

# LAMBETH JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)





# **HEALTH OF 65+ POPULATION IN LAMBETH**

FACTS AND FIGURES
UPDATE 2011

Created: November 2011

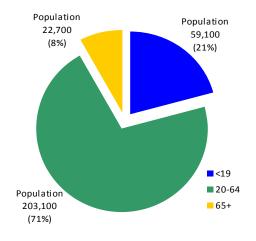
NHS Lambeth 2011©



# **POPULATION**

#### **RESIDENT POPULATION**

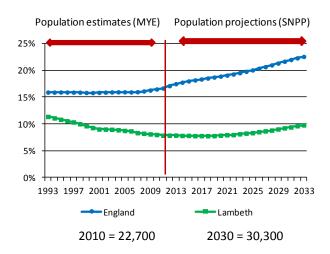
- 65+ population = 22,700 (8%).
- 65+ Males =10,000; 65+ Females = 12,700.



 8% of Lambeth's population is 65+ compared to 16.5% in England and 12% in London.

# **PROJECTION**

• The 65+ population is expected to increase by up to 16.5% and 85+ population by 18% by 2030.



# WARD DISTRIBUTION

 Higher % of 65+ population is estimated to be resident in Gipsy Hill, Thornton and Streatham Hill wards in the southern half of Lambeth.

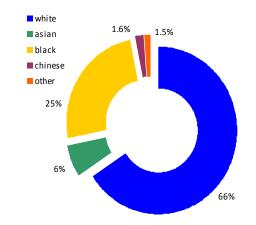
Lambeth Joint Strategic Needs Assessment Older People (65+): Facts and Figures

#### **GP REGISTERED POPULATION**

 28,630 people aged 65+ are registered with Lambeth General Practices (GP).

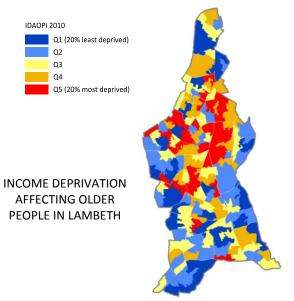
#### **ETHNICITY**

- 66% of older population in Lambeth is White.
- 17.5% population is Black African.
- 6% population is Black Caribbean.



#### **DEPRIVATION**

- Lambeth is densely population with high levels of deprivation especially in the Coldharbour, Vassall and Gipsy Hill wards in the Southeast locality and also in Bishop's ward in North locality.
- Income deprivation in 65+ population is also comparatively high in these wards.





# **HEALTH & LIFESTYLE**

#### **HOUSING**

Inappropriate housing is a principal cause of poor outcomes for older people.

- A third (8000+) of 65+ is estimated to live alone.
- 40% of 65+ live in owned home.
- 35% live in council rented homes.
- 12% living in private rented or rent-free homes.

#### **BEHAVIOUR**

% Smokers	Hazardous	Obesity in		
65+	Drinking in 65+	65+		
14%	10%	25%		

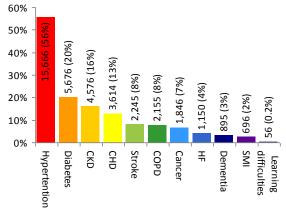
**Smoking:** Prevalence in 60+ has increased from 12% in 2007 to 14.3% in 2009. Lambeth ranks 9<sup>th</sup> highest amongst London boroughs for smoking related deaths.

**Drinking:** 1 in 6 men & 1 in 15 women (65+) drink more than the recommended limit.

**Obesity**: 1 in 4 older adults are predicted to be obese or morbidly obese. The projections show an expected rise in obesity in the ageing population which is a major risk factor for diabetes and heart disease.

# **ILL HEALTH (MORBIDITY)**

 Out of 28,630 65+ persons on Lambeth GP registers, the long term condition (LTC) register counts are below.



Note: Co-morbidity should be accounted for

Lambeth Joint Strategic Needs Assessment Older People (65+): Facts and Figures

# **FALLS**

- 1 in 4 (6000) older adults are predicted to have a fall
- 10% likely to be admitted & need long term care.
- In 2009-10 Lambeth ranked 7<sup>th</sup> highest amongst London PCTs for fall related hospital admissions; higher than both England and London average.

#### **MENTAL HEALTH**

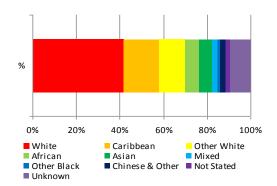
Predicted to have Depression	Have Dementia	Have Severe Mental Illness (SMI)	Known to Learning Disability services
2000	895 (3%)	696 (2%)	470

Note: % Prevalence for the above conditions is lower in Lambeth compared to London and may mean under-detection.

#### **FRAIL ELDERLY**

Man-Son-Hing et.al (1997) defines frail elderly population as those who are dependant for assistance in their activities of daily living (ADL); those who are at high risk of losing functional status; those who are at risk of cognitive impairment, falls, incontinence and immobility; and who rely or would benefit from specialised geriatric services.

Estimating frail elderly population is difficult, and as a proxy measure, the following graph shows the ethnic breakdown of patients with one or more LTC in Lambeth.



# LIFE EXPECTANCY (LE)

LE is rising but gap in England and Lambeth exists.

Lambeth Male LE= 77 & Female LE= 81.1 years					
@ Age 65	Lambeth	London	England		
Male LE	16.9	18.1	17.5		
Female LE	19.9	20.9	20.2		
Male DFLE*	9.8	9.8	10.8		
Female DFLE	9.8	10.8	11.4		

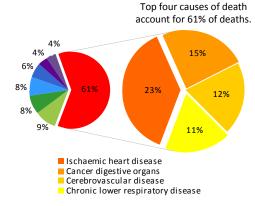
\*Disability Free Life Expectancy



# **MORTALITY**

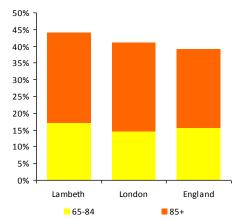
### **CAUSE OF DEATH**

Top four causes of death in 65+ population.

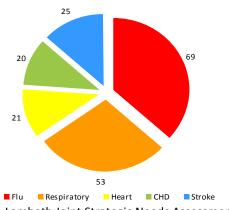


#### **EXCESS WINTER MORTALITY**

According to the WMPHO, Lambeth ranks 10<sup>th</sup> in London in terms of excess winter deaths (EWM) index with values higher than London and England average for 65+ population.



Top conditions causing EWM in Lambeth.



Lambeth Joint Strategic Needs Assessment Older People (65+): Facts and Figures

# **HEALTH SERVICES**

#### **FLU IMMUNISATION**

• **Flu immunization** uptake is 65% with Lambeth ranking 9<sup>th</sup> lowest in London.

#### **SCREENING**

 Breast, cervical and bowel cancer screening uptake is reportedly lower in Lambeth compared to London and England average.

#### **HOSPITAL ADMISSIONS**

#### FALLS

- Accidental falls admissions are high in Lambeth 7<sup>th</sup> out of 31 PCTs in London.
- Oval, Prince's & Streatham Wells have higher rates compared to local and national average.

#### **EMERGENCY ADMISSION (75+)**

The 'Atlas of variation' published by 'Right Care' programme for the NHS, identified that people older than 75 years account for:

- 40% of emergency admissions;
- 50% of bed-days;
- >50% of re-admissions
- >80% of delayed transfers of care

In Lambeth high rates of 75+ emergency admissions are seen in:

- Larkhall and Stockwell wards in North locality;
- Ferndale, Vassall, Tulse hill wards in Southeast locality;
- Streatham Wells and Clapham Town wards in Southwest locality.

(Lambeth was in the worst quintile in the country in 2008-09 - similar to Lewisham but worse than Southwark)

# **END OF LIFE CARE (EoL)**

EoL care pathway includes IDENTIFY – ASSESS – PLAN – DELIVER – MANAGE – SUPPORT. GSTT charity funded a 3 year project to improve EoL care and a lot of work has gone into developing exceptional care for patient with dementia.

EoL care profiles show that in Lambeth, of all deaths in population over 65 years 60% occur in the hospital and 21% of deaths occur at home (2007-09).

Please see Appendix 1 on Age-specific mortality spine chart.



# **SOCIAL CARE**

#### **LIVING STATUS**

Among the 65+ population resident in Lambeth,

48%= (14,180) receive state pension

37% = (8300) Predicted to live alone.

17%= (4100) With no or limited central heating 17%=(3806) Receiving community based services commissioning by CSSR

9% = (2074) Providing unpaid care to a partner 4.7%=(1062) Carers receiving services as an outcome of a review

\*Council with Social Services Responsibilities

#### **CARER SUPPORT**

According to LBL, 973 service users aged 65 and over in Lambeth have an informal carer and who received a carer's assessment during 2010-11 compared to 1040 in 2009-10.

# **ILL HEALTH**

Based on resident's surveys, the % 65 population in Lambeth, London & England stating their condition as 'Not in good health' is shown in the table below;

Lambeth	London	England
26%	22%	22%

#### **Limiting Long term condition**

49% = (11,050) Individuals 65 and over have a self reported limiting long-term condition in Lambeth.\*

#### Self care

Characteristics of 65+ population in Lambeth:

33% = (7603) Unable to manage 1 self-care activity 9%=(2065) Helped to live independently through social services

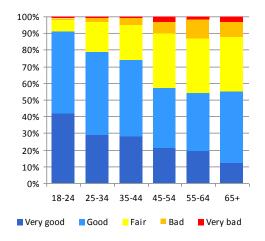
2.5%=(575) Living in a care home with or without nursing

# **PATIENT & RESIDENTS SURVEY**

#### **RESIDENTS' SURVEY**

#### **Main findings**

- 1 in 4 people aged 65 and over assess their general health as "not good" compared to 1 in 5 in London.
- 62% of 65+ residents reported 'good' or 'very good' health. (65+ population tends to have a lower % reporting 'good' or 'very good' health.)
- 14% 65+ residents reported 'bad' or 'very bad' health compared to 7% adults aged 65 or less.



The results from positive aging consultation revealed that older people felt that they did not know what services were available to them. Older people in Lambeth also stated that they preferred to be able to remain in their own home rather than going into a care home or hospital. The older people also described themselves as isolated and expressed that greater provision of community activities would improve their quality of life.

#### **GP ACCESS**

77% residents of all ages have expressed satisfaction to 48 hour GP access compared to 76% in London. Results for 65 and over population were not available. The primary reason for accessing GP services by the 65+ population in Lambeth is not available; but research done by King's fund in London shows that the main reason is usually for the management of their long term conditions.

<sup>\*</sup>Please also refer to the Appendix 2 summary of older people's profile for Lambeth published by the WMPHO (West Midlands Public Health Observatory. Note that the findings are based on 2008 results.



# **Appendix 1**

# Spine Chart - Age specific mortality, 2007-2009, Lambeth residents aged 65+

# Key:

Significantly better than England average

Not significantly different from England average

Significantly worse than England average

No significance can be calculated



	In dianta a	Local	Local	Eng	Eng	Frederid Dance	Eng
	Indicator	Number	Value	Avg	Worst	England Range	Best
1	All causes	3276	4700.1	4571.1	5738.0	<b>0</b> \$	2902.9
2	Infectious and parasitic	48	68.9	59.7	125.6	•	21.4
3	All cancers	881	1264.0	1160.3	1590.7	•	737.7
4	Oesophageal cancer	34	48.8	53.7	82.9	<b>O</b> \$	21.7
5	Stomach cancer	33	47.3	39.2	89.3		12.5
6	Colorectal cancer	90	129.1	127.2	186.3	•	80.2
7	Lung cancer	233	334.3	250.1	479.4	• •	120.8
8	Breast cancer	47	120.5	135.2	201.1	<b>•</b> •	72.0
9	Prostate cancer	78	254.1	221.3	324.3	<b>○</b> ◆	128.9
10	Bladder cancer	26	37.3	43.9	80.1	<b>•••</b>	19.1
11	Leukaemia	23	33.0	34.0	65.0		9.5
12	Diabetes	61	87.5	51.9	104.6		10.4
13	Circulatory diseases	1123	1611.2	1625.5	2192.6		1003.6
14	Hypertensive disease	49	70.3	43.4	96.8	• •	11.8
15	Coronary heart disease	499	715.9	718.4	1225.5	•	397.1
16	Stroke	300	430.4	468.2	664.8	<b>○</b> ◆	246.2
17	Pneumonia	182	261.1	291.8	527.9	<b>•</b> •	145.6
18	B&E and other COPD*	205	294.1	232.1	440.9	• •	120.7
19	GD&PU*	24	34.4	26.5	64.1	•	0.0
20	Chronic liver disease*	24	34.4	19.7	48.8		2.9
21	Chronic renal failure	19	27.3	16.3	43.1		2.1
22	Accidental falls	16	23.0	29.0	111.0	<b>©</b>	2.5
23	Land transport accidents	12	10.0	5.7	23.6	• •	0.0

Source of data: NCHOD

\*18 Mortality from bronchitis and emphysema and other COPD, 19 Mortality from gastric, duodenal and peptic ulcers, 20 Mortality from chronic liver disease including cirrhosis



# **Appendix 2**

#### SUMMARY OF OLDER PEOPLE'S PROFILE FOR LAMBETH

SOURCE: WMPHO (WEST MIDLANDS PUBLIC HEALTH OBSERVATORY)

Table showing performance status for several public health indicators for Lambeth 65+ population

(Please note that the following indicative performance is based on 2008 data)

NO.	INDICATOR (65+ population)	Lambeth Trend - Direction	LAMBETH Benchmark Performance (National)
1.	Life expectancy – Male	Improving	Quartile 4
2.	Life expectancy – Female	Improving	Quartile 3
3.	Healthy Life expectancy - Male	Improving	Quartile 4
4.	Healthy Life expectancy - Female	Improving	Quartile 3
5.	Excess winter mortality – Persons	Worsening	Quartile 2
6.	Emergency admissions – Persons	Worsening	Quartile 4
7.	Primary knee replacement	n/a	Quartile 2
8.	Cataract operations	n/a	Quartile 3
9.	Primary hip replacement	n/a	Quartile 2
10.	Stroke – Persons	-	Quartile 3
11.	All falls – Persons	No change	Quartile 4
12.	Hip fracture - Persons	n/a	Quartile 3
13.	All cause all deaths – Persons	Improving	Quartile 4
14.	All cancers deaths – Persons	No change	Quartile 4
15.	All circulatory deaths - Persons	Improving	Quartile 3
16.	Stroke deaths	No change	Quartile 3
17.	COPD deaths	No change	Quartile 3

<sup>\*</sup>Quartile 4 is the worst performing and Quartile 1 means good performance

Note: The rate of primary knee and hip replacement surgery was lower in Lambeth compared to England average so is rated which does not mean good and reasons need to be investigated. Local access issues and availability of certain procedures can result in lower uptake of certain surgical procedures. Similarly high rate (e.g. cataract operations) may not mean a problem but may denote better access and availability of expertise of service in a urban area.

#### **SOURCES**

Office for National Statistics (ONS), National Adult and Social Care Information Service (NASCIS), Projecting Older People's Population Information System (POPPI), Secondary Uses Services (SUS), Association of Public Health Observatories (APHO), Greater London Authority (GLA), London Health Observatory (LHO), Lambeth Quality Management Analysis System (QMAS), NHS Information Centre (NHSIC) for Health & Social care, National Compendium for Health Outcomes Development (NCHOD), National Obesity Observatory, Lambeth Datanet, End of life care Intelligence Service

Note: Data is obtained from different sources and should be interpreted with caution. Please do not publish data without prior permission from NHS Lambeth (Directorate of Public Health). Detailed information for all indicators and sources will be made available upon request. For further details please contact <a href="mailto:ash.more@lambethpct.nhs.uk">ash.more@lambethpct.nhs.uk</a> or 02030494236.





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