

50+

**OLDER
PEOPLE**

50+ WHAT DO WE MEAN BY OLDER PEOPLE ?

There is no universal agreement on when old age begins. Our perception depends largely on context and our own age. For example, an ONS opinion survey found that, on average, younger people think age 54 marks the start of old age, whilst conversely those over 80 think old age begins at 68 (DWP, 2012). The Welsh Government's Strategy for Older People in Wales defines older people as aged 50 and over, although this has been the subject of much discussion (Welsh Government, 2013). In this section, the majority of the data presented relates to those aged 65 and over. However, to ensure clarity every effort has been made to reference the age range in the statements made in this assessment.

The needs of all older people are not the same. Socio-economic status, gender and ethnicity all play a role in shaping people's needs and outcomes. Equally the needs of older people in otherwise good health will be very different from those people living with frailty and other health conditions.

SOURCE

Key Terms - Section 3.4, 3.7 and 3.8, page 6, Social Services and Well-being (Wales) Act 2014 http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf

50+ WHO IS AFFECTED AND HOW ?

The 'Valuing the Socio-Economic Contribution of Older People in the UK'2 report produced by the WRVS in March 2011 reported that older people made a positive net contribution of £40 billion to the UK economy in 2010. As the overall number of people over 65 increases and people remain healthier for longer, opportunities to make a positive contribution through work or volunteering will grow. As a result, by 2030, the positive net contribution of over 65s will rise to an estimated £77 billion.

In Western Bay we do not yet measure the contribution that older people make to the region, for example, we do not know how many hours of volunteering they undertake or the contribution they make to their communities. This has been identified as a gap in the population assessment and further work should be undertaken to explore this.

SOURCE

http://www.royalvoluntaryservice.org.uk/Uploads/Documents/gold_age_report_2011.pdf

LEVELS OF NEED AND THE 'BALANCE OF CARE'

One of the first signs that an older person is beginning to lose the ability to live independently is their ability to perform domestic tasks such as keeping their home clean and tidy, dressing themselves and preparing meals. It is often the lack of ability or perception of a lack of ability to do these tasks that prompts contact with social services. The General Household Survey (GHS) contains a set of questions for people aged 65 and over, covering a range of topics such as health and mobility, ability to perform domestic and self-care tasks and the help they receive.

The projection data produced by Daffodil indicates that in 2020 in Western Bay:

- The projected population of people aged 65 and over will be 111,070
 - 45,720 (41.2%) people aged 65 and over will be unable to manage at least one domestic task on their own. Tasks such as cleaning floors using a vacuum cleaner, household shopping, opening screw tops.
 - 20,598 (18.5%) people aged 65 and over unable to manage at least one mobility activity on their own. Activities such as: getting in and out of bed, walking up and down stairs and going outdoors and walking down the road.
 - 37,378 (33.7%) people aged 65 and over unable to manage at least one self-care activity on their own. Selfcare includes: taking medication, dressing and undressing, able to wash face and hands.
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As expected, with the increase of population, the projected proportion of older people unable to manage at least one task or self-care activity is increasing. This will have a noticeable impact on domiciliary services who are already struggling to meet the current level of care require. This is a high risk area for the future, which needs to be addressed urgently if social services are to meet the demands of our future older people population.

The levels of need indicated above does show the potential demand on services to be high and that the current 'balance of care' will need to change to ensure the needs of the most vulnerable will be met.

The nature of older age is changing. Pension age is rising, many people are more active at 65 than in previous generations, the uptake of digital services by those aged 65 and over is increasing and people's aspirations are very different than they used to be.

The predicted increase in life-expectancy in a period of decreasing budgets mean that traditional models of service delivery are not sustainable.

In respect of wellbeing services, Councils and Health Boards have committed to healthy living programmes such as; smoking cessation, weight reduction and taking part in physical activities have been promoted to help people stay fit and well into old age. However, as the number of older people is expected to rise it is likely that there will be a proportionate increase in the prevalence of chronic conditions, leading to a potential increase in hospital admissions and social care interventions.

The Welsh Government Intermediate Care Fund has been extended to deliver on the Western Bay optimum model for intermediate care. This means that a high proportion of people who would have entered long-term managed care and support services are being enabled to become fully independent and live at home, some with the support of assistive technology.

DEMENTIA

Anyone can be affected by dementia. However, the Alzheimer's Society reports that the following groups of people are at greatest risk:

▼ IN THE UNITED KINGDOM

- Older people: dementia is more common as people age, almost 95% of those living with dementia are over the age of 65. One in 14 people aged 65+, one in six people aged 80+ and one in three people aged 95+ has a form of dementia.
- Learning Disability: studies have shown that there rates of dementia are higher in people with Down's Syndrome than in the general population.
- Females: Dementia is more common in women than in men. Around 850,000 people in the United Kingdom are affected by dementia, of those 61% are female and 39% are male. The latest data suggests that dementia or Alzheimer's is now the biggest single cause of death amongst women in England and Wales, having surpassed different forms of cancer for the first time. This can be attributed, in part, to the fact that women tend to live longer than men and as dementia becomes more common as we age, more women develop the condition.

▼ IN WALES

- There are currently 43,614 people living with dementia. Approximately 2,500 people aged under 65 in Wales have dementia.
- By 2021, the number of people with dementia across Wales is projected to increase by 31% and as much as 44% in some rural areas.

DIAGNOSIS RATES FOR DEMENTIA

Early diagnosis of dementia provides the best opportunity for treatment. With the right support and treatment many people are able to lead active, fulfilled lives.

The Alzheimer’s Society reports that diagnosis rates for dementia in Wales are currently 43.4%, the lowest of any country in the United Kingdom. They also report the progress of improving diagnosis nationally and locally, the 2014-2015 report shows the progress in Western Bay compared to Wales.

50+	Number of people with a diagnosis on the Dementia Register (2014)	Number of people with a diagnosis on the Dementia Register (2015)	Estimated number of people with dementia (diagnosed and undiagnosed) in 2014	Estimated number of people with dementia (diagnosed and undiagnosed) in 2015	Percentage of people with a diagnosis of dementia 2014	Percentage of people with a diagnosis of dementia 2015
Western Bay	3,133	3,305	7,222	7,359	43.4%	44.9%
Wales	18,591	19,239	43,478	44,362	42.8%	43.4%

▼ THIS INDICATES THAT IN 2015

- 3,917 people living across Western Bay were without a diagnosis.
- 53.2% of people living across Western Bay were without a diagnosis compared to 54.6% across Wales.

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- A report titled, Hidden Cost of Dementia in Wales provides the best available evidence for the cost of dementia in Wales. The report suggests that the average cost to society per person living with dementia in Wales is over £31,000 per year, totalling approximately £196 million per year.
 - Health care costs are high, at an average of just over £4,500 per person, per year, but the cost of social care is nearly three times higher at an average cost of just over £12,300 per person, per year, some of which is publicly funded but a high percentage is self-funded.
 - The report also suggests that the setting in which the person is cared for has a large impact on the overall cost. It demonstrates that the cost is much higher in residential care compared to the cost of care in the community. Surprisingly, it suggests that care costs are only marginally different between the severity levels for caring for people with 'mild', 'moderate' and severe levels of dementia.
 - Taking into account the projected number of people who are likely to be living with dementia in the future consideration of different approaches to models of care for people with dementia should be a priority for local authorities and health boards.
 - The Welsh Government is currently developing a National Dementia Strategy.
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HOUSING

PROPORTION OF THE POPULATION AGED 65 AND OVER

The table below shows the proportion of the population aged 65 and over by type of housing tenure, the majority 76% was owner-occupied. The information is from 2008, there appears to be a gap in more recent data. It should be noted that there has not been local authority housing stock in Bridgend since 2002 and none in Neath Port Talbot since 2011. All homes in local authority housing stock were transferred to registered social landlords in order to access significant financial investment to achieve the Welsh Housing Quality Standard.

2008 HOUSING TENURE FOR THOSE AGED 65 AND OVER

50+	Owner-Occupied	Local Authority	Housing Association	Private Rented
Western Bay	68,891	11,816	5,441	4,375

LIVING ALONE

Loneliness and social isolation of older people are topics that are relatively under researched* but there are a number of tools available to measure the impact of loneliness in later life that could be used to gain a better understanding of these issues in Western Bay.

There are many studies that demonstrate how loneliness and social isolation can lead to a number of physical and mental health problems such as: depressive symptoms and increased risk of premature mortality. However, it should not be presumed that all people who live alone experience loneliness and isolation.

In Western Bay, in 2020 the projected population aged 65 and over is 111,060, of those it is predicted that 50,364 (45.3%) will be living alone. At 11.10% the percentage of females aged 65 and over living alone is more than double that of males (4.55%). This will have a noticeable impact on housing.

PEOPLE AGED 65 AND OVER PREDICTED TO BE LIVING ALONE

50+	2015	2020	2025	2030
Bridgend	12,685	13,914	15,282	17,020
Neath Port Talbot	12,827	13,774	14,896	16,209
Swansea	21,333	22,676	24,335	26,252
Western Bay	46,845	50,364	54,513	59,481

FALLS

Measuring the Health and Well-being of Nation report by Public Health Outcomes Framework for Wales states: the majority of hip fractures in older people occur as a result of a fall. Approximately one in three people over the age of 65 will suffer a fall each year, with more women falling than men. Once an older person has had a fall it can impact on their self-confidence and can result in social isolation, an increased fear of falling again, depression and a reduced quality of life. Only one in three older people who fall return to their former levels of independence and one in three ends up leaving their own home and moving in to long term care. However, many falls are preventable by such things as: increasing physical activity, reviewing medications and making modifications to the home to improve safety.

PEOPLE AGED 65 AND OVER PREDICTED TO BE ADMITTED TO HOSPITAL BECAUSE OF A FALL

50+	2015	2020	2025	2030
Bridgend	600	687	805	927
Neath Port Talbot	668	726	825	932
Swansea	1,168	1,288	1,458	1,627
Western Bay	2,436	2,701	3,088	3,486

The ‘Falls Prevention Economic Model’ suggests that if investment was made in preventative physiotherapy for older people in Western Bay:

- there will be 1,528 fewer falls
- |
- Up to £2,607,971 cost savings
- |
- but without that investment, by 2020 they project a 17.5% increase in care home admission due to falls
- |

EXCESS WINTER DEATHS

Excess winter deaths continue to be an important issue for effective intervention. The Excess Winter Deaths index compares the number of deaths that occur in the current winter period with the average number of deaths occurring in the preceding months in the same year. These excess deaths are greatest in older people. A wide range of factors increase a person's vulnerability to the cold including people pre-existing medical conditions, physical disability and personal circumstances such as being unable to afford to keep warm enough.

In the period 2010- 2013, the average annual number of excess winter deaths in Western Bay was 270, deaths in winter were 18.9% higher compared with other months of the year.

HOSPITAL ADMISSIONS

Older people are major users of hospital care and are the most likely age group to be admitted in an emergency. In Western Bay the rate of admissions in the most deprived communities is 35% higher than in our least deprived communities.

During 2013, there were more hospital admissions for hip fractures in those aged 65 and over in Neath Port Talbot than in any other Welsh local authority.

ALCOHOL

There are an number of recent reports looking into increases in the number of older people experiencing issues related to the consumption of alcohol or misuse of drugs, such as: Drink Wise, Age Well: Alcohol Use in the Over 50s in the UK.

Older people are at risk of alcohol misuse following major life changes, such as: retirement and bereavement and at the same time have lower tolerance to alcohol than younger adults. Furthermore, alcohol can interact with prescription medications. However, an individual drinking at harmful levels may not recognise their drinking as being problematic and may not wish to engage with treatment services.

In Western Bay, it is projected that by 2020 approximately 11,337 people aged 65 and over will binge drink.

DELAYED TRANSFERS OF CARE FOR SOCIAL REASONS

A delayed transfer of care occurs when an adult inpatient in a hospital is ready to go home or move to a less acute stage of care but is prevented from doing so.

The rate of people delayed (stuck) in hospital for social care reasons in 2013-2014 is lower in ABMU Health Board than the Welsh average. In 2013-2014 a higher rate of older people, aged 65 and over were receiving social care support compared to the Wales average.

NUMBER AND RATE OF DELAYED TRANSFERS OF CARE FOR SOCIAL CARE REASONS IN THOSE AGED 75 AND OVER

50+	2014-2015		2015-2016	
	Local Authority	Number	Rate per 1,000 population	Number
Bridgend	12	1.0	12	1.0
Neath Port Talbot	40	3.2	55	4.4
Swansea	100	4.7	122	5.64

HEART CONDITIONS

Heart attacks are more likely the older people get. Heart attack treatment is most effective when applied as soon as possible after the attack. The increased likelihood of a heart attack in older people and the increased likelihood of living alone makes the risks associated with heart attack greater for the elderly and the very old (85+). Research undertaken by the British Heart Foundation found that heart attacks are more likely in men than in women.

PEOPLE AGED 65 AND OVER PREDICTED TO HAVE ANY HEART CONDITION (EXCLUDING HIGH BLOOD PRESSURE)

Local Authority	Age Range	2015	2020	2025	2030
Bridgend	People aged 65-74 with any heart condition	3,321	3,468	3,506	3,904
	People aged 75 and over with any heart condition	4,520	5,278	6,354	7,072
Neath Port Talbot	People aged 65-74 with any heart condition	3,353	3,530	3,537	3,754
	People aged 75 and over with any heart condition	4,594	5,086	5,999	6,675
Swansea	People aged 65-74 with any heart condition	5,328	5,494	5,379	5,795
	People aged 75 and over with any heart condition	7,958	8,813	10,353	11,270
Western Bay Total	People aged 65 and over with any heart condition	29,074	31,669	35,128	38,470

— CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Chronic Obstructive Pulmonary Disease is commonly caused by smoking, so it follows that reducing levels of smoking will reduce the frequency and severity of incidences of COPD. Chronic Obstructive Pulmonary Disease impacts on many aspects of life, such as reducing the ability for a person to exercise which can lead to obesity and associated risks as well as a general decline in wellbeing.

It is projected in Western Bay that by 2020 there will be 1,863 people aged 65 and over with a long term health condition caused by bronchitis and/or emphysema. Of those, approximately 515 live in Bridgend, 511 in Neath Port Talbot and the remaining 837 in Swansea.

— STROKE

A stroke is a serious, life-threatening and life changing condition. Around one in four victims of a stroke will die as a result and those who survive will often have life limiting brain injuries. Most people affected are over 65 but anyone can have a stroke. Rehabilitation involves physiotherapists, psychologists, occupational therapists, speech therapists and specialist nurses and doctors.

The chances of experiencing a stroke can be reduced through healthy diet, exercise, drinking in moderation and not smoking. Lowering blood pressure and cholesterol will also reduce the likelihood of a stroke. Risk of stroke increases with age and certain medical conditions and lifestyle factors can further increase the risk.

In Western Bay, by 2020 it is predicted that 8,691 people aged 65 and over will have received treatment for a stroke.

▲ <http://www.nhs.uk/conditions/stroke/pages/introduction.aspx>

CANCER

Nearly two thirds of cancer diagnosis occur in the over 65s and one third in people aged 75 and over. By 2020 the incidence of new cancer cases in Western Bay in people over 65 are projected to be 2,380. A total of 657 in Bridgend, 648 in Neath Port Talbot and 1,075 in Swansea. Therefore there is a need to assess cancer services to ensure they are meeting the needs of older people – the people most likely to need them.

OBESITY

The British Medical Journal reports that the prevalence of obesity among elderly people in the United Kingdom is higher than among younger people, with almost three quarters of those aged between 65 and 74 classed as obese or overweight. Obesity is measured as having a Body Mass Index in excess of 30 and people are considered overweight if their BMI is in excess of 25.

The occurrence of obesity is increasing across the country and particularly in older people. As people become less physically active they gain weight. Eating habits may change as people age and become less able to prepare meals for themselves.

In Western Bay, by 2020 it is projected that 99,840 people aged 65 and over will be obese. Approximately, 27,294 in Bridgend, 26,643 in Neath Port Talbot and 45,903 in Swansea.

DIABETES

A consequence of a population living longer, combined with the trend for the weight of the population to increase their levels of physical activity to decrease is the rise in the incidences of diabetes.

The management of diabetes is not as simple as reducing the fat and sugar content of foods. Irregular eating habits can also cause low blood sugar levels reducing energy levels in the body which can trigger a hypoglycemic attack, so the importance of eating regularly and healthily is higher for those with diabetes. Older people can be more susceptible to a hypoglycemic attack through poor food intake, kidney problems, prescription medicines and other illnesses. The signs of a hypoglycemic attack can be hard to recognise and with an increasing population living alone, the risks can be considerable.

In Western Bay, by 2020 it is projected that there will be 32,013 people aged 65 and over with diabetes. Approximately 8,930 people in Bridgend, 8,752 in Neath Port Talbot and 14,331 in Swansea.

CONTINENCE

Continence is the term used when someone has control of their bladder and bowel, incontinence is the term used when this control has been lost. In addition to the expected issues with skin irritation and hygiene, incontinence can have a big impact on an individual's ability and confidence to live a normal life. There are cases when older people risk dehydration by choosing not to drink the recommended amount of fluid for fear of incontinence. The loss of bladder and bowel control are much more common in women than in men.

In Western Bay it is estimated that in 2020 approximately 18,208 people aged 65 and over will have a bladder problem, at least once a week. A total of 5,012 in Bridgend, 4,955 in Neath Port Talbot and 8,241 in Swansea.

Many people do not talk about these problems or seek help, either out of embarrassment or because they think that nothing can be done. This is not the case, incontinence is not an inevitable part of growing older.

PROTECTED CHARACTERISTICS

There are nine ‘protected characteristics’ in the Equality Act 2010: age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, and pregnancy and maternity. The Act protects individuals from unfair treatment and promotes a fair and more equal society.

Public Health Wales Observatory has produced a report titled, Ethnicity and Health in Wales. The report shows that although Swansea has the third highest population in Wales that consider themselves as not being White British or Irish the percentage of people aged 35 and over that consider themselves to be mixed/multiple ethnicity is much lower than the Wales average.

WESTERN BAY POPULATION BY ETHNIC GROUP, AGED 65 AND OVER - 2011 CENSUS

50+	White	Mixed/Multiple ethnic groups	Asian/Asian British	Black/African/Caribbean/Black British	Other ethnic Group
Bridgend	24,683	54	84	17	16
Neath Port Talbot	25,874	52	85	30	10
Swansea	42,406	77	250	24	55
Western Bay Total	92,063	183	419	71	81

There are noticeable gaps in the information available about the current and future needs of older people in Western Bay with protected characteristics.

WELSH LANGUAGE

The Welsh Language skills of older people living in Western Bay is important to ensure there are sufficient numbers of Welsh language staff to converse with people in their language of choice. Evidence shows that people with dementia often revert to their first language and lose the ability to communicate in other languages that they may have used during their life.

Age Group	Able to Speak Welsh	Percentage Able to Speak Welsh	Unable to speak Welsh	Percentage Unable to speak Welsh
65 - 69	2,841	10.4%	24,366	89.6%
70 - 74	2,301	10.2%	20,279	89.8%
75 - 79	2,002	10.9%	16,296	89.1%
80 - 84	1,732	12.9%	11,653	87.1%
85+	2,020	16.5%	10,227	83.5%
Total aged 65 and over	10,896	11.6%	82,821	88.4%

50+ WHO IS RECEIVING HELP AND WHAT SUPPORT IS AVAILABLE?

There are a total of 11 GP clusters in Western Bay/ABMU Health Board and a total of 77 GP practices.

Age Group	Age Group	Age Group
Bridgend	19	153,480
Neath Port Talbot	23	138,130
Swansea	35	250,540
ABMU Health Board Total	77	542,150

▲ Table Produced by Public Health Wales Observatory, using WDS (NWIS) *Rounded to the nearest 10 for ease of reading

Of the 542,150 people registered with a GP in the ABMU Health Board area, 28.3% are registered in Bridgend, 25.5% in Neath Port Talbot and 46.2% are registered with a GP in Swansea. So although there are more practices in Neath Port Talbot than in Bridgend, more people are registered with a GP in Bridgend than in Neath Port Talbot.

MENTAL HEALTH SERVICES

Across Western Bay services for older people with mental health problems are generally provided for those over the age of 65, though the service provided is needs led and younger people can also access the service. Services are provided in hospitals and community settings. Inpatient services are provided in general and community hospitals in Bridgend, Neath Port Talbot and Swansea, these services include:

- Assessment and admission – provided at Princess of Wales Hospital (Bridgend), Neath Port Talbot Hospital, Tonna Hospital (NPT) and Cefn Coed Hospital (Swansea).
- Continuing care and respite – provided at Glanrhyd Hospital (Bridgend), Maesteg Community Hospital (Bridgend), Neath Port Talbot Hospital, Tonna Hospital, the Croeserw Centre (NPT), Cefn Coed Hospital and Garngoch Hospital (Swansea),

THE NUMBER OF ADULTS AGED 65 AND OVER RECEIVING MENTAL HEALTH SERVICES (WHOLE YEAR)

50+	2012 - 2013	2013 - 2014	2014 - 2015
Bridgend	425	432	370
Neath Port Talbot	69	92	102
Swansea	181	423	471
Western Bay	675	947	943

The number of adults aged 65 and over receiving mental health services in Neath Port Talbot is increasing gradually over time but in comparison to other local authorities in Wales and at 3.63 per 1,000 population is still very low and is well below the Wales average, 13.12 per 1,000.

MENTAL HEALTH SERVICES

Community based services include rehabilitative/intermediate care services and are provided to patients, generally older people, to help them avoid going into hospital unnecessarily. These services help people stay as independent as possible after discharge from hospital and prevent them having to move into residential or nursing homes until they really need to.

The Community Resource Team (CRT) services have developed, as part of the best model for intermediate care across Western Bay. The scheme aims to ensure high quality, consistent services to and responsive services to older people across the region.

▼ TOTAL NUMBER OF PEOPLE AGED 65 AND OVER SUPPORTED BY SOCIAL SERVICES IN THE COMMUNITY

50+	2006 - 7	2007 - 8	2008 - 9	2009 - 10	2010 - 11	2011 - 12	2012 - 13	2013 - 14	2014 - 15
Bridgend	2,635	2,330	2,376	2,650	3,155	3,112	3,077	3,190	3,202
Neath Port Talbot	3,226	3,060	2,827	2,814	3,520	3,789	3,860	4,154	3,967
Swansea	5,116	4,462	4,468	5,048	4,246	3,958	4,340	4,010	3,750
Western Bay Total	10,977	9,852	9,671	10,512	10,921	10,859	11,277	11,354	10,919

HOME CARE

TOTAL NUMBER OF PEOPLE AGED 65 AND OVER SUPPORTED BY SOCIAL SERVICES IN THE COMMUNITY

50+	2006 - 7	2007 - 8	2008 - 9	2009 - 10	2010 - 11	2011 - 12	2012 - 13	2013 - 14	2014 - 15
Bridgend	1,444	1,112	1,152	1,219	1,413	1,452	1,521	1,779	1,974
Neath Port Talbot	2,478	1,291	1,240	1,249	1,227	1,416	1,442	1,362	1,332
Swansea	1,630	1,889	2,395	3,116	2,703	2,129	2,271	2,612	2,634
Western Bay Total	5,552	4,292	4,787	5,584	5,343	4,997	5,234	5,753	5,940

Across Western Bay Care Assistants provide paid support to those in need of assistance with day to day living, this is known as Homecare. In line with the general increase in the provision of community based services, the number of people receiving Homecare is also increasing each year.

RESIDENTIAL SERVICES

It is expected that due to an increase in intermediate care services in the community, individuals are more likely to go into residential care later in life with more complex needs and require additional services and more care than in previous generations. Therefore, although the number of residential placements is indicated to rise due to the ageing population there is an expectation that these placements will be for a shorter period and will be in nursing/dementia care rather than ‘traditional’ residential care.

TOTAL NUMBER OF PEOPLE AGED 65 AND OVER SUPPORTED BY SOCIAL SERVICES IN THE COMMUNITY

50+	2006 - 7	2007 - 8	2008 - 9	2009 - 10	2010 - 11	2011 - 12	2012 - 13	2013 - 14	2014 - 15
Bridgend	862	593	567	581	726	716	718	698	693
Neath Port Talbot	976	932	971	666	997	860	1,003	913	891
Swansea	1,430	1,257	1,313	1,382	1,416	1,416	1,477	1,490	1,299
Western Bay Total	3,268	2,782	2,851	2,629	3,139	2,992	3,198	3,101	2,883

Although the number of older people in residential/nursing care continues to decrease in Western Bay , numbers remain higher than average in Swansea.

DAY CARE

TOTAL NUMBER OF PEOPLE AGED 65 AND OVER SUPPORTED BY SOCIAL SERVICES IN THE COMMUNITY

50+	2006 - 7	2007 - 8	2008 - 9	2009 - 10	2010 - 11	2011 - 12	2012 - 13	2013 - 14	2014 - 15
Bridgend	486	359	324	304	312	277	281	251	247
Neath Port Talbot	1,230	718	608	516	522	489	486	471	622
Swansea	736	836	1,015	986	956	984	983	904	702
Western Bay Total	2,452	1,913	1,947	1,806	1,790	1,750	1,750	1,626	1,571

Day services will continue to be delivered across Western Bay but the way these services are delivered will change to be based on assessed, eligible need as opposed to disability or age specific service provision. Following a public consultation older person day service buildings in Neath Port Talbot have been closed.

The move from a traditional building based day service model to an integrated community service model has seen staff becoming peripatetic community workers rather than day centre staff. Day service users are encouraged to use all resources in their communities to meet their needs. It is intended that this approach will reduce reliance on directly provided services.

REABLEMENT SERVICES

The Reablement Team delivers a programme of assessment and therapy to enable people, as far as possible, to regain their skills and independence together with providing an appropriate level of support with day to day needs. The service can be delivered in community settings, such as the home of the individual or in residential care settings.

As at 31st March 2015, a total of 837 people aged 18+ received reablement services in Western Bay. The table below shows the breakdown of those aged 65 and over receiving reablement services as at 31st March 2015:

50+	Community Based Reablement		Residential Reablement		Total	
	18-64	65+	18-64	65+	18-64	65+
Bridgend	13	95	0	5	13	100
Neath Port Talbot	59	191	1	17	60	208
Swansea	12	234	28		456	
Western Bay Total	84	520	233		837	

The age breakdown for those in receipt of residential reablement in Swansea is not available.

There is a residential reablement provision in each local authority area that is currently providing a stepping stone from a period of crisis before returning to their own home by facilitating earlier discharge from hospital and preventing avoidable admission to acute hospital care or long term residential or nursing care. However, residential reablement is only a small part of the service provided, most reablement services are provided in people's homes.

It also aims to reduce the need for complex packages of domiciliary care. The units are attended by a group of therapists including occupational therapists, physiotherapists and nurse practitioners that provides therapies and health care to the residents on a short term basis to ensure they are able to return to their optimal level of independence as soon as possible. The service provides ongoing multi-disciplinary assessment and reablement programmes with 24 hour support over an agreed period of up to six weeks.

As part of the development of the model of intermediate care in Western Bay, each local authority has developed its own system to improve access to adult social services. In Bridgend a single point of access has been developed known as the Common Access Point. In Neath Port Talbot a single point of access system is also in place known as the Gateway. However, in Swansea there are three integrated hubs operating across the city jointly staffed by adult social services and NHS colleagues providing care management, reablement services and NHS therapy.

Each local authority will be making grants available to adapt properties to help people remain at home. Assistive technologies will be deployed more effectively, for example most older people receiving support will have access to Lifeline technology.

DIRECT PAYMENTS

▼ TOTAL NUMBER OF PEOPLE AGED 65+ RECEIVING DIRECT PAYMENTS

50+	2006 - 7	2007 - 8	2008 - 9	2009 - 10	2010 - 11	2011 - 12	2012 - 13	2013 - 14	2014 - 15
Bridgend	2	3	6	10	12	17	19	25	26
Neath Port Talbot	40	38	37	51	50	48	61	69	69
Swansea	7	19	30	40	50	59	74	100	127
Western Bay Total	49	60	73	101	112	124	154	194	222

Direct payments are cash payments given by the council to people who have assessed social care needs to give them more choice about the type of assistance they receive. They can be used to buy:

- Support with personal care and daily living tasks
- Support to get out and about in the community
- Support to maximise your independence, health, wellbeing and safety
- Pay for long-term residential placements
- To pay to employ a personal assistant

PALLIATIVE AND END OF LIFE CARE

Palliative care is for people living with a terminal illness where a cure is no longer possible. There are three main specialist palliative care facilities that care for people with cancer in Western Bay:

- ▶ Y Bwthyn Newydd hospice at Princess of Wales Hospital in Bridgend
- ▶ Y Rhosyn cancer support day unit at Neath Port Talbot Hospital
- ▶ Tŷ Olwen hospice on the site of Morriston Hospital in Swansea

As part of community nursing services there is a team who support people who have been determined to have continuing care needs which have been commissioned in partnership with Marie Curie Care, that supports the core district nursing service to provide end of life care in the place of choice.

50+ THINGS PEOPLE TOLD US THAT MATTER TO THEM

● Intermediate care service users

- Ensure there is support to enable carers to ‘take a break’
- Provide support at times convenient for the service users / carers
- On-going communication about their progress is helpful

● Community

- Provide a single point of access for information which identifies local community services and financial matters
- Provide opportunities to meet with friends and join in community activities to help maintain social networks and to support independence
- Services in the local community are highly valued such as post offices and libraries

● Other

- A choice of housing that meets the needs of independent living is valued
 - Better public transport that is designed to meet the needs of users
 - The availability of public lavatories help to support independence
 - Ensuring there is support to enable carers to ‘take a break’
-

50+ WHAT CHANGES DO WE HAVE TO PLAN FOR?

The Care Homes Commissioning sub group of Western Bay Health and Social Care Partnership have identified a series of commissioning priorities over the next ten years:

- Develop strong relationships with existing care home providers to support them to meet the changing needs of our population with high quality services.
 - Work strategically with new care home providers to develop a sustainable range of care home facilities across the region.
 - Where care home services are not in line with our strategic approach and/or are not of adequate quality, the partnership will seek to decommission these.
-

Evidence suggests a need to acknowledge the detrimental effect loneliness and social isolation can have on the health of older people. Consideration should be given to the development of services that enhance community cohesion and promote the social capital of the communities in Western Bay.

There is an urgent need to develop a collaborative approach to the support of families living with the effects of dementia. There is a need to develop services that support people to live independently for as long as possible with dementia and when people require care and support it is delivered in a timely manner and proportionate to their needs. There is also a need to develop 'Dementia Friendly' communities which will increase community based support for people living with dementia.

The population of older adults is expected to increase by 8% by 2030. The data indicates that you are more likely to be in core health and social care services when you get older. Continued investment in early intervention and prevention services to support people to remain independent as long as possible is vital. It is inevitable that those requiring managed care and support services, will as a result of these interventions have higher and more complex levels of need managed in their own homes. There is an urgent requirement to complete an impact assessment of the rebalancing of care from secondary to community services and the impact on core services of a growing and ageing population.

The ABMU Health Board Joint Strategic Needs Assessment makes a number of recommendations to reduce the inequalities in the treatment of older adults:

- Offer universal services, with a focus on those most in need
- Focus on using existing community assets and co-producing services
- Promote measures to increase social interaction and participation in community activities
- The use of social marketing approaches to maximise lifestyle behaviour changes among target groups, including improving the uptake of existing prevention initiatives.
- Improve accessibility of services (such as location and accessibility of primary health care and other core services, improving transport links, housing and affordability of healthy food).

There is a need to bridge the gap between the resources available and the expected year on year rises in social care demand and costs. In many areas of work, demand is increasing while capacity remains the same or in some cases has been reduced. The table below illustrates the extent of the pressure that is being experienced by our three partner local authorities, each of which must make considerable savings over the next three years.

Local Authority	Total Savings to be achieved over 3 years	Savings to be achieved in adult social care over 3 years
Bridgend	£49 Million	£7 Million
Neath Port Talbot	£37 Million	£4.7 Million
Swansea	£82 Million	£13.1 Million
Western Bay	£168 Million	£24.8 Million

Continue to progress the remodelling of day services/day opportunities away from traditional building based services to integrated community services maximising the use of community assets.

Ensure services bought using Direct Payments meet the assessed needs and wellbeing outcomes of those buying the services and ensure that the average value of support packages funded by Direct Payments is proportionate to identified needs (right sizing).

A need has been identified to develop a whole life pathway so that people have a choice, voice and control about how and where their care is provided.

The ongoing development and implementation of a comprehensive information, advice and assistance services and a resource directory.

Better co-ordination of assistive technology services, including mobile response services, to ensure an increase in referrals to assistive technology services, a preventative service which is critical to ensure people can remain safe and healthy at home. There is currently no telecare service being provided in Swansea.

Further work needs to be undertaken to fully understand the contribution older people make to Western Bay society.

If current trends continue, the number of people living with chronic conditions will increase, with people living longer and developing more than one chronic condition future demand on public services will be challenging.

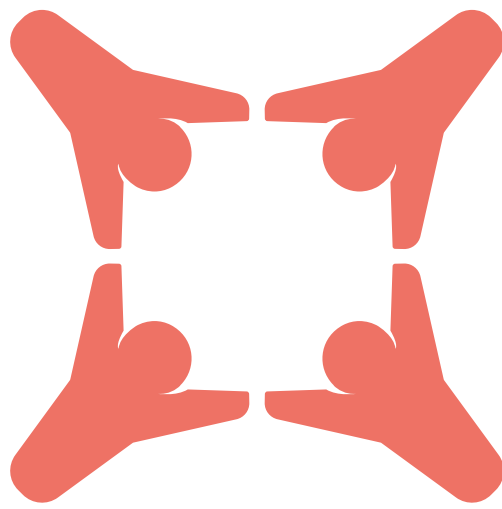
The older people population growth will ultimately have an impact on unpaid carers and in particular carers over the age of 65 some of whom will probably, in older age be living with either a long term illness or chronic illness themselves. It is therefore imperative that public services in Western Bay provide the necessary support and short breaks and respite services to carers in particular, those over the age of 65 to ensure that they are supported and able to maintain their unpaid caring roles, otherwise this will potentially have a detrimental effect on demand for more formal and costly care services in the future.

▼ FURTHER WORK REQUIRED

In addition to identifying trends in data across the region the assessment also highlights a number of gaps and areas where further research is required to gain a better understanding of the older population of Western Bay.

The data and evidence of the current and future needs of older people with protected characteristics living in Western Bay is currently an unknown area. There are many minority groups that we are currently unable to report on, including Welsh speakers. Further research is needed to ensure we meet the needs of our growing minority groups.

There is clear links between loneliness and poor mental and physical health. Tackling loneliness and social isolation will lead to improved health and well-being. There are many studies that demonstrate how loneliness and social isolation can lead to number of physical and mental health problem, including: depressive symptoms, and increased risk of premature mortality. In Western Bay we have no hard evidence of the number of older people who are feeling lonely or socially isolated. This is another area where further research is needed.



WESTERN BAY

POPULATION ASSESSMENT REPORT

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