

Health & Wellbeing Board			
Report Title	Frail Older People in Lewisham: Local demography, health and social care use and literature review. August 2013		
Key Decision	No	Item No. 4	
Ward	All		
Contributors	Dr Ellen Pringle, Speciality Registrar		
Class	Part 1	Date:	19 November 2013

1 Purpose

1.1 This report presents the results of a review of key issues concerning frail older people. The review:

- Provides up to date demographic information on older people in Lewisham and on their use of health and social care
- Reviews evidence on how to identify frail older people (especially those who are not known to health and social care services)
- Identifies risk stratification tools for frail older people in terms of the likelihood of unplanned or frequent hospital admissions and high level use of social care
- Provides an overview of measures that have been found to be effective in reducing use of health and social care services

2. Recommendations

2.1 It is recommended that the Board:

- Note the content of this review.
- Note that the report will inform commissioning intentions and the development of relevant strategies, programmes and activities in relation to frail older people in Lewisham.

3. Policy Context

3.1 The activity of the Health and Wellbeing Board is focused on delivering the strategic vision for Lewisham as established in *Shaping our Future* – Lewisham’s Sustainable Community Strategy and in Lewisham’s Health and Wellbeing Strategy.

3.2 The work of the Board directly contributes to *Shaping our Future’s*

priority outcome which states that communities in Lewisham should be *Healthy, active and enjoyable - where people can actively participate in maintaining and improving their health and wellbeing.*

- 3.3 Frail older people have been the subject of a number of national strategies and initiatives in the last few years, including, this year, the Department of Health's 'Right Care, Right Place, Right Time'. Locally, in Lewisham the Health and Wellbeing Board has identified two of their priorities as delaying/reducing the need for long term care and reducing the number of emergency admissions for people with long term conditions. NHS Lewisham Clinical Commissioning Group has specifically identified frail older people as a priority group.

4. Key Points:

4.1 The report highlights that:

- There are currently (in 2013) 26,800 Lewisham residents aged 65 and over.
- In Lewisham the older population is more ethnically diverse than in England, though less diverse than the younger population locally. More older people live in the south than north of Lewisham.
- The prevalence of long term conditions (LTC) increases with age and increasing deprivation. In England almost half of women over 75 have at least one LTC.
- In Lewisham admission and readmission rates for older people are higher than England. A quarter of people aged 65-69 in Lewisham attended A&E at University Hospital Lewisham in the last three years, 70% of those aged 90 and over attended.
- Older people are more likely to be admitted to hospital when they attend A&E, last year almost 8000 people aged 65 and over in Lewisham had an unplanned admission to hospital. The most common primary diagnoses for admission amongst the over 65s are pneumonia, UTI and COPD. For the over 85s they are pneumonia, UTI and falls.
- About 3500 residents aged 65 and over receive social care services, which represents approximately 14% of the (65+) population. About 200 people aged 65 and over are admitted to care homes each year.
- This population is more likely to die earlier and live in income deprivation than the England average.

- 4.2 Projections suggest that there will be an increase in the 65+ and 85+ populations of Lewisham of about 12% and 20% respectively between 2010 and 2022. So that by 2023 there will be almost 30,000 people aged 65 and over in Lewisham. The number of older people with multiple long term conditions and disabilities in England is expected to increase in the next ten years. The prevalence of obesity is increasing in older people by about 5% per year.

5. Next Steps

- 5.1 Officers recommend that in the development of commissioning intentions, the detailed planning for the Integrated Adult Care Programme and the delivery of the Health and Wellbeing Strategy objectives that due regard is given to findings of the review.

6. Financial implications

- 6.1 There are no specific financial implications arising from this report or its recommendations.

7. Crime and disorder implications

- 7.1 There are no specific crime and disorder implications arising from this report or its recommendations.

8. Equalities implications

- 8.1 The recommendations of this report will contribute to improved health outcomes and wellbeing for older adults.

9. Environmental implications

- 9.1 There are no specific environmental implications arising from this report or its recommendations.

10. Conclusion

- 10.1 The review will inform the planning of services for frail older people, a key focus of the Integrated Care Programme. It will improve health outcomes and quality of life for these residents.

If there are any queries on this report please contact, **Katrina McCormick, Deputy Director of Public Health**, 020 8314 9056.