

Making Herefordshire a great place to grow old?

- This matters to the 55,000 people over 60 who currently live in the countyⁱ.
- It matters for those who care for older people, many of whom are disabled: 60% of people aged 65 and over say they have a long-term/disabling condition, compared with 17% of those aged under 40ⁱⁱ.
- It matters in a rural county where people aged 65-84 are more likely to live in rural villages, hamlets and isolated dwellings than the population as a wholeⁱⁱⁱ
- It matters because older people want more choice and control over any support they need to go about their everyday lives, living with dignity and independence for as long as possible^{iv}.

Healthwatch Herefordshire has produced this factsheet to inform everyone involved about the issues. The figures show we cannot be complacent: health and care services need to pursue their agenda for prevention and community-based support in Herefordshire more strongly than ever.

This is why older people are one of the top 5 priorities for Healthwatch Herefordshire.

A significant slice ... Older people are a large and growing segment of our population. By 2032 nearly one in four people in the UK will be aged 65 and over^v. But already people over 60 in Herefordshire make up nearly 29% of the population, or around 55,000 people.

People over 60 make up 28.8% of Herefordshire's population (Census 2011)

Herefordshire has higher proportion of older residents than the average (21% aged 65+ compared to 17% nationally). This is expected to increase as the post-war 'baby-boom' generation moves into old age. In particular, the number of people aged 85+ in the county will more than double to 12,200 by 2031.

... facing reduced support from Social Care

Despite increasing population figures, far fewer older people across the UK are receiving social care services due to recent changes and the impact of budget reductions. Care clients overall have reduced by 26%, but for older people the reduction is 31%, or nearly a third. This means 260,000 fewer older people in the UK received services in 2012/13 than in 2005/6. The largest reductions are in people receiving services in the community^{vi}. This is likely to mean people with the lowest levels of need, who generally live in their own homes in the community, have been disproportionately affected by the raising of eligibility thresholds by their local authority.

How is Herefordshire doing?

Social care reablement service

87% of older people receiving social care reablement services in Herefordshire, after a hospital stay, are still at home 3 months later compared to 78% in the West Midlands, suggesting a quality service avoiding re-admission to hospital. However, as with most other local authorities, only 3.5% of older people receive such a social service/placement in the first place¹.

Hospital Discharge

Delays in people leaving hospital to go home are very low in Herefordshire at just a third of rates in similar authorities and in England overall - and a quarter the rate in the West Midlands overall. Delays due to social services are also a third of comparable rates but just a fifth of the West Midlands rate¹. While this sounds very positive, it may also explain the stories that Healthwatch receives about difficulties for carers and older people in recovering at home without support, reflecting poorly planned and rushed discharges that need time to set up properly.

Care Home Admissions

Herefordshire's rate of admission to care homes for over 65s is around 80% of the rate for similar authorities, for the West Midlands and for England overall (this does not include people who are funding their own stay in a care home)¹. Funding fewer care home places than similar authorities suggests both more self-funders locally, but also more people staying in their own homes in Herefordshire. While staying in your home is positive for many, it also brings more needs for community support as people age, to combat the higher risks of isolation in a county that is one of the country's most sparsely populated areas - and the need/expectation for greater input from unpaid carers to help people stay at home.

Personal Budgets

Herefordshire Council plans to give choice for individuals who meet critical and substantial eligibility criteria, Herefordshire Council can offer a personal budget. This is a sum of money that is used to promote wellbeing, inclusion and independence. A personal budget can be available as a cash payment paid directly to the individual for them to arrange their own services, this is known as a Direct Payment. Research suggests that as older people can have fluctuating health, sudden disabilities, may receive poorer information and advice and lower budgets they are not benefitting from the same choice and control as other groups. SCIE Report 63 ^{xvi}

The Big Issues for older people's health and wellbeing

Isolation and loneliness.

While most people in Herefordshire (60 %) have contact with family, friends or neighbours most days of the week, for one in twenty contact is once a month or less and a similar proportion (5%) say they feel lonely most or all the time (regardless of age or where they live in the county).

The highest proportions of lone pensioner households are found in Hereford and the market towns. While Herefordshire has been compared to other rural counties, such as Devon, Cornwall, Cumbria, our population is much sparser, contributing to greater potential for isolation.

People living alone are most likely to experience this kind of isolation; currently 28% of households are made up of one person and half of these people are over 65.

Disability, illness, poor emotional health

The likelihood of being disabled and receiving care increases with age. 60% of people aged 65 and over say they have a long-term/disabling condition, compared with 17% of those aged under 40^{vii}. The number of disabled older people in England is projected to double from approximately 2.3 million in 2002 to approximately 4.6 million in 2041^{viii}. Symptoms of depression are also more common in later life, affecting 25% of people aged 65 and over^{ix}. There will also be over a million people with dementia by 2025^x.

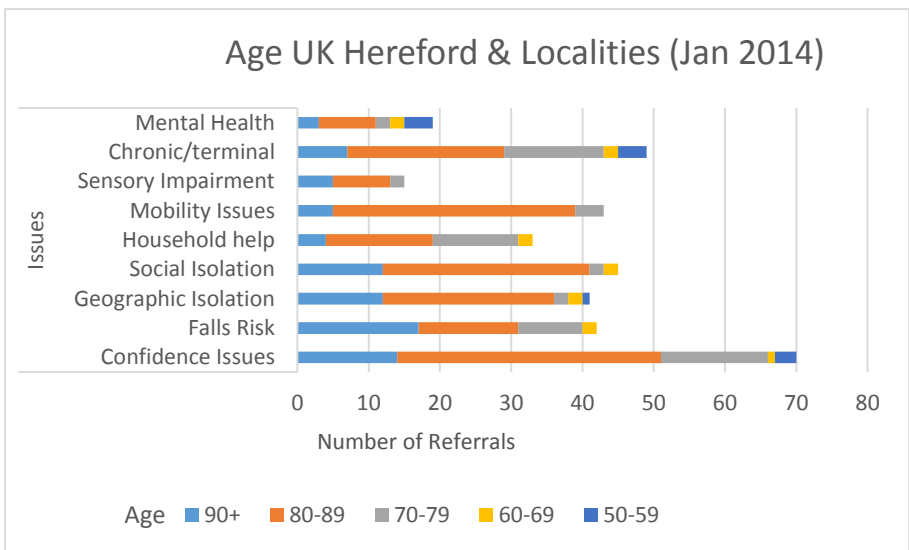
Prevention of crisis and distress

Many older people, including in Herefordshire, enter the health & social care system at a time of crisis, often after a fall or acquiring an infection, and need a range of co-ordinated services. This can often be a distressing experience, particularly for those who have little or no existing help or support networks around them. This raises the importance of the preventative agenda for older people's health, wellbeing & care.

Getting Older In Herefordshire

In Herefordshire, rates of limiting long-term illness amongst those aged 65-84 are lower than nationally, and people turning 65 in the county can expect to live longer, and in good health and without a disability, than those elsewhere. Nevertheless, the natural ageing of the population, as the post-war 'baby-boomers' become very elderly, will have continuing implications on the need for care and support. Future levels of need for social care are unclear, but many older people and their carers will need to be enabled to support themselves. In particular, an estimated 3,000 people with dementia (two-thirds of whom are undiagnosed) could almost double in 20 years^{xi}.

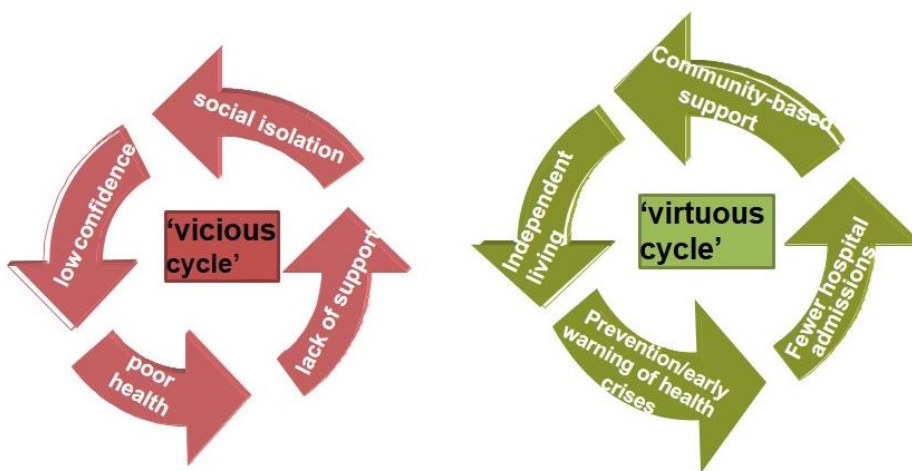
Crucially though, a small, dispersed rural population brings big challenges as mentioned earlier in this factsheet: the figures in the graph below show the types of issues older people in rural areas have raised with Age UK in Herefordshire.



The graph suggests that the most vulnerable group of older people in Herefordshire are people who are 80+ and 75% of Age UK Hereford & Localities rural contacts are with this group. What is striking is the number of people who report a drop in confidence, and who are isolated, geographically, socially or through lack of mobility.

Call to action: prevention and support

These diagrams illustrate what the figures presented in this factsheet mean in practice. The ‘vicious’ cycle shows how isolation and low confidence lead to poor physical and emotional health, which, along with a lack of support, in turn makes isolation worse. The ‘virtuous’ cycle shows how community-based support can lead to prevention of problems and independent living, so reducing health crises and hospital admissions. Living independently and reducing isolation makes life better for older people, improving social inclusion, it is predicted this saves money and improves wellbeing and quality of life^{xii}.



The question for everyone involved in the health and care system is:

What are we doing to combat the vicious cycle and create the virtuous one?

Healthwatch calls on all relevant organisations in Herefordshire to take this agenda seriously by:

- **Preventing crisis situations by;**
 - Focusing on falls prevention: reducing the demands and costs associated with injury from fall.
 - Adapting older people's housing: adaptations, including better lighting, reduce the number of falls and other accidents, and can also reduce depression, which in turn may reduce the number of falls.
- **Ensuring supported discharge and community services;**
 - Speedy assessments and adaptations and equipment can help hospital discharge or prevent admission to hospital.
 - Supporting carers.
 - Can enable disabled older people to avoid or move out of residential accommodation into independent living.
- **Reducing loneliness and isolation** by helping people access activities and services in the community, encouraging dementia friendly activities and services, keeping older people active and connected to maintain good mental health.
- **Stretching resources further by;**
 - Developing creative new ways for community-based support and prevention.
 - Adapting good ideas from across the UK where new ideas have saved money.



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Sources

ⁱ Census 2011

ⁱⁱ Department of Health, *Raising the profile of long term conditions care: A compendium of information*, 2008

ⁱⁱⁱ 47% of 65-84s; 43% of all people: source Herefordshire Joint Strategic Needs Assessment 2013

^{iv} Understanding Herefordshire

<http://factsandfigures.herefordshire.gov.uk/1922.aspx>

^v Office for National Statistics, *Population trends 134*, 2008

^{vi} Personal Social Services Research Unit, *Changes in the Patterns of Social Care Provision in England: 2005/6 to 2012/13*

^{vii} Department of Health, *Raising the profile of long term conditions care: A compendium of information*, 2008

^{viii} PSSRU, *Future demand for long-term care, 2002 to 2041: Projections of demand for long-term care for older people in England*, 2006

^{ix} UK Inquiry into Mental Health and Well-Being in Later Life, *Promoting mental health and well-being in later life*, 2006

^x Alzheimers Society, Statistics, 2009

^{xi} See <http://factsandfigures.herefordshire.gov.uk/1507.aspx>

^{xii} Social Exclusion Unit, *Making life better for older people: An economic case for preventative services and activities*, 2006

^{xvi} SCIE report 63 *'Improving personal budgets for older people: a research overview'*