

# Population Health and Adult Social Care in Newham

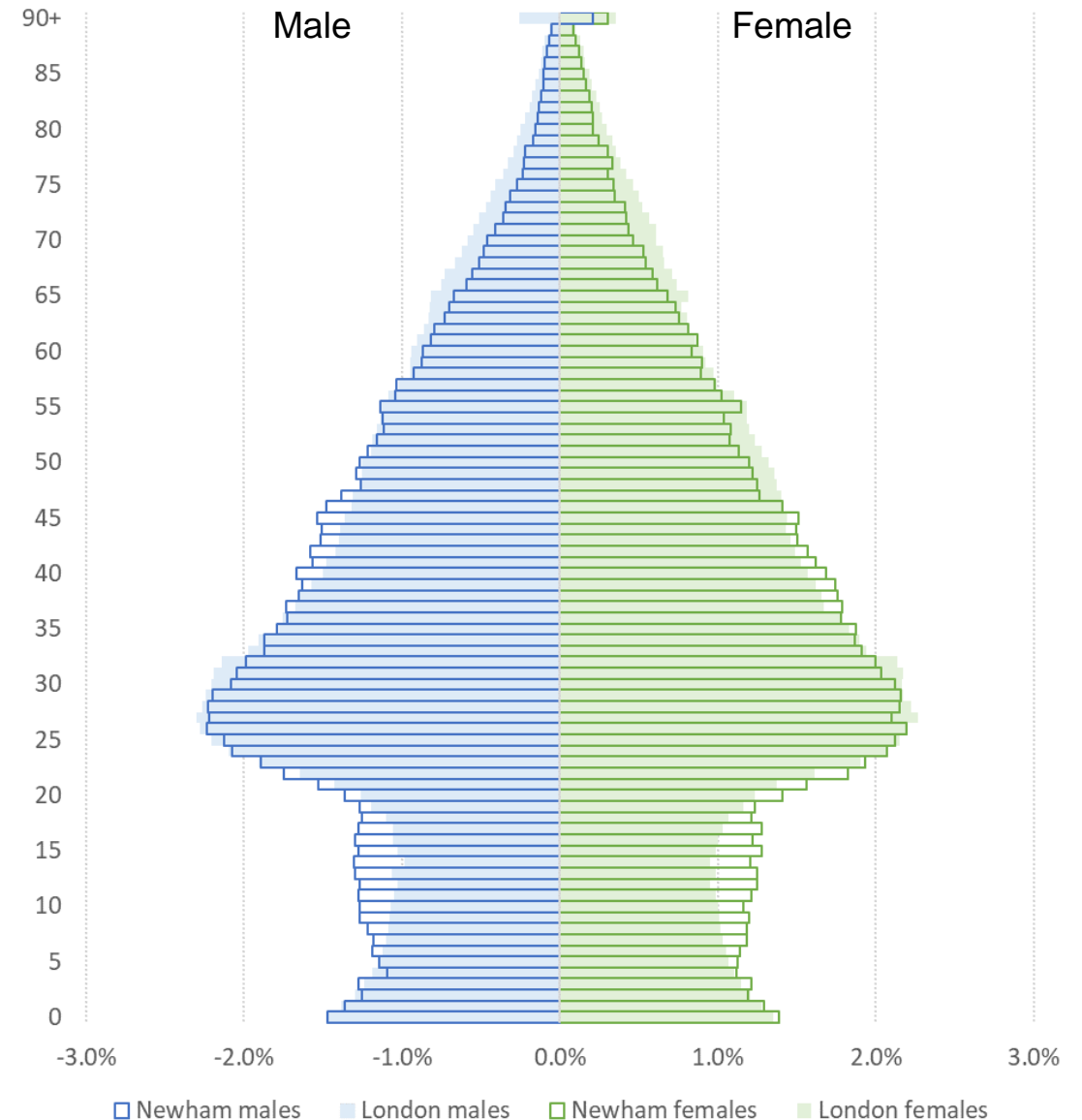
Public Health Intelligence

February 2025

# Newham population profile

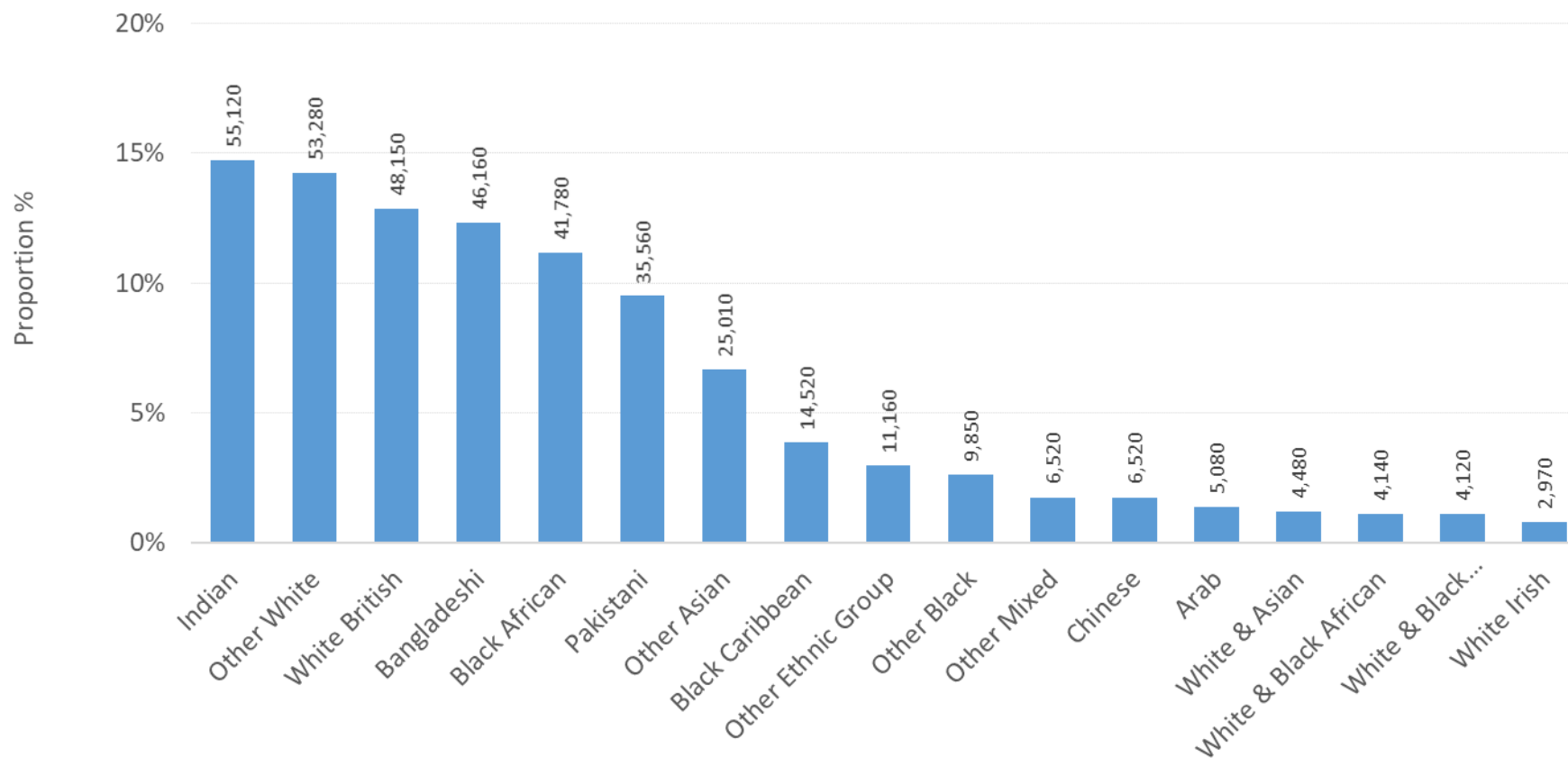
# Age profile of Newham

- The GLA Housing Led population estimate for Newham is 378,200 people in 2025.
- This comprises of 187,050 males and 191,150 females.
- Newham has a comparatively young population, with a higher proportion of teenage years and residents aged 40 to 45 than for London or England.
- Conversely, the proportion of residents aged more than 60 years is lower in Newham compared to London.
- Solid lines - Newham



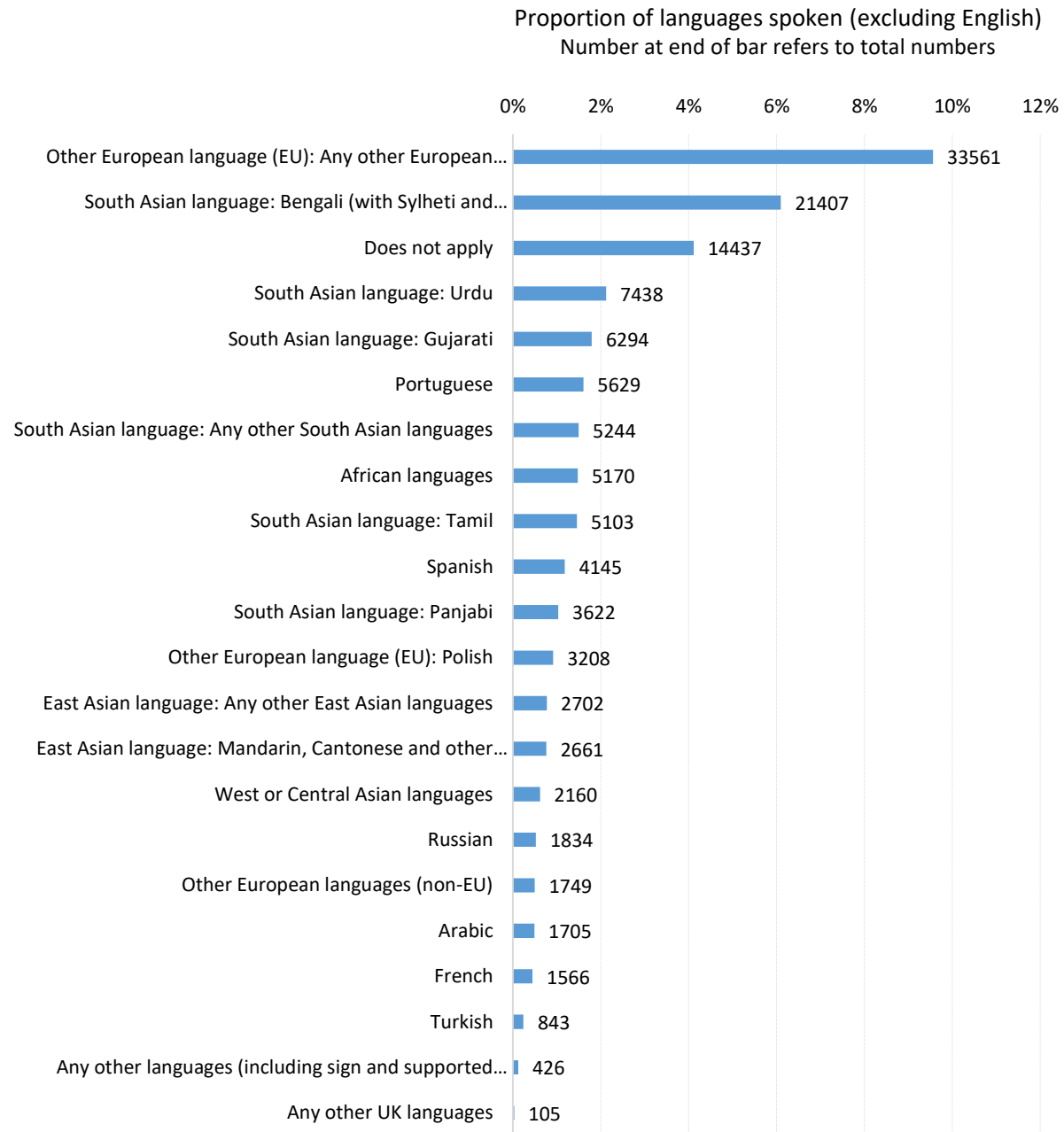
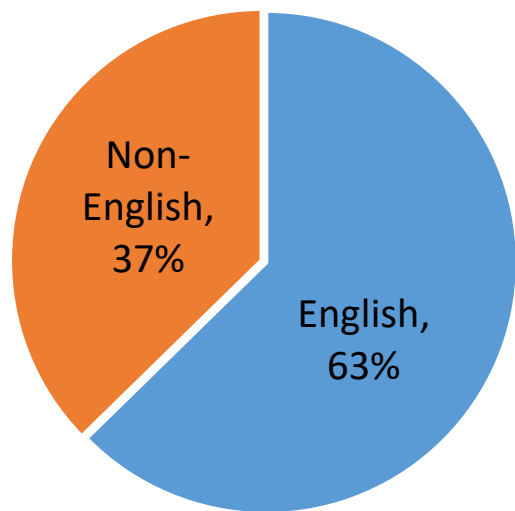
# Newham's population is highly diverse

- Newham is one of the most ethnically diverse local authorities in England. 72% of the population are from ethnic groups other than White. 45% of the population identify as of Asian ethnicity and 18% identify as of a Black ethnic group.
- The 3 largest ethnic groups are Indian, White Other, and White British. These comprise 15% to 13% each of Newham's population.



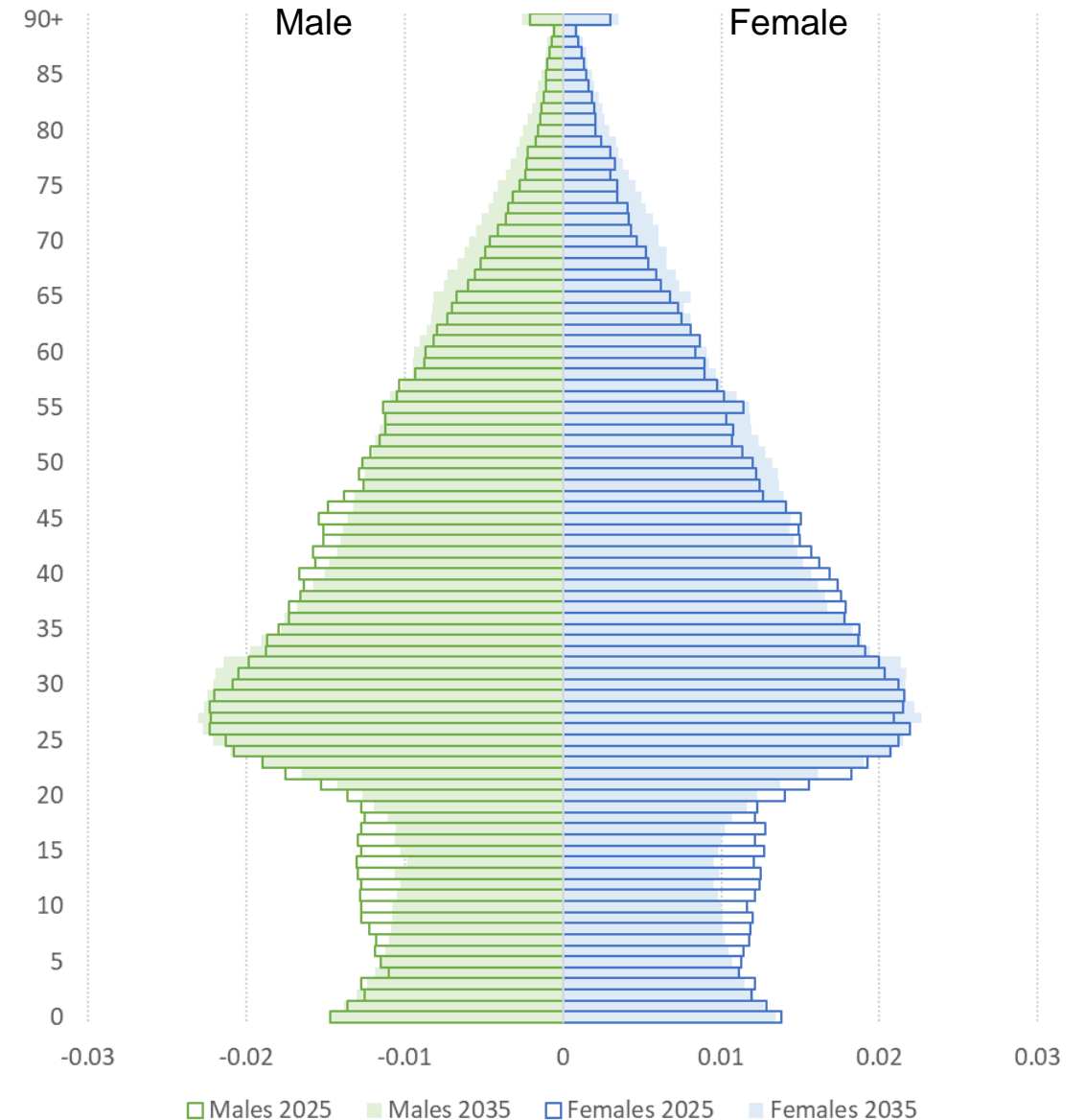
# Language diversity

- Newham has the highest proportion of residents who do not speak English as their main language of all English local authorities.
- More than one third of Newham residents do not speak English as their main language.
- Over 200 languages are spoken in the borough.



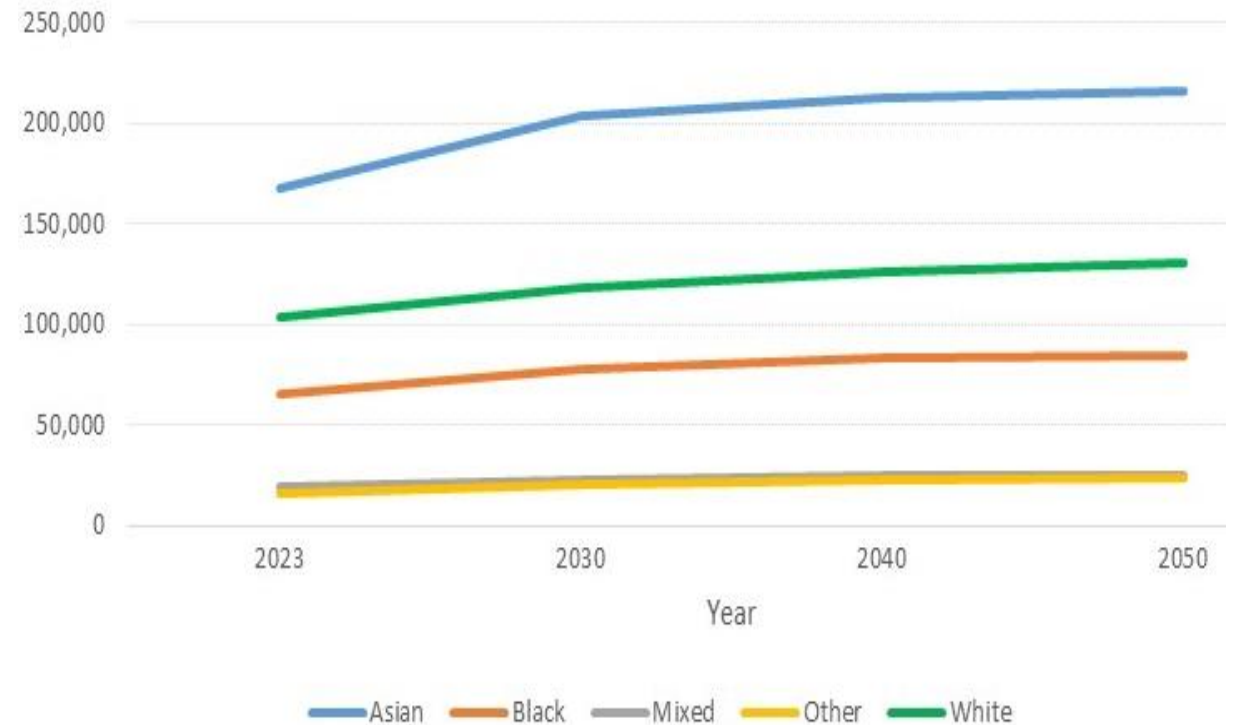
# Our population is projected to increase more than other London boroughs

- Over 10 years, the Newham population is forecast to increase by 57,000 from 378,200 to 435,200 residents from 2025 to 2035.
- This is the largest forecast growth in London.
- Solid lines - 2025



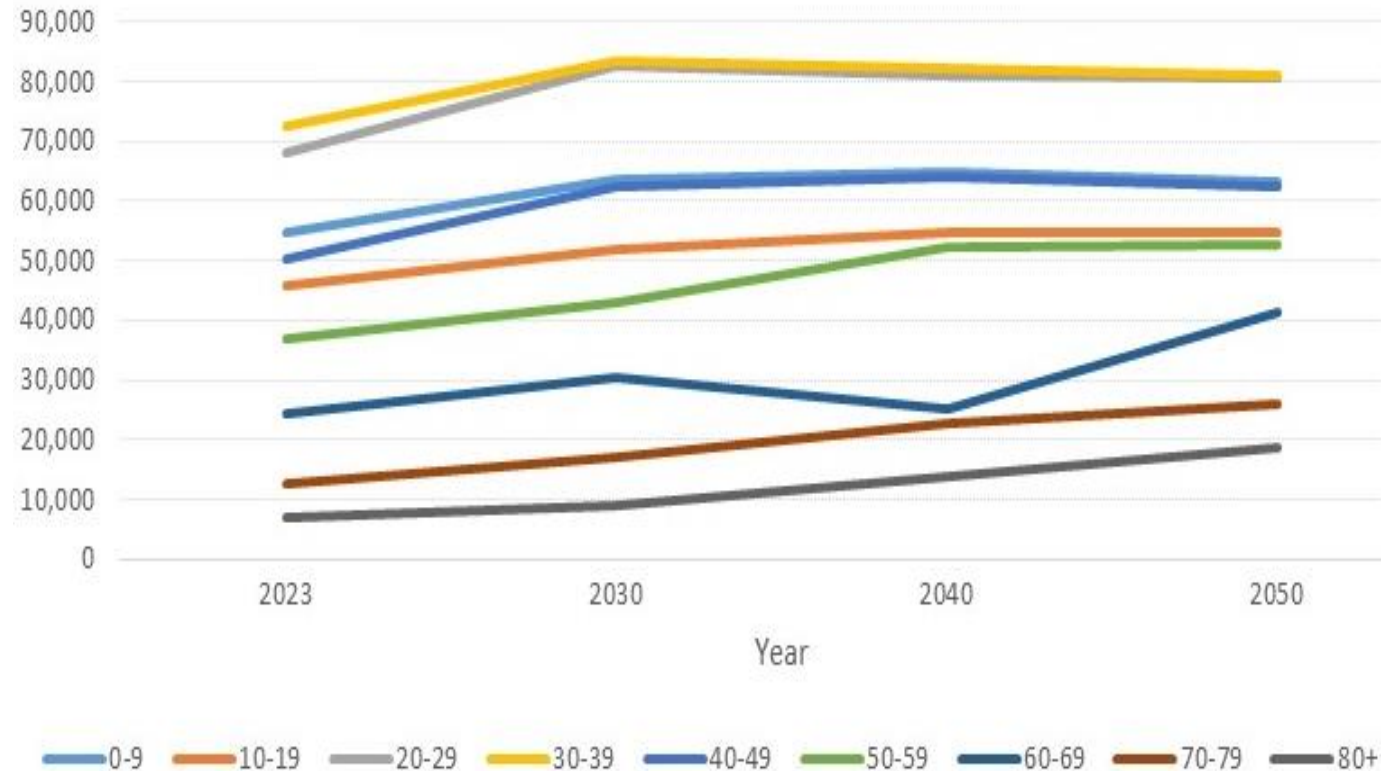
# Long term population projection for ethnic groups

- Amongst residents with an Asian heritage, *proportionally* the number of residents with Arabian ethnicities are predicted to increase the most by 2030 (32%), with an additional 2,900 residents. The *number* of Indian residents is expected to increase the most – by just over 27,000 residents (21% increase).
- In the Black ethnic population, *proportionally* the Other Black population is predicted to increase the most by 2030 (27%), with an additional 1,350 residents. The *number* of residents of Black African heritage is expected to increase the most by 3,780 residents (18% increase).
- In the White population, *proportionally* the Other White population is predicted to increase the most by 2030 (18%) with an additional 5,000 residents. The Other White population is also predicted to have the highest *number* increase.



# Long term population projection for agebands

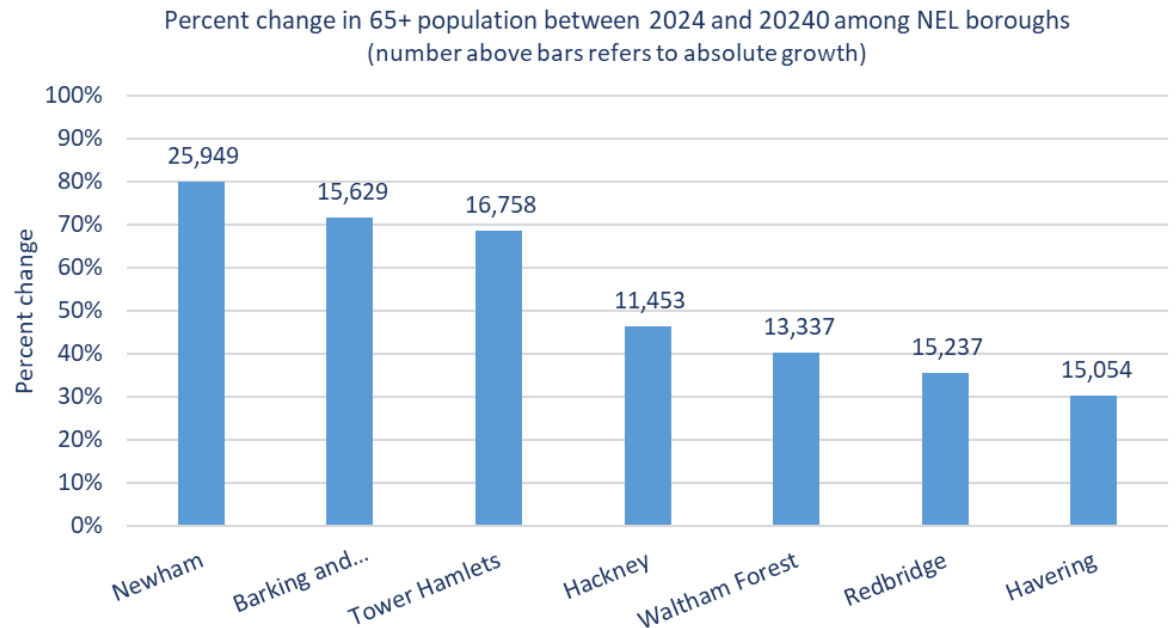
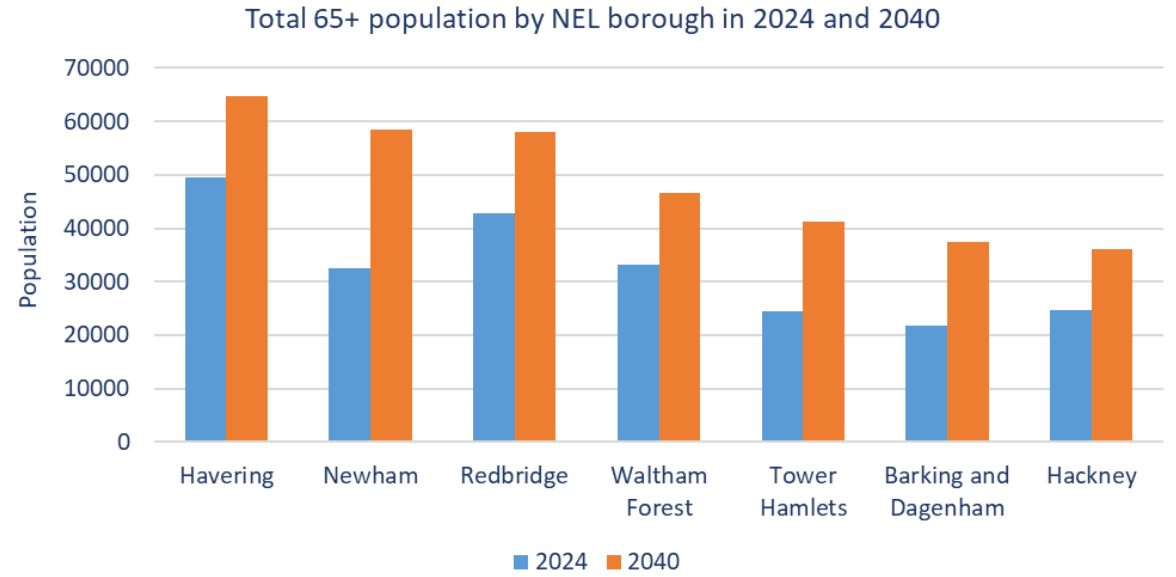
- The highest proportional increases are forecast to be in residents aged 70+ years.
- This equates to over 6,000 more residents aged 70 and above.
- The smallest proportional increase is forecast to be the 10-19 year olds.
- The ageing of the population means that over time, the demand placed on our health and care system is expected to increase with more complex needs.





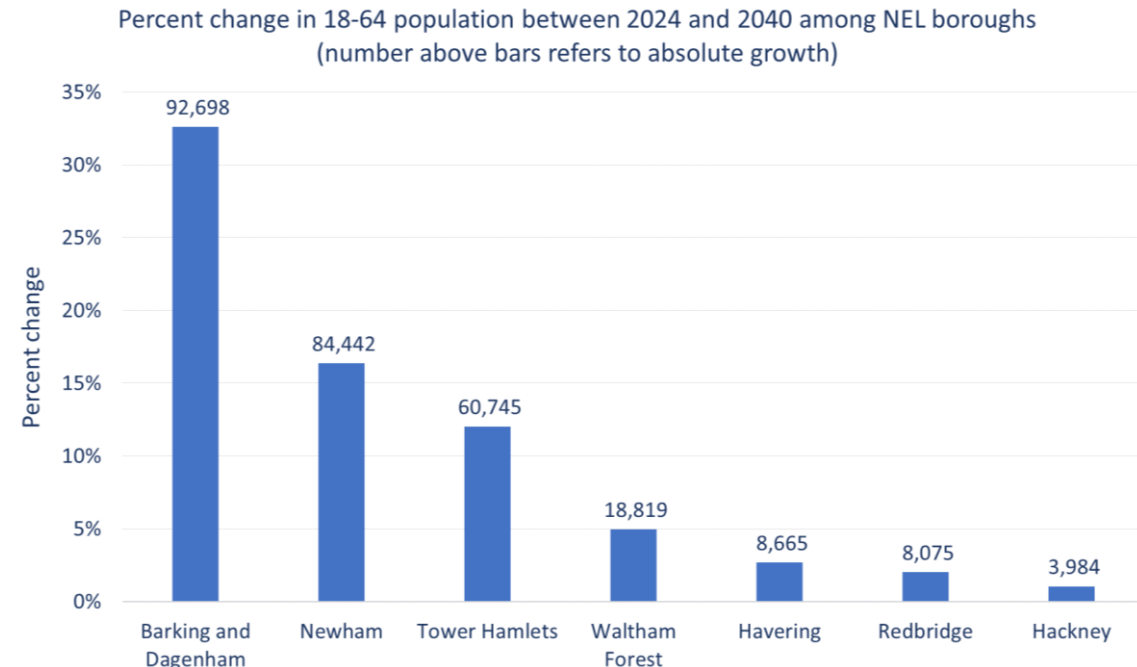
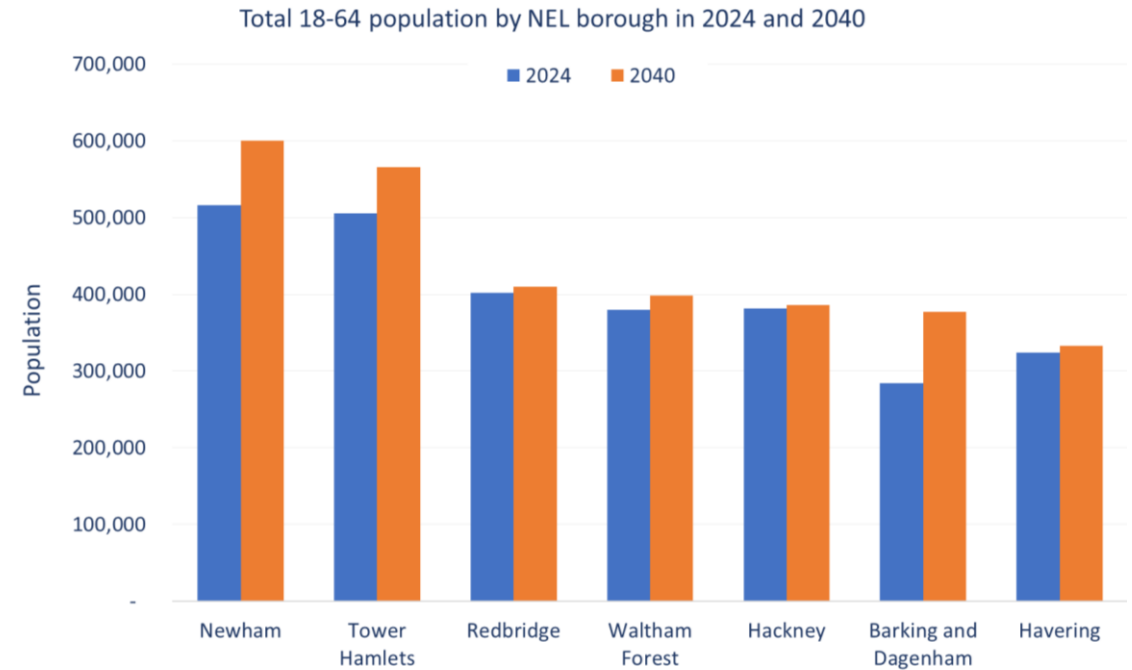
# Population forecasts for ages 65+ by 2040

- Newham is projected to have both largest absolute and relative increase in population aged 65 and over in North East London.
- Between 2024 and 2040, the number of 65+ residents in Newham is projected to increase by almost 26,000 (around 80%).
- Given the increased needs and multi-morbidity of those aged 65 and over, this will put further demands on Newham's services.



# Population forecasts for ages 18-64 by 2040

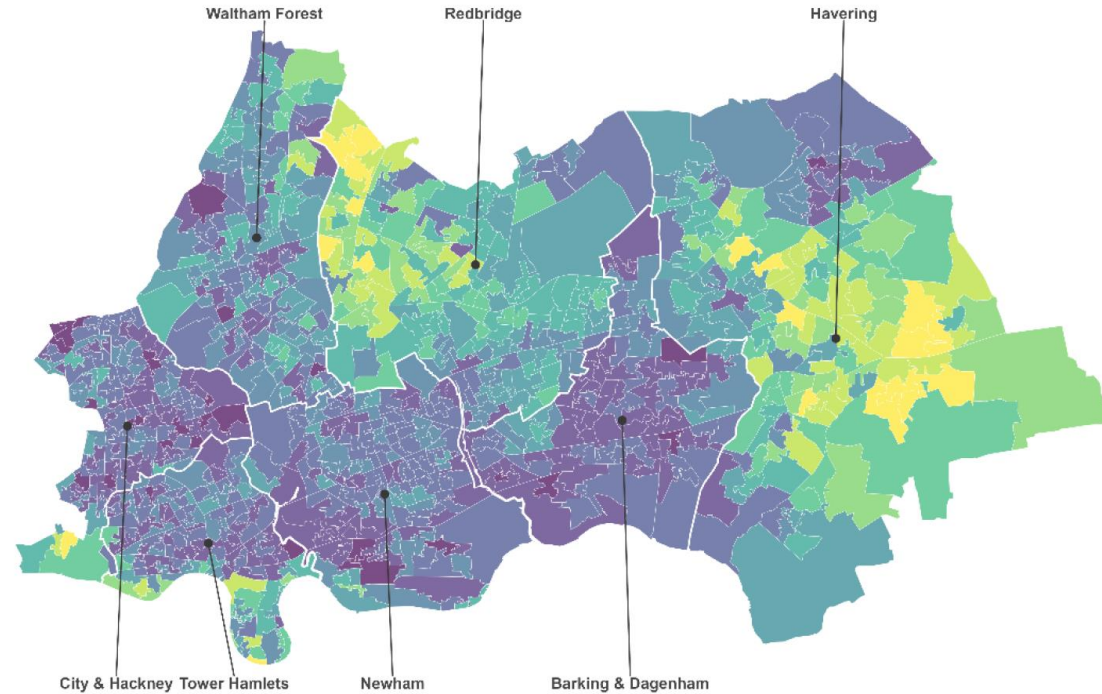
- Newham is projected to have both 2<sup>nd</sup> largest absolute and relative increase in population aged 18-64 years in North East London.
- Between 2024 and 2040, the number of 18-64s in Newham is projected to increase by almost 85,000 (around 16%).



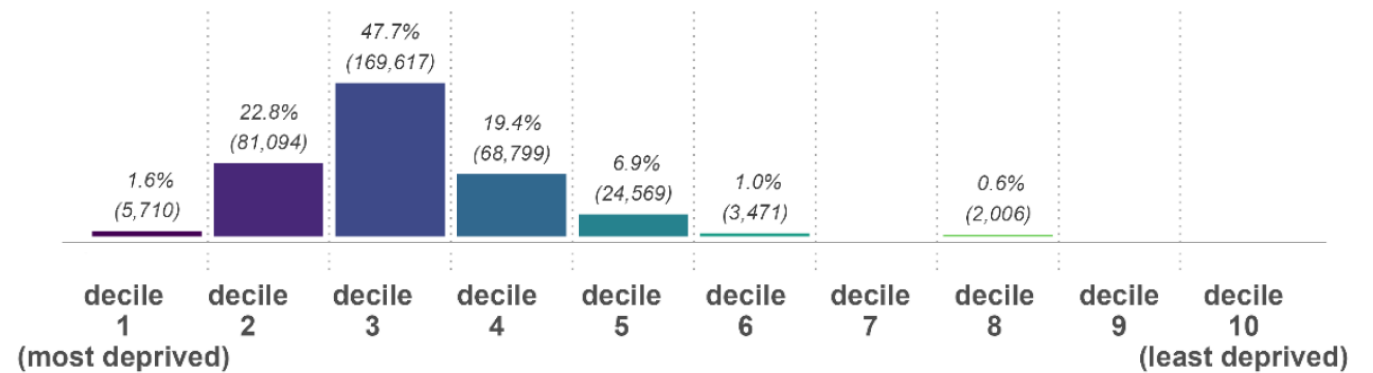
# Deprivation

- Newham is a relatively deprived borough as measured by the Index of Multiple Deprivation (IMD) Total score.
- In 2019, Newham had a higher IMD score (29.6) than both London (21.8) and England (21.7).
- Currently Newham is the third most deprived borough in London.
- However, Newham's deprivation (relative to England) has been falling since 2010. Between 2015 and 2019 Newham's IMD fell from 32.9 to 29.6. Ministry of Housing, Communities & Local Government (2019) English indices of deprivation.
- The vast majority of Newham residents live in an LSOA which is in IMD deciles 2, 3, and 4.

Deprivation across North East London  
 Yellow - least deprived      Dark Purple - most deprived



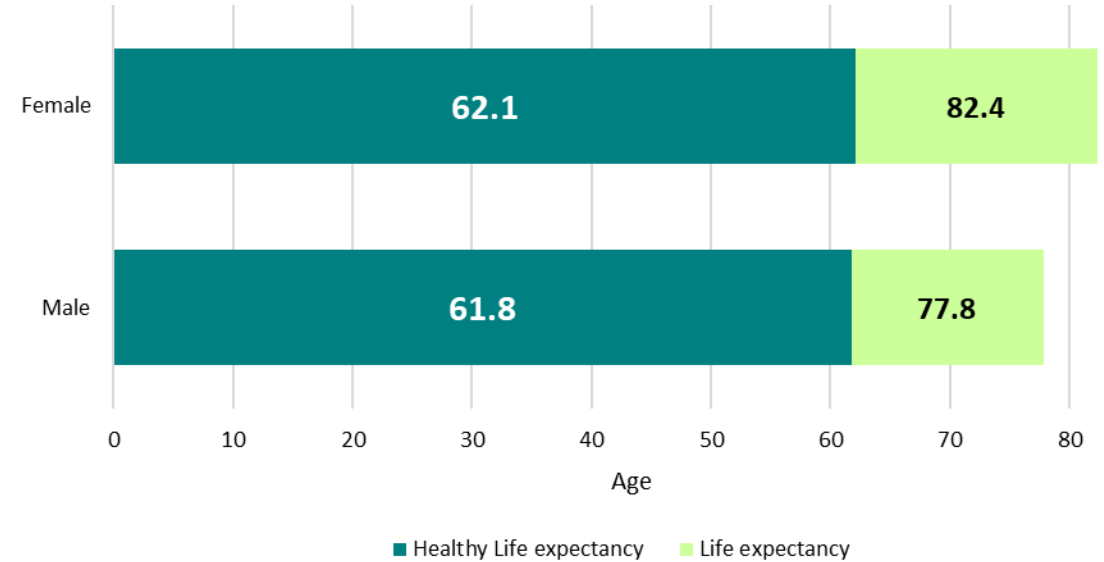
Population breakdown by IMD decile in Newham



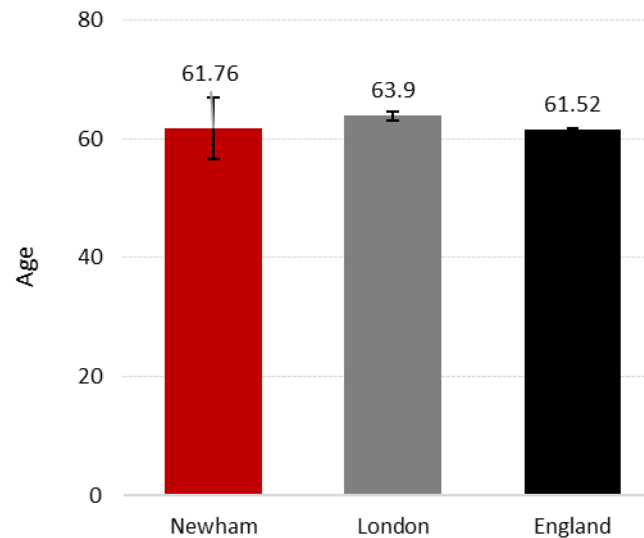
# Healthy life expectancy is similar to London

- Healthy life expectancy is a useful measure which gives us an indication of how long a child born today can on average expect to live in good health under the current rates of disease prevalence.
- In 21/23, healthy life expectancy was 62 years for females and just under 62 years for males in Newham. This means that typically in Newham, males live for 4 years until the standard retirement age with reduced health.
- There is no statistical significant difference between Newham, London and England healthy life expectancy values.
- Overall life expectancy is 82.4 years for females and 77.8 years for males in Newham.

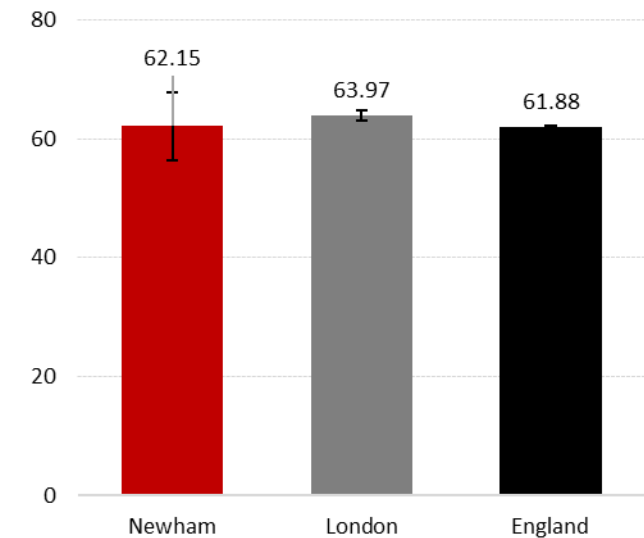
Healthy life expectancy at birth 2021-23



Male healthy life expectancy 2021-23

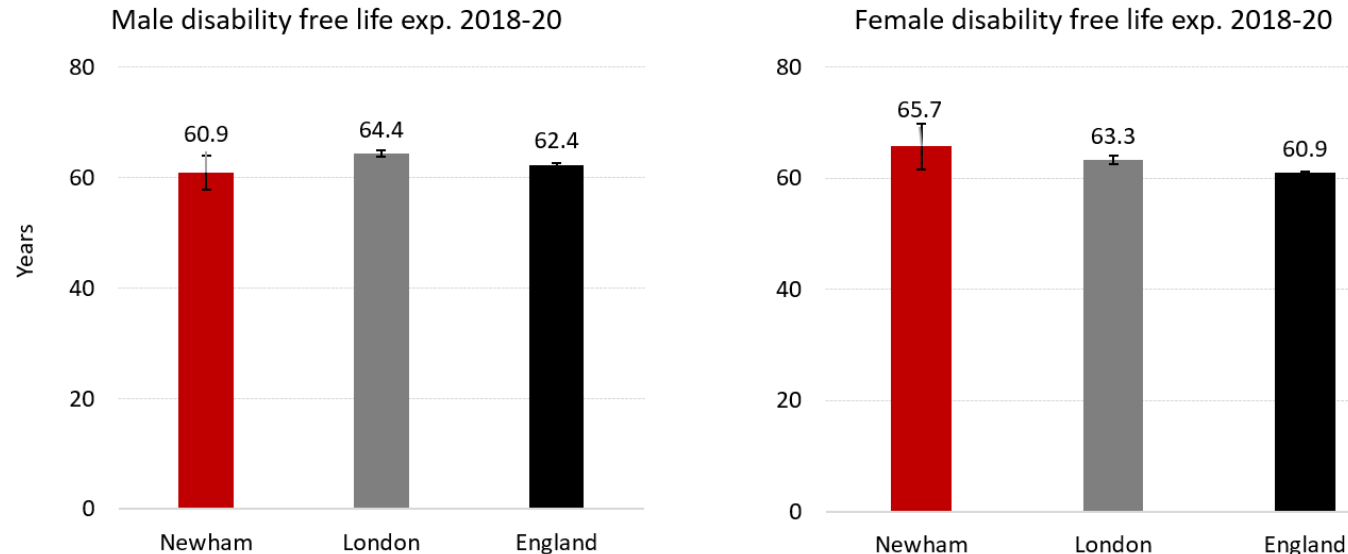
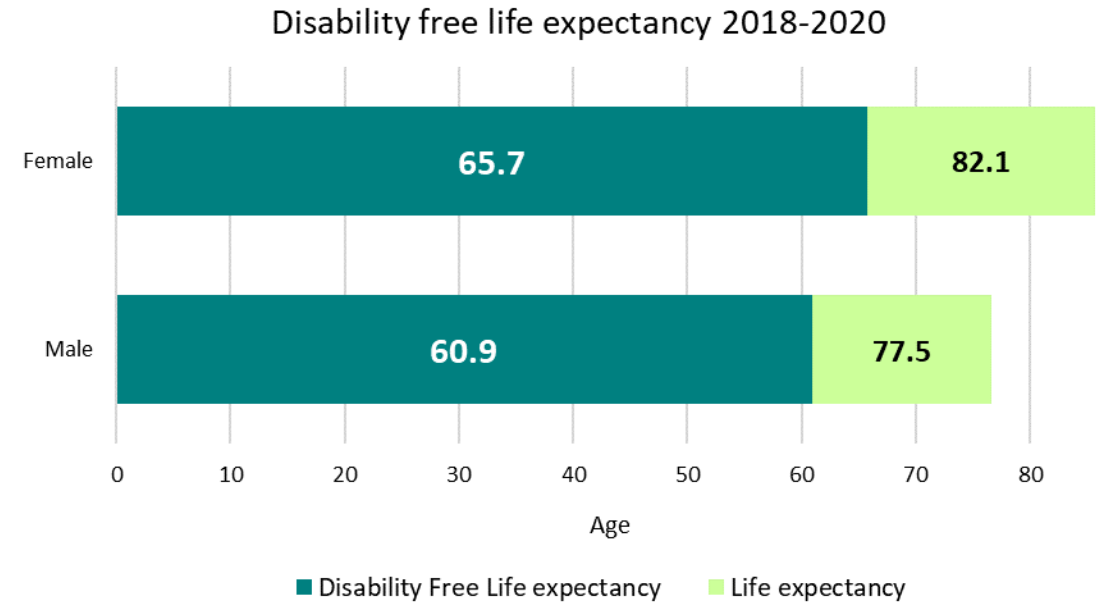


Female healthy life expectancy 2021-23



# Disability free life expectancy for females is better than London

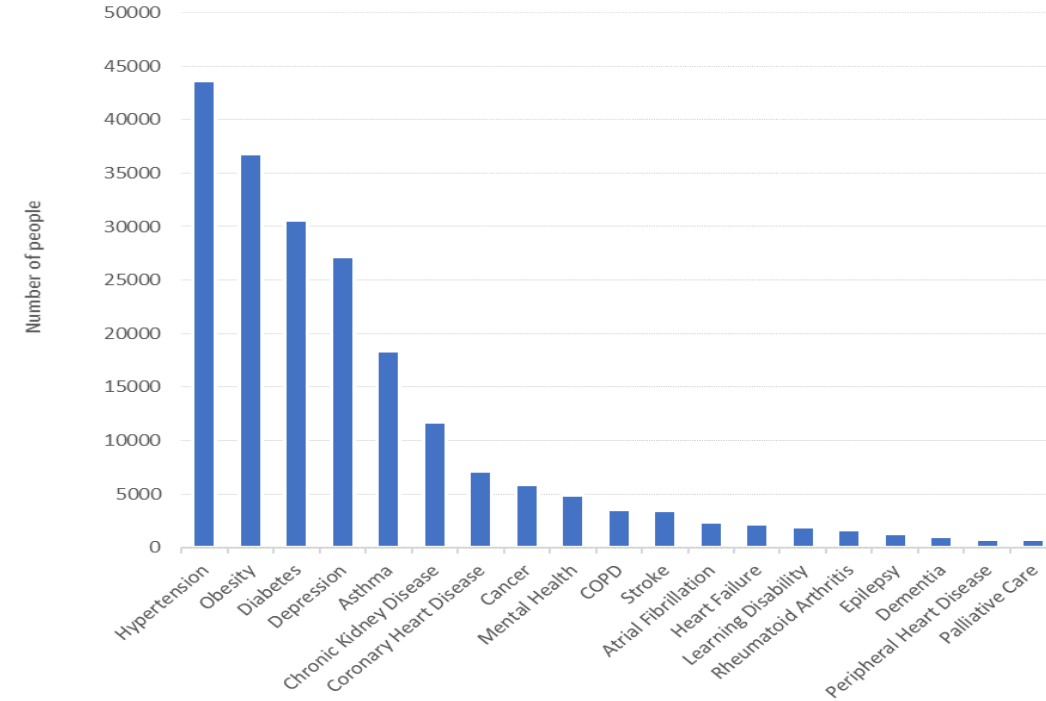
- Disability free life expectancy is a useful measure that indicates how long a child born today can, on average, expect to live without a limiting long-term illness or disability, based on current rates of disability prevalence.
- In 2018/20, disability free life expectancy was 65.7 years for females and 60.9 years for males in Newham. This means that typically in Newham, males live for 5.1 years until the standard retirement age with reduced health. Females can expect to live for 0.3 years with reduced health until their retirement age.
- Disability free life expectancy for males in Newham is lower than both London and England. Females in Newham have a higher disability free life expectancy than London and England.



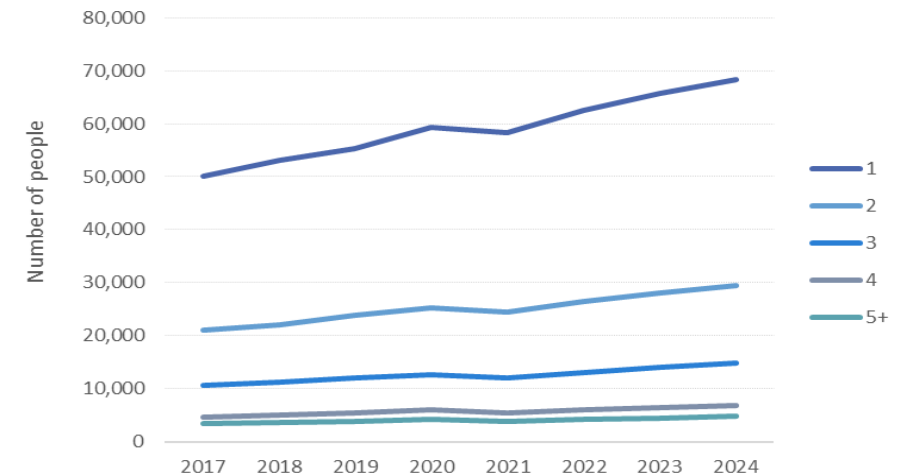
# Multi-morbidity is becoming more common

- The number of people living with a long-term condition (LTC) in Newham increased from 90,000 in 2017 to 124,000 in 2024. As a proportion of the total population this has increased from about 26% to 33% over the period.
- In terms of number of people with conditions, the most prevalent conditions are hypertension, followed by obesity, diabetes and depression.
- Over the seven-year period from 2017 to 2024 we have seen large increases in the number of people with multiple conditions. We have seen a 41% increase in the number with two conditions from 21,000 to 29,000 people.
- There has been a 42% growth in those with five or more conditions from 3,300 to 4,700 people. Increases in the number of people with multiple conditions means the complexity of care and the amount of health and care resources needed by the population greatly increase.

Prevalence of LTCs in Newham residents (2024)



Trend in number of people with multi-morbidity



# Multi-morbidity is common in working age adults

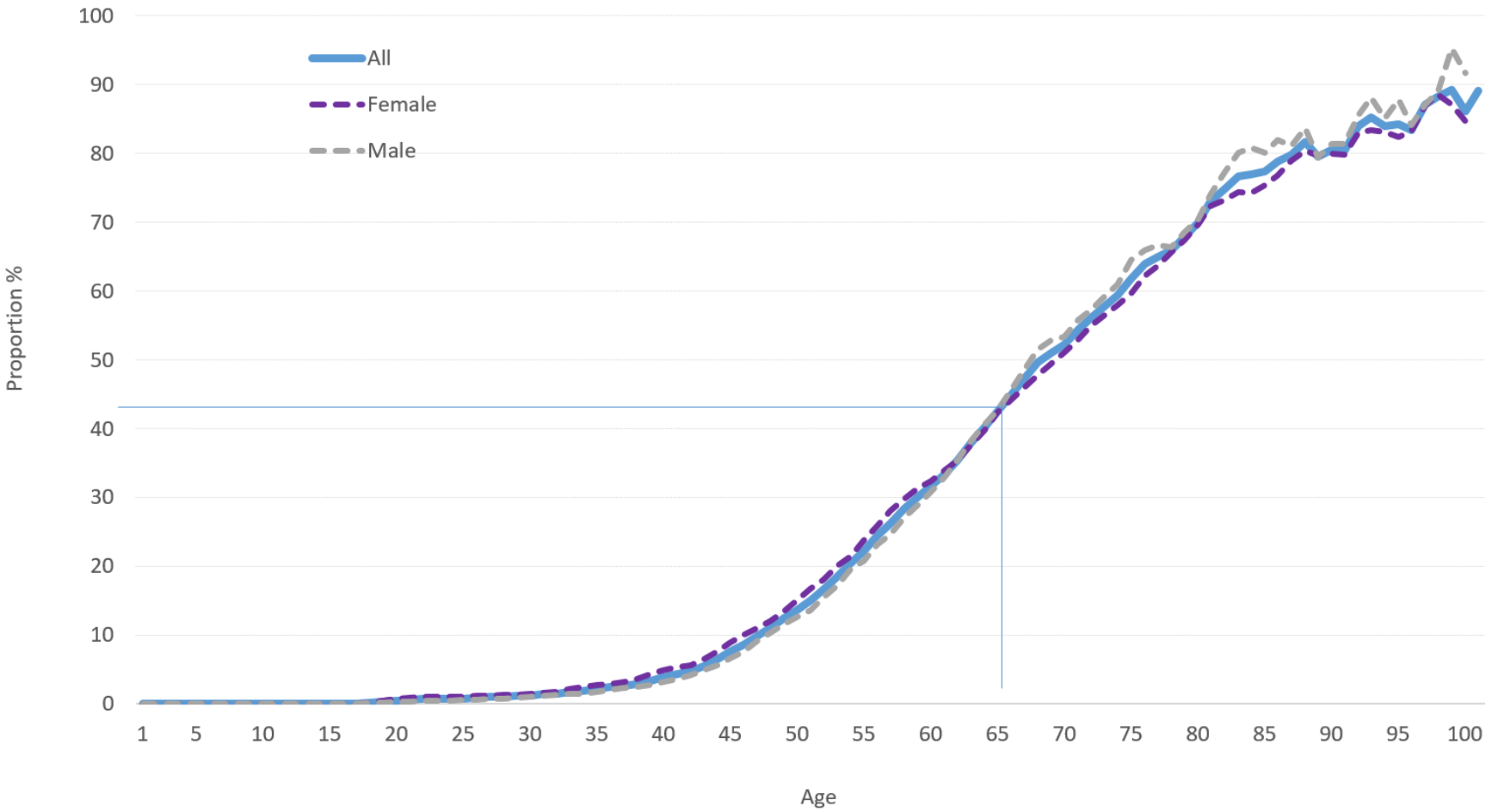


Currently 42% of Newham residents have at least 2 long-term conditions before the age of retirement.

The proportions are similar for both females and males.

This increases to 65% for residents aged 75 years.

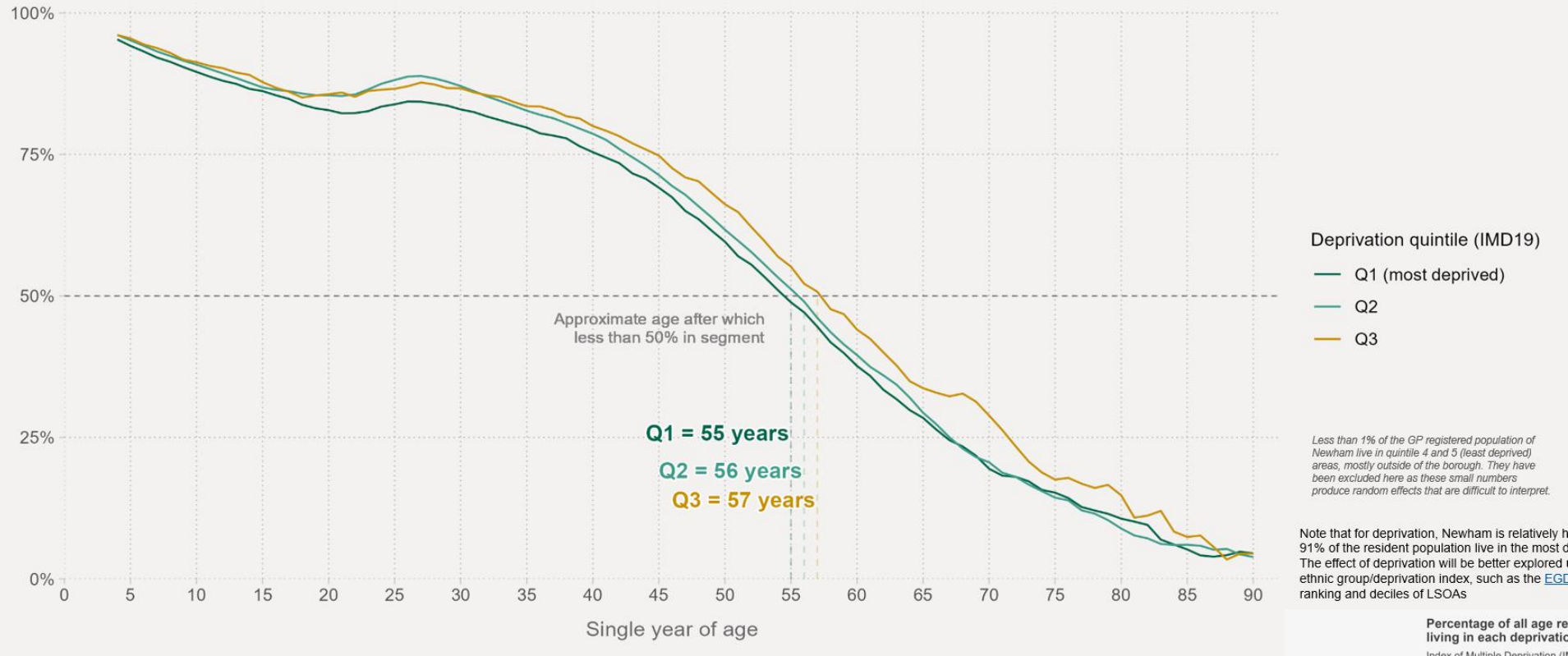
For adults aged 50 years on average 14% have multi-morbidity (15% females; 13% males).



# Only a half of Newham's population remain in 'healthy' population segments by 56 years of age

Population segmentation shows us the proportion still healthy or 'healthy with risk factors'. For our most deprived areas, only 50% of residents remain healthy or with risk factors at 55 years old. This rises to 57 years old for less deprived areas.

Proportion of each year of age in the Healthy or Healthy with Risk factors segments, March 2024 in Newham by deprivation (IMD 2019)



Source: ICB Insights team

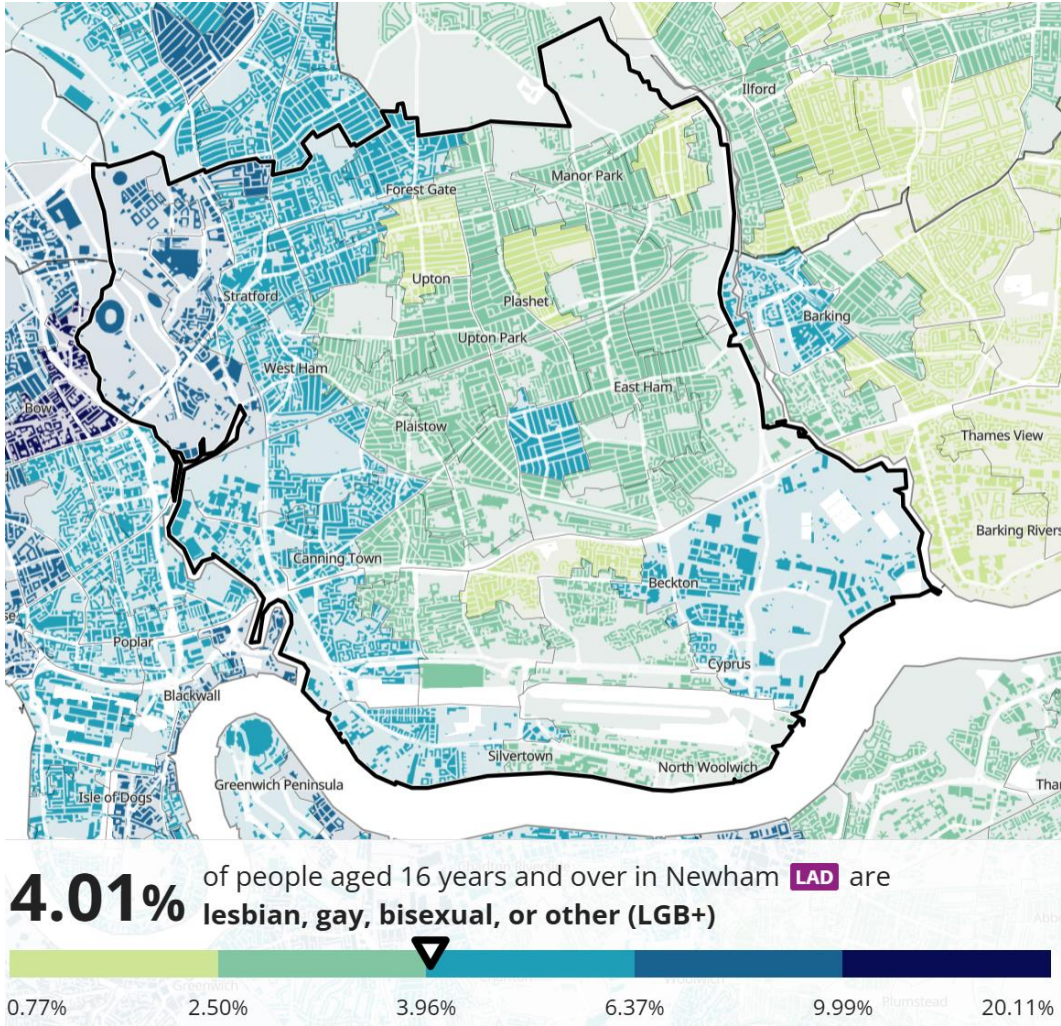
**WE ARE NEWHAM.**



# Sexual orientation

- According to the 2021 census, 85% of Newham identified as straight or heterosexual, with 11% not providing an answer (although the accuracy of this estimate has been questioned).
- Approximately 4% of Newham residents identified as LGB+ or another sexual orientation other than heterosexual. Prevalence of those identifying at LGB+ are higher in Stratford, Canning Town, and Beckton.

	Number	Percent
Straight or Heterosexual	235,493	<b>85%</b>
Gay or Lesbian	4,910	<b>2%</b>
Bisexual	4,168	<b>2%</b>
Other sexual orientations	2,008	<b>1%</b>
Not answered	29,594	<b>11%</b>



Prevalence of LGB+ identity in Newham by MSOA

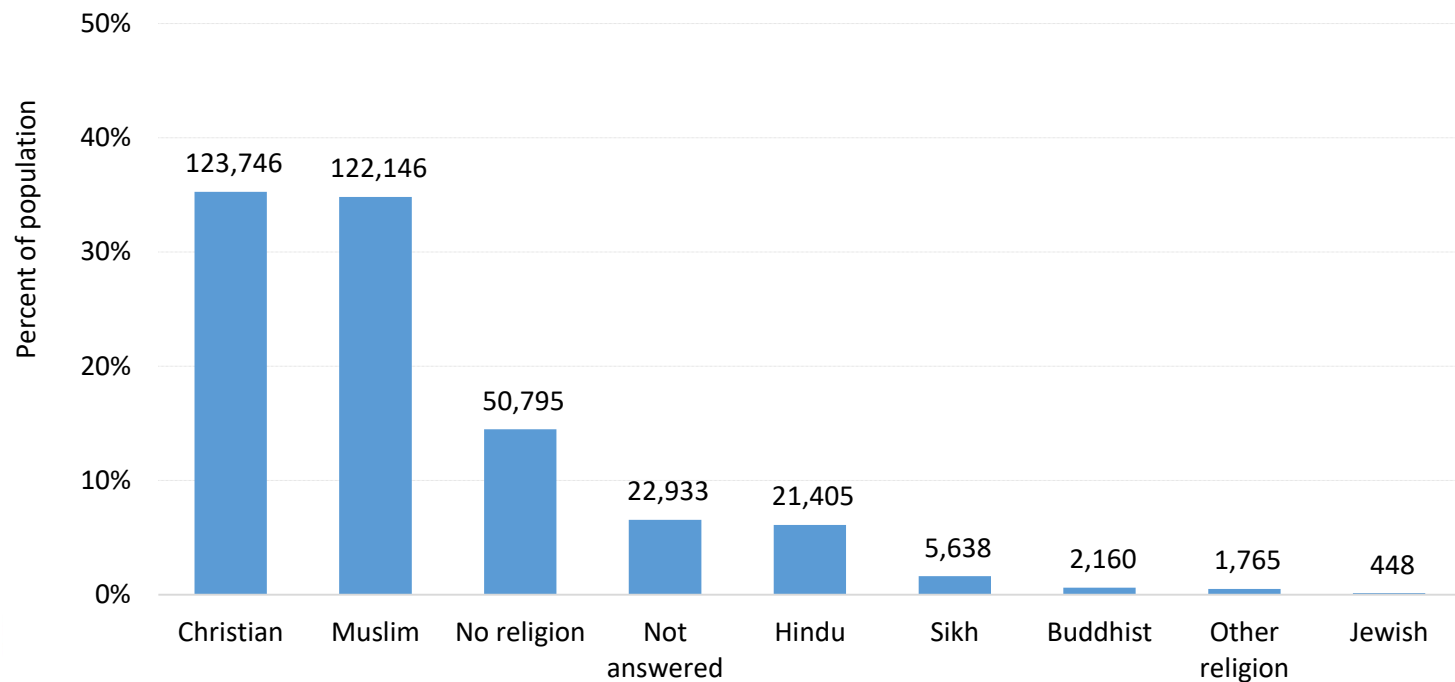
**WE ARE NEWHAM.**

Source: 2021 Census, ONS

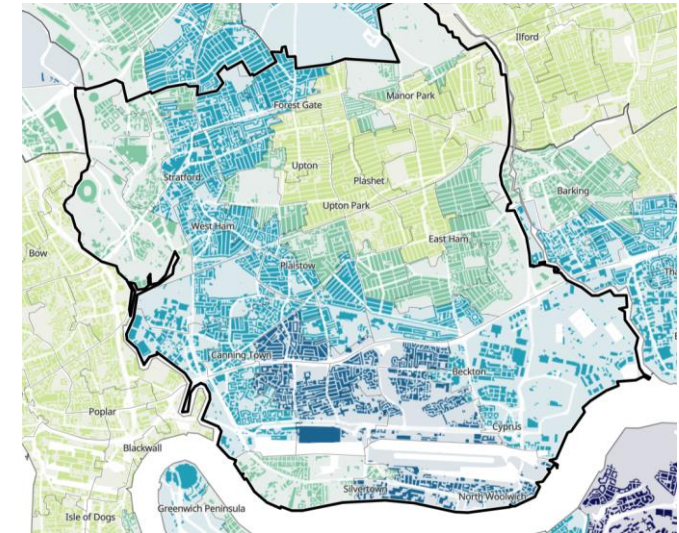
# Religion in Newham

- Newham is a religiously diverse borough. As of the 2021 census, 35.3% of Newham residents identify as Christian, followed by 34.8% who identify as Muslim. Newham also has a large Hindu population and a large non-religious population.
- Newham's Muslim and Hindu population are concentrated in the north east of the borough whereas Christians are concentrated in the south and west of the borough.

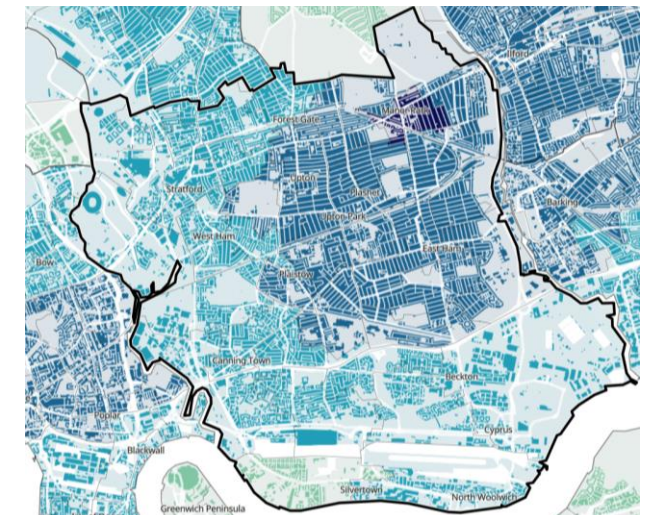
Number above bar refers to total population with religion



## Christianity in Newham by MSOA

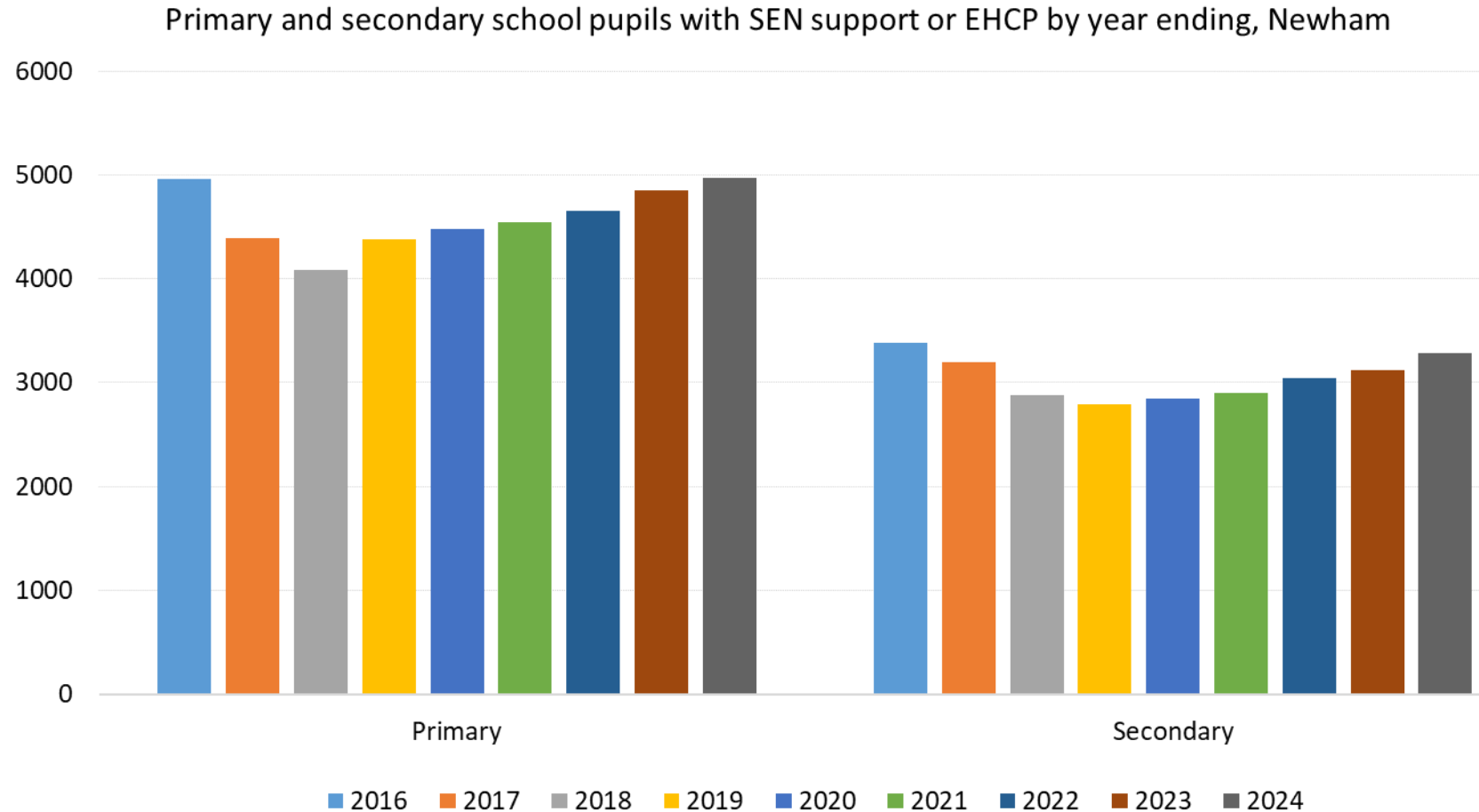


## Islam in Newham by MSOA



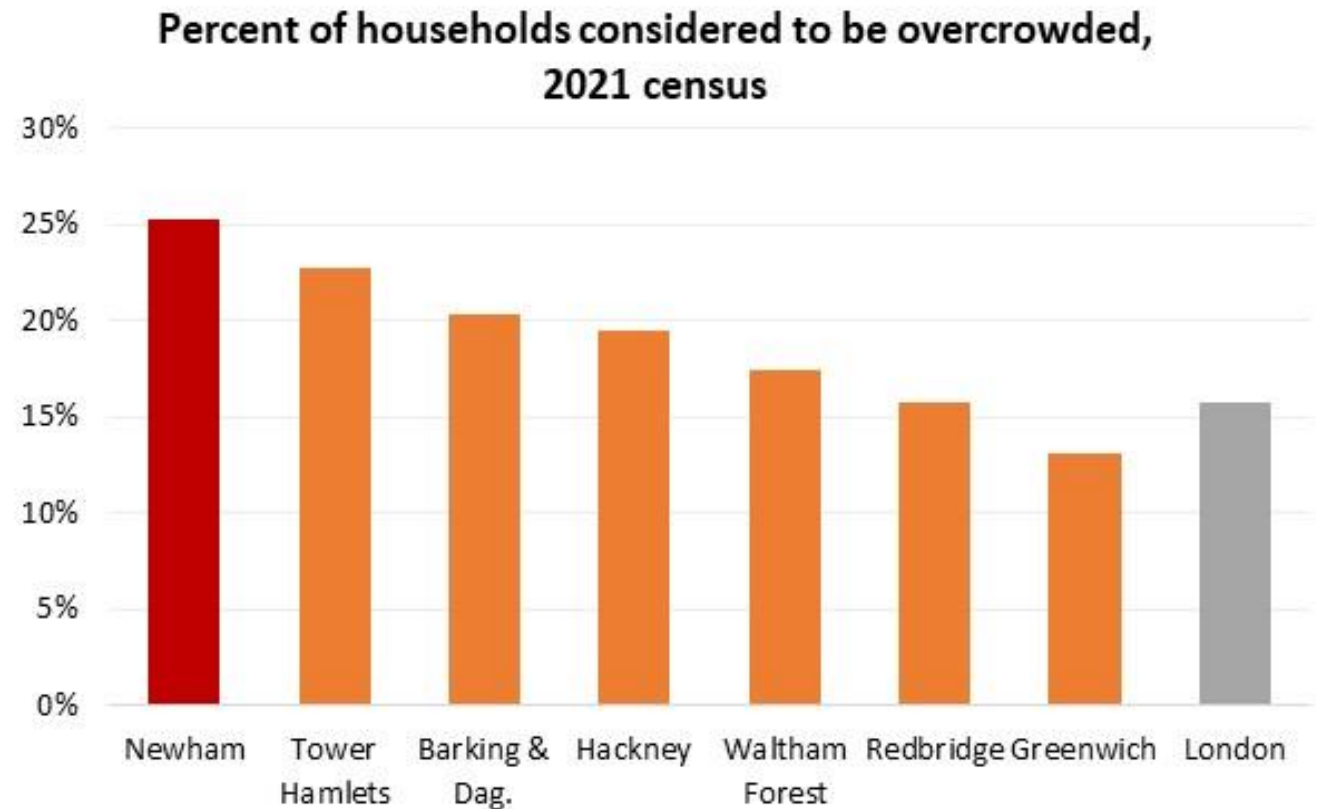
# SEND population: in future we expect rising numbers of children to transition

- The number of children in school with SEN support or EHCP has increased steadily since 2018.
- Further increases in the number of secondary school children with SEN/EHCP are expected as primary school children move on to secondary education over the next few years.
- This means we can expect increases in children with additional needs transitioning into adult care.



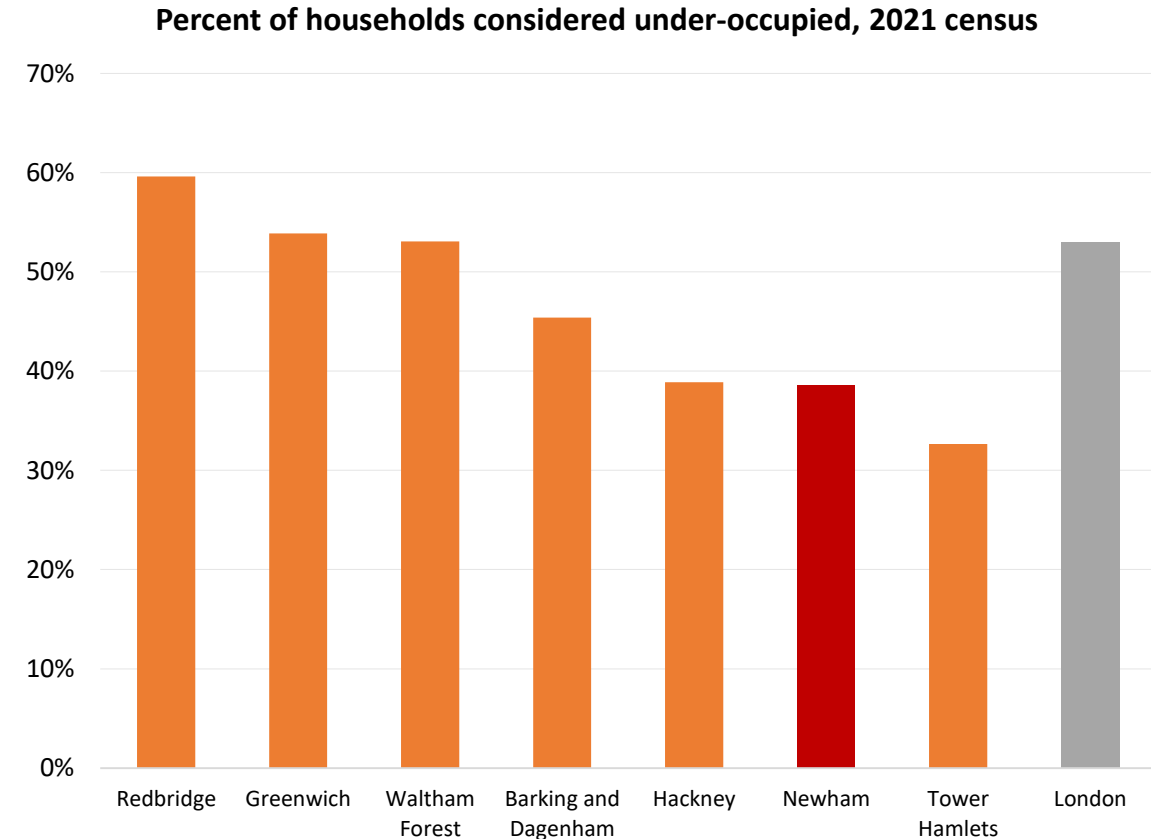
# Overcrowding is a significant issue for many residents

- Household overcrowding is where a household has one or more fewer bedrooms than the standard required.
- Among a range of impacts, it can directly affect health, such as through spread of infections, and can disrupt sleep, damage family relationships and affect children's educational outcomes.
- Newham has the highest level of overcrowding among local authorities in England, where an estimated one in four households were overcrowded in 2021.



# Under-occupancy is lower than for London

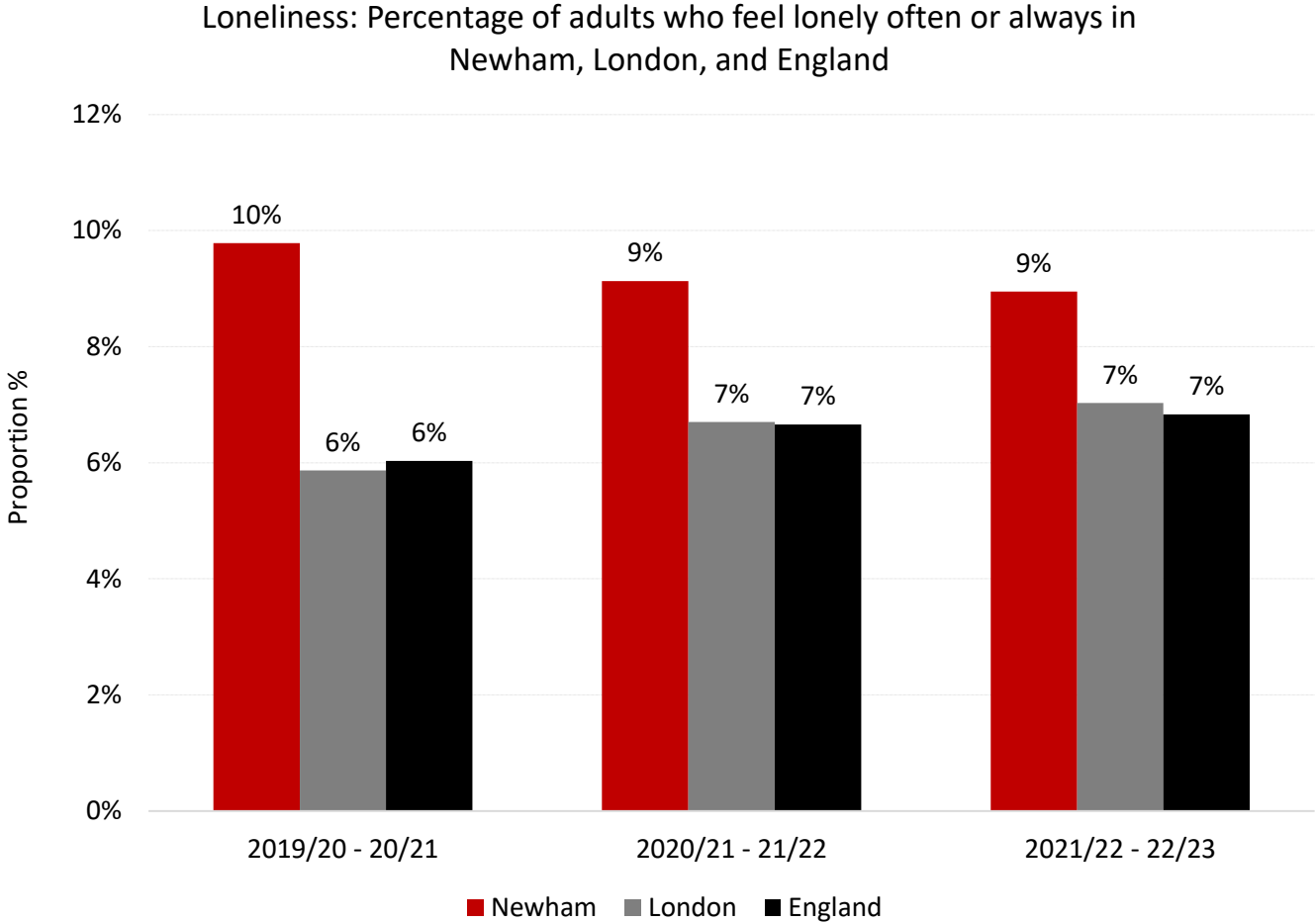
- Under-occupancy refers to when a household has at least one more room than the minimum required.
- As of the 2021 census, there were 44,507 households in Newham considered to be under-occupied. This amounts to approximately 4 in 10 households, much lower than the London average of 53%.
- Newham had the second lowest under-occupancy among households in NEL, behind Tower Hamlets.
- Although Barking & Dagenham is the most deprived borough in NEL it doesn't have the least under-occupancy



# Loneliness tends to be higher in Newham than London



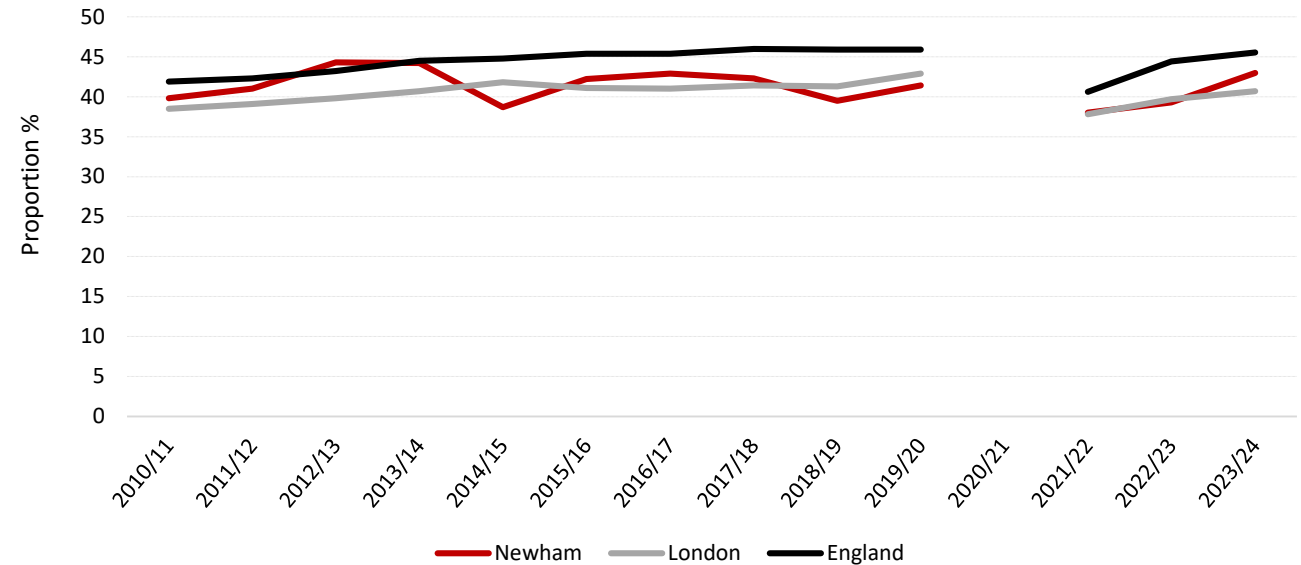
- Roughly 1 in 10 Newham residents said they feel lonely often or always.
- This number has been broadly consistent since 2019/20.
- Newham has a higher level of loneliness compared to both London and England.



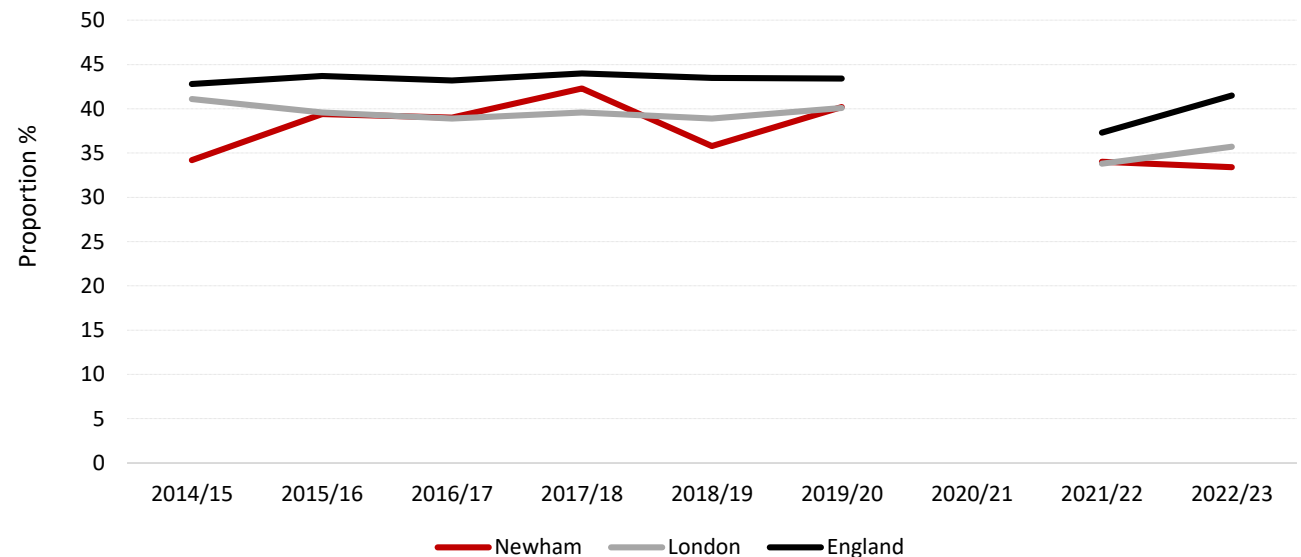
# Social isolation among ASC users is similar to London levels

- Among adult social care users aged 18+, the percent that feel they have as much social contact as they would like has remained consistently between 40 and 45% in Newham, London, and England since 2010, with a slight dip during the pandemic in 21/22.
- The proportion is slightly lower among ASC users aged 65+, but not statistically lower than for London.
- As of 22/23, only 1 in 3 Newham ASC users aged 65+ are having the amount of social contact they would like, slightly lower than in 21/22.

Social Isolation: percentage of adult social care users who have as much social contact as they would like (18+ yrs)



Social Isolation: percentage of adult social care users who have as much social contact as they would like (65+ yrs)



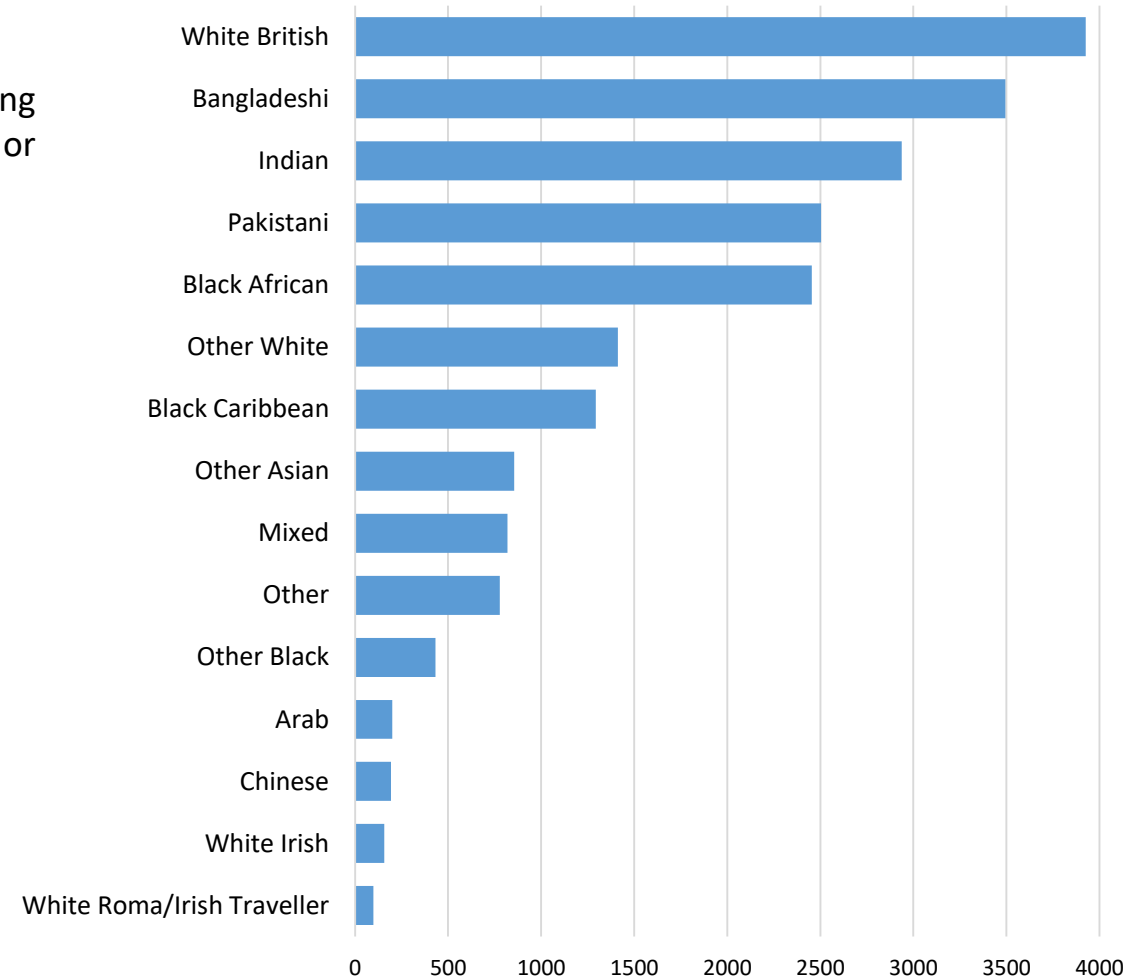
# Newham population profile: carers



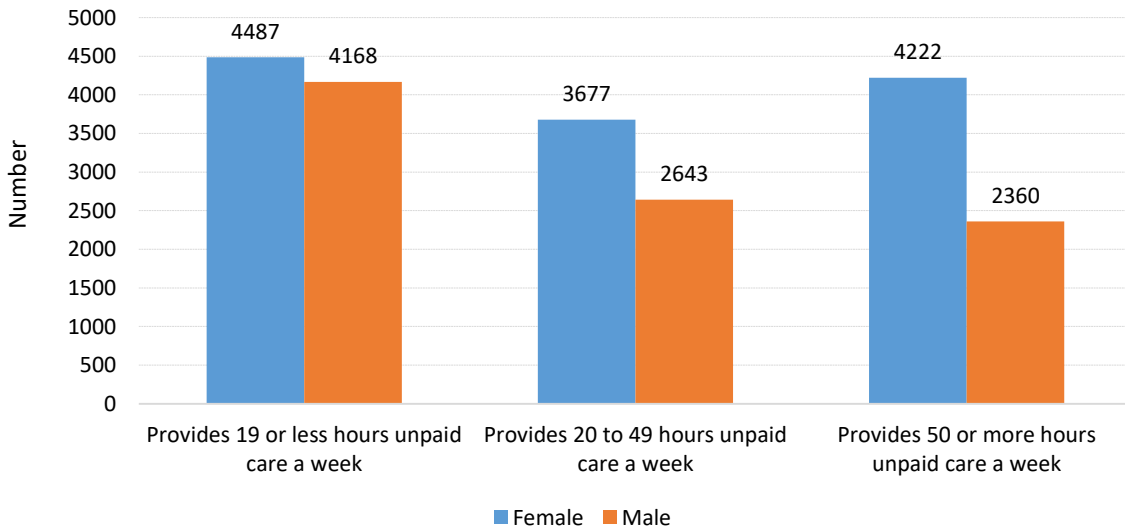
# Nearly 20% of carers provide 50+ hours weekly

- As of the 2021 census there were 21,557 people in Newham providing some levels of unpaid weekly care. This is approximately 6% of the Newham population.
- Roughly 57% of unpaid carers are female but this is disproportionately larger among those who provide more hours of weekly unpaid care. Among those providing 50 or more hours of unpaid care a week, 64% are female.
- The largest number of unpaid carers in Newham identify as White British, Bangladeshi, and Indian.
- Bangladeshi, Indian and Pakistani residents have average rates of ASC service use

Total number of unpaid carers by ethnic group in Newham



Number of unpaid carers by gender and hours provided in Newham

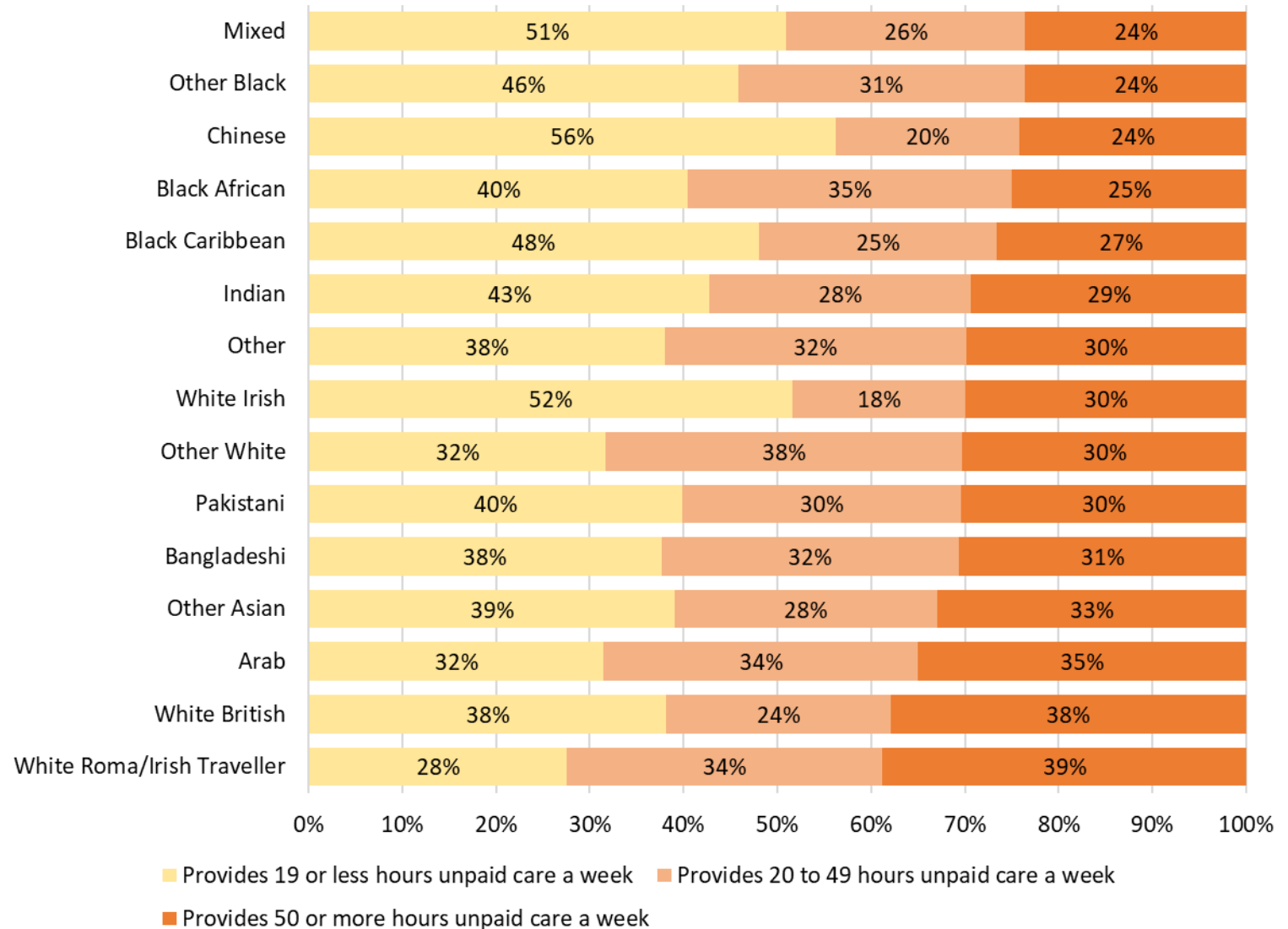


# The amount of caring hours provided varies by ethnicity



- Among those who provide unpaid care, those who identify as Irish Traveller, White British, Roma, and Arab provide on average the highest share of 50 or more hours of unpaid care a week.
- Amongst these groups, around 40% provide at least 50 hours weekly.
- Those of Mixed or Other Black ethnicity tend to provide less intensity of hours of unpaid care a week on average.

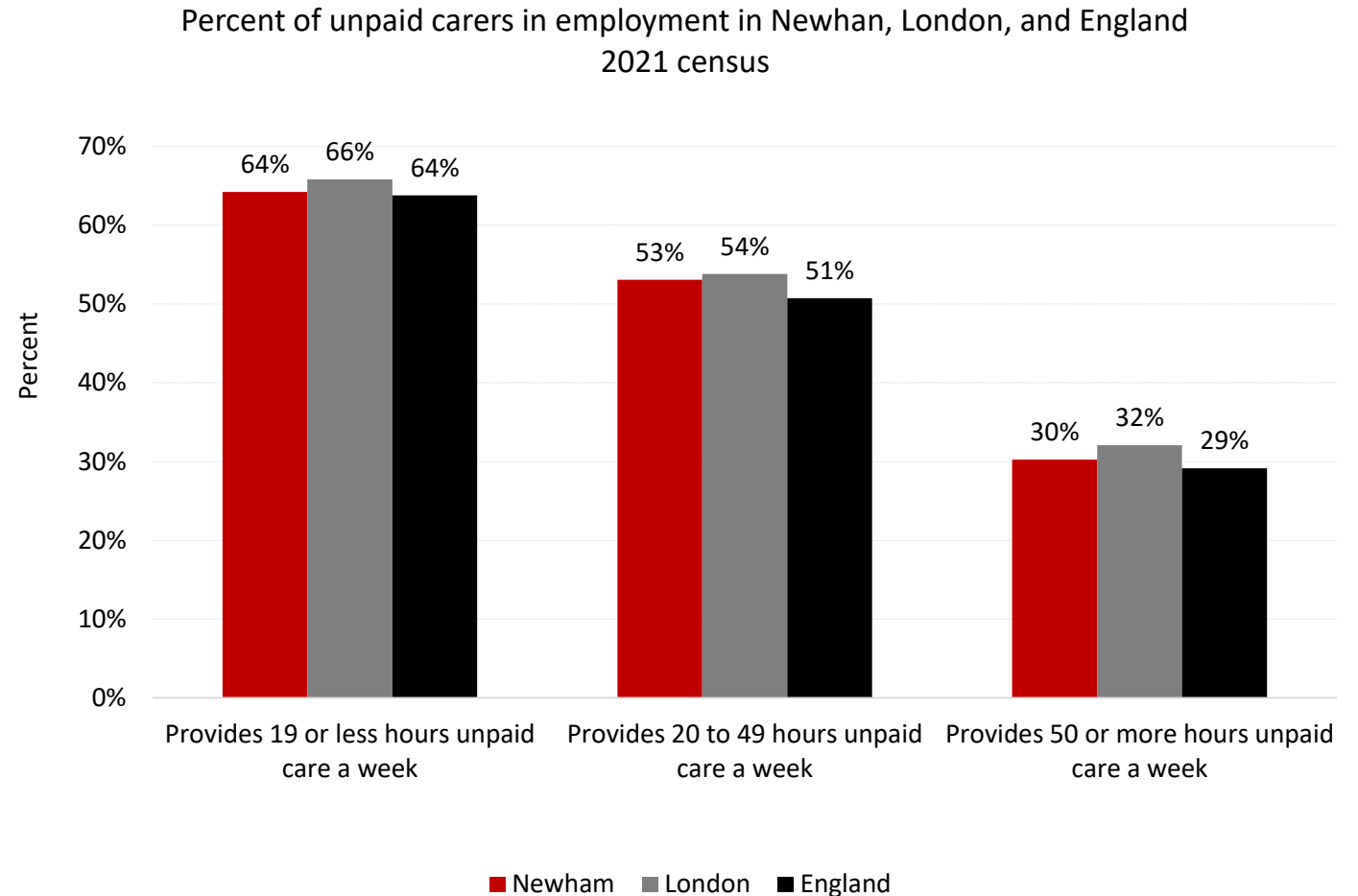
Intensity of care provided by unpaid carers by ethnic group in Newham, 2021 census



# Providing care comes at a cost of being in employment

## The effect is similar to that of London

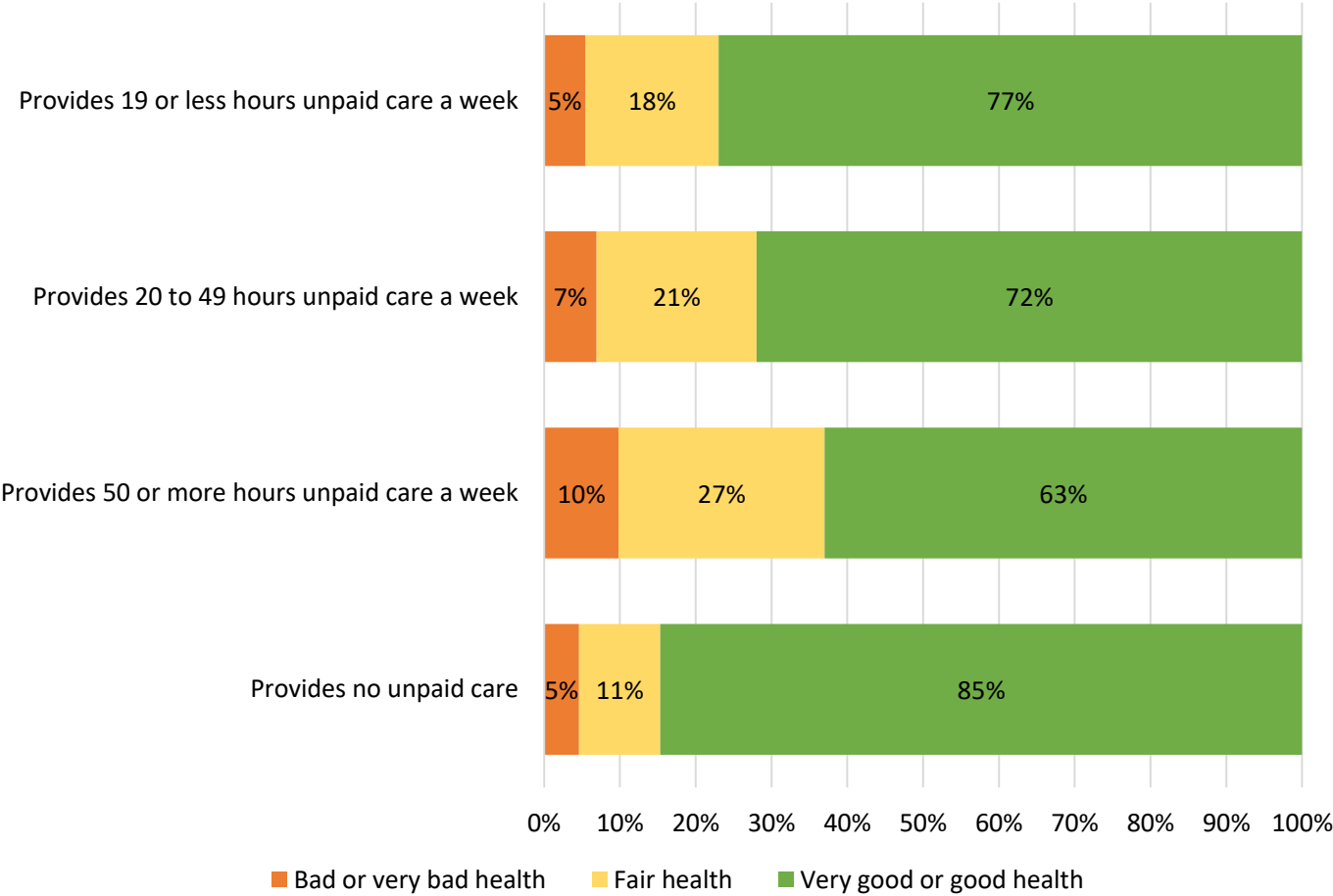
- The share of unpaid carers in employment decreases as their care intensity increases.
- 64% of unpaid carers who provide 19 or less hours per week are in employment compared to only 30% who provide 50 or more hours unpaid care a week.
- The level of employment of unpaid carers in Newham is largely similar to London and England.



# Health of carers declines with additional hours of caring

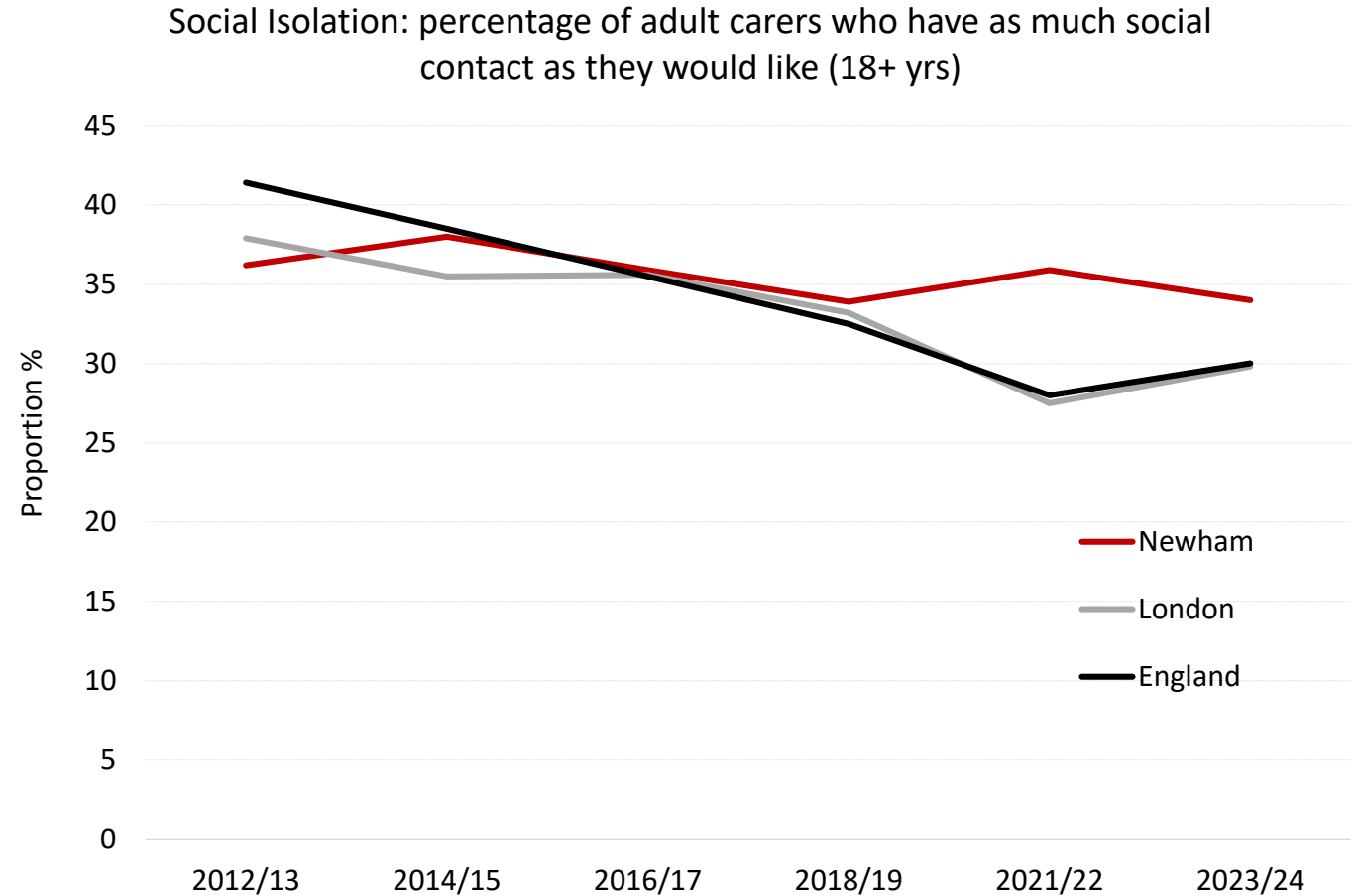
- In Newham, unpaid carers generally have a lower percent that say they have ‘very good or good’ health compared to those who provide no unpaid care.
- Unpaid carers who provide more hours of care per week also have worse self-perceived health, with only 63% saying they have ‘very good/good’ health compared to 85% who are not unpaid carers.
- 1 in 10 unpaid carers who provide 50 or more hours of care a week say their health is ‘bad or very bad’.

Self-perceived general health among Newham carers by intensity of care



# Social isolation among carers has recently become better than for London

The proportion of ASC carers in Newham who have as much social contact as they'd like is higher than London and England and has remained stable since 2012 despite a drop in London and England.



# Local identification of carers



Initial work which reviewed summary, aggregated carers data provided by Newham Council and ICB in 2023

This found that there were:

- 10,684 Newham carers known to the Council (5,495 young carers and 5,194 adult carers)
- 7,127 Newham carers known to the NHS (228 young carers and 6,889 adult carers).

There appeared to be little overlap in these records. NHS services were essentially unaware of young carers and thus unable to support them and met statutory duties.

Similarly, the Council is unaware of many adult carers who are known to the NHS.

By comparison, 21,556 residents identified as provided unpaid care according to Census 2021. This suggests that between 50% and 80% of carers in Newham are known to health and care services.

# Use of Adult Social Care: Current Social Care Packages

# Characteristics of current packages as at Feb 2025



Service type	Service users	Packages	Primary need	18 - 64		65+		Total	
				Users	Packages	Users	Packages	Users	Packages
Homecare	1840	2498	Physical support	646	1120	1564	2388	2210	3508
Direct Payment	1170	2115	Learning Disability	702	1588	70	105	772	1693
Carer Respite / Support	568	579	Access & mobility	279	532	480	806	759	1338
Supported Living	539	547	Mental Health	494	625	126	170	620	795
Day Centre	374	388	Social isolation / other	37	60	40	60	77	120
Extra Care	173	325	Memory and Cognition	11	15	44	71	55	86
Residential Care	317	320	Visual impairment	21	35	17	25	38	60
Nursing Care	195	196	Carer support	12	16	9	12	21	28
Homecare Dischrg from Hosp	177	180	Dual impairment	<10	<10	<10	<10	<20	<20
Transport	163	164	Hearing impairment	<10	<10	<10	<10	<20	<20
Enablement/reablement	138	140	Substance misuse	<10	<10	<10	<10	<20	<20
Discretionary Payments	58	69	Not recorded	<10	<10	<10	<10	<20	<20
Telecare	66	66	<b>Total</b>	<b>2229</b>	<b>4038</b>	<b>2357</b>	<b>3655</b>	<b>4586</b>	<b>7693</b>
Shared Lives	57	57							
Other	21	21							
Discharge to assess care home	11	11							
Live in Care	<10	<10							
Support into Employment	<10	<10							
Virtual Ward	<10	<10							
Professional Support	<10	<10							
Step Up/Down	<10	<10							
<b>Total</b>	<b>4584</b>	<b>7693</b>							

Around 7,700 ASC packages used by around 4,600 service users residents.

49% of service users and 52% of packages are for <65 years.

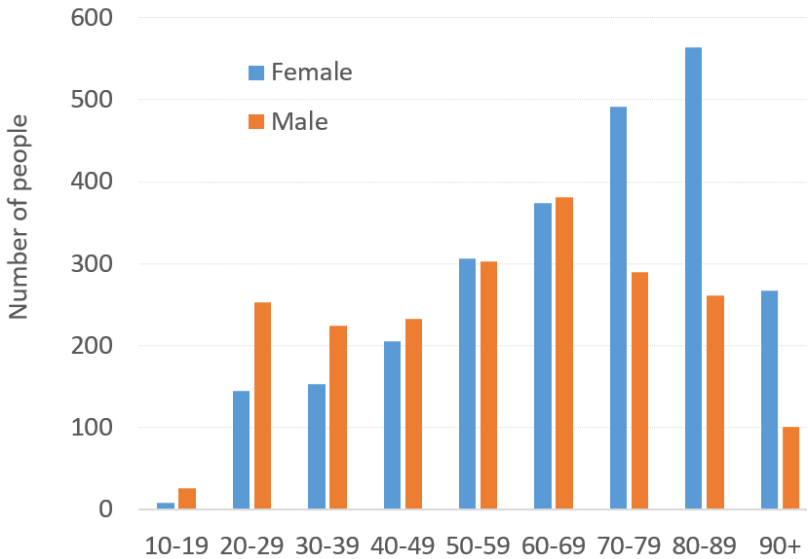
A third are for Homecare (including Personal Care).

Physical support forms 45% of primary needs (65% for 65+ years).



# Characteristics of current packages as at Feb 2025

Ageband	Female	Male	Total
10-19	8	26	34
20-29	145	253	398
30-39	153	224	377
40-49	206	233	439
50-59	306	303	609
60-69	374	381	755
70-79	491	290	781
80-89	564	261	825
90+	267	101	368
Total	2512	2070	4582



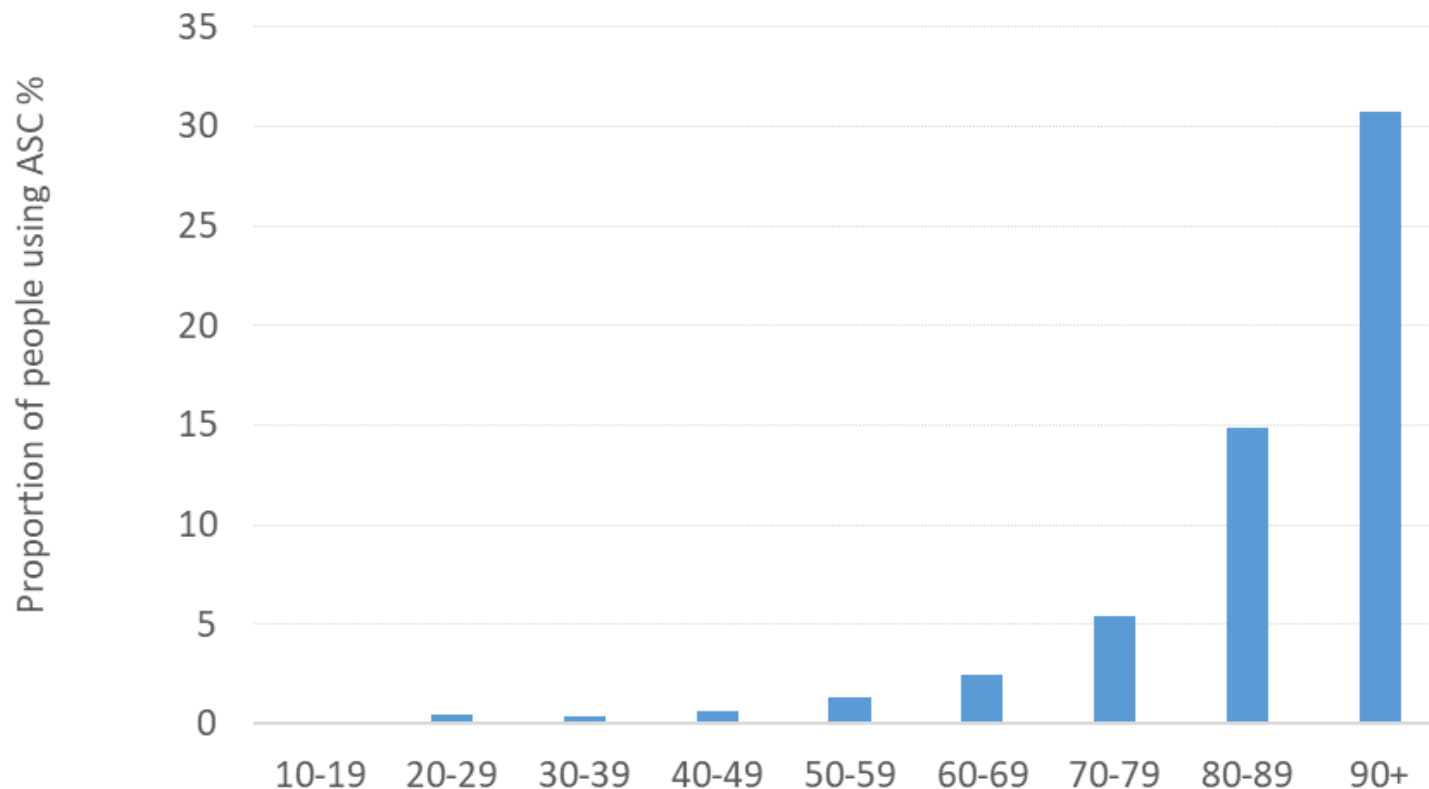
Ethnicity	Count	Directly Standardised Rate		Population >60 years
		<60 years	>60 years	
Black Caribbean	778	35.5	105.4	5994
Black African	1482	23.5	72.0	13034
White British	1605	16.8	67.0	16900
Unknown	79	1.5	57.7	1401
Indian	846	6.4	55.3	11138
White & Asian	22	7.5	53.1	123
Bangladeshi	821	8.1	52.6	10058
Pakistani	684	12.5	46.3	7428
Mixed Other	68	7.8	46.3	699
Other Asian	281	6.8	39.6	4288
Other Black	138	10.1	30.9	1950
Other ethnic group	159	4.2	26.1	4407
Chinese	19	0.2	22.0	1149
White Other	297	2.6	19.5	13110
White & Black Caribbean	36	14.4	17.9	484
White & Black African	30	11.0	13.7	408

There are around 2,500 female and 2,070 male service users. Considerable more older females use services compared to older males. The highest rate of service use is seen amongst Black Caribbean followed by Black African residents for 60+ years.

Amongst residents aged 60+ years, the largest ethnic group is White British which has the third highest service use rate. The lowest service use rate is seen in White & Black African, White & Black Caribbean, and White Other ethnic groups.

Rates of service use for Asian communities tend to be close to the average for Newham.

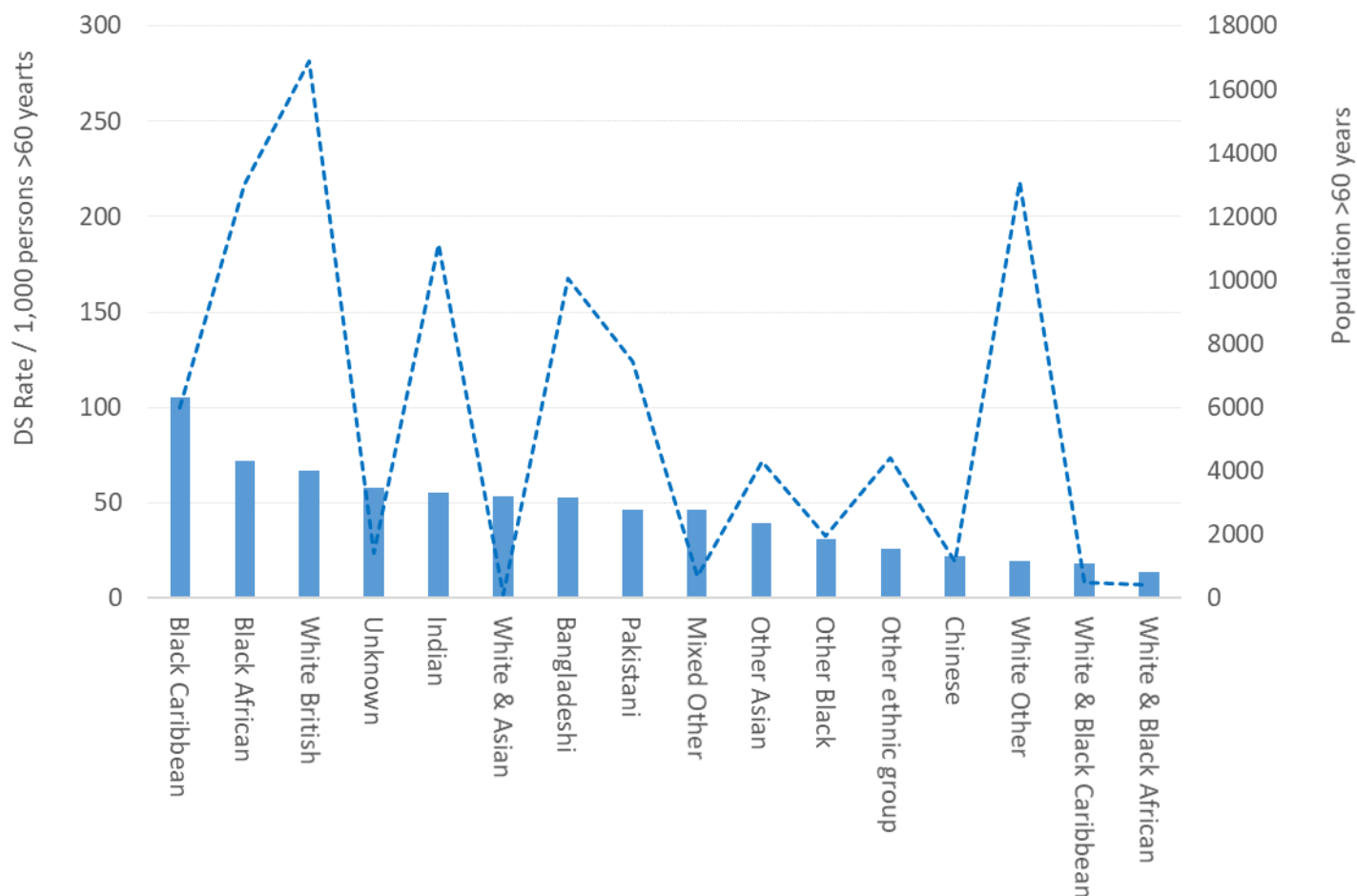
# Characteristics of current packages as at Feb 2025



The proportion of people using ASC increases rapidly with advancing age.

31% of Newham residents aged more than 90 years used ASC services and 15% of residents aged 80-89 years used ASC.

# Characteristics of current packages as at Feb 2025



NB Dashed blue line is population size (see axis on right)

Directly age standardised rate for current packages for residents aged 60+ years by ethnicity.

The highest rate of service use is seen amongst Black Caribbean followed by Black African residents for 60+ years.

The lowest service use rate is seen in White & Black African, White & Black Caribbean, and White Other ethnic groups.

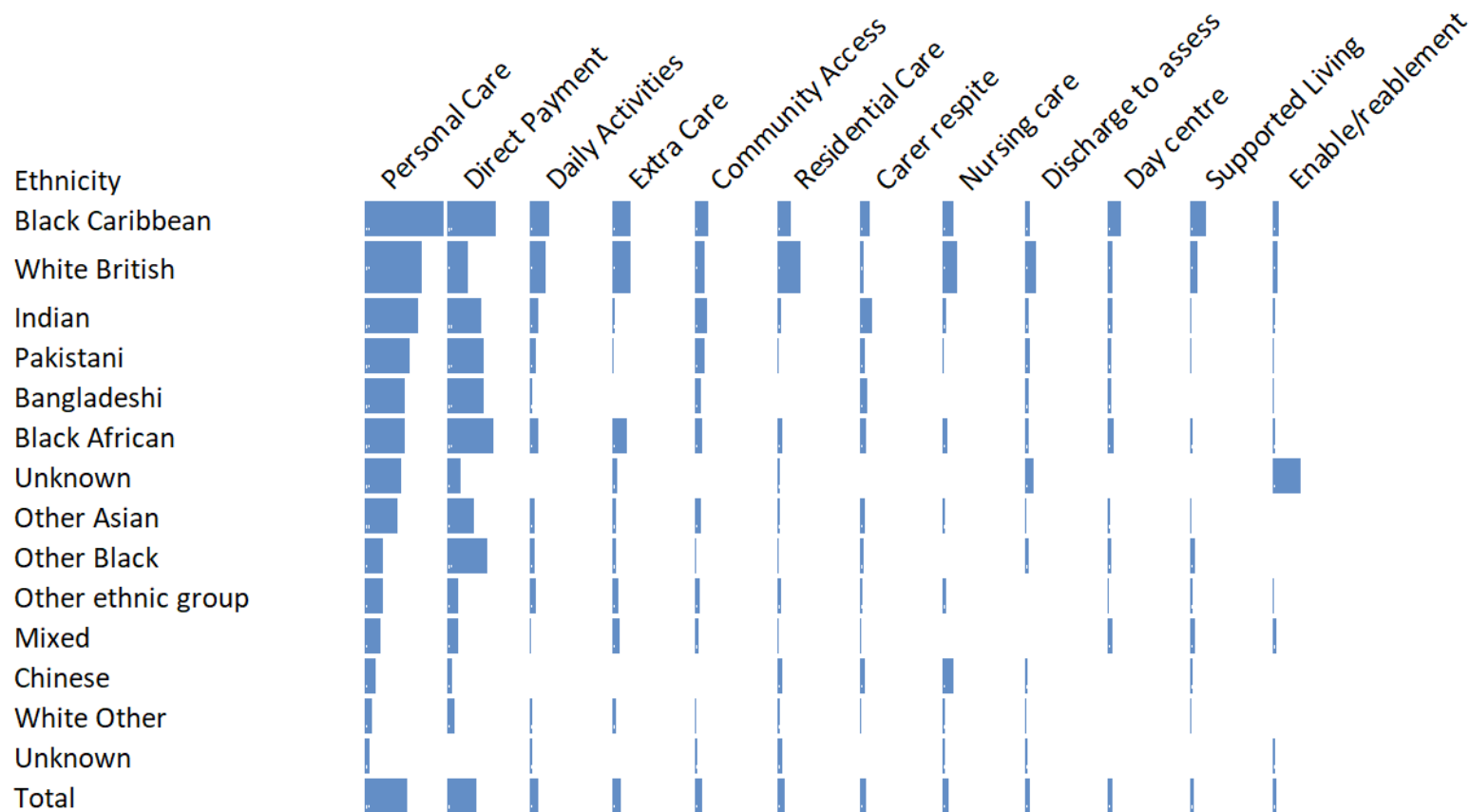
Amongst residents aged 60+ years, the largest ethnic groups are White British and Other White.

Service use rates for Indian, Bangladeshi, Pakistani and Other Asian residents tend to be between that of highest and lowest use, close to the average value for Newham.

NB this figure counts use of packages, not individuals.

# Characteristics of current packages as at Feb 2025

Size of blue bar is proportional to the directly age standardised rate.  
Large bar indicates a higher rate.



Directly age standardised rates for the 10 largest current package types (by count) for residents aged 60+ years by ethnicity.

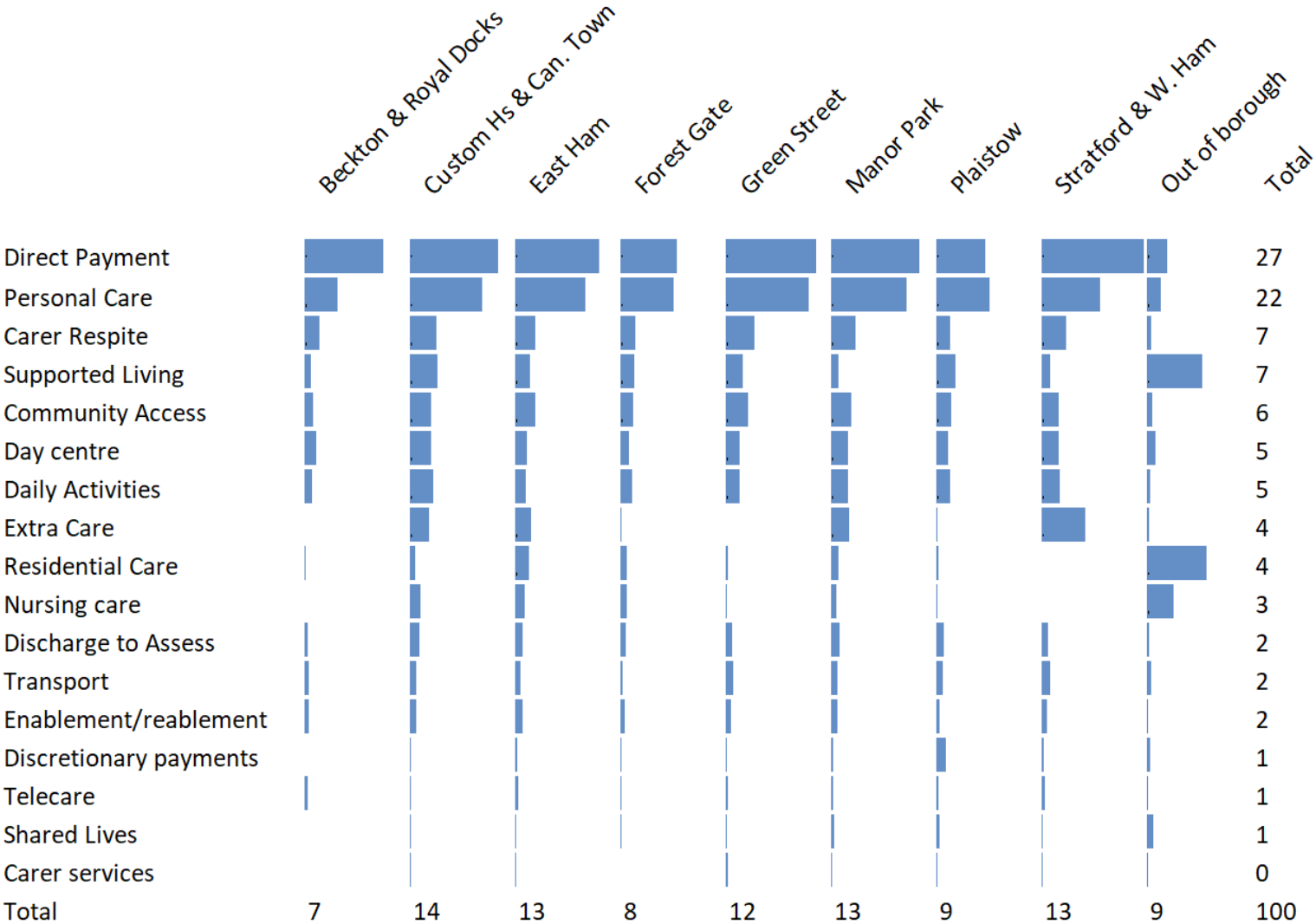
The highest rate of service use is seen amongst Black Caribbean residents for Personal Care. The next highest use rate is for Personal Care amongst White British residents.

Highest use of Direct Payment can be seen amongst Black Caribbean, Black African and Other Black residents. White British residents have the highest use rate for Residential Care.

NB this figure counts use of packages, not individuals.

# Characteristics of current packages as at Feb 2025

Size of blue bar represents the proportion of the total (total = 100).  
 Large bar indicates a greater proportion.



Newham neighbourhood proportion of current package types for residents (all ages) by ethnicity.

Custom House & Canning Town has 14% of all packages.

East Ham, Manor Park and Stratford have 13%.

The smallest proportion is seen in Beckton & Royal Docks (7%).

Extra Care is concentrated in Stratford. Supported Living and Residential Care are both mostly found out of borough.

Personal Care is less common in Beckton whereas Direct Payments are least common in Plaistow and Forest Gate.

NB this figure counts use of packages, not individuals.

**WE ARE NEWHAM.**

Source: AzeusCare

# Characteristics of current packages: deprivation as at Feb 2025



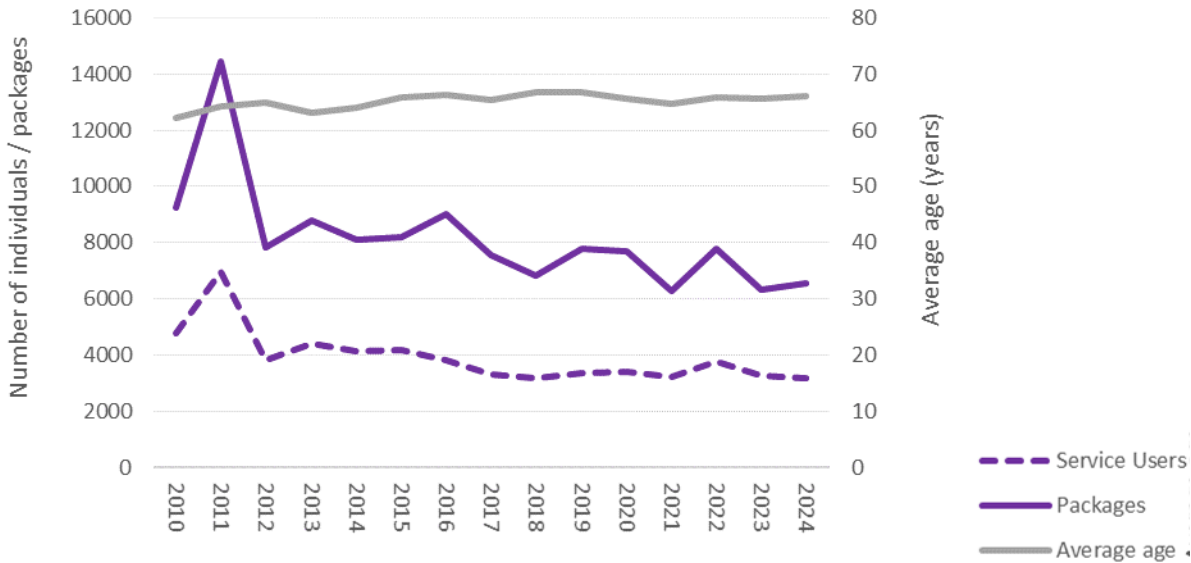
Service type	IMD Total score	Number of packages	Ageband	Average IMD Total score	
				ASC user	No ASC
Homecare	30.8	2498	10-19	31.5	29.9
Direct payment	31.1	2115	20-29	31.5	29.4
Carer respite / support	30.7	579	30-39	31.7	29.1
Supported Living	32.6	547	40-49	31.5	29.3
Day centre	31.0	388	50-59	30.8	29.9
Extra Care	33.7	325	60-69	31.8	30.1
Residential Care	35.0	320	70-79	31.4	29.8
Nursing care	38.0	196	80-89	30.9	30.1
Homecare Discharges from Hospital	30.4	180	90+	30.6	30.0
Transport	30.6	164	Total	31.3	29.5
Enablement/reablement	31.4	140			
Discretionary Payments	32.6	69			
Telecare	30.6	66			
Shared Lives	31.6	57			
Other	30.3	49			
Total	31.3	7693			

- Deprivation (Total IMD) is very slightly higher for ASC service users compared to residents not using ASC of the same age. There is little variation in deprivation score across agebands.
- Deprivation varies more by package type than by ageband. People using Nursing Care have on average the greatest deprivation score, followed by Residential Care users. Deprivation scores for those using other package types are lower and similar (typical a score of 31).

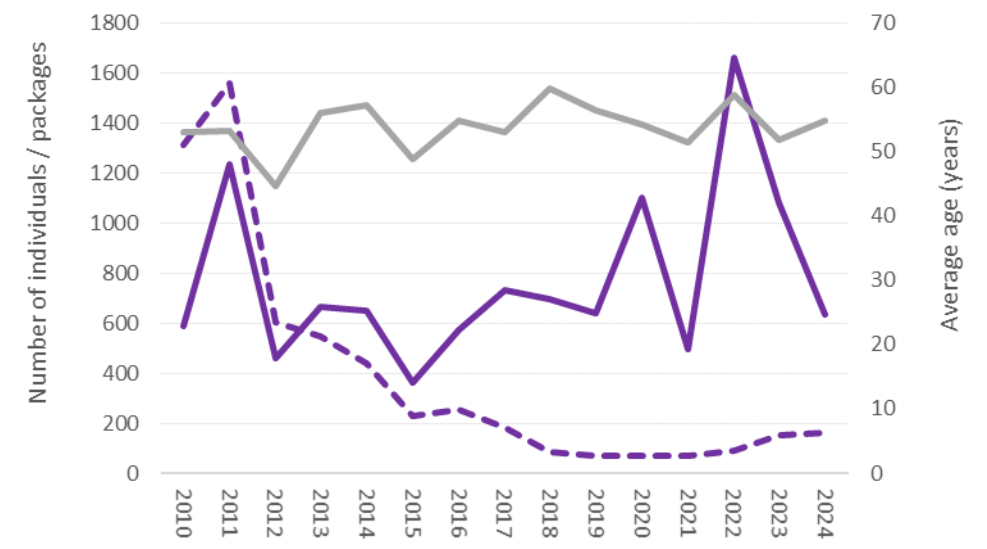
# Time trend of packages as at Feb 2025



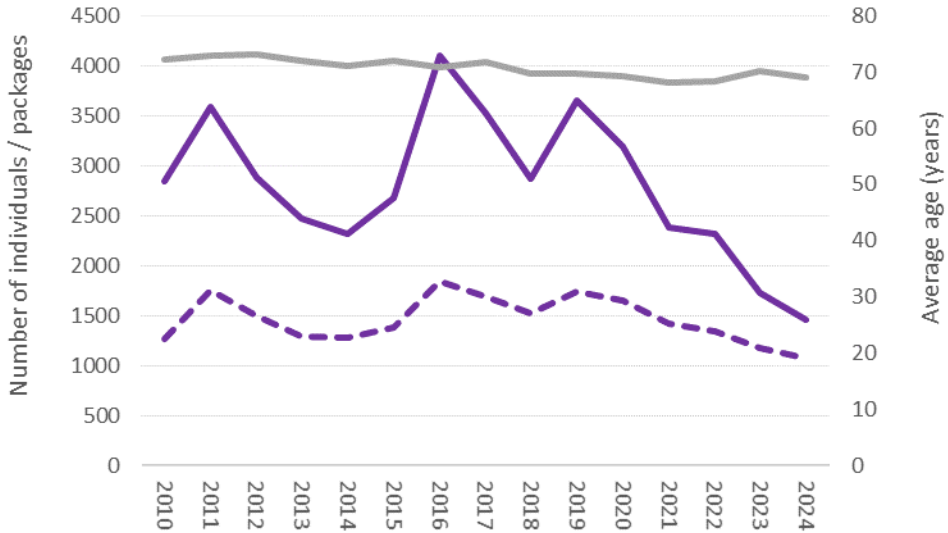
## All services



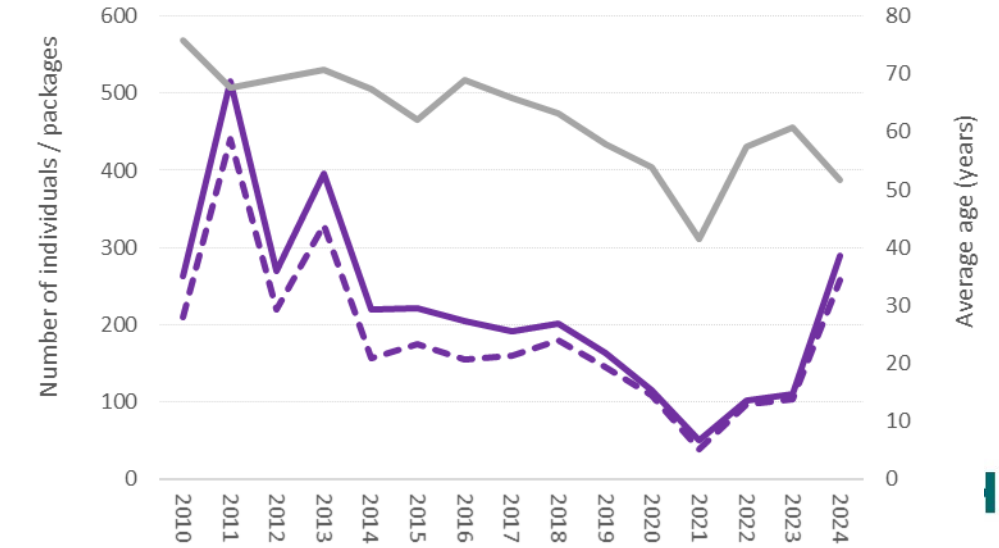
## Direct payments



## Homecare



## Day centre

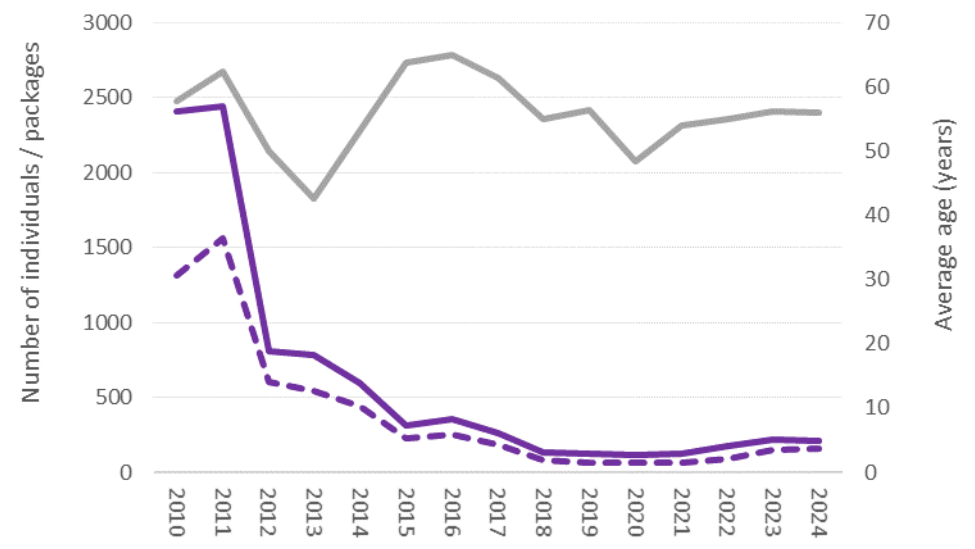


Source: AzeusCare

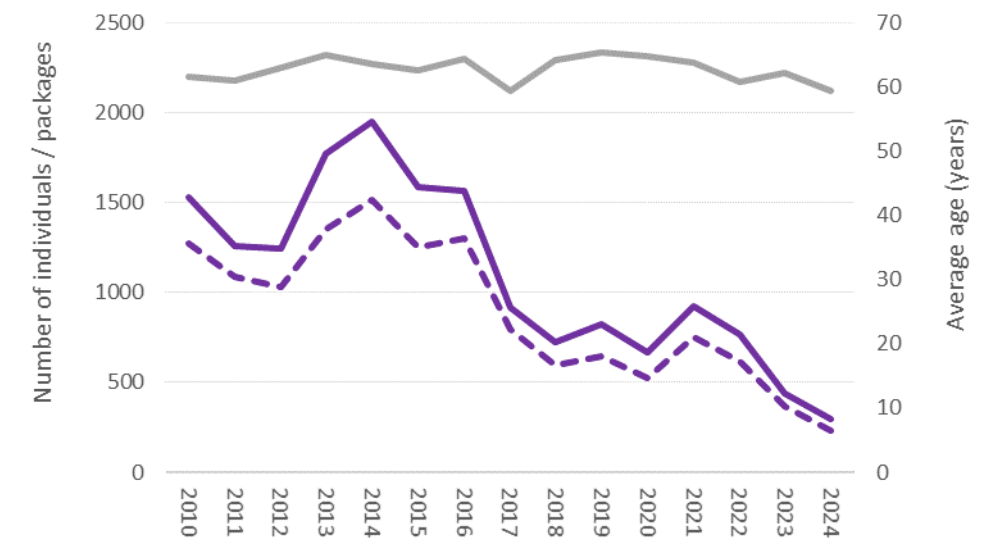


# Time trend of packages as at Feb 2025

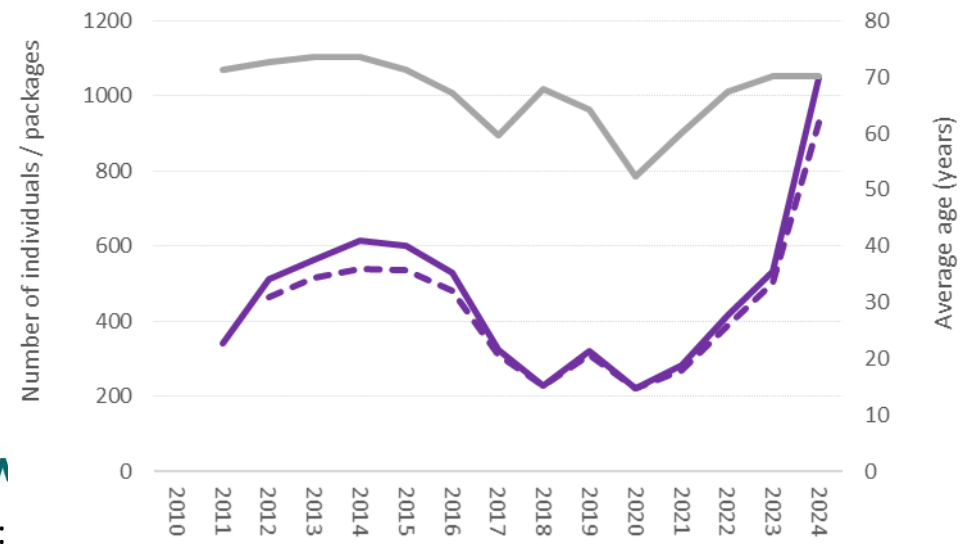
Discretionary Payments



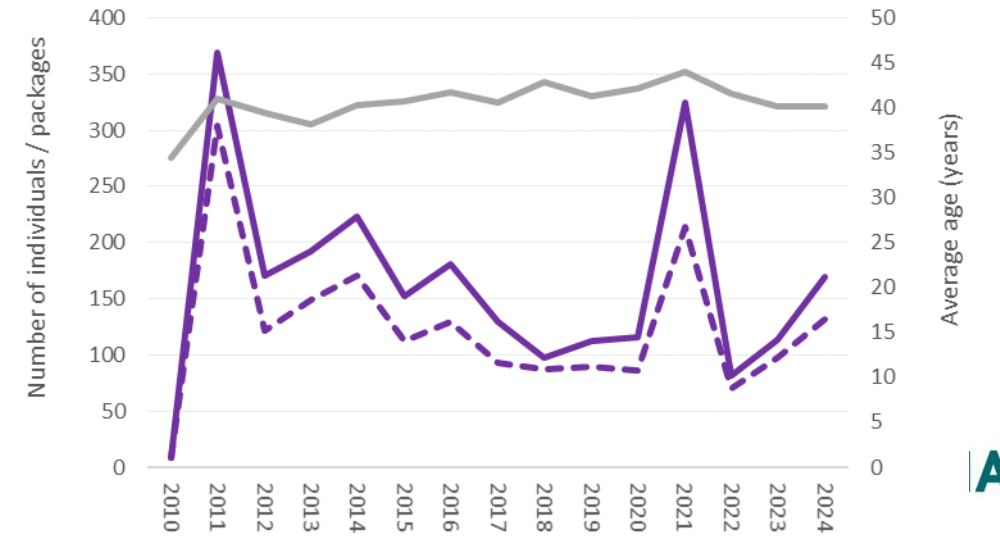
Equipment / adaptation



Enable / reablement



Supported Living



new

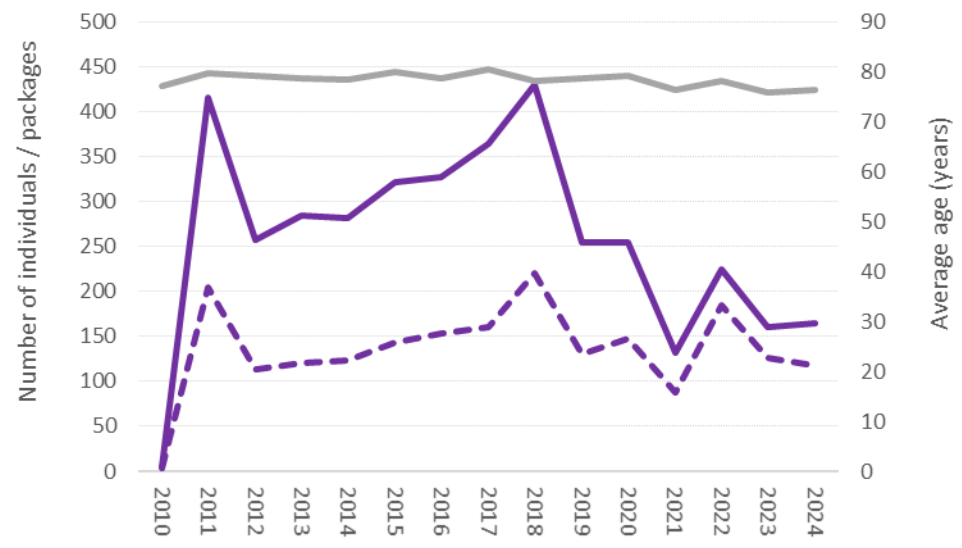
Source:



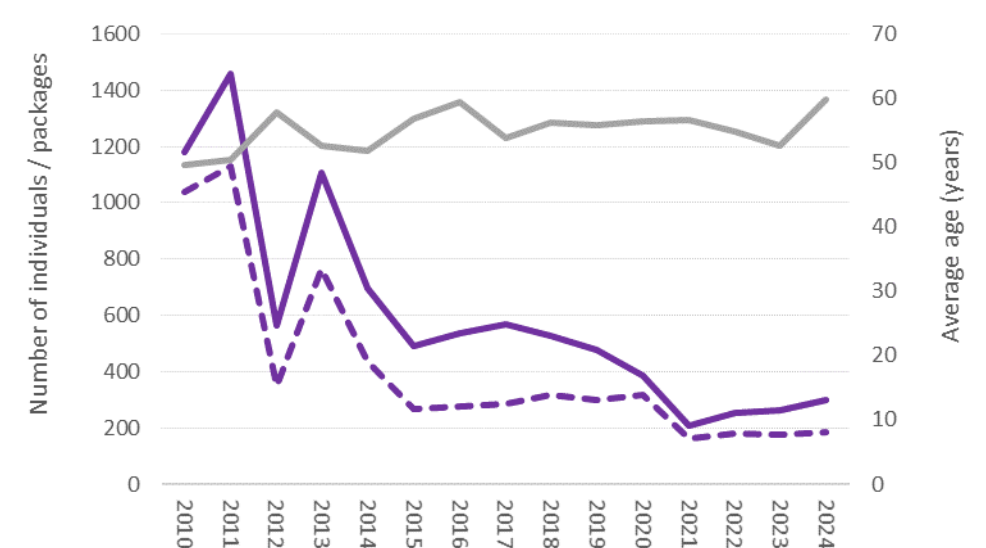
# Time trend of packages as at Feb 2025



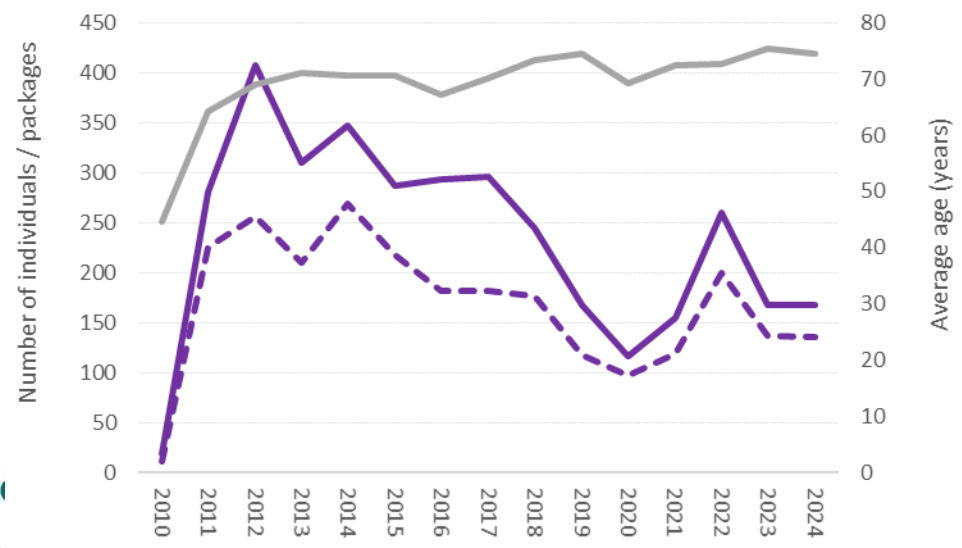
Nursing care



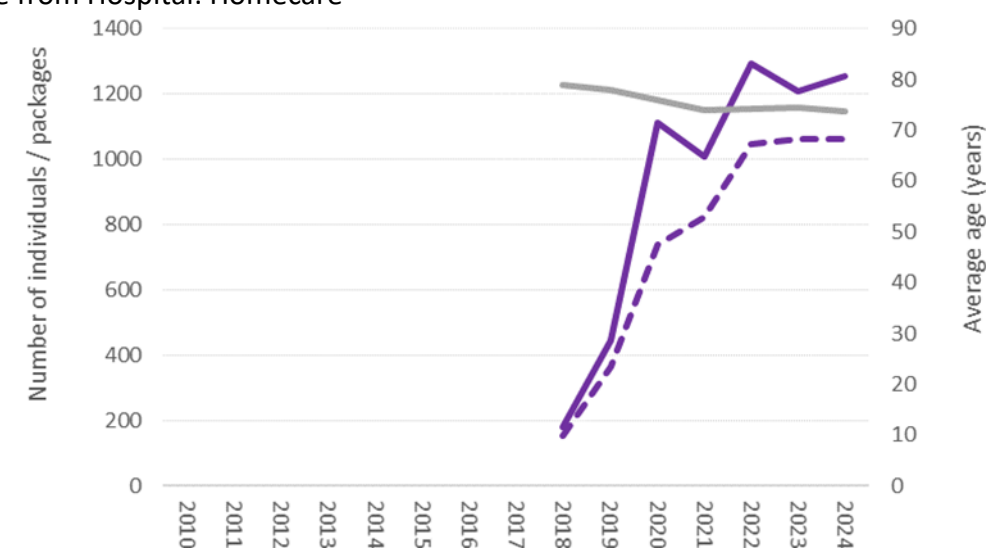
Carer respite



Residential care



Discharge from Hospital: Homecare



# Average annual change over last 4 years (2021 to 2024)

Service type	Number of		Average age
	Packages	Individuals	
All services	-74	-67	0.4
Homecare	-338	-120	0.4
Equip & Adapt	-221	-180	-1.2
Supported Living	-44	-22	-1.3
Direct payment	-17	34	0.3
Residential care	-5	-2	0.9
Nursing care	4	3	-0.2
Carer respite / support	28	7	0.7
Discretionary Payments	30	34	0.7
Discharge from Hospital: Homecare	65	73	-0.1
Day centre	73	67	3.4
Enablement/reablement	242	210	3.3

Over the past 4 years the total number of packages has fallen on average by 74 each year.

Homecare and Equipment & Adaptations fell the most (by 338 and 221 packages per year respectively). Enable/reablement increased by an average of 242 packages each year.

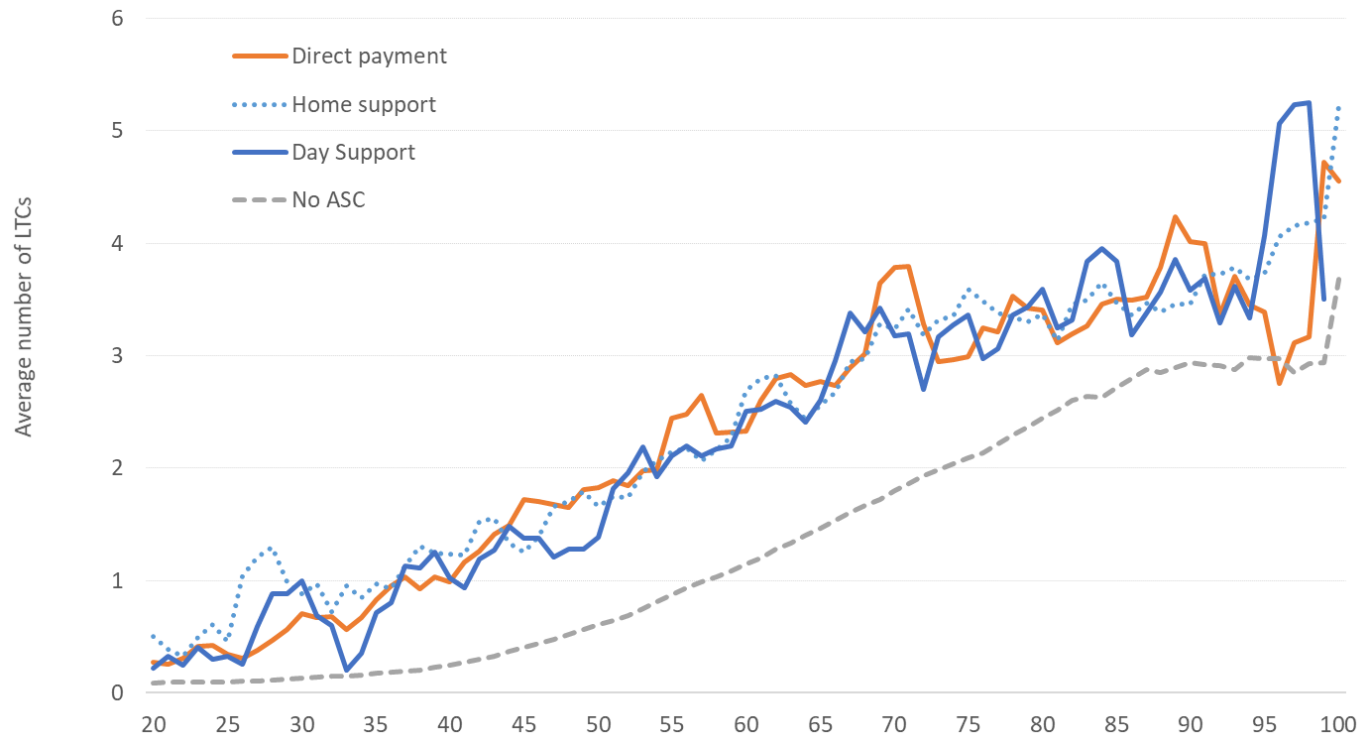
The number of individuals receiving packages fell on average by 67 each year. 120 fewer people received Homecare each year and 210 more people received reablement each year.

Overall each year the average age increased by 0.4 years. Average age of people receiving reablement increased by 3.3 years of age each year.

Use of residential care fell slightly and average age increased by 0.9. Conversely there was a small increase in the use of nursing care and average age fell by 0.2 years.

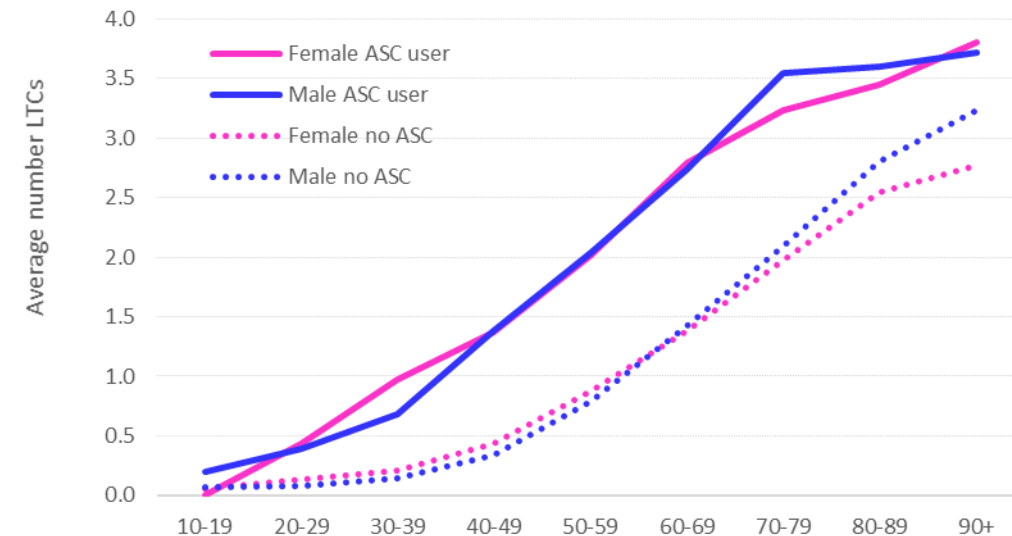
The use of hospital discharge to homecare and Day centre both saw an increase in use over the period.

# Cross sectional analysis: LTCs and age

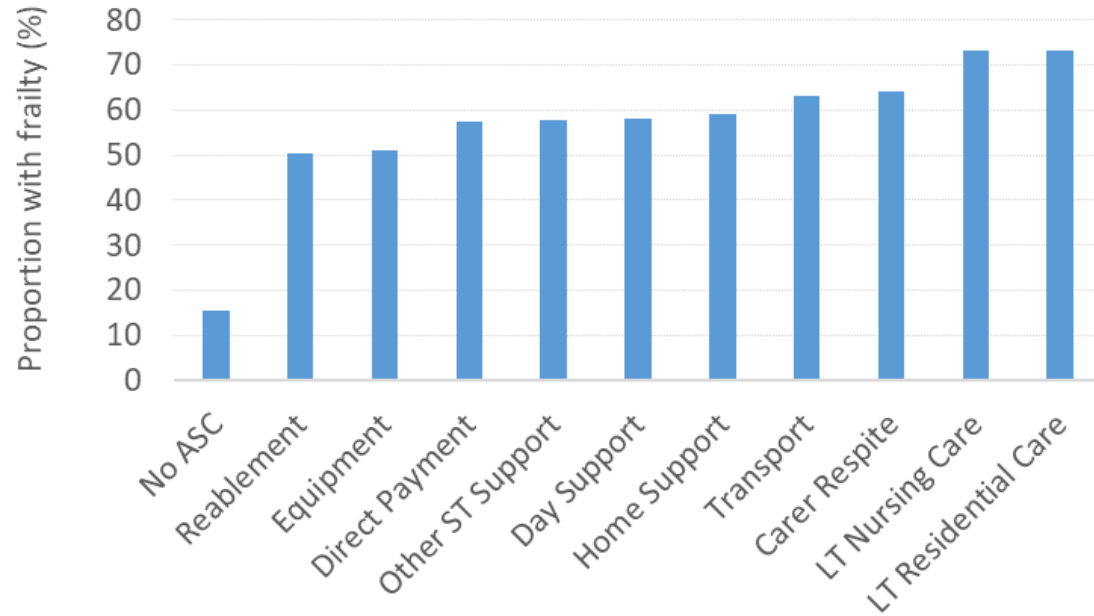


Users of ASC services have more Long Term Conditions on average than people of the same age not using ASC services.

There is approximately a 20 year gap for the same number of LTCs between people using / not using ASC services.



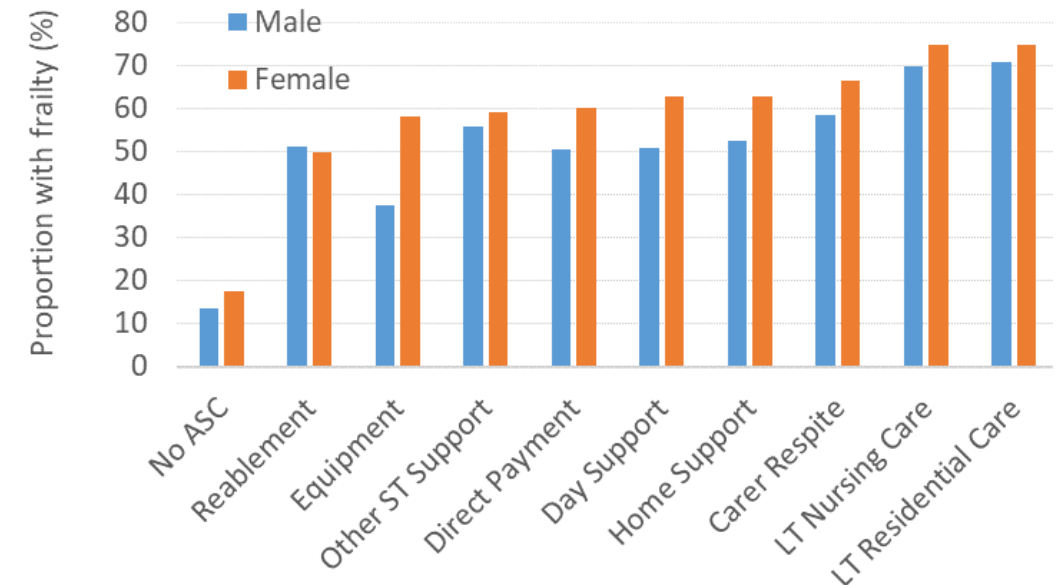
# Cross sectional analysis: frailty in 60+ years



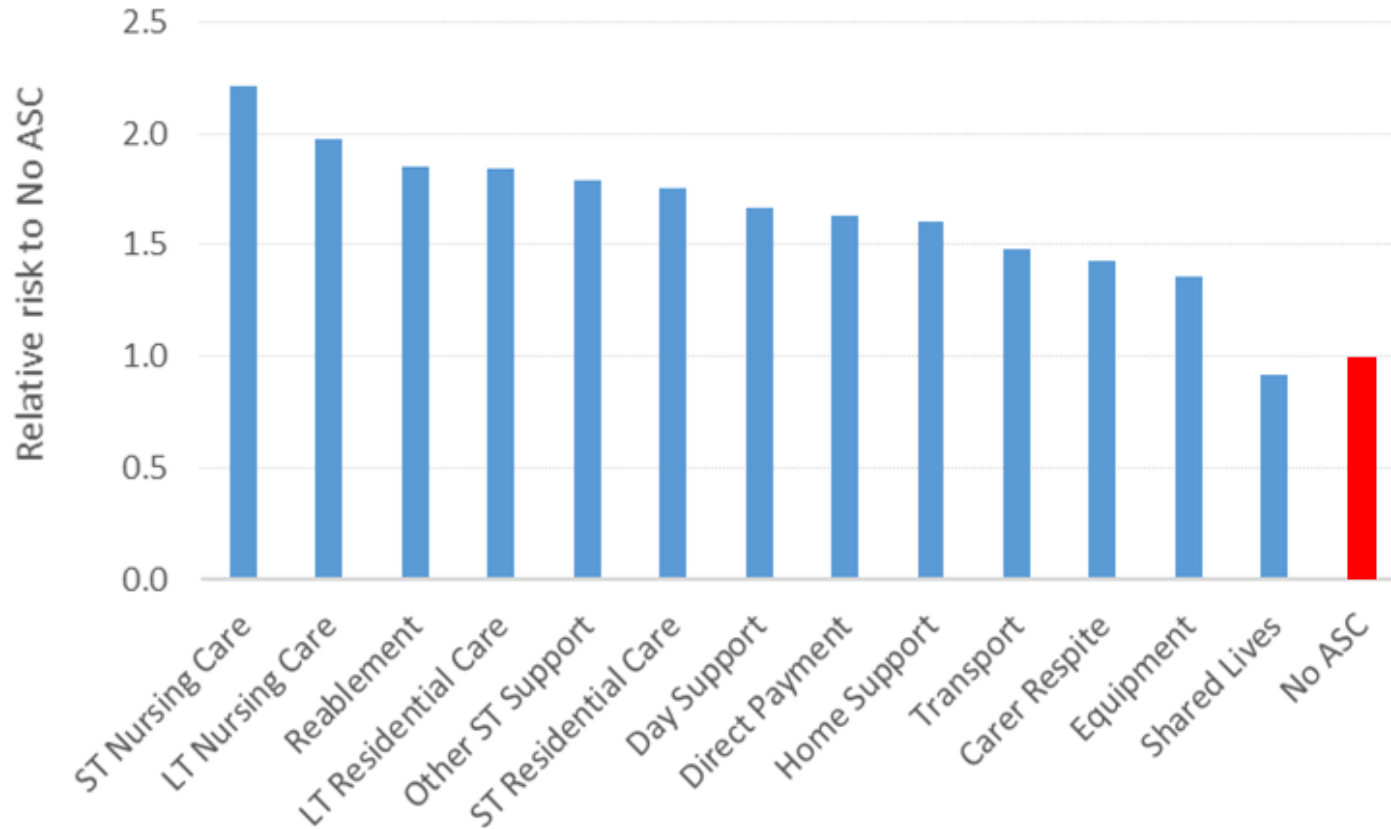
Moderate or severe frailty is much more common amongst people aged 60+ years who use social care than those not using care:

- 15% of people not using ASC are frail
- 73% of people using nursing or residential care are frail

Moderate or severe frailty is more common amongst females aged 60+ years who use social care compared to male users



# Cross sectional analysis: GP appointments in 60+ years

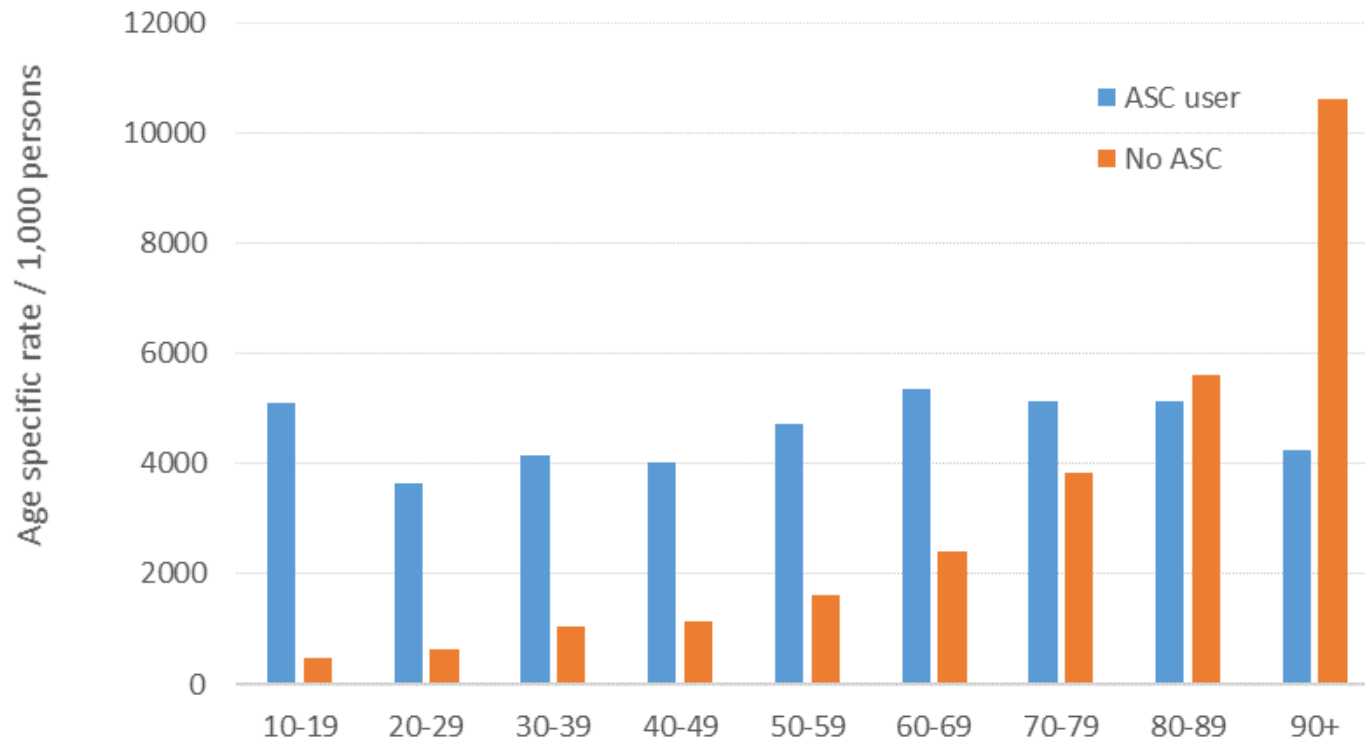


ASC users aged 60+ years have more GP appointments on average than people not using any ASC service, except for users of the Shared Lives service.

People using nursing care have around twice the number of appointments compared to those not using any ASC service.

No ASC service users have 8.6 / year

# Cross sectional analysis: hospital admission

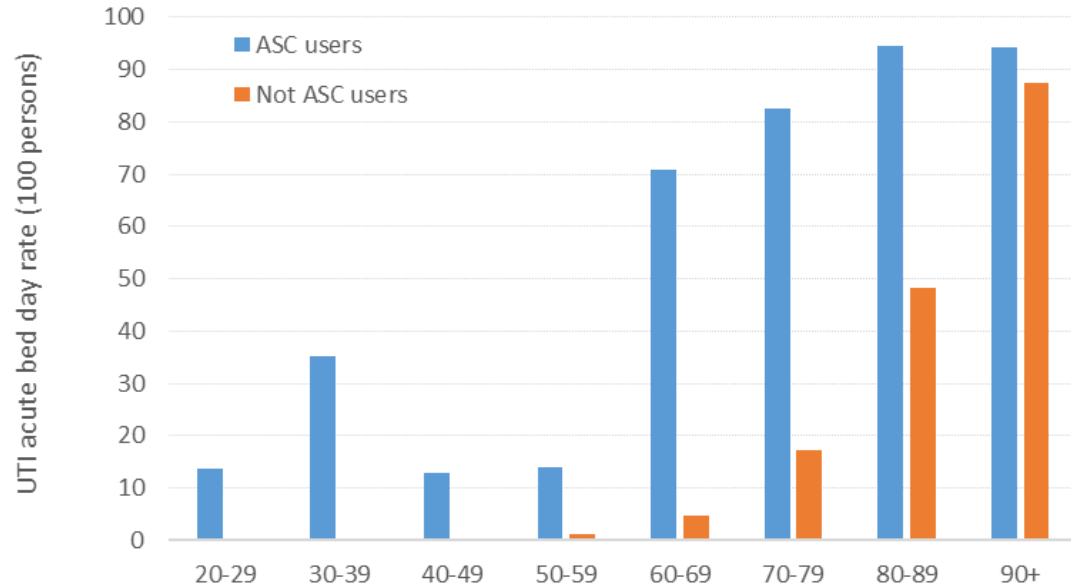


The rate of hospital admission is higher amongst people using ASC less than 80 years old.

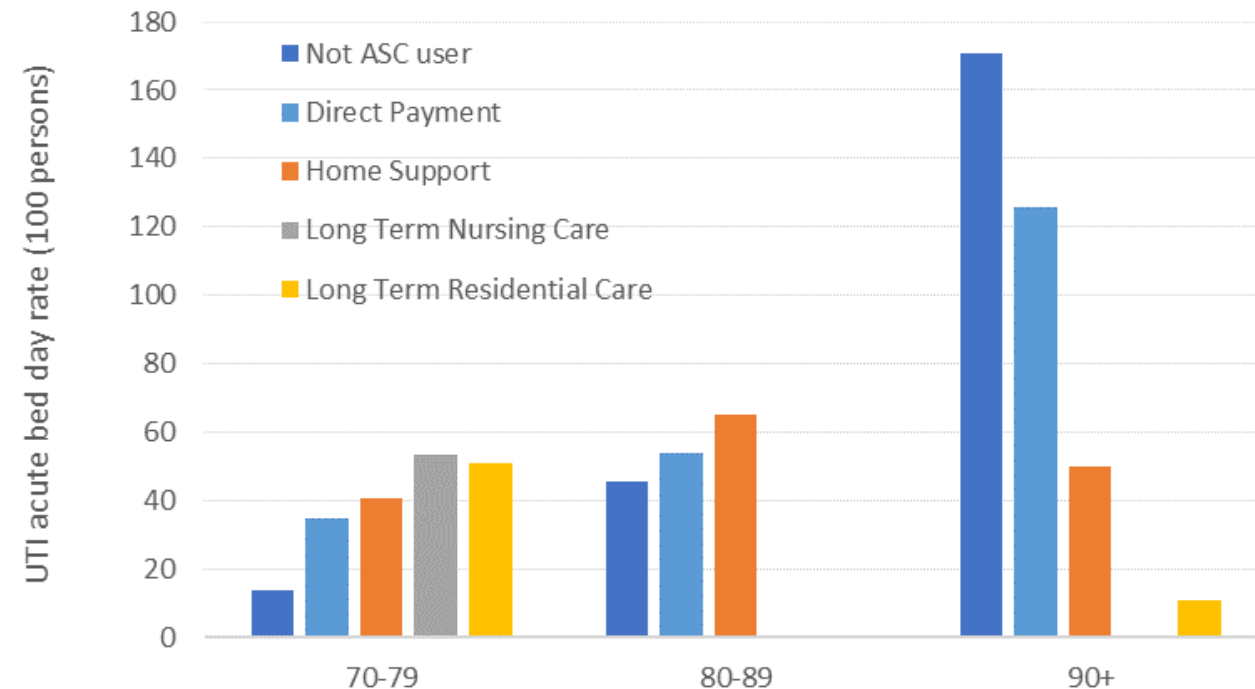
But for people aged 80+ years, the rate of hospital admission is lower for those with ASC packages.

For our oldest residents aged 90+ years, the admission rate for those with ASC is less than a half that of those without ASC packages.

# Cross sectional analysis: UTI admissions



We can compare how use of UTI bed days varies by ASC service / no ASC service



In 90+ years, the UTI bed day rate is lower in some ASC users than for those not using ASC, especially amongst nursing and residential service use

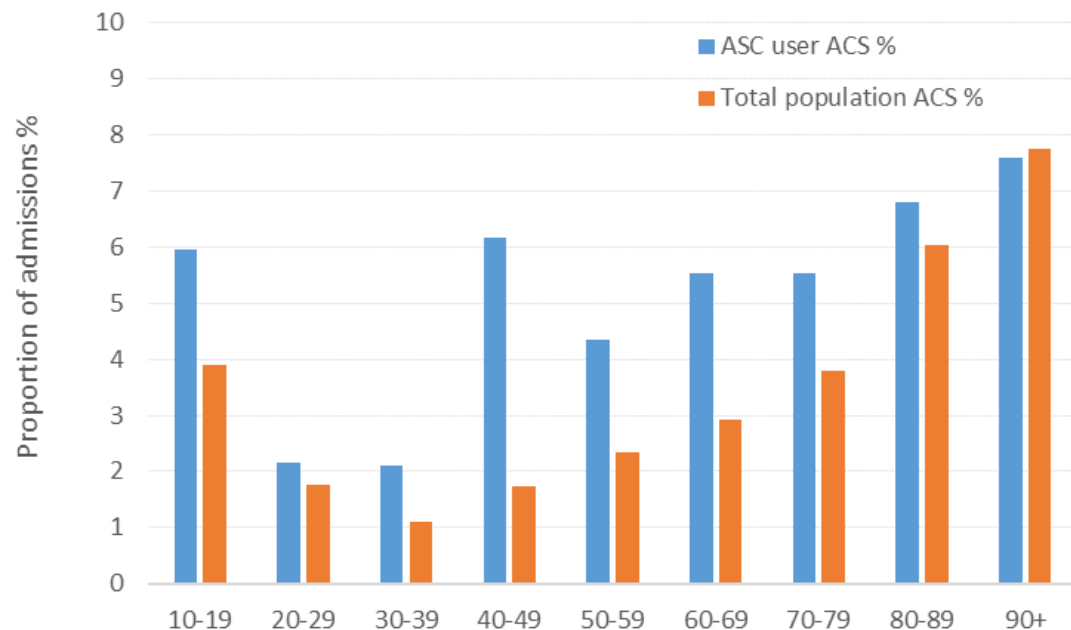
## **Use of Adult Social Care:**

# **Ambulatory Care Sensitive Hospital Admission (‘avoidable admissions’)**

**“Ambulatory care sensitive admissions are for conditions that could potentially have been avoided with better management”**



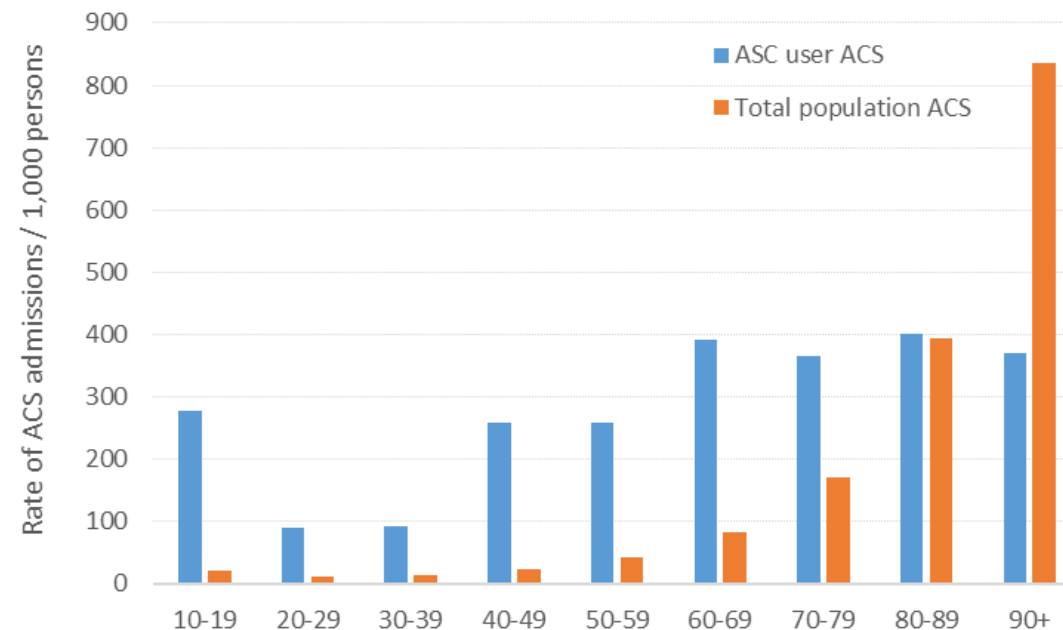
# Ambulatory Care Sensitive admissions



For almost all ages, the proportion of admissions that are ACS is higher amongst ASC users compared to the total population. This is especially true for 10-19 and 40 to 79 years.

However amongst those aged 90+ years the proportion of admissions that are avoidable is very slightly lower in ASC service users.

Overall 5.6% of admissions are ACS for ASC users compared to 2.4% for the total population.



Looking at rates of ACS admissions / 1,000 persons we can see that rates are considerably higher amongst ASC service less than 80 years.

However the ACS rate does not increase with age for ASC users in the way that it does for the total population. Consequently for 90+ years the ACS rate is much lower for ASC users.

# Ambulatory Care Sensitive admissions



Health Resource Group	Count	Diagnosis	Count	Procedure	Count
Heart Failure or Shock, with CC	568	COPD with acute exacerbation, unspecified	600	Computed tomography	316
COPD, without Interventions, with CC	378	Congestive heart failure	331	Transthoracic echocardiography	231
Diabetes with Hyperglycaemic Disorders, with CC	199	Type 2 diabetes mellitus	254	Non-invasive ventilation NEC	60
Balance, Nerve Disorders, Epilepsy or Head Injury, with CC	184	Asthma, unspecified	154	Continuous positive airway pressure	26
Asthma without Interventions, with CC	152	Left ventricular failure	144	Upper GI endoscopy	18
Arrhythmia or Conduction Disorders, with CC	139	Atrial fibrillation and atrial flutter, unspecified	130	Haemodialysis NEC	17
COPD, with length of stay 1 day or less, Discharged Home	115	Essential (primary) hypertension	114	Urethral catheterisation of bladder	15
Hypertension	113	Heart failure, unspecified	95	Other specified oxygen therapy	11
Iron Deficiency Anaemia with CC	82	Epilepsy, unspecified	71	Magnetic resonance imaging of head	10
COPD, with Single Intervention, with CC	80	Type 1 diabetes mellitus	69	IV infusion of therapeutic substance NEC	9
Diabetes with Lower Limb Complications, with CC	80	Generalized idiopathic epilepsy and epileptic syndromes	65	Invasive ventilation	9
Angina with CC	68	Iron deficiency anaemia, unspecified	62	Removal of urethral catheter from bladder	8
Bronchiectasis with CC	41	Unstable angina	53	Direct current cardioversion	6
Alzheimers Disease or Dementia, Non-Specialist	36	Bronchiectasis	49	Cardiac magnetic resonance imaging	5
COPD, with Multiple Interventions, with CC	33	Other iron deficiency anaemias	25	Change of urethral catheter into bladder	5

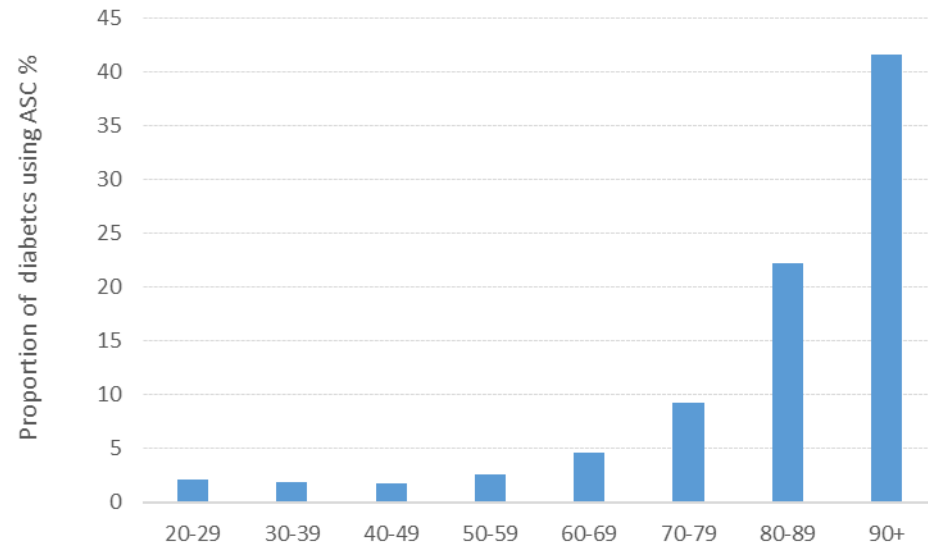
**Ambulatory care sensitive admissions are for conditions that could potentially have been avoided with better management.**

Hospital admissions are coded into Health Resource Groups, Diagnosis of condition and Procedures.

There were 2,435 avoidable admissions over the past five years for people using ASC. The top 15 most frequent HRGs, diagnoses and procedures are listed together with their number of admissions.

# Use of Adult Social Care: Diabetes

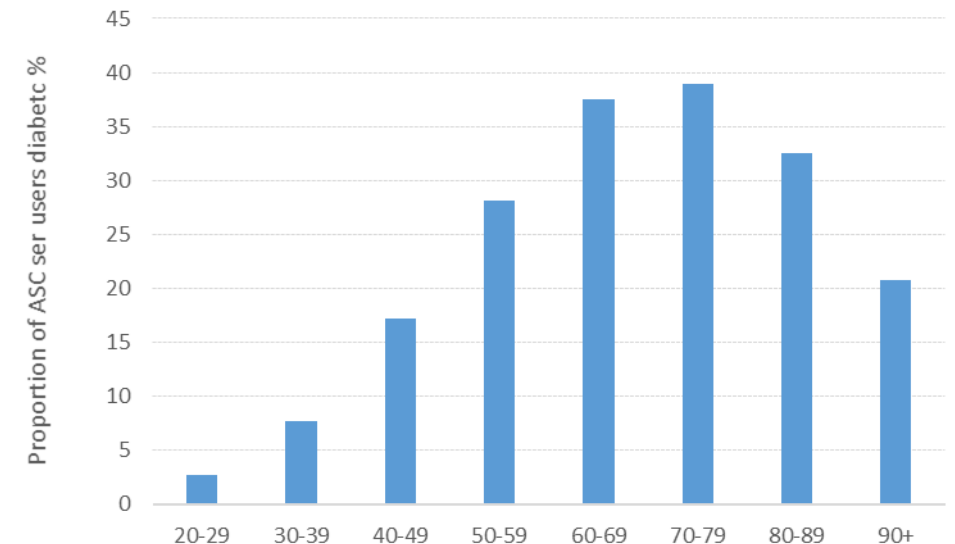
# Diabetes and ASC use



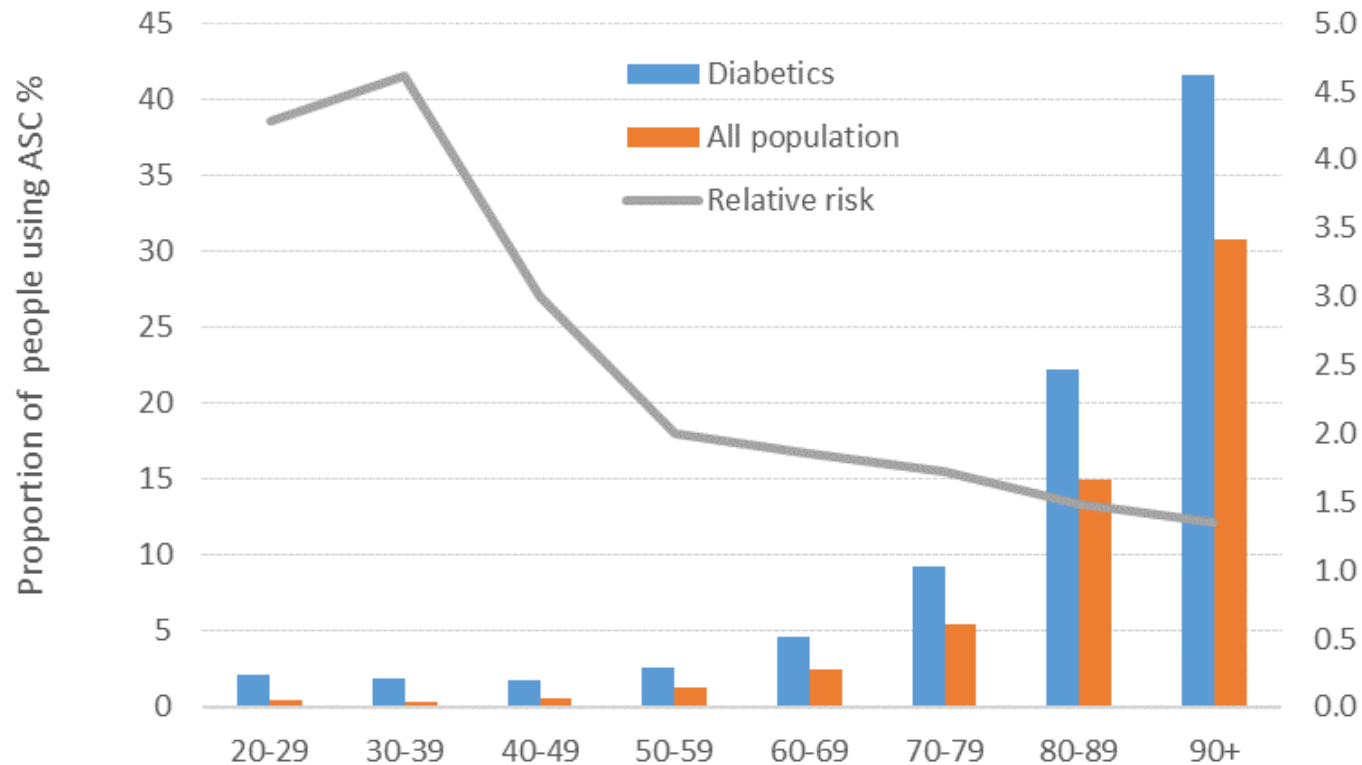
Less than 5% of people diagnosed with diabetes aged less than 70 years use ASC services.

This rises over 40% for those aged 90+ years.

Looking at ASC users, the proportion diagnosed with diabetes peaks at 39% amongst those aged 70-79 years.



# Diabetes and ASC use



Being diagnosed with diabetes increases the chance of using ASC for all ages.

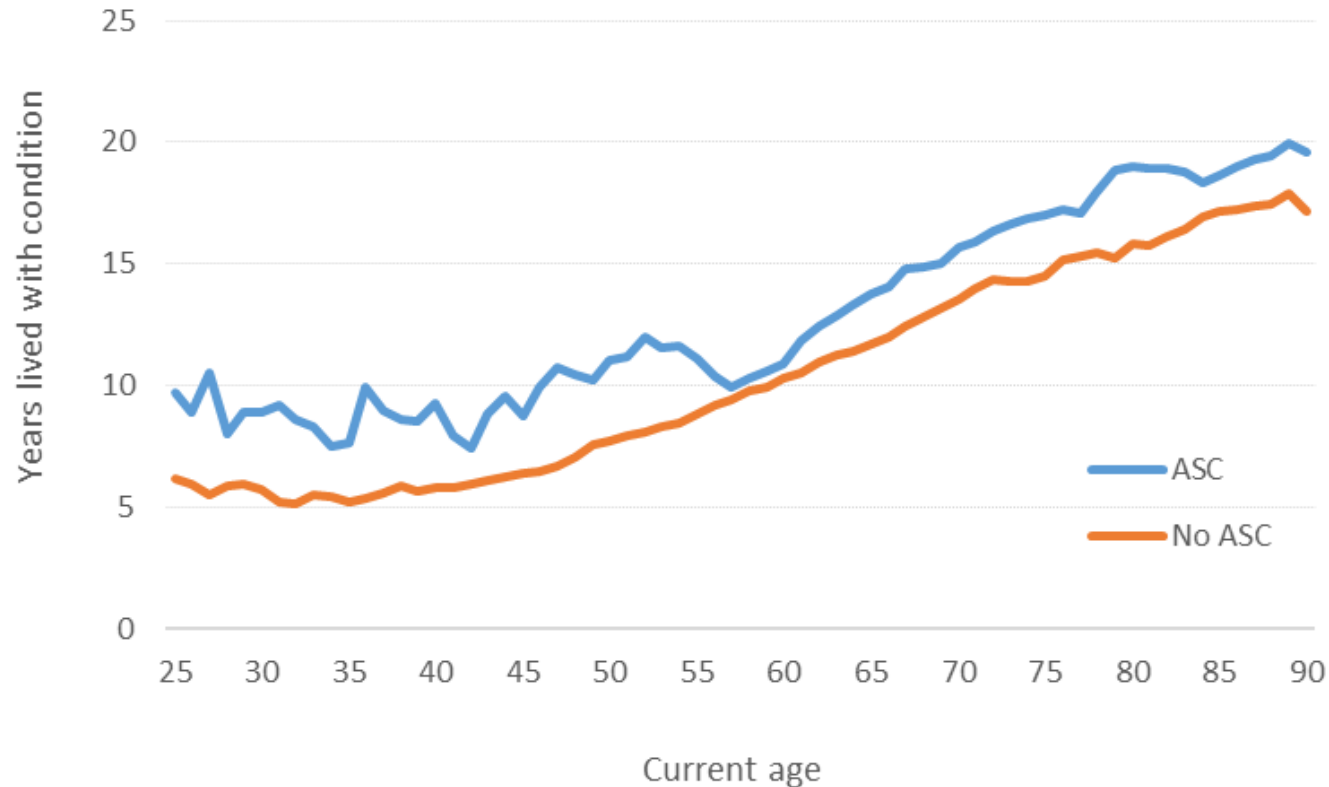
The proportion of diabetics using ASC is higher than the proportion of the total Newham population using ASC. This is true for all ages.

For ages 90+ years, 42% of diabetics use ASC whereas 31% of the total population use ASC.

For ages 20-29 years, 2.1% of diabetics use ASC compared to 0.5% of the total population.

The relative risk of using ASC with diabetes is highest in ages 30-39 years (4.6 times higher) and lowest in 90+ years (1.4 times).

# Diabetes and ASC use

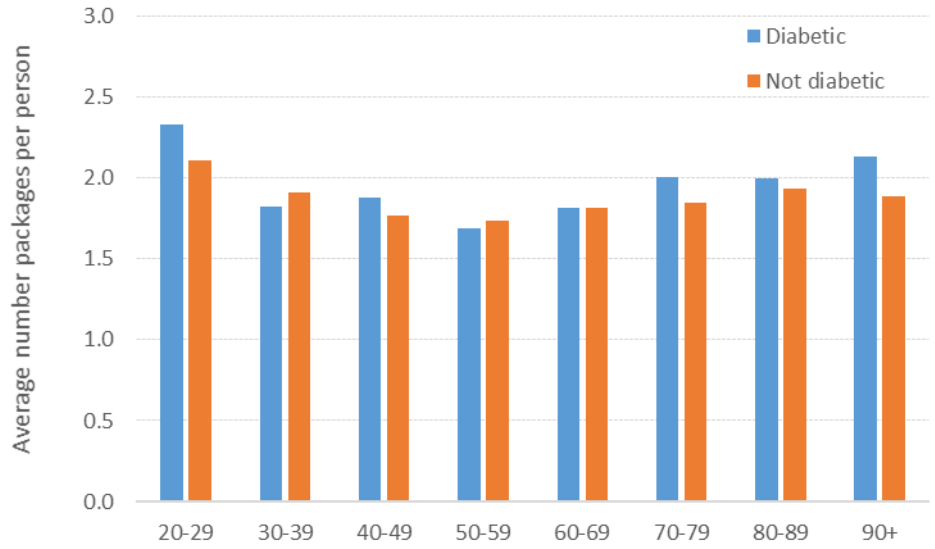


There is a difference in age at diagnosis and years lived with diabetes between diabetics using ASC and diabetics not using ASC.

For all ages, diabetics using ASC have been living with the condition for longer than diabetics no using ASC.

On average, the difference is 2.5 years (when considering people aged between 25 and 90 years).

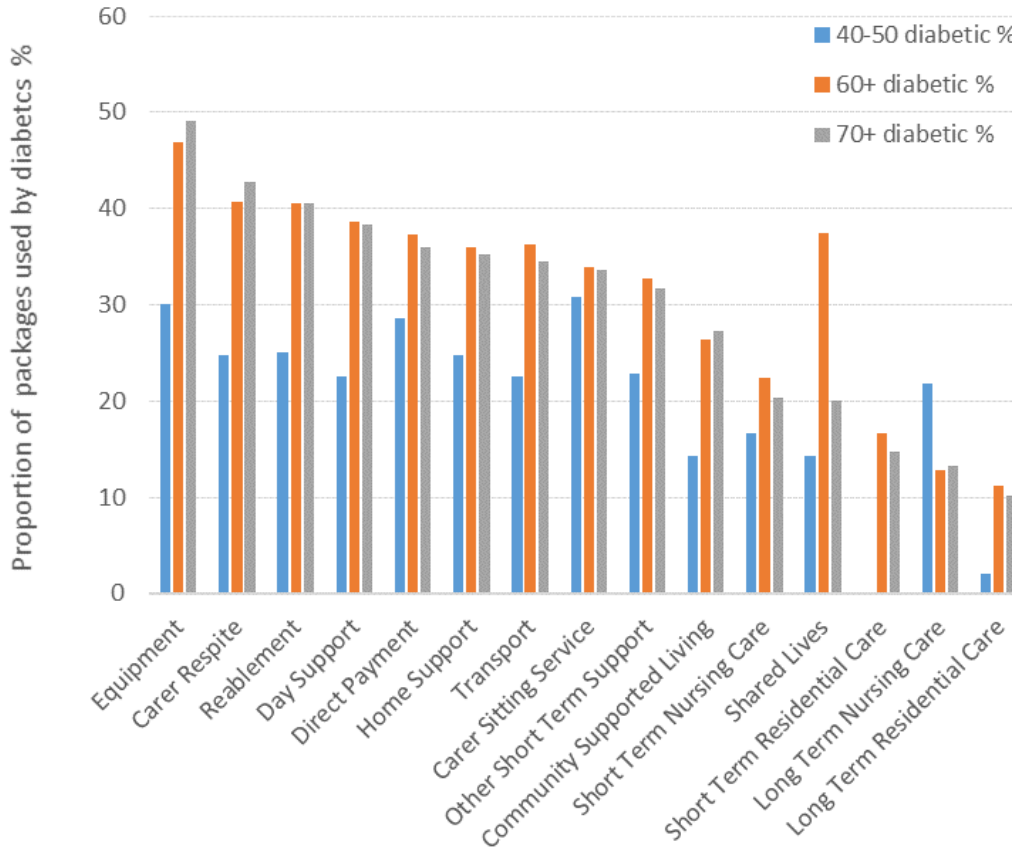
# Diabetes and ASC use



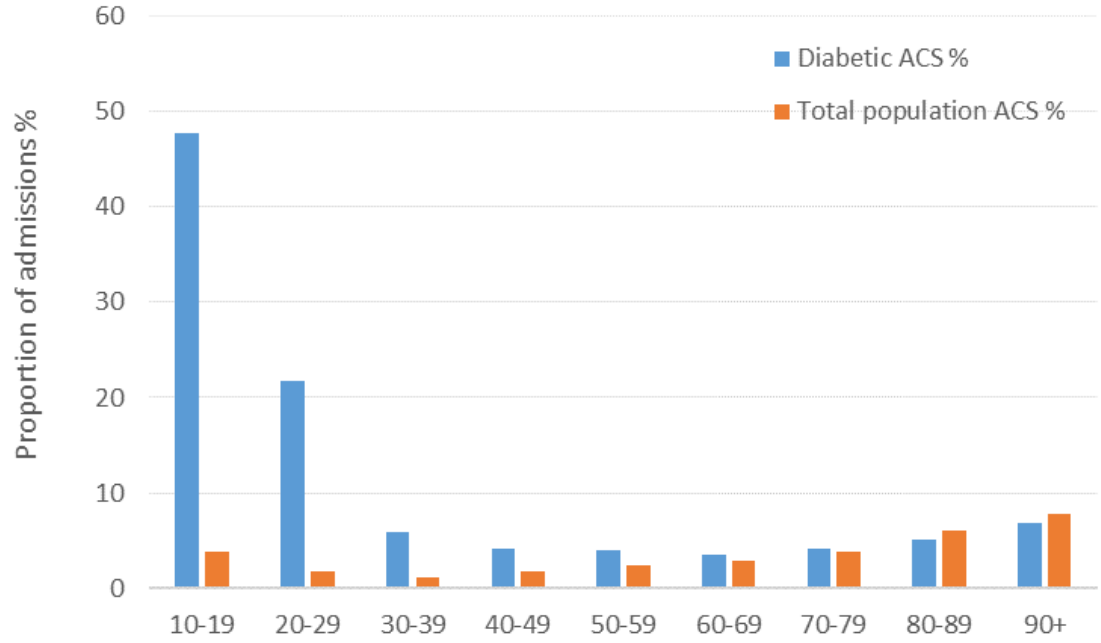
While the proportion of ASC users with diabetes varies with age and peaks amongst those aged 70-79 years, there is little variation in average number of packages with age when comparing diabetics and non-diabetics.

The proportion of packages used by diabetics varies by package type and age.

- Equipment adaptations have the highest diabetic users %
- Long term nursing and residential care have the lowest proportion of diabetic users of around 10%.



# Diabetes and avoidable hospital admissions



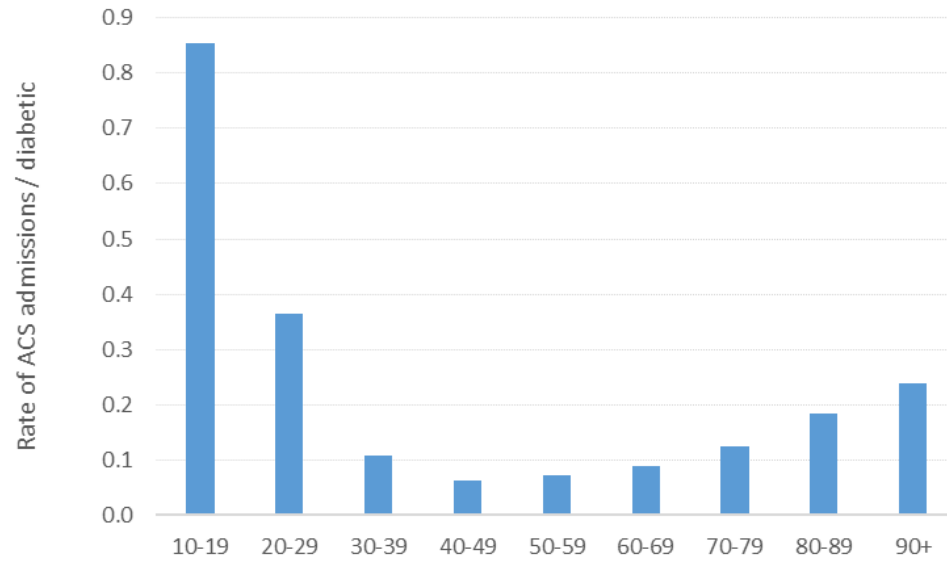
**Ambulatory care sensitive admissions are for conditions that could potentially have been avoided with better management**

The proportion of avoidable admissions is much higher in younger diabetics compared to the whole population. For people aged 10-19 years 48% of admissions were avoidable amongst diabetics compared to 4% in the total population.

Amongst people aged 60+ years the proportions of avoidable admissions are similar.

The rate of avoidable admissions per diabetic person is highest in youngest ages, and lowest for 40-49 years.

For all diabetics, overall 4.5% of admissions were avoidable compared to 2.4% for the total population.





# Diabetes and avoidable hospital admissions

## Ambulatory care sensitive admissions for people diagnosed with diabetes

Health Resource Group	Count	Diagnosis	Count	Procedure	Count
Diabetes with Hyperglycaemic Disorders, with CC	1027	Type 2 diabetes mellitus	693	None/unknown	2417
Heart Failure or Shock, with CC Score 14+	319	Type 1 diabetes mellitus	525	Transthoracic echocardiography	334
Asthma without Interventions, with CC	295	Asthma, unspecified	286	Computed tomography	305
Angina with CC	278	Congestive heart failure	218	Non-invasive ventilation NEC	36
Arrhythmia or Conduction Disorders, with CC	204	Unstable angina	201	Continuous IV infusion of therapeutic substance	31
COPD without Interventions, with CC	170	Left ventricular failure	180	Magnetic resonance imaging	31
Hypertension	159	AF and atrial flutter, unspecified	168	Amputation	23
Heart Failure or Shock, with CC	113	Essential (primary) hypertension	163	Continuous positive airway pressure	19
COPD with length of stay 1 day or less	89	COPD with acute exacerbation	279	Haemodialysis NEC	18
Iron Deficiency Anaemia with CC	65	Atherosclerotic heart disease	108	Unspecified urethral catheterisation of bladder	15

**Ambulatory care sensitive admissions are for conditions that could potentially have been avoided with better management.**

Hospital admissions are coded into Health Resource Groups, Diagnosis of condition and Procedures.

There were 3,459 avoidable admissions over the past five years for people diagnosed with diabetes. The top 10 most frequent HRGs, diagnoses and procedures are listed together with their number of admissions.

# Longitudinal analysis: examples of service use

3 year history of an Asian British male, 70-75 years with primary need of Physical Support: Personal care support



3 year history of an Asian British female, 80+ years with primary need of Physical Support: Personal care support



# Other areas of analysis to follow

Our on-going programme of analysis aims to examine the following issues:

Impact of unhealthy weight on use of social care

Impact of frailty on use of social care

Analysis of individual pathways through health and care

Comparing rates of 'Known to' with service users and comparison to Census

Comparison of carers known to Newham Council with those known to Census

Deprivation characteristics of service users (by long/short term) compared to Newham

Deprivation characteristics of service users (by age) compared to Newham

Impact of regeneration on use of services: has use of services changed where deprivation fell?

Number of children and young people transitioning into adult services

Impact of self funding and under-occupancy on use of care