



Joint Strategic Needs Assessment

Health in Knowsley - 2022

AGE WELL

In Knowsley, our vision is to support people with care needs to live independently. This is vital in order to ensure that people feel empowered and live fulfilled and happy lives. We know that in Knowsley, the services that support people with care needs and the system have been performing well recently, with significant improvements being seen across a number of different services.

As Knowsley's older population is forecast to continue to grow over the next decade, the health and wellbeing of the older population is vitally important to support the happiness of Knowsley residents, and the contribution of older people to our communities. Our aim is to promote, maintain and enhance people's independence so that they are healthier, stronger, more resilient and less reliant on formal social care services and providers. Like other areas across the country, Knowsley has been faced with the unprecedented challenges that have been presented by the coronavirus pandemic, which has had a significant impact on the health and wellbeing of our residents. It has not only affected those who receive care services and support but has led to new health and care needs and new ways in which we need to deliver services across the Borough.

Ageing Population.

Overview of issues

England and Knowsley's population is ageing. In the next 25 years, the number of older people in England is expected to double to 2.6 million.

The proportion of older people aged above 75 with a long-term condition has risen and their needs are likely to become more complex, leading to increase in demand for NHS services.

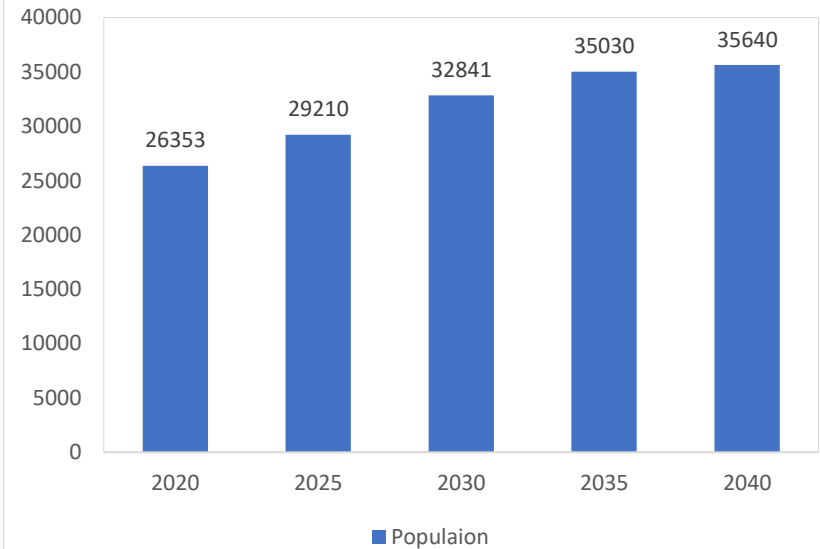
Findings suggest that older people are living with an increased number of long-term conditions, typically managed through the NHS, without on average needing more support with social care, but those who do have social care needs may also be managing an increased number of long-term conditions.

Living longer with long-term conditions, and rising costs of providing care services. Nationally, the NHS is projected to need at least 179,000 more staff over the next five years if services grow in line with demand pressures.

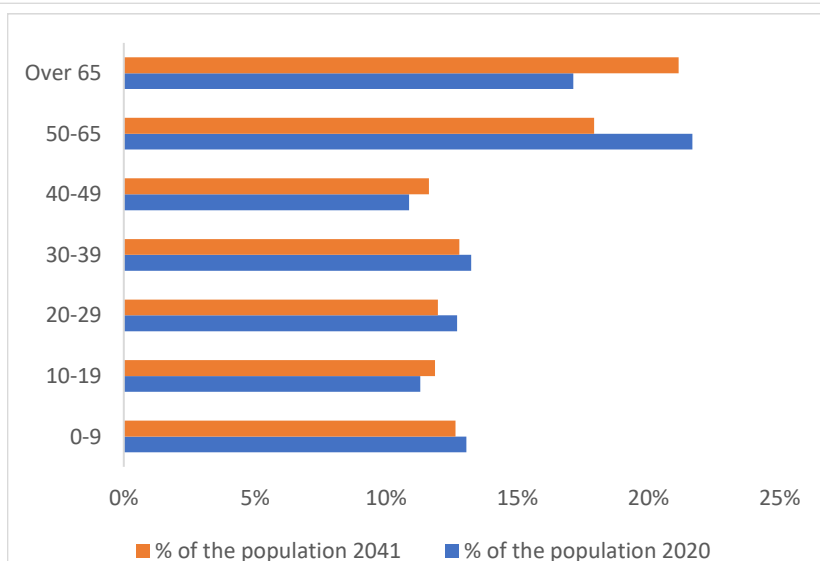
ANALYSIS

The number of people aged 65 and over in Knowsley is forecast to increase by over a third between 2020 and 2040. Estimations project that there are currently around 26,353 people aged 65 and over living in Knowsley, representing around 17% of the total population. In line with national trends, this figure is expected to increase by approximately 35% by 2040 to a total of around 35,640 older people, representing 18% of the total population. Whilst it is positive that people are living longer in Knowsley and is welcomed, this means that older people are now living with more complex health and care needs for longer.

Knowsley Population Projection for Over 65 2020 to 2040



Knowsley Population changes by age. Estimated 2020 and Projected 2041



What is fuel poverty?

A household is considered to be fuel poor if:

- they have required fuel costs that are above average (the national median level)
- were they to spend that amount, they would be left with a residual income below the official poverty line



There are 3 important elements in determining whether a household is fuel poor:

- household income
- household energy requirements
- fuel prices

Why is it important?

- Increases in winter deaths, detrimental effects on physical and mental health caused by living in a cold home.
- Social isolation can be increased by cold homes.
- Household may have to choose between heating and eating as price and spending increases.



Health risks- Fuel Poverty-Cold homes.

Overview of issues

Living in a cold home has significant and demonstrable direct and indirect health impacts. There is strong evidence that shows it is associated with poor health outcomes and an increased risk of morbidity and mortality for all age groups.

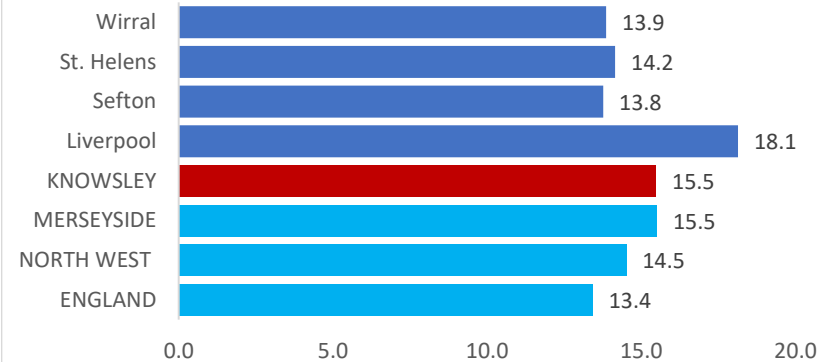
A household is considered to be fuel poor if it has higher than typical energy costs and would be left with a disposable income below the poverty line. Fuel poverty is driven by 3 main factors: household income, high or unmanageable energy costs and the energy efficiency of a home. This is particularly acute in 2022 with rising fuel costs, and a cost of living crisis.

Health risks of cold homes It is estimated that “excess winter deaths in the coldest quarter of housing are almost 3 times as high as in the warmest quarter” with 21.5% of all excess winter deaths attributable to the coldest quarter of housing. One of the major contributing factors to a person living in low indoor temperatures in winter is the inability to heat their home affordably (i.e., to be in fuel poverty). Other factors include a lack of awareness of the effect of cold on health, as well as situational, attitudinal, or behavioural factors including personal values such as stoicism or thrift.

Effects of fuel poverty are often wide. Below are some main effects on the population

- Living in a cold home has detrimental effects on physical health and mental health, particularly respiratory and cardiovascular conditions.
- People living in cold homes are more likely to experience social isolation.
- There is some association between cold homes and truancy, anti-social behaviour and negative effects on education attainment.
- People living in a property which is difficult to keep warm may have to face a hard choice between heating and eating. There is some evidence of reduced food spending during the coldest periods by pensioners on the lowest incomes.

Proportion of households fuel poor (%)



ANALYSIS

Fuel poverty is often linked to deprivation levels. Where people must make hard decisions to afford heating and insulation.

In 2019 it was estimated that Knowsley had 10,049 households in fuel poverty which equated to 15.5% of the borough. The figure is expected to have increased and continues to rise as fuel prices increase up to 2022. It is speculated that fuel prices will continue to rise after 2022 for at least 2 years.

Knowsley's percentage of people with fuel poverty is 1% higher than the Northwest region and 2.1% higher than England. It is the second highest in the Merseyside region. Knowsley residents will be especially vulnerable as cost of living increases.

Dementia

Dementia is not a disease in itself; it is a word used to describe a group of symptoms that occur when brain cells stop working properly. This happens inside specific areas of the brain, which can impact upon memory loss and create difficulties with thinking, problem-solving or language. Dementia is progressive, which means the symptoms will gradually get worse. There are a variety of forms of dementia, each with unique impacts upon an individual and their need for care.

Estimated dementia diagnosis rate (aged 65 and over)

(Source: QOF, NHS Digital)

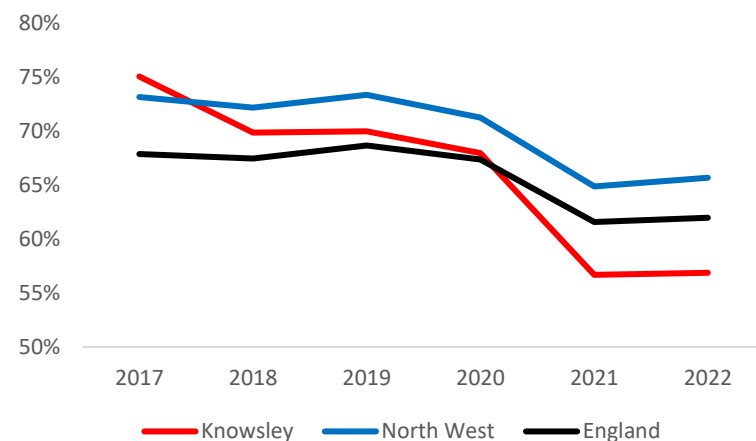
Knowsley estimated diagnosed Dementia rate has dropped considerable between 2020 and 2021 (Due to reasons mentioned below). Regionally and nationally, this has fallen but, the drop is more severe in Knowsley than North West and England. The latest diagnosis rate for Knowsley is 56.9% in 2022, this is lower than England (62.0%) and North West (65.7%)

Dementia Prevalence - (Source: QOF, NHS Digital)

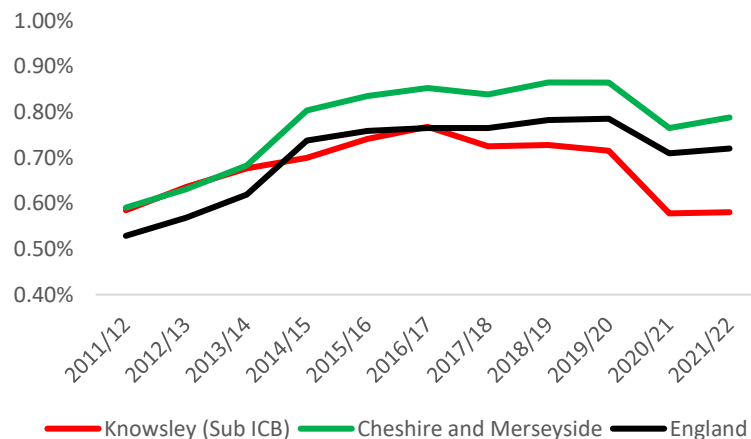
Knowsley has consistently had a lower prevalence than North West and England. There has been a large drop off in prevalence in between 2019/20 and 2020/21 both locally and nationally. The drop is more severe in Knowsley than Cheshire and Merseyside and England. The numbers of people with diagnosed Dementia in Knowsley fell from 1,201 in 2019/20 to 975 in 2020/21. The decline locally and nationally is likely due to COVID-19 deaths which especially affected the 80+ cohort (especially care homes), this a cohort where there is a high numbers of Dementia patients. Prevalence has increased slightly in 2021/22 in England and Cheshire and Merseyside, whilst remaining static in Knowsley.

Other reasons are a higher level of undiagnosed due to the Pandemic, with less monitoring and in-person GP visits. Dementia is a disease where there are higher levels of undiagnosed cases, with some cases not been diagnosed until the disease is at an advanced stage.

Estimated dementia diagnosis rate (aged 65 and over)



Dementia QOF Prevalence (All Ages)



Winter Vaccinations in Older people (aged 65+)

Flu vaccination coverage

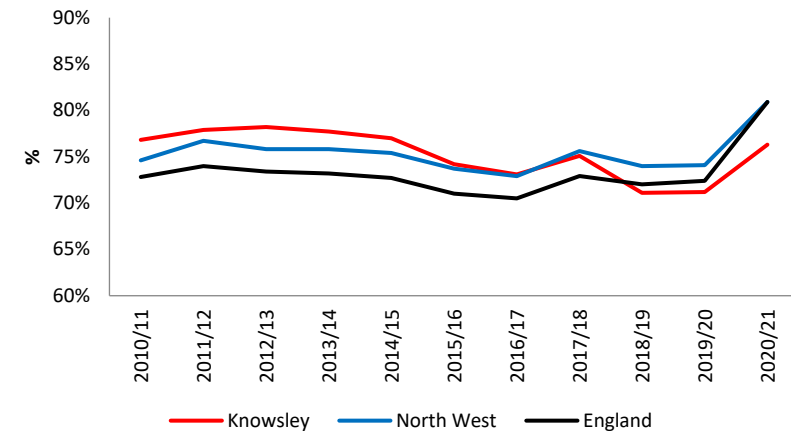
Influenza is a serious infectious disease which can cause severe complications such as pneumonia and death. The annual seasonal flu vaccination programme is nationally commissioned and predominantly delivered in Primary Care. It delivers flu vaccination to population groups at risk of the complications of influenza. This includes all individuals over age 65, as well as those in younger age groups. The national programme also covers all residents of long stay residential or care homes.

Annual seasonal influenza immunisation coverage for those aged 65 and over in Knowsley was 76.3% in the winter of 2020/21, higher than the 75% national target. Coverage in Knowsley during 2020/21 was lower than the North West region (80.9%) and England (80.9%). Coverage in the latest period 2020/21 has significantly been affected by Covid-19, more people than usual have come forward for vaccines both locally and nationally to help protect themselves as much as possible during the winter months. It is clear from the data that the increase in coverage in Knowsley from 2019/20 was lower than both North West and England

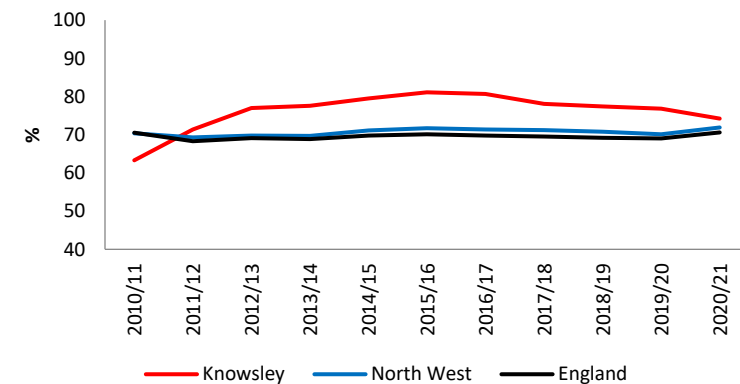
PPV vaccination coverage - The pneumococcal vaccine protects against serious and potentially fatal pneumococcal infections. It is also known as the pneumonia vaccine. Pneumococcal infections are caused by the bacterium *Streptococcus Pneumoniae* and can lead to pneumonia, septicaemia (a kind of blood poisoning) and meningitis. People aged 65 and over are offered the pneumococcal vaccination. People with a long-term health condition may need just a single one-off pneumococcal vaccination or vaccination every five years, depending on their underlying health problem.

For a number of years Knowsley has had a consistently higher PPV coverage than both North West and England, however Knowsley coverage has been in decline and in the latest year 2020/21, the coverage in Knowsley was 74.2%, this was higher but similar to England (70.6%) and North West (71.9%).

Population vaccination coverage - Flu (aged 65+)



Population vaccination coverage - PPV



Excess Winter Deaths - Excess winter mortality (EWD) is defined as ‘the extra numbers of deaths during the winter months in relation to the other seasons of the year and is thought to be a direct consequence of the cold weather. The ONS method is used to calculate EWM and defines the winter period as December to March. The methodology compares winter deaths with the average of deaths occurring in the preceding August to November and the following April to July.

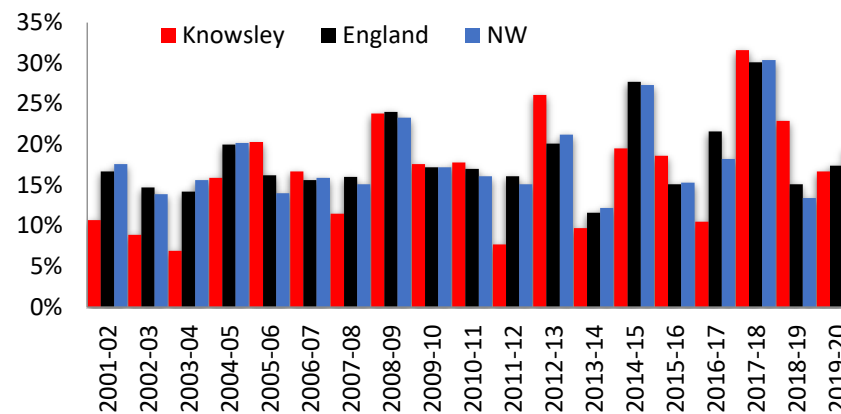
Seasonal changes in temperature are important especially in winter months so that additional help can be made available for those that are most at risk of these cold conditions. Population groups such as the elderly, children and those with long term conditions such as respiratory disease are particularly vulnerable during this period, especially those on lower incomes and those not living in energy efficient housing. There is a greater risk of deaths in colder housing. There is also a strong relationship between cold temperatures, cardio-vascular and respiratory diseases. Mental health can also be negatively affected by fuel poverty and cold housing for any age group. Indirect impacts of cold homes and fuel poverty include reduced educational attainment, emotional well-being and resilience within children; reduced dietary opportunity and choice; and reduced dexterity leading to an increased risk of falls, accidents and injuries in the home

EWD vary significantly from year to year. In 2017/18 the highest recorded number of EWD have occurred (133 EWD) since 1999/00. This increase is also reflected in the UK which experienced its highest level of EWD since 1975/76. Since 2001/02, there has been an average of 76 excess winter deaths per year in Knowsley meaning that the number of EWDs in 2018/19 was 47% above this average. (Source ONS/OHID fingertips)

Loneliness is something that can affect people of all ages. When people get older the risk factors and effect of loneliness increases. Loneliness is often increased due to issues such as poor health, mobility and worsening eye sight. Loneliness can be harmful to health and can increase mental health conditions such as the risk of developing Dementia. Depression is other serious mental health conditions are also at risk with increased levels of Loneliness.

A question was asked by the Sport England Active lives adult survey, this asked adults feel lonely often/always or some of the time. The total proportion of adults in the November 20/21 survey that answered yes to either of these three categories totals 1 in 4 adults in Knowsley (25.0%), similar to North West (25.7%) and the same as England (25.0%).

Excess Winter Deaths Index



Future Health needs - Projections

By 2030, the numbers of people aged 65+ living in Knowsley is projected to increase by around to. Currently there is 1 in 5 local people (19.9%) aged 65 and over (compared with 16.9% in 2030).

This increasing older population in Knowsley will result in an increase of people with complex and long-term conditions (such as diabetes, COPD and dementia), this will increase and impact on the need and provision for social care.

People aged 65+ in the borough, it is predicted that:

- Those with a limiting long-term illness (whose day-to-day activities are limited a lot) are predicted to increase from 10,416 to 12,795 between 2020 and 2030, a rise of 22.8%. In England this is expected to increase by a similar 23.0% during the same time-period.
- Residents with a long-term health condition caused by a Bronchitis/emphysema is predicted to increase from 442 in 2020 to 547 by 2030, a rise of 23.7%. In England this is expected to increase by a similar but smaller amount; 21.3% during the same time-period.
- The numbers of Knowsley people aged 65+ who are predicted to have Dementia is expected to increase from 1,797 in 2020 to 2,059 in 2030, a rise of 14.6%. Dementia in England are expected to increase by a similar amount; 14.6% during the same time-period.
- Residents predicted to have Diabetes (either type 1 or 2) are projected to rise by nearly a quarter to 24.0% during this period (from 3,281 to 4,068). In England this is expected to increase by a smaller amount; 20.8% during the same time-period.
- The numbers of Knowsley people aged 65+ who are predicted to have a fall resulting in a hospital admission is expected to increase from 822 in 2020 to 934 in 2030, a rise of 14.7%. Falls in England are expected to increase by a much higher 28.2% during the same time-period.

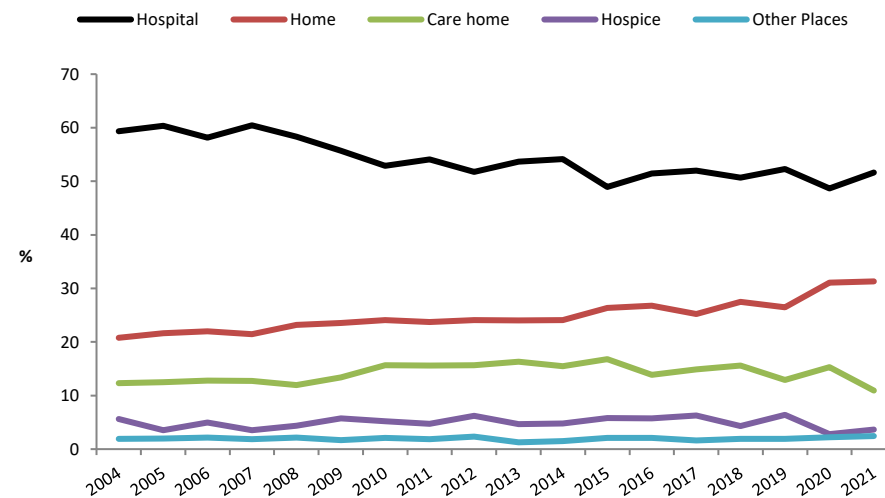
Source: Projecting Older People Population Information (POPPI). Oxford Brookes University. www.poppi.org.uk/

- The number of Knowsley residents who have cardiovascular disease is predicted to increase from 8,270 in 2020 to 10,183 by 2030, a rise of 23.1%. In England this is expected to increase by a similar 22.0% during the same time-period.
- The number of Knowsley residents who need help with at least one self-care activity (such as bathing, help with the stairs, using the toilet) is predicted to increase from 7,439 in 2020 to 8,952 by 2030, a rise of 20.3%. In England this is expected to increase by a higher 22.9% during the same time-period.
- The number of Knowsley residents who need help with at least domestic task (such as shopping and routine housework) is predicted to increase from 7,482 in 2020 to 8,937 by 2030, a rise of 19.4%. In England this is expected to increase by a higher 23.1% during the same time-period.
- The number of Knowsley residents who are unable to manage at least mobility activity themselves (such walking down the road and getting in out of bed) is predicted to increase from 4,751 in 2020 to 5,548 by 2030, a rise of 16.8%. In England this is expected to increase by a much higher 26.3% during the same time-period.
- The number of Knowsley residents (aged 65+) who provide unpaid care is predicted to increase from 4,180 in 2020 to 5,284 by 2030, a rise of 26.4%. In England this is expected to increase by a much lower 20.4% during the same time-period.

End of Life - People in general would prefer to die either at home, in a hospice or a care home, rather than in a hospital. Reducing deaths in hospital helps to decrease the number of unnecessary admissions and also helps to ensure that people's preferences are met as much as possible.

- The proportion of people dying at home (or their usual place of residence) in 2021 was higher in Knowsley (31.3%) compared with the England average (28.7%) and the North West average (28.6%).
- Between 2012 and 2021, the number of people dying at home increased by 65% in Knowsley compared with a 53% increase across England and a 54% increase in the North West.
- The proportion of people dying in hospital in 2021 was higher in Knowsley (51.6%) compared with the England average (44.0%) and the North West average (46.8%).
- Between 2012 and 2021, the number of people dying at home increased by 65% in Knowsley compared with a 53% increase across England.

Knowsley Place of death, all ages, all persons, Percentage of deaths



Long-term health conditions and chronic diseases

Overview of issues

Long-term conditions (LTCs) or chronic diseases are conditions for which there is currently no cure, which are managed with drugs and other treatments. Examples of LTCs include hypertension, chronic obstructive pulmonary and diabetes. The numbers of people suffering from LTCs have risen in recent years, largely as a result of the ageing population and lifestyle factors such as obesity, smoking and drinking. LTCs are more common among older people. Age is a big factor with LTCs, and multiple conditions are common with the majority of people aged 65+, with LTCs being even more prevalent in older age groups such as 80+

ANALYSIS - QOF prevalence data 2020/21

Condition	Knowsley		England	
	Number	%	Number	%
Hypertension	26,092	15.5%	8,457,600	13.9%
Depression (18+)	24,917	18.8%	5,955,865	12.3%
Diabetes (17+)	10,870	8.1%	3,491,868	7.1%
Asthma	10,555	6.7%	3,629,071	6.4%
Chronic kidney Disease (CKD) (18+)	6,522	4.9%	1,917,102	4.0%
Coronary heart Disease (CHD)	6,827	4.1%	1,850,657	3.1%
Cancer	5,535	3.3%	1,948,913	3.2%
COPD	6,093	3.6%	1,170,437	1.9%
Stroke & TIA	3,219	1.9%	1,093,593	1.8%
Dementia	975	0.6%	430,857	0.7%

Source: NHS Digital 2021

On the table opposite there is data from patients registered with general practices in the area covered by Knowsley CCG in 2020/21. This data shows that for the majority of diseases Knowsley has a higher prevalence than England:

- around 26,000 patients (all ages) were recorded as having hypertension, with 15.5% of the population suffering from this disease, **higher** than the England average of 13.9%
- nearly 25,000 patients (aged 18 and over) were suffering from Depression, 18.8% of the population having this disease, **significantly higher** than England average of 12.3%
- almost 11,000 patients (aged 17 and over) had Diabetes with 8.1% of the population suffering from this disease, **higher** than the England average of 7.1%
- over 10,500 patients had Asthma with 6.7% of the population suffering from this disease, **similar** to England (6.4%).
- over 6,500 patients (aged 18+) had CKD with 4.9% of the suffering from this disease, **higher** the England average of 4.0%
- over 6,500 patients had CHD with 4.1% of the population suffering from this disease, **higher** the England average of 3.1%
- over 5,500 patients had Cancer with 3.3% of the population suffering from this disease, **similar** the England average of 3.2%
- over 6,000 patients had COPD with 3.6% of the population suffering from this disease, **nearly double** England (1.9%)
- over 3,000 patients had Stroke & TIA with 1.9% of the population suffering from this disease, **similar** to England (1.8%)
- nearly 1,000 patients had Dementia with 0.6% of the population suffering from this disease, **lower** than England (0.7%)

Falls and hip fractures

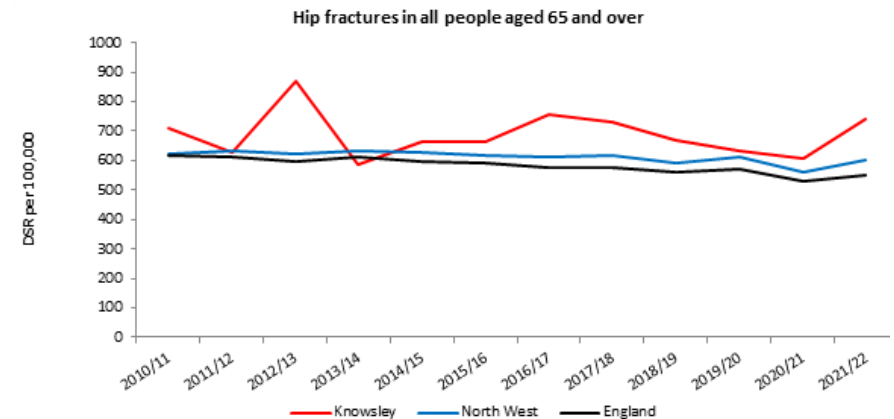
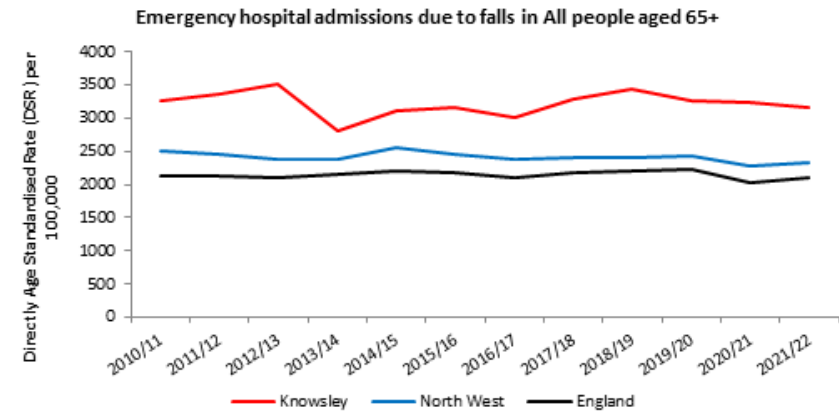
Overview of issues:

A major health concern amongst older residents is falls. Falls can happen to anyone but are most prevalent and recurrent in older adults and are multi-factorial due to physical changes as a result of ageing. For example, they can be caused by muscle weakness, poor balance, and visual impairment. They are the most serious and frequent type of accident in people aged over-65. One in three people aged 65 years and over experience a fall at least once a year – rising to one in two among those aged 80 years and older. There could be some potential links between the high frequency of falls in Knowsley and the high levels of obesity and inactivity amongst older adults, as eating healthy and exercising regularly can help to prevent falls. The number of older people experiencing falls in Knowsley is projected to grow by over a quarter (26.6%) by 2030, lower than both England (34.8%) and the North West (30.9%). (POPPI, Health Survey for England (2005), ONS population projections)

One consequence of falls in older adults is hip fractures; individuals with low bone mineral density are likely to experience a fracture after a fall. This is more prevalent in older adults as reduction in bone density, in some cases resulting in Osteoporosis, is a common consequence of the ageing process. This results in weaker bones and reduction in balance and strength all of which increases the risk of hip fractures.

Hip Fractures

Knowsley in the latest year has seen rates of hip fractures increase significantly from 608 in 2020/21 (Age Standardised rate 100,000 population) to 741 in 2021/22. North West (from 559 to 600) and England (from 529 to 551) have both increased slightly during this same period. In 2021/22 Knowsley has the highest rate of falls out of all Upper tier LA's in England.



Adult Social Care Outcomes Framework

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress and strengthen transparency and accountability.

The ASCOF is focused on six key objectives for people who draw on care and support, unpaid carers and professionals who provide care and support:

- **Quality of life:** people's quality of life is maximised by the support and services which they access, given their needs and aspirations, while ensuring that public resources are allocated efficiently.
- **Independence:** people are enabled by adult social care to maintain their independence and, where appropriate, regain it.
- **Empowerment:** information and advice: individuals, their families and unpaid carers are empowered by access to good quality information and advice to have choice and control over the care they access.
- **Safety:** people have access to care and support that is safe and which is appropriate to their needs.
- **Social connections:** people are enabled by adult social care to maintain and, where appropriate, regain their connections to their own home, family and community.
- **Continuity and quality of care:** people receive quality care, underpinned by a sustainable and high-quality care market and an adequate supply of appropriately qualified and trained staff.

The four key indicators that are highlighted by the Department of Health and Social Care are:

- Proportion of carers who reported that they had as much social contact as they would like
- The proportion of people who feel as safe as they would like
- Carer reported quality of life score
- The proportion of adults in contact with secondary mental health services living independently, with or without support.

Adult Social Care Outcomes Framework - Carers

(1) Proportion of carers who reported that they had as much social contact as they would like

The information on the proportion of carers who reported that they had as much social contact as they would like comes from the Survey of Adult Carers in England (SACE) which is conducted every two years so the latest results are from 2021/22.

Knowsley's performance on this measure is above national levels, with the reduction in national levels reflecting the impact of the COVID-19 pandemic on carers.

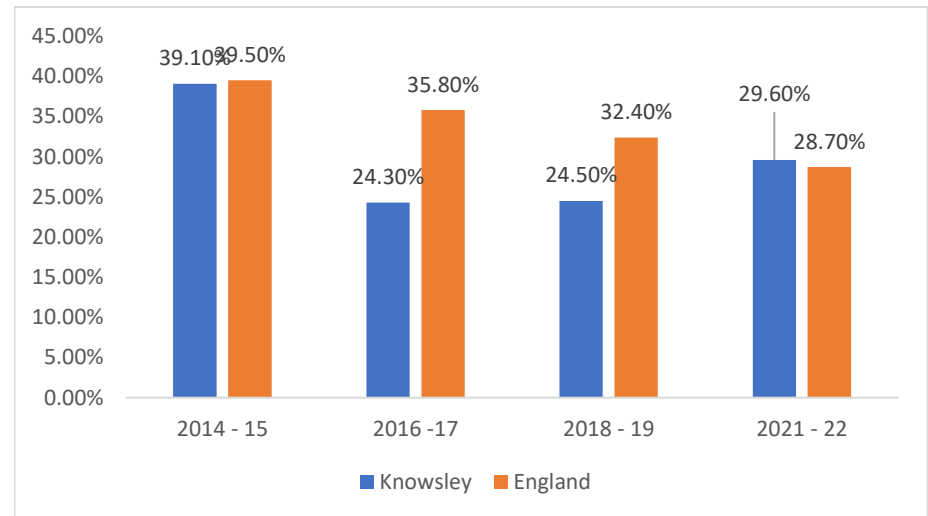
(2) Carer reported quality of life score

In Knowsley, the current quality of life score for carers is 6.9 out of a total of 12, this is slightly below national levels of 7.3.

Carer Population

According to the 2021 Census, Knowsley has:

- 16,452 residents provide unpaid care in Knowsley, accounting for almost 11% of the total population;
- The fourth highest proportion of residents providing unpaid care in England;
- The largest proportion of carers who provide 50 or more hours of unpaid care a week;
- Joint largest proportion providing 20 to 49 hours of unpaid care a week;
- Northwood had the largest proportion of residents who provided 50 hours or more unpaid care.



Proportion of carers who reported that they had as much social contact as they would like – NHS Digital

	Number of residents	% Population
Provides 9 hours or less unpaid care a week	3792	2.45%
Provides 10 to 19 hours unpaid care a week	2415	1.56%
Provides 20 to 34 hours unpaid care a week	1977	1.28%
Provides 35 to 49 hours unpaid care a week	2285	1.48%
Provides 50 or more hours unpaid care a week	5983	3.87%

Census 2021 – Unpaid Care in Knowsley

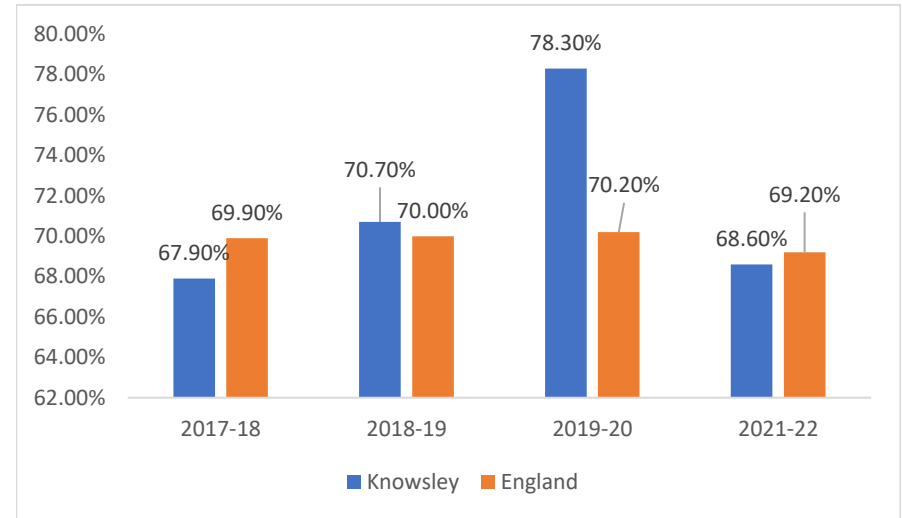
Adult Social Care Outcomes Framework

(3) The proportion of people who feel as safe as they would like

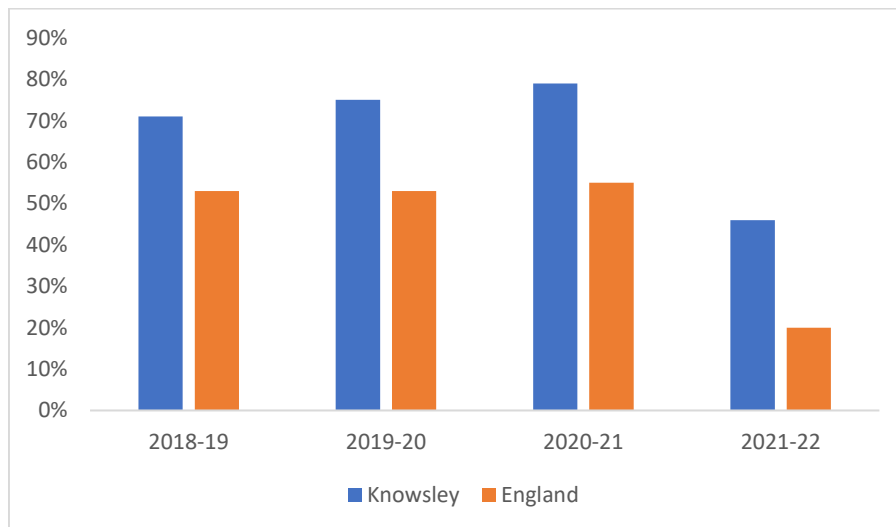
The proportion of people who feel safe has been subject to fluctuations in Knowsley, peaking in 2019/20 with 78.3%. Feeling safe is not necessarily directly linked to safeguarding, but rather to a range of complex factors including their living circumstances, mobility and house conditions in addition to any issues regarding safeguarding.

(4) The proportion of adults in contact with secondary mental health services living independently, with or without support.

The proportion of adults in contact with secondary mental health services living independently has fallen significantly since the beginning of the COVID-19 pandemic. Levels in Knowsley remain well above national levels, but the impact of the COVID-19 on independent living is clear.



The proportion of people who feel as safe as they would like – NHS Digital



Proportion of adults in contact with secondary mental health services living independently, with or without support – NHS digital.