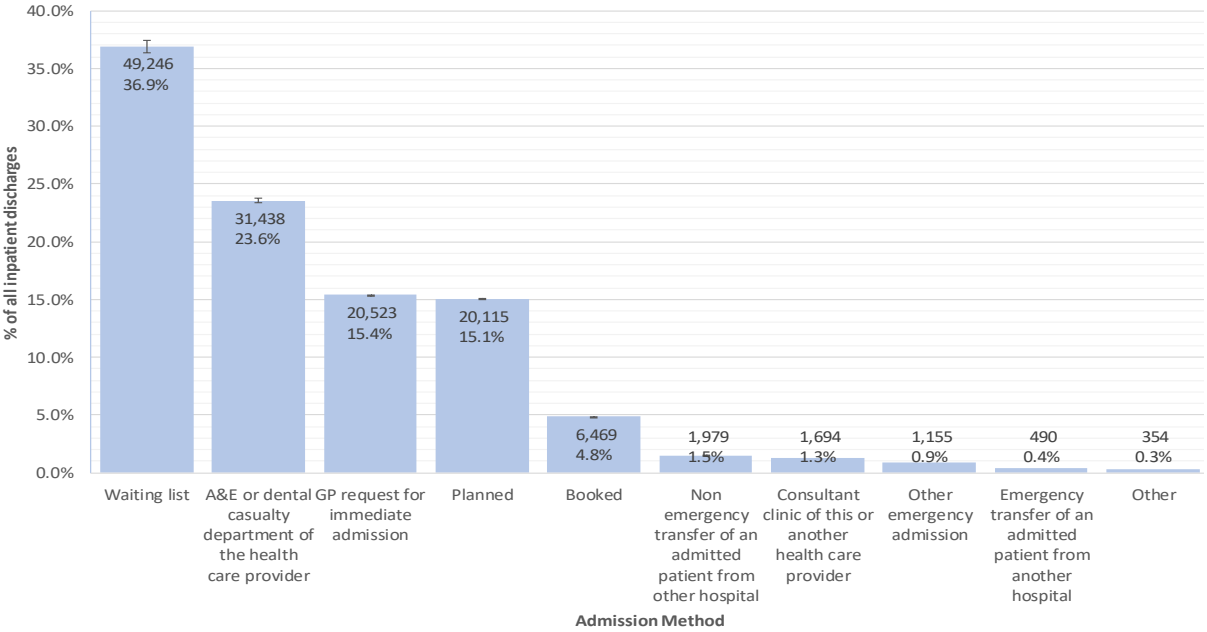


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.3 Admission Method

Figure 70 shows the admission method and 36.9% were admitted via a waiting list, while 23.6% were admitted through the A&E or dental casualty department of the hospital and a statist87ically similar percentage came from immediate GP requests (15.4%) and planned admissions (15.1%).

Figure 70: Admission Method for Patients who were Discharged as an Inpatient Between April 2014 and March 2018

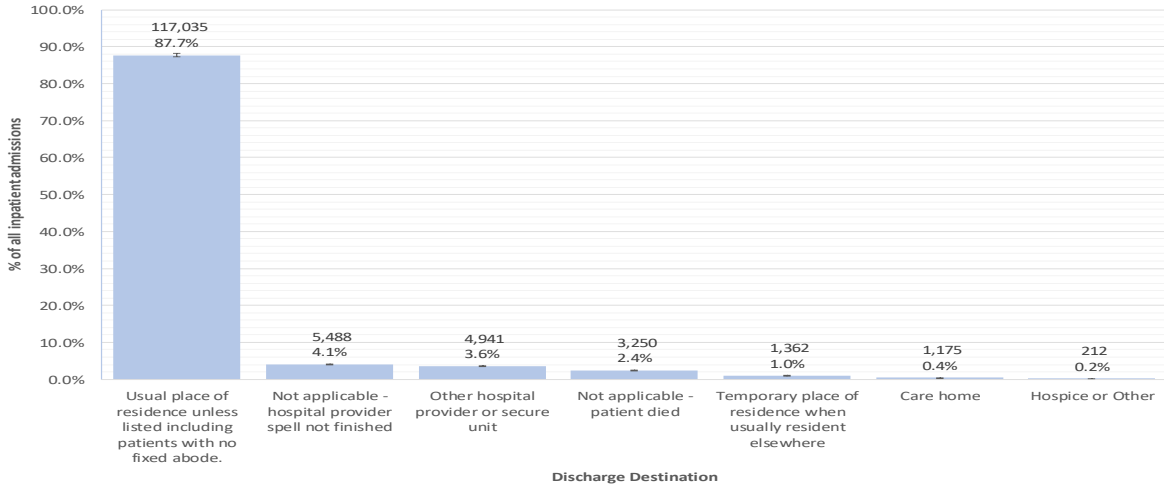


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.4 Discharge Destination

Of the 133,463 patients, the majority (87.7%) were discharged to their usual place of residence (including those already in care homes), while 0.4% went to a care home. A smaller percentage (4.1%) were not applicable as the hospital spell was not finished, which appears to be an error as a discharge date is recorded. 3.6% of patients went to other hospital providers or secure units, and 2.4% of patients died.

Figure 71: Discharge Destination for Patients who were Discharged as an Inpatient Between April 2014 and March 2018

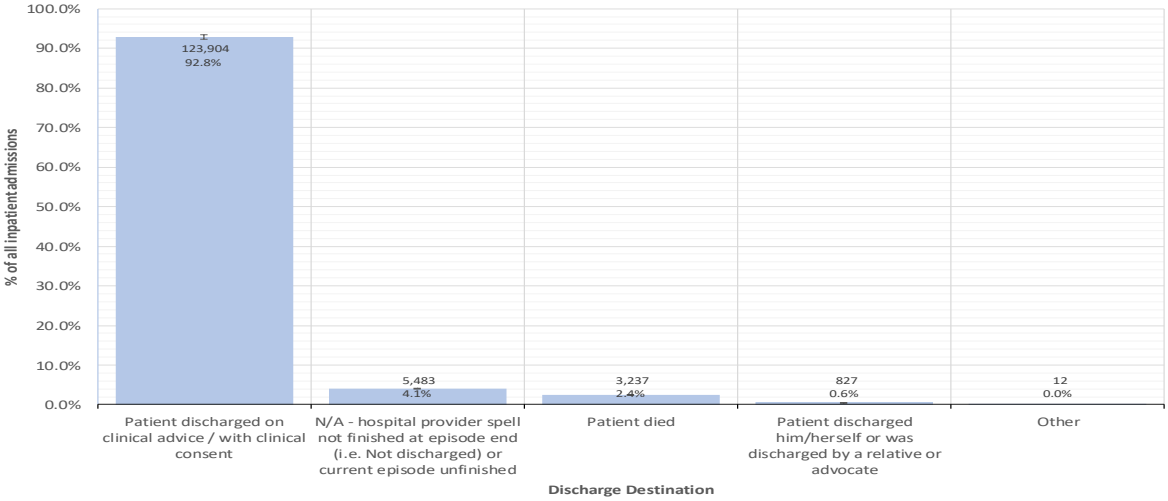


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.5 Discharge Method

Of the 133,463 patients in the period, nearly 93% were discharged on clinical advice, however 827 patients (0.4%) discharged by themselves or a relative or advocate.

Figure 72: Discharge Method for Patients who were Discharged as an Inpatient Between April 2014 and March 2018



Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.6 Ethnicity

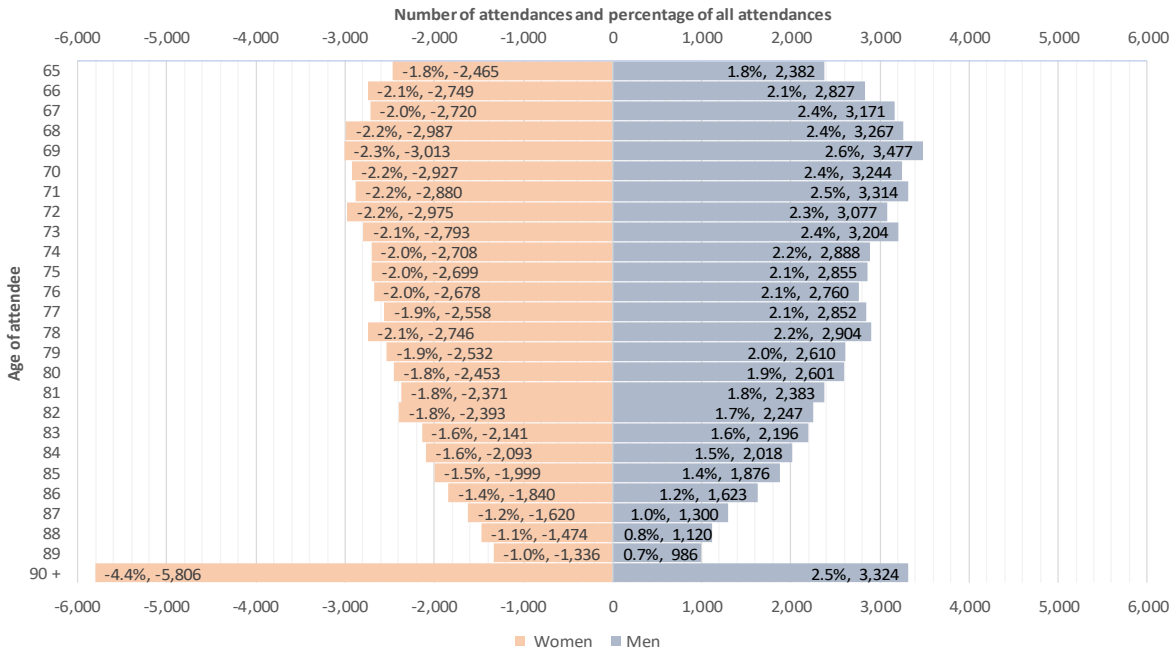
Nearly 94% of the patients were classified as a British ethnicity while nearly 5% were not known and the remainder were one of 15 other ethnicities.

7.2.7 Age and Gender

Of the inpatients, 50.2% were female and 49.8% were male. For each year of age, there were between 4,000 and 6,500 inpatient episodes between those aged 65 and 84, and there were 9,130 (6.8%) episodes among people aged 90 and over and 201 (0.2%) attendances for people aged 100 and over.

Figure 73 shows the number of attendances and percentage of all attendances for by age for males and females. Between 66 and 81 years old there are more male inpatients than females but the gap narrows as ages increase but the most noticeable difference is in the people aged 90 or over, with 5,806 women compared to 3,324 males, which accounts for 4.4% and 2.5% of all episodes respectively.

Figure 73: Age and Gender of Patients who were Discharged as Inpatients Between April 2014 and March 2018

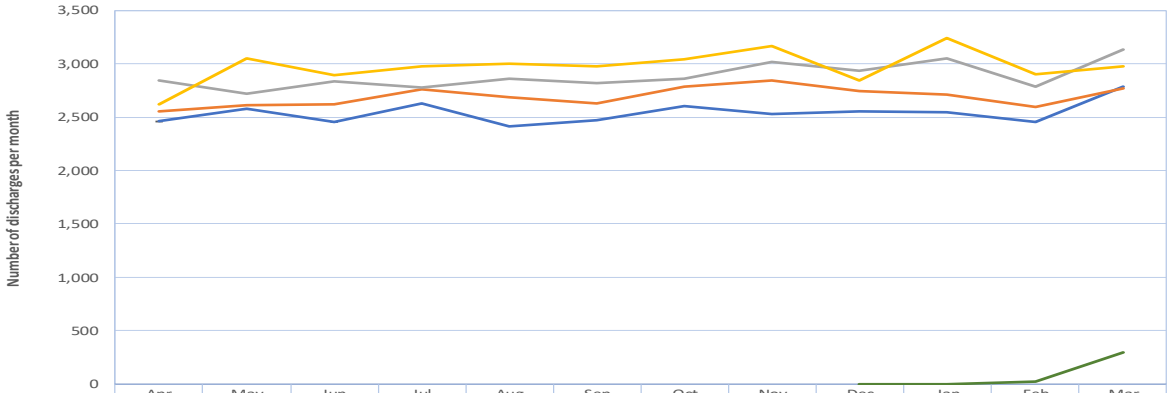


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.8 Month admitted

Figure 74 shows the month the patients in the dataset (that were discharged in the period 2014/15 to 2017/18) were admitted in each of the financial years and from this it is evident that the number has increased in the most recent years and in 9 months there were more admissions in 2017/18 than older financial years.

Figure 74: Number of Patients who were Discharged as Inpatients by Month Between April 2014 and March 2018



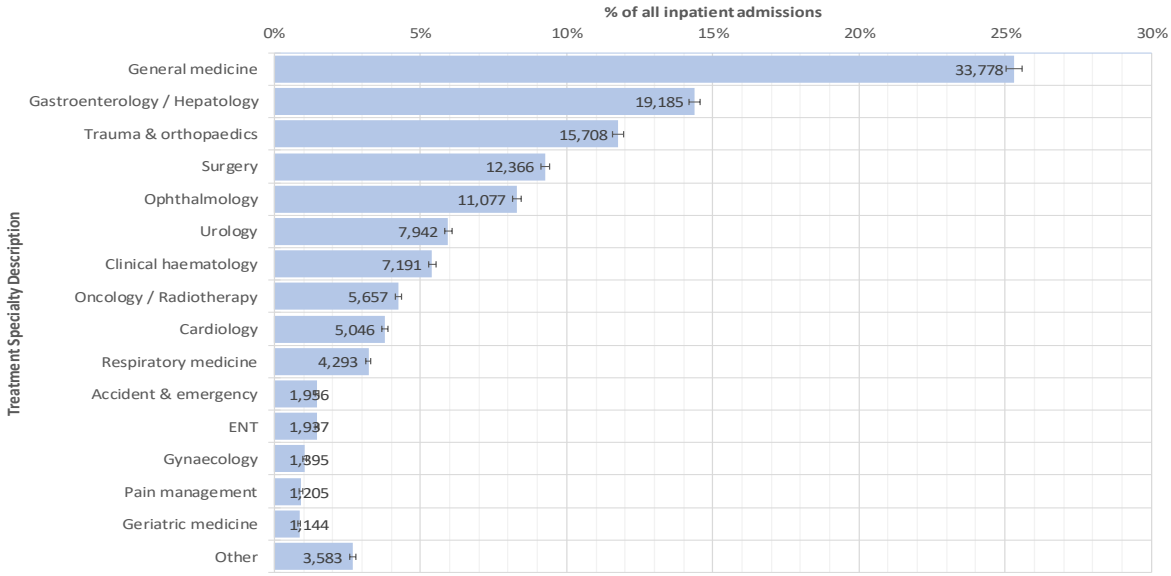
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2013/14						-			-	-	22	296
2014/15	2,464	2,581	2,456	2,626	2,417	2,470	2,608	2,530	2,555	2,543	2,454	2,789
2015/16	2,551	2,616	2,620	2,763	2,686	2,627	2,783	2,844	2,744	2,715	2,592	2,767
2016/17	2,847	2,720	2,834	2,780	2,860	2,820	2,858	3,016	2,934	3,047	2,785	3,134
2017/18	2,622	3,050	2,895	2,975	3,004	2,978	3,046	3,168	2,841	3,243	2,903	2,979

Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.9 Specialty

Figure 75 shows that the highest treatment specialties of the patients admitted and just over a quarter were admitted under general medicine, with 14.4% under Gastroenterology, 11.8% under trauma and orthopaedics and 8.3% under ophthalmology. The fourth highest specialty saw 12,366 (9.3%) patients under some type of surgery (Breast, colorectal, general, hepatobiliary & pancreatic, neurosurgery, plastic, podiatric, spinal, upper GI and vascular). Other included endocrinology, dermatology, nephrology, rehabilitation services, rheumatology and stroke medicine among others.

Figure 75: Treatment Specialty of Patients who were Discharged as Inpatients Between April 2014 and March 2018

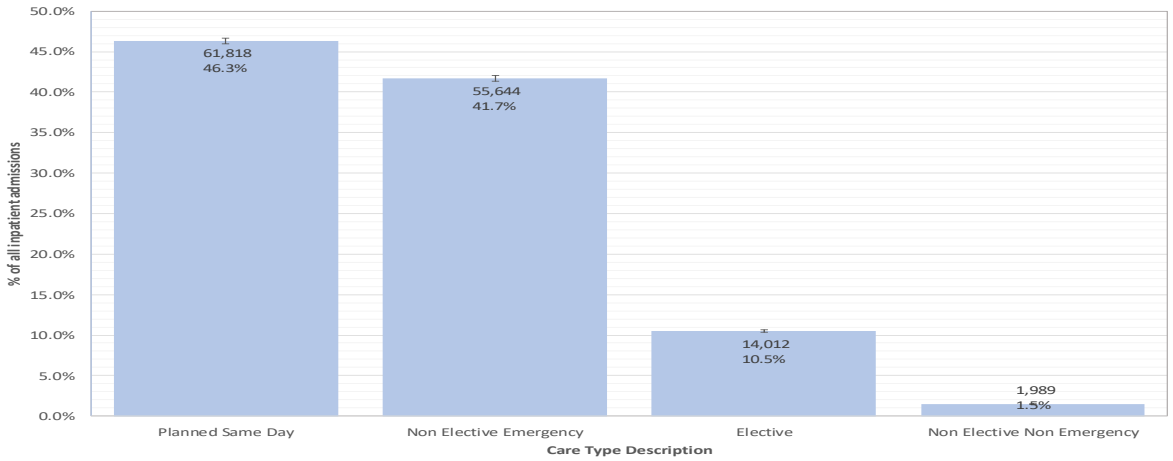


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.10 Care Type Description

Figure 76 shows there are statistically more planned same day inpatient cases (46.3%) than any other care type, while non-elective emergencies (41.7%) are the second most common admission type, while elective procedures account for 10.5% of admissions and non-elective non-emergencies account for 1.5%.

Figure 76: Care Type of Patients who were Discharged as Inpatients Between April 2014 and March 2018

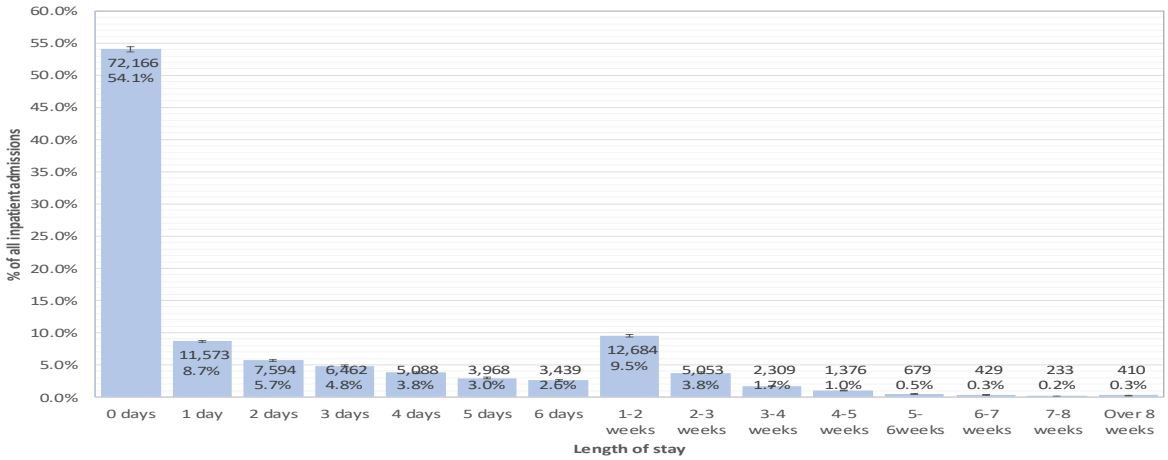


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.11 Length of Stay

Figure 77 shows that 110.290 inpatient stays (54.1%) were for under a day, while 12,684 (8.7%) stays were for one day and in total 110,290 (82.6%) inpatient stays were for under a week. In contrast, there were 3,127 (2.3%) stays that lasted over 4 weeks, including 410 (0.3%) over 8 weeks, are 35 which were over 15 weeks. Of the 133,463 admissions, the average length of stay was 3.7 days.

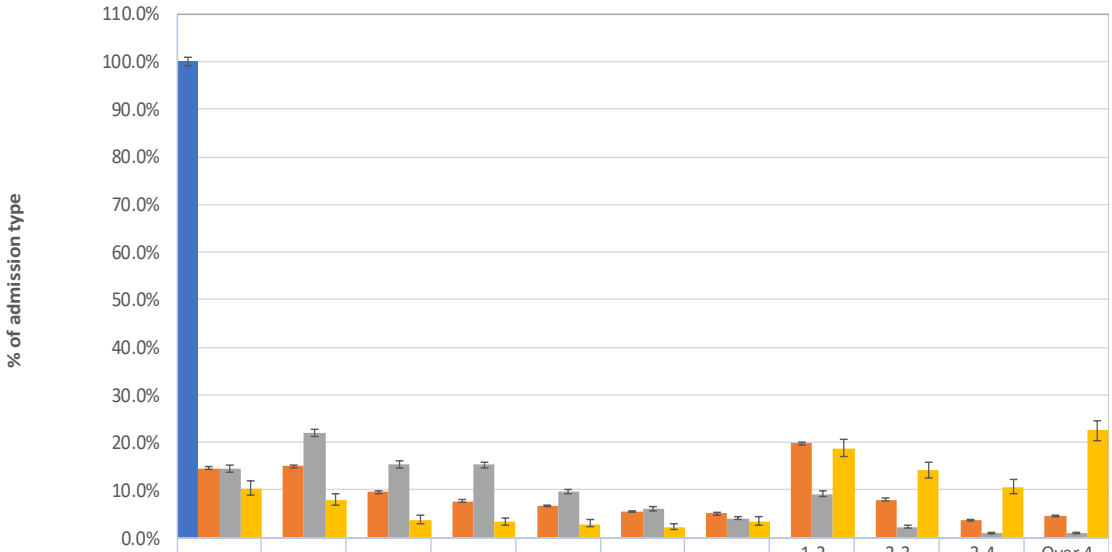
Figure 77: Length of Stay of Patients who were Discharged as Inpatients Between April 2014 and March 2018



Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 78 shows the length of stay as a percentage of each care type and this shows that as expected all planned same day admissions had a length of stay under a day. The admissions that were non-elective emergencies (55,644 spells) had an average length of stay of 7.3 days, with 14.6% of these being 0 days, 15% 1 day and 4.6% being over 4 weeks. Of the elective admissions (14,012 spells) the average length of stay was 3.75 days with 14.5% of admissions being 0 days and 21.9% at 1 day with just 1% being over 4 weeks. For non-elective non-emergency episodes (1,989 spells) the average length of stay was 17.1 days, 10.3% were for 0 days, 7.9% for 1 day and 22.5% of them over 4 weeks.

Figure 78: Length of Stay for Each Care Type Admissions of Patients who were Discharged as Inpatients Between April 2014 and March 2018



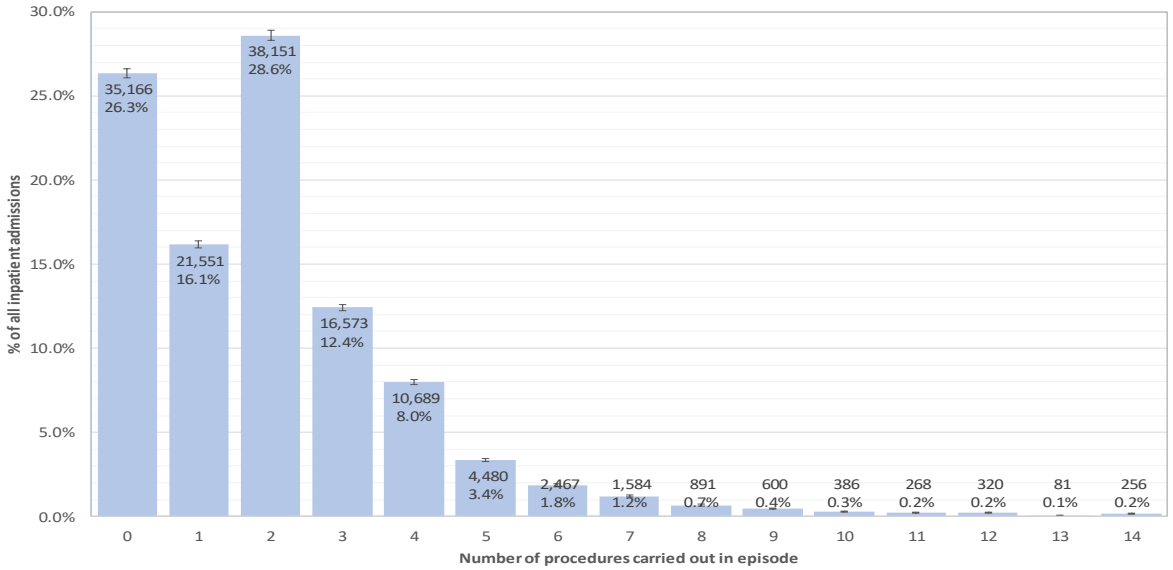
	0 days	1 day	2 days	3 days	4 days	5 days	6 days	1-2 weeks	2-3 weeks	3-4 weeks	Over 4 weeks
Planned Same Day	100.0%										
Non Elective Emergency	14.6%	15.0%	9.6%	7.7%	6.6%	5.5%	5.0%	19.8%	8.0%	3.5%	4.6%
Elective	14.5%	21.9%	15.4%	15.2%	9.7%	6.0%	4.0%	9.2%	2.2%	0.9%	1.0%
Non Elective Non Emergency	10.3%	7.9%	3.8%	3.4%	2.9%	2.3%	3.4%	18.8%	14.2%	10.7%	22.5%

Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.12 Number of Clinical Interventions

Figure 79 shows the number of procedures or diagnostic tests that were carried out during the inpatient episode. Over a quarter of episodes (28.6%) had two interventions carried out which was significantly higher than the 26.3% who didn't have one, while 16.1% of episodes just had one intervention. 2,802 episodes (2.1%) had 8 or more clinical interventions carried out, with 256 episodes (0.2%) having 14.

Figure 79: Number of Clinical Interventions for Patients who were Discharged as Inpatients Between April 2014 and March 2018

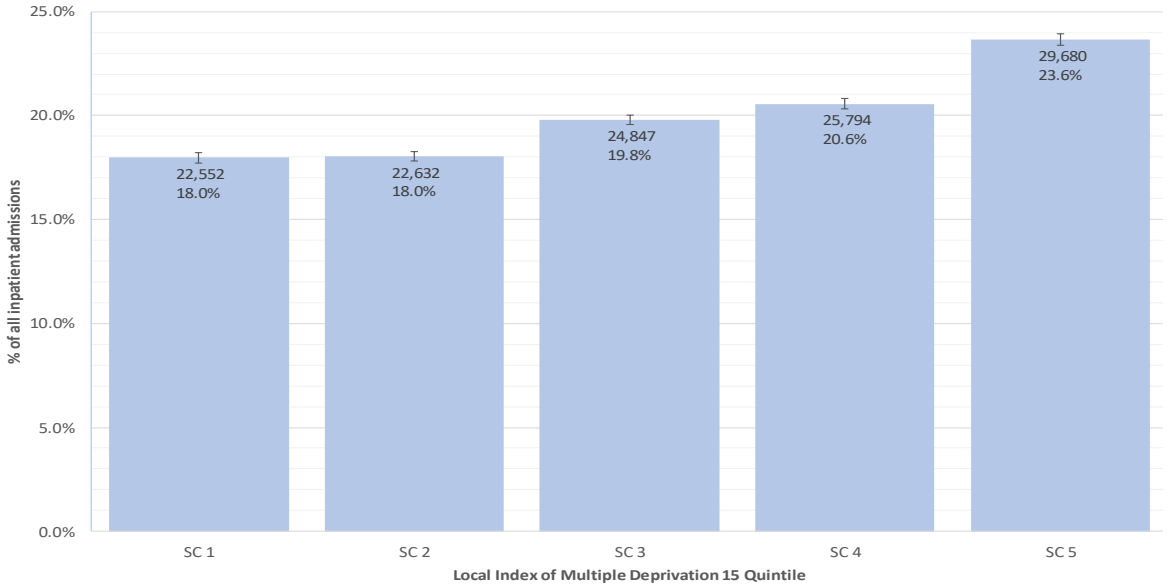


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.13 Local Index of Multiple Deprivation (IMD)

Figure 80 shows there are statistically more inpatient episode from patients living in Shropshire's least deprived quintile (23.6%) than the others, while the second least deprived quintile (20.6%) was significantly higher than other quintiles, followed by the middle quintile which was statistically higher than the two most deprived quintiles. The caveats to this are that there could be more older people who are from the least deprived groups and second, this could be due to nursing homes location.

Figure 80: Local IMD Quintile of Shropshire Patients who were Discharged as Inpatients Between April 2014 and March 2018

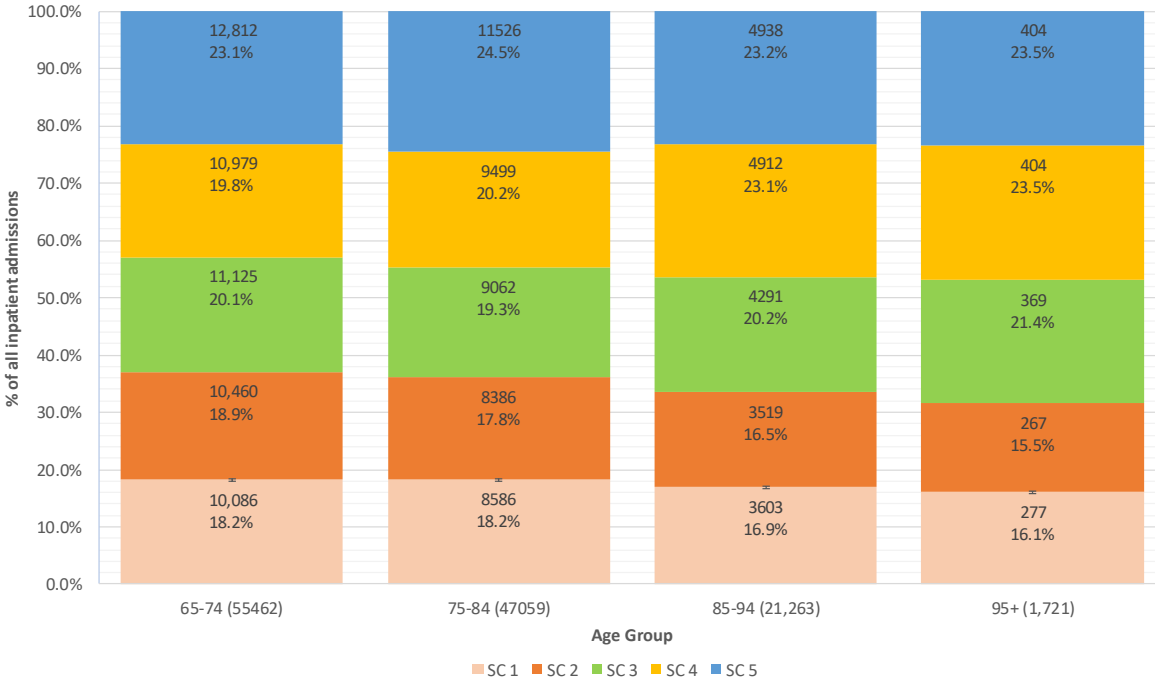


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 81 shows the IMD quintile of the total number of attendees in four age groups:

- In the 65-74 age group (55,462 episodes), there were significantly more episodes in the least deprived quintile (23.1%) than any other, while there were similar episodes from the middle and second least deprived quintiles.
- In the 75-84 age group (47,059 episodes), there are significantly more episodes from the least deprived quintile (24.5%) than any other quintile, while the second least deprived quintile (20.2%) has significantly more episodes than the middle quintile (19.3%).
- In the 85-94 age group (21,263 episodes), the least deprived quintile (23.2%) and second least deprived quintile (23.1%) have significantly more episodes than others, with the middle quintile (20.2%) significantly above the two most deprived ones.
- Finally, in the 95 and over age group (1,721 episodes), there are again significantly more from people from the two least deprived quintiles (23.5% each) and the middle quintile (21.4%) is significantly above the two most deprived ones.

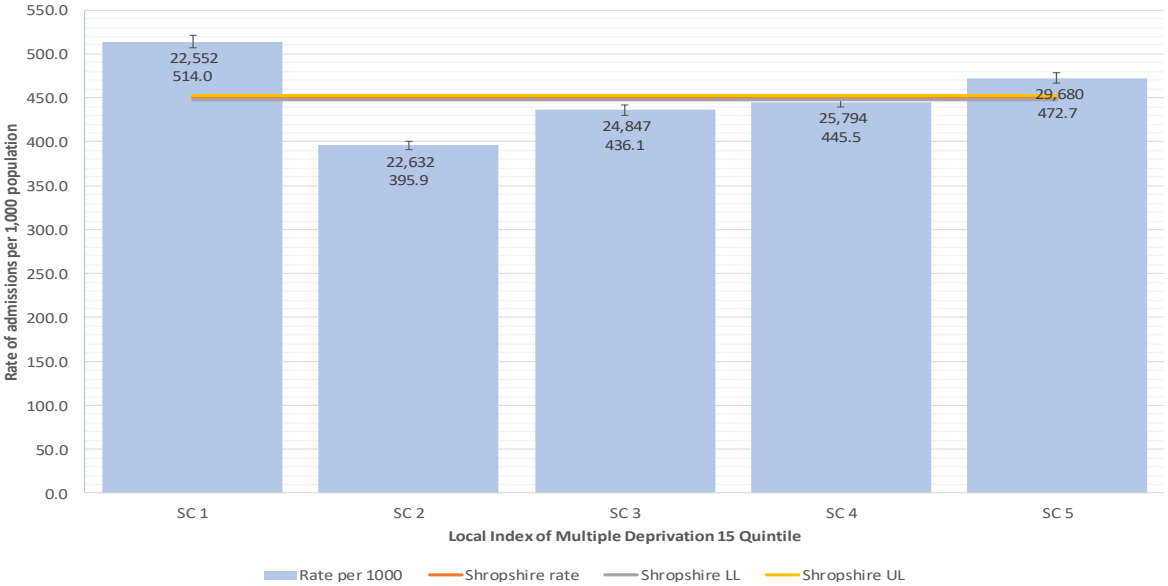
Figure 81: Local IMD Quintile by Age group for Shropshire Patients who were Discharged as Inpatients Between April 2014 and March 2018



Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 82 shows a breakdown of the inpatient admissions by on IMD quintiles but as a rate per 1,000 population aged 65+ (4 years) for each quintile – this reveals that Shropshire's admission rate was 450.3 per 1,000, with the rate statistically higher than this in the most deprived quintile (514 per 1,000) and the least deprived quintile (472.7 per 1,000), while the rates in the middle quintile and second most deprived quintile were significantly below Shropshire (436.1 and 395.9 per 1,000 respectively).

Figure 82: Local IMD Quintile of Shropshire Patients who were Discharged as Inpatients Between April 2014 and March 2018 - Rate per 1,000 Population

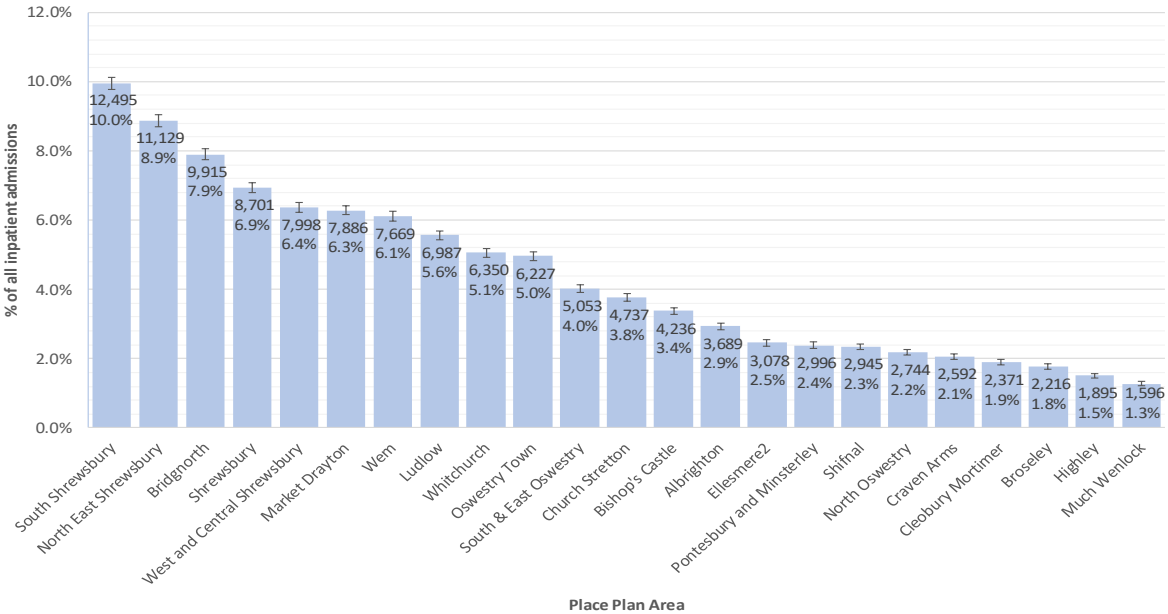


Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.2.14 Place Plan

Figure 83 shows the percentage of all inpatient admissions by each place plan area and this reveals most episodes were from people living in the South Shrewsbury (12,495 episodes, 10%) and North East Shrewsbury (11,129 episodes, 8.9%) place plan areas. In contrast, the fewest episodes came from the Highley (1,895 episodes, 1.5%) and Much Wenlock (1,596 episodes, 1.3%) place plan areas.

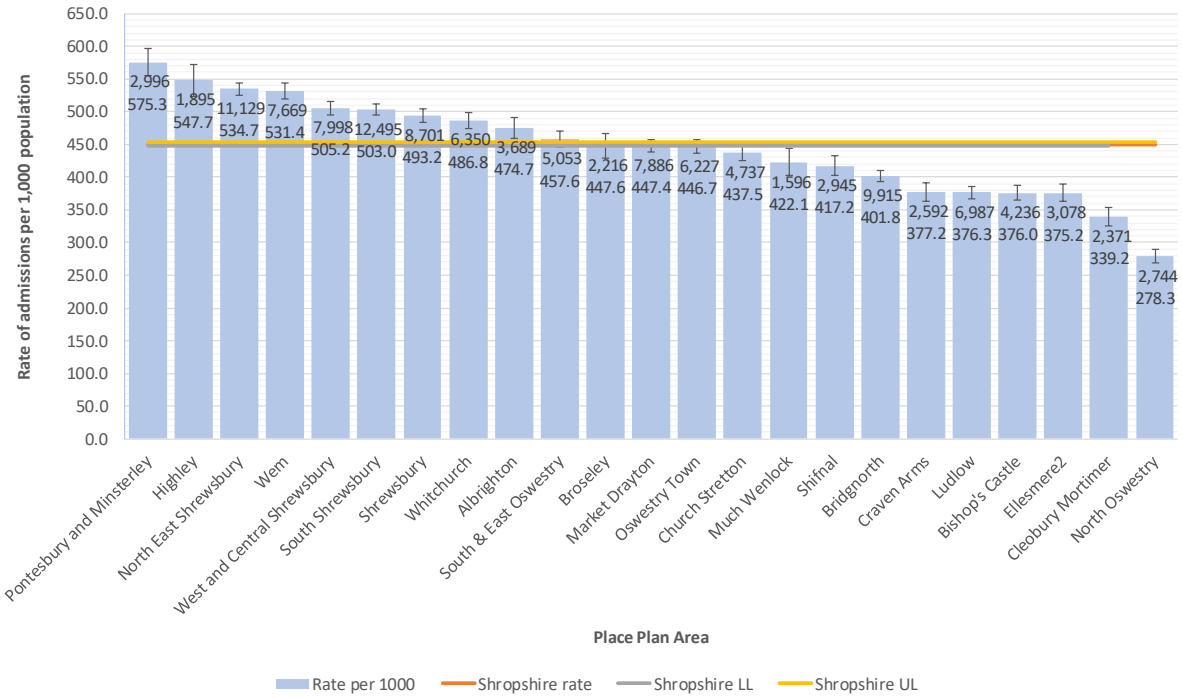
Figure 83: Place Plan Area of Shropshire Patients who were Discharged as Inpatients Between April 2014 and March 2018



Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 84 shows the rate of admission per 1,000 population aged 65 or over by place plan area and this reveals that Pontesbury and Minsterley, Highley, North East Shrewsbury, Wem, West and Central Shrewsbury, South Shrewsbury, Shrewsbury, Whitchurch and Albrighton place plan areas have significantly higher rates than Shropshire.

Figure 84: Place Plan Area of Shropshire Patients who were Discharged as Inpatients between April 2014 and March 2018 - Rate per 1,000 Population



Source: Shropshire CCG patients, Inpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3 Outpatient data

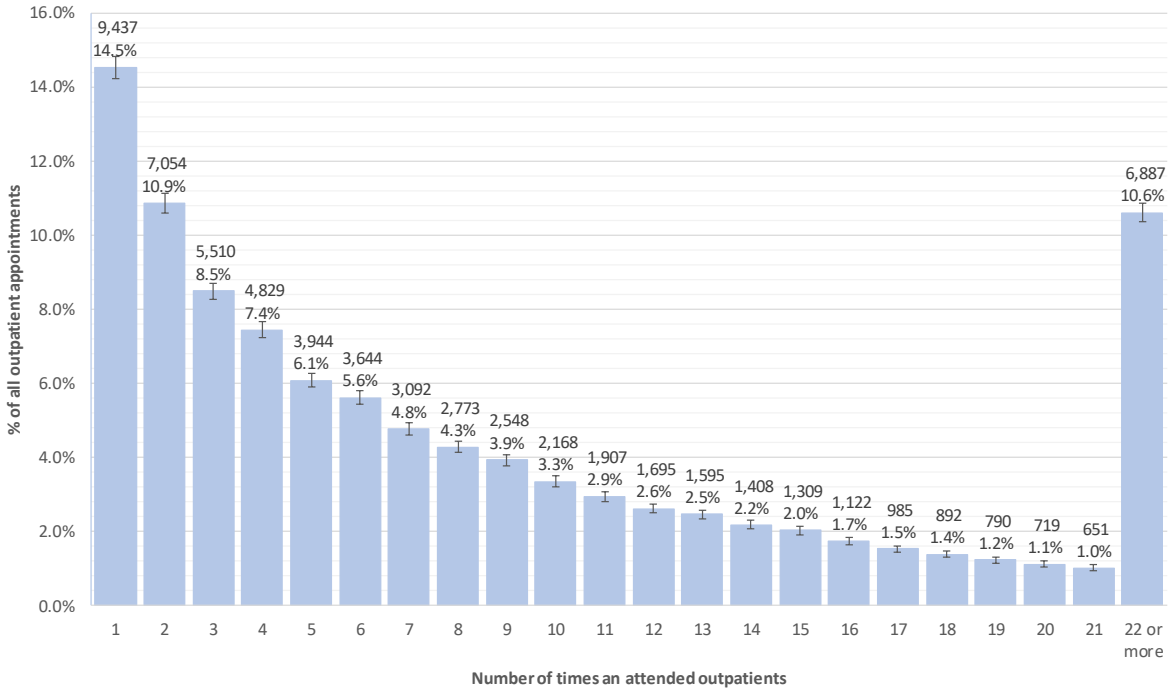
An extract from SUS was taken of Shropshire patients aged 65 or over who had attended for outpatient appointments between 1st April 2014 and 31st March 2018 – this revealed 617,431 outpatient spells in total.

7.3.1 Number of times individuals had outpatient appointments

In the period there were 617,431 outpatient appointments for patients aged 65 and over, however, this was made up of 64,959 unique NHS numbers, while a further 117 episodes did not have a NHS number recorded, so on average a person would have attended between 9 and 10 times in this period.

Figure 85 shows the number of times individuals attended an outpatient appointment in this period as a percentage of the unique individuals. More individuals attended only 1 outpatient appointment (14.5%), while nearly 11% attended 2 outpatient appointments. However, over a third of individuals (22,128 patients) attended 10 or more outpatient appointments including, 6,887 (10.6%) who attended 22 or more appointments, and 691 individuals (1.1%) who attended 50 or more appointments and 35 individuals (0.1%) had 100 or more appointments.

Figure 85: Times Patients Attended Outpatients Between April 2014 and March 2018

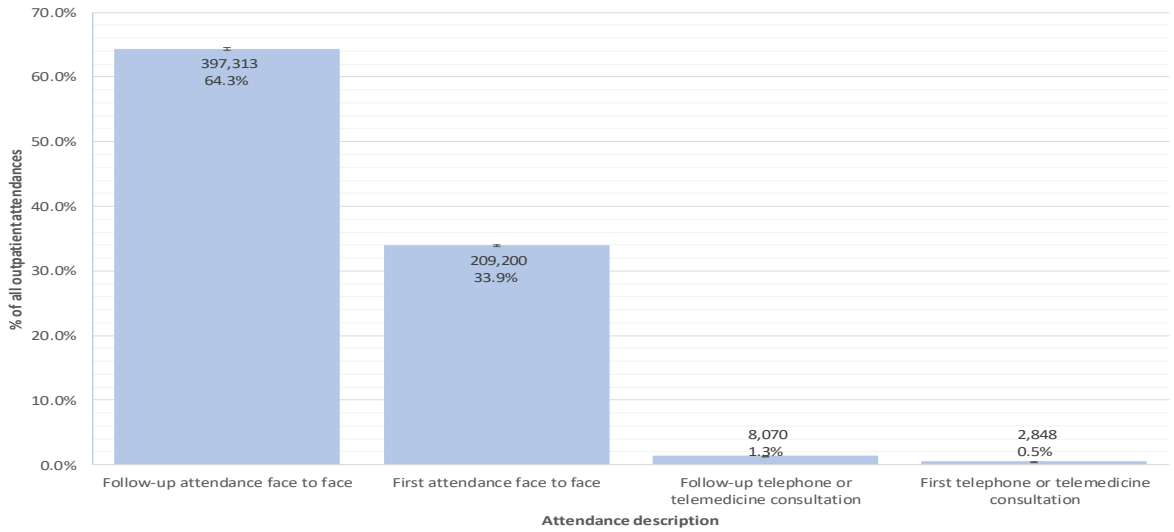


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.2 Appointment Attendance Description

Figure 86 shows that 64.3% of attendances were a face to face follow up, while 33.9% were first attendances face to face. Just under 11,000 (1.8%) outpatient appointments were not in person, either as a first or follow up appointment.

Figure 86: First Attendance Description for Patients Attending Outpatients Between April 2014 and March 2018

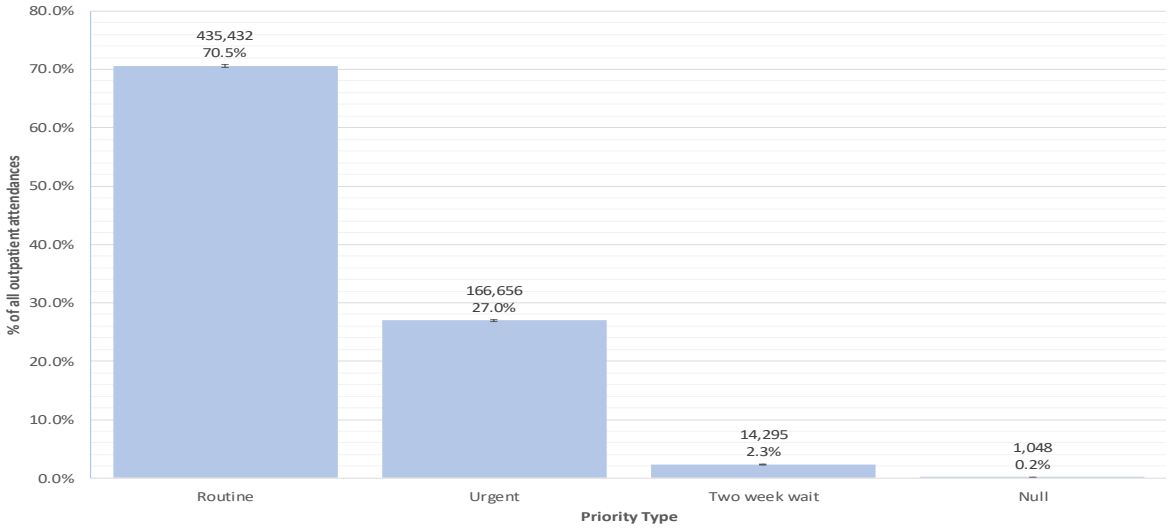


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.3 Appointment Priority

Of the 617,431 patients, just over 70% (435,432) had routine appointments, while 27% (166,656) had urgent appointments and 2.3% (14,295) were two week waits.

Figure 87: Appointment Priority for Patients Attending Outpatients Between April 2014 and March 2018

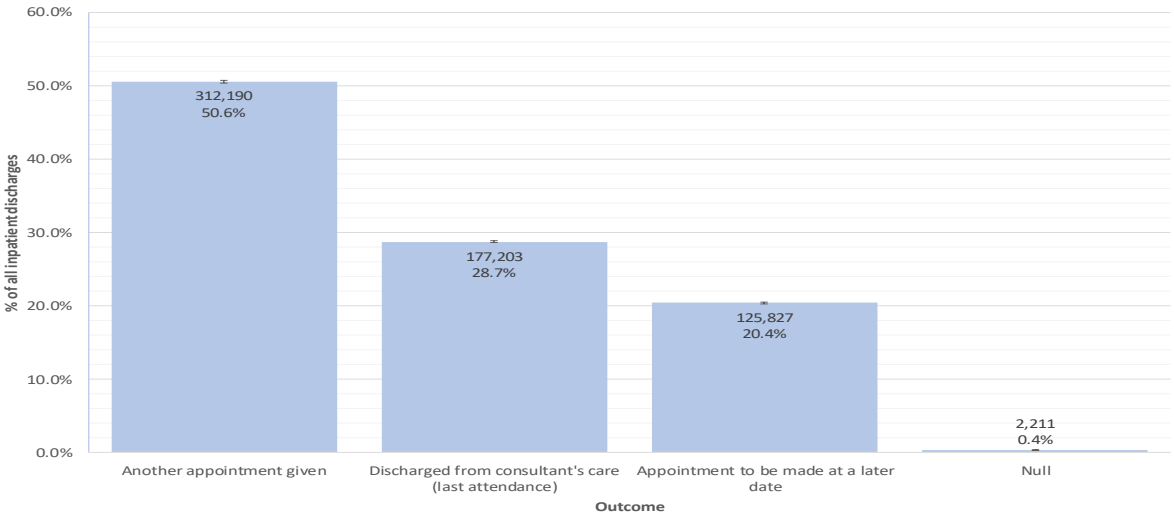


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.4 Attendance Outcome

Figure 88 shows that over half of the attendances resulted in another appointment being given, while another 20.4% of appointments would have an appointment made at a later date and 28.7% resulted in the patient being discharged from care.

Figure 88: Attendance Outcome for Patients Attending Outpatients Between April 2014 and March 2018

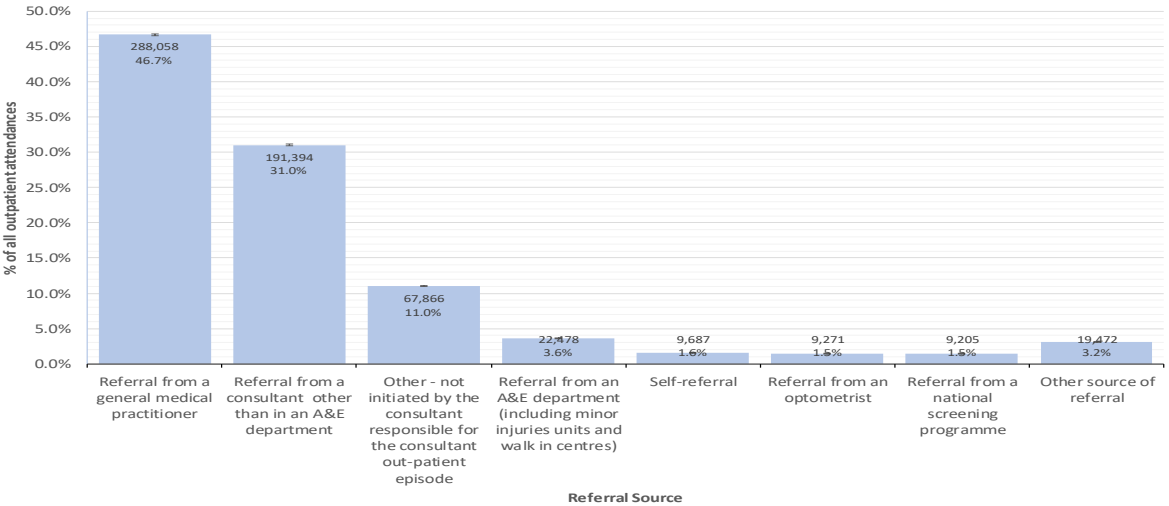


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.5 Referral Source

Nearly half of the attendance's referral was from a general medical practice, while nearly a third were from a consultant other than in A&E and 11% were referred by a different consultant than the one they were seeing and 3.6% came from A&E.

Figure 89: Referral Source for Patients who Attended Outpatients Between April 2014 and March 2018



Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

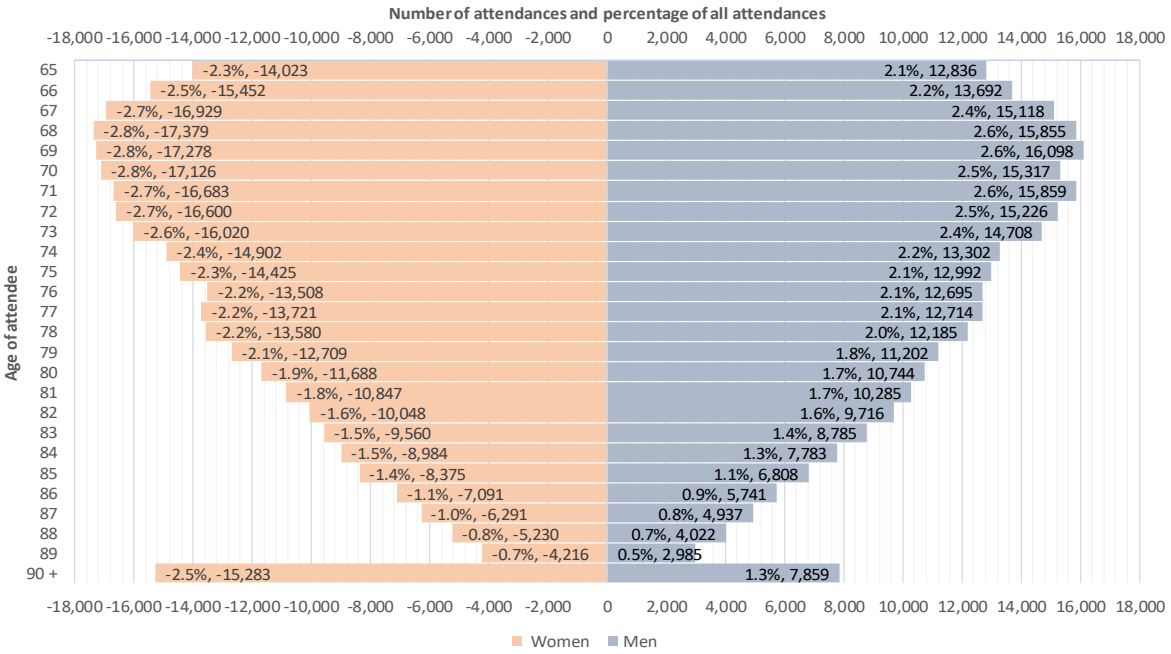
7.3.6 Ethnicity

Over 87% of the patients were classified as a British, while ethnicity was unknown for 11% and the remainder were one of 15 other ethnicities.

7.3.7 Age and Gender

Of the outpatients, 53.1% were female and 46.9% were male. For each year of age, there were in the region of 25,000 to 34,000 attendances for people aged between 65 and 78, and there were 23,144 (3.7%) among people aged 90 and over and 241 attendances for people aged 100 and over. Figure 90 shows the number of attendances and percentage of all attendances by age for males and females. For every single year of age there were more female attendances than male ones with the gap increasing as ages increase, but the most noticeable difference is in the people aged 90 or over, with 15,283 women compared to 7,859 males, which accounts for 2.5% and 1.3% of all episodes respectively.

Figure 90: Age and Gender of Patients who Attended Outpatients Between April 2014 and March 2018

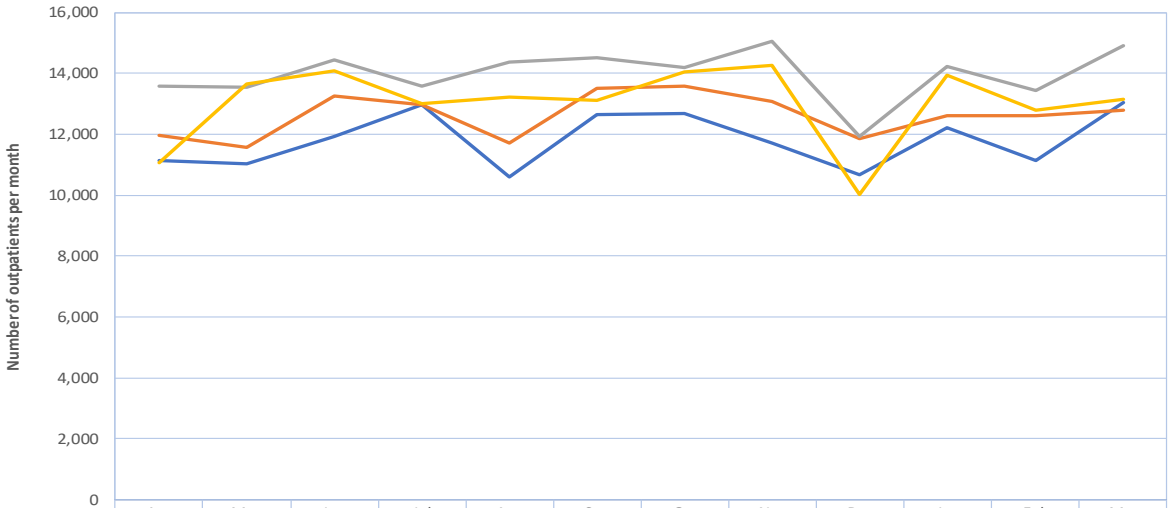


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.8 Month attended

Figure 91 shows the month the patients attended in each of the financial years and from this it appears that the number of people aged 65 and over has been increasing, with 141,816 appointments in 2014/15, 151,550 in 2015/16, 167,746 in 2016/17 and 156,319 in 2017/18. In every month of the four financial years there were more attendances in 2016/17.

Figure 91: Number of Patients who Attended Outpatients by Month Between April 2014 and March 2018



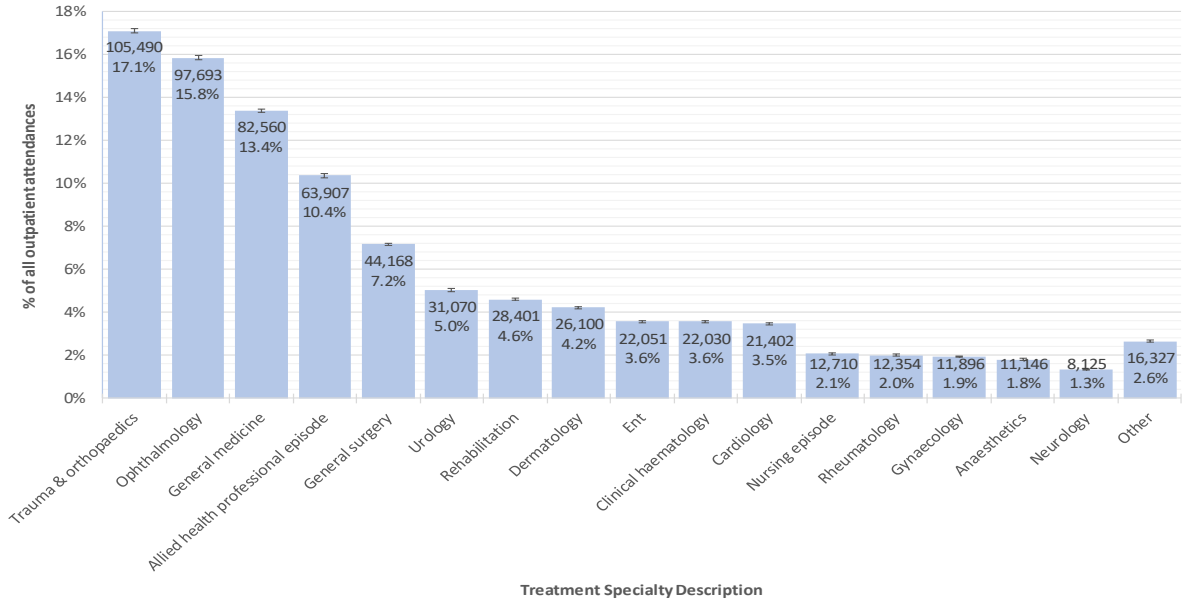
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2014/15	11,136	11,016	11,945	12,970	10,596	12,639	12,702	11,720	10,665	12,215	11,157	13,055
2015/16	11,976	11,558	13,251	12,969	11,703	13,528	13,599	13,082	11,845	12,619	12,627	12,793
2016/17	13,586	13,536	14,448	13,569	14,356	14,500	14,184	15,051	11,937	14,214	13,436	14,929
2017/18	11,068	13,654	14,073	13,007	13,206	13,107	14,043	14,253	10,033	13,925	12,809	13,141

Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.9 Consultant's Specialty

Figure 92 shows that the consultant's main specialty for these outpatient appointments was trauma and orthopaedics which accounted for 105,490 (17.1%), this was significantly above ophthalmology (97,693, 15.8%) and general medicine (82,560, 13.4%), although there were a large range of other specialties recorded.

Figure 92: Main Specialty for Patients Attending Outpatients between April 2014 and March 2018

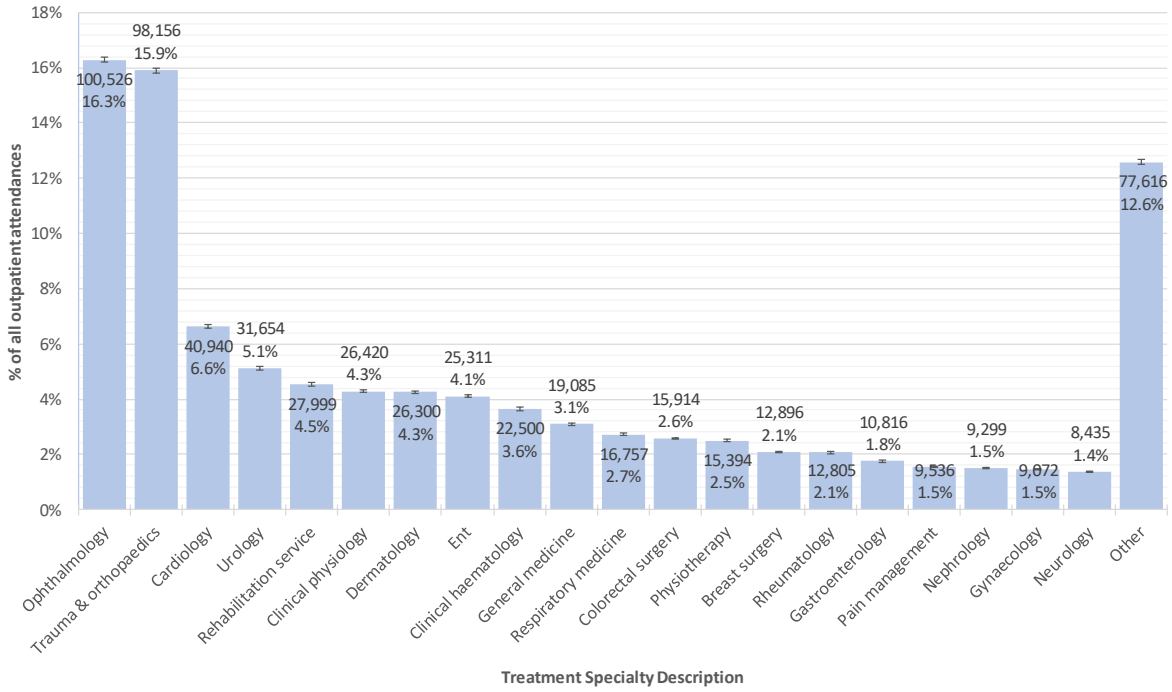


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.10 Treatment Specialty

Figure 93 shows that the most common treatment specialty for these outpatient appointments was ophthalmology (100,526, 16.3%) which was significantly higher than trauma and orthopaedics (98,156, 15.9%). These two had more than double any other specialty, with cardiology third and urology forth with a large range of other specialties recorded.

Figure 93: Treatment Specialty for Patients Attending Outpatients Between April 2014 and March 2018

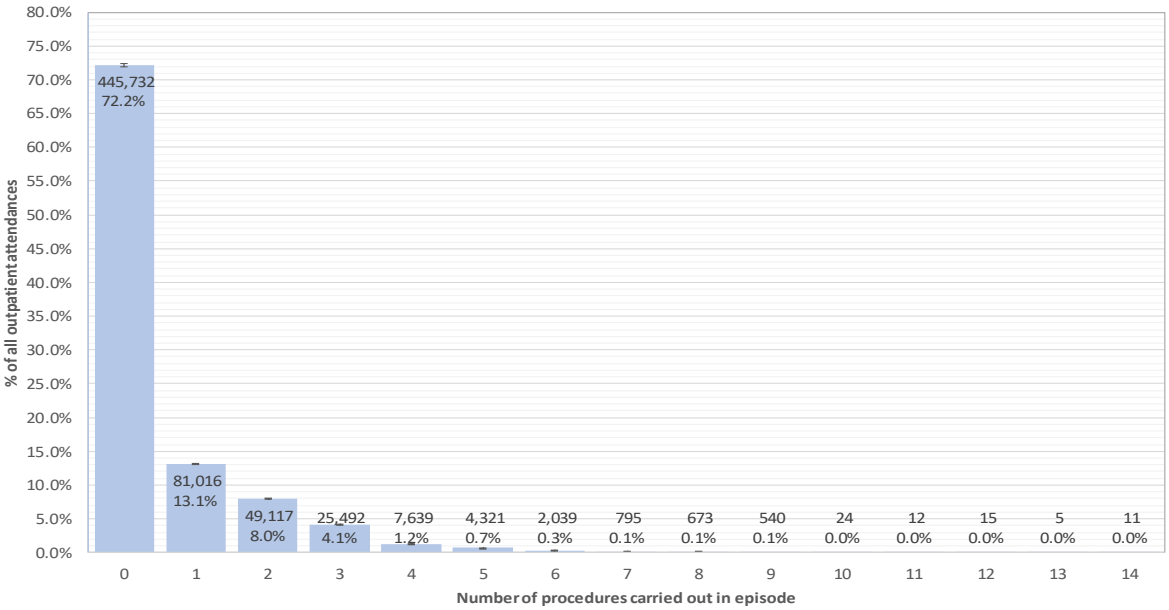


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.11 Number of Clinical Interventions

Figure 94 shows the number of procedures or diagnostic tests that patients had when they attended their outpatient appointment, with the vast majority (445,832, 72.2%) not having any. Of the remainder, 81,016 (13.1%) had one intervention, while 49,117 (8%) had two, while 5 or more interventions were carried out in 8,435 outpatient appointments (1.4%).

Figure 94: Number of Clinical Interventions for Patients Attending Outpatients between April 2014 and March 2018

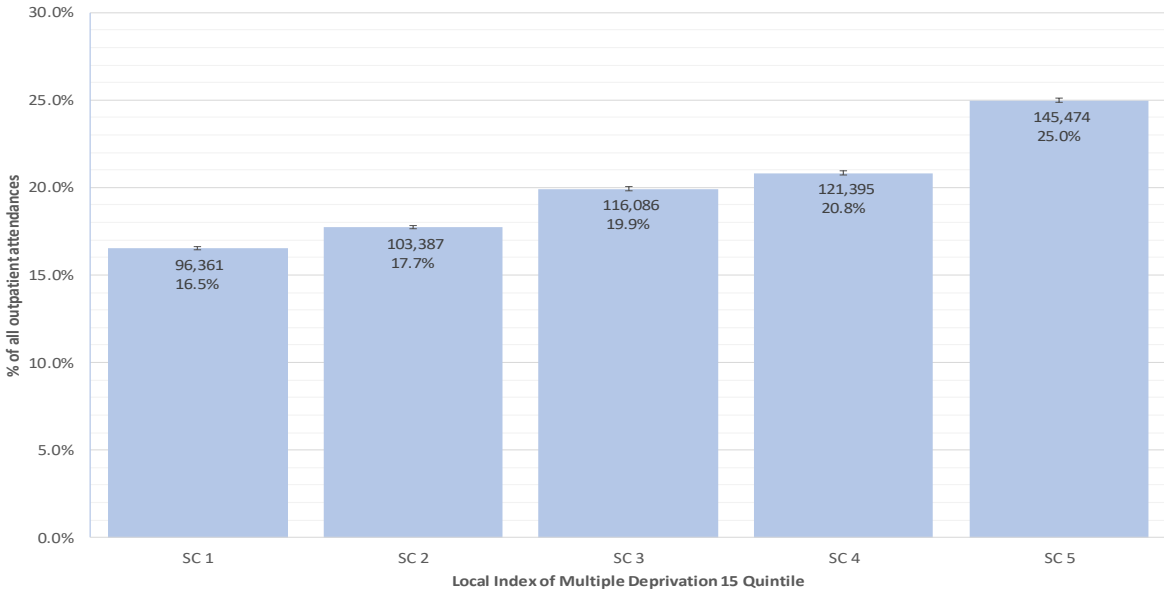


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.12 Local Index of Multiple Deprivation (IMD)

Figure 95 shows there are statistically more outpatient appointments for patients from the least deprived areas and the number significantly decreases as there is more deprivation. The caveats to this are that there could be more older people who are from the least deprived groups and second, this could be due to nursing homes location.

Figure 95: Local IMD Quintile of Shropshire Patients Attending Outpatients between April 2014 and March 2018

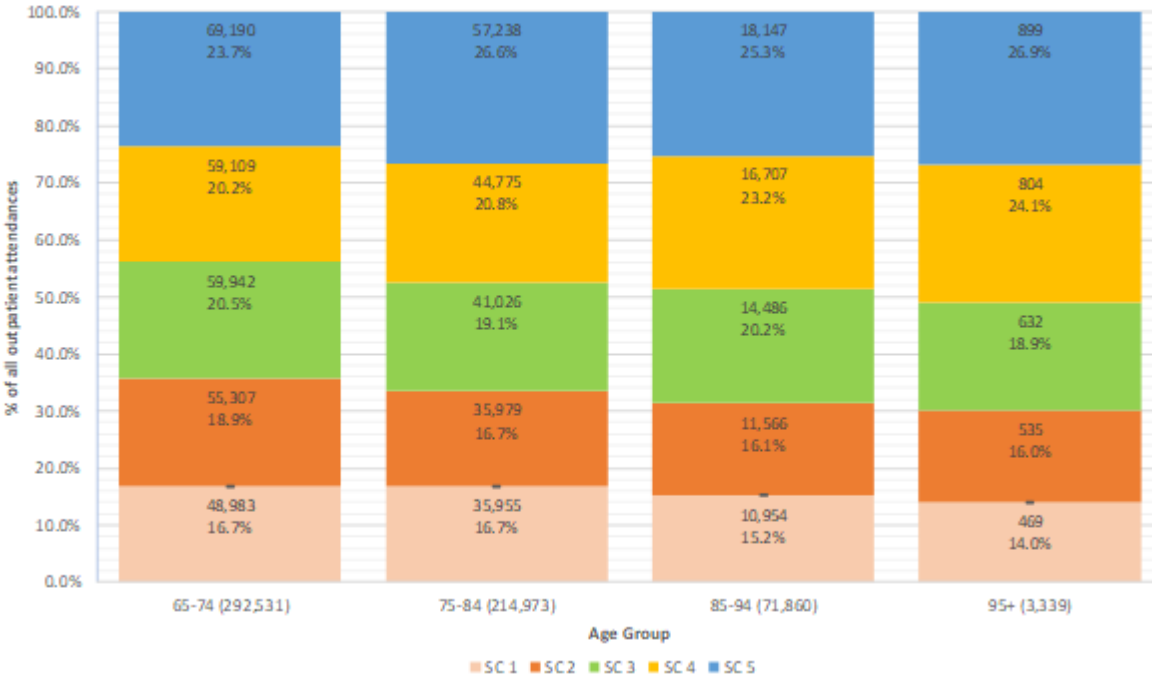


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 96 shows the IMD quintile of the total number of attendees in four age groups:

- In each of the age groups there were significantly more attendances from people from the least deprived quintile than any other, the only exception was in the 95+ age group, where attendances from the least deprived and second least deprived areas were statistically similar.
- Attendances from people in the most deprived quintile were the significantly lowest than from other quintiles in the 65-74 and 85-94 age groups, while in the 75-84 and 95+ age groups there were statistically similar percentages between the most and second most deprived quintiles.

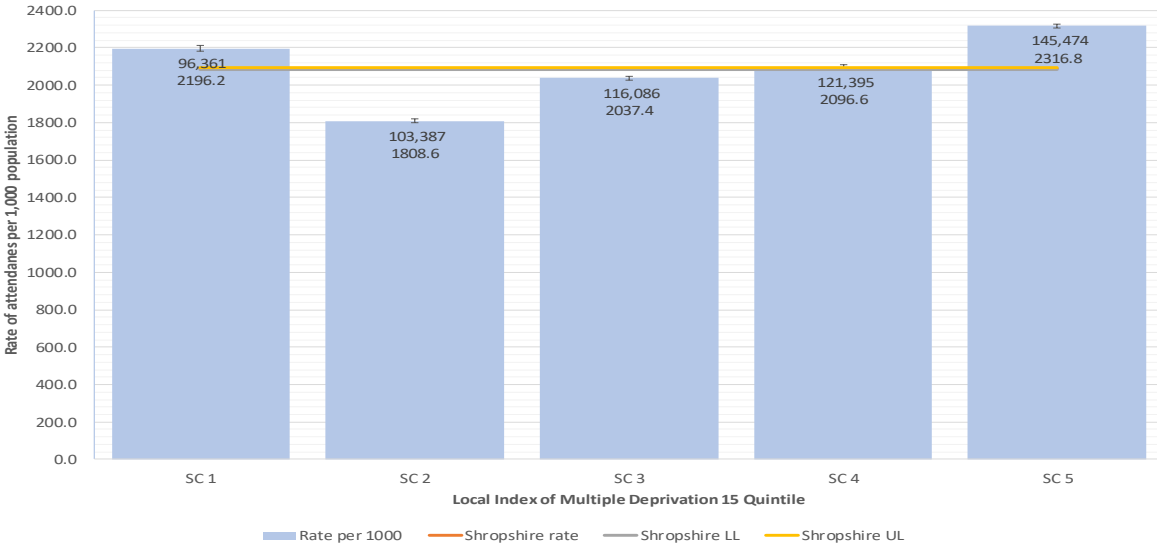
Figure 96: Local IMD Quintile by Age group for Shropshire Patients Attending Outpatients between April 2014 and March 2018



Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 97 shows a breakdown of the outpatient attendances by IMD quintiles but as a rate per 1,000 population aged 65+ in each quintile – this reveals that Shropshire's overall admission rate was 2090.7 per 1,000, with the rate of attendances statistically higher than this in the least deprived quintile (2316.8 per 1,000) which was significantly above the most deprived quintile (2196.2 per 1,000) and the rates in the middle quintile and second most deprived quintile were significantly below Shropshire (2037.4 and 1808.6 per 1,000 respectively).

Figure 97: Local IMD Quintile of Shropshire Patients attending Outpatients Between April 2014 and March 2018 - Rate per 1,000 Population

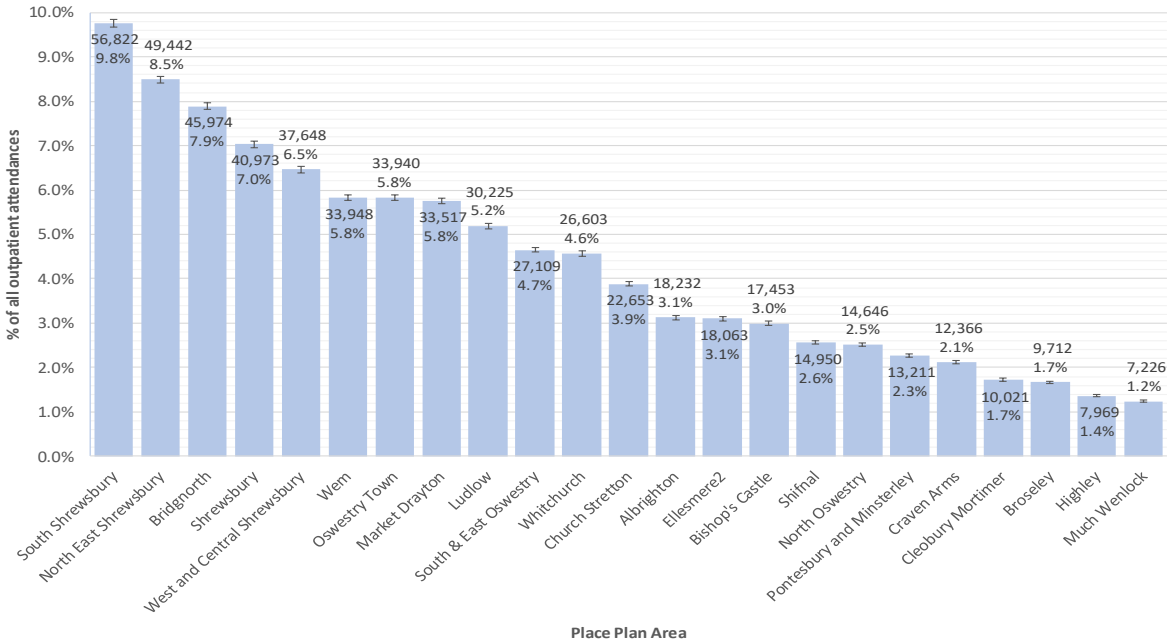


Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

7.3.13 Place Plan

Figure 98 shows the percentage of all outpatient attendances by the place plan area they live in and this shows that South Shrewsbury (56,822, 9.8%), North East Shrewsbury (49,442, 8.5%), Bridgnorth (45,794, 7.9%) and Shrewsbury (40,973, 7%) had the highest attendances. In contrast, Cleobury Mortimer, Broseley, Highley and Much Wenlock place plan areas had under 2% of all attendances each.

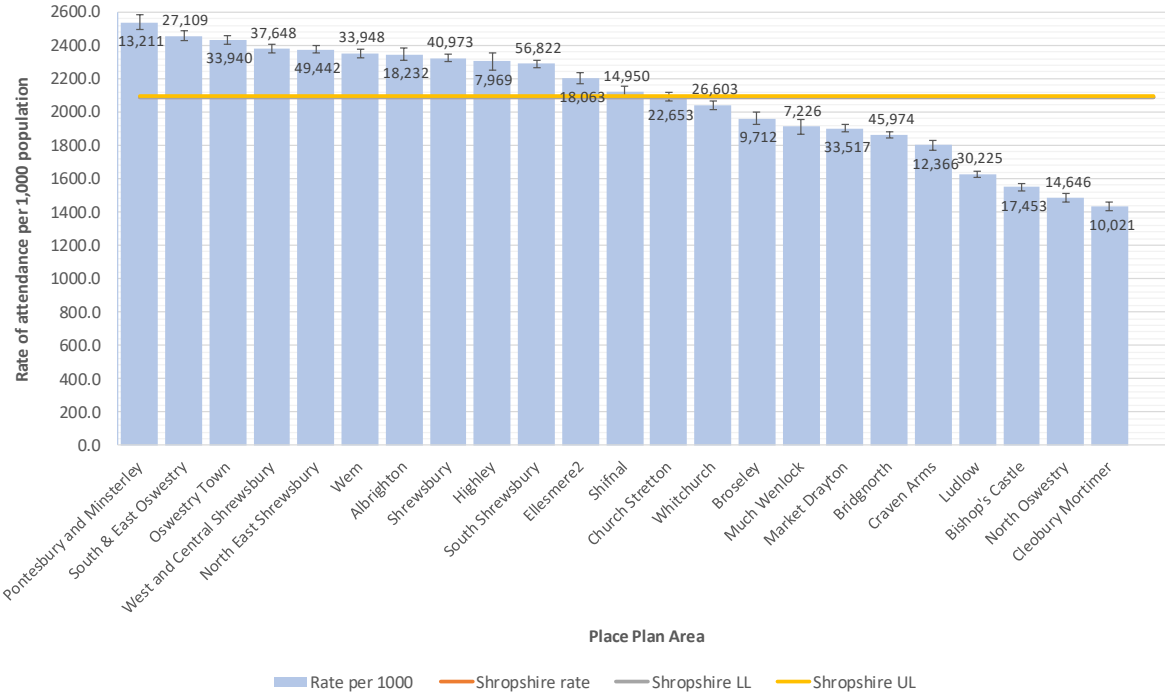
Figure 98: Place Plan Area of Shropshire Patients Attending Outpatients between April 2014 and March 2018



Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

Figure 99 shows the rate of outpatient attendances per 1,000 population aged 65 or over by place plan area and this reveals that Pontesbury and Minsterley, South and East Oswestry, Oswestry Town, West and Central Shrewsbury, North East Shrewsbury, Wem, Albrighton, Shrewsbury, Highley, South Shrewsbury and Ellesmere place plan areas have significantly higher rates than Shropshire's rate (2090.7 per 1,000 population).

Figure 99: Place Plan Area of Shropshire Patients Attending Outpatients between April 2014 and March 2018 - Rate per 1,000 Population



Source: Shropshire CCG patients, Outpatient dataset from SUS, NHS Digital, 2014/15 to 2017/18

8 Drug and Alcohol Use

A substance misuse in Adults in Shropshire needs assessment was written in September 2018, which covered all age groups, however, some of the information that relates to older people has been included within this assessment.

8.1 Adult Substance Misuse Treatment Services in Shropshire 2016/17

Since April 2016, Shropshire Recovery Partnership has provided and treatment for individuals who struggle with misuse of either drug or alcohol or both.

8.2 Treatment for Drugs

In 2016/17 in Shropshire there were 873 individuals in treatment for drugs. Three quarters of those in treatment were male (76%) and a quarter were female (24%). The age profile for those in treatment for drugs in shown in Figure 100. The majority were aged under 50 (89%, n=777), while a smaller amount were in the 50-59-year group (10%, n=89) and a small number (1%, n=7) aged over 60. The age profile for males and females attending treatment in Shropshire were largely similar.

Figure 100: Demographics of adults in treatment for drugs in 2016/17

Age of all adults in drug treatment in 2016/17	Local number	Proportion of all clients	Proportion by gender		National number	Proportion of all clients	Proportion by gender	
			Male	Female			Male	Female
18-29	206	24%	22%	27%	36,978	19%	17%	22%
30-39	325	37%	38%	35%	74,720	37%	37%	39%
40-49	246	28%	28%	30%	61,835	31%	32%	27%
50-59	89	10%	11%	8%	21,766	11%	11%	10%
60-69	7	1%	1%	0%	3,631	2%	2%	2%
70-79	0	0%	0%	0%	346	0%	0%	0%
80+	0	0%	0%	0%	63	0%	0%	0%
Total	**873**		**76%**	**24%**	**199,339**		**73%**	**27%**

Source: Adults – Drugs Commissioning Support Pack 2018-19: Key Data, released from Public Health England 2017.

8.3 Treatment for Alcohol

In 2016/17 in Shropshire there were 493 individuals in treatment for alcohol only. Males accounted for 57% of those in treatment and females accounted for 43%. Figure 101 shows the breakdown by age group and gender for those in treatment for alcohol only in Shropshire and compares this to the national figures. 59% in treatment were under the age of 50 (290 clients) , while a quarter were aged 50-59 years (121 clients) and 17% were aged 60 or over (82 clients). The age profile for males and females attending treatment in Shropshire were largely similar.

Figure 101: Demographics of adults in treatment for alcohol in 2016/17

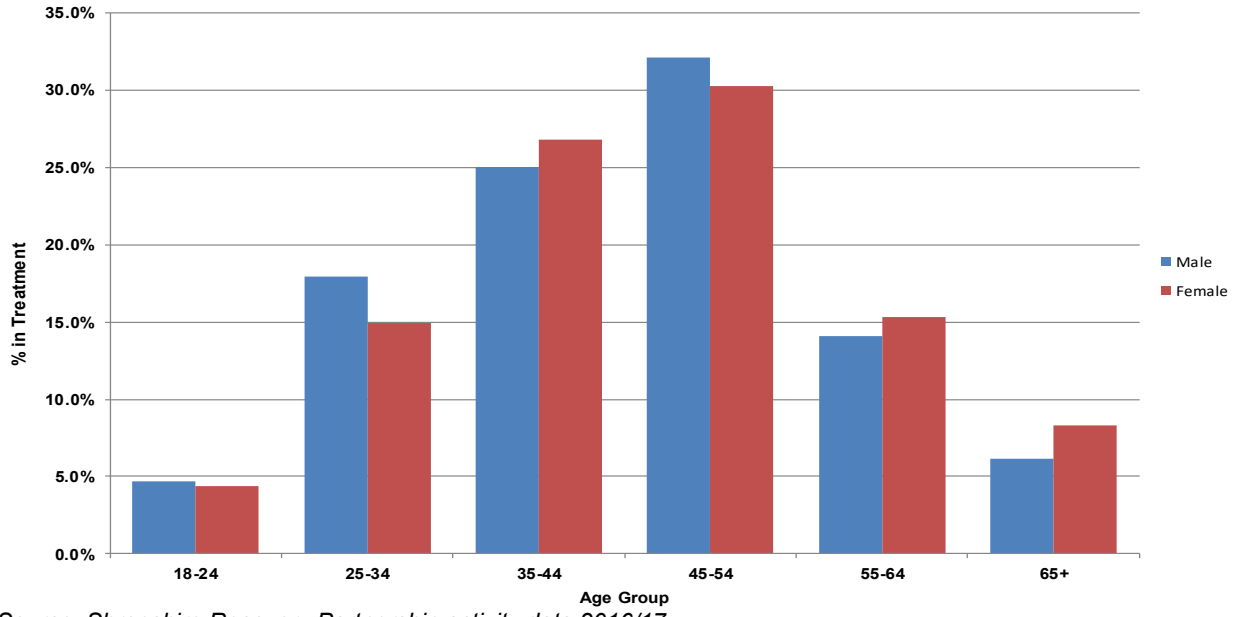
	Shropshire				National			
Age of adults in treatment	**Number**	**% of all clients**	**% of Males**	**% of Females**	**Number**	**% of all clients**	**% of Males**	**% of Females**
18-29	57	12%	11%	12%	7,470	9%	9%	10%
30-39	85	17%	21%	13%	17,391	22%	22%	21%
40-49	148	30%	29%	31%	25,451	32%	32%	32%
50-59	121	25%	24%	25%	20,868	26%	26%	26%
60-69	67	14%	13%	15%	7,718	10%	10%	10%
70+	15	3%	3%	3%	1,556	2%	2%	2%
Total clients in treatment	493		57%	43%	80,454	100%	61%	39%

Source: Adults – Alcohol Commissioning Support Pack 2018-19: Key Data, released from Public Health England 2017.

8.4 Profile of Clients in Treatment for Alcohol by Age and Gender

Activity data was also collected directly from Shropshire Recovery Partnership and analysed independently to determine the age profile of individuals in treatment where alcohol was cited as their main drug of choice. Figure 102 shows the age profile for those in treatment in Shropshire in 2016/17 **who cited alcohol as their main drug of choice.** The age profile for males and females is largely the same as the age profile for those in treatment for alcohol only. The largest proportions for both males and females were in the 45-54 year age band and the second largest proportions were in the 35-44 year age bands. Around 15% of males and females in treatment were aged 55-64 and between 5-10% were aged 65+.

Figure 102: Age and gender profile for Adults in treatment for Alcohol in Shropshire 2016/17*



Source: Shropshire Recovery Partnership activity data 2016/17

** Includes all those in treatment who cited alcohol as their main drug of choice, please note this definition is different to the Figure 2.10a and b i.e. all those in treatment for alcohol only*

8.5 Alcohol Related Health Harms

Figure 103 shows several indicators for hospital admissions by age group for alcohol related conditions in Shropshire. Each indicator is benchmarked against the England and the following indicators were shown to be worse than the England average:

- Admission episodes for Alcohol-related conditions for Females aged 40 -64 years
- Admission episodes for Alcohol-related conditions for Persons aged 65 years +
- Admission episodes for Alcohol-related conditions for Males aged 65 years +
- Admission episodes for Alcohol-related conditions for Females aged 65 years +

The trends for these indicators are shown in figures 104 – 107 respectively.

Figure 103: Indicators for Hospital admissions by age group for Shropshire taken from the Local Alcohol Profiles for England.

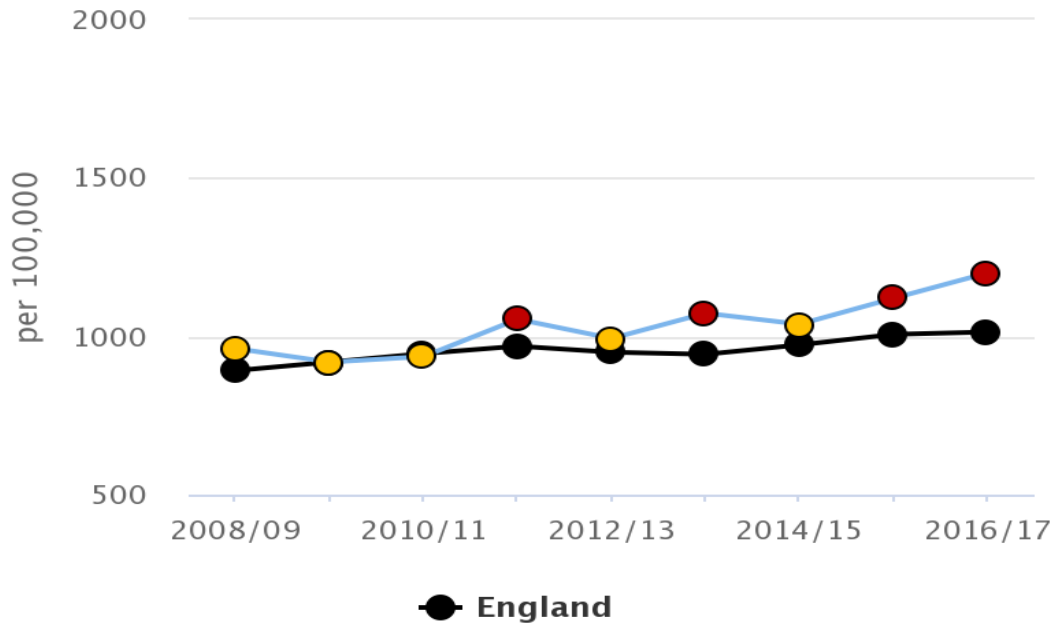
Indicator	Period	Shropshire			Region	England	England		
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
10.06 - Admission episodes for alcohol-related conditions (Narrow) - Under 40s (Persons)	2016/17	–	354	290	314	301	636		152
10.06 - Admission episodes for alcohol-related conditions (Narrow) - Under 40s (Male)	2016/17	–	233	367	365	353	735		170
10.06 - Admission episodes for alcohol-related conditions (Narrow) - Under 40s (Female)	2016/17	–	121	207	262	249	535		113
10.07 - Admission episodes for alcohol-related conditions (Narrow) - 40-64 yrs (Persons)	2016/17	–	940	852	995	887	1,684		485
10.07 - Admission episodes for alcohol-related conditions (Narrow) - 40-64 yrs (Male)	2016/17	–	483	885	1188	1099	2,109		560
10.07 - Admission episodes for alcohol-related conditions (Narrow) - 40-64 yrs (Female)	2016/17	–	457	821	806	681	1,254		338
10.08 - Admission episodes for alcohol-related conditions (Narrow) - Over 65s (Persons)	2016/17	–	894	1,200	1166	1014	1,504		707
10.08 - Admission episodes for alcohol-related conditions (Narrow) - Over 65s (Male)	2016/17	–	585	1,715	1637	1459	2,149		1,041
10.08 - Admission episodes for alcohol-related conditions (Narrow) - Over 65s (Female)	2016/17	–	309	772	785	657	1,133		434
5.02 - Admission episodes for alcohol-specific conditions - Under 18s (Persons)	2014/15 - 16/17	–	48	26.9	28.5	34.2	100.0		6.5
5.02 - Admission episodes for alcohol-specific conditions - Under 18s (Male)	2014/15 - 16/17	–	21	23.1	23.2	27.4	112.4		7.0
5.02 - Admission episodes for alcohol-specific conditions - Under 18s (Female)	2014/15 - 16/17	–	27	30.8	34.1	41.3	129.8		10.0

Source: https://fingertips.phe.org.uk/profile/local-alcohol-profiles/data#page/1/gid/1938132984/pat/6/par/E12000005/ati/102/are/E06000051/iid/91414/age/1/sex/4

8.5.1 Trends in Hospital admission episodes for alcohol related conditions

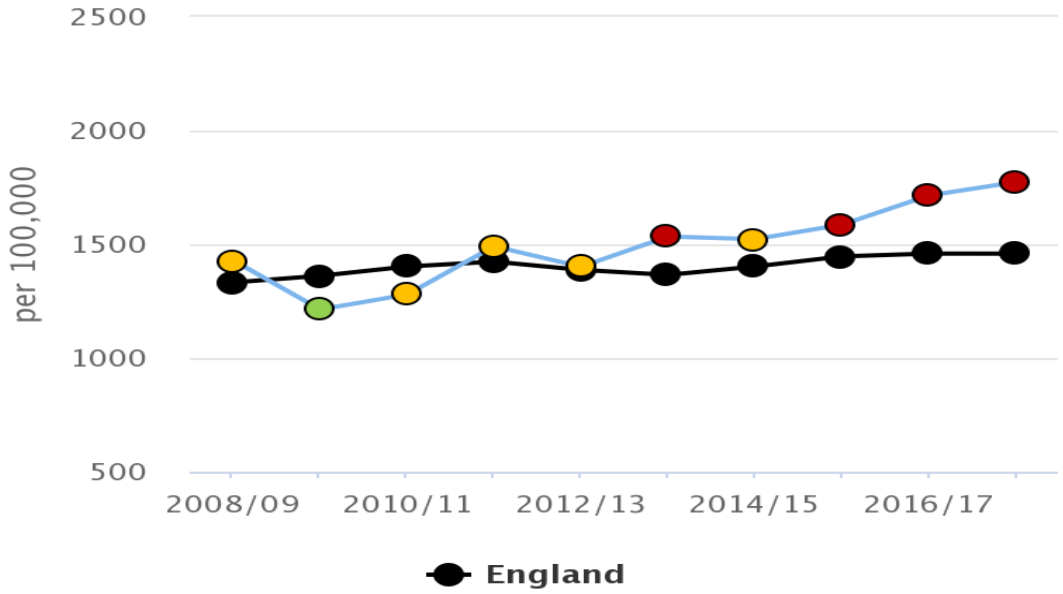
Figure 104, Figure 105 and Figure 106 show the trends in hospital admission episodes for alcohol related conditions in Shropshire and England as an age standardised rate per 100,000. These show that Shropshire's rates have been significantly above England's in the last 2 years for persons and for females and 3 years for males. Shropshire's rates have also been increasing in recent years.

Figure 104: Trends for Persons aged over 65 years



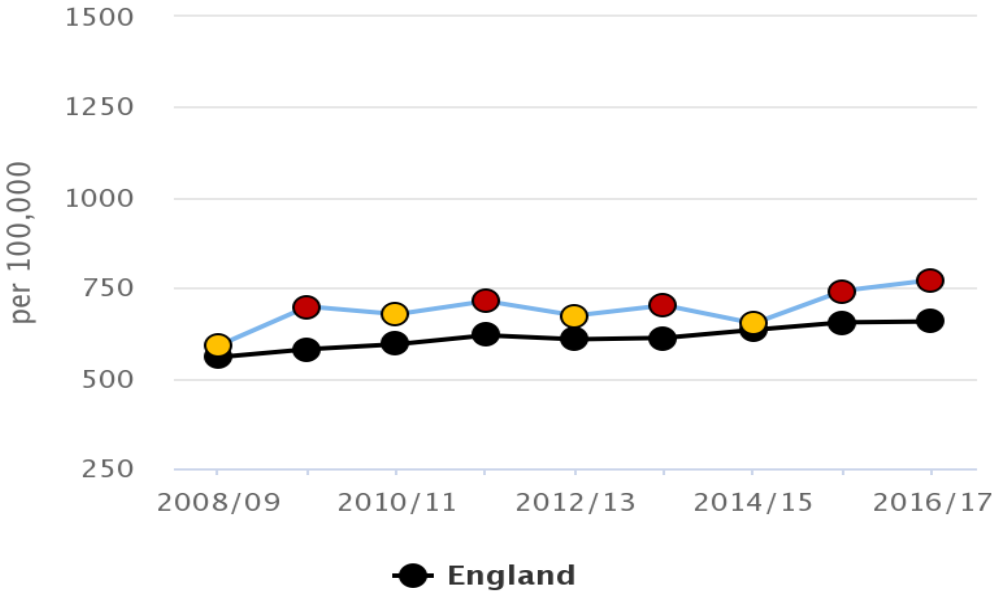
Source: https://fingertips.phe.org.uk/profile/local-alcohol-profiles/data#page/3/gid/1938132984/pat/6/par/E12000005/ati/102/are/E06000051/iid/91414/age/1/sex/4

Figure 105: Trends for Males aged over 65 years



Source: https://fingertips.phe.org.uk/profile/local-alcohol-profiles/data#page/3/gid/1938132984/pat/6/par/E12000005/ati/102/are/E06000051/iid/91414/age/1/sex/4

Figure 106: Trends for Females aged over 65 years



Source: https://fingertips.phe.org.uk/profile/local-alcohol-profiles/data#page/3/gid/1938132984/pat/6/par/E12000005/ati/102/are/E06000051/iid/91414/age/1/sex/4

9 Police Crime Data

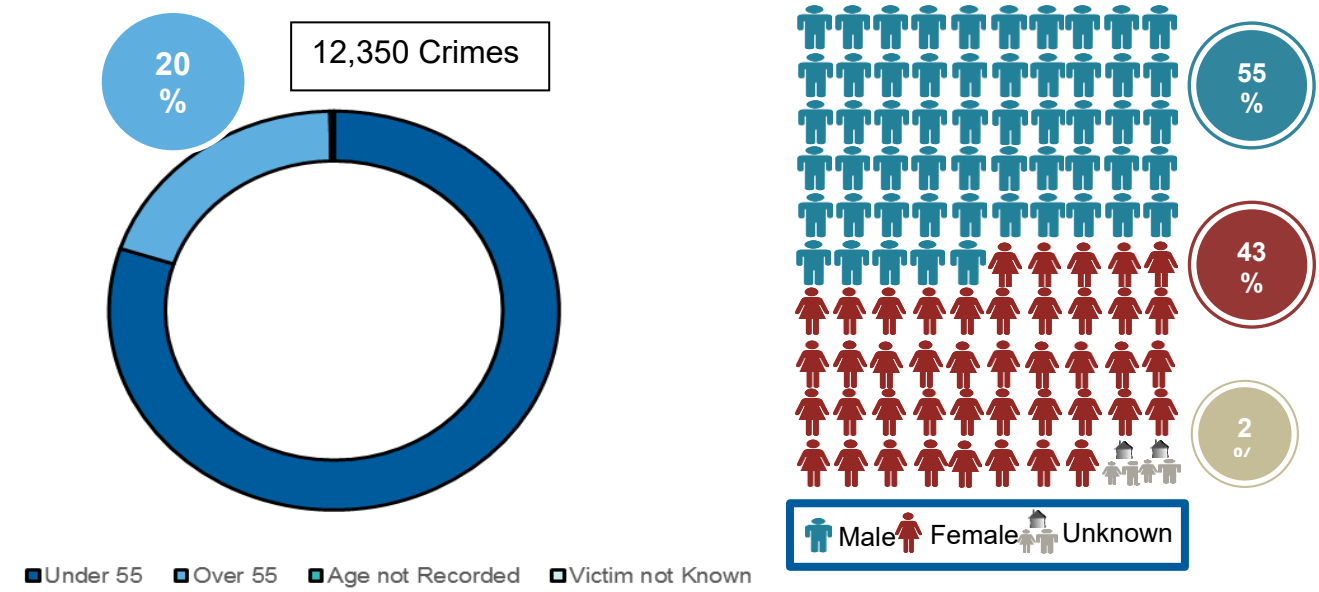
9.1 Data Methodology

The crime data has been extracted by the safer communities data analyst within the community safety and health protection part of Shropshire's public health team from the Athena crime database in November 2018, using data between 1st October 2017 and 31st October 2018 in Shropshire. The West Mercia Police and Warwickshire Police alliance started using this database on the 4th of October 2017, although data quality was initially poorer than would be usually expected.

9.2 Crimes reported in Shropshire

Figure 107 shows that during the period 1st October 2017 to 31st October 2018, there were 12,350 crimes where the victim lives in Shropshire, 20% of these involved a victim that was aged 55 and over, and of the victims of this age, 55% were males, 43% were females and 2% unknown.

Figure 107: All crimes between 1 October 2017 and 31 October 2018 where the victim lives in Shropshire

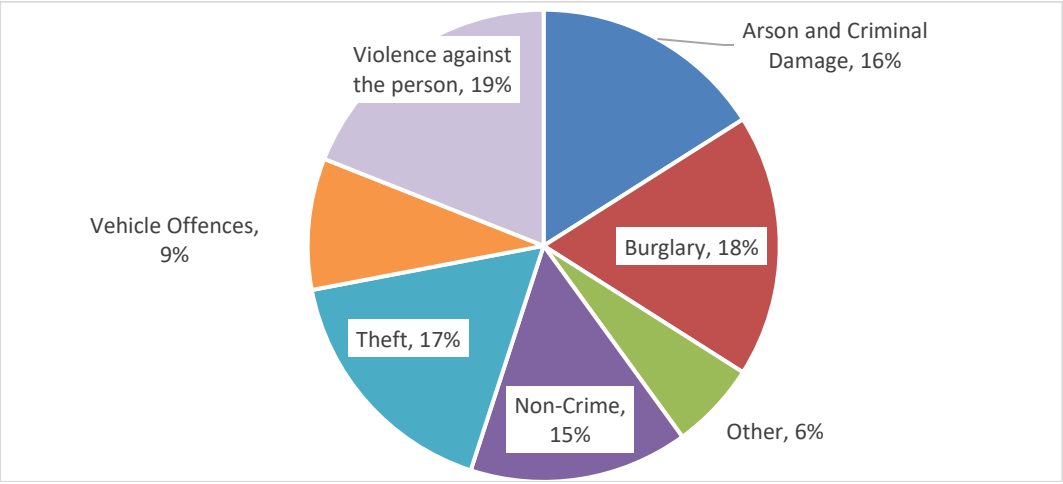


Source: Athena Database, West Mercia Police and Warwickshire Police Alliance, 2018

9.3 Crimes in Shropshire where the victim lives in Shropshire

Figure 108 shows a breakdown of the 12,350 crimes where the victim was 55 or over by type and this shows that violence against the person (19%) was the highest, while burglary (18%) and theft (17%) followed, with arson and criminal damage making up 16% and non-crimes (15%) – that is reported incidents resulting in no criminal outcome.

Figure 108: Crimes in Shropshire between 1st October and 31st October, where the victim lives in Shropshire and is 55 or over



Source: Athena Database, West Mercia Police and Warwickshire Police Alliance, 2018

Table 9 shows the crimes that were prevalent in victims aged 55 and over – where at least 25% of the total victims for that crime were aged over 55 – although this only shows crimes with 10 or more victims in total where the number of victims in both age groups was 5 or more. The crime with the highest percentage of victims aged 55 and over was burglary in a dwelling (55%) although there were only 11 victims in total, although burglaries in residential had 45% of victims aged 55 and over and there were nearly a thousand victims in total. Adult protection was a crime in which 48% of victims were aged 55 and over, with nearly 300 victims in total over this time.

Table 9: Crimes in Shropshire between 1st October and 31st October, where the victim lives in Shropshire – List of Crimes with 10 or more Victims in total where more than 25% of victims were aged 55 and over

Home Office Crime Sub Class	Number of victims		% of victims aged 55 +
	Under 55	Over 55	
Adult protection	149	140	48%
Arson not endangering life	17	6	26%
Attempted burglary - residential	104	70	37%
Burglary – business and community	116	70	36%
Burglary – residential	528	441	45%
Burglary in a dwelling	5	6	55%
Criminal damage to a building other	28	18	39%
Criminal damage to a dwelling	372	155	29%
Exposure and voyeurism	18	6	25%
Investigation	126	89	41%
Mental Health	17	8	32%
Non-notifiable	83	29	26%
Other criminal damage	308	153	33%
Other notifiable offences	12	9	43%
Other theft	543	373	40%
Theft from a motor vehicle	497	172	26%
Theft from the person	92	47	34%
Theft in a dwelling other auto mach	112	70	38%
Theft / unauthorised taking of a vehicle	141	68	33%
Threat intent to commit criminal damage	42	15	26%

Source: Athena Database, West Mercia Police and Warwickshire Police Alliance, 2018