

Herefordshire Needs – Demographics

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Current age structure

At the 2001 Census of Population, there were over 33,500 people aged 65 or over living in Herefordshire – representing nearly a fifth of the total population. Over 17,600 were in the “young retired” age group of 65-74, and nearly 16,000 were elderly or very elderly (aged 75 and over). This latter age group constituted about 9% of the total population. Females outnumber males in every age group of over 65's, reflecting the greater mortality rates for males at younger ages. The gender imbalance widens as age increases; females form just over half the 65-74 age group; by age 85 and over women outnumber men by more than 2:1.

Table 1 – Age and Gender Structure

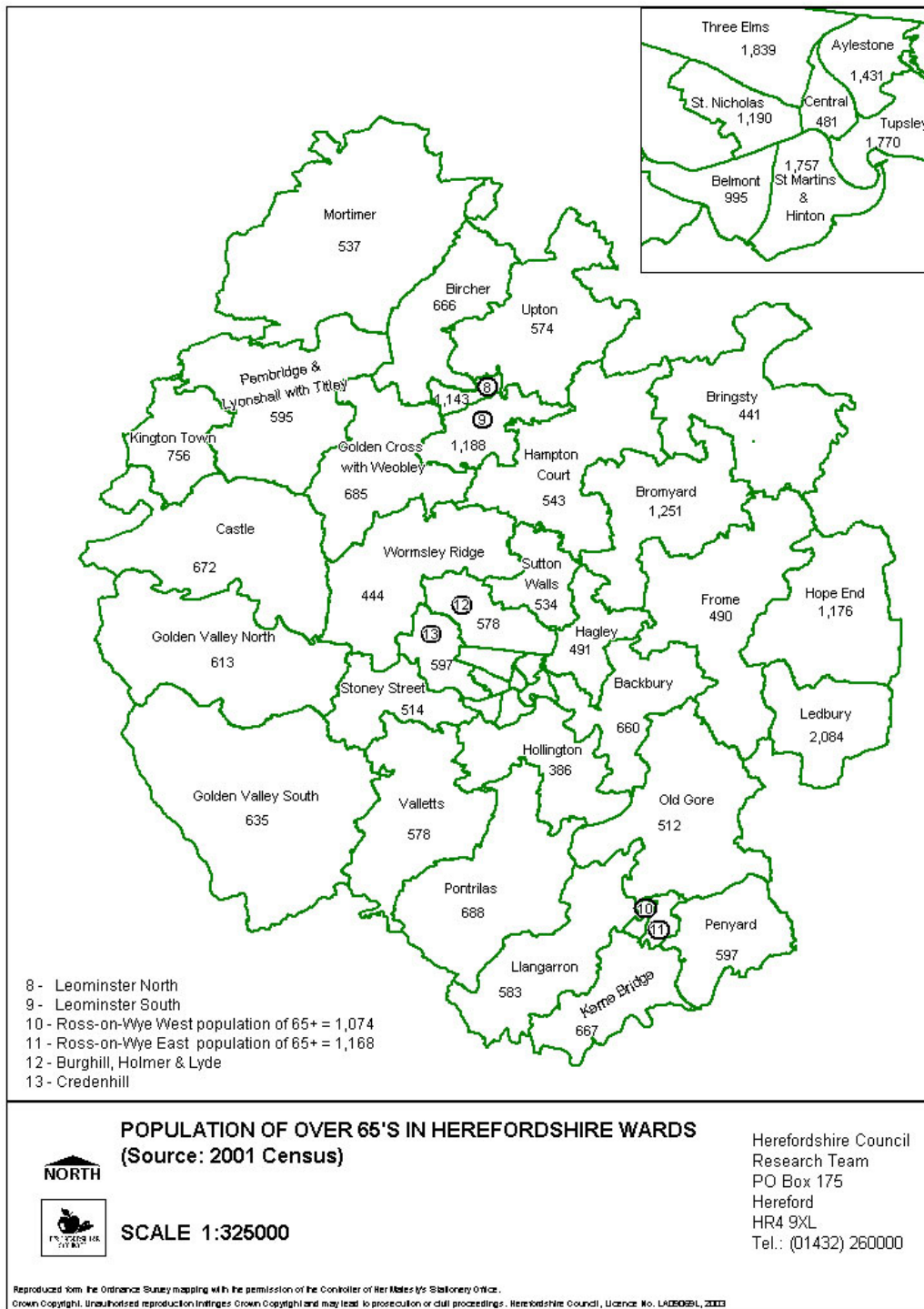
Age Group	Males	Females	People	Proportion of Total Population
0 - 64	70,889	83,601	141,281	81%
65 - 74	8,355	9,263	17,618	10%
75 - 84	4,874	7,135	12,009	7%
85 +	1,199	2,752	3,951	2%
Total 65+	14,428	19,150	33,578	19%
All Ages	85,337	89,522	174,859	100%

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The distribution of older people across the County is shown in Figure 1. This map shows the number of Over 65's in each ward as at the 2001 Census. About 29% live in Hereford and a further 10% in rural areas within 8 miles of the City centre. The market towns of Leominster, Ross-on-Wye, Ledbury, Bromyard and Kington are home to a further 26%, whilst the remaining 35% live in villages and rural parts of the County more remote from Hereford.

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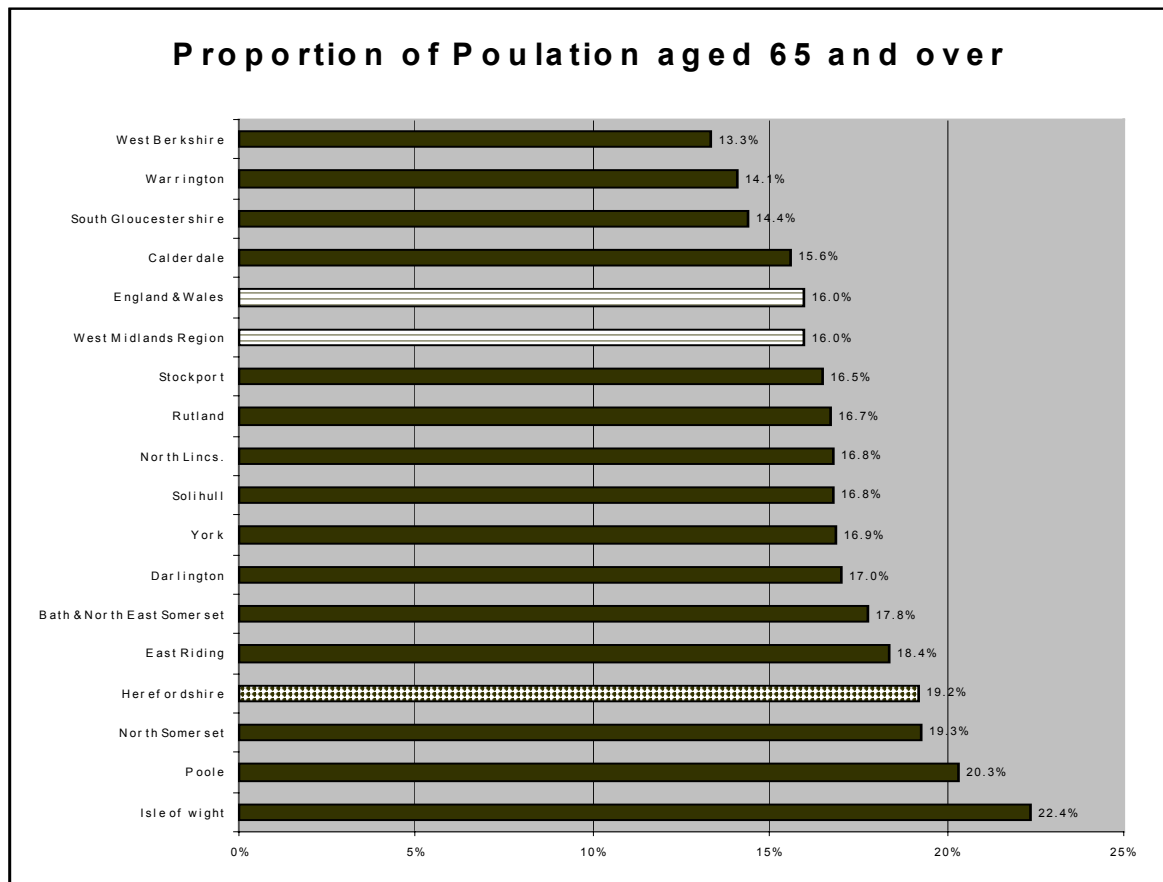
Figure 1



Comparison with Other Areas

Figure 2 shows the proportion of the population of older people compared with the total population in Herefordshire, compared with England & Wales, West Midlands Region and each of a group of 15 similar authorities in the benchmarking group.

Nationally and regionally, older people comprise 16% of the total population. In Herefordshire, older people form 19.2% of the total population. As would be expected, the comparator authorities, like Herefordshire, tend to have more older people than average over the country, but only the two coastal areas, Poole and the Isle of Wight, have significantly more older people than Herefordshire; 20.3% and 22.4% respectively.



Source: 2001 Census – Crown Copyright

Migration

The Office for National Statistics has not yet released any information from the census on migration and previously released data based on National Health Service patient registrations have been withdrawn. Consequently there are no officially sanctioned statistics currently available to support the following claim, but it can be assumed that Herefordshire is a net importer of retired people; the level is probably running at about 300 pa.

Projected Population Growth

The rapid population growth (about 9%) of Herefordshire's total population over the past decade is expected to fall to about 6% between 2001 and 2011, based on expected planned housing development.

Population projections have yet to be revised, both nationally and locally, in the light of the results of the 2001 census. However the figures in the table below, calculated using information available to the year 1999, are indicative of the scale of the growing problems of housing and care for the elderly in the County. Confidence in these figures is confirmed by the closeness between Herefordshire Council's forecast for the 2001 population of the over 65s and the results of the census.

Table 2: Projected increase in population of Over 65s in Herefordshire

Age Group	2001 Census Population	Herefordshire Council forecast for 2001 based on 1999 data	Projected Increase 2001 – 2011 (Numbers)	Projected Increase 2001 – 2011 (percentage)
65 – 74	17,168	17,330	4,100	24%
75 – 84	12,009	11,740	2,400	21%
85+	3,951	4,198	2,400	57%
All Ages	174,589	170,400	10,100	6%

Sources: *Herefordshire Council Research Team, 1999 based population forecast*
2001 Census – Crown Copyright

Herefordshire's projected population growth over 2001-2011 of 6% is higher than the expected rate of growth of England's population over the same period, 4% (Government Actuary's Department, 2000). However, the elderly population in Herefordshire is expected to grow at double the national rate. The number of over 65's in Herefordshire is expected to grow by about 27% (Herefordshire Council Research Team) but by just under 10% nationally (Government Actuary's Department).

Both nationally and locally, the elderly population is growing at a faster rate than the total population – reflecting both historically low birth rates over the last 30 years and improved mortality rates.

Within the over 65 age group, the younger component, ie under 75, is growing at less than half the rate of the very elderly aged over 85.

Implications for the Voluntary Sector

It is unclear what the impact of these population changes will have on the provision of volunteer time and need within the County. The fact that the 85+ age group is likely to increase by 57% in the period 2001 – 2011 could lead to a rapid increase in need and put strain on the voluntary sector, particularly those organisations who provide a service to the very elderly. On the "supply side", the 1997 National Survey of Volunteering found that 45% of 65-74 year olds and 35% of the 75+ age group participated in some

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volunteering activity. These rates are lower than those for the younger age group but show an upward trend whereas the trends in volunteering in the working age group seem to be downwards.

Ethnicity

The following table gives the ethnic breakdown of Herefordshire residents aged 65 and over.

Table 3: Ethnicity of the Herefordshire population aged 65 and over

Ethnic Group	Number	Proportion
White	33,490	99.8%
Mixed	18	0.2%
Black	9	
Asian	18	
Chinese	14	
Other Ethnic Group	9	
Total Population	33,558	100%

Source: 2001 census – Crown Copyright

Herefordshire's largest ethnic minority is generally assumed to be Romani who do not feature as a separately identified ethnic group in census results.

Living Arrangements

Overall, 65% of the over 65s in Herefordshire live in a household with other people, while 31% live alone and about 4% live in communal establishments such as care homes. The proportion of the population living with other people declines with age; from 77% of the 65-74 age group to 34% of those over 85 years old. Conversely the proportion living alone rises from 22% to 47% as age increases from 65-74 to 85 and over. Similarly, the very elderly are more likely to live in residential homes and other communal establishments (19%) than those 20 years younger. A detailed analysis of living arrangements for the different age cohorts is shown in Table 4.

Table 4: Living Arrangements of the Population of Herefordshire Aged 65 and Over

Age Group	Living with Other People in a Household	Living Alone	Living in a Communal Establishment	All Living Arrangements
65 – 74	13,515	3,949	156	17,620
	77%	22%	1%	100%
75 – 84	6,856	4,665	488	12,009
	57%	39%	4%	100%
85 and Over	1,358	1,860	736	3,954
	34%	47%	19%	100%
65 and Over	21,729	10,474	1,380	33,583
	65%	31%	4%	100%

Source: 2001 Census – Crown Copyright

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Assuming that the current trends in living arrangements prevail throughout the decade, there are likely to be an extra 3,000 older people living alone in Herefordshire by 2011. This may be a conservative estimate; the trend towards single person households amongst younger age groups will eventually be manifested in the older cohorts and there will be an increasing prevalence of single person households amongst older people.

Health Problems

Nearly half (46%) of the residents living in households and aged 65 or above suffer from poor general health and / or have a limiting long term illness. In numerical terms, these constitute about 14,800 people. The proportion steadily increases from 37% of 65 - 74 year olds to 72% of the 85+ age group. Table 5 contains a detailed breakdown.

Table 5: Over 65 population Resident in Households and Suffering from Poor Health and / or Limiting Long Term Illness

Age Group	Resident in Households	Suffering from Poor Health and / or Limiting Long Term Illness	Proportion
65 - 74	17,464	6,444	37%
75 - 84	11,521	6,012	52%
85 and over	3,218	2,317	72%
65 and over	32,203	14,773	46%

Source: 2001 Census – Crown Copyright

Assuming these 2001 rates apply throughout the decade, there are likely to be another 4,500 older people in Herefordshire suffering poor health and / or limiting long term illness by 2011.

Particular conditions are especially prevalent amongst the elderly and lead to an increased need for support from carers, the voluntary sector and statutory agencies. Some indication of the extra resource implications due to the projected increase in the population of older people can be ascertained by looking at numbers of hospital admissions in recent years for certain conditions and, assuming current incidence rates prevail throughout the decade, making predictions as to the likely level by 2011.

Some specific conditions which give rise to hospital admissions are considered in Table 6. Assuming that the age specific incidence rates of these conditions prevails between 2001 and 2011, it is possible to predict the likely levels and increase over the ten year period.

Table 6: Expected increase in Hospital Admissions of Older People for Particular Conditions

Health Problem	Average Annual Admissions of Older People 1998 - 2001	Older People as a Proportion of all Hospital Admissions	Projected Annual Admissions of Older People 2011	Increase 2001 - 2011
Fractured hip & femur	248	85%	343	38%
All cancers	1,801	50%	2,260	25%
Coronary Heart Disease	503	59%	640	27%
Stroke	345	83%	450	30%
Chronic Lower Respiratory Disease	229	49%	290	27%

Source: *Information & Data Services, Herefordshire Health Informatics Research Team, Herefordshire Council*

Similarly, various chronic conditions are more prevalent in older people and lead to a demand in social care. For example, a 37% increase in the incidence of cognitive disability can be expected assuming current prevalence rates.

There will be more cases of chronic diseases which are more likely to occur in older people and which give rise to demands for social care. Given current prevalence rates of Parkinson's disease and conditions which mimic Parkinson's, over a 100 extra clients with these conditions can be expected by 2011. This is additional to the current work load. Similarly a rapid rise in the number of older people with diabetes can be expected due to the ageing population. On top of current levels of the disease in the elderly, another 1,150 – 1,200 older people may be affected by 2011.

Herefordshire Needs – Access to Services

Households with no Cars

27% of over 65s living in households do not have access to a car or van. The proportion increases from 16% of the 65-74 age group to 57% of people aged over 85.

Table 6: Over 65 population Resident in Households without access to a car or van

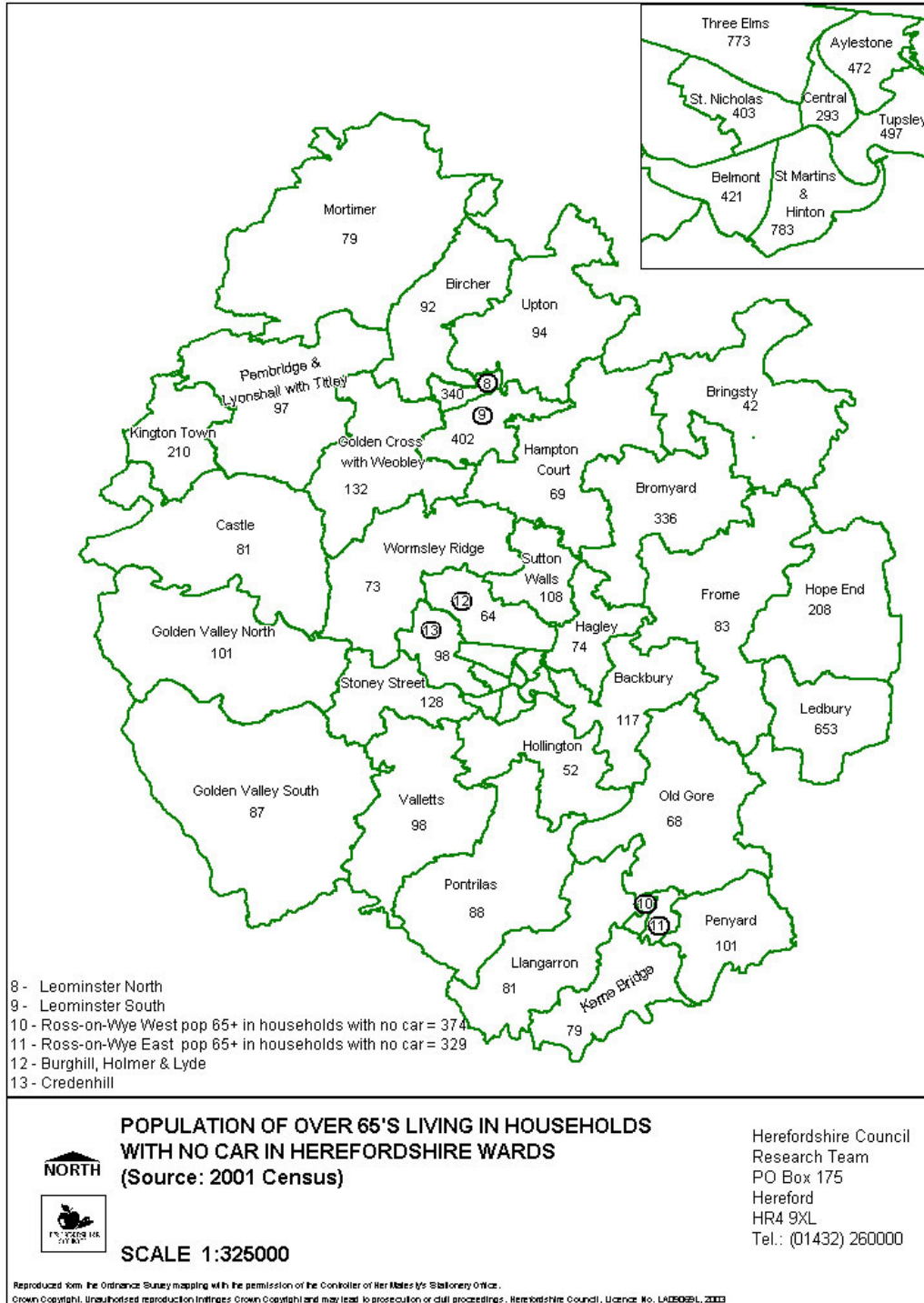
Age Group	Resident in Households	No car or van available	Proportion
65 - 74	17,464	2,769	16%
75 – 84	11,521	4,072	35%
85 and over	3,218	1,840	57%
65 and over	32,203	8,681	27%

Source: *2001 Census – Crown Copyright*

Figure 3 shows the distribution across the County of the 8,681 persons aged 65 and over living in households with no car.

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Figure 3



Index of Multiple Deprivation

In December 1998, the then Department of the Environment, Transport and the Regions (DETR) commissioned the University of Oxford to produce an index of multiple deprivation by which the 8,414 wards in England were given a ranking according to the degree of deprivation. Six domains of deprivation were included: income, employment, health, housing, education and geographical access to services. Services included were post office, food shop, GP and a primary school. The methodology for ranking wards incorporated weighting for the number of people in receipt of means tested welfare benefits.

The ward areas used in the exercise were those prevailing in 1998. At that time, Herefordshire was divided into 44 wards. Twenty of these were in the most deprived 10% in England in terms of access to services.

Sparsity

Although Herefordshire does not have the lowest population density of any shire in England, it has the most dispersed population. This is measured by the ward sparsity factor which incorporates (in a fairly complicated formula) the proportion of the population resident in wards of low population density (less than 4 per hectare). Herefordshire's sparsity allowance is the highest in England.

Rural Assets, Services and Facilities

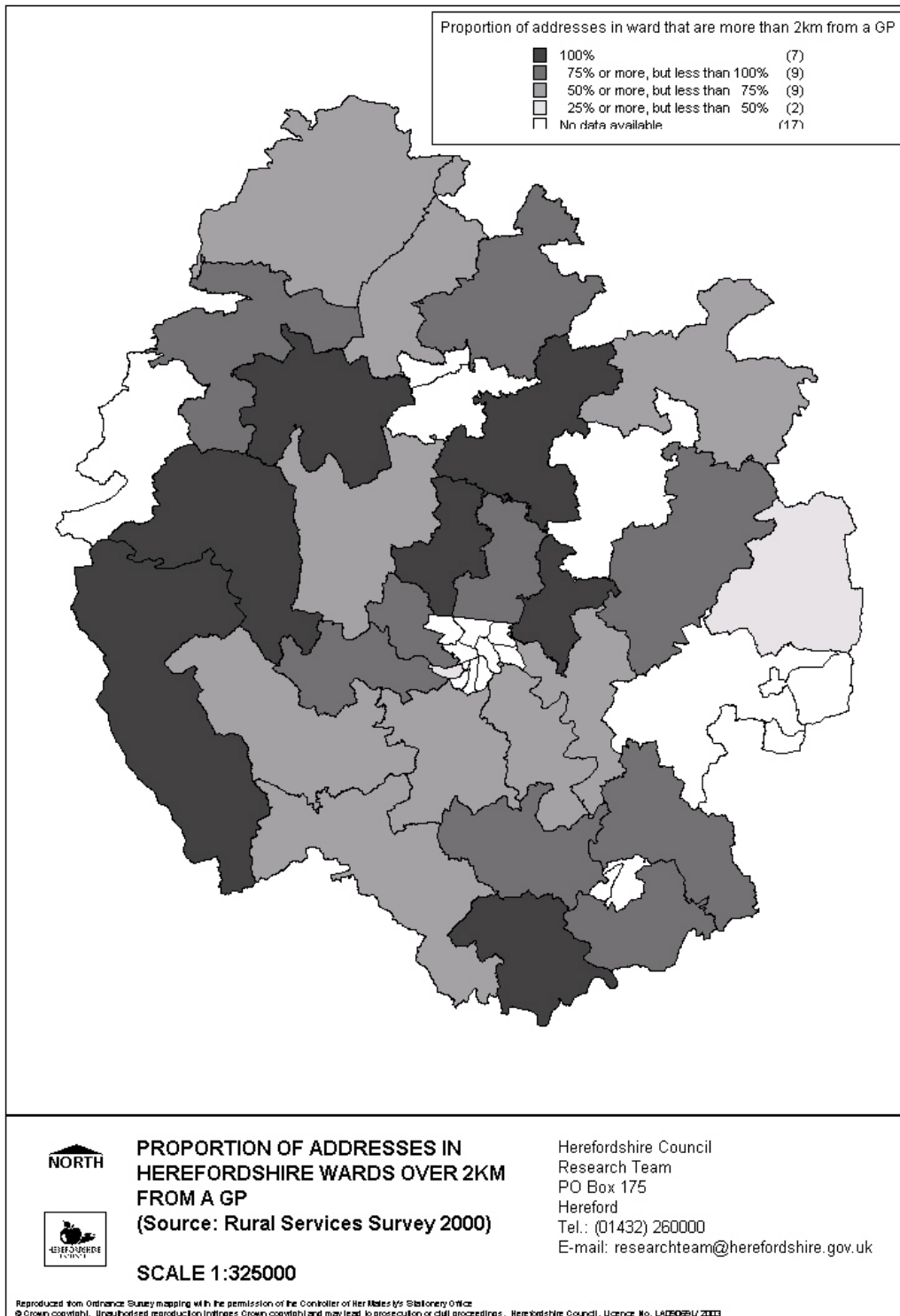
In 2000, the Countryside Agency did a survey of rural assets, services and facilities. The following data show the number of rural parishes, ie those with fewer than 10,000 residents, which lack the key facilities considered essential for the conduct of normal daily life in the villages and countryside:

- Bus service on 6 or 7 days a week – 49%
- Bus service on at least one day a week – 23%
- General store – 87%
- Post Office – 63%
- Public House – 52%
- Primary School – 71%
- Village hall or other meeting place – 38%

From the same survey, statistics have been produced on the distances of addresses in rural wards from GP surgeries and post offices. Figures 4 and 5 summarise the information.

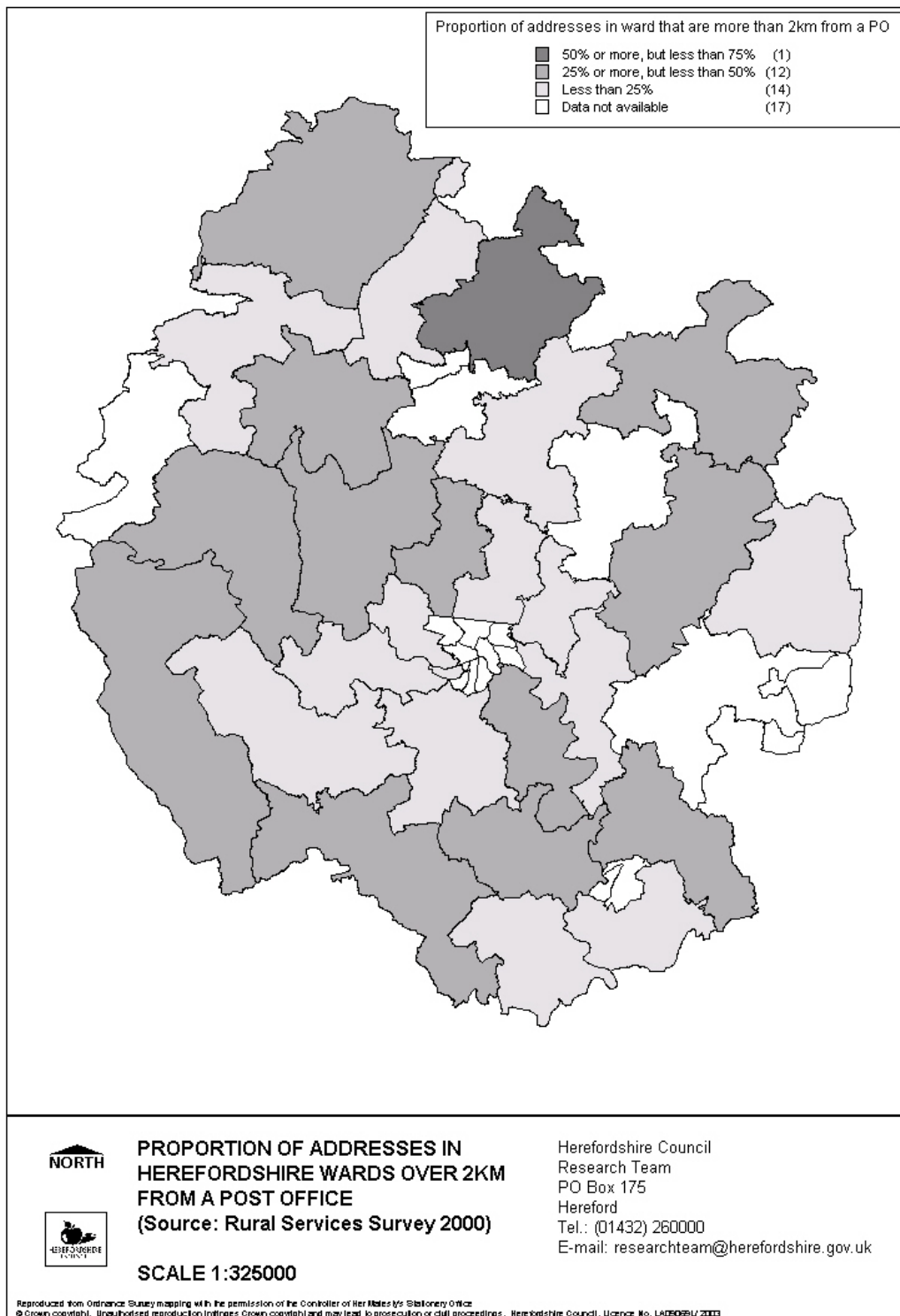
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Figure 4



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Figure 5

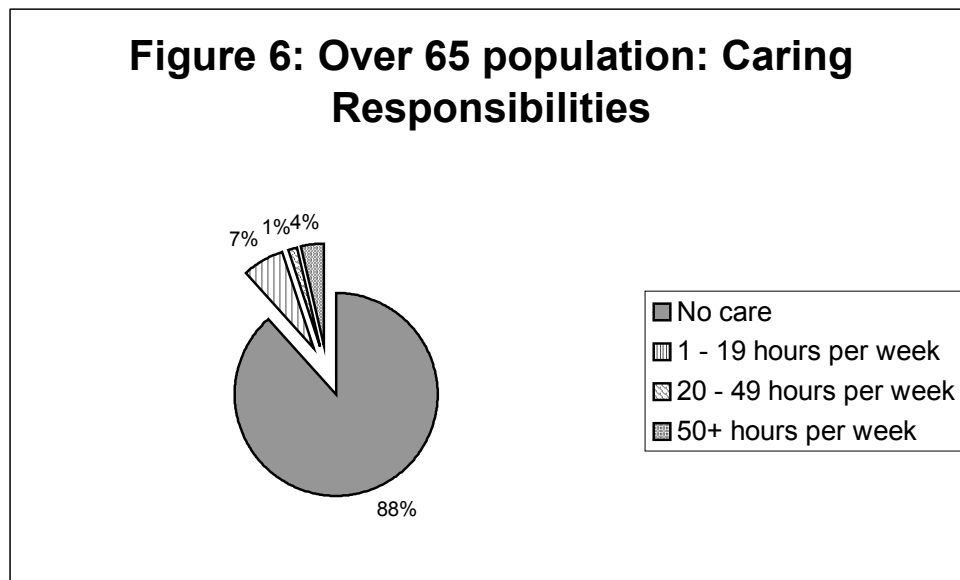


Resources

Older Carers

For the first time, the 2001 Census of population contained a question asking respondents whether they provided unpaid care, ie did they look after or help any family member, friend or neighbour who needed support because of long-term physical or mental ill-health or disability or problems related to old age. 17,558 residents in Herefordshire acted as unpaid carers. Of these 3,735 were aged 65 or over.

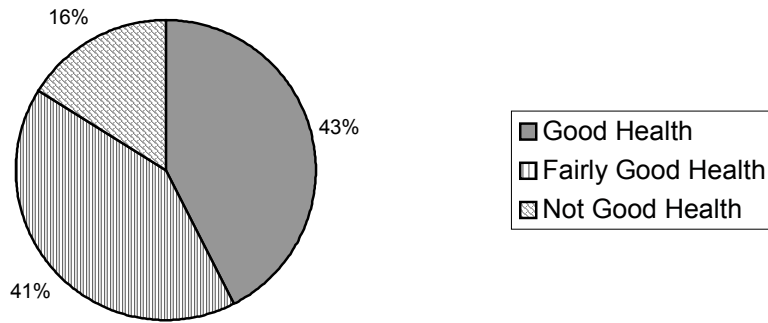
Figure 6 shows the amount of unofficial care provided by the 32,200 older people living in households. 88% do not provide any care, 7% (2,133) people give 1-19 hours per week; 1% (397 people) give somewhere between 20 and 49 hours care per week whilst 4%, about 1,200 people, provided in excess of 50 hours per week each on average.



Source: 2001 Census – Crown Copyright

The general health of older carers must be a cause for concern; in the event of a breakdown, the burden of care could well fall on statutory agencies. 1,584 (42%) of these older carers have good health and a further 1,547 (41%) have fairly good health. However, there are 604 older carers, 16% of all older carers, suffering from not good health, of whom 45% supply more than 50 hours per week of unpaid care. These figures are shown graphically in Figure 7 below.

Figure 7: Over 65 Carers: General Health



Source: 2001 Census – Crown Copyright

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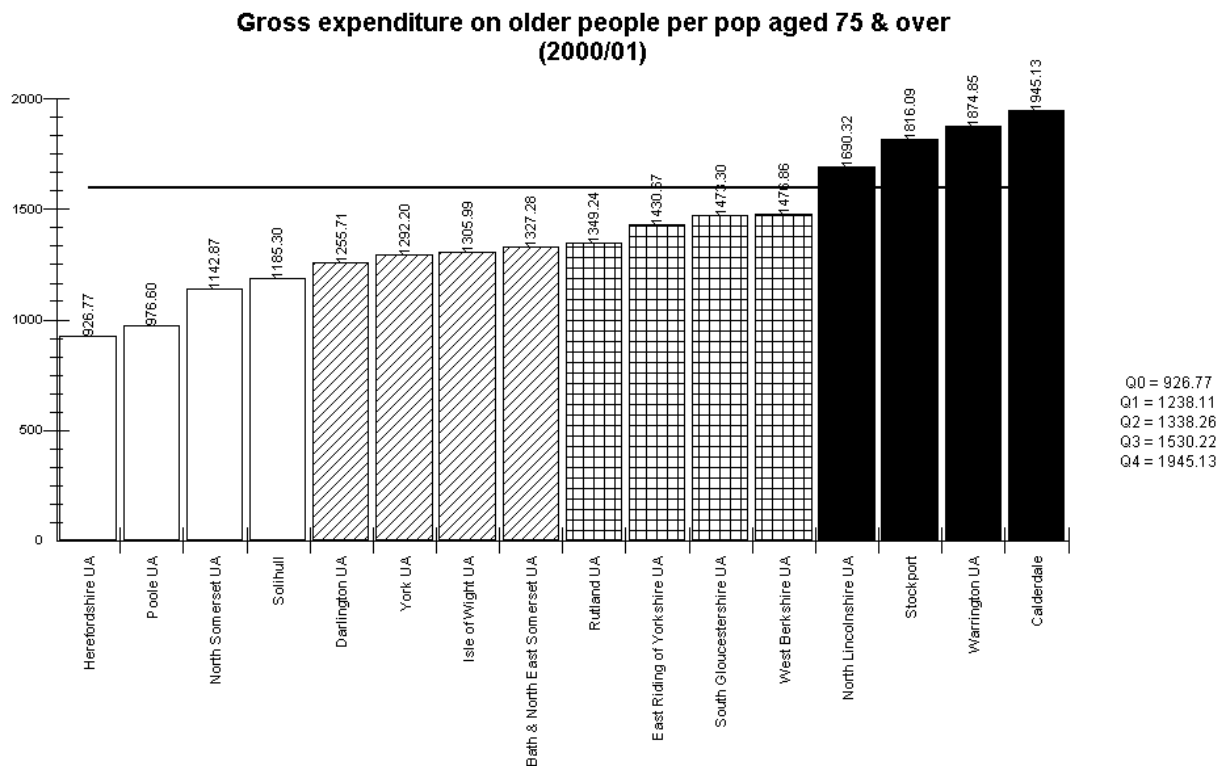
Expenditure on Older Care

A project by the Audit Commission, "*Whole system Health and Social Care for Older People – impact on hospital discharges*" considered some aspects of the funding of personal social services including older care.

A fairly crude analysis, comparing the expenditure on older people with that of other unitary authorities, suggests that Herefordshire is spending £11 million pa less than might be justified (2000-2001 figures). This figure includes an adjustment for lower deprivation levels in Herefordshire than other unitaries but makes no allowance for lower wage levels in Herefordshire which would tend to *reduce* necessary expenditure or of sparsity which would tend to *increase* necessary expenditure because of higher travel costs.

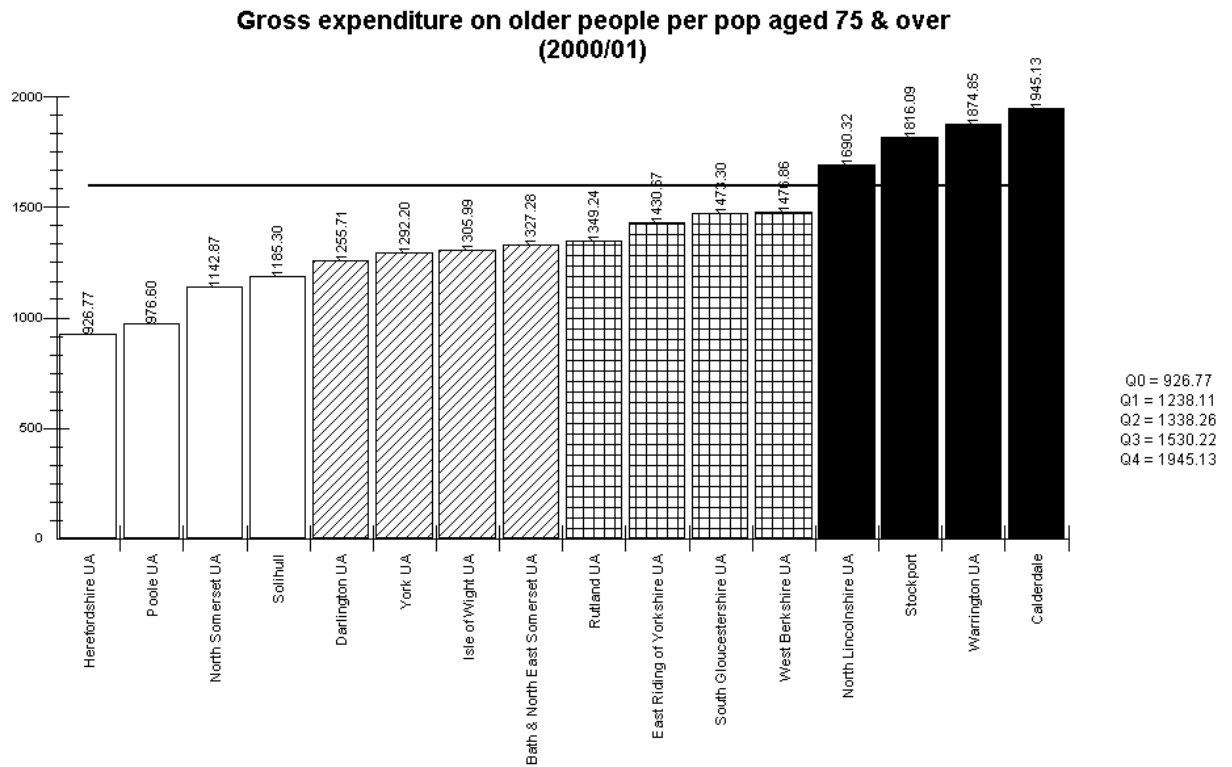
The effect of the low expenditure in Herefordshire is reflected in some of the KIGs:

- Supported admissions of elderly to residential and nursing care per 10,000 population aged 65+ (2001/02) = 82.41. This is the 3rd lowest figure in the benchmarking group of 16 unitary authorities most like Herefordshire.

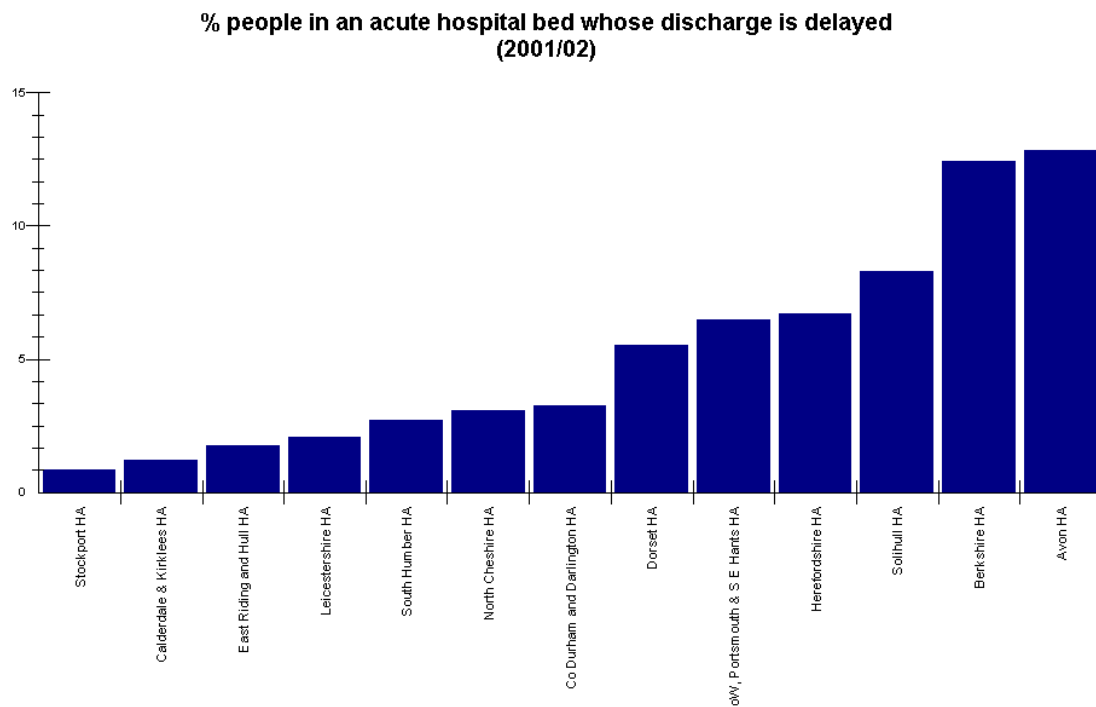


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- Gross expenditure on older people per population aged 75+ (2001/02) = £927. This is the lowest of any of the 16 unitary authorities in the benchmarking group.



- Percentage of people in an acute hospital bed whose discharge is delayed is 6.7%, the 4th highest in a group of 13 health authorities with similar socio-economic and demographic characteristics.



Staff Views on Training Needs / Resources

224 members of staff in Social care (adults) responded to the 2002 Herefordshire Council Staff Opinion Survey.

Respondents were also asked to consider whether they had adequate resources to carry out their jobs properly. Five statements covered this area and staff were asked to agree or disagree with them:-

"Usually, I have the resources to do my job properly."

"I have sufficient IT resources for my job"

"I believe it is possible for me to make improvements to my work within existing staffing levels"

"My workload is excessive"

"I regularly work late / take work home to keep up"

Amongst the lower paid employees, ie those earning £6.44 per hour, 20% felt they did not have the resources to do their job properly. A similar proportion, probably the same people, felt that their workload was excessive. Concerns about resources, IT, staffing levels and workloads were much greater amongst staff earning more than £6.44 per hour; 55% of these felt they did not have resources to do the job properly, 38% thought IT provision was insufficient, 60% did not think improvements were possible within current staffing levels, 66% agreed that their workloads were excessive and 59% regularly worked long hours or took work home.

It can be concluded that there are some issues on resources which worry senior staff but, from which, most lowly paid staff are protected.

The following are comments received on the above issues in the staff opinion survey.

"Resources ie money or lack of does inevitably mean that we are less able to offer people a good level of service in terms of what they need"

"Over the past 12 years, resources have not increase, it has been 'cut cut cut' all the time."

"Access to a computer can be difficult."

"Inadequate staffing levels places additional workload and stress on others."

"Within social care very little funding, very few resources - not able to meet client need. ".....due to sickness and holidays we at times are under staffed"

"I feel that the council cannot provide the Home care section users what they need, when they do not have the resources or the staff to do this."

"Front line staff want to achieve more but are frustrated with lack of resources"

"We have no resources- we cannot carry out or achieve for our clients"

"Professional training for anything but IT has been negligible for 3 or more years for any social worker"

"I am very happy with the on going training."

"Resources and inadequate social work post in my team mean that we are constantly working at high pressure in emergency situations - hence opportunities for development work are squeezed out"

“Accessing relevant training opportunities to enhance professional development is complex time consuming and likely to result in lack of departmental support

“I need more training and updating with first aid.”

“Training within my directorate has greatly diminished lately.”

“Secondment for Dip SW needs to be made available.”

“My training has been ok but most of my skills I already had. I would like more opportunities to get even more skills.”

“I feel that the training opportunities offered are adequate and always related well to the job. I also feel that as carers, if training on anything specific is requested then the management is co-operative and usually manage to arrange this.”

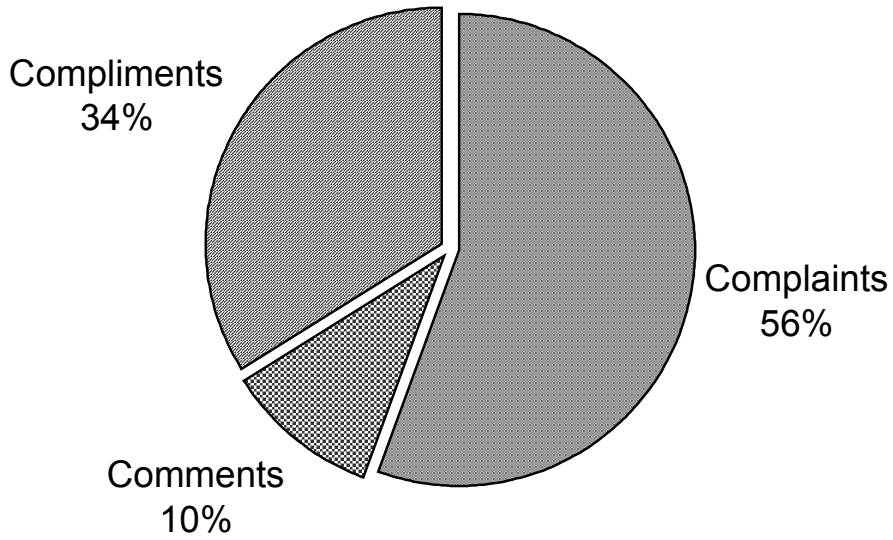
“Due to the uniqueness of my role, any training re professional development is not available or appropriate within the local authority, for my professional development.”

Public Perception of the Service provided by Social Care to Older People

Over a period of nearly 18 months from April 2002 to mid-September 2003, 97 communications commenting on the service were received from either service users or their families or carers or others. The 54 complaints formed just over half these communications, compliments about a third and general comments the remainder. The following charts show a breakdown of these communications.

Complaints	Comments	Compliments
54	10	33

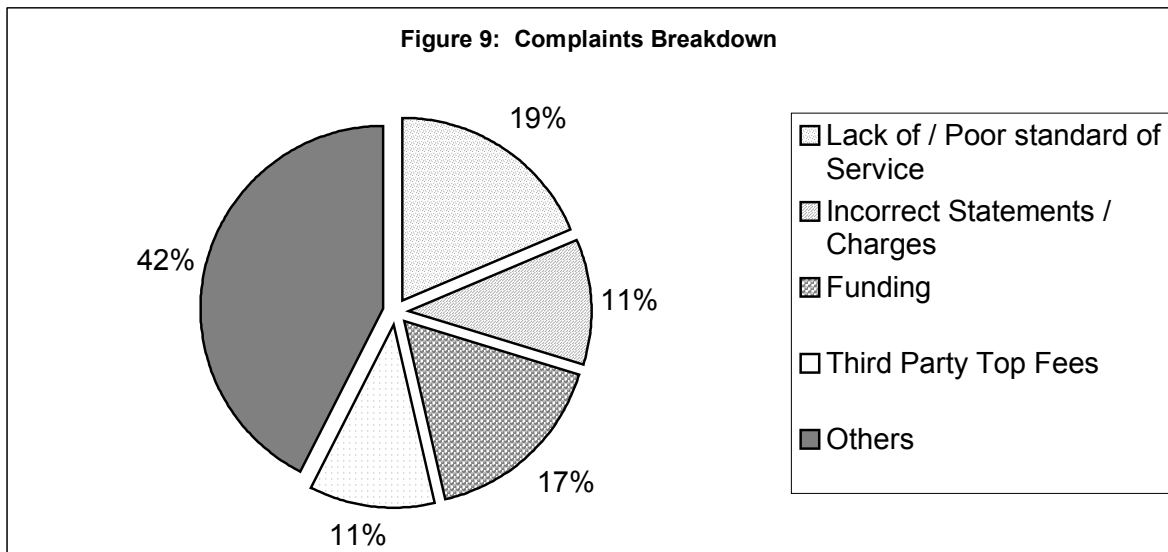
Figure 8: Communications re Older Care April 2002 - Sept. 2003



Source: Herefordshire Council: Social Care & Strategic Housing Directorate

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COMPLAINTS BREAKDOWN				
Lack of / Poor standard of Service	Incorrect Statements / Charges	Funding	Third Party Top Fees	Others
10	6	9	6	23



Source: Herefordshire Council: Social Care & Strategic Housing Directorate