

Needs Analysis for Older People in Oxfordshire 2018

Introduction

This Needs Analysis focuses on the older population of Oxfordshire, and the factors affecting older people's health, wellbeing, and social care needs.

The report is organised under the following broad theme headings:

- **Population and population groups (chapters 2 and 3)**
The number of older people living in Oxfordshire and how this is expected to change.
- **Wider determinants of health (chapter 4)**
Factors with known links with health and wellbeing of older people, such as income, deprivation and the physical and social environment.
- **Health conditions and causes of death (chapter 5)**
The number of older people with diseases and long-term conditions, and the main causes of death.
- **Lifestyles (chapter 6)**
Lifestyle behaviours and characteristics, such as smoking, drinking, drug use, and obesity.
- **Service use (chapter 7)**
The number of older people receiving health, social care and other services. Older people in contact with community safety services (police, fire, trading standards).

This report draws on evidence presented in the main Joint Strategic Needs Assessment, last updated April 2018, and has been made possible through invaluable contributions, advice and guidance of the JSNA Steering Group and the many experts and data analysts in Oxfordshire's local authorities, health services, police and voluntary organisations.

October 2018 v2

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1 Executive Summary

This section summarises key findings from the Needs Analysis for Older People report. Sources are included in footnotes throughout the relevant sections of the report.

Older people in Oxfordshire - in numbers

121,000 residents aged 65+ (up from 88,100 in 2001; +37%). Includes 17,000 people aged over 85	<i>ONS 2016 mye</i>
50,300 people aged 65+ (42%) live in rural areas	<i>ONS 2016 population by LSOA, urban-rural classification ONS by LSOA</i>
6% of people aged 65+ are from ethnic minority groups	<i>Census 2011 ONS (all other than white British)</i>
13,500 of 65+ affected by income deprivation 68% of income deprivation in 65+ is in urban areas	<i>IMD2015</i>
10,750 claiming pension credit	<i>Aug17 DWP from nomis</i>
An estimated 6,500 to 7,500 are not claiming pension credit	<i>County Council estimate</i>
60% fund their own care	<i>County Council estimate</i>
30,000 live alone (people aged 65+) Of which.. 10,800 living alone in rural areas	<i>Census 2011 ONS</i>
An estimated 20,400 older people in Oxfordshire (aged 65+) experience loneliness at least some of the time, of which 3,500 older people experience loneliness "often/always".	<i>Estimate from Community Life survey</i>
8,300 living with dementia (5,600 diagnosed)	<i>Diagnosed from QOF 2017-18 and PH diagnosis rate</i>
44,500 people aged 65+ living with life limiting long term health condition or disability	<i>Census 2011 ONS (activities limited a little or a lot)</i>
5,800 people aged 65+ provide more than 20 hours unpaid care each week	<i>Census 2011 ONS</i>
10,600 receive long term social care services (at home or in a care home)	<i>County Council estimate</i>
43% of men and 56% of women aged over 75 (UK) have never used the internet (an estimated 28,700 people aged 75+ in Oxfordshire)	<i>ONS 2018</i>

Please note that more detailed and additional findings are in the main body of the report.

A growing older population

- The older population of Oxfordshire has been increasing at above the South East and England rate.
- Oxfordshire County Council forecasts predict a continuation of this ageing trend.
 - By 2031, there are expected to be 174,400 people aged 65+ living in Oxfordshire, up from 121,000 in mid-2016 (+53,500, 44%).
 - The number of people in the oldest age group (85+) in Oxfordshire is expected to increase from 17,000 in 2016 to 26,500 in 2031 (+9,400, 55%).
- Rural areas of Oxfordshire have higher rates of older people.
- At age 65, males have an average 19.7 years life expectancy in Oxfordshire and females have 21.9 years. Of this, an estimated 8.5 years for males and 8.2 years for females in Oxfordshire are expected to be spent in poor health.
- Life expectancy has increased overall in Oxfordshire for both men and women. It appears that the LE gains for men has been in the more affluent areas.
- 6% of the population aged 65+ in Oxfordshire (2011) were from an ethnic minority background, this was below the England average of 8%. In Oxford City, 16% of the older population aged 65+ was from an ethnic minority group.
- A third of Oxfordshire's unpaid carers providing 20 or more hours per week of unpaid care were aged 65 and over (2011; count=5,800).
- The Carers survey shows 37% of those aged 70 to 79 had to see their own GP because of their caring role.

Older people contributing to the economy

- The majority of the increase in (all) employed residents in Oxfordshire between 2001 and 2011 was in the age group 50+ and the largest additional number were females aged 50 to 64.
- More recent data shows a higher proportion of the older population (aged 50+) engaged in the workforce in Oxfordshire than average.
- There appears to be an increasing number of economically active people aged 65 and over, however the differences are not statistically significant.
- A higher than average proportion of unemployment claimants in Oxfordshire were older people aged 50+.
- Overall there has been an increase in pension income and a shift towards private sources especially for younger pensioners.
- According to the Income Deprivation Affecting Older People supplementary index, 13,500 older people in Oxfordshire were affected by income deprivation, 68% of whom were living in urban areas and 32% in rural Oxfordshire.

- There has been a decline in the number of claimants of pension credit in Oxfordshire from 17,710 at the peak in November 2016 to 10,750 in August 2017.
- Using national estimates of take-up of pension credit, it is estimated that over 6,000 people in Oxfordshire are entitled to pension credit but are not claiming.

Physical and social environment for older people

- In 2011, there were 29,900 people aged 65+ living alone in households Oxfordshire, below the regional and national averages. The proportion of older men and women living alone were each above average in Oxford City.
- The latest house condition surveys in Oxfordshire show that overall housing conditions (all hazards) in Cherwell, Oxford City and West Oxfordshire are each better than the national average.
- Between 2015 and 2016, the number of households estimated to be in fuel poverty declined by 2,000 households in Oxfordshire to a total of 23,900 (down from 25,900 in 2015).
- At the time of the Census 2011 survey, a relatively high proportion of older people in Oxfordshire had access to a private vehicle. There were 14,700 older people living alone without a car.
- Using national prevalence rates from the Community Life Survey it is estimated that 20,400 older people in Oxfordshire (aged 65+) experience loneliness at least some of the time, of which 3,500 older people experience loneliness “often/always”.

Health and wellbeing generally better than average

- The Public Health England profile of Older People’s Health and Wellbeing for Oxfordshire shows that, overall, Oxfordshire is statistically better than or similar to the national average.
- ONS wellbeing data shows that, for the UK, the main challenges for older people are lower satisfaction with their health and lower engagement with an art or cultural activity.
- For all three of the main causes of death in people aged 65 and over (Cancer, Cardiovascular disease and Respiratory disease), Oxfordshire has a significantly better rate than England and South East Region.
- National data shows older people significantly more likely to be overweight or obese.
- National data shows that inactivity levels generally increase with age, but the sharpest increase comes between ages 75 and 84 (48%) and age 85+ (71%).
- In Oxfordshire 5,600 people are known to have dementia (2017-18), with a further 2,700 who are estimated to be living with undiagnosed dementia, a total of 8,300. Based on forecast population growth, this may reach 12,000 people by 2031.
- Admission episodes for alcohol-related conditions in Oxfordshire continue to be highest in the age group 65 and over. The latest data for 2016-17 shows an increase in alcohol-related admissions for males aged 65+ in Oxfordshire.

- In Oxfordshire in 2017, Thames Valley Police recorded a total of 1,534 victims of domestic abuse crime and incidents aged 50 to 64 and 448 victims aged 65 and over.
 - Between 2016 and 2017 the greatest percentage increase by broad age was in the older age group 50-64 (+8%).

Use of health and social care and access to services

- Care Quality Commission analysis shows that from mid-2016 to mid-2017 Oxfordshire NHS Acute staff turnover for nursing & midwifery staff, other clinical and non-clinical staff was well above the England average.
- National data suggests that the number of primary care consultations per patient per year has increased significantly, especially in the older age groups.
- In 2016-17 there was around 51,700 inpatient spells for Oxfordshire residents aged 65 and over, of which around 12,000 were people aged 85+. Inpatient spells for the people aged 85+ may reach 18,400 by 2031.
- There was a total of 32,100 ambulance trips in 2016-17 matched to A&E or inpatient records for Oxfordshire residents. The top condition/complaint was falls, accounting for 3,600 ambulance trips, 11% of the total.
- According to Public Health England data, in 2016-17 there was a total of 2,683 emergency hospital admissions due to falls in Oxfordshire for people aged 65 and over of which the majority (1,850, 69%) were admissions for people aged 80 and over.
- Almost two thirds (64%) of Oxfordshire CCG's complex patients are aged over 65+. The proportion aged 65 to 79 was above average of 10 similar CCGs.
- Between May 2017 and May 2018, the number of Delayed Transfer Of Care Beds (delayed days divided by calendar days) for Oxfordshire patients reduced by a half, from 198 to 99.
- In 2016-17, a total of 2,028 adults in Oxfordshire were provided with reablement services by Oxfordshire County Council. This was below the number in 2015-16 (2,217, -9%).
- As of March 2017, 1,900 people aged 85 and over (equivalent to 11% of the population aged 85+ in Oxfordshire) was receiving long-term social care services provided by Oxfordshire County Council. This may reach 2,900 people by 2031.
- There has been an increase in the proportion of older social care clients supported at home, from 44% of older clients in 2012 to 59% in 2017.
- Oxfordshire County Council estimates that: of the total number of older people receiving care in Oxfordshire, 40% (4,200) are being supported by the County Council or NHS funding and 60% (6,300) are self-funding their care.
- The rate of care home beds for older people per population aged 65+ in Oxfordshire was 41.9 per 1,000 people, similar to the national average and 6th highest out of Oxfordshire's set of 16 statistical neighbours.
- Areas classified as 2 miles or more from a GP surgery in rural districts in Oxfordshire covered 28,800 people aged 65 and over (34% of the older population in rural districts).

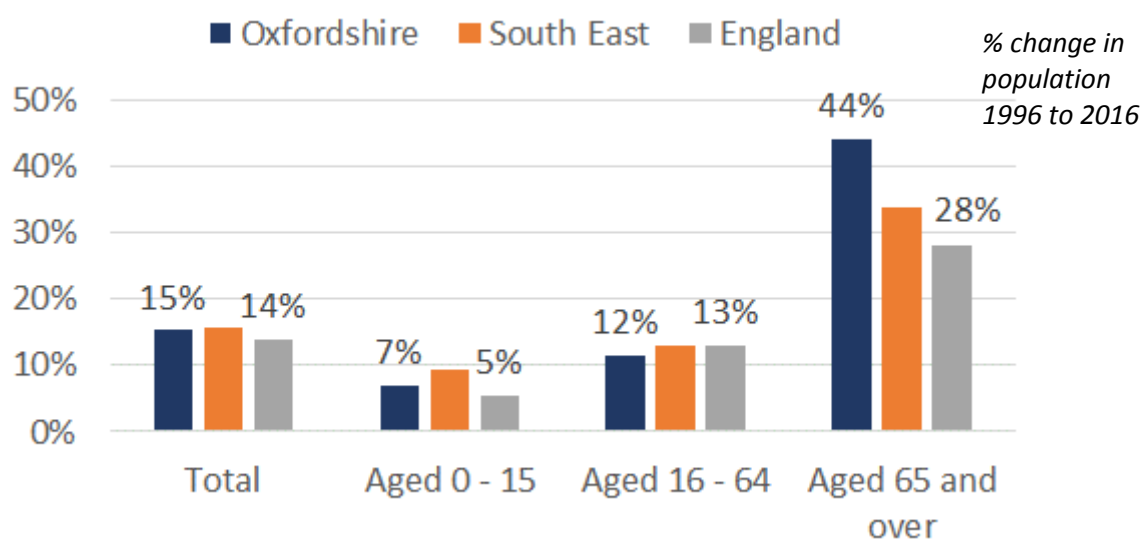
2 The Older Population

2.1 Change in the number of older people

The number of older people living in Oxfordshire has been increasing at above the South East and England rate.

- Between 1996 and 2016, the population aged 65+ in Oxfordshire increased from 83,900 to 121,000 (+37,100). This was an increase of 44%, well above the growth of this age group in the South East (34%) and England (28%).

Figure 1 Percentage change in population by broad age band between 1996 and 2016 (20 years)



Source: ONS mid-year estimates (revised 2016 estimates)

The latest Oxfordshire County Council population forecasts, predict an increase in the number of Oxfordshire residents of +186,500 people (+27%) between 2016 and 2031.

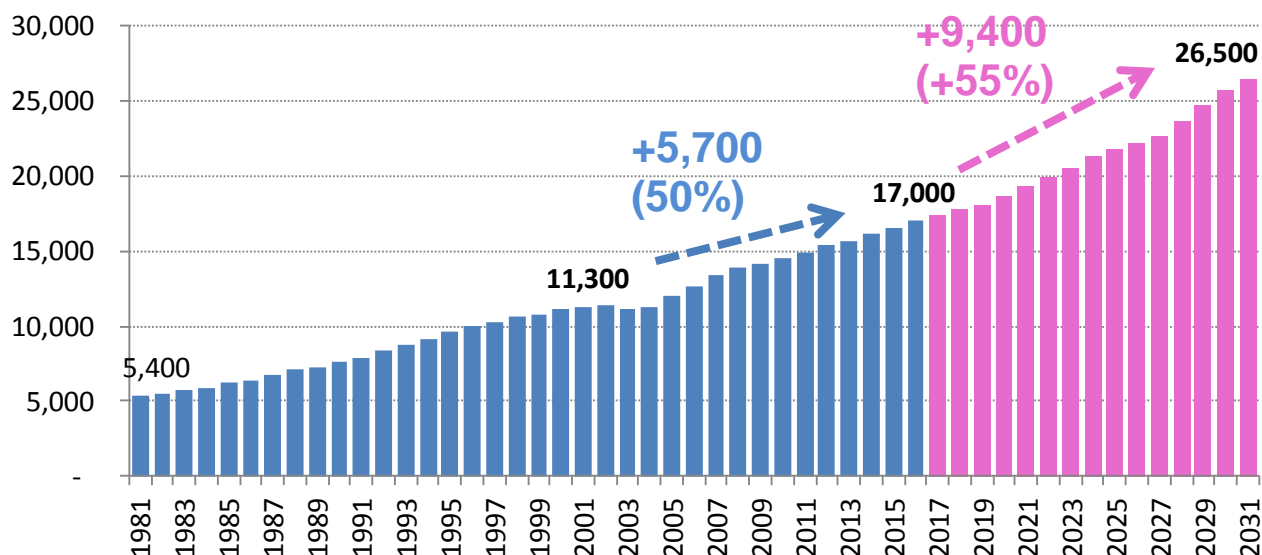
The older age group 65+ in Oxfordshire is expected to increase from 121,000 in 2016 to 174,400 in 2031 (+53,500, 44%), well above the predicted growth in the number of children and young people aged 0-17 (24%).

Predicted growth of the oldest age group (85+)

Between 2001 and 2016 the number of people aged 85 and over, living in Oxfordshire, increased from 11,300 to 17,000, a growth of 50%.

Between 2016 and 2031, Oxfordshire County Council predicts this age group will increase by a further 9,400 people to 26,500 (+55%).

Figure 2 Historical and forecast number of people aged 85 and over living in Oxfordshire



Sources: ONS mid-year population estimates; Oxfordshire County Council population forecasts (revised Apr18); totals may not sum due to rounding

Each district in Oxfordshire is predicted an increase in the number of people aged 85 and over. The district expected to see the greatest percentage increase (+66%) is Vale of White Horse, followed by South Oxfordshire (+64%).

Table 1 Historical and projected number of people aged 85 and over, Oxfordshire districts (2001 to 2016 and 2016 to 2031)

	ONS mid-year estimates			OCC projection	
	2001	2016	2001 to 2016	2031	2016 to 2031
Cherwell	2,200	3,400	1,300	5,400	1,900 56%
Oxford	2,500	2,900	400	3,600	700 26%
South Oxfordshire	2,600	3,900	1,300	6,300	2,500 64%
Vale of White Horse	2,100	3,600	1,500	6,000	2,400 66%
West Oxfordshire	2,000	3,300	1,200	5,200	1,900 59%
Oxfordshire	11,300	17,100	5,800	26,500	9,400 55%

Sources: ONS mid-year population estimates; Oxfordshire County Council population forecasts (revised Apr18); totals may not sum due to rounding

Oxfordshire's wards with the highest proportion of people aged 85+ are in rural areas of Vale of White Horse, South and West Oxfordshire.

A proportion of the older age group will be resident in a local care home. In Cumnor ward, for example, there were an estimated 276 residents aged 85+ (mid 2016) and 205 care home beds for older people.

Table 2 Wards in Oxfordshire with the highest proportion of people aged 85+ and count of care home beds

Local Authority	Ward Name	People aged 85+ (mid 2016)	All Ages	85+ as % of population	Care home beds for older people (Apr18)
Vale of White Horse	Ridgeway	227	3,186	7.1%	53
South Oxfordshire	Goring	247	3,793	6.5%	77
West Oxfordshire	Burford	111	2,004	5.5%	39
West Oxfordshire	Woodstock and Bladon	195	4,183	4.7%	46
South Oxfordshire	Sonning Common	334	7,348	4.5%	128
West Oxfordshire	Brize Norton and Shilton	99	2,289	4.3%	51
Vale of White Horse	Cumnor	276	6,403	4.3%	205
South Oxfordshire	Henley-on-Thames	504	11,771	4.3%	119
West Oxfordshire	Ascott and Shipton	85	1,999	4.3%	99
Vale of White Horse	Wantage Charlton	282	6,788	4.2%	166

Source: ONS 2016 mid year population estimates; CQC directory 3 April 2018

Six wards in Oxfordshire have more people aged 50 and over than people aged 0-49: Burford; Goring; Cropredy, Sibfords & Wroxton; Ascott & Shipton; Ridgeway; North Leigh.

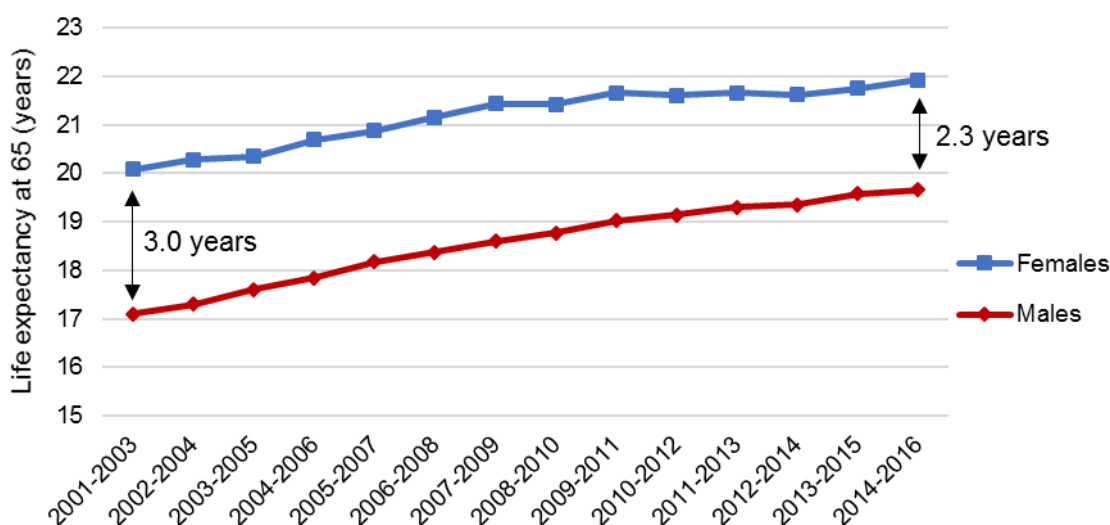
2.2 Life Expectancy at age 65

The most recent set of 3-year data for Life Expectancy at 65 years¹ shows that, between 2013-15 and 2014-16, Life Expectancy for males and females in Oxfordshire each increased. This was similar to the trend in Life Expectancy at birth.

- Male Life Expectancy at 65 increased from 19.6 to 19.7 (+0.1 years).
- Female Life Expectancy at 65 increased from 21.7 to 21.9 (+0.2 years).

Between 2001-03 and 2014-16, the gap between male and female Life Expectancy at age 65 in Oxfordshire decreased from 3.0 to 2.3 years.

Figure 3 Change in Life Expectancy at 65 in Oxfordshire – males and females to 2014-16



Source: ONS Figures are based on the number of deaths registered and mid-year population estimates, aggregated over 3 consecutive years. Note that scale does not start at 0

Inequality in Life Expectancy gains

As reported by the main 2018 Oxfordshire JSNA², ONS data on changes in life expectancy at 65 by socio-economic group³ (national data) shows a significant increase in life expectancy of professional males – above the gains for all groups of females and most of the other male socio-economic groups.

The gap in Life Expectancy at birth for males between the relatively affluent North ward and less affluent ward of Northfield Brook (each in Oxford) has increased.

- The gap in male life expectancy between these two wards has increased from 4 years in 2003-07 to 15 years in 2011-15.
- Female life expectancy in these wards has remained at similar levels with a gap of just over 10 years.

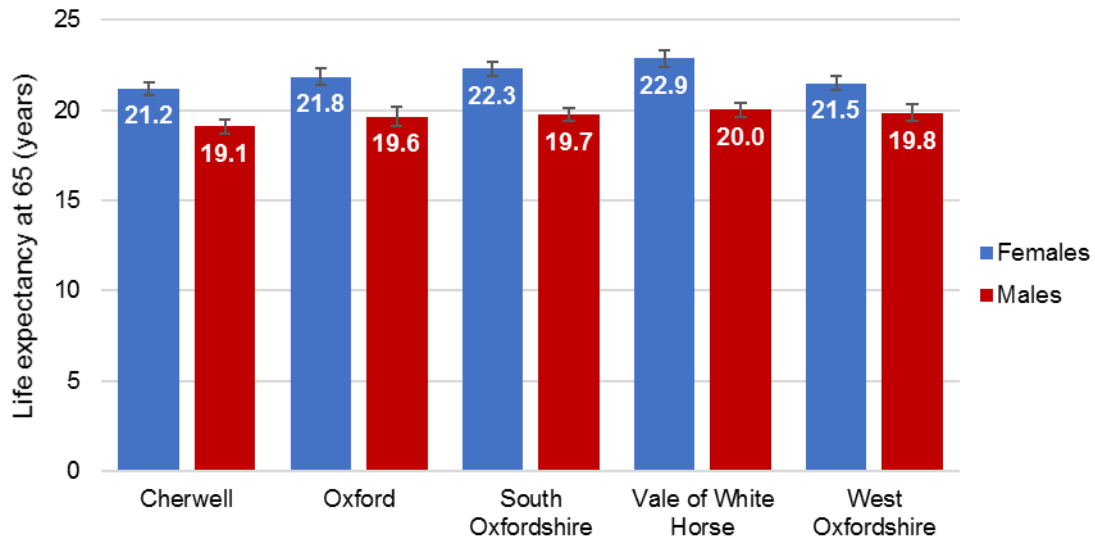
¹ Life expectancy at age 65 years old is the average number of years that a person at that age can be expected to live, assuming that age-specific mortality levels remain constant.

² <http://insight.oxfordshire.gov.uk/cms/joint-strategic-needs-assessment>

³ <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/bulletins/trendinlifeexpectancyatbirthandatage65bysocioeconomicpositionbasedonthenationalstatistics socioeconomic classificationenglandandwales/2015-10-21>

Within Oxfordshire's districts, the greatest difference between male and female life expectancy at 65 is in Vale of White Horse (2.9 years). The district with the narrowest difference is West Oxfordshire (1.7 years).

Figure 4 Life expectancy at 65 in Oxfordshire's districts, 2014-16



Source: ONS Figures are based on the number of deaths registered and mid-year population estimates, aggregated over 3 consecutive years. Note that scale does not start at 0

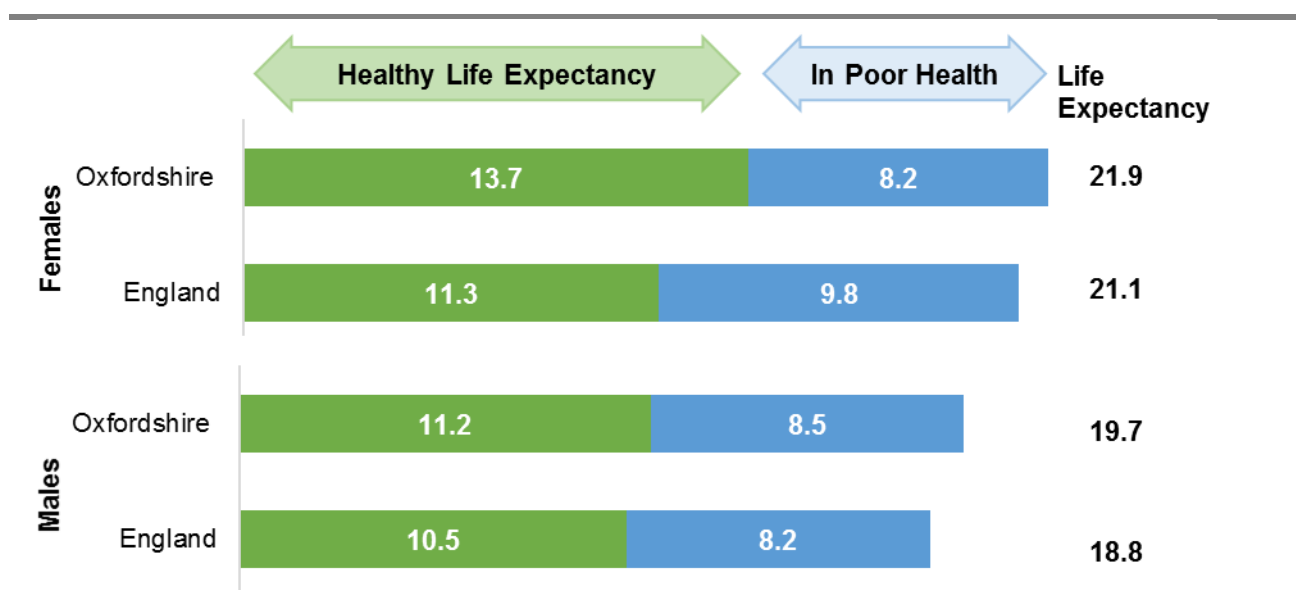
2.3 Healthy Life Expectancy at age 65

Healthy life expectancy (HLE) is an estimate of the number of years lived in “Very good” or “Good” general health from age 65, based on how individuals perceive their general health.

Life expectancy and healthy life expectancy for females at 65 in Oxfordshire are each (statistically) better than the England average. Healthy life expectancy for males at 65 is not statistically different from England.

An estimated 8.5 years for males and 8.2 years for females in Oxfordshire are expected to be spent in poor health.

Figure 5 Life expectancy and healthy life expectancy at 65 - 2014 to 2016, Oxfordshire and England (years)



Source: ONS; based on the number of deaths registered and mid-year population estimates, aggregated over 3 consecutive years. Confidence Intervals not shown

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/datasets/healthstatelifeexpectancyatbirthanddatage65bylocalareasuk>

Note that: Self-assessed general health data that is used in healthy life expectancy (HLE) calculation is from the Annual Population Survey (APS) and because of the sample size issue ONS cannot produce HLE lower than the upper tier local authorities.

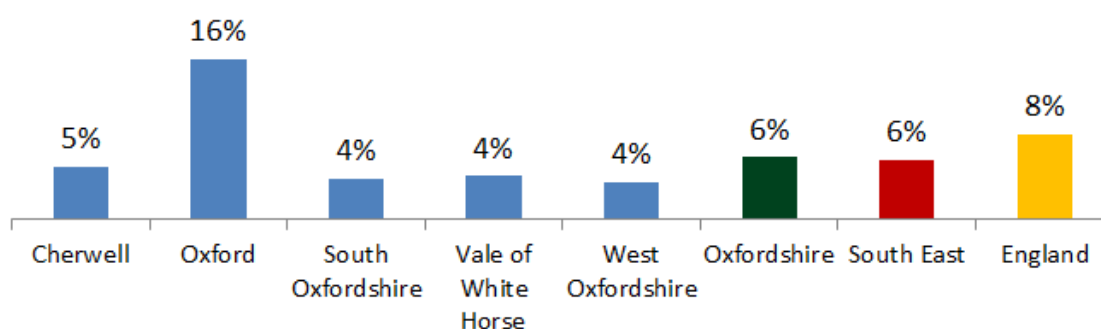
3 Population groups and equalities

3.1 Ethnicity and language

The Census 2011 survey remains the most detailed source of data on the age profile and health of the population by ethnic group.

There was a total of **6,369** older residents of Oxfordshire (aged 65+) from an ethnic minority background (other than white British) in 2011, equivalent to 6% of the population of Oxfordshire. This was below the England average of 8%. In Oxford City, 16% of the older population aged 65+ was from an ethnic minority group.

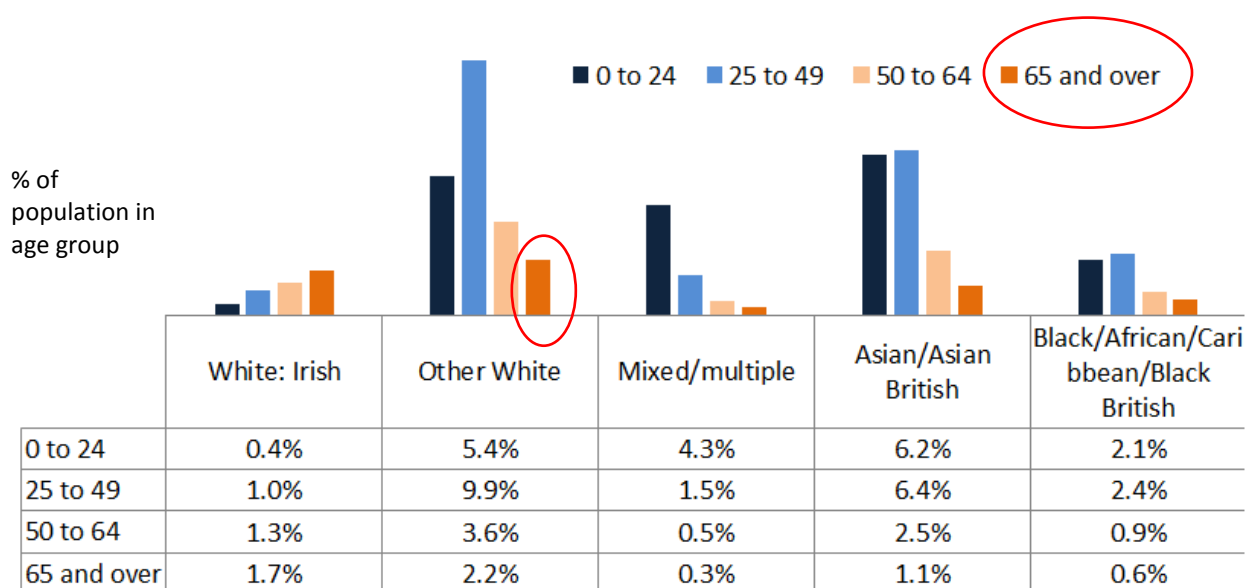
Figure 6 % of people aged 65+ from an ethnic minority background (2011)



Source: ONS Census 2011 table LC2101

The ethnic minority group with the largest number of people in the older population in Oxfordshire was 'other white' with 2,200 people aged 65 and over, followed by Irish (1,800).

Figure 7 Ethnic minority population groups by broad age – Oxfordshire (2011)



Source: ONS Census 2011 table LC2101

Language skills

Not being proficient in English can affect a person's ability to access health and other services.

At the time of the Census 2011 survey there was a total of 5,500 people in Oxfordshire who could not speak English or speak English well. **This included 556 people aged 65+.**

Religion and belief

As with ethnicity data, the Census 2011 survey remains the most detailed source of data on religion.

The Census showed that in Oxfordshire (as nationally) the older age groups were significantly more likely to identify themselves as Christian (83% Christian for those aged 75+ compared with 60% overall).

3.2 Sexual orientation

There remains very limited data on sexual orientation - those who identify themselves as heterosexual/straight, gay/lesbian, bisexual or another sexual orientation.

One indicator is the number of people in a same-sex registered partnership which for Oxfordshire in 2011 was around 1,400 people. This will be, however, a significant undercount of the total lesbian, gay or bisexual (LGB) population.

Using the proportion of LGB population by age from ONS experimental statistics on sexual identity⁴, it is estimated that there was a total of 11,100 people in Oxfordshire identifying as lesbian, gay or bisexual in 2016, up from 9,900 in 2015. **Of these, an estimated 900 were aged 65 and over.**

Table 3 Sexual orientation by age and estimate of total LGB population in Oxfordshire (using 2016 population estimates)

Age	Heterosexual or straight		Gay or lesbian		Bisexual		Other		Don't know or refuse	
	%	Oxon est	%	Oxon est	%	Oxon est	%	Oxon est	%	Oxon est
16-24	90.6	76,100	1.7	1,400	2.4	2,000	0.8	700	4.6	3,900
25-34	92.3	84,700	2	1,800	0.9	800	0.4	400	4.4	4,000
35-49	93.5	126,500	1.3	1,800	0.5	700	0.5	700	4.2	5,700
50-64	94.4	116,800	1	1,200	0.4	500	0.4	500	3.8	4,700
65+	94.8	114,700	0.4	500	0.3	400	0.5	600	4.1	5,000
TOTAL		518,800		6,700		4,400		2,800		23,200

Sources: ONS Sexual identity experimental estimates and ONS 2016 mid-year population estimate for Oxfordshire

⁴

<https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2016>

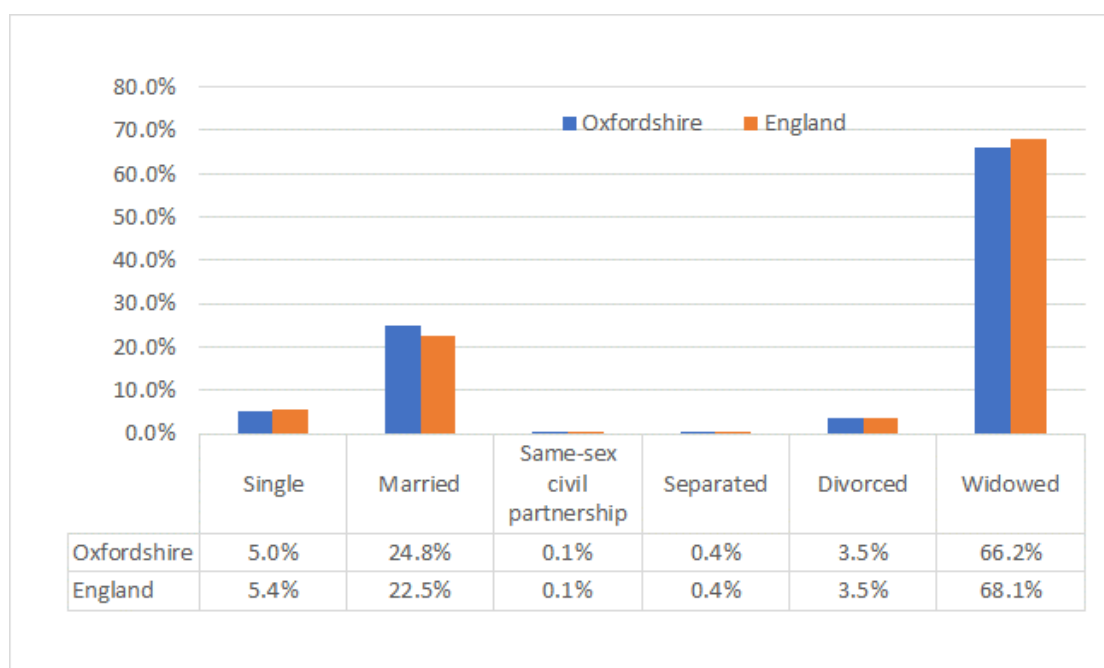
3.3 Marriage and civil partnership

At the time of the Census 2011 survey there were 128,400 married households in Oxfordshire and 682 households in a registered same-sex civil partnership.

The proportion of households married or in a same-sex civil partnership in Oxfordshire was above the rate for England in each age group.

People aged 85+ were slightly more likely to be married in Oxfordshire than in England.

Figure 8 Marital status of people aged 85+



The number of people who chose the marital status “widowed” in Oxfordshire declined between 2001 and 2011 in every age group with the exception of those aged 85+. This was similar to the national trend.

3.4 Disability

Family resources survey (national data)

The Family Resources Survey (FRS) for the UK in 2016-17 estimated that around 22% of the UK's population was disabled, experiencing physical, mental, cognitive, learning, social, behavioural or other types of impairment⁵. This was an increase of 1 percentage point on the previous year (2015-16).

The South East was slightly below the UK average at 19%. Applying this regional rate to Oxfordshire implies a total of **129,700** with a disability living in the county including an estimated **47,900** adults of state pension age.

This is well above the **84,600** people in Oxfordshire reported by the Census 2011 survey as having activities limited by health or disability⁶. The difference may be due to the definition (some impairments in the Family resources survey may not have been seen as "limiting" by people responding to the Census) or as a result of applying a UK prevalence rate or both.

The types of impairment reported in the FRS varied by age. Compared with other age groups pension age adults reported the highest proportion of physical impairments, especially mobility and stamina/breathing/fatigue.

Figure 9 Impairment types reported by disabled people, by age group, 2016-17, United Kingdom, percentage of disabled people

Impairment type	All disabled people	Working age adults	State Pension age adults	Children
Mobility	51	43	68	22
Stamina/ breathing/ fatigue	39	35	47	26
Dexterity	28	25	37	11
Mental health	24	36	8	22
Memory	17	16	19	11
Hearing	15	9	25	7
Vision	12	9	17	9
Learning	14	15	9	37
Social/behavioural	8	9	1	41
Other	15	17	13	17

Source: Family Resources Survey 2016-17. Totals will sum to over 100 per cent as respondents can report more than one impairment type. From 6 April 2010, the State Pension age for women has been gradually increasing.

Applying the FRS UK survey data to the population of Oxfordshire by age, gives the following estimate of the number of people by age and impairment in Oxfordshire (note that some people will have reported more than one impairment type).

⁵ <https://www.gov.uk/government/statistics/family-resources-survey-financial-year-201617>

⁶ ONS Census 2011 table KS301

Table 4 Estimate of number of people in Oxfordshire by impairment type and age from UK prevalence data (2016-17)

Impairment type	Working age adults (16-64)	State Pension age adults (65+)	Children (0-15)	TOTAL
Mobility	35,200	37,700	2,300	75,200
Stamina/ breathing/ fatigue	28,700	26,100	2,700	57,500
Dexterity	20,500	20,500	1,100	42,100
Mental health	29,500	4,400	2,300	36,200
Memory	13,100	10,500	1,100	24,700
Hearing	7,400	13,900	700	22,000
Vision	7,400	9,400	900	17,700
Learning	12,300	5,000	3,800	21,100
Social/behavioural	7,400	600	4,200	12,200
Other	13,900	7,200	1,700	22,800

Source: Estimate from Family Resources Survey 2016-17 and 2017 mid-year population estimate for Oxfordshire; some people will have reported more than one impairment type

Note that for the mental health category this method implies 36,200 people with this impairment which appears to be a significant underestimate. The number of people in the Oxfordshire Clinical Commissioning Group with diagnosed depression (alone – without including other mental health conditions) was around 56,800 in 2016-17.

People registered for a disabled parking badge (blue badge)

Oxfordshire County Council data on Blue Badge holders, as of October 2018, shows a total of 23,223 holders of blue badges for disabled parking of which **17,058** holders were aged 65 or over.

The rate per population aged 65+ of blue badge holders was similar in all districts in Oxfordshire at around 14%.

Table 5 Count and rate of Blue Badge holders for disabled parking for people aged 65+ (to October 2018)

	Blue Badges held by people aged 65+	Total population aged 65+	Rate per 65+ population
Cherwell	3,761	26,385	14.3%
Oxford	2,606	18,538	14.1%
South Oxfordshire	3,845	28,856	13.3%
Vale of White Horse	3,430	26,259	13.1%
West Oxfordshire	3,343	23,139	14.4%
Total mapped	16,985	123,177	13.8%
<i>Postcode not mapped</i>	<i>73</i>		
Oxfordshire TOTAL	17,058		

Source: Oxfordshire County Council as of 24 October 2018; ONS 2017 mid-year estimates, population aged 65+

Concessionary Bus Passes and Disabled & Companion Bus Passes

As of October 2018, there were 13,644 people aged 65+ in Oxfordshire holding Concessionary Bus Passes and 2,900 people aged 65+ holding Disabled and Companion Passes.

West Oxfordshire had the highest number and rate of Concessionary passes and Oxford City had the highest rate of Disabled & Companion passes.

Table 6 Concessionary Bus Passes and Disabled & Companion Passes (October 2018) for people aged 65+

	Concession	per 1,000 population	Disabled & Companion	per 1,000 population
Cherwell	2,220	84	404	15
Oxford	1,606	87	700	38
South Oxfordshire	2,382	83	257	9
Vale of White Horse	2,319	88	304	12
West Oxfordshire	5,117	221	403	17
TOTAL Oxfordshire	13,644	111	2,068	17

Sources: Oxfordshire County Council, ONS 2017 mid-year estimates, population aged 65+

Census 2011 data on disability

The Census 2011 survey remains the most in-depth assessment of (self-assessed) rates of ill health and disability at a local level.

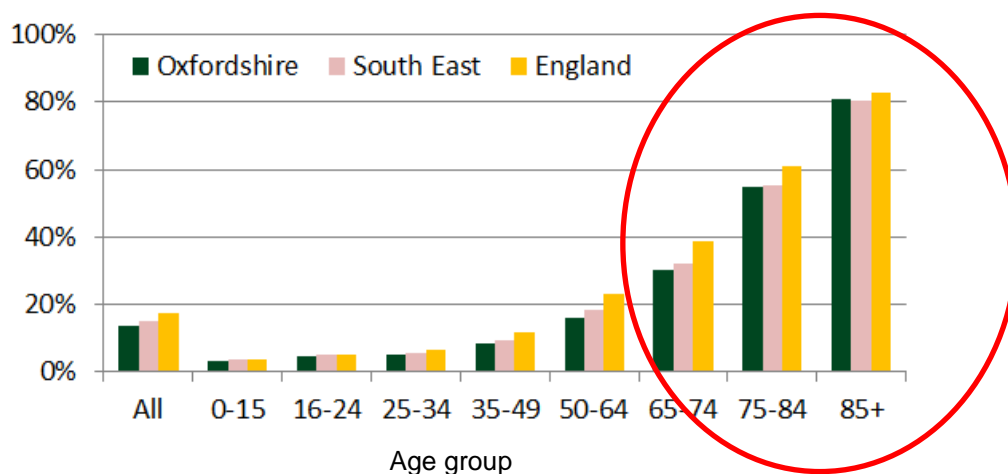
At the time of the 2011 Census, 84,860 people living in households in Oxfordshire (not including communal establishment residents) said they were limited in their daily activities, representing nearly one in seven people in the county (13.6%).

- By district the rates of people in households with daily activities limited by ill health varied slightly: Cherwell 13.8%; Oxford 13.0%; South Oxfordshire 13.3%; Vale of White Horse 13.9%; West Oxfordshire 13.9%.

Data shows that rates of disability vary significantly by age.

- In the younger age groups, rates of disability (daily activities limited by ill health or disability “a little” or “a lot”) in Oxfordshire were similar to or below the regional and national averages.
- Oxfordshire had a slightly higher proportion of people aged 85 and over with a disability than the South East (81.1% vs 80.6%). The district with the highest rate of disability in this oldest age group was Cherwell (83%), followed by Vale of White Horse (82%).

Figure 10 Percentage of residents in households* by age with daily activities limited by ill health or disability (a little or a lot) 2011, Oxfordshire vs South East and England



Source: ONS Census 2011 from nomis, table DC3302 *excludes people living in communal establishments such as care homes

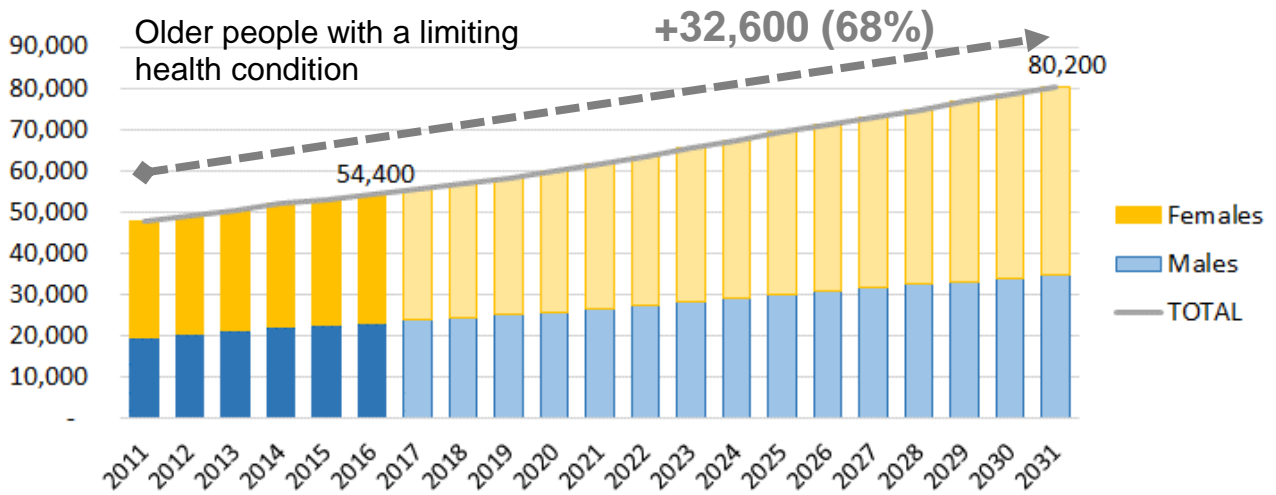
Wards in Oxfordshire with higher rates of disability overall were also those with a higher proportion of older residents.

Wards with the higher rates of residents aged 85 and over (living in households) with disabilities were distributed throughout Oxfordshire’s rural districts. The ward with the highest rate was Carterton North East in West Oxfordshire; the ward with the highest rate and number was Kidlington North in Cherwell.

Estimate of people living with health conditions in future

Applying the prevalence of long-term health conditions in 2011 to the actual and predicted growth in the older population, suggests that there could be 80,200 people aged 65+ living with a life limiting long term health condition or disability in Oxfordshire by 2031, an increase of 32,600 (+68%).

Figure 11 Estimated number of people aged 65+ living with a limiting long-term health condition or disability Oxfordshire (based on Census 2011 prevalence and forecast population growth)



Source: ONS Census 2011, activities limited a little or a lot, ONS population estimates 2011 to 2016, Oxfordshire County Council population forecasts to 2031. Estimate was calculated using data by detailed age bands available from the Census data and applying to the ONS population estimates and forecast population for those age bands. Chart shows total for 65+.

People claiming Attendance Allowance

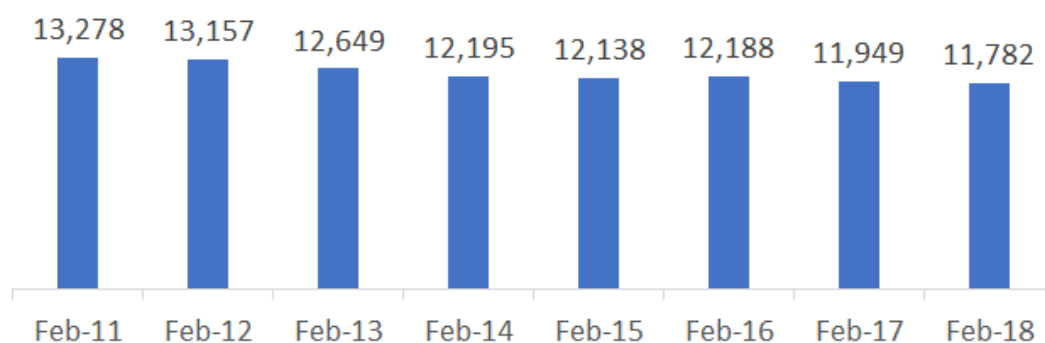
Attendance Allowance is not means tested and is available to anyone over 65 who meets the eligibility criteria. It is intended for:

- People who have a physical disability (including a sensory disability, such as blindness), a mental disability (including dementia and learning difficulties), or both.
- People with a disability severe enough to need help caring for themselves, or need someone to supervise them, for their own or someone else's safety.

As of February 2018, there was a total of **11,800** residents of Oxfordshire receiving Attendance Allowance. This was 7% below the total of 5 years previously, in February 2013 (12,700).

The number of recipients of Attendance Allowance in Oxfordshire has declined in all districts since 2011.

Figure 12 Attendance Allowance cases in payment (000s), Oxfordshire trend



Source: DWP stat-Xplore

Table 7 Attendance allowance cases in payment (000s), Oxfordshire districts Feb 2013 to Feb 2018

	Feb-13	Feb-18	Feb13 to Feb18	
Cherwell	2,845	2,715	-130	-5%
Oxford	2,259	1,968	-291	-13%
South Oxfordshire	2,734	2,578	-156	-6%
Vale of White Horse	2,549	2,397	-152	-6%
West Oxfordshire	2,263	2,119	-144	-6%
Oxfordshire	12,649	11,782	-867	-7%

Source: DWP stat-Xplore

3.5 Carers

Census 2011 data shows a third of Oxfordshire's unpaid carers providing 20 or more hours per week of unpaid care were aged 65 and over.

- 61,100 residents of Oxfordshire providing any amount of unpaid care⁷ of which 14,300 (23%) were aged 65 and over.
- 17,400 residents of Oxfordshire providing 20 or more hours per week of unpaid care of which 5,800 (33%) were aged 65 and over.

Compared with all people aged 65 and over, older people providing significant amounts of care (50 or more hours per week) were more likely to be in "bad" health.⁸

- 13% of people aged 65+ in Oxfordshire in 2011 providing significant amounts of care were in bad health compared with 10% overall.
- The proportion of older people providing care and in bad health was highest in Cherwell district (16%).

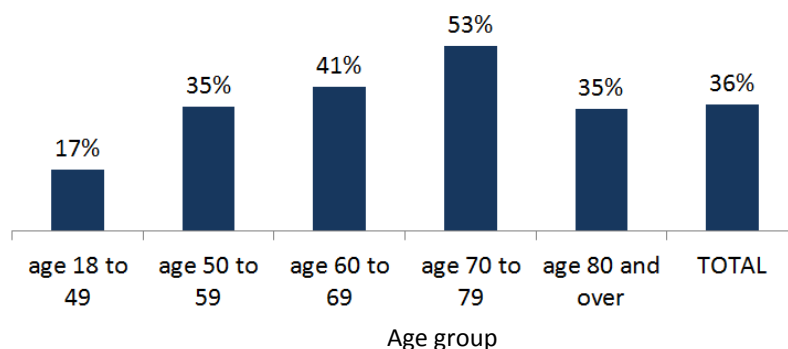
Survey of carers

The Carers survey is a national survey run every other year, the latest survey was sent November 2016.

- *Note that there has been a change to the methodology since the carers survey in 2014-15. The previous "eligible population" was limited to carers who had had a carer's assessment or review within the previous 12 months. The latest survey included all carers, whether or not they have had a recent review.*

2,000 Carers known to Oxfordshire County Council⁹ were sent a survey with around 400 in each of the 5 broad age bands. There were 721 responses from Oxfordshire carers in total (36%) with the highest response rate in the age group 70-79.

Figure 13 Carers in Oxfordshire survey 2016-17: % respondents by age group



Source: 2016-17 Carers survey; Oxfordshire County Council

⁷ ONS Census 2011 table LC3304

⁸ ONS Census 2011 table LC3301

⁹ Carers with assessment or review AND with record of cared for person and minimum data on carer including age

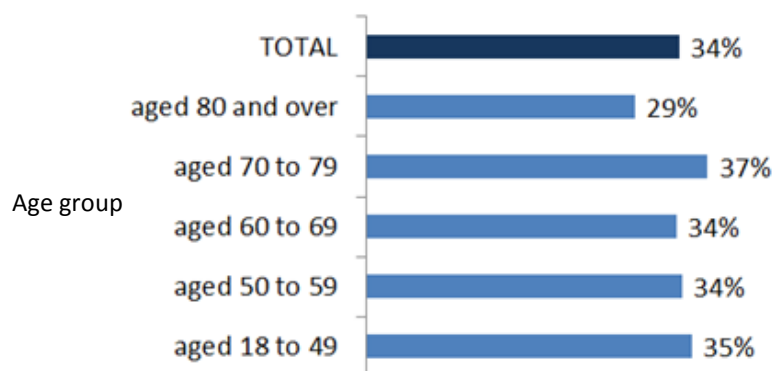
Older carers more likely to have accessed information and advice and more likely to rate advice as helpful.

Carers commented on..

- The challenges of caring;
- Lack of available care, support for day care, poor quality home care, praise for Age UK, dealing with bureaucracy.

Around a third (34%) of Oxfordshire carer respondents have had to see their own GP in the past 12 months because of their caring role. This was similar in all broad age categories.

Figure 14 % of Oxfordshire carer respondents who had to see their own GP because of their caring role, by broad age of carer



Source: 2016-17 Carers survey; Oxfordshire County Council

In addition:

- 1 in 5 (21%) carers reported having developed “my own health condition” as a result of caring;
- 1 in 5 (21%) carers reported caring had made an existing condition worse.

If the Oxfordshire Carers sample is representative then, of the group providing care 20 or more hours per week, an estimated total of 6,200¹⁰ carers in Oxfordshire will have had to see their GP as a result of their caring role in the past 12 months¹¹;

It is possible that this action – to see their GP as a result of their caring role – is an early indication that their caring role is at risk, potentially affecting around 6,200 people currently being supported by an informal carer.

Over half of carer respondents in Oxfordshire would be prepared to take part in further research.

- 387 carers (over 50% of respondents) said they were happy to take part in future research.
- This “happy to take part in future research” group gave similar responses to the total.

¹⁰ Assumptions: 17,200 people providing 20+ hours unpaid care per week in Oxfordshire (ONS Census 2011 survey); 35% of 2016-17 Carer respondents providing 20+ hours unpaid care went to see their GP as a result of their caring role

¹¹ This is likely to be a conservative estimate as the base data on total number of carers is from 2011 (6 years ago)

Comments from Carers in Oxfordshire

You phone one agency and then they tell you to phone another who pass you on again and then you get back to the original agency! Stop passing people from one agency to another

The situation with s. services has got worse over the years. More money is needed to provide an adequate service ... We feel more alone, uncared for, frustrated and upset by the way we are treated and not treated

Due to my physical condition - broken bones in my back - I find it quite difficult to look after my wife as I would really like to.

I have found great difficulty in finding the correct info, as when I go onto the website for help, I am referred instantly to another website. I end up feeling I am being passed from pillar to post

I do not want the stress of fighting for things..

Age UK very good

I look after both of my parents, I also suffer with depression so do not work..

Source: 2016-17 Carers survey; Oxfordshire County Council

Further data and analysis of the results of the 2016-17 carers survey is available from Oxfordshire Insight <http://insight.oxfordshire.gov.uk/cms/carers-survey-2016-17-jsna-briefing>

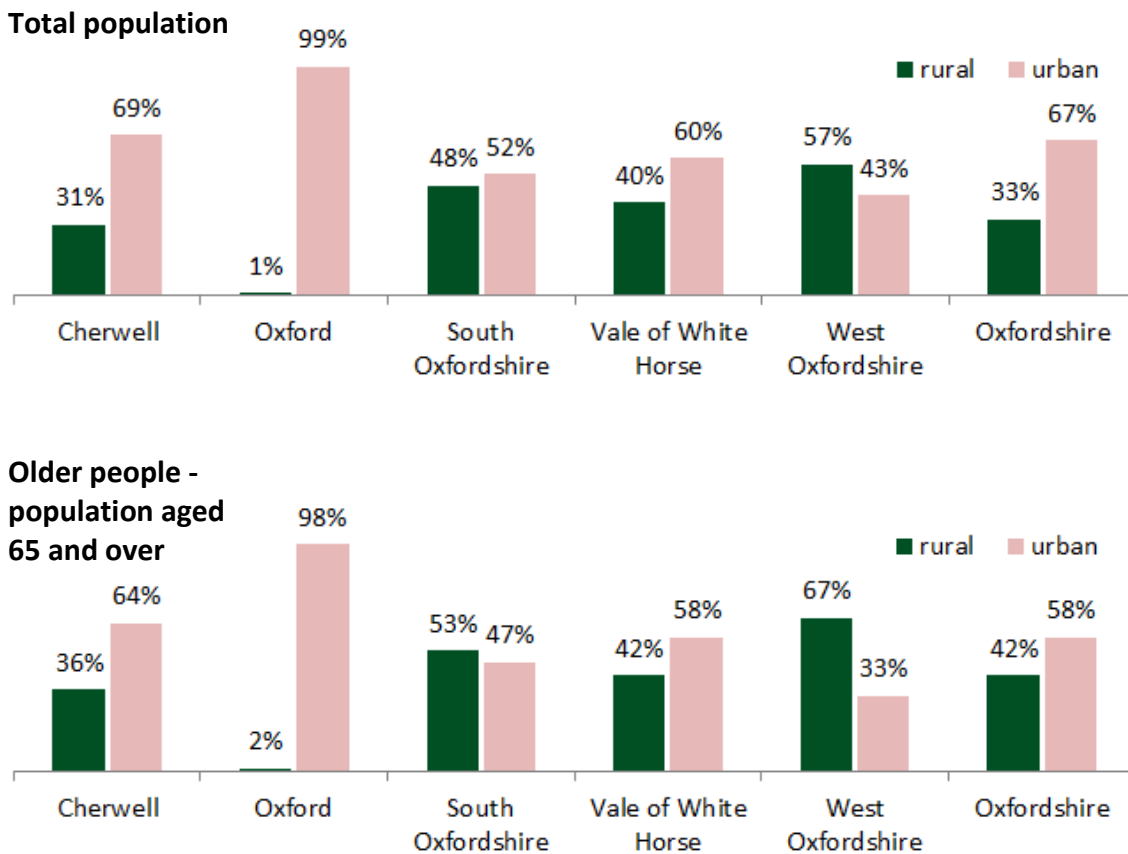
3.6 Rural population

As at mid-2016, a third of the total population of Oxfordshire (225,600, 33%) lived in areas defined as “rural” by the Office for National Statistics.

42% of the population of the county aged 65+ lived in rural Oxfordshire.

West Oxfordshire had the highest proportion living in rural areas (57%) and the highest proportion of older rural residents (67%).

Figure 15 Population in rural and urban areas by district (2016 ONS population estimate and rural/urban classification based on lower super output areas)



Source: ONS population estimate 2016 by LSOA, ONS rural urban classification of Lower Layer Super Output Areas

4 Wider determinants of health

4.1 Work, income and deprivation

Older people contributing to the economy

In 2011 there were 100,110 people aged 50 and over working in Oxfordshire (jobs) and 101,310 people aged 50+ in employment and living in Oxfordshire (resident workforce).

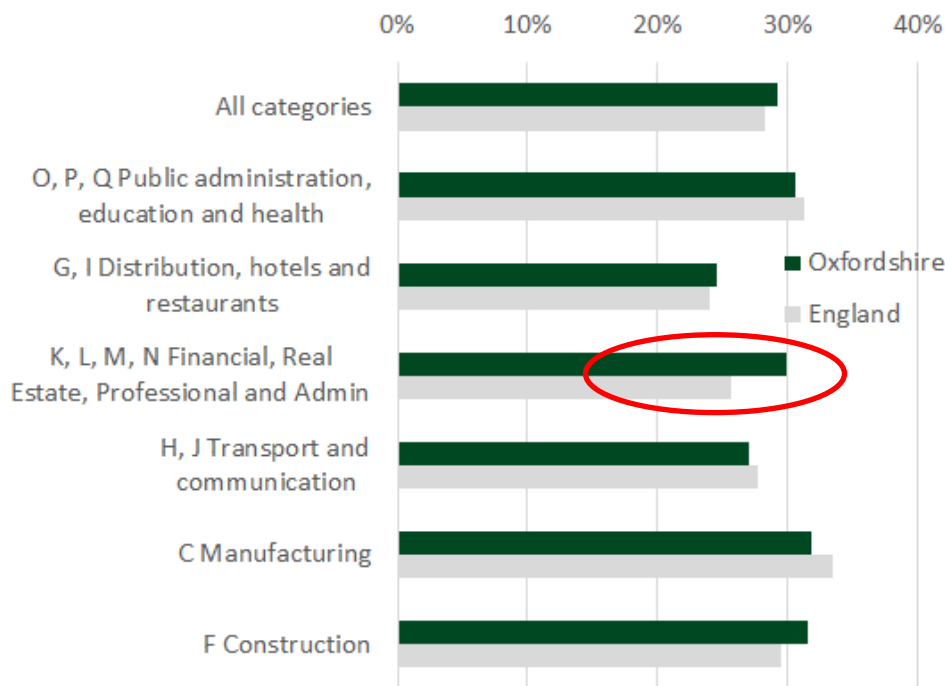
Just below a third (29%) of workers in Oxfordshire in 2011 were aged 50 and over.

The broad industry sectors with the highest proportions of older workers were:

- Manufacturing (9,000 workers aged 50+, 32%)
- Construction (7,400 workers aged 50+, 32%)
- Public Admin, Education, Health (34,000 workers aged 50+, 31%)

Compared with England, Oxfordshire had a higher proportion of older workers in “financial, real estate, professional and administration” industries (30% compared with 26%).

Figure 16 Percent of workers aged 50+ employed in Oxfordshire vs England

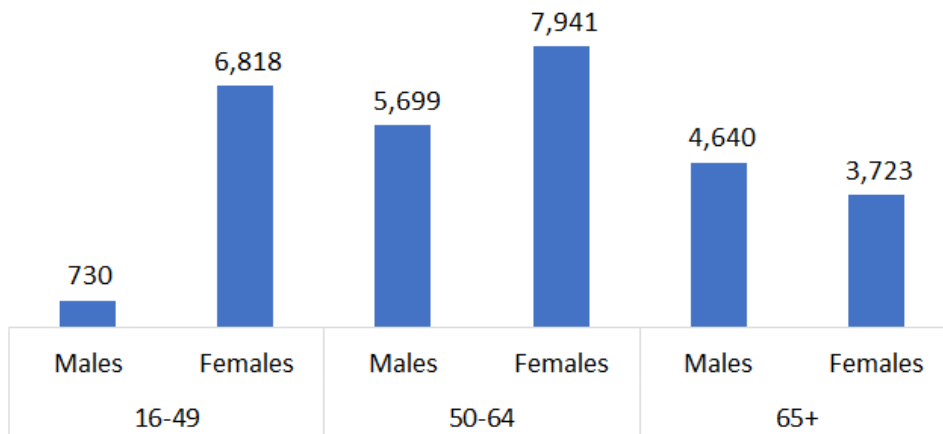


Source: ONS, Census 2011, table WP6110 (workplace population); more detailed industry sectors not available for workplace data

The majority of the increase in (all) employed residents in Oxfordshire between 2001 and 2011 was in the age group 50+ and the largest additional number were females aged 50 to 64.

- Between 2001 and 2011, the total number of Oxfordshire residents in employment increased by 29,600, of which 22,000 (74%) were aged 50 or over.

Figure 17 Growth in number of residents of Oxfordshire in employment by sex and age, Census 2001 to 2011

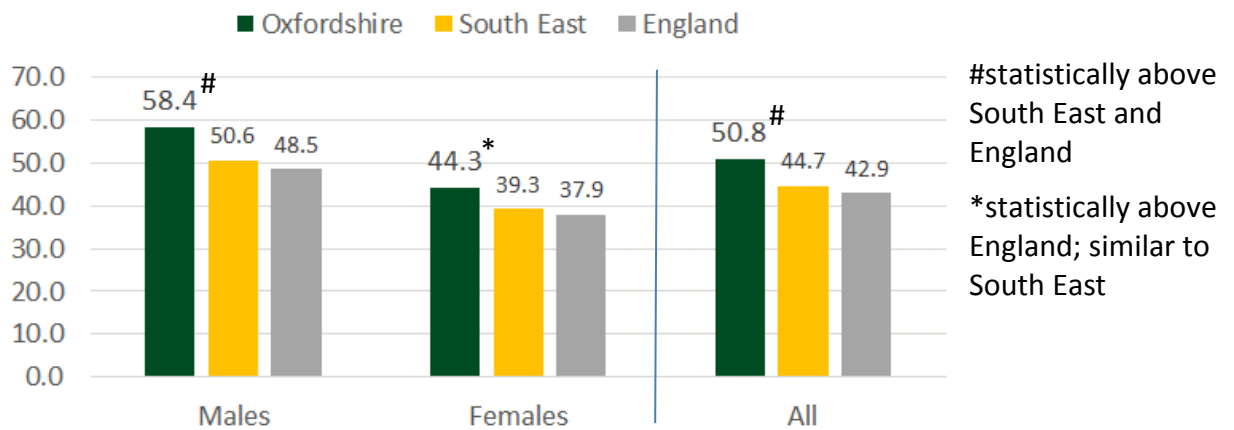


Source: ONS Census 2001 table ST036, Census 2011 table DC6110

More recent data shows a higher proportion of the older population (aged 50+) engaged in the workforce in Oxfordshire than average.

- Annual Population Survey data from Oct16 to Sept17 shows just over half of people aged 50+ in Oxfordshire were economically active (50.8%). This was (statistically) above the averages for the South East (44.7%) and England (42.9%).

Figure 18 Percent of people aged 50+ who are economically active (Oct16-Sept17)

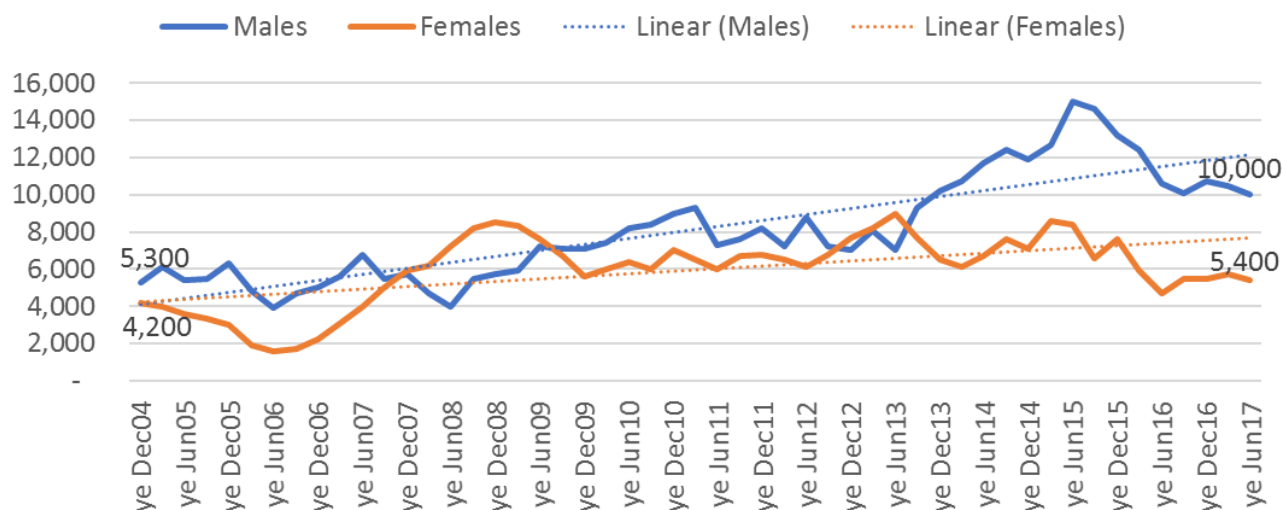


Source: ONS Annual Population Survey; The economically active population includes both employed (employees and self-employed) and unemployed people, but not the economically inactive, such as pre-school children, school children, students and pensioners

People aged 65 and over remaining in the workforce

There appears to be an increasing number of economically active people aged 65 and over, however the differences are not statistically significant.

Figure 19 Number of economically active people aged 65+ Oxfordshire (2004 to 2017)



Source: ONS annual population survey from nomis (note confidence intervals not shown)

Unemployment

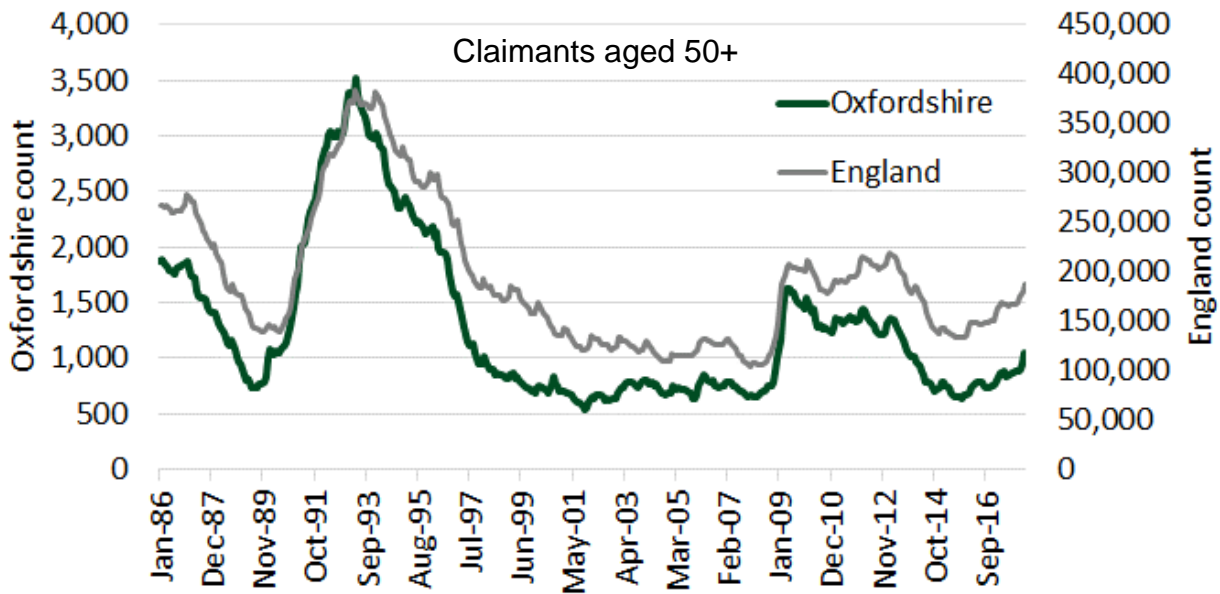
A higher than average proportion of unemployment claimants in Oxfordshire were older people aged 50+.

- Of the 3,450 claimants of unemployment related benefits in Oxfordshire in February 2018, 1,045 (30%) were aged 50 and over. Across England, 26% of claimants were aged 50+.

The increase in claimants in the older age group was above the average for the older age group in Oxfordshire.

- Between February 2017 and February 2018, claimants aged 50 and over increased in Oxfordshire from 825 to 1,045 (+220, +27%). This was above the average for all ages in Oxfordshire (+22%) and above the increase in the older age group in England (+15%).

Figure 20 Claimant count (JSA and Universal Credit seeking work) people aged 50 and over, Oxfordshire and England



Source: DWP from nomis; This experimental series counts the number of people claiming Jobseeker's Allowance plus those who claim Universal Credit and are required to seek work and be available for work and replaces the number of people claiming Jobseeker's Allowance as the headline indicator of the number of people claiming benefits principally for the reason of being unemployed.

Pensions

Changes to retirement age

The State Pension age is currently 65 for men and is gradually increasing for women from 60 to 65.

From 2019, the State Pension age will increase for both men and women to reach 66 by October 2020.

The Government is planning further increases, which will raise the State Pension age from 66 to 67 between 2026 and 2028.

State Pension amount

From 6 April 2016 the full new State Pension was increased to £159.55 per week, up from £115.95. The amount can be higher or lower depending on an individual's National Insurance record.

To qualify for any state pension will usually need at least 10 qualifying years of National Insurance Record. To qualify for the new full state pension (valid from 6 April 2016), will need 35 qualifying years. The new state pension increases annually by 2.5% or the average percent growth in wages in Great Britain – whichever is the highest.

Pension income

Overall there has been an increase in pension income and a shift towards private sources especially for younger pensioners. According to the Department for Work and Pensions¹² (2016-17):

- Pensioners have seen an increase in their average weekly incomes over the past decade.
- The percentage of pensioners receiving income from private pensions has increased.
- Younger pensioners had higher incomes and receive more from private sources.
- Single male pensioners had a higher income than single female pensioners.
- Those in the bottom fifth of the UK income distribution received most of their income from benefit/state pension.

According to ONS analysis of long term trends¹³, disposable incomes of retired households have increased as a result of private pensions. Income inequality has also increased (although not to the level of the 1980s).

- In 1977, only around one-fifth (21%) of retired households had an annual disposable income of over £10,000 (after accounting for inflation and household composition) but by financial year ending (FYE) 2016, this had increased to 96% of retired households.
- Over half of the increase in the income of retired households between 1977 and FYE 2016 can be attributed to increased private pension income alone, which has increased nearly sevenfold over the period.
- Despite the growth in the average disposable income of retired households, inequality between retired households has shown increases in recent years, though they remain small relative to increases in income inequality for retired households seen throughout the 1980s.

¹² Pensioners' Incomes Series: An analysis of trends in Pensioner Incomes: 1994/95-2016/17, DWP published March 2018

¹³ *What has happened to the income of retired households in the UK over the past 40 years?* ONS article August 2017

- In FYE 2016, retired households in receipt of a private pension had disposable incomes that were 1.6 times higher than households that were not.
- Although since FYE 2011 the average value of cash benefits for retired households has generally been increasing, those without any form of private pension income are not having their incomes supplemented enough by these cash benefits amounts to reduce overall inequality in income.

State Pension Claimants in Oxfordshire

As of August 2017, there was a total of 120,200 people claiming a State Pension in Oxfordshire, up from 107,700 in August 2007 (+12%). Nationally, 97% of pensioners claim a State Pension¹⁴.

Excluding the age group 60 to 64 - which has been affected by the change in state pension age for women - the number of State Pension claimants in Oxfordshire has increased by just over a quarter (+27%), just above the average for England (+23%). This is similar to the change in the total older population.

Table 8 Change in number of people claiming State Pension: August 2007 to August 2017, Oxfordshire vs England

Age group	Oxfordshire				England
	Aug07	Aug17	Aug07 to Aug17		Aug 07 to Aug 17
aged 60-64	15,400	2,830	-12,570	-82%	-81%
aged 65-69	24,970	31,460	6,490	26%	27%
aged 70-74	22,090	30,720	8,630	39%	33%
aged 75-79	18,470	21,660	3,190	17%	10%
aged 80-84	13,740	16,540	2,800	20%	13%
aged 85-89	8,710	10,600	1,890	22%	18%
aged 90 and over	4,330	6,370	2,040	47%	39%
unknown age	~	10			
Column Total	107,710	120,190	12,480	12%	8%
Aged 65+	92,310	117,350	25,040	27%	23%

Source: DWP from nomis

Income Deprivation Affecting Older People

According to the Income Deprivation Affecting Older People supplementary index¹⁵, **13,500** older people in Oxfordshire were affected by income deprivation, 68% of whom were living in urban areas and 32% in rural Oxfordshire.

¹⁴ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/691715/pensioners-incomes-series-2016-17-report.pdf

¹⁵ The Income Deprivation Affecting Older People Index is the proportion of all those aged 60 or over who experience income deprivation. This includes adults aged 60 or over receiving Income Support or income-based Jobseekers Allowance or income-based Employment and Support Allowance or Pension Credit (Guarantee).

The districts with the highest number and rate of older people in poverty were Oxford and Cherwell.

In West Oxfordshire 1,440 older people in poverty were living in rural areas, 65% of the total in poverty in the district.

Table 9 Income deprived older people – rural vs urban by district (from IMD 2015)

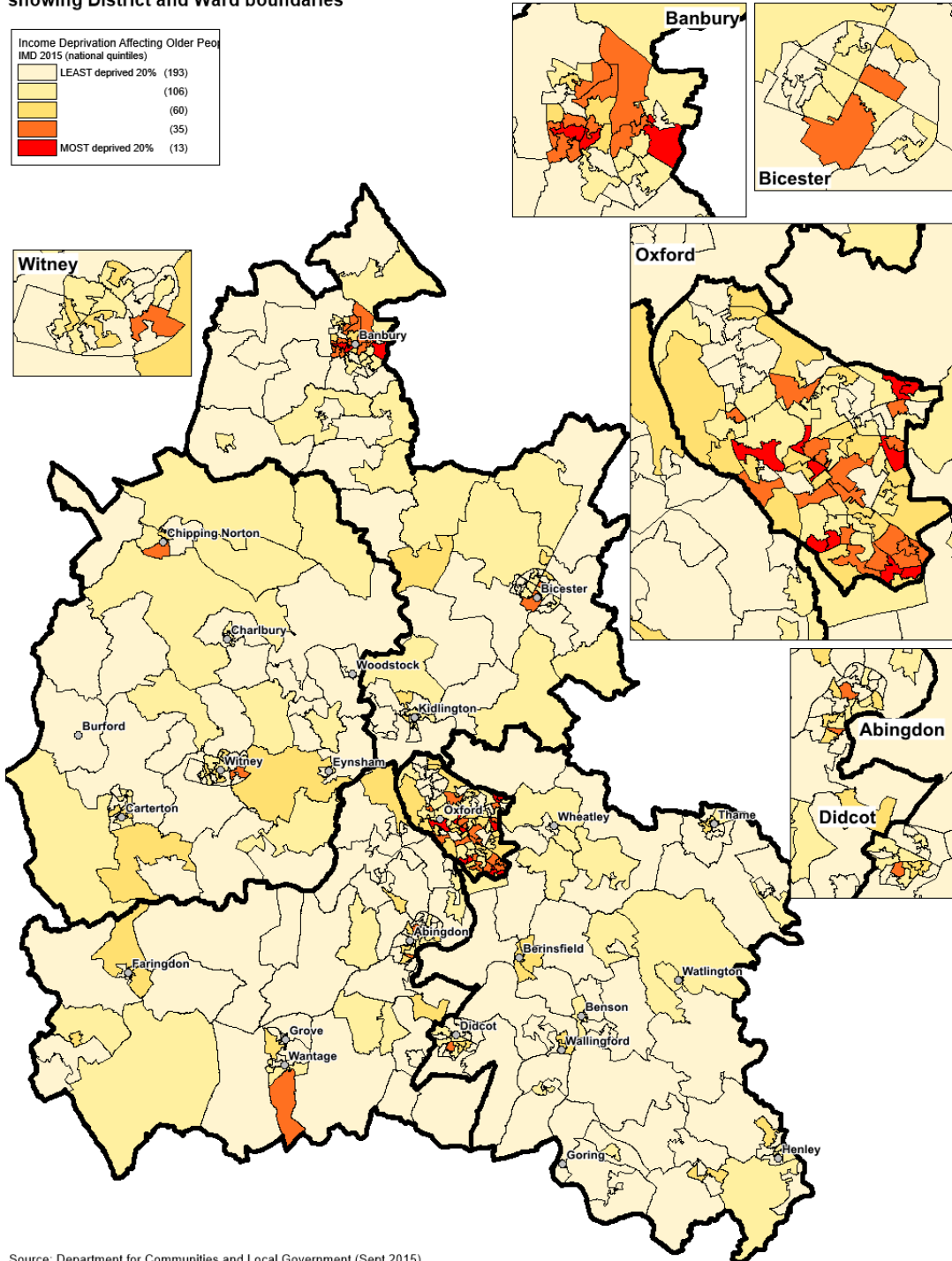
	Rural		Urban		Total	
	count	% of population	count	% of population	count	% of population
Cherwell	765	6.9%	2,350	11.7%	3,115	10.0%
Oxford	30	8.5%	3,240	14.4%	3,270	14.3%
South Oxfordshire	1,160	6.5%	1,375	8.6%	2,535	7.5%
Vale of White Horse	945	7.5%	1,405	7.8%	2,350	7.7%
West Oxfordshire	1,440	8.0%	790	9.0%	2,230	8.3%
Oxfordshire	4,340	7.2%	9,160	10.7%	13,500	9.3%
<i>% of Oxfordshire</i>	32%		68%		100%	

Source: CLG IMD 2015, underlying indicators, analysis by Oxfordshire County Council; indicators as of 2012

One area of Oxfordshire (in Banbury) was within top 10% most deprived areas on the Income Deprivation Affecting Older People index in England and a further twelve areas in Oxfordshire were within the 10-20% most deprived nationally (in Banbury and Oxford).

Figure 21 Income Deprivation Affecting Older People by Lower Super Output Area

showing District and Ward boundaries



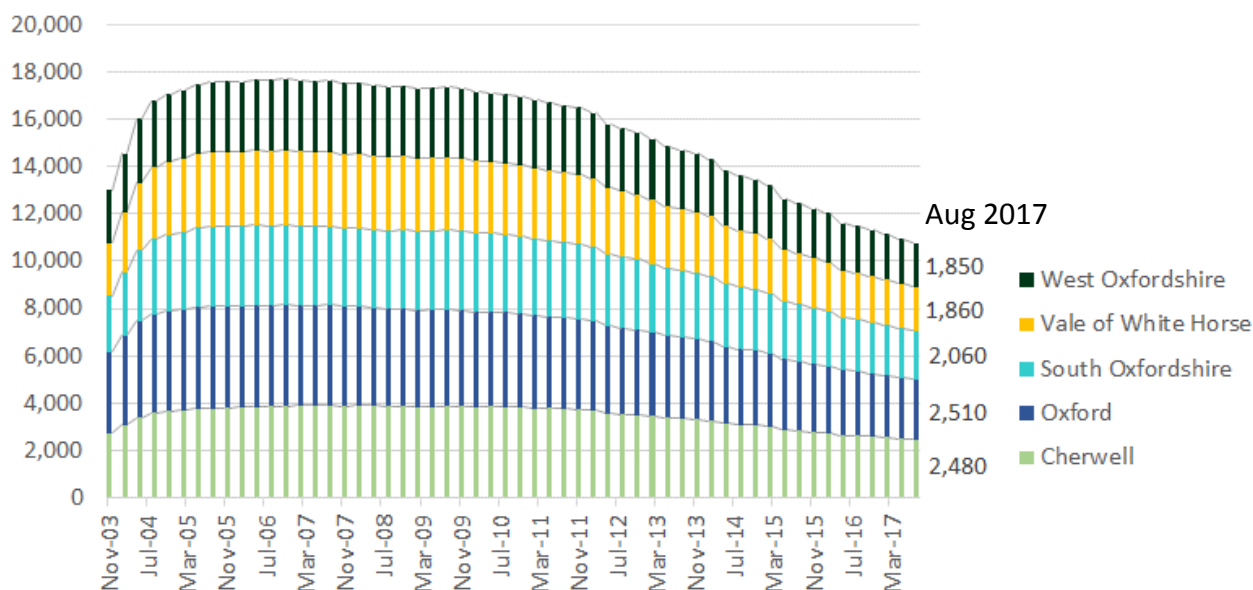
Source: Department for Communities and Local Government (Sept 2015)
 Data shown by Lower Super Output Areas (LSOAs) a statistical geography with an average of 1,500 residents per LSOA.

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Source: CLG IMD 2015, mapping by Oxfordshire County Council

There has been a decline in the number of claimants of pension credit in Oxfordshire from 17,710 at the peak in November 2016 to **10,750** in August 2017.

Figure 22 Total claimants of Pension Credit – Oxfordshire and districts



Source: DWP from nomis

Using national estimates of take-up of pension credit¹⁶, it is estimated that over 6,000 people in Oxfordshire are entitled to pension credit but are not claiming.

- TOTAL
 - Pension credit claimants in Oxfordshire (Aug17) = 10,750
 - Estimate of people not claiming = **6,300 to 7,500**
- Guarantee element
 - Pension credit guarantee (only) claimants in Oxfordshire (Aug17) = 5,180
 - Estimate of people not claiming = 2,500 to 3,300

¹⁶ DWP from nomis, Oxfordshire County Council estimate from national estimates of take-up.
<https://www.gov.uk/government/statistics/income-related-benefits-estimates-of-take-up-financial-year-201516>

4.2 Housing

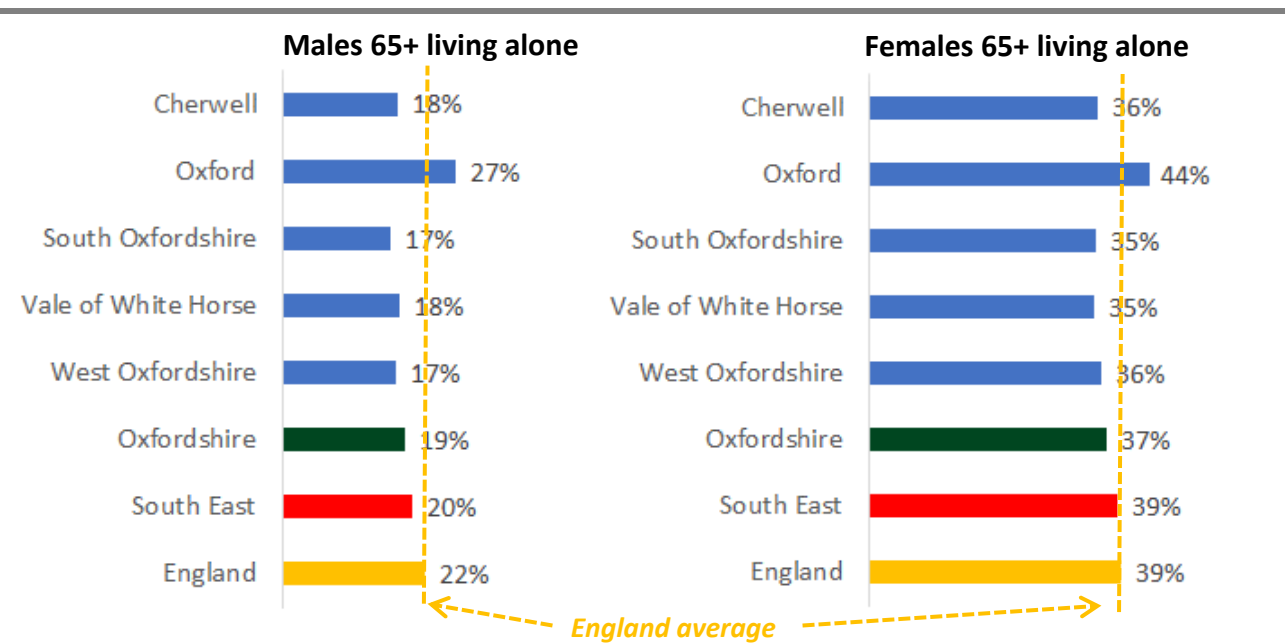
Living arrangements

The Census 2011 survey is still the latest source of local information on family living arrangements.

In 2011, there were 29,900 people aged 65+ living alone in households Oxfordshire. Of the total population aged 65+, 19% of men and 37% of women were living alone. This was below the regional and national averages.

The proportion of older men and women living alone were each above average in Oxford City.

Figure 23 Males and Females aged 65+ living alone as a percentage of all people aged 65+

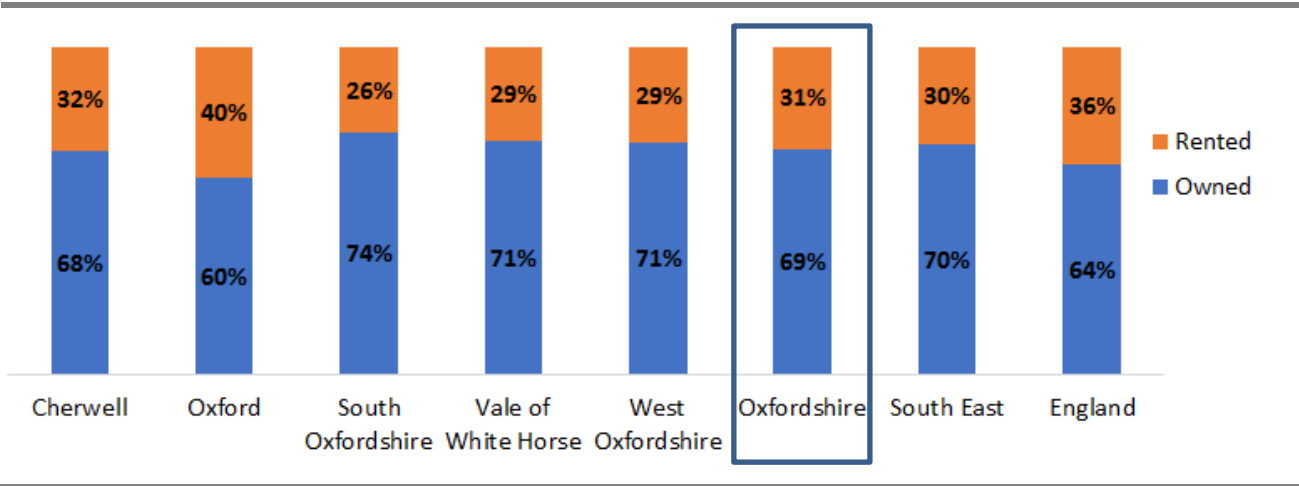


Source: ONS Census 2011, tables DC1109 and LC1117

People aged 65+ and living alone were more likely to be living in owned accommodation in Oxfordshire than the national average in all districts other than Oxford City.

- In Oxford 40% of single older people were living in rented homes (2,400 people). Of these 79% were social rented (1,900).

Figure 24 % of People aged 65+ and living alone by tenure (owned and rented) 2011



Condition of housing stock

The latest house condition surveys in Oxfordshire show that overall housing conditions (all hazards) in Cherwell, Oxford City and West Oxfordshire are each better than the national average.

Exceptions are:

- Disrepair in Oxford City, particularly in the private rented sector, which is believed to be due in part to the older housing stock (50% of Oxford's housing stock was built before 1944)
- Excess Cold hazards, where Cherwell District Council and West Oxfordshire each have a higher rate than the national average.
- Simple SAP energy efficiency rating, which suggests that the energy performance of buildings in Cherwell, Oxford and West Oxfordshire is lower than the national average. Rural areas tend to have higher rates of energy inefficient dwellings.

Table 10 Number and % of dwellings with a Housing Health and Safety Rating System (HHSRS) Category 1 hazard

	Dwellings	All hazards	Excess Cold	Falls	Disrepair	Simple SAP
EHS* 2009 (all Stock)		21%	8%	12%	6%	53
Cherwell (2013)	58,946	10,190 (17%)	5,903 (10%)	4,052 (7%)	2,449 (4%)	52
Oxford (2014)	52,704	9,204 (17%)	2,753 (5%)	5,979 (11%)	4,110 (8%)	51
West (2013)	41,219	8,289 (20%)	4,997 (12%)	3,120 (8%)	2,174 (5%)	51

Source: Oxford City Council, Cherwell and West Oxfordshire District Councils, collated by Oxfordshire County Council.

*English Housing Survey 2009

Table shows number of dwellings with a Housing Health and Safety Rating System (HHSRS) Category 1 hazard, which means there is one of 29 potential hazards that need action to be taken to make the property safe. The surveys, commissioned by District Councils, include the amount of disrepair, defined in the Governments former Decent Homes Standard criterion for disrepair.

Simple SAP is an estimate of the Governments energy efficiency rating - the higher the score the lower the running costs, with 100 representing zero energy cost.

Housing condition surveys for South Oxfordshire and Vale of White Horse have not been carried out in the past 5 years.

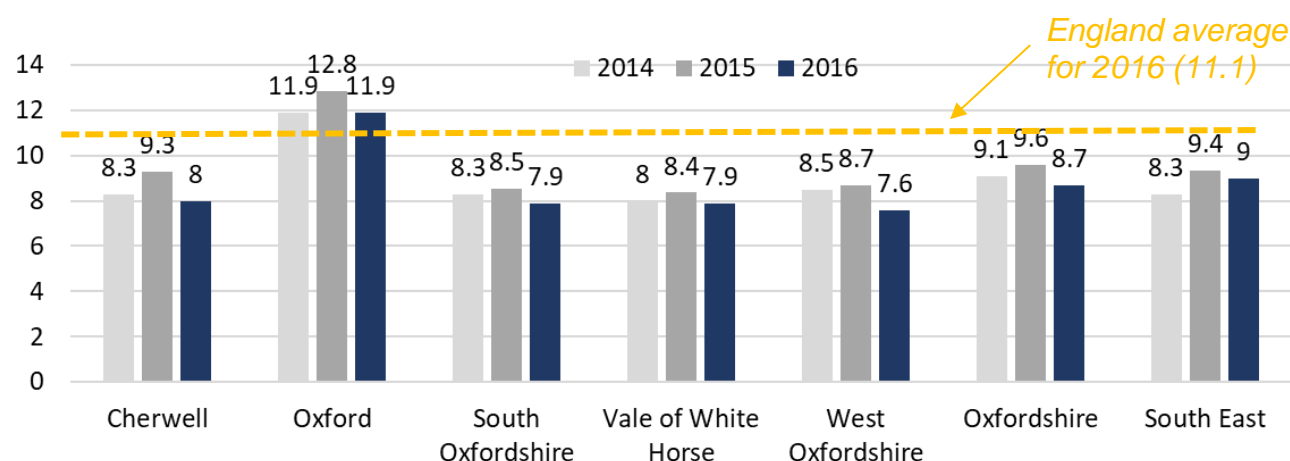
Fuel poverty

Between 2015 and 2016, the number of households estimated to be in fuel poverty declined by 2,000 households in Oxfordshire to a total of **23,900** (down from 25,900 in 2015).

There was a decline in the proportion of households defined as "fuel poor" in each district of Oxfordshire and across the South East.

Oxford remained above (worse than) the national average on fuel poverty (2016). Cherwell, South Oxfordshire, Vale of White Horse and West Oxfordshire each remained below the national average.

Figure 25 Percentage of households in fuel poverty 2014, 2015 and 2016



Department for Business, Energy and Industrial Strategy published June 2018

Low Income High Costs (LIHC) definition: a fuel poor household is one in which (1) A household has required fuel costs that are above the median level; and (2) were the household to spend that amount, they would be left with a residual income below the official poverty line.

The greatest decline in the estimated number of fuel poor households was in Cherwell (-676 households, -12%).

Table 11 Estimated number of Fuel Poor Households

	2014	2015	2016	2015 to 2016		% fuel poor 2016
Cherwell	4,870	5,481	4,805	-676	-12%	8
Oxford	6,840	7,406	6,983	-423	-6%	11.9
South Oxfordshire	4,670	4,809	4,529	-280	-6%	7.9
Vale of White Horse	4,099	4,306	4,141	-165	-4%	7.9
West Oxfordshire	3,798	3,913	3,460	-453	-12%	7.6
Oxfordshire	24,277	25,915	23,918	-1,997	-8%	8.7
South East	305,289	346,392	336,585	-9,807	-3%	9
England						11.1

Source: Department for Business, Energy and Industrial Strategy published June 2017

Fuel poverty in England is measured using the Low Income High Costs (LIHC) indicator. Under the LIHC indicator, a household is considered to be fuel poor if:

- The household has 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.

4.3 Physical and social environment

The environment is a major determinant of health. A well-designed physical environment can provide opportunities for:

- **people to be more active** e.g. encouraging walking and cycling as modes of transport, open spaces/green spaces for play and recreation, sports and leisure.
- **healthier food choices** e.g. restricting proximity of hot food takeaways to schools and encouraging healthy food provision in public spaces such as community centres, leisure centres and park kiosks.
- **social interaction** e.g. encouraging social community infrastructure and opportunities for social interaction, reducing social isolation and loneliness.

Green spaces

An October 2016 Parliamentary Office of Science and Technology briefing on Green space and Health¹⁷ found that:

- Areas with more accessible green space are associated with better mental and physical health.
- The risk of mortality caused by cardiovascular disease is lower in residential areas that have higher levels of 'greenness'.
- There is evidence that exposure to nature could be used as part of the treatment for some conditions.

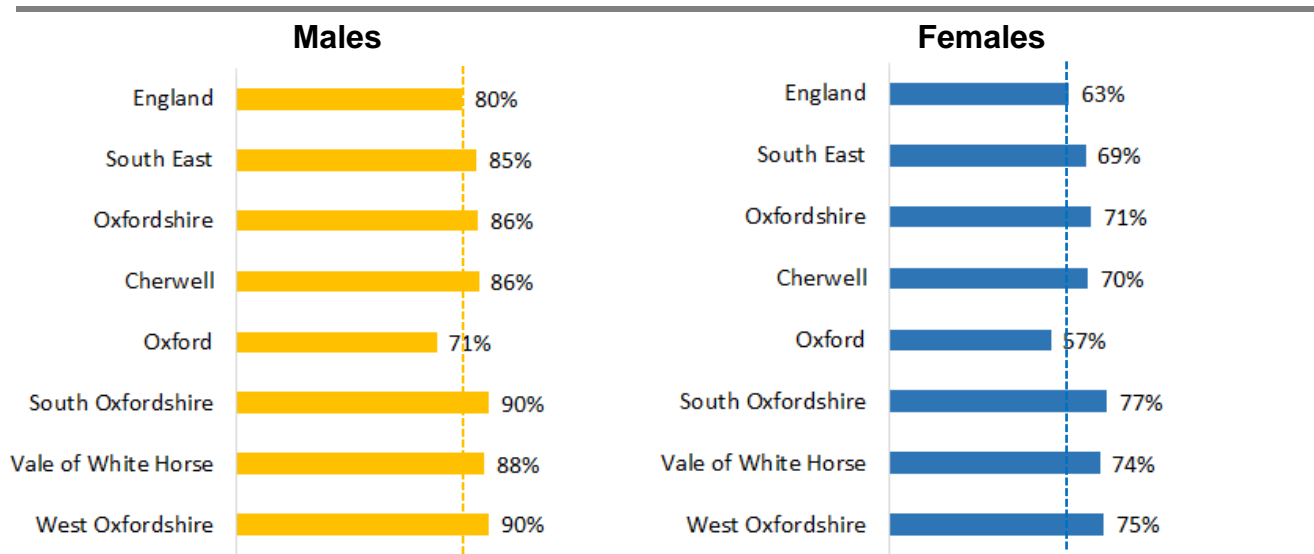
Access to a car

At the time of the Census 2011 survey, a relatively high proportion of older people in Oxfordshire had access to a private vehicle.

- 86% of males aged 65+ and 71% of females aged 65+ (living in households) in Oxfordshire had access to a car. These were each above the England and South-East averages.

¹⁷ <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/POST-PN-0538>

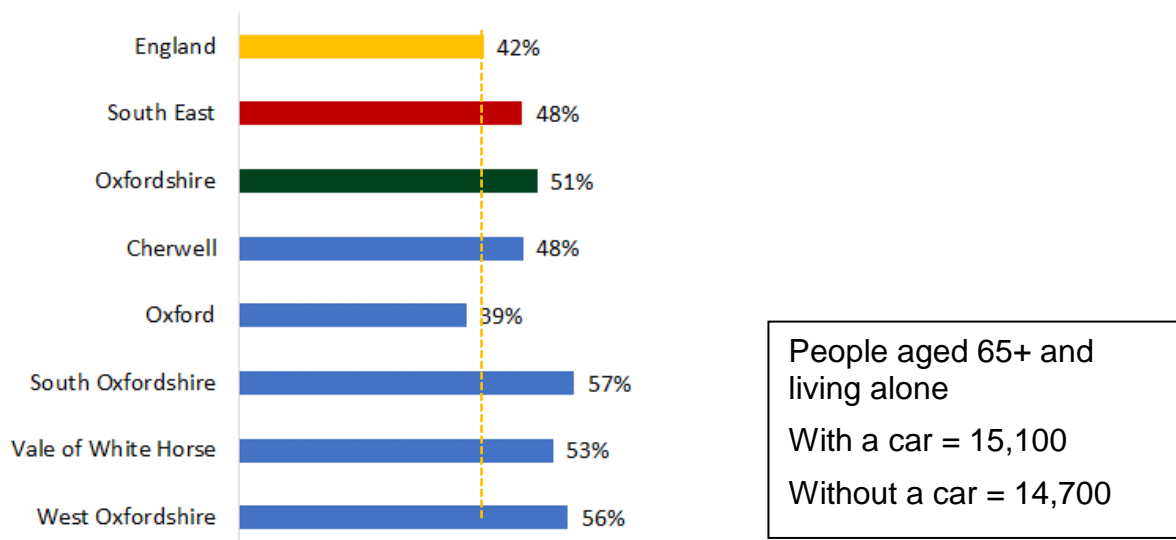
Figure 26 People aged 65+ with access to a car as % of people aged 65+ (2011)



Source: ONS Census 2011 table LC4109

Of older people living alone, just over half had access to a car in Oxfordshire, this was above the national and regional averages. The highest rates were in the rural districts of South Oxfordshire, Vale of White Horse and West Oxfordshire.

Figure 27 People aged 65+ living alone and with access to a car as % of all people aged 65+ living alone



Source: ONS Census 2011, table LC4110

Isolation and loneliness

A report on the Impact of Loneliness from Public Health England in 2017¹⁸ highlighted impacts for individuals and for services:

For individuals:

- Social isolation and loneliness are harmful to physical and mental health and increase risk of morbidity and mortality.
- Social isolation and feelings of loneliness can also be physical or psychosocial stressor resulting in behaviour that is damaging to health.
- Social networks and friendships not only have an impact on reducing the risk of mortality or developing certain diseases, but they also help individuals to recover when they do fall ill (Marmot, 2010).

Pressures on services, with lonely individuals who are likely to:

- visit their GP more often;
- have higher use of medication;
- use accident and emergency services independent of chronic illness;
- be admitted to adult social care;
- more use of mental health services;
- have early admission to residential or nursing care.

Public Health England also found evidence to suggest a *significant correlation between low socioeconomic status and social isolation. Social disadvantages experienced earlier in life can increase risk of isolation.*

Using national prevalence rates from the Community Life Survey¹⁹ it is estimated that 20,400 older people in Oxfordshire (aged 65+) experience loneliness at least some of the time, of which **3,500** older people experience loneliness “often/always”.

Table 12 Estimate of the number of older people in Oxfordshire experiencing loneliness

	Oxfordshire population mid-2016	Lonely often/always		Lonely some of the time		TOTAL estimate
		Percentage	Oxfordshire estimate (count)	Percentage	Oxfordshire estimate (count)	
people aged 65-74	65,500	2.89	1,900	11.38	7,500	9,300
people aged 75+	55,500	2.95	1,600	17.04	9,500	11,100
TOTAL	121,000		3,500		16,900	20,400

Sources: ONS mid 2016 population estimate original release; Percentages are from ONS 2016-17 Community Life Survey (not including confidence intervals) as cited in ONS Analysis of characteristics and circumstances associated with loneliness in England

In 2015, Age UK carried out a study to predict risk of loneliness at a local area level by applying findings from the English Longitudinal Study of Ageing (wave 5) to local demographic and social statistics.

¹⁸ Recognising the Impact of Loneliness: a Public Health Issue (May 2017) <http://www.insidegovernment.co.uk/uploads/2017/05/nuzhatali.pdf>

¹⁹ Community Life Survey 2016-17 <https://www.gov.uk/government/statistics/community-life-survey-2016-17>

Areas rated as “High risk” for isolation and loneliness in Oxfordshire²⁰ were mainly found in Oxford and the urban centres of Banbury, Bicester, Kidlington, Didcot, Henley, Thame, Wallingford, Abingdon, Faringdon, Wantage and Grove, Chipping Norton and Witney.

Developing new national measures of loneliness

The government is developing a strategy to alleviate loneliness in response to the report of the Jo Cox Commission on Loneliness published in December 2017²¹. As part of this, ONS is working on new national measures of loneliness with the help of a cross-government group, charities, academics and other stakeholders.

A recently published (April 2018) ONS analysis²², found three profiles of people at particular risk from loneliness:

- Younger renters with little trust and sense of belonging to their area.
- Unmarried, middle-agers with long-term health conditions.
- Widowed older homeowners living alone with long-term health conditions.

²⁰ Age UK Loneliness Heat Maps <https://www.ageuk.org.uk/our-impact/policy-research/loneliness-research-and-resources/loneliness-maps/>

²¹ Combatting Loneliness One Conversation at a Time
https://www.jocoxloneliness.org/pdf/a_call_to_action.pdf

²² Analysis of characteristics and circumstances associated with loneliness using the Community Life Survey 2016 to 2017, ONS published April 2018

5 Health Conditions and Causes of Death

5.1 Profile of Older People's Health and Wellbeing

The Public Health England profile of Older People's Health and Wellbeing for Oxfordshire shows that, for these selected indicators, Oxfordshire is statistically better than or similar to the national average.

Figure 28 Older People's Health and Wellbeing - Oxfordshire

Indicator	Period	Oxon			Region England		England			Best/ Highest
		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range		
Supporting information - % population aged 65+	2016	–	120,971	17.7%	18.9%	17.9%	6.0%		28.3%	
0.1ii - Life expectancy at 65 (Male)	2014 - 16	–	-	19.7	19.3	18.8	15.8		22.1	
0.1ii - Life expectancy at 65 (Female)	2014 - 16	–	-	21.9	21.7	21.1	18.7		24.4	
Supporting information - Deprivation score (IMD 2015)	2015	–	-	11.5	-	21.8	42.0		5.7	
Percentage of deaths in usual place of residence among people aged 65 years and over	2016	↑	2,445	52.8%	49.0%	47.2%	28.9%		58.4%	
Rate of deaths from Cardiovascular Disease among people aged 65 years and over	2014 - 16	–	3,613	983.7	1079.2	1149.2	1,571.6		789.6	
Rate of deaths from Cancer among people aged 65 years and over	2014 - 16	–	3,652	1,017.8	1064.6	1115.2	1,512.0		869.1	
Rate of deaths from Respiratory Disease among people aged 65 years and over	2014 - 16	–	1,909	522.5	573.7	629.1	977.0		385.3	
Dementia: Recorded prevalence (aged 65+)	Sep 2017	→	5,467	4.38%	4.25%	4.33%	2.58%		5.49%	
4.12i - Preventable sight loss - age related macular degeneration (AMD)	2015/16	→	97	81.9	101.5*	114.0	403.9		11.8	
4.14i - Hip fractures in people aged 65 and over	2016/17	–	721	574	-	575	854		365	
4.15ii - Excess winter deaths index (single year, age 85+)	Aug 2015 - Jul 2016	–	150	19.8	18.1	17.7	47.0		-11.7	
4.15iv - Excess winter deaths index (3 years, age 85+)	Aug 2013 - Jul 2016	–	561	25.6	23.4	24.6	39.9		4.9	

Compared with benchmark Better Similar Worse Lower Similar Higher Not Compared

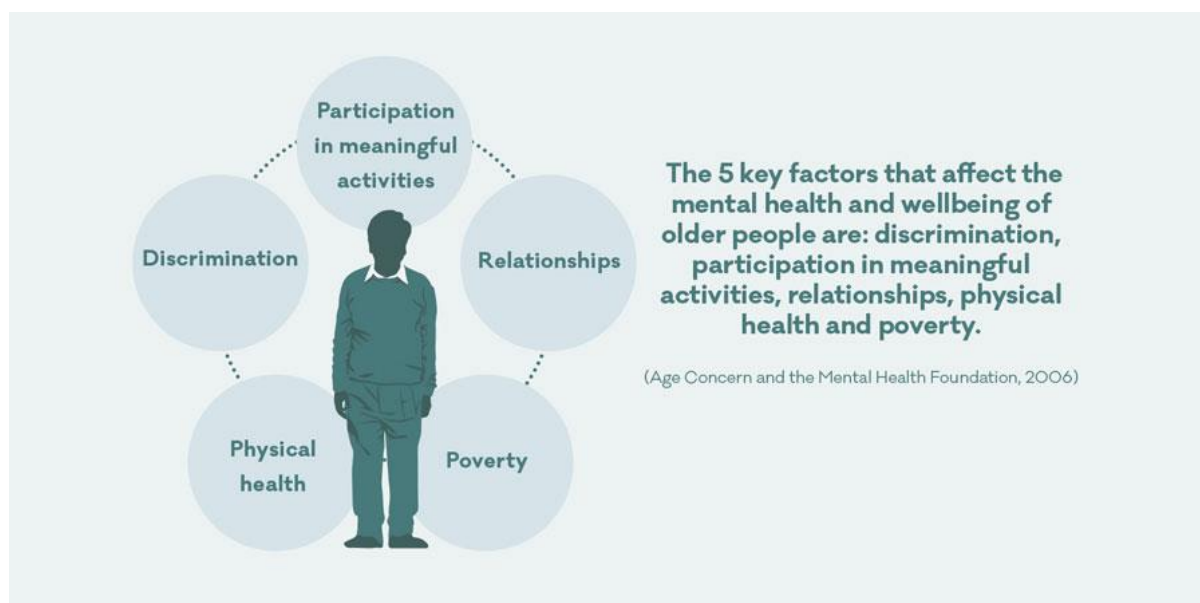
Source: Public Health England fingertips (last accessed October 2018)

5.2 Mental health

The World Health Organisation defines mental health as ‘... a state of wellbeing in which the individual realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community.’

The Mental Health Foundation sets out 5 key factors that affect the mental health and wellbeing of older people

1. Discrimination
2. Participation in meaningful activities
3. Relationships
4. Physical health
5. Poverty



Mental Health Statistics: Older People <https://www.mentalhealth.org.uk/statistics/mental-health-statistics-older-people>

Office for National Statistics wellbeing measures are based on a survey sample that is not large enough to be sub-divided by age at an Oxfordshire level.

National data from the ONS report on UK wellbeing data, *Quality of Life in the UK, 2018*²³, shows that:

- Older people (mainly aged 75 and over) were more likely to be satisfied with their income, leisure time, feel they can cope financially and belong to their neighbourhood.
- The main challenges for older people are lower satisfaction with their health and lower engagement with an art or cultural activity.

²³ ONS released April 2018

<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuringnationalwellbeing/qualityoflifeintheuk2018>

5.3 Dementia and Alzheimer's disease

Prevalence

In 2017-18 there were just over **5,500** GP-registered patients in the Oxfordshire Clinical Commissioning Group with a diagnosis of Dementia and Alzheimer's disease, up from 5,400 in 2016-17. The prevalence stayed the same at 0.75% of patients, just below the national average (0.76%) and below the regional average (0.82%).

Table 13 GP-registered patients with Dementia and Alzheimer's disease (count and % of list)

	2016-17	2017-18	2016-17 to 2017-18
NHS Oxfordshire (count)	5,389	5,579	+190
NHS Oxfordshire %	0.75	0.75	0
South East (health region) %	0.82	0.82	0
England %	0.77	0.76	-0.01pp

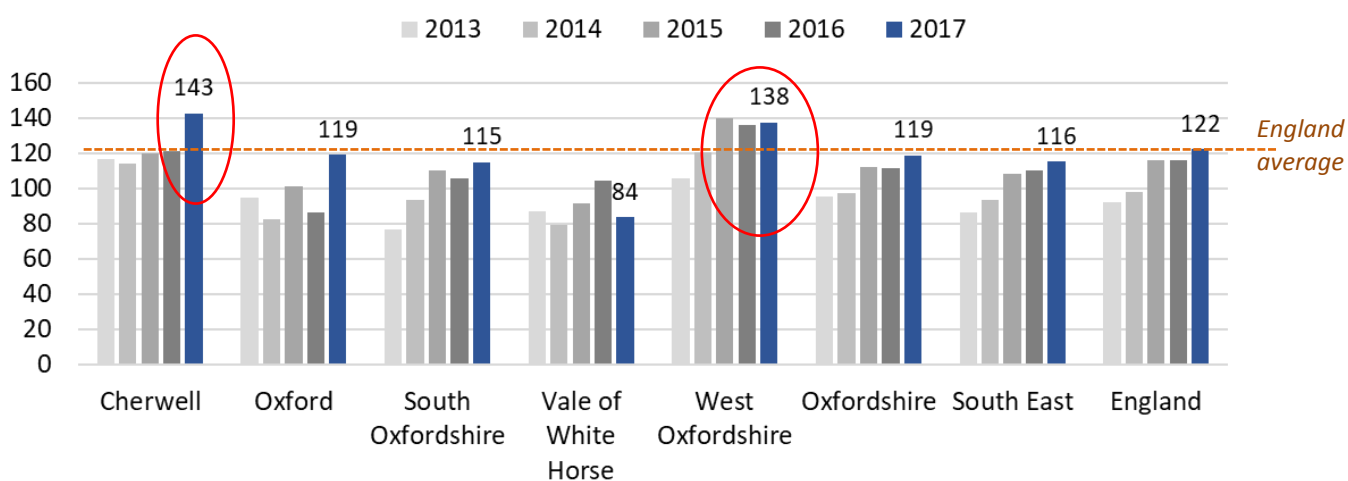
Source: Quality and Outcomes Framework (QOF) 2017-18, published Oct 2018

The dementia diagnosis rate for Oxfordshire was estimated at 66.9%²⁴ (2018) giving an estimated total number of people living with dementia in Oxfordshire (diagnosed and undiagnosed) of around 8,300. Based on forecast population growth, this may reach 12,000 people by 2031.

Deaths

Between 2016 and 2017, the age-standardised mortality rate due to Dementia and Alzheimer's disease increased in Cherwell, Oxford, South Oxfordshire and West Oxfordshire. In Cherwell and West Oxfordshire, the rate in 2017 was well above the national and regional averages.

Figure 29 Age standardised mortality rate, 2013 to 2017, Dementia and Alzheimer's disease



Source: ONS (from nomis "life events")

²⁴ Public Health England Fingertips, Estimated dementia diagnosis rate (aged 65+)

5.4 Sight loss

A Certification of Vision Impairment (CVI) certifies a person as either sight impaired (partially sighted) or severely sight impaired (blind). The CVI enables local government to offer registration as blind or partially sighted and other relevant advice and support. Registers are maintained by local authorities.

As reported in the main 2018 JSNA report, as of 2016-17 there were 2,360 people in Oxfordshire that are registered as blind or partially sighted, equivalent to a crude rate of 345 per 100,000 people. This was well below the rate in England (526) and the South East region (486)²⁵.

The RNIB estimates that, as of 2016, there was an estimated total of 21,110 people living with some degree of sight loss in Oxfordshire. The estimated prevalence is 3.1% (the same as England).

The districts with the highest estimated prevalence of people with mild to severe sight loss in Oxfordshire were South Oxfordshire and West Oxfordshire.

Table 14 Number of people estimated to be living with sight loss in Oxfordshire (2016 and future estimates to 2030)

	2016	2020	2025	2030
Mild	13,630	15,050	17,090	19,560
Moderate sight loss	4,690	5,160	5,800	6,570
Severe sight loss	2,800	3,130	3,620	4,200
Total	21,110	23,340	26,510	30,330

Table 15 Estimated number of people living with sight loss by district (2016)

	Mild sight loss	Moderate sight loss	Severe sight loss	Total	Prevalence
Cherwell	2,920	1,010	600	4,520	3.1%
Oxford	2,290	780	450	3,520	2.2%
South Oxfordshire	3,140	1,080	660	4,880	3.5%
Vale of White Horse	2,810	970	580	4,360	3.4%
West Oxfordshire	2,470	850	510	3,830	3.5%
Oxfordshire	13,630	4,690	2,800	21,110	3.1%

Source: RNIB Sight Loss Data Tool

Preventable sight loss

Crude rates (2015-16) of preventable sight loss from age-related macular degeneration (AMD), glaucoma and diabetic eye disease are shown in the table below. The numbers (count) in Oxfordshire are relatively low.

²⁵ Source: NHS Digital <http://digital.nhs.uk/catalogue/PUB30161> The SSDA902 data is collected every three years from Councils with Adult Social Services Responsibilities (CASSRs). In 2016-17, it was collected as part of the Short and Long Term (SALT) activity collection.

Table 16 Crude rates of preventable sight loss from age-related macular degeneration, glaucoma and diabetic eye disease 2015-16

	Oxfordshire count	Oxfordshire rate	South East region	England
Age-related macular degeneration (AMD) – 65+ years	97	81.9	101.5	114.0
Glaucoma – 40+ years	28	8.4	10.3	12.8
Diabetic eye disease – 12+ years	16	2.8	2.7	2.9

Source: Public Health Outcomes Framework (Indicators 4.12i, ii, iii)

5.5 Hearing loss

11 million people are currently living with hearing loss in the UK. Hearing loss means not just the big things in life like staying in employment; it affects everyday things like being able to hear the door-bell or crossing the road²⁶.

As reported in the 2016 Oxfordshire JSNA, hearing loss can be socially isolating and has been associated with increased risk of physical and mental health problems.²⁷ Nationally, around one in six people are thought to have some form of hearing loss.²⁸

Data on people registered as deaf or hard of hearing was collected every three years up to 2010.²⁹ At this time an estimated 915 people in Oxfordshire were either deaf or hard of hearing. The bulk of these (550) were 75 years and over and were hard of hearing. Overall there were around 145 people in the county registered as deaf and a further 775 who were hard of hearing.

²⁶ Source: Action on Hearing Loss <https://www.actiononhearingloss.org.uk/>

²⁷ For further information, see the Action Plan on Hearing Loss (Department of Health/ NHS England, March 2015): <http://www.england.nhs.uk/wp-content/uploads/2015/03/act-plan-hearing-loss-upd.pdf>

²⁸ Action on hearing loss statistics (accessed January 2016): <http://www.actiononhearingloss.org.uk/your-hearing/about-deafness-and-hearing-loss/statistics.aspx> This figure is in line with data from the latest Health Survey for England (data for 2014, published December 2015): <http://www.hscic.gov.uk/searchcatalogue?productid=19585&q=health+survey+for+england&sort=Relevance&size=10&page=1#top>

²⁹ Health & Social Care Information Centre - People Registered Deaf or Hard of Hearing Year ending 31 March 2010, in England: <http://www.hscic.gov.uk/pubs/regdeaf10>

5.6 Causes of death

Trends in major causes of death in people aged 65 and over

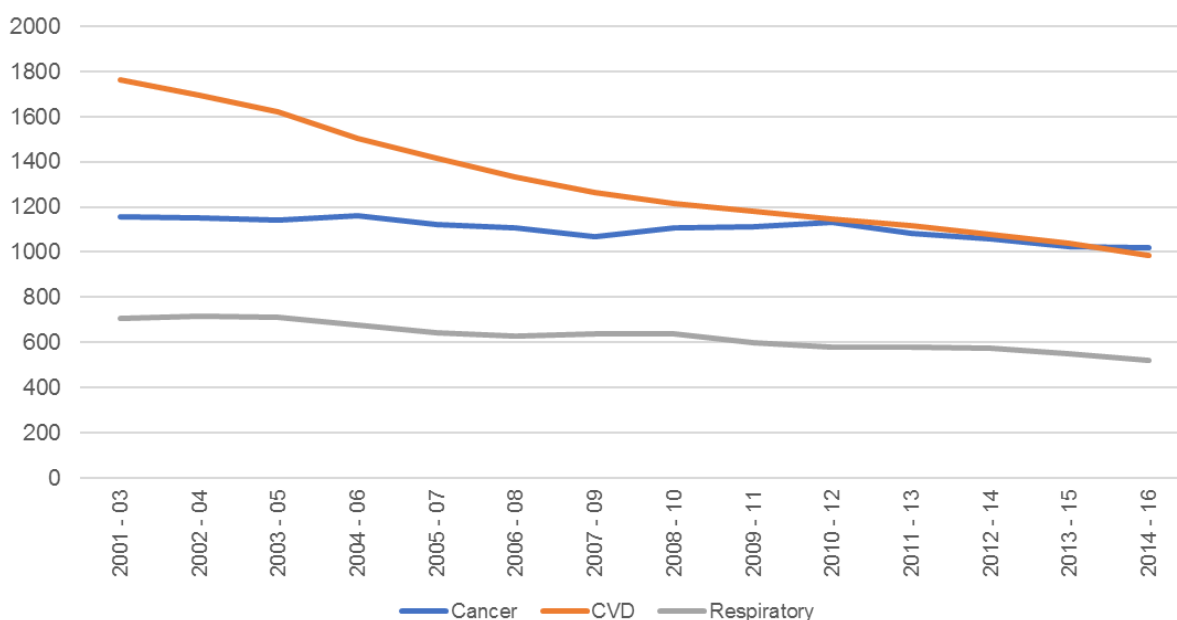
The three major causes of death in people aged 65 and over in Oxfordshire accounted for:

- Cancer: 3,652 deaths in three years 2014 to 2016
- Cardiovascular disease: 3,613 deaths in three years 2014 to 2016
- Respiratory disease: 1,909 deaths in three years 2014 to 2016

The rate of Cardiovascular disease as a cause of death in older people has dropped significantly since 2001-03.

For all three of these causes of death, Oxfordshire has a significantly better rate than England and South East Region.

Figure 30 Directly standardised rate of deaths in people aged 65+ in Oxfordshire, Cancer, Cardiovascular (CVD) and Respiratory disease; 3 year averages to 2014-16



Source: PHE analysis of Office for National Statistics Mortality File

These data are also available at a district level. Below are charts showing the breakdown by district for each cause for the most recent data.

These show that Cherwell have higher rates than other districts for Cancer and Respiratory deaths in over 65s. For these causes, Cherwell was similar to the national average, rather than better than average as with Oxfordshire's other districts.

Figure 31 Directly standardised rates of Cancer deaths in 65+ years (2014-16)

Area	Value	Lower CI	Upper CI
England	1,115.2	1,111.4	1,119.1
Oxfordshire	1,017.8	984.9	1,051.5
Cherwell	1,108.0	1,033.5	1,186.5
Oxford	1,011.3	929.4	1,098.4
South Oxfordshire	961.4	896.1	1,030.2
Vale of White Horse	994.5	924.5	1,068.3
West Oxfordshire	1,020.5	945.3	1,100.1

Source: PHE analysis of Office for National Statistics Mortality File

Figure 32 Directly standardised rates of Cardiovascular deaths in 65+ years

Area	Value	Lower CI	Upper CI
England	1,149.2	1,145.3	1,153.1
Oxfordshire	983.7	951.8	1,016.5
Cherwell	1,024.5	952.8	1,100.1
Oxford	999.3	920.1	1,083.5
South Oxfordshire	968.4	903.5	1,036.6
Vale of White Horse	967.5	899.4	1,039.3
West Oxfordshire	966.2	894.0	1,042.6

Source: PHE analysis of Office for National Statistics Mortality File

Figure 33 Directly standardised rates of deaths from Respiratory disease in 65+ years

Area	Value	Lower CI	Upper CI
England	629.1	626.2	631.9
Oxfordshire	522.5	499.3	546.6
Cherwell	618.1	562.5	677.7
Oxford	541.2	483.1	604.3
South Oxfordshire	506.7	460.0	556.9
Vale of White Horse	457.9	411.2	508.4
West Oxfordshire	498.0	446.5	553.7

Source: PHE analysis of Office for National Statistics Mortality File

Excess winter deaths

About Excess winter deaths

The number of excess winter deaths is a statistical measure of the increase in mortality during winter and is not the number of people who died directly as a result of cold weather.

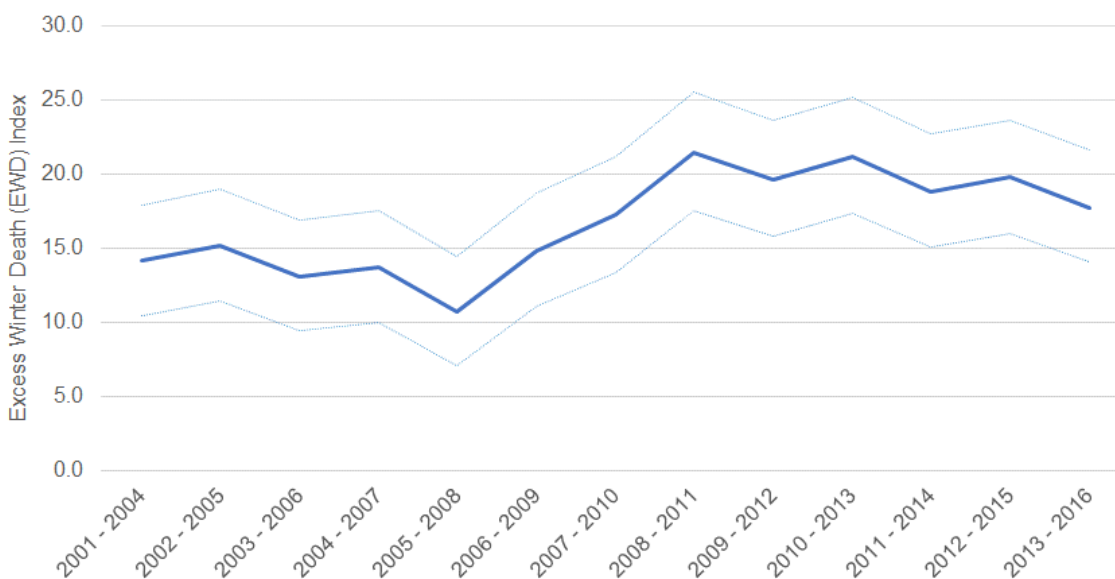
The ONS standard method defines the winter period as December to March, and compares the number of deaths that occurred in this winter period with the average number of deaths occurring in 2 non-winter periods; the preceding August to November and the following April to July.

The EWM index is calculated so that comparisons can be made between sexes, age groups and regions, and is calculated as the number of excess winter deaths divided by the average non-winter deaths, expressed as a percentage.

ONS Excess winter mortality methodology

There has been a change in the number of Excess Winter Deaths in Oxfordshire from 1,034 in 2010-13 to 899 in 2013-16. The chart below shows the trend in the EWM Index since 2001-04 within upper and lower confidence limits. The latest data (2013-16) shows a similar EWM Index to England (17.8).

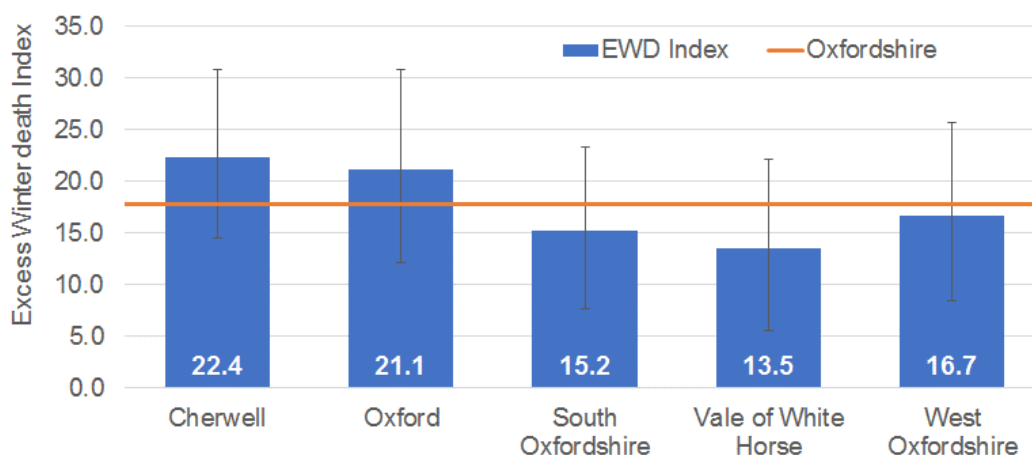
Figure 34 Excess Winter Mortality Index (3-years combined) – trended data for Oxfordshire 2001-2004 to 2013-2016



Source: Public Health Outcomes Framework

At a district level data fluctuates more widely. Cherwell district had the highest number of excess winter deaths (255) and the highest EWM Index (22.4). Cherwell and Oxford City have a higher EWM Index than Oxfordshire overall, but neither are significantly higher. Similarly, other districts have a lower EWM Index than Oxfordshire overall but none are significantly lower.

Figure 35 Excess Winter Mortality Index – districts in Oxfordshire – 2013-2016 (3 years combined)



Source: Public Health Outcomes Framework

Place of death

As of 2016, 52.8% of deaths among people aged 65 years and over in Oxfordshire were in their usual place of residence.

Oxfordshire had the third highest percentage of deaths in usual place of residence among people aged 65 years and over, in its group of nearest statistical neighbours (behind Gloucestershire and Cambridgeshire). This was significantly above the national average.

Figure 36 Percentage of deaths in usual place of residence among people aged 65 years and over

Area	Value	Lower CI	Upper CI
England	47.2	47.1	47.4
Gloucestershire	55.2	53.9	56.5
Cambridgeshire	54.4	52.9	55.8
Oxfordshire	52.8	51.4	54.3
Suffolk	52.4	51.2	53.7
Worcestershire	52.0	50.6	53.4
Somerset	51.4	50.0	52.7
West Sussex	50.9	49.8	52.0
North Yorkshire	50.7	49.4	52.0
Hampshire	50.4	49.4	51.3
Leicestershire	49.9	48.5	51.2
Surrey	49.4	48.4	50.5
Warwickshire	48.2	46.7	49.6
Buckinghamshire	48.1	46.4	49.8
Essex	46.4	45.5	47.3
Hertfordshire	46.1	45.0	47.2
Northamptonshire	44.9	43.6	46.3

Source: PHE analysis of ONS Mortality File. Includes deaths at home and in care homes

6 Lifestyles

6.1 Food and nutrition, excess weight and obesity

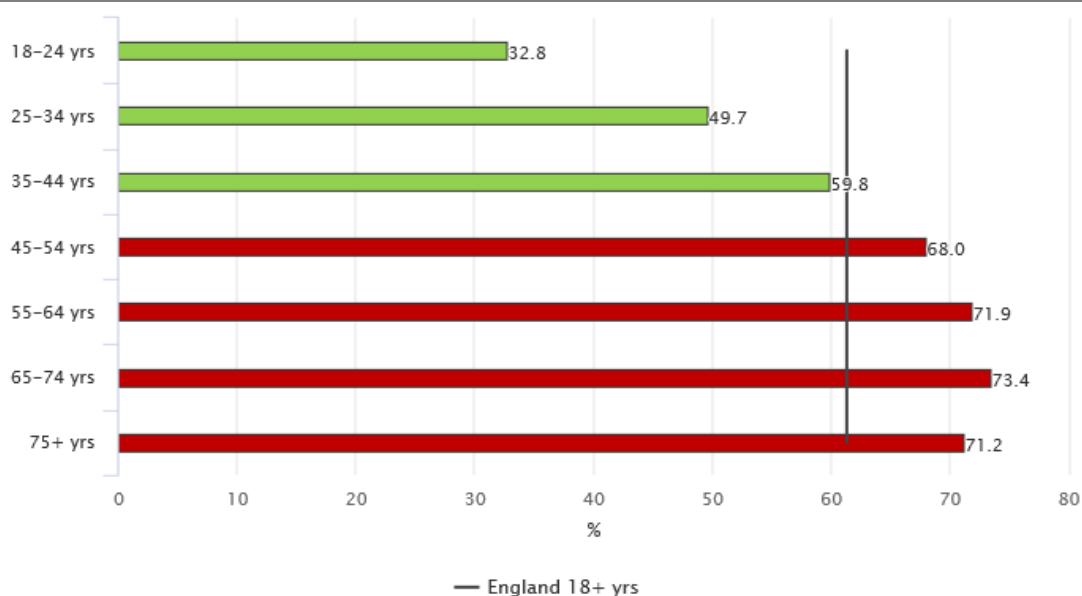
Excess weight in adults

The latest survey data for Oxfordshire on excess weight covers the year 2015/16³⁰. This estimates that 54.5% of people aged 18 or over in Oxfordshire are classified as overweight or obese, lower than the average for England (61.3%) or the South East (59.7%).

Adults in Oxford City, South Oxfordshire and West Oxfordshire were less likely to be overweight than those in England overall. This is a new survey so it cannot be compared to previous years.

Data on excess weight for older age groups is not available for Oxfordshire, as the Active Lives survey sample is too small. Data for England shows people in the age bands 45 and over are significantly more likely to be overweight or obese than average.

Figure 37 Percentage of adults classified as overweight or obese by age: England 2015/16



Source: Public Health England (based on Active Lives survey, Sport England); Number of adults aged 18+ with a BMI classified as overweight (including obese), calculated from the adjusted height and weight variables. Adults are defined as overweight (including obese) if their body mass index (BMI) is greater than or equal to 25kg/m².

³⁰ Public Health England (based on Active Lives survey, Sport England)

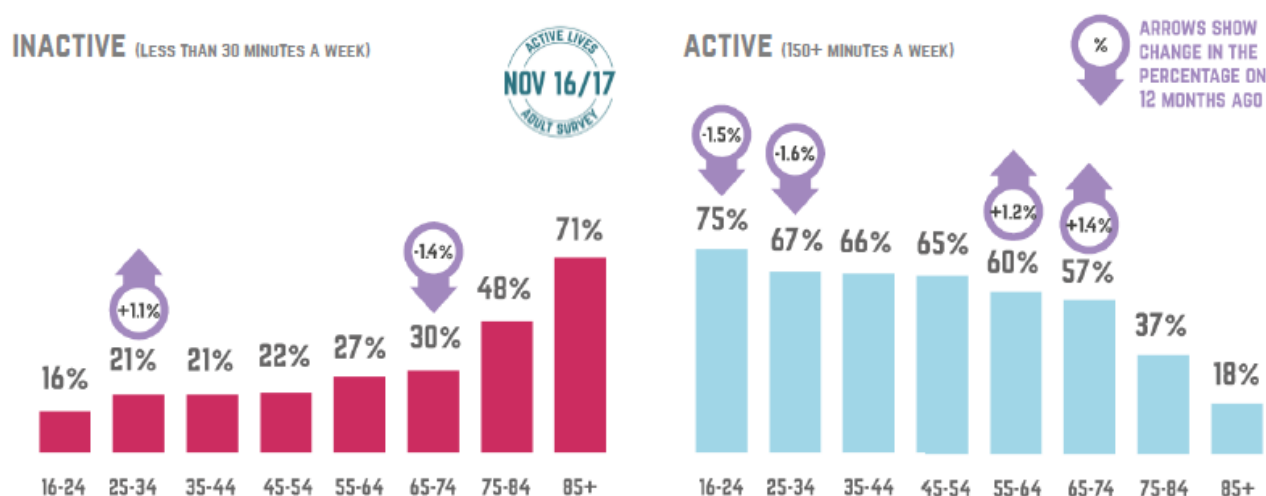
6.2 Physical activity

According to Public Health England, low physical activity is one of the top 10 causes of disease and disability in England³¹.

National data shows

- Inactivity levels generally increase with age, but the sharpest increase comes between ages 75 and 84 (48%) and age 85+ (71%).
- Activity levels have increased slightly among the 55-64 and 65-74 age groups.

Figure 38 Physical inactivity and activity by age, England



Source: Sport England Active Lives survey 2016-17 (published March 2018)

<https://www.sportengland.org/media/13052/active-lives-adult-survey-nov-16-17-report.pdf>

About the Active Lives survey

The Active Lives survey is a “push to web” survey.

It involves four postal mailouts designed to encourage participants to complete the survey online. There is also the option to take part via telephone for those whose first language is not English, and for those who may find online or paper completion difficult, for example those who are visually impaired.

The overall sample size will be around 198,250 people each year. The minimum annual sample size for each English local authority (excluding the City of London and Isles of Scilly) will be 500. Active Lives results are published every six months.

The latest findings - for the year to mid-May 2017 - were published in October 2017. Full year results covering the period mid-November 2016 to mid-November 2017 will be released March 2018.

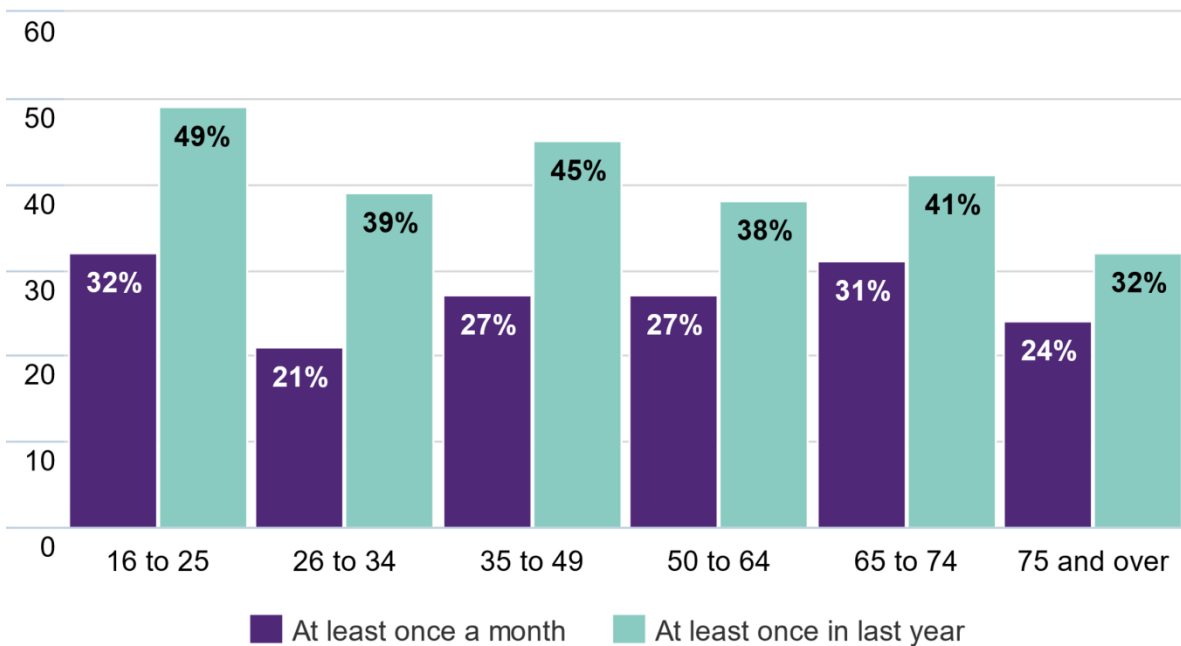
<https://www.sportengland.org/research/active-lives-survey/method-behind-active-lives/>

³¹ <https://www.gov.uk/government/publications/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day#the-benefits-of-physical-activity>

6.3 Volunteering

Adults aged 65-74 years are among the most likely to participate in volunteering at least once a month, but those aged 75+ were among the least likely. In both age groups over 65 years, women are more likely to participate in regular volunteering than men.

Figure 39 Proportion of people formally volunteering by age group, 2015/16 (% respondents)



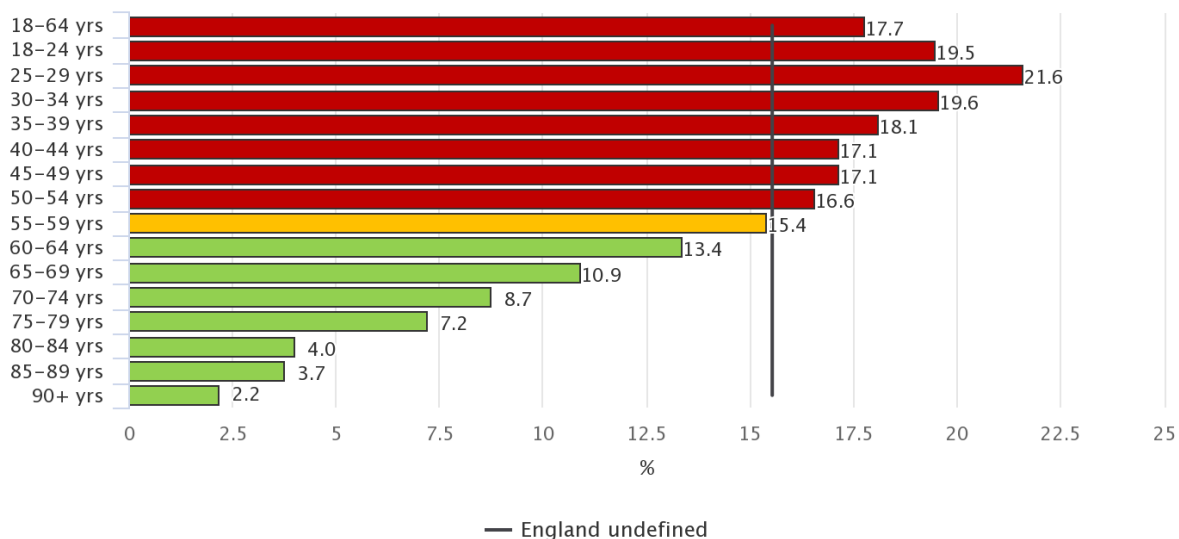
Source: NCVO UK Civil society almanac: volunteer profiles. From Community Life Survey 2015/16

6.4 Smoking

Smoking prevalence split by age group is not available at a local level. In England, smoking prevalence in older age groups is significantly lower than in all age groups combined³².

Extrapolating from this national data, there could be over 9,200 current smokers aged over 65 in Oxfordshire³³.

Smoking prevalence in adults partitioned by age, England 2016



Source: Public Health England [Local Tobacco Profiles](#) from Annual Population Survey

6.5 Alcohol and drugs

Over 65s in Oxfordshire have higher rates of alcohol-related hospital admissions than younger age groups.

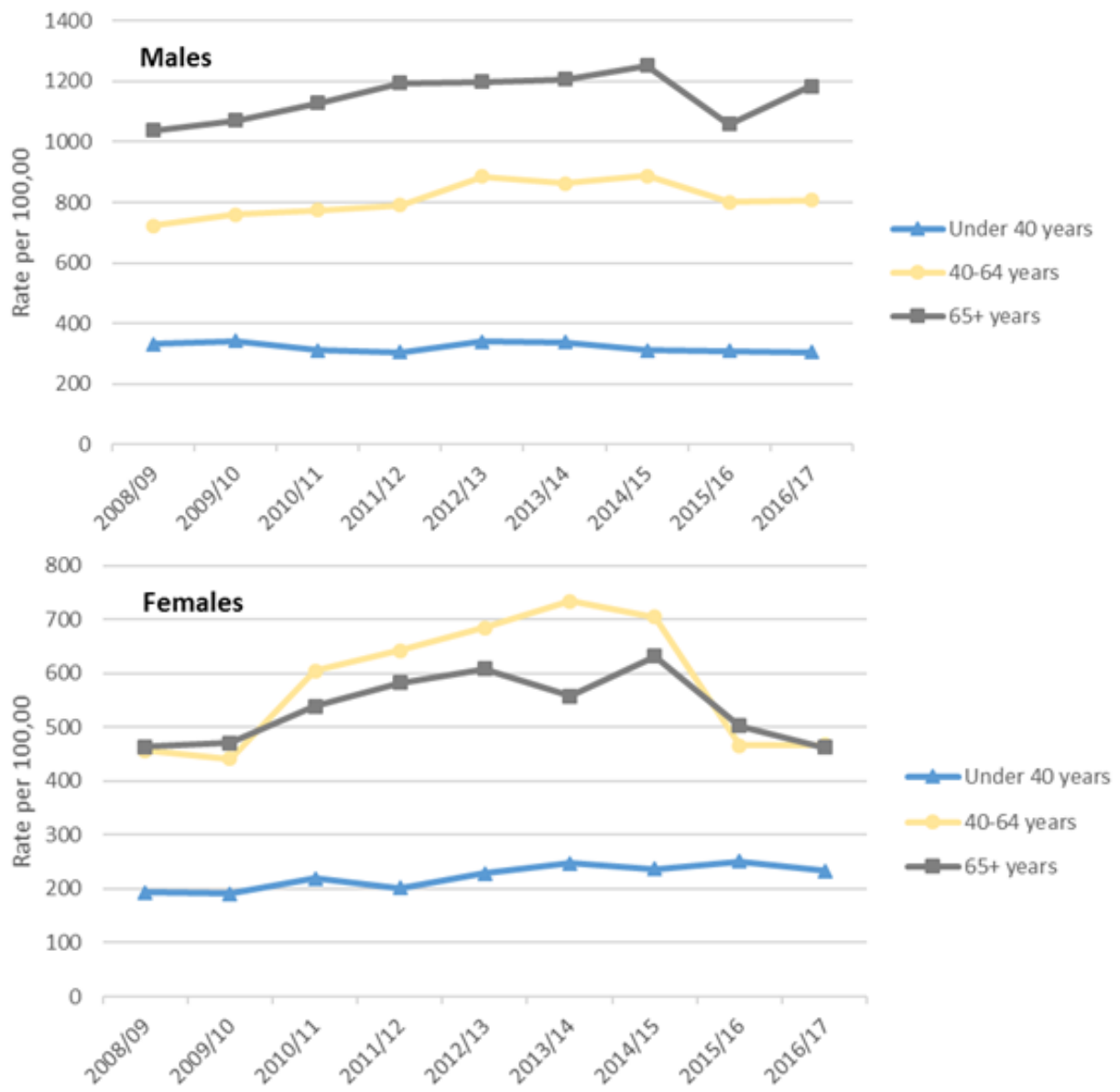
In the most recent data (2016/17), there were 1,184 admissions per 100,000 males aged 65+, compared to 463 per 100,000 females in the same age group.

Admissions are highest in Oxford city, where the rate is statistically similar to England. Rates in other districts are significantly lower than England.

³² <https://fingertips.phe.org.uk/profile/tobacco-control>

³³ Calculated using ONS mid-2016 year estimates
<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland>

Figure 40 Admission episodes for alcohol-related conditions (narrow), directly standardised rate per 100,000 people, Oxfordshire males and females by age



Definition: Admissions to hospital where the primary diagnosis is an alcohol-attributable code or a secondary diagnosis is an alcohol-attributable external cause code. Source: Public Health England Local Alcohol Profiles from Hospital Episode statistics and ONS population estimates.

7 Service use

7.1 Primary health care

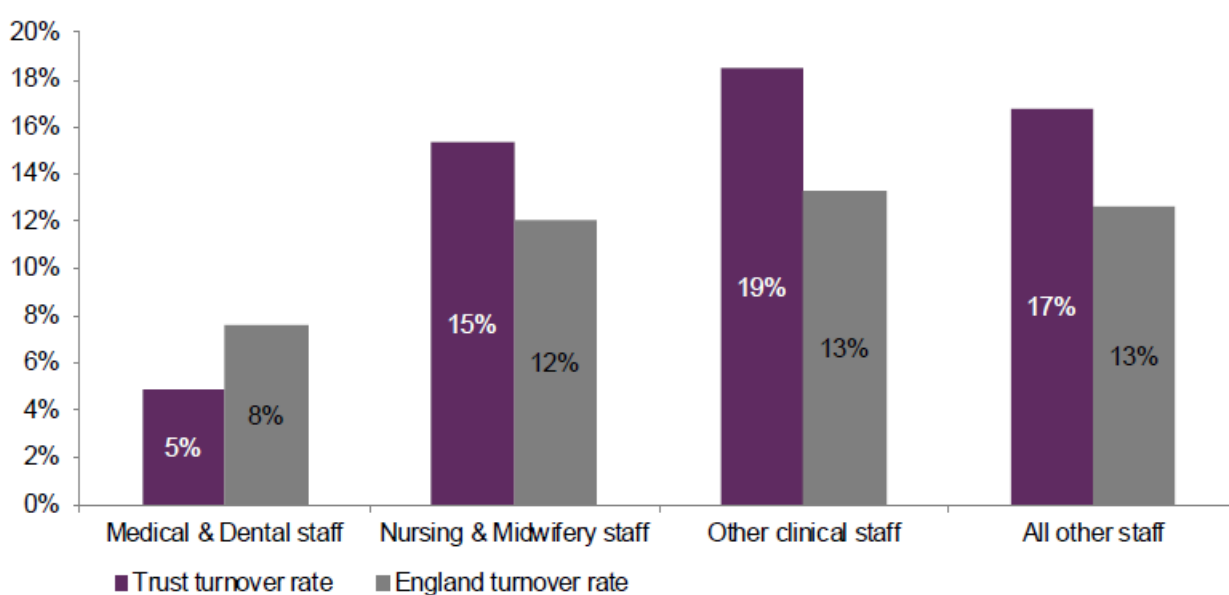
Healthcare workforce

As of September 2017, there were 406 full time equivalent GPs (including salaried, retainers, registrars and locums) in Oxfordshire CCG practices, 59.5 per 100,000 population³⁴. This was just below the national average of 60.3 per 100,000 population.

NHS experimental vacancy statistics published January 2018³⁵ include comparative organisational level vacancy data for the first time. This shows a total of 644 advertised vacancies (full time equivalents) for Oxford Health NHS FT, Oxford University Hospitals NHS FT and Oxfordshire CCG in September 2017. 44% were for nurses/midwives and 22% were administrative and clerical.

Care Quality Commission analysis shows that from mid-2016 to mid-2017 Oxfordshire NHS Acute staff turnover for nursing & midwifery staff, other clinical and non-clinical staff was well above the England average.

Figure 41 NHS Acute Staff Turnover 1Jul16 to 30Jun17



Source: CQC analysis. Levels of staff turnover and stability within acute hospital services between 01 July 2016 and 30 June 2017. Oxfordshire is Oxford University Hospitals NHS Foundation Trust. Turnover data is based on headcount and shows people leaving or returning to active service.

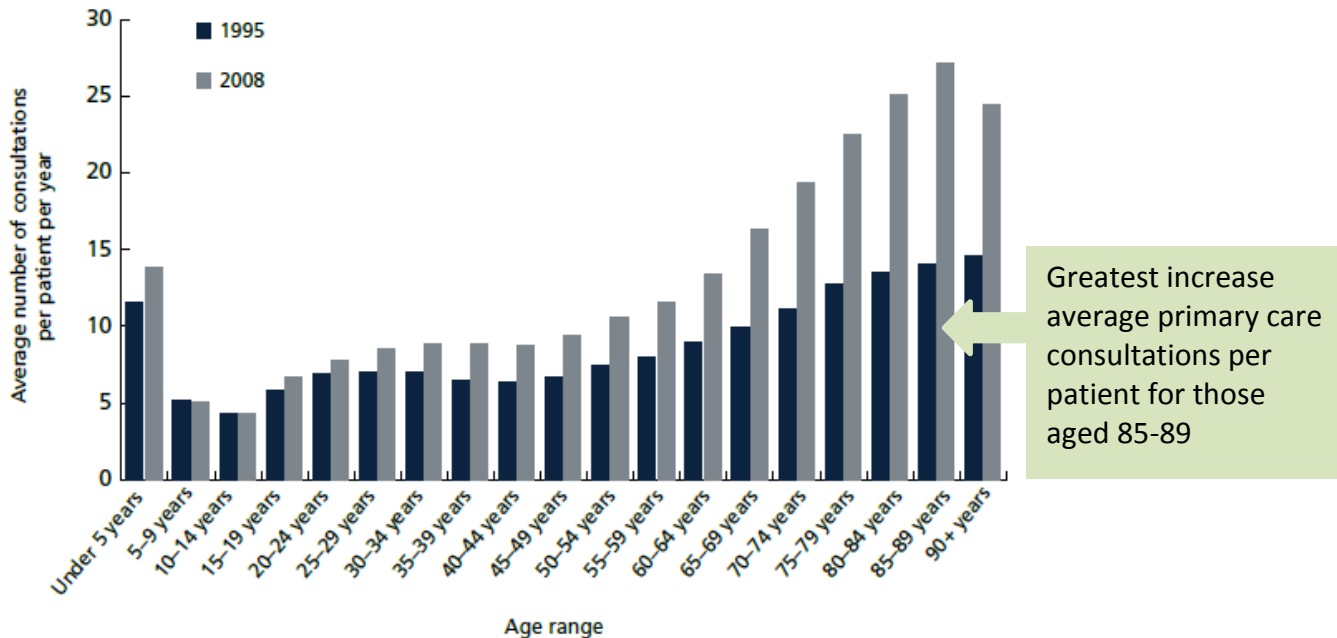
³⁴ General Practice Provisional Tables September 2017 <https://digital.nhs.uk/catalogue/PUB30149>; ONS 2016 mid-year population estimate

³⁵ NHS Vacancy Statistics England, February 2015 - September 2017, Provisional Experimental Statistics, January 23, 2018

Contact with GPs

National data suggests that the number of primary care consultations per patient per year has increased significantly, especially in the older age groups.

Figure 42 Change in the average number of primary care consultations per patient per year in England 1995 to 2008



Source: The 2022 GP Compendium of evidence, Royal College of General Practitioners; data from Hippisley-Cox J, Vinogradova Y. Trends in consultation rates in general practice 1995/96 to 2008/9. Datasets are available from https://data.gov.uk/dataset/trends_in_consultation_rates_in_general_practice

More recent analysis comparing 2007 to 2014 primary care consultations³⁶ has shown this trend continuing.

A study carried out by the Oxfordshire Clinical Commissioning Group, based on data from 12 (self-selecting) OCCG Practices, shows an increase in consultation rates in the older age bands, similar to the national trend.

- The number of consultations per person aged 80 and over doubled between 2009-10 and 2013-14.

³⁶ Clinical workload in UK primary care: a retrospective analysis of 100 million consultations in England, 2007–14 [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)00620-6/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)00620-6/abstract)

GP Patient Survey

The GP Patient Survey takes place twice a year and asks patients about experiences of their local GP surgery and other local NHS services.

About the GP Patient Survey

The GP Patient Survey (GPPS) is an England-wide survey, providing practice-level data about patients' experiences of their GP practices.

Ipsos MORI administers the survey on behalf of NHS England.

The survey measures patients' experiences across a range of topics, including:

- Making appointments
- Waiting times
- Perceptions of care at appointments
- Practice opening hours
- Out-of-hours services

The GP Patient Survey provides data at practice level using a consistent methodology, which means it is comparable across organisations and over time.

The survey has limitations:

- Sample sizes at practice level are relatively small.
- The survey does not include qualitative data which limits the detail provided by the results.
- The data are provided twice a year rather than in real time.

The July 2017 GPPS results report on the wave of fieldwork carried out in January to March 2017.

In NHS OXFORDSHIRE CCG, 20,111 questionnaires were sent out, and 8,157 were returned completed. This represents a response rate of 41% (similar to the previous year).

<http://gp-patient.co.uk>

Use of GP services

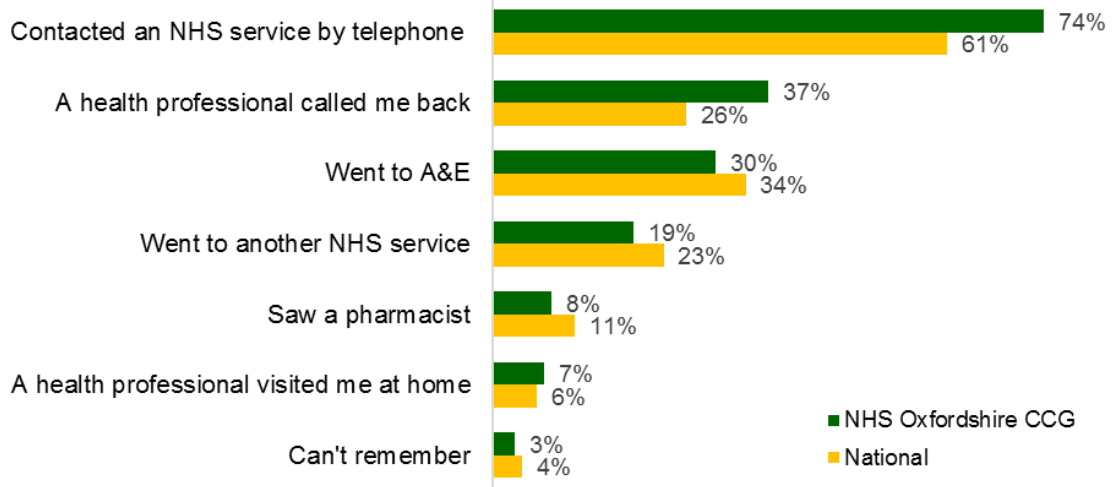
The 2017 GP Patient survey shows that 67% of respondents in the Oxfordshire Clinical Commissioning Group area had seen or spoken to a GP within the last six months. This was similar to the England rate (68%) and similar to Oxfordshire CCG rate in 2016 (68%).

Satisfaction with GP services overall in Oxfordshire was significantly higher than for England. 89% rated their GP surgery as good (very good or fairly good) compared with 85% nationally.

Out of hours contact

According to the 2017 GP Patient Survey, when contacting an NHS service outside of GP surgery hours, a higher proportion than average of Oxfordshire respondents made contact by telephone (74% in Oxfordshire CCG compared with 61% across England) and a slightly lower than average proportion went to A&E (30% in Oxfordshire CCG compared with 34% nationally).

Figure 43 Services contacted out of hours (Q: Considering all of the services you contacted, which of the following happened on that occasion?) 2017



Source: GP Patient Survey 2017 (Jan-Mar 2017 wave); Base: All those who tried to contact an NHS service when GP surgery closed in the past 6 months: National 140,428; CCG 1,677

7.2 Secondary Health Care

Hospital inpatients

In 2016-17 there was around 51,700 inpatient spells for Oxfordshire residents aged 65 and over, an increase of 3% on the previous year.

Table 17 Inpatient spells for Oxfordshire residents aged 65 and over

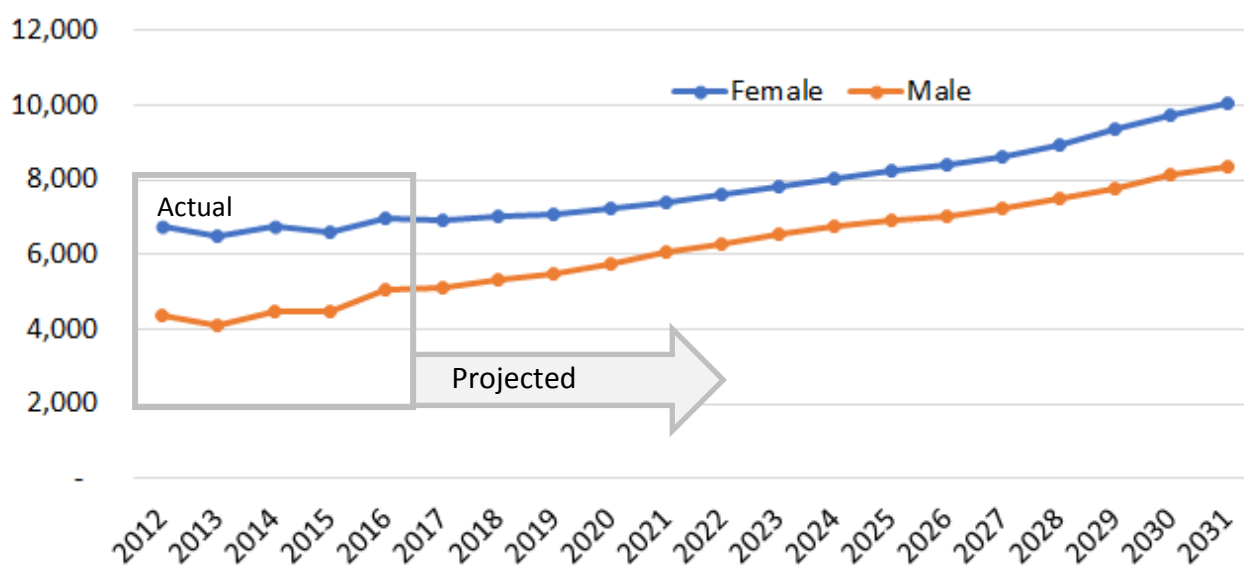
	2012-13	2013-14	2014-15	2015-16	2016-17	2015-16 to 2016-17	
Cherwell	10,927	10,315	10,740	11,413	12,139	726	6%
Oxford	9,010	8,051	8,822	8,669	8,955	286	3%
South Oxfordshire	11,784	10,697	11,674	10,775	10,981	206	2%
Vale of White Horse	10,259	9,163	9,903	9,790	9,948	158	2%
West Oxfordshire	9,341	8,663	9,200	9,331	9,700	369	4%
TOTAL Oxfordshire	51,321	46,889	50,339	49,978	51,723	1,745	3%

Source: Inpatient activity from NHS South, Central and West CSU

Of these, around 12,000 inpatient spells were for Oxfordshire residents aged 85 and over, 10% of the total number of inpatient spells.

Assuming that the over 85 population continues to need inpatient services at the same rate as the past 3 years, and using the forecast growth in population (County Council Apr18), gives a potential increase of an additional 6,400 inpatient spells for people aged 85+ by 2031-32 to a total of 18,400.

Figure 44 Actual and projected number of inpatient spells for Oxfordshire residents aged 85+



Source: Inpatient activity from NHS South, Central and West CSU; ONS population estimates and Oxfordshire County Council population forecasts (Mar18). Rate calculated using 3-year average of actual inpatient spells 2014-15 to 2016-17 and applying this rate to the

forecast for Oxfordshire's 85+ population. Year is mid-year for population estimates and financial year for inpatient spells (2012 = 2012-13).

Table 18 Actual and projected number of inpatient spells for Oxfordshire residents aged 85+

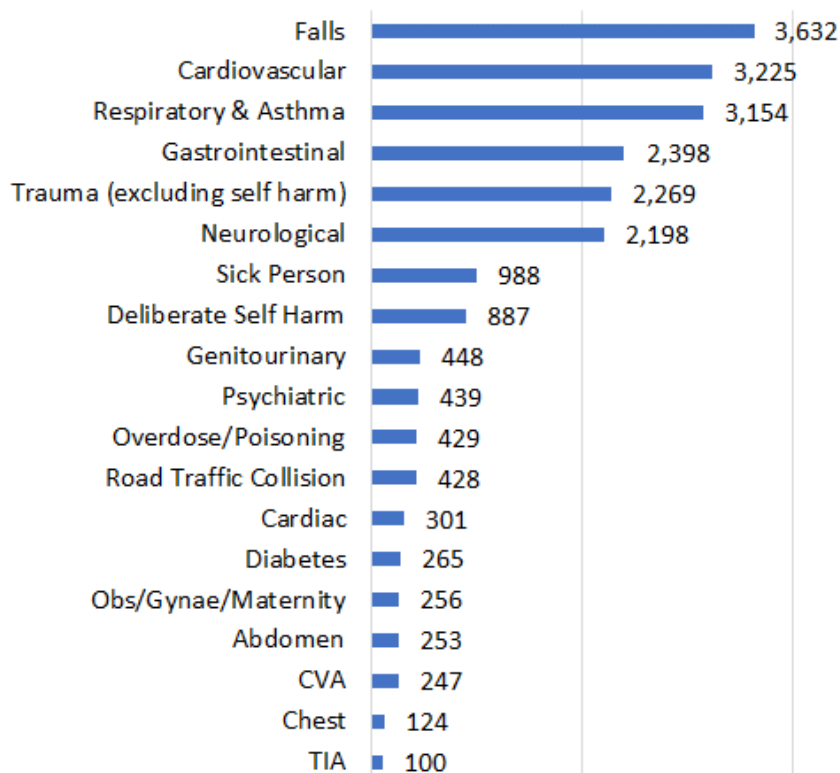
	ACTUAL	PROJECTED			CHANGE
	2016-17	2021-22	2026-27	2031-32	2016-17 to 2031-32
Females	7,000	7,400	8,400	10,000	3,000
Males	5,000	6,100	7,000	8,300	3,300
TOTAL	12,000	13,500	15,400	18,400	6,400

Source: Inpatient activity from NHS South, Central and West CSU; ONS population estimates and Oxfordshire County Council population forecasts (Mar18). Rate calculated using 3-year average of actual inpatient spells 2014-15 to 2016-17 and applying this rate to the forecasts for Oxfordshire's 85+ population.

Use of Ambulance services

In 2016-17 there was a total of 32,100 ambulance trips matched to A&E or inpatient records for Oxfordshire residents (all ages). The top condition/complaint was falls, accounting for 3,600 ambulance trips, 11% of the total.

Figure 45 Ambulance trips by condition* – Oxfordshire residents 2016-17

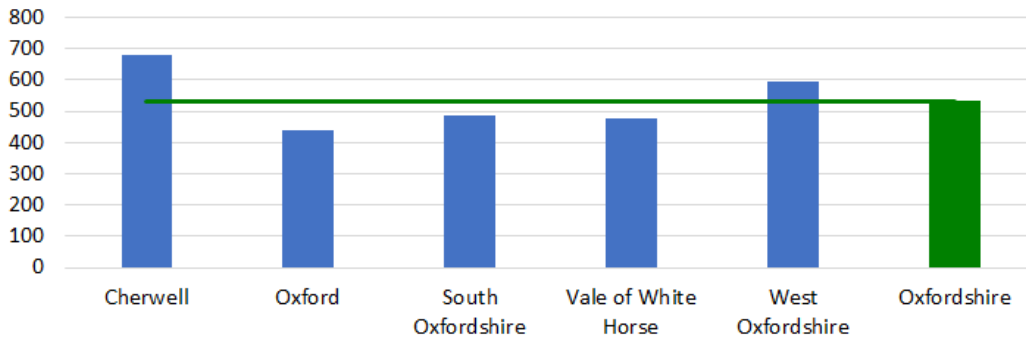


Source: Ambulance activity data provided by NHS South, Central and West Commissioning Support Unit;

*refers to the presenting ailment of the patient when the 999/111 call is made. These condition categories are created by grouping similar conditions present in the ambulance data and were created without clinical input and as such should be treated as broadly indicative

The rate per population of Ambulance service activity due to falls was above the county average in Cherwell and West Oxfordshire.

Figure 46 Ambulance trips due to FALLS, crude rate per 100,000 population 2016-17



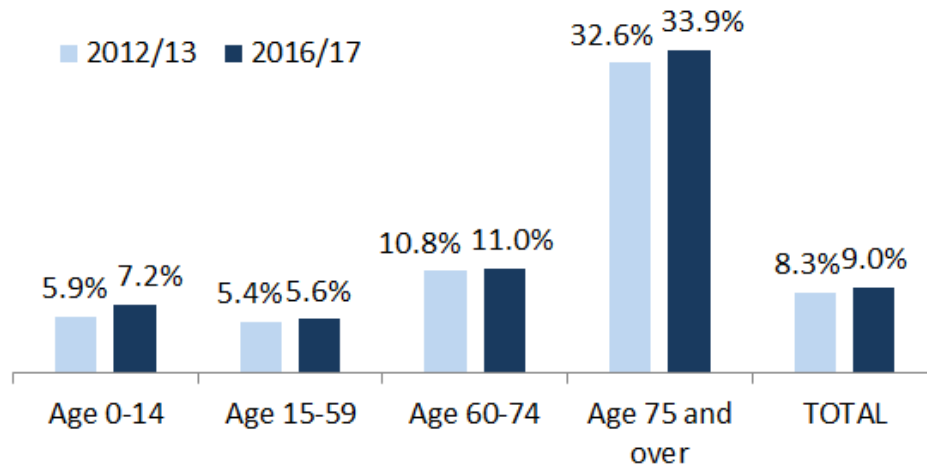
Source: Ambulance activity data provided by NHS South, Central and West Commissioning Support Unit, ONS 2016 population estimate

Emergency hospital admissions

Between 2012-13 and 2016-17, the proportion of emergency hospital admissions for patients registered to OCCG practices increased from 8.3% to 9% (as a percentage of the ONS estimate of resident population).

The greatest increases have been in the age groups 0-14 and 75+.

Figure 47 Emergency hospital admissions patients registered to Oxfordshire CCG practices, as % of population



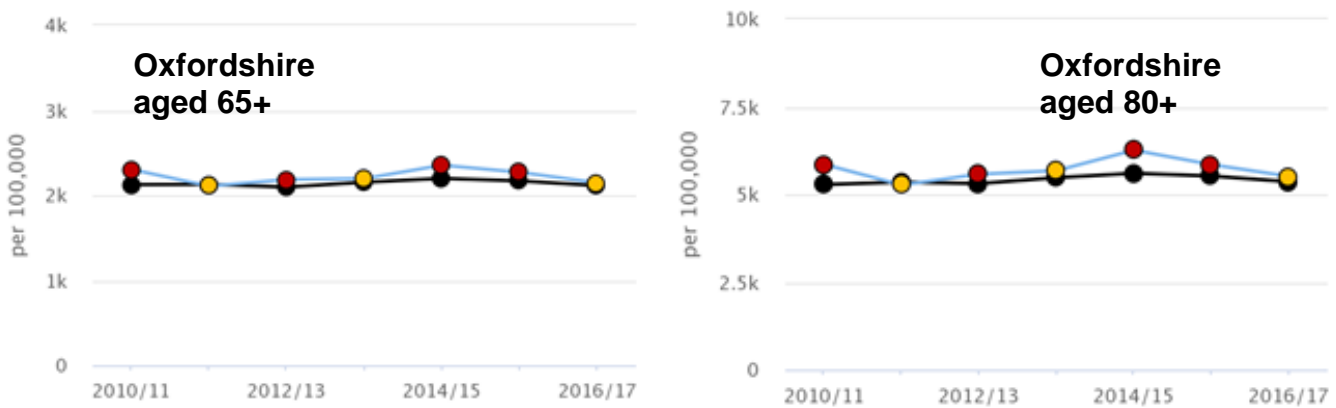
Source: NHS South, Central and West Commissioning Support Unit; ONS population estimates for Oxfordshire county

Emergency admissions for injuries due to a fall

According to Public Health England data, in 2016-17 there was a total of 2,683 emergency hospital admissions due to falls in Oxfordshire for people aged 65 and over of which the majority (1,850, 69%) were admissions for people aged 80 and over.

As of 2016-17 Oxfordshire was statistically similar to the England and South East average rates of injuries due to falls in people aged 65 and over, and for people aged 80 and over. In each age group the rate was statistically similar in both males and females.

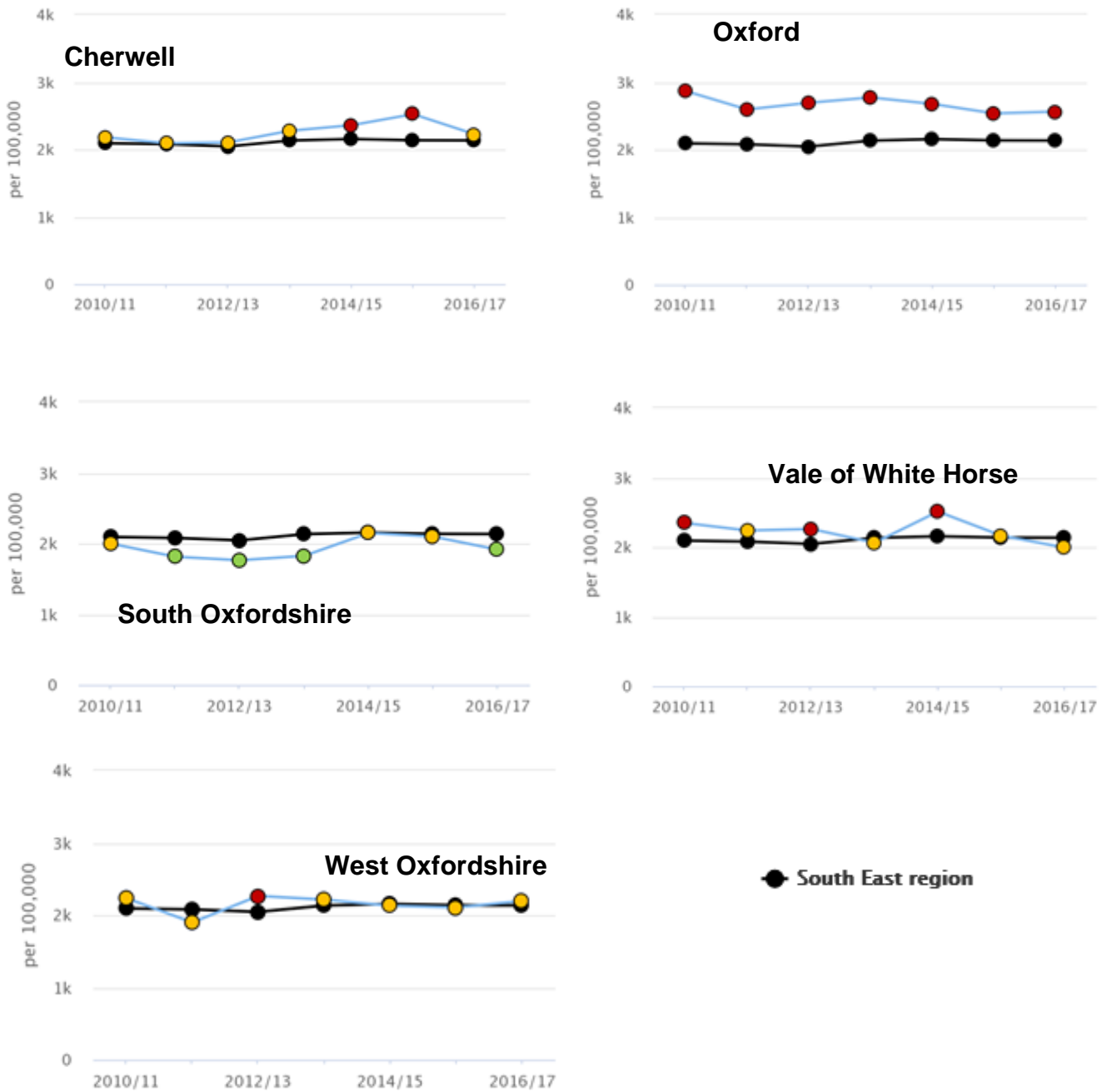
Figure 48 Emergency hospital admissions due to falls in people aged 65+ and 80+ (directly age-sex standardised rate per 100,000)



Source: Public Health Outcomes Framework

Within the districts, emergency hospital admissions for falls in people aged 65+ were statistically above average in Oxford, and below average in South Oxfordshire in the latest year of data.

Figure 49 Emergency hospital admissions due to falls in people aged 65+ (directly age-sex standardised rate per 100,000)



Source: Public Health Outcomes Framework

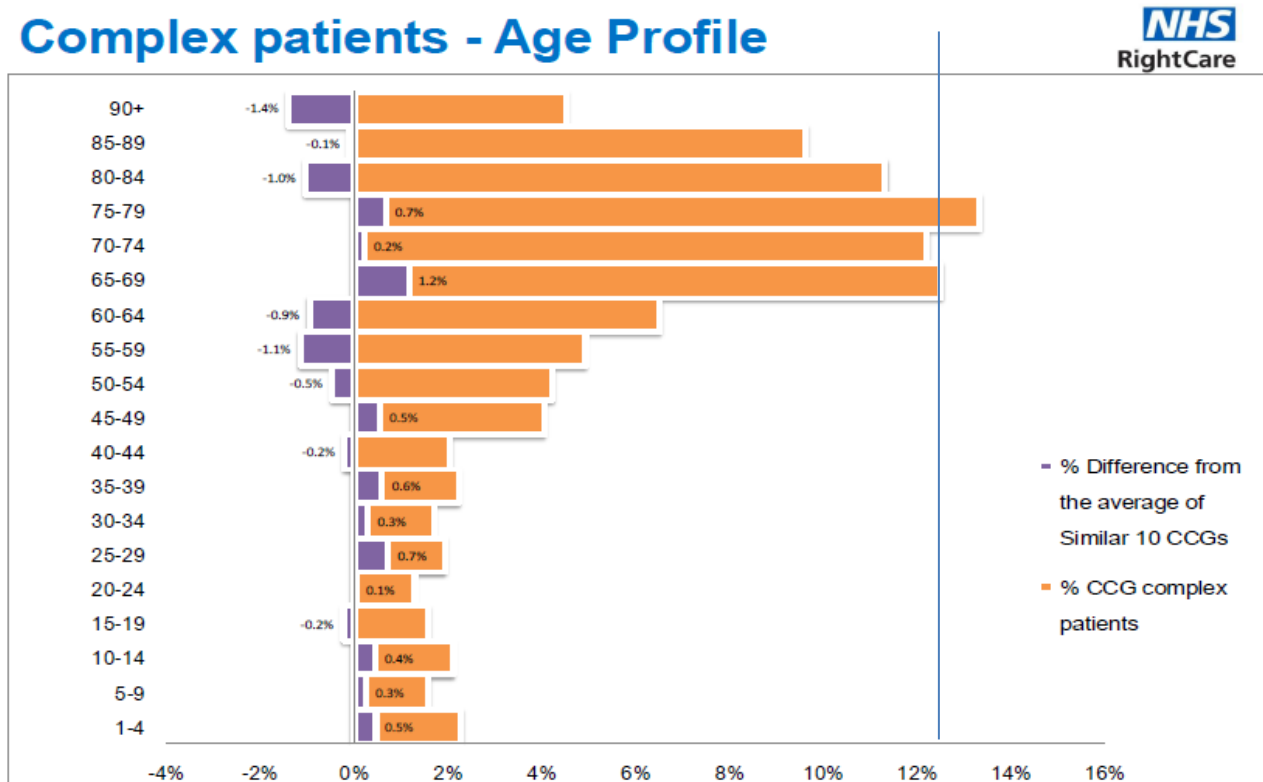
Complex patients and Co-morbidities

The NHS³⁷ Rightcare pack for Oxfordshire CCG shows information on complex patients.

- Data on “complex patients” include analysis on inpatient admissions, outpatient and A&E attendances for the 2% of patients that your CCG spends the most on for inpatient admissions in 2015/16. Nationally the most common conditions of admissions for complex patients are circulation; cancer; and gastro-intestinal problems.
- Whilst this NHS analysis only focuses on secondary care due to availability of data, it is expected that these patients are fairly representative of the type of complex patients who will require the most treatment across the health and care system. However, it is not possible to include analysis on mental health patients as they are not captured fully in these datasets.

Almost two thirds (64%) of Oxfordshire CCG’s complex patients are aged over 65+. The proportion aged 65 to 79 was above average of 10 similar CCGs.

Figure 50 Age profile of Oxfordshire CCG complex patients and % difference from the average of Similar 10 CCGs 2015-16



Source: Rightcare “Commissioning for Value – where to look pack” for Oxfordshire CCG (Jan 2017)

“Co-morbidities” is the presence of one or more additional diseases or disorders co-occurring with a primary disease or disorder.

³⁷ Rightcare “Commissioning for Value – where to look pack” for Oxfordshire CCG (Jan 2017)
<https://www.england.nhs.uk/rightcare/wp-content/uploads/sites/40/2017/01/cfv-oxfordshire-jan17.pdf>

The following chart shows the count of Oxfordshire Clinical Commissioning Group complex patients by main condition and co-morbidity conditions.

This shows, for example, that of the 519 patients admitted for Gastro intestinal conditions in 2015-16, 172 also had admissions for a Cancer condition. Of the 497 patients admitted for Cancer conditions, 139 also had admissions for a Respiratory condition.

Figure 51 Complex patients – co-morbidities (NHS Rightcare) 2016-17

Main conditions	Co-morbidity 1	Co-morbidity 2	Co-morbidity 3	Co-morbidity 4	Co-morbidity 5
Gastro intestinal	Cancer	Respiratory	Circulation	Neurological	Genito Urinary
519 patients	172	136	116	129	112
Cancer	Gastro intestinal	Respiratory	Circulation	Genito Urinary	Neurological
497 patients	172	139	97	91	101
Circulation	Respiratory	Gastro intestinal	Neurological	Cancer	Genito Urinary
511 patients	165	116	129	97	104
Respiratory	Circulation	Cancer	Gastro intestinal	Neurological	Genito Urinary
469 patients	165	139	136	137	104
Neurological	Gastro intestinal	Circulation	Respiratory	Cancer	Genito Urinary
444 patients	129	129	137	101	106

Source: Rightcare "Commissioning for Value – where to look pack" for Oxfordshire CCG (Jan 2017)

Interpreting co-morbidities: Co-morbidities are ranked by the number of different conditions (based on programme budgeting subcategories) that patients are admitted for. This ranking may be different if based on the number of patients that have had an admission for each condition

Hospital Discharge and Delayed Transfers of Care

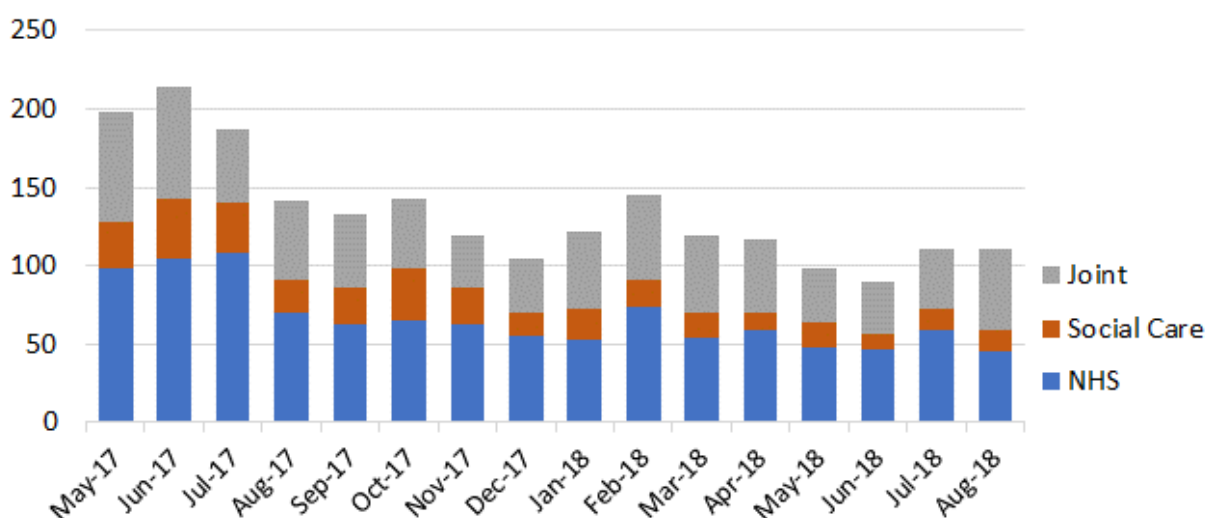
A delayed transfer of care occurs when a patient is deemed medically fit to depart from their current care but is unable to do so for non-clinical reasons, for example because the patient is awaiting a care package in their own home, or for further, non-acute, care.

The indicator for Delayed Transfers of Care (DTOC) has been changed to DTOC Beds (replacing number of patients delayed on the last Thursday of each month) in order to be more representative of the position across the whole month³⁸.

Between May 2017 and May 2018, the number of DTOC Beds (delayed days divided by calendar days) for Oxfordshire patients reduced by a half, from 198 to 99.

The latest monthly data, for August 2018, showed 111 DTOC Beds in Oxfordshire. Of these 42% were NHS delays, 12% were Social Care delays and 46% were joint NHS and Social Care.

Figure 52 Delayed Transfers of Care (DTOC Beds) Oxfordshire May 2017 to August 2018



Source: Data from Delayed Transfer of Care (DTOC) Report 2015-16 to 2018-19 by NHS South Central and West Commissioning Support Unit to August 2018. From data collected by NHS England.

³⁸As of April 2017, data on the number of patients delayed on the last Thursday of the month is no longer being collected. This measure has been replaced in the Delayed Transfers of Care publication files by a similar measure called DTOC Beds. The DTOC Beds figure is calculated by dividing the number of delayed days during the month by the number of calendar days in the month. This provides a similar figure to the patient snapshot, but is more representative of the entire month rather than providing a view on one particular day <https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/>

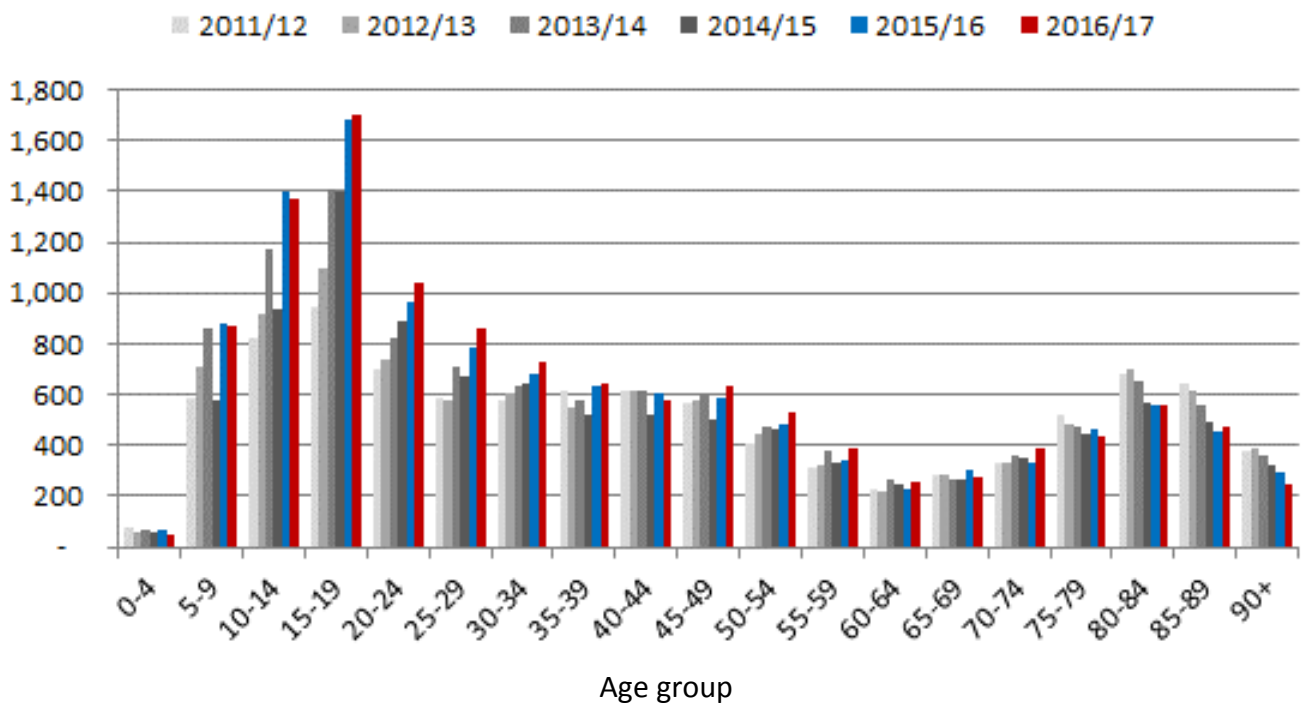
7.3 Mental Health Services

Oxford Health Mental Health Referrals

There has been an increase in the total number of referrals and in the number of patients referred to mental health services in Oxfordshire.

Mental health referrals for the older age groups have generally declined as older people with mental health issues are seen by other services, including the dementia service.

Figure 53 Number of Oxfordshire residents referred to Oxford Health mental health services (2011-12 to 2016-17)



Source: Oxford Health NHS Foundation Trust

7.4 Social care

Many people with care needs require both health and social care and the distinction between health and social care is not always clear. Oxfordshire County Council and the Clinical Commissioning Group have pooled some of their money together to provide more efficient commissioning of care and better integration of health and social care services.

Note that social care client data published in *NHS Digital, Adult Social Care Activity and Finance: England 2016-17* does not include all social care clients funded by the pooled budget in Oxfordshire.

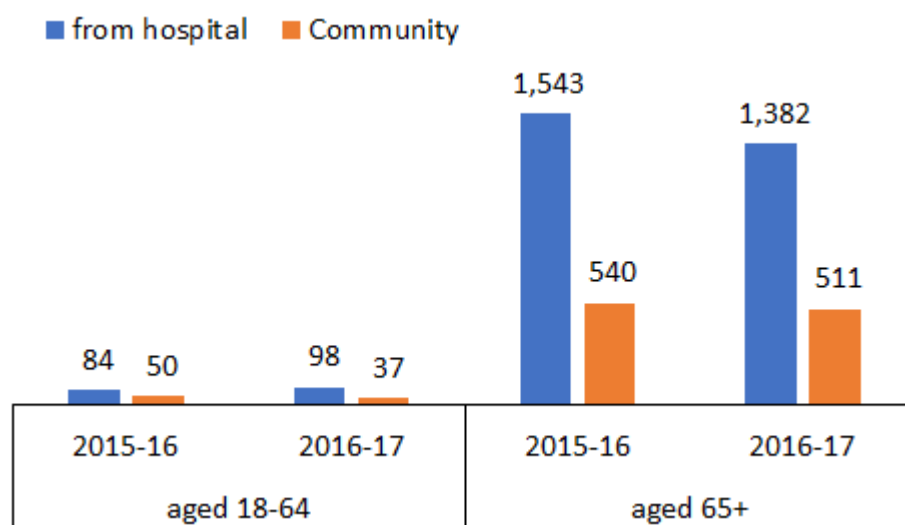
Short-Term (Reablement) Adult Social Care

'Reablement' is a social care service aimed at supporting people to regain independence that may have been reduced or lost through illness or disability.

In 2016-17, a total of 2,028 adults in Oxfordshire were provided with reablement services by Oxfordshire County Council. This was below the number in 2015-16 (2,217, -9%).

The vast majority (93%) of people provided with reablement services were aged 65+ and around three quarters (73%) of the total received a service following a stay in hospital.

Figure 54 Number of people provided with reablement social care services, 2015-16 and 2016-17



Source: Oxfordshire County Council

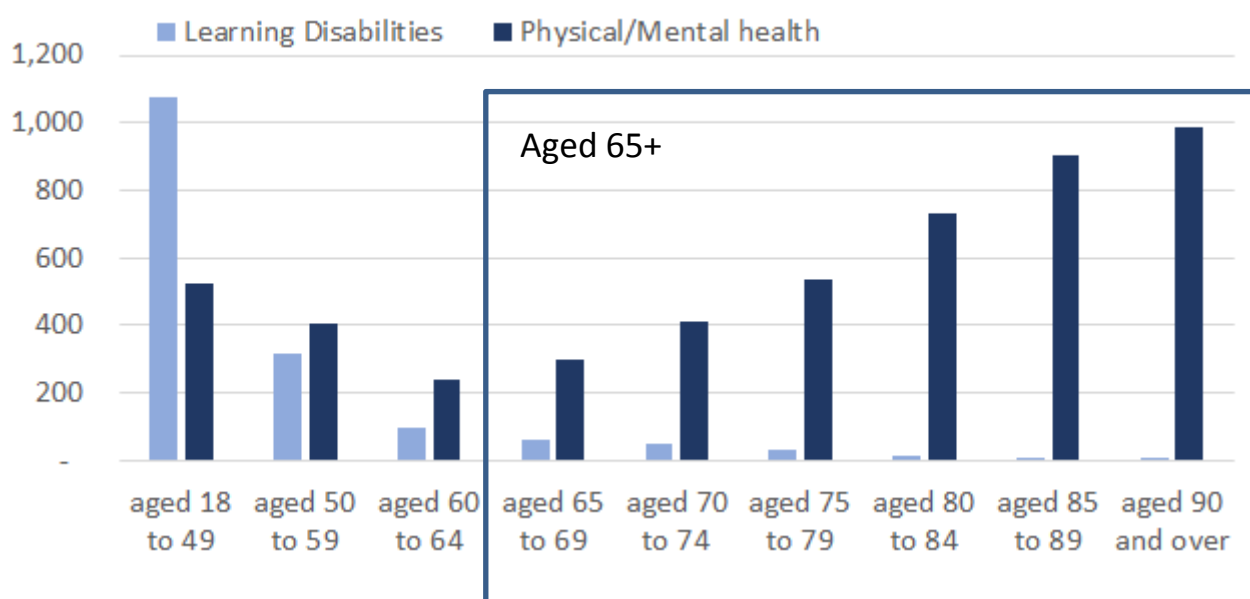
Long-Term Adult Social Care

At the end of March 2017 there were **6,713** adults in Oxfordshire receiving long-term social care from Oxfordshire County Council, up from 6,214 in March 2016 (+8%).

The majority (60%) of Oxfordshire's long term social care clients are older people aged 65 and over.

A quarter (25%) of people receiving social care support are people with learning disabilities.

Figure 55 Number of adults provided with long-term social care services by Oxfordshire County Council 2016-17 by broad age and category



Source: Oxfordshire County Council

As of March 2017, 1,900 people aged 85+, (equivalent to 11% of the population aged 85 and over³⁹ in Oxfordshire) were receiving long-term social care services provided by Oxfordshire County Council.

Demand for services is expected to continue to grow in the future as a result of:

- an increase in people with a learning disability needing social care support.
 - 30% of people in Oxfordshire with a learning disability first approach the council for services after their 25th birthday. For many this is because their parents can no longer provide all their care. The average age of a service user with learning disability is 44 and over a third are over 50.
- the predicted growth in the older population in Oxfordshire (see chapter 2).

Applying the predicted growth in Oxfordshire's population aged 85+ (Oxfordshire County Council forecasts Apr18) to the proportion of social care clients in the age group 85+, gives a potential increase of +1,000 clients aged 85+ by 2031 to a total of 2,900.

³⁹ Denominator is ONS 2016 mid-year estimate

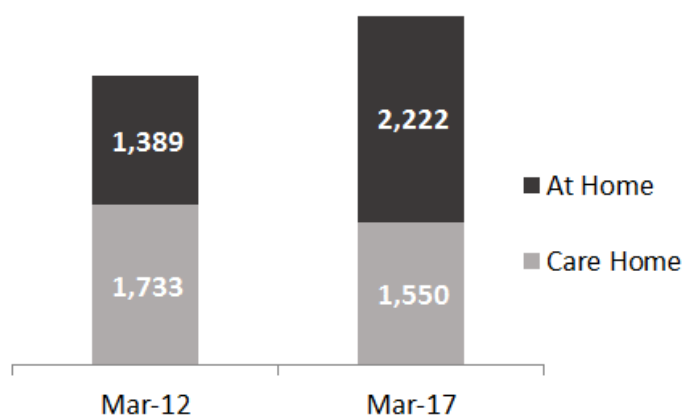
Table 19 Potential growth in number of people aged 85+ needing long-term social care services in Oxfordshire by 2031

	March 2017	March 2031	Change
Population aged 85+	17,000	26,400	
Social care clients aged 85+	1,900	2,900	+1,000

Source: Oxfordshire County Council

Care setting

There has been an increase in the proportion of older social care clients supported at home, from 44% of older clients in 2012 to 59% in 2017.

Figure 56 Older clients of long-term social care services provided by Oxfordshire County Council receiving services at home vs in a care home

Source: Oxfordshire County Council; excludes learning disabilities, physical disabilities and other services

By district, the highest number of older people being supported with long-term social care services as of end March 2017 was in Cherwell. The highest rate per 1,000 population was Oxford City.

Table 20 Older clients of long-term social care services provided by Oxfordshire County Council by setting: count and rate per 1,000 population aged 65+ (March 2017)

	Care home		Supported at home		Total	
	Count	Rate	Count	Rate	Count	Rate
Cherwell	297	11.5	571	22.1	868	33.6
Oxford	274	14.9	408	22.2	682	37.1
South Oxfordshire	282	9.9	376	13.2	658	23.2
Vale of White Horse	258	10.0	442	17.2	700	27.2
West Oxfordshire	336	14.8	404	17.8	740	32.6
Oxfordshire total	1,447	12.0	2,201	18.2	3,648	30.1

Source: Oxfordshire County Council, ONS 2016 population estimates; excludes those supported outside Oxfordshire

Adult Social Care User Survey

About the Adult Social Care User Survey

For the last six years, councils have surveyed users of social care aged 18 and over as part of a national survey. The survey is run each February for people receiving social care funded wholly or in part by councils in the previous September. Its purpose is to learn more about whether or not the services are helping them to live safely and independently in their own home, and to understand the impact on their quality of life. In the 2016-17 survey, 563 adult social care users in Oxfordshire responded.

The headline measure produced by the survey is an overarching view of the 'quality of life for users of social care'. This is a composite measure of eight questions in the survey. The measure identifies whether, after care has been provided, people still have needs in any of the following areas: control over their daily life; being clean and presentable; having enough food and drink; having a clean and comfortable home; feeling safe; having adequate social contact; spending time as they wish and being treated with dignity.

<http://www.hscic.gov.uk/socialcare/usersurveys>

In 2016-17, social care-related quality of life in Oxfordshire remained at a similar level to the previous five years. It also remained above the national average and above average for shire counties.

The proportion of care users who were very satisfied with their care and support in 2016-17 was 67.7%, above the national average of 64.7%.

The proportion of respondents who find it "very easy" or "fairly easy" to find information about services in Oxfordshire was below average: 72.5% in Oxfordshire, compared with 73.5% nationally and 74.5% in the South East.

Note that a new Adult Social Care Survey for 2017-18 has just been released⁴⁰. A full report, including findings for older people, is in development and will be published on Oxfordshire Insight.

⁴⁰ <https://digital.nhs.uk/data-and-information/publications/statistical/personal-social-services-adult-social-care-survey/2017-18>

Disabled Facilities Grants

Between January 2017 and December 2017, there was a total of 1,191 applications for a Disabled Facilities Grant, the majority (59%) from people living in social rented housing.

The district with the highest number of applications was Cherwell.

Table 21 Applications for Disabled Facilities Grants Jan to Dec 2017

	Cherwell	Oxford City	South Oxon	Vale of WH	West Oxon	Not Recorded	Un-known	TOTAL	
Owner Occupier	89	4	62	38	53	164	13	423	36%
Private Rented	9	1	2	8	5	16	1	42	4%
Social rented	88	178	93	76	62	180	20	697	59%
Not recorded	4	1	5	4	1	13	1	29	2%
TOTAL	190	184	162	126	121	373	35	1,191	100%

Source: Oxfordshire County Council LAS

About Disabled Facilities grants

Local Authorities provide Disabled Facilities Grants for people who are disabled and need to make changes to their home, for example to:

- widen doors and install ramps
- improve access to rooms and facilities - e.g. stairlifts or a downstairs bathroom
- provide a heating system suitable for needs
- adapt heating or lighting controls to make them easier to use

<https://www.gov.uk/disabled-facilities-grants>

Self-funding care

Oxfordshire County Council estimates that: of the total number of older people receiving care in Oxfordshire, 40% (4,200) are being supported by the County Council or NHS funding and 60% (6,300) are self-funding their care.

Table 22 Estimate of older people who are self-funding long term care in Oxfordshire

	Count
1. OCC and NHS funded care home beds	
1.1 People aged 65+ in Care homes* who are OCC funded (end March 2017)	1,568
1.2 Care home beds NHS funded (end March 2017)	175
2. Total care home beds	
2.1 Total Care home beds for older people (CQC as of 1 April 2017)	4,895
2.2 Estimate of total Care home beds in use (OCC estimate 90%)	4,226
Estimate of Care home beds occupied by self-funders	2,482
3. Care at home	
3.1 People aged 65+ receiving OCC funded care in own home (end March 2017)	2,496
3.2 Ratio of self-funders at home VS self-funders in care homes (data from national seminar on Funding Reform July 2013)	1.55
Estimate of people self-funding care at home	3,865
TOTAL self-funding	6,300
TOTAL supported by OCC or NHS	4,200
Grand total#	10,600

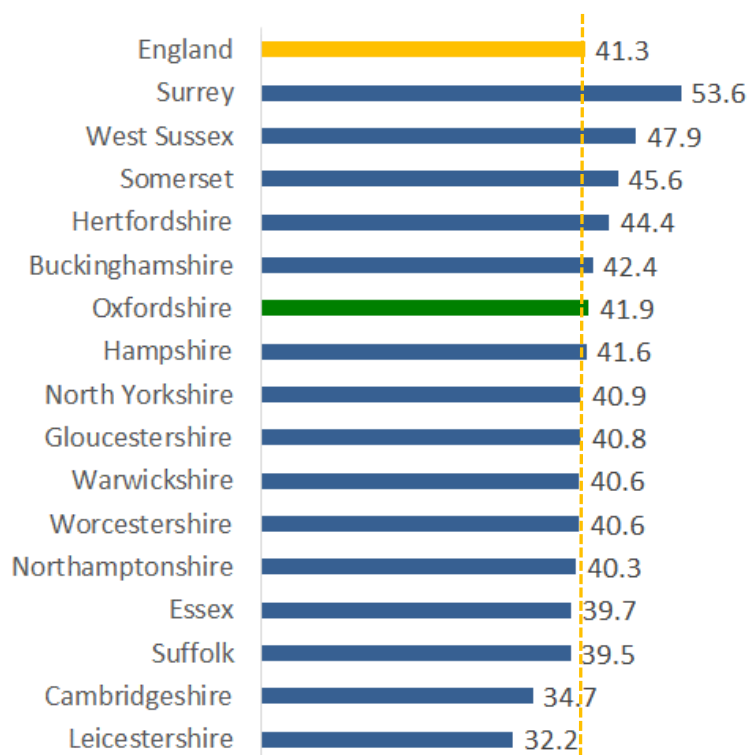
*excludes respite and temporary provision; #rounding means this does not sum

Care home beds

As of 1 January 2018, there were 5,068 care home beds for older people in Oxfordshire⁴¹ of which around three quarters include nursing care.

The rate of care home beds for older people per population aged 65+ in Oxfordshire was 41.9 per 1,000 people, similar to the national average and 6th highest out of Oxfordshire's set of 16 statistical neighbours.

Figure 57 Rate of care home beds (1 Jan 2018) for older people per 1,000 people aged 65+



Source: CQC care directory 1 January 2018, extract for care homes for older people; ONS mid-year population estimates 2016 for people aged 65+

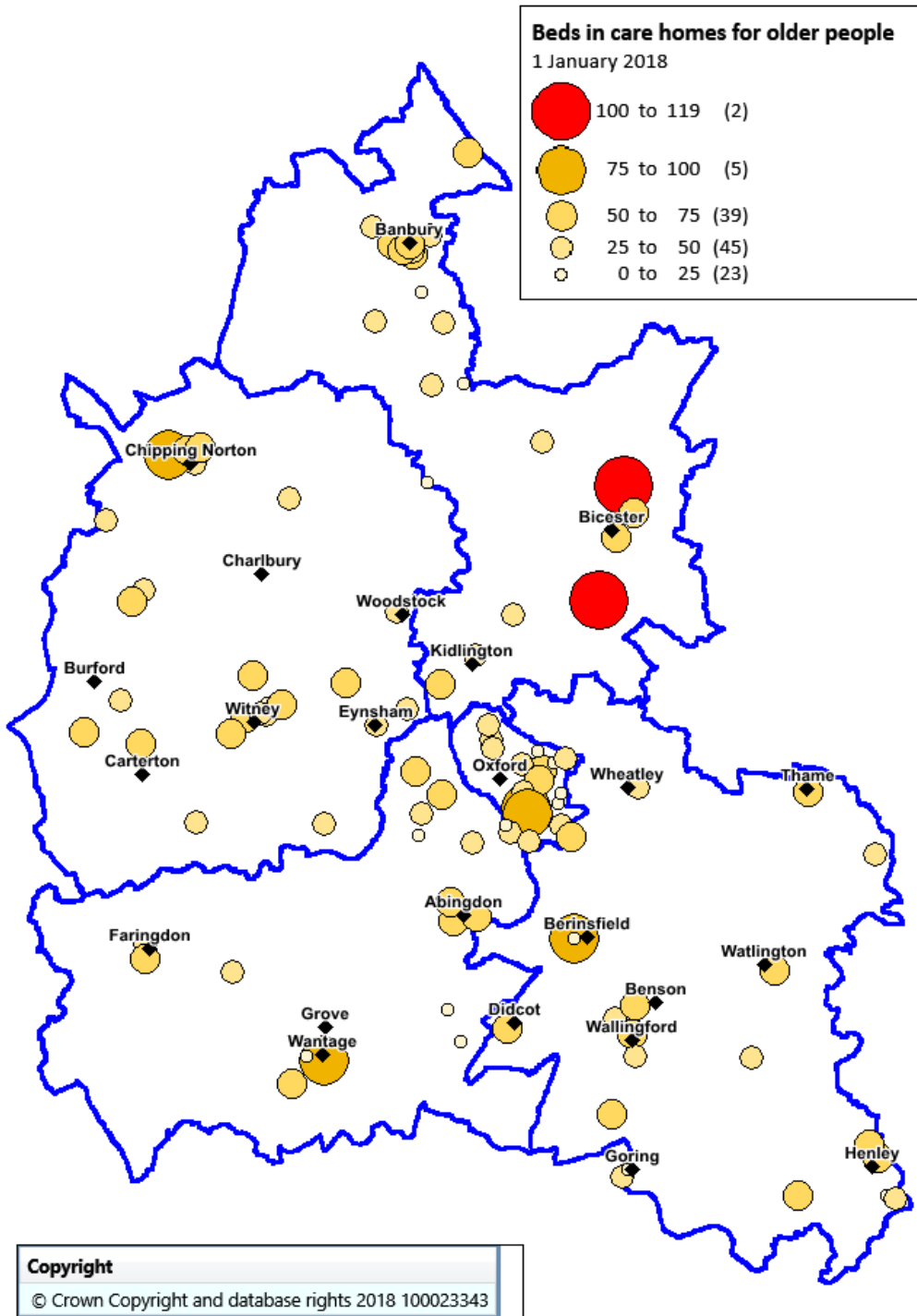
Table 23 Number of care home beds for older people (1 Jan 2018)

	All	with nursing		incl dementia	
Cherwell	1,164	961	83%	1,067	92%
Oxford	691	416	60%	455	66%
South Oxfordshire	1,038	900	87%	905	87%
Vale of White Horse	966	709	73%	778	81%
West Oxfordshire	1,209	932	77%	936	77%
Oxfordshire	5,068	3,918	77%	4,141	82%

Source: CQC care directory 1 January 2018, mapped to district by Oxfordshire County Council

⁴¹ CQC care directory 1 January 2018 <http://www.cqc.org.uk/about-us/transparency/using-cqc-data>

Figure 58 Care home beds for older people in Oxfordshire



Source: CQC care directory 1 January 2018; mapping by Oxfordshire County Council

7.5 Community safety

Domestic Abuse

The cross-government definition⁴² of domestic violence and abuse is any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members, regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

In Oxfordshire in 2017, Thames Valley Police recorded a total of 1,534 victims of domestic abuse crime and incidents aged 50 to 64 and 448 victims aged 65 and over.

Between 2016 and 2017 the greatest percentage increase by broad age was in the older age group 50-64 (+8%).

Table 24 Victims of Domestic Abuse (Crime and Incidents) in Oxfordshire, by age

	2014	2015	2016	2017	2016 to 2017	% change
0-15	128	141	114	95	-19	-17%
16-17	281	359	377	297	-80	-21%
18-24	2,023	2,116	2,087	2,217	130	6%
25-49	5,918	6,421	6,697	6,825	128	2%
50-64	1,224	1,339	1,417	1,534	117	8%
65-79	300	328	364	358	-6	-2%
80+	68	92	110	90	-20	-18%
Total (excluding age not recorded)	9,942	10,797	11,166	11,416	250	2%

Source: Thames Valley Police Crime Recording System - Niche RMS (extracted Jan 2018)

⁴² <https://www.gov.uk/guidance/domestic-violence-and-abuse>

Older victims of violence

In calendar year 2017, there were 239 older victims (aged 65 and over) of violence against the person or sexual offences in Oxfordshire. This was up from 211 in 2016 (+28, 13%).

In 2017, this was equivalent to 20 older victims per 10,000 population aged 65+, in Oxfordshire, below the Thames Valley average of 23 per 10,000. The rate was above average in Oxford at 40 older victims per 10,000 population.

Table 25 Victims of violence and sexual offences aged 65 and over, 2016 and 2017

	2016	2017	2016 to 2017		per 10,000 pop aged 65+	vs Thames Valley average
Cherwell	46	42	-4	-9%	16	Below
Oxford	48	73	25	52%	40	Above
South Oxfordshire	46	52	6	13%	18	Below
Vale of White Horse	37	45	8	22%	18	Below
West Oxfordshire	34	27	-7	-21%	12	Below
Oxfordshire	211	239	28	13%	20	Below
Thames Valley	803	911	108	13%	23	

Source: Thames Valley Police; rate calculated as a proportion of population aged 65 and over ONS 2016 mid-year estimate. As reported in Oxfordshire Strategic Intelligence Assessment 2018

Older victims of dwelling fires

Between 2011-12 and 2016-17, of those who were killed or injured as a result of a dwelling fire (where age was recorded) just under a third (29%) were people aged 60 and over.

Victims of doorstep crime and rogue traders

In 2016-17 there were **377** people who were victims of doorstep crime or rogue traders in Oxfordshire. The majority of rogue traders were 'selling' garden and landscape services followed by roofing.

The vast majority of victims were older people and Oxfordshire Trading Standards has seen a repeat targeting of elderly and vulnerable victims.

- In 2016-17, 87% of victims of doorstep crime and rogue traders (where age was recorded) were aged over 60 (count=145).

The number of victims has been at a similar level for the past 3 years and remains below a peak of 627 in 2013-14.

Table 26 Victims of doorstep crime and rogue traders

District	2012-13	2013-14	2014-15	2015-16	2016-17
Cherwell	78	99	80	83	80
Oxford City	67	66	115	85	101
South Oxfordshire	83	97	42	63	73
Vale of White Horse	97	89	56	80	58
West Oxfordshire	48	79	50	49	53
SUM of districts	373	430	343	360	365
<i>District not recorded</i>	20	197	34	19	12
TOTAL Oxfordshire	393	627	377	379	377

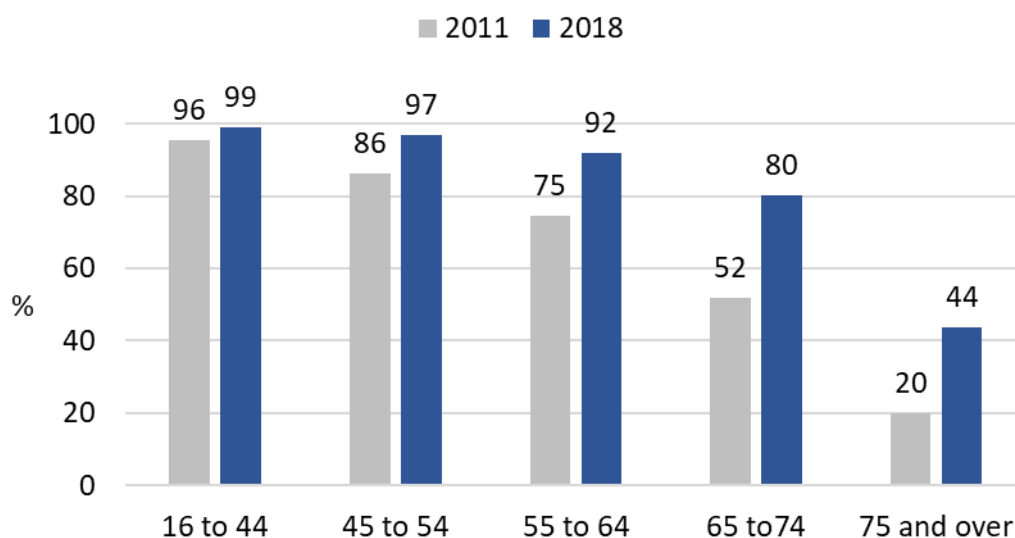
Source: Oxfordshire County Council

7.6 Access to services

Use of the internet

In 2018, 8.4% of adults in the UK had never used the internet and, of these, more than half were aged 75 years and over.

The generation gap is closing however, with recent internet use in the 65 to 74 age group increasing from 52% in 2011 to 80% in 2018.

Figure 59 Recent internet use by age group, 2011 and 2018, UK

Source: ONS Internet Users, 2018: Published May 2018; note: not including confidence intervals; Recent internet users are adults who have used the internet within the last three months. 2011 refers to Quarter 1 (Jan to Mar) 2011 only. 2018 refers to Quarter 1 (Jan to Mar) 2018 only.

Applying national percentages to Oxfordshire's population gives an estimated **10,600** men and **18,100** women aged 75+ having never used the internet.

Distance to health services

The Indices of Deprivation 2015 includes an indicator of the average road distance to a GP surgery indicator.

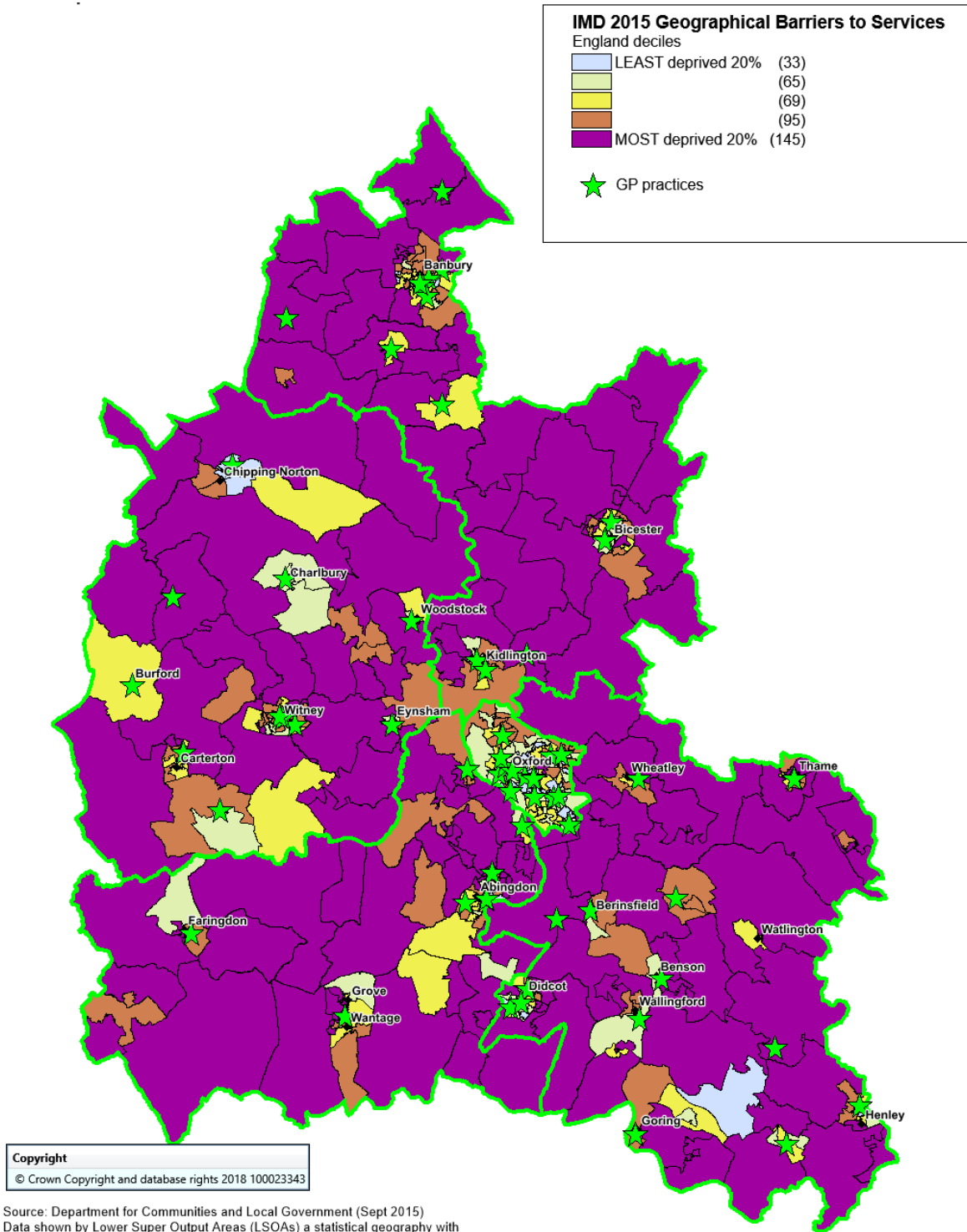
Out of the total of 407 Lower Super Output Areas⁴³ (LSOAs) in Oxfordshire, 101 (31%) were 2 miles or more (3.2km) from the nearest GP surgery, covering a total population of 157,000 (25%) as of 2011.

There were no areas of Oxford City classified as 2 miles or more from a GP surgery. Areas classified as 2 miles or more from a GP surgery in rural districts in Oxfordshire covered 28,800 people aged 65 and over (34% of the older population in rural districts).

The following map shows the areas of Oxfordshire that are ranked most deprived on the wider subdomain of Geographical Access to Services – including distance to GP, supermarket, post office and primary school – overlaid with locations of Oxfordshire's GPs.

⁴³ Lower Super Output Areas have an average of roughly 1,500 residents and 650 households. Measures of proximity (to give a reasonably compact shape) and social homogeneity (to encourage areas of similar social background) are also included.

Figure 60 Geographical barriers to services (IMD 2015) showing locations of GP practices



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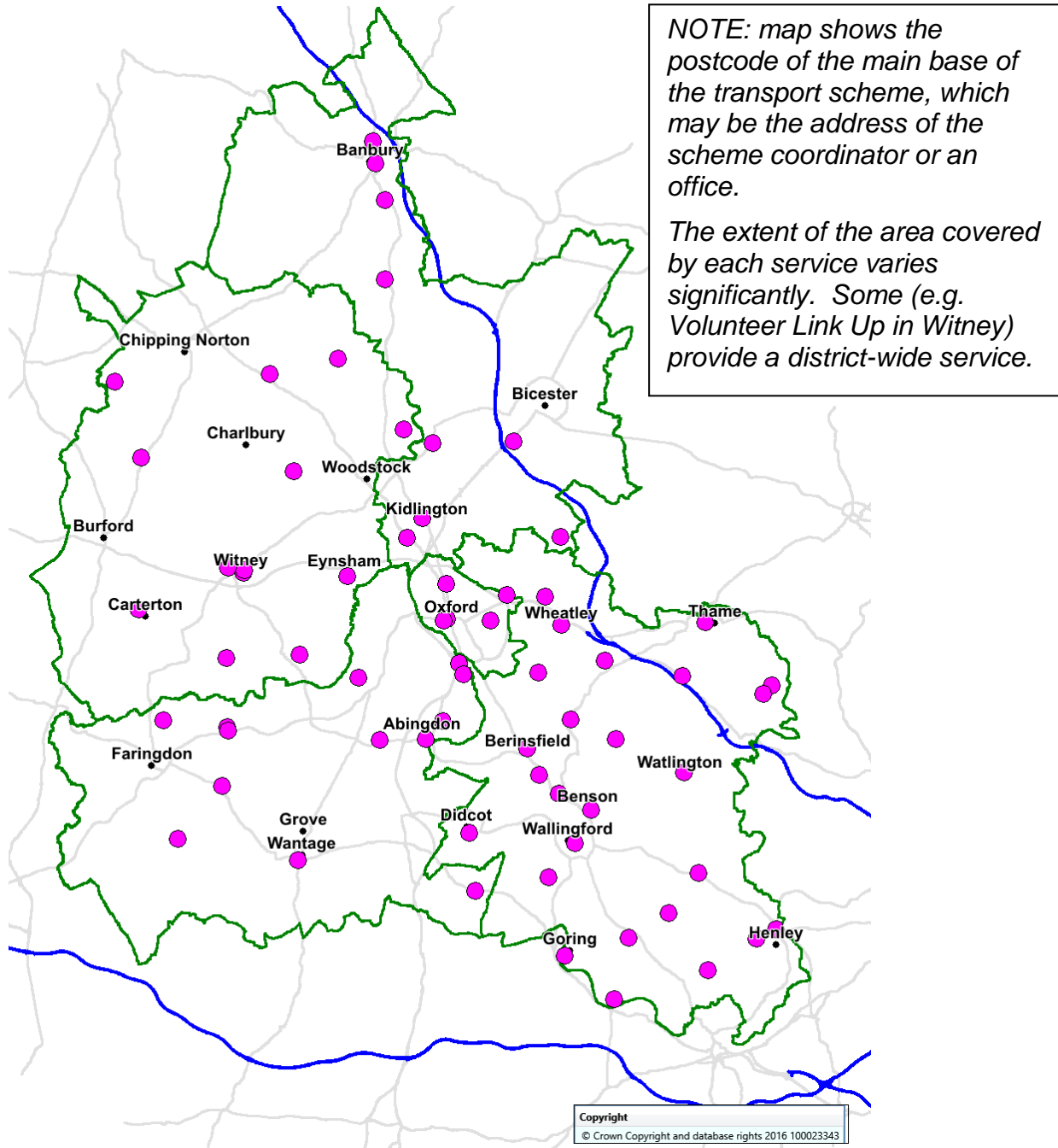
Source: Department for Communities and Local Government (Sept 2015)
 Data shown by Lower Super Output Areas (LSOAs) a statistical geography with an average of 1,500 residents per LSOA

The IMD 2015 Geographical Barriers sub-domain includes:
 - Road distance to a post office: A measure of the mean distance to the closest post office for people living in the Lower-layer Super Output Area
 - Road distance to a primary school: A measure of the mean distance to the closest primary school for people living in the Lower-layer Super Output Area
 - Road distance to a general store or supermarket: A measure of the mean distance to the closest supermarket or general store for people living in the Lower-layer Super Output Area
 - Road distance to a GP surgery: A measure of the mean distance to the closest GP surgery for people living in the Lower-layer Super Output Area

Community Transport Schemes

According to Community First Oxfordshire, as of January 2018, there were 67 community transport schemes active in Oxfordshire.

Figure 61 Location of Community Transport schemes in Oxfordshire (January 2018)

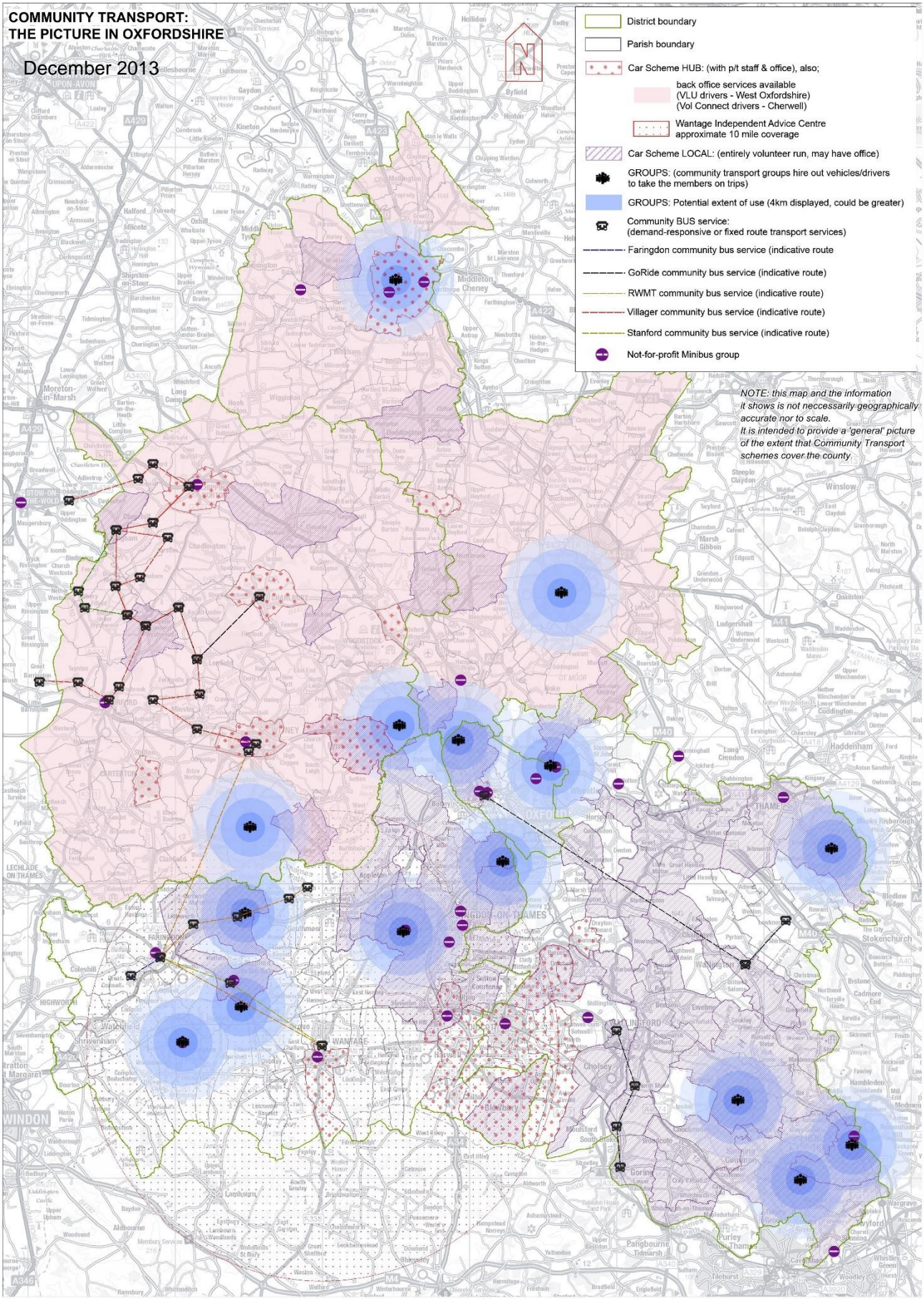


Source: Community First Oxfordshire January 2018; mapping by Oxfordshire County Council

The following map shows the coverage of Community Transport schemes as of 2013.

Needs Analysis for Older People in Oxfordshire 2018

COMMUNITY TRANSPORT: THE PICTURE IN OXFORDSHIRE December 2013



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OXFORDSHIRE COUNTY COUNCIL

Date drawn: 05/12/2013
Drawn by: CJM

Map centre: easting: 449500, northing: 213200

8 Gaps in evidence and areas for further research

This section lists areas where evidence is currently lacking or could be improved.

Health

- Quality Outcomes Framework data on patients registered with GP practices is not available by age and so the majority (other than dementia) has been omitted from this report. The main JSNA includes a summary of QOF results for all conditions.
- There have been changes in the way that data is collected on Telecare and information is now more limited. Dataset to be explored for next JSNA.

Transport

- Investigating the best way to update the map showing coverage of Community Transport.
- For future reporting – map use of non-emergency patient transport service

Community assets

- Add venues used for community activities
- Community volunteering assets

Wider determinants

- Are people working longer because they want to or because they have to?
- More on physical and social environment.
- Source of local data on fear of crime by age.