



## Older people health and wellbeing profile

### Liverpool City Region

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Matthew Ashton, Director of Public Health for Liverpool, leads the Public Health Intelligence Network with support from Sharon McAteer (Halton), and the wider network. Their role in the Intelligence & Evidence Service involves setting the work programme, providing strategic direction and facilitating collaborative links between the Champs Public Health Collaborative, the Public Health Institute, LJMU and the wider public health community. They also contribute to editing and final approval of reports, alongside Lisa Jones, Reader in Public Health, LJMU who manages the Champs Intelligence & Evidence Service.

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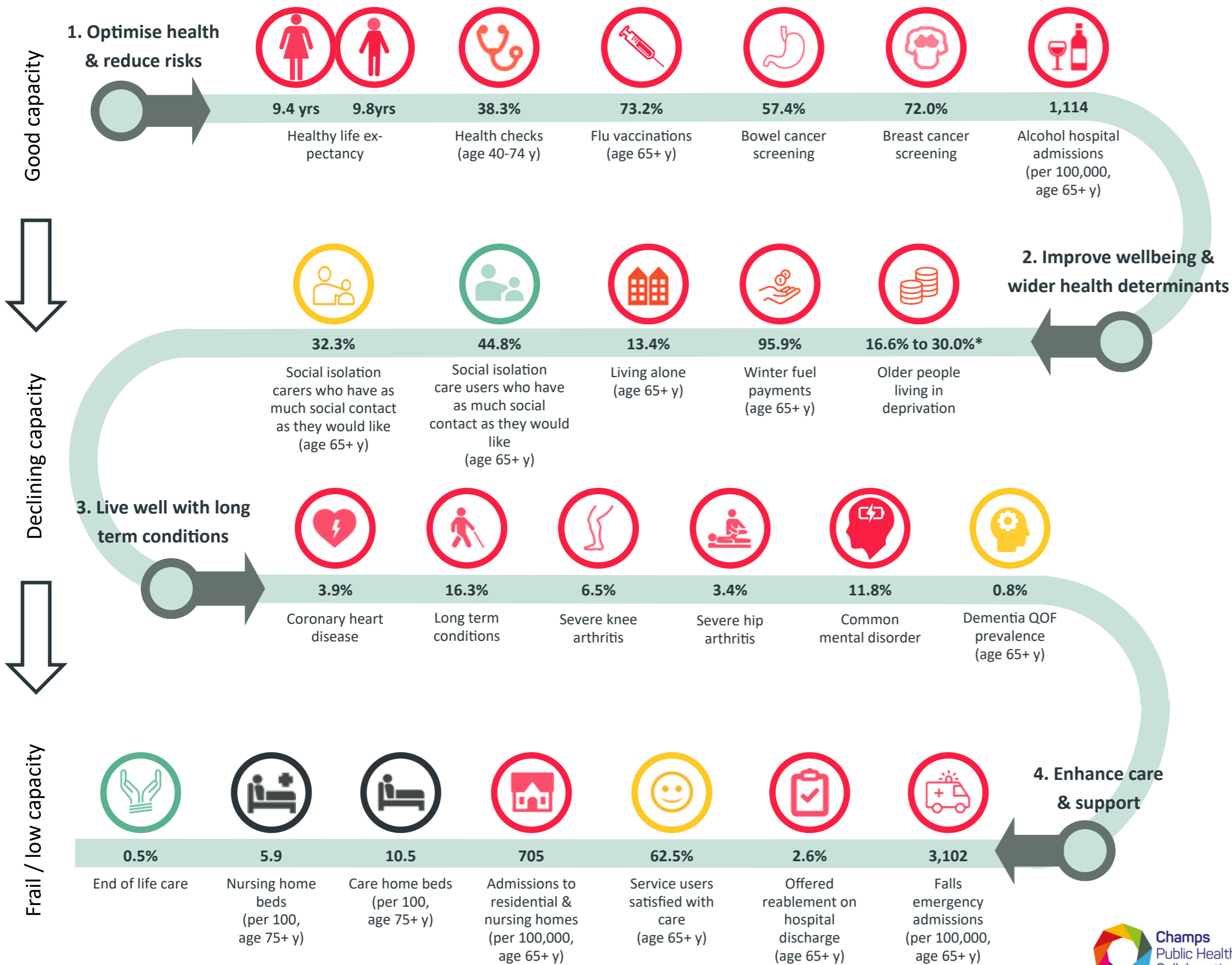
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# Older people in Liverpool City Region

A comparison to England, 2020



## Population & mortality

**Population:**  
Almost 1 in 5 (19%) of the population in LCR are aged 65 and over — more than in the North West and England.

**Causes of death, ages 65+:**

- **Cardiovascular disease:** death rates are similar to England.
- **Respiratory:** high death rates across LCR, except in Sefton.
- **Cancer:** death rates high across LCR.
- **Mental health (dementia):** high rates in Knowsley, Liverpool, Sefton and Wirral.

**Excess winter deaths, ages 85+**  
Similar levels to England across LCR.

**Key**  
Statistical significance compared to England:

- Better
- Similar
- Worse

\* average not available

This work was commissioned through the Cheshire and Merseyside Public Health Intelligence Network and Champs Public Health Collaborative. Based on the latest published data as of September 2020.

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## Introduction

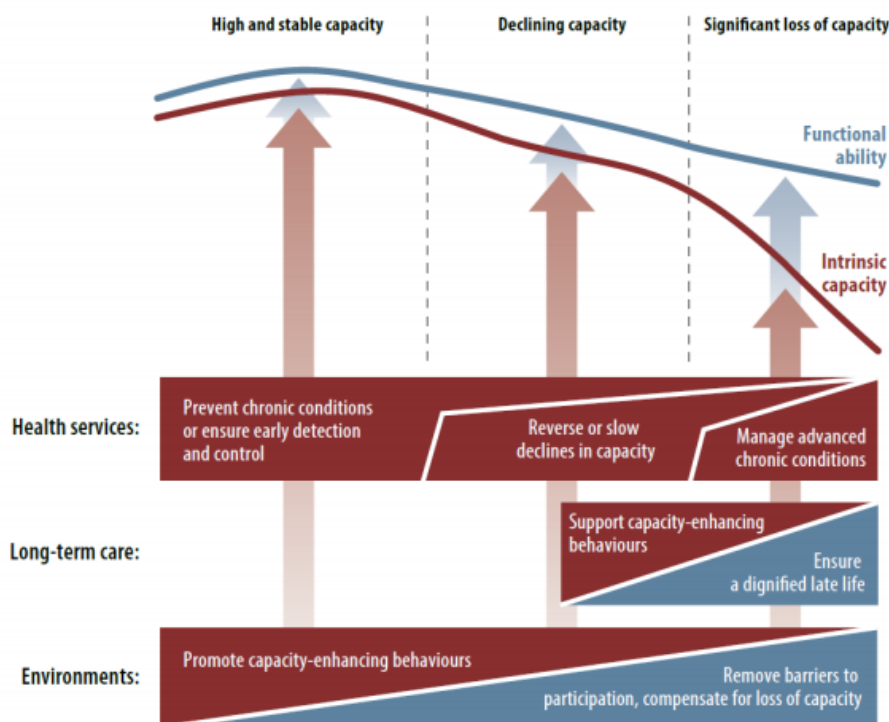
This Older People's health and wellbeing profile for Liverpool City Region (LCR) is one of a series of profiles that are being produced on behalf of Champs for the Cheshire and Warrington and Liverpool City Region (LCR) sub-regions. The first in the series was a Children and Young Person's profile ([links: CYP LCR & CYP Cheshire & Warrington](#)). Profiles for Vulnerable Groups in LCR and Cheshire and Warrington are due to be published in early 2021.

The Older People's Profile begins with an overview of the population and mortality in LCR amongst those aged 65 and over. Comparisons are made with the wider area of Cheshire and Merseyside and with England. The profile then goes on to provide local data organised around the four domains used in the Public Health England (PHE) Productive Healthy Ageing Profiles<sup>1</sup>.

1. Optimise Health and Reduce Risks Early
2. Improve Wellbeing & Wider Determinants of Health
3. Reverse or Live Well with a Long-term Condition
4. Enhance Care & Support

PHE based these domains on work by the WHO, as illustrated in Figure 1:

Figure 1. Public Health Framework for Ageing (source: PHE, 2019<sup>1</sup>, Figure 1, p.7)



Source: World report on health and ageing (WHO, 2015)

The aim of this profile is to provide a set of indicators that describe key issues relevant to older people's health as they age, including risk and protective factors, early interventions, health outcomes, identification of need, and health and social care<sup>1</sup>. The profile will support the exploration of inequalities and inform actions to improve health outcomes. The

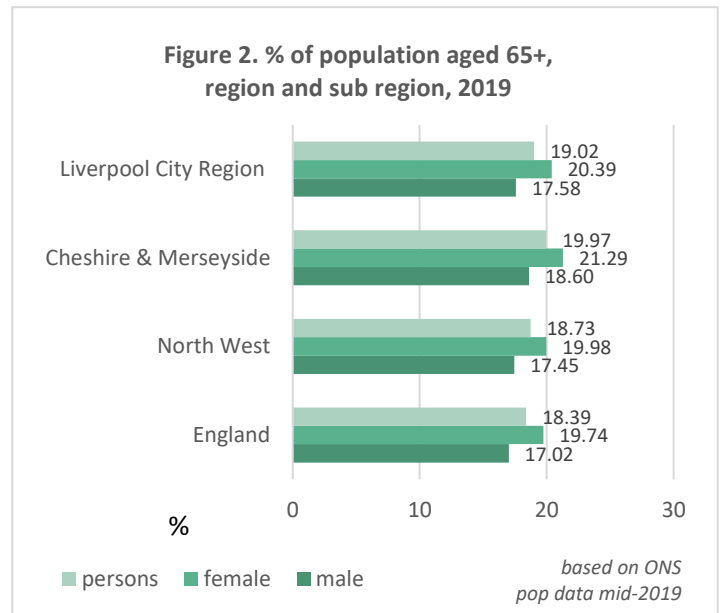
information provided can be used to support development of joint strategic needs assessments, public health planning, and assessment of the overall impact of public health interventions in relation to older people<sup>1</sup>.

It should be noted that some health topics, such as falls prevention and social isolation, will span different domains.

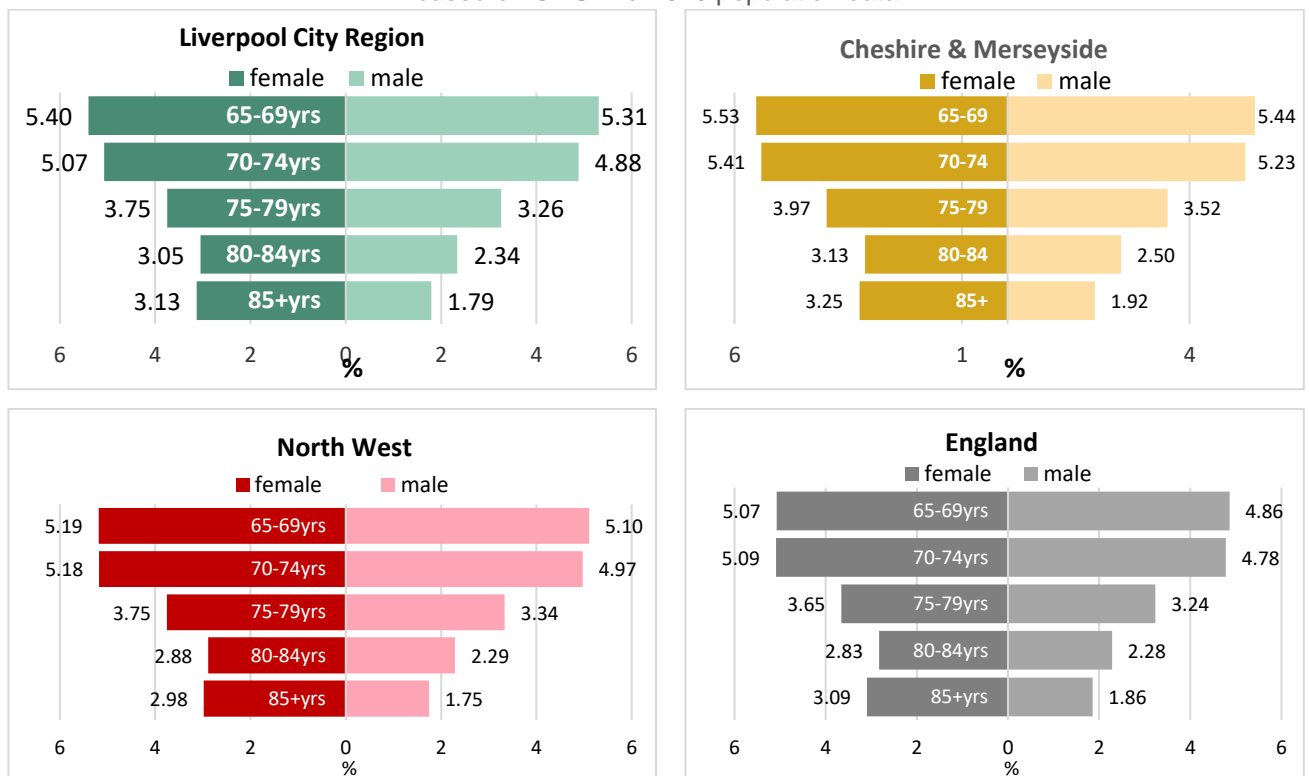
## Population

The Office for National Statistics (ONS) mid-year population estimates for 2019 show that Cheshire and Merseyside has higher proportions of older people, both males and females, than the North West or England (Figure 2). Proportions in LCR are lower than Cheshire and Merseyside, but slightly higher than the North West and England.

In LCR, the differences remain across the age groups, with higher proportions of those aged 65+ compared to the North West and England, except in males aged 85+ (Figure 3).



**Figure 3**  
% of total population aged 65+, by 5 year age group, 2019  
based on ONS mid-2019 population data



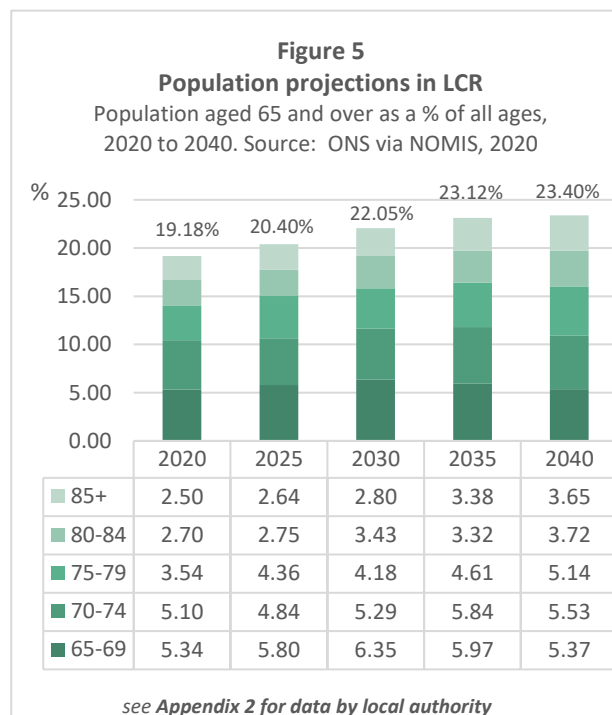
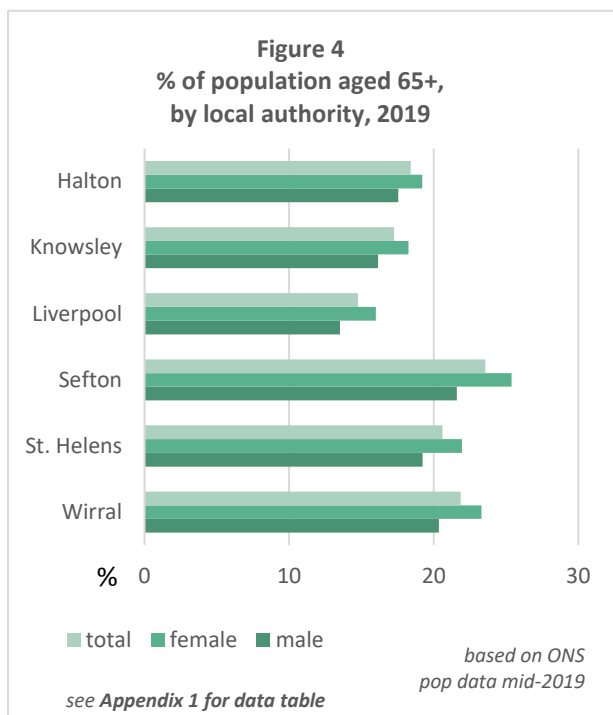


Figure 4 shows that within Liverpool City Region, there are large differences between local authorities in the proportion of older people aged 65+, ranging from 23.56% in Sefton – (the highest in Cheshire and Merseyside and much higher than the national average of 18.39%, Figure 2) to as few as 14.76% in Liverpool (also see Figure 6 on the next page). Appendix 1 gives numbers and percentages for each local authority.

Like the national older population, the LCR 65+ population is predicted to form an ever increasing proportion of the total population, with the largest increases expected in the 75-79 age group (Figure 5) (see Appendix 2 for projections for each local authority). In contrast, the under 18 population is predicted to remain fairly static whilst the ‘working age population’ i.e. those aged 18-64 is predicted to shrink proportionately. However, there will remain many more working age people than older people.

## Mortality and excess winter deaths

### Better compared to England averages

- **Sefton** and **Wirral** have significantly lower rates of death from cardiovascular disease amongst those aged 65 plus, compared to the England average (Figure 6).
- Levels of excess winter deaths are similar to the national average in **each local authority in LCR**.

### Worse compared to England averages

- There are significantly high rates of cardiovascular disease in those aged 65 plus in **Halton** and **Liverpool**.
- Rates of death from respiratory disease and cancer amongst those aged 65 plus are significantly high across **each local authority in LCR** (with the exception of respiratory deaths in Sefton).
- Deaths from dementia amongst those aged 65 plus are significantly high in Knowsley, Liverpool, St. Helens and Wirral, with the rate in St. Helens the second highest in the North West.

**Figure 6: Population and mortality data for LCR compared to England.**

Source: PHE Fingertips, accessed August 2020.

		Compared with benchmark:							
		Better		Similar		Worse		Not compared	
		Quintiles:				Quintiles:			
		Best		Worst		Low		High	
		Not applicable		Not applicable		Not applicable		Not applicable	
Indicator	Period	England	CA-Liverpool City Region	Halton	Knowsley	Liverpool	Sefton	St. Helens	Wirral
Supporting information - % population aged 65+ (Persons, 65+ yrs)	2019	18.4	19.0	18.4	17.3	14.8	23.6	20.6	21.9
Supporting information - % population from ethnic minorities (Persons, 16+ yrs)	2016	13.6	5.4*	1.6	1.9	11.2	3.2	1.8	3.6
Rate of deaths from Cardiovascular Disease among people aged 65 years and over (Persons, 65+ yrs)	2016 - 18	1079.0	1073.3	1192.3	1134.4	1136.1	974.2	1107.4	1029.2
Rate of deaths from Respiratory Disease among people aged 65 years and over (Persons, 65+ yrs)	2016 - 18	627.8	785.9	880.2	935.1	882.1	593.2	857.7	758.0
Rate of deaths from Cancer among people aged 65 years and over (Persons, 65+ yrs)	2016 - 18	1091.1	1258.4	1334.1	1397.5	1366.8	1180.1	1168.3	1190.4
Direct standardised rate of mortality: People with dementia (aged 65 years and over) (Persons, 65+ yrs)	2018	904	-	1004	1039	1028	938	1187	991
Excess winter deaths index (age 85+) (Persons, 85+ yrs)	Aug 2017 - Jul 2018	41.1	38.5	49.8	37.3	37.5	33.5	44.4	39.0



# 1. Optimise Health and Reduce Risks Early

This section provides an overview of health and life expectancy, with a focus on promoting capacity-enhancing behaviours amongst older people, preventing chronic conditions and ensuring early detection and control<sup>1</sup>. LCR as a whole compares significantly badly to the national average on each indicator here, except for smoking prevalence and pneumococcal polysaccharide vaccination (PPV). There are however variations between local authorities within LCR.

## Better or similar compared to England averages:

- **Sefton** and **Wirral** have similar levels to the national average of healthy life expectancy at birth and at age 65 plus, and disability free life expectancy at age 65 plus (see top and bottom of Figure 7).
- **Sefton** also has similar levels of life expectancy at 65 to the national average.
- Smoking prevalence amongst adults is low **across LCR**, especially in **Sefton** and **Wirral**.
- In **Halton**, **Knowsley** and **Wirral**, significantly more of those aged 40-74 have participated in the NHS health check programme.
- **St. Helens** and **Wirral** have significantly exceeded the national target of 75% for flu vaccination coverage for those aged 65 and over.
- **Knowsley** has significantly high levels pneumococcal polysaccharide vaccination (PPV) for those ages 65 plus.
- In **St. Helens** and **Wirral**, levels of breast cancer screening for

**Figure 7: Optimise Health and Reduce Risks Early. Data for LCR compared to England.**

Source: PHE Fingertips, accessed August 2020.

Compared with benchmark: Better Similar Worse Not compared

Quintiles: Best       Worst Not applicable

Indicator	Period	England	CA-Liverpool City Region	Halton	Knowsley	Liverpool	Sefton	St. Helens	Wirral
Healthy life expectancy at birth (Male, All ages)	2016-18	63.4	61.1	59.5	58.3	60.7	64.0	59.2	61.4
Healthy life expectancy at birth (Female, All ages)	2016-18	63.9	60.3	57.5	59.1	57.8	62.4	59.3	63.7
Life expectancy at 65 (Male, 65)	2016-18	18.9	17.7	17.4	17.1	16.9	18.6	17.9	18.0
Life expectancy at 65 (Female, 65)	2016-18	21.2	20.1	19.7	19.1	19.3	21.2	19.8	20.6
Smoking Prevalence in adults (18+) - current smokers (APS) (Persons, 18+ yrs)	2019	13.9	12.6	14.9	14.3	14.1	9.5	13.0	10.7
Percentage of physically active adults (Persons, 19+ yrs)	2018/19	67.2	64.6	68.6	58.5	64.9	62.6	66.8	66.0
Admission episodes for alcohol-related conditions (Narrow) - Over 65s (Persons, 65+ yrs)	2018/19	1049	1114	1173	1196	1233	982	1084	1075
Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults) (Persons, 16+ yrs)	2018/19	54.6	49.0	46.2	43.1	50.8	53.4	48.3	46.6
Cumulative percentage of the eligible population aged 40-74 who received an NHS Health check (Persons, 40-74 yrs)	2014/15-18/19	43.3	38.3	49.1	45.1	34.1	27.9	35.9	46.6
Hypertension: QOF prevalence (all ages) (Persons, All ages)	2018/19	14.0*	15.7*	15.8	15.5	13.8	17.5	17.8	16.2
Abdominal Aortic Aneurysm Screening - Coverage (Male, 65)	2018/19	81.3*	77.3*	78.0	78.0	72.5	80.8	78.1	79.1
Population vaccination coverage-Flu (aged 65+) (Persons, 65+ yrs)	2019/20	72.4	73.2*	71.6	71.2	70.8	74.2	75.2	75.2
Population vaccination coverage-PPV (Persons, 65+ yrs)	2018/19	69.2	-	67.8	77.4	69.8	71.9	73.1	72.5
Population vaccination coverage-Shingles vaccination coverage (70 years old) (Persons, 70)	2017/18	44.4	-	33.3	40.9	40.4	43.3	42.6	44.4
Cancer screening coverage- bowel cancer (Persons, 60-74 yrs)	2019	60.1*	67.4*	67.8	64.6	63.6	60.3	69.3	69.4
Cancer screening coverage-breast cancer (Female, 53-70 yrs)	2019	74.5*	72.0*	74.5	69.7	66.8	72.2	75.4	76.6
Disability-free life expectancy at 65 (Male, 65)	2016-18	9.9	9.0	7.8	8.1	8.6	8.8	8.4	10.8
Disability-free life expectancy at 65 (Female, 65)	2016-18	9.8	8.2	8.2	7.5	6.0	9.7	7.5	10.1
Healthy life expectancy at 65 (Male, 65)	2016-18	10.6	9.8	8.1	7.9	9.1	11.2	9.1	11.1
Healthy life expectancy at 65 (Female, 65)	2016-18	11.1	9.4	7.5	8.7	8.1	11.3	8.1	10.7
Inequality in life expectancy at 65 (Male, 65)	2016-18	5.0	-	6.3	5.8	5.8	6.8	6.5	6.9
Inequality in life expectancy at 65 (Female, 65)	2016-18	4.6	-	7.6	9.2	5.6	6.3	5.0	6.5

females aged 53-70 are significantly high.

**Worse compared to England averages:**

- Levels of life expectancy at 65 are significantly lower than the national average **across LCR**, except in Sefton.
- In **Halton, Knowsley, Liverpool** and **St. Helens**, healthy life expectancy at birth and at age 65 plus, and disability free life expectancy at age 65 plus, are all significantly lower than the national average.
- Inequalities in life expectancy at age 65 are high in **each local authority**, especially amongst both males and females in **Halton, Sefton** and **Wirral**.
- Adults in **Knowsley, Liverpool** and **Sefton** have significantly low levels of physical activity. Significantly high numbers of adults in **all areas except Sefton** fail to meet the recommended '5 a day' for a healthy diet.
- Admissions for alcohol-related conditions in people 65 and over are significantly high in **Liverpool** and **Knowsley**. In Liverpool, they are the second highest in the North West.
- In **Liverpool, Sefton** and **St. Helens**, significantly fewer people aged 40-74 have participated in the NHS health check programme compared to the England average.
- Hypertension levels are significantly high in **Sefton, St. Helens** and **Wirral**.
- There are significantly low levels of aortic abdominal aneurysm screening for males aged 65+ in **each local authority** except Sefton.
- Levels of flu vaccination are significantly low in **each authority** except St. Helens and Wirral.
- **All local authorities** have significantly low rates of vaccination against shingles.
- There are significantly low rates of bowel screening in **each local authority** except Sefton.
- Breast cancer screening rates are low in **Knowsley, Liverpool** and **Sefton**.

## 2. Improve Wellbeing & the Wider Determinants of Health

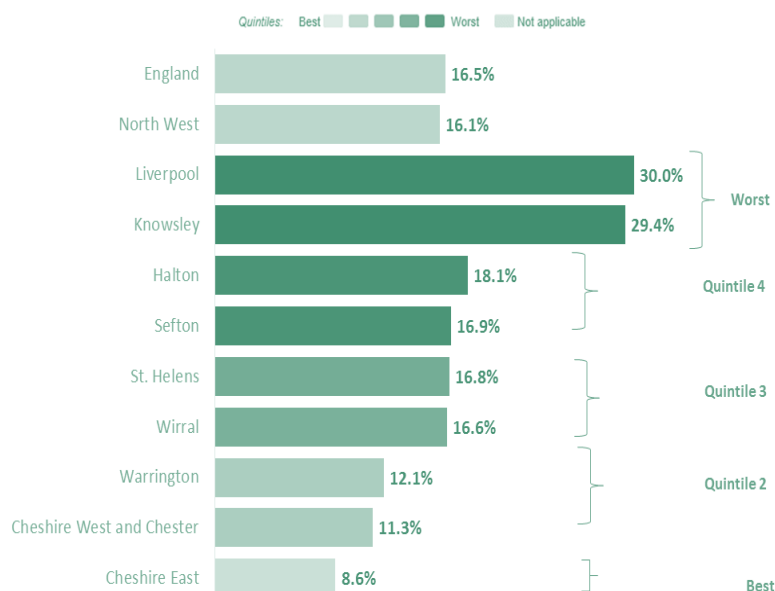
The indicators in this section will help to plan for improving wellbeing and the wider determinants of health relating to older people, such as unpaid caring and social engagement.

### Deprivation

There has been a widening gap in income inequality between pensioners<sup>2</sup>. The 2019 Index of Multiple Deprivation includes a supplementary index that represents income deprivation affecting older people (IDAOP). The local authorities in LCR have higher levels of income deprivation affecting older people compared to England and the rest of Cheshire and Merseyside (Figure 8), especially in Liverpool and Knowsley, which are in the worst 20% of local authorities in England, with as many as 30% of older people living in deprivation.

**Figure 8: Income deprived older people.**

Source: Department for Communities and Local Government (DCLG),

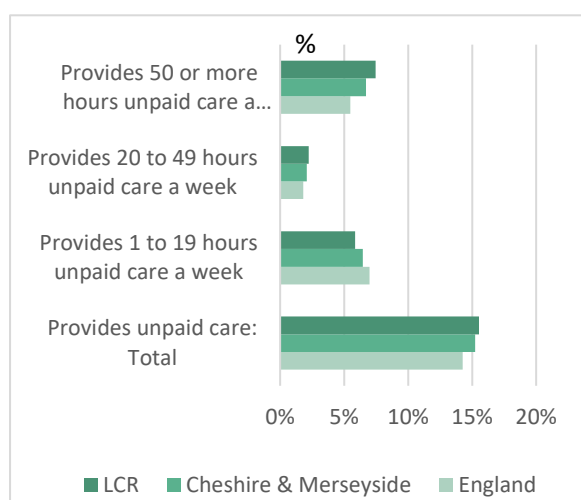


### Carers

It is estimated that older carers (aged over 60) are providing somewhere between £30 to £50 billion in unpaid family care<sup>3</sup>. Data from the 2011 Census indicates that nationally, people over the age of 65 accounted for over a third of carers who provide more than 50 hours of care per week. Across LCR, 38,274 people aged 65 plus provide unpaid care. As a proportion of the total population aged 65 plus, there are more people in LCR providing unpaid care (15.5%), compared to the England average of 14.3% and the Cheshire and Merseyside average of 15.2% (Figure 9).

**Figure 9: Percentage and number of residents aged 65 and over providing unpaid care, 2011.**

Source: Table DC3301EW, 2011 Census via Nomis



Number	LCR	Cheshire & Merseyside	England
Provides 50 or more hours unpaid care a week	18,359	27,146	457,217
Provides 20 to 49 hours unpaid care a week	5,485	8,447	150,731
Provides 1 to 19 hours unpaid care a week	14,430	26,118	582,572
Provides unpaid care: Total	38,274	61,711	1,190,520
Provides no unpaid care	208,223	343,097	7,152,488

Amongst those aged 65 plus in LCR, there are more men providing unpaid care (17.0%) than women (14.4%) (Figure 10). The same is true across the Cheshire and Merseyside region and nationally, but the difference between the sexes is slightly greater in LCR.

## Living alone

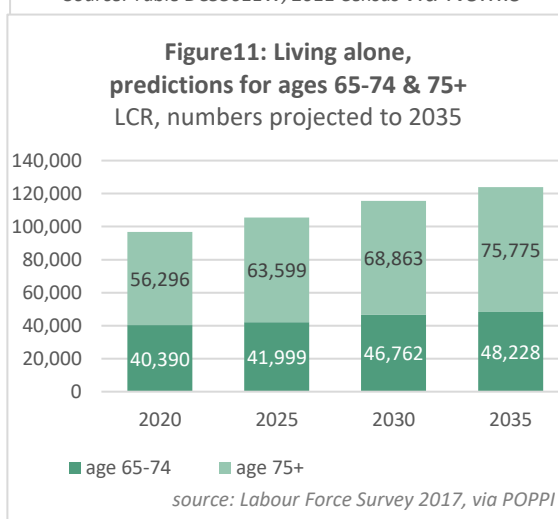
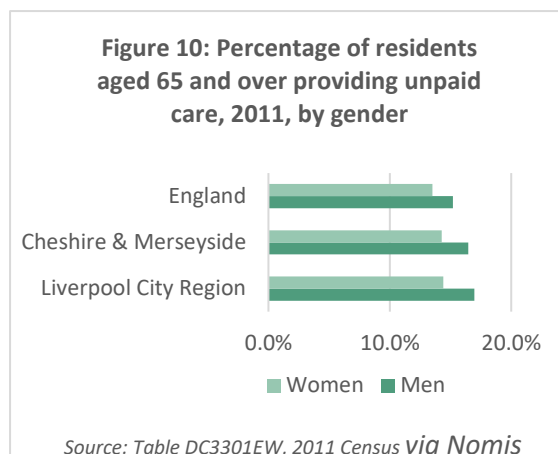
Data from the Labour Force Survey (2017) shows that, for those aged 65 and over in England, the larger proportion of those living alone were female (66.5%). Approximately 1 in 3 of those aged over 65 are living alone (32.2% in England, calculated using POPPI data<sup>4</sup>).

Numbers living alone are expected to rise sharply in LCR over the next 15 years, by nearly 8,000 amongst those aged 65-74 and by almost 20,000 amongst those aged 75 and over (Figure 11).

## Social isolation and loneliness

Loneliness is a subjective, negative feeling associated with lack or loss of companionship. If you feel lonely, you are lonely. 'Social isolation' is a sociological category relating to imposed isolation from normal social networks. This can lead to loneliness and can be caused by loss of mobility or deteriorating health. It is possible to be lonely whilst not isolated, for example amongst those caring for a dependent spouse with little help.<sup>5</sup>

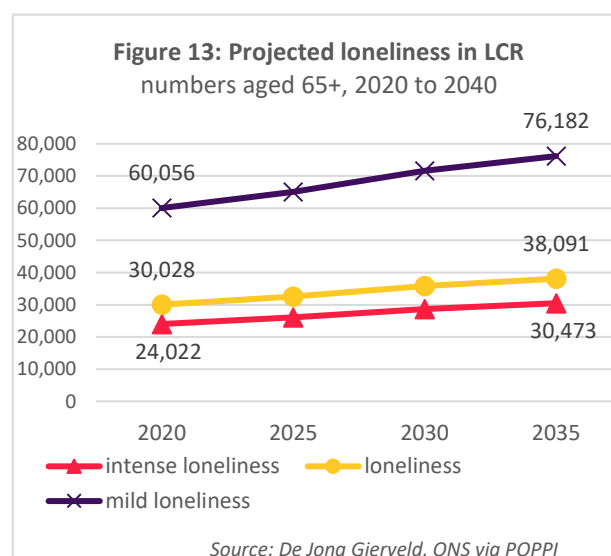
Based on national estimates<sup>6</sup> applied to the Liverpool City Region population aged 65 and over, it can be estimated that 60,056 may be experiencing mild loneliness, with 24,022 experiencing intense loneliness (Figure 12). By 2035, numbers are expected to increase by



**Figure 12: Estimated number of older people aged 65+ in LCR local authorities who may be experiencing loneliness**

	intense loneliness	loneliness	mild loneliness
Halton	1,938	2,423	4,846
Knowsley	2,108	2,635	5,271
Liverpool	5,958	7,448	14,896
Sefton	5,275	6,594	13,189
St. Helens	3,007	3,759	7,518
Wirral	5,735	7,168	14,337
<b>LCR</b>	<b>24,022</b>	<b>30,028</b>	<b>60,056</b>
<b>Cheshire &amp; Merseyside</b>	<b>40,472</b>	<b>50,589</b>	<b>101,179</b>

Source: De Jong Gierveld, ONS via POPPI<sup>5</sup>



more than 16,000 for mild loneliness, and by more than 5,000 for intense loneliness (Figure 13).

Figure 14 summarises the data available from the PHE fingertips dataset relevant to the health and wellbeing of older people, comparing local data to the national average.

**Figure 14. Improve Wellbeing & Wider Determinants of Health Data for LCR compared to England.**

Source: PHE Fingertips, accessed August 2020.

### Better or similar compared to England

- In **St. Helens**, there are significantly more people aged 65 plus receiving winter fuel payments<sup>a</sup>.
- Levels of social isolation amongst care users are significantly lower than the national average in **LCR** as a whole.
- There are significantly lower proportions of older people living alone in **Halton** and **Liverpool**.
- **Wirral** is in the top 20% of local authorities in England for levels of access to a healthy environment (access to healthy assets and hazards), with only 2% having poor access. Levels are also good in **Sefton** and **St. Helens**.

### Worse compared to England

- There are significantly high levels of deprivation in **Halton**, **Knowsley**, **Liverpool** and **St. Helens**. Similarly, levels of income deprivation amongst older people aged 60 plus (IDAOP) are amongst the highest nationally, with **Knowsley** and **Liverpool** in the worst quintile for England (as shown in Figure 8 at the start of this section).

		Compared with benchmark:							
		Better	Similar	Worse	Lower	Similar	Higher	Not compared	
		Quintiles:					Not applicable		
		Best			Worst				
		Quintiles:			High	Not applicable			
		Low							
Indicator	Period	England	CA-Liverpool City Region	Halton	Knowsley	Liverpool	Sefton	St. Helens	Wirral
Self-reported wellbeing - people with a high anxiety score (Persons, 16+ yrs)	2018/19	19.7	-	18.8	21.8	20.8	21.8	20.4	18.6
Self-reported wellbeing - people with a low happiness score (Persons, 16+ yrs)	2018/19	7.8	-	7.2	10.5	9.8	10.8	9.7	6.4
Self-reported wellbeing - people with a low satisfaction score (Persons, 16+ yrs)	2018/19	4.3	-	5.8	5.6	5.4	5.0	6.1	3.9
Self-reported wellbeing - people with a low worthwhile score (Persons, 16+ yrs)	2018/19	3.6	-	*	*	6.5	4.1	*	*
Deprivation score (IMD 2019) (Persons, All ages)	2019	21.7	34.9	32.3	43.0	42.4	27.0	31.5	29.6
Percentage of people aged 65+ receiving winter fuel payments (Persons, 65+ yrs)	2018/19	96.6	95.9*	95.4	94.5	95.7	95.3	97.6	96.4
Social Isolation: percentage of adult carers who have as much social contact as they would like (Persons, 65+ yrs)	2018/19	34.5	32.3*	35.3	35.2	28.0	27.9	41.5	31.6
Social Isolation: percentage of adult social care users who have as much social contact as they would like (Persons, 65+ yrs)	2018/19	43.5	44.8*	41.1	45.8	44.1	43.8	45.5	47.4
Older people living alone: % of households occupied by a single person aged 65 or over (Persons, 65+ yrs)	2011	12.4	13.4*	11.6	12.9	11.9	15.6	13.1	14.7
Access to Healthy Assets & Hazards Index (Persons, All ages)	2017	21.1	14.8	21.1	12.0	32.0	4.1	5.1	2.1
Utilisation of outdoor space for exercise/health reasons (Persons, 16+ yrs)	Mar 2015 - Feb 2016	17.9	-	17.6	21.0	17.4	15.6	21.2	23.4*

<sup>a</sup> Can be a proxy measure for the proportion living in private households. Also, very low values will highlight areas with high levels of migration/transient populations and/or possible problems with the payment system. Note: the measure will be affected by the proportion of residents in care homes/long-term NHS settings. Click link: [65+ winter fuel payments](#).

- With the exception of St. Helens, there are significantly fewer people aged 65 plus receiving winter fuel payments **across LCR**.
- Levels of social isolation amongst carers aged 65 plus in **Sefton** are significantly higher than the national average.
- Around 1 in 3 people in **Liverpool** and 1 in 5 in **Halton** have poor access to a healthy environment.

### 3. Reverse or Live Well with a Long-term Condition

To achieve a slowing or reversal of declining capacity amongst the older population, it is important to ensure that as far as possible, people can live well with long-term health conditions. The available relevant data is summarised in Figure 15.

#### Better compared to England

- There are low levels of diabetes in **Liverpool** compared to England.
- **Liverpool** and **Wirral** have significantly low levels of rheumatoid arthritis.
- In **Sefton**, there are significantly fewer people aged 65 plus registered blind <sup>b</sup>.
- There is a lower diagnosed prevalence of dementia in **Knowsley, Liverpool** and **Halton**.
- The estimated dementia diagnosis rate (i.e. the difference between the estimated prevalence and diagnosed prevalence) is similar to the national average **across LCR**, which allows healthcare staff to plan and work together to improve health and care outcomes.

#### Worse compared to England

- There is a significantly high prevalence of coronary heart disease in **Halton, Knowsley, Sefton, St. Helens** and **Wirral**. **Sefton**

**Figure 15. Reverse or Live Well with a Long-term Condition**  
Data for LCR local authorities compared to England.

Source: PHE Fingertips, accessed August 2020.

		Compared with benchmark:								
		Better	Similar	Worse	Lower	Similar	Higher	Not compared		
		Quintiles:					Quintiles:			
		Best				Worst	Not applicable			
		Quintiles:			Quintiles:		Quintiles:			
		Low				High	Not applicable			
Indicator	Period	England	CA-Liverpool City Region	Halton	Knowsley	Liverpool	Sefton	St. Helens	Wirral	
CHD: QOF prevalence (all ages) (Persons, All ages)	2018/19	3.1*	3.9*	4.1	4.2	3.3	4.3	4.4	3.9	
Stroke: QOF prevalence (all ages) (Persons, All ages)	2018/19	1.8*	-	2.0	1.9	1.8	2.3	2.1	2.3	
Diabetes: QOF prevalence (17+) (Persons, 17+ yrs)	2018/19	6.9*	7.2*	8.3	7.9	6.5	7.4	8.0	7.3	
Percentage reporting a long term Musculoskeletal (MSK) problem (Persons, 18+ yrs)	2018/19	16.9	21.3	22.5	21.8	19.6	21.4	24.1	21.7	
% reporting at least two long-term conditions, at least one of which is MSK related (Persons, 18+ yrs)	2018/19	12.1	16.3	18.2	16.8	15.0	15.9	17.8	17.0	
% reporting a long term MSK problem who also report depression or anxiety (Persons, 18+ yrs)	2016/17	24.1	-	31.5	37.8	37.7	24.9	26.1	28.7	
Prevalence of knee osteoarthritis in people aged 45 and over (Persons, 45+)	2012	18.2	18.8*	20.6	19.2	19.0	18.8	19.0	17.7	
Prevalence of severe knee osteoarthritis in people aged 45 and over (Persons, 45+)	2012	6.1	6.5*	7.1	6.7	6.5	6.5	6.5	5.9	
Prevalence of hip osteoarthritis in people aged 45 and over (Persons, 45+)	2012	10.9	11.2*	11.8	11.5	11.3	11.3	10.9	10.7	
Prevalence of severe hip osteoarthritis in people aged 45 and over (Persons, 45+)	2012	3.2	3.4*	3.6	3.5	3.4	3.5	3.3	3.2	
Rheumatoid Arthritis: QOF prevalence (16+) (Persons, 16+ yrs)	2018/19	0.8*	0.8	1.0	0.9	0.7	0.9	0.9	0.7	
Preventable sight loss - age related macular degeneration (AMD) (Persons, 65+ yrs)	2018/19	112.3	139.4*	86.0	231.3	140.5	137.4	165.8	110.3	
Preventable sight loss - glaucoma (Persons, 40+ yrs)	2018/19	13.2	15.2*	7.6	17.5	8.5	15.3	27.1	18.6	
Preventable sight loss - diabetic eye disease (Persons, 12+ yrs)	2018/19	3.1	3.7*	*	4.8	4.2	2.5	4.5	4.7	
People aged 65-74 registered blind or partially sighted (Persons, 65-74 yrs)	2016/17	555	1007*	639	943	2073	373	757	747	
People aged 75+ registered blind or partially sighted (Persons, 75+ yrs)	2016/17	3961	4182*	4351	5576	4396	2976	4372	4464	

<sup>b</sup> Note that registration is voluntary and, therefore, this indicator may not be a good proxy for the prevalence of visual impairments [PHE Fingertips Definitions and Supporting Information](#).

and **Wirral** also have a high prevalence of stroke.

- **Halton** and **St. Helens** have a high diabetes prevalence.
- **Each local authority in LCR** has a significantly high prevalence of musculoskeletal conditions (MSK) and of people reporting at least two long term conditions, with **Halton** the worst in the North West for the latter.

contd.

Estimated prevalence of common mental disorders: % of population aged 65 & over (Persons, 65+ yrs)	2017	◀▶	10.2*	-	12.1*	13.2*	13.4*	10.7*	11.3*	10.6*
Dementia: QOF prevalence (all ages) (Persons, All ages)	2018/19	◀▶	0.8*	0.8*	0.7	0.7	0.6	1.0	1.0	0.9
Dementia: Recorded prevalence (aged 65 years and over) (Persons, 65+ yrs)	2019	◀▶	4.34	-	4.00	4.10	4.10	4.39	4.54	4.30
Estimated dementia diagnosis rate (aged 65 and over)(Persons, 65+ yrs)	2020	◀▶	67.4	-	72.3	68.0	67.1	66.3	74.3	65.9
<div style="background-color: #d9ead3; padding: 2px;">≥ 66.7% (significantly)</div> <div style="background-color: #fff2cc; padding: 2px;">similar to 66.7%</div> <div style="background-color: #e74c3c; padding: 2px;">&lt; 66.7% (significantly)</div>										
Dementia: Direct standardised rate of emergency admissions (aged 65 years and over)(Persons, 65+ yrs)	2018/19	◀▶	3480	-	3931	4993	4443	3939	4621	3343

- There is a significantly high prevalence of depression or anxiety amongst those with an MSK problem in **Halton, Knowsley, Liverpool** and **Wirral**.
- There are significant levels of knee and hip arthritis in **Halton**.
- **Halton, Knowsley** and **Sefton** have high levels of rheumatoid arthritis.
- There are significantly high levels of preventable sight loss (macular degeneration) in **Knowsley, Liverpool** and **St. Helens**. **St. Helens** also has high levels of sight loss due to glaucoma.
- There are high levels of people aged 65 plus registered blind in **Knowsley, Liverpool, St. Helens** and **Wirral**.
- The prevalence of common mental health disorders in those aged 65 plus is significantly high in **Halton, Knowsley** and **Liverpool**, with Liverpool and Knowsley the second and third highest in the North West.
- The prevalence of dementia is significantly high in **St. Helens** (on two separate measures) and in **Sefton** (on one measure).
- The rate of emergency admissions for dementia is significantly high in **each local authority in LCR**, with the **exception of Wirral**.



## 4. Enhance Care & Support

This section gathers data which will help to indicate levels of care and support for older people with a significant loss of capacity across LCR.

### Older people living in care homes

Based on the proportion of older people identified as living in a care home during the 2011 Census and population projections, there will be a substantial increase in numbers of people living in care homes by 2035 (Figure 16).

**Figure 16: Numbers living in a care home: Projected figures, 2020 to 2035**  
Total population aged 65 and over living in a care home with or without nursing

	2020	2025	2030	2035
Halton	659	778	903	1,081
Knowsley	788	871	958	1,110
Liverpool	2,154	2,370	2,583	2,970
Sefton	2,877	3,199	3,522	4,052
St. Helens	897	1,057	1,187	1,381
Wirral	2,459	2,747	3,093	3,594
<b>LCR</b>	<b>9,834</b>	<b>11,022</b>	<b>12,246</b>	<b>14,188</b>

*Source: POPPI based on 2011 census applied to population projections*

However, these projections need to be offset against the overall downward trend in the rate of permanent admissions to care homes. The LCR level has been consistently higher than England (Figure 17).

**Figure 17: Permanent admissions to residential and nursing care homes per 100,000 aged 65+, England, Cheshire and Warrington and LCR.**

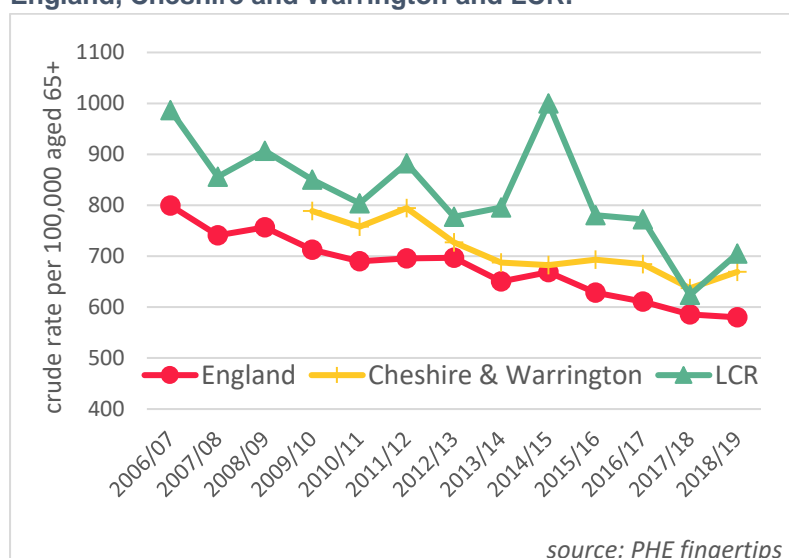


Figure 18 summarises the data available from the PHE fingertips dataset relevant to levels of care and support for those older people with reduced capacity, comparing local data to the national average.

### Better compared to England

- In **St. Helens**, levels of osteoporosis in those aged 50 plus are in the lowest quintile in England. Levels are also low in **Halton** and **Sefton**.
- People in **Liverpool** are significantly more likely to be offered reablement services on discharge from hospital.
- In **Sefton** and **St. Helens**, people aged 65+ are significantly more likely to still be at home 91 days after hospital discharge.
- There are significantly high numbers of social care users receiving self-directed support and payments in **Knowsley** and **Sefton**.
- **Across LCR**, social isolation is similar to the national average amongst carers (except in Sefton), and amongst care users, where the overall score is significantly better than the national average.
- There are significantly high proportions of

**Figure 18. Enhance Care & Support Data for LCR local authorities compared to England.**

Source: PHE Fingertips, accessed August 2020.

		Compared with benchmark:								
		Better	Similar	Worse	Lower	Similar	Higher	Not compared		
Quintiles:		Best					Worst		Not applicable	
Quintiles:		Low			High			Not applicable		
Indicator	Period	England	CA-Liverpool City Region	Halton	Knowsley	Liverpool	Sefton	St. Helens	Wirral	
Emergency hospital admissions due to falls in people aged 65 and over (Persons, 65+ yrs)	2018/19	2198	3102	2970	3427	3555	3273	2722	2613	
Emergency hospital admissions due to falls in people aged 65-79 (Persons, 65-79 yrs)	2018/19	1044	1596	1338	1704	1955	1773	1256	1294	
Emergency hospital admissions due to falls in people aged 80+ (Persons, 80+ yrs)	2018/19	5543	7469	7703	8421	8194	7623	6976	6440	
Hip fractures in people aged 65 and over (Persons, 65+ yrs)	2018/19	558	604	655	671	646	569	631	553	
Hip fractures in people aged 65-79 (Persons, 65-79 yrs)	2018/19	237	277	215	316	314	289	272	235	
Hip fractures in people aged 80+ (Persons, 80+ yrs)	2018/19	1489	1551	1932	1701	1607	1381	1672	1475	
Osteoporosis: QOF prevalence (50+) (Persons, 50+ yrs)	2018/19	0.8*	0.8	0.5	0.8	1.0	0.5	0.3	1.1	
Percentage of people aged 65 and over offered reablement services following discharge from hospital. (Persons, 65+ yrs)	2018/19	2.8	2.6*	2.2	1.9	3.7	2.1	2.5	2.4	
Percentage of people aged 65 and over who were still at home 91 days after discharge from hospital (Persons, 65+ yrs)	2018/19	82.4	86.2*	85.4	86.8	85.7	87.7	93.3	82.2	
Percentage of people aged 65 and over using social care who receive self-directed support, and those receiving direct payments (Persons, 65+ yrs)	2018/19	88.7	77.4*	84.6	99.7	83.7	93.9	80.4	12.4	
Percentage of adult social care service users satisfied with care and support services, age 65+ (Persons, 65+ yrs)	2018/19	61.8	-	60.7	57.0	63.9	63.3	59.1	64.9	
Percentage of adult social care service users have control over their daily lives, age 65+ (Persons, 65+ yrs)	2018/19	74.4	76.1*	72.1	79.0	76.9	76.5	75.7	74.1	
Social Isolation: percentage of adult carers who have as much social contact as they would like (Persons, 65+ yrs)	2018/19	34.5	32.3*	35.3	35.2	28.0	27.9	41.5	31.6	
Social Isolation: percentage of adult social care users who have as much social contact as they would like (Persons, 65+ yrs)	2018/19	43.5	44.8*	41.1	45.8	44.1	43.8	45.5	47.4	

patients identified as needing palliative care in **Halton, Knowsley, north Sefton and Wirral.**

**Worse compared to England**

- There are significantly high levels of admissions for falls amongst those aged 65 plus in **each local authority in LCR, with Liverpool, Knowsley and Sefton** the highest three in the North West.
- **Liverpool and Sefton** have a significantly low carer-reported quality of life score (dementia carers).
- There are significantly high levels of residential and nursing home admissions in **each local authority** except Wirral.

Carer-reported quality of life score for people caring for someone with dementia (Persons, 18+ yrs)	2018/19	7.30	-	7.50	6.70	6.40	7.00	7.50	7.30
Permanent admissions to residential and nursing care homes per 100,000 aged 65+ (Persons, 65+ yrs)	2018/19	580	705*	731	678	727	800	682	609
Care home beds per 100 people 75+ (Persons, 75+ yrs) <b>Newdata</b>	2020	9.6	10.5*	8.1	9.5	10.6	11.8	8.4	11.2
Nursing home beds per 100 people 75+ (Persons, 75+ yrs) <b>Newdata</b>	2020	4.7	5.9*	4.0	5.7	6.8	5.4	4.3	6.9

data for CCGs in LCR:

Indicator	Period	England	LCR	NHS Wirral CCG	NHS South Sefton CCG	NHS Liverpool CCG	NHS Knowsley CCG	NHS St Helens CCG	NHS Halton Ct	NHS Southport & Formby
Palliative/supportive care: QOF prevalence (all ages) (Persons, All ages)	2018/19	0.4*	0.5*	0.7	0.4	0.4	0.5	0.4	0.5	0.9

## Interpretation guide

The values in each column on Figures 6, 7, 14, 15, and 18 represent local measures for the identified row indicators in the named area. Some might have lower or higher values than others, but not be statistically different to the England comparator. Measures of statistical significance (such as 95% confidence intervals, as used here) give us an idea of precision and confidence that can be used when interpreting estimated local values and the probability that the difference shown is (or is not) a chance finding. The benchmarking method applied here is 'Confidence intervals overlapping reference value (95.0)' (PHE, indicator definitions<sup>c</sup>). Where LCR rates have been calculated manually for the infographic, these have been done using the sum of rounded counts at local authority level.

**GREEN** means the value is statistically significantly better than the England value and the difference shown is not likely to be a chance finding.

**YELLOW** means the value is NOT statistically significantly different to the England value and the difference shown is not likely to be a chance finding.

**RED** means the value is statistically significantly worse than the England value and the difference shown is not likely to be a chance finding.

## Data sources

All data are from PHE's Data Visualisation Platform 'Fingertips' <https://fingertips.phe.org.uk> in particular <https://fingertips.phe.org.uk/profile/healthy-ageing>, unless otherwise stated.

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<sup>c</sup> [https://fingertips.phe.org.uk/profile/healthy-ageing/data#page/6/gid/1938133280/pat/6/par/E12000002/ati/202/are/E06000006/iid/91102/age/94/sex/1/cid/4/page-options/ovw-do-0\\_car-do-0](https://fingertips.phe.org.uk/profile/healthy-ageing/data#page/6/gid/1938133280/pat/6/par/E12000002/ati/202/are/E06000006/iid/91102/age/94/sex/1/cid/4/page-options/ovw-do-0_car-do-0)

## Appendices: Population numbers and projections aged 65+by local authority

### Appendix 1: Population aged 65+, number and %, by local authority, LCR, 2019

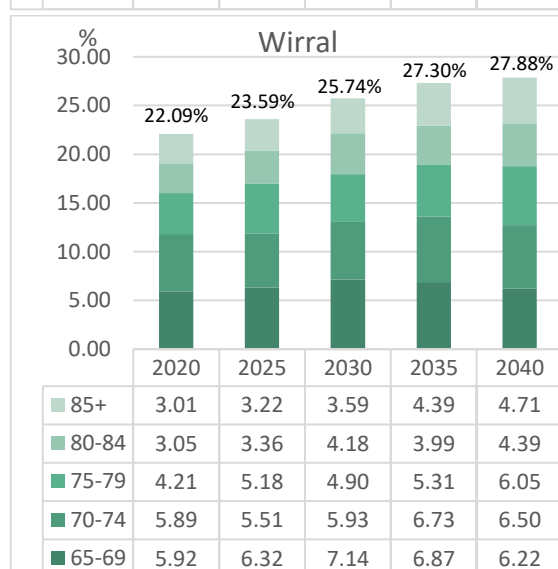
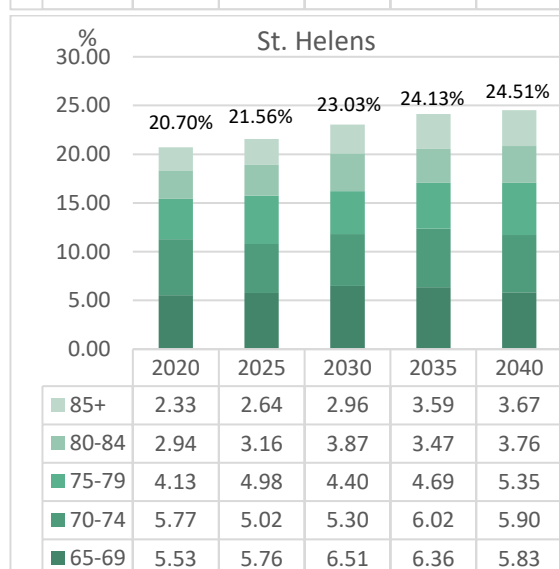
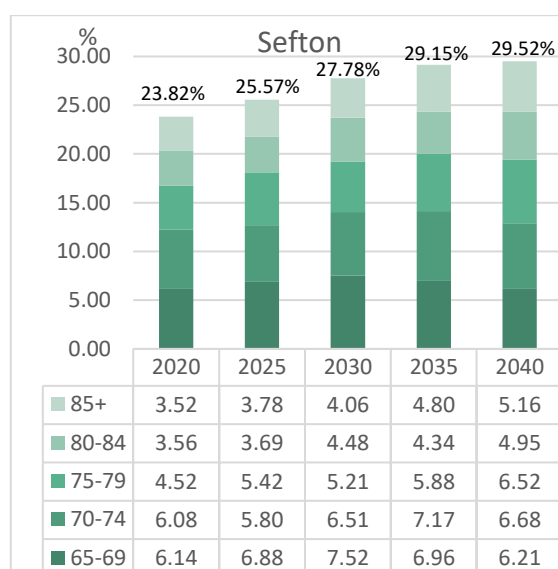
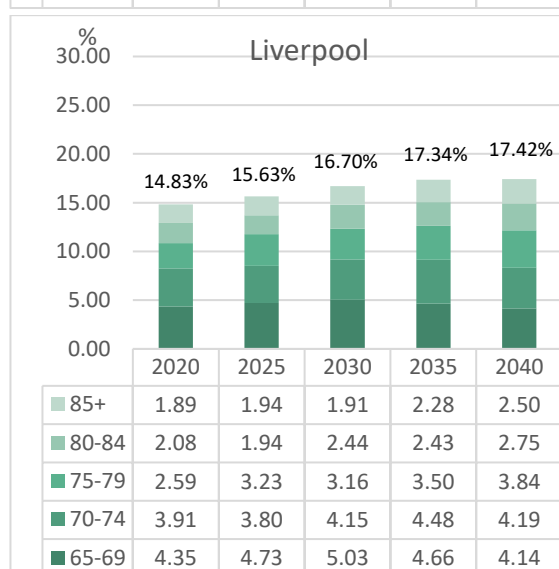
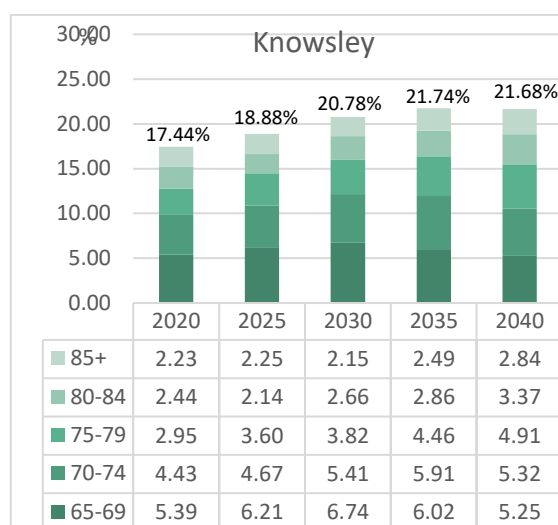
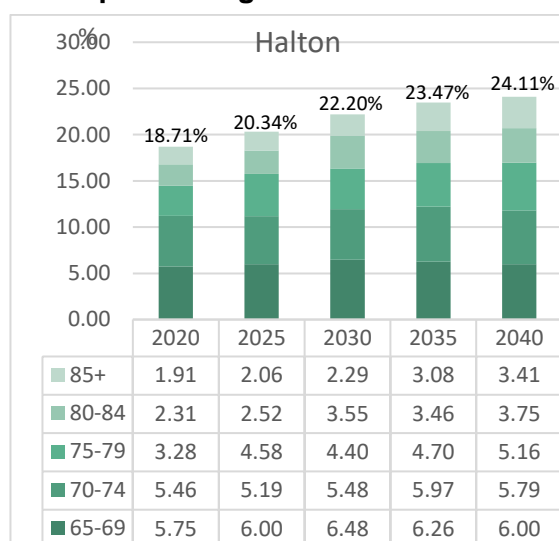
	male		female		total	
	count aged 65+	% of total population	count aged 65+	% of total population	count aged 65+	% of total population
Halton	11072	17.55	12740	19.21	23812	18.40
Knowsley	11580	16.15	14453	18.26	26033	17.26
Liverpool	33640	13.53	39874	15.99	73514	14.76
Sefton	28734	21.59	36392	25.39	65126	23.56
St. Helens	17104	19.22	20099	21.95	37203	20.60
Wirral	31941	20.35	38922	23.30	70863	21.87
<b>Liverpool City Region total</b>	<b>134071</b>	<b>17.58</b>	<b>162480</b>	<b>20.39</b>	<b>296551</b>	<b>19.02</b>
<b>Cheshire &amp; Merseyside total</b>	<b>227317</b>	<b>18.60</b>	<b>271351</b>	<b>21.29</b>	<b>498668</b>	<b>19.97</b>
<b>England</b>	<b>4736201</b>	<b>17.02</b>	<b>5617515</b>	<b>19.74</b>	<b>10353716</b>	<b>18.39</b>
<b>North West</b>	<b>632735</b>	<b>17.45</b>	<b>742376</b>	<b>19.98</b>	<b>1375111</b>	<b>18.73</b>

Source: ONS, 2019

## Appendix 2: Population projections by local authority, age groups 65 plus in LCR, 2020 to 2040.

2a. Percentages & 2b. Numbers. Source: ONS via NOMIS, July 2020

### 2a: Population aged 65 and over as a % of all ages



## 2b: Projected population numbers, 65 plus

Halton	2020	2025	2030	2035	2040
85+	2,474	2,714	3,063	4,153	4,650
80-84	2,989	3,315	4,740	4,665	5,120
75-79	4,247	6,033	5,868	6,343	7,048
70-74	7,077	6,836	7,314	8,059	7,907
65-69	7,443	7,904	8,649	8,450	8,182
<b>Total 65+</b>	<b>24,230</b>	<b>26,802</b>	<b>29,634</b>	<b>31,670</b>	<b>32,907</b>

Knowsley	2020	2025	2030	2035	2040
85+	3,369	3,481	3,398	4,013	4,662
80-84	3,689	3,316	4,203	4,609	5,540
75-79	4,456	5,567	6,042	7,183	8,068
70-74	6,695	7,230	8,546	9,520	8,746
65-69	8,144	9,615	10,653	9,705	8,626
<b>Total 65+</b>	<b>26,353</b>	<b>29,209</b>	<b>32,842</b>	<b>35,030</b>	<b>35,642</b>

Liverpool	2020	2025	2030	2035	2040
85+	9,493	9,996	10,165	12,363	13,806
80-84	10,446	10,006	12,943	13,190	15,170
75-79	13,022	16,677	16,783	19,030	21,193
70-74	19,664	19,621	22,039	24,314	23,151
65-69	21,854	24,408	26,739	25,303	22,841
<b>Total 65+</b>	<b>74,479</b>	<b>80,708</b>	<b>88,669</b>	<b>94,200</b>	<b>96,161</b>

Sefton	2020	2025	2030	2035	2040
85+	9,748	10,597	11,518	13,767	14,960
80-84	9,861	10,354	12,699	12,461	14,361
75-79	12,513	15,204	14,773	16,867	18,910
70-74	16,816	16,261	18,477	20,563	19,397
65-69	17,005	19,288	21,348	19,978	18,029
<b>Total 65+</b>	<b>65,943</b>	<b>71,704</b>	<b>78,815</b>	<b>83,636</b>	<b>85,657</b>

St. Helens	2020	2025	2030	2035	2040
85+	4,237	4,880	5,542	6,813	7,067
80-84	5,346	5,849	7,253	6,592	7,232
75-79	7,492	9,206	8,240	8,894	10,303
70-74	10,481	9,295	9,939	11,435	11,358
65-69	10,036	10,652	12,203	12,068	11,213
<b>Total 65+</b>	<b>37,592</b>	<b>39,882</b>	<b>43,177</b>	<b>45,802</b>	<b>47,173</b>

Wirral	2020	2025	2030	2035	2040
85+	9,758	10,532	11,847	14,562	15,771
80-84	9,914	10,998	13,765	13,251	14,671
75-79	13,673	16,960	16,135	17,618	20,250
70-74	19,125	18,055	19,552	22,336	21,758
65-69	19,214	20,683	23,532	22,806	20,800
<b>Total 65+</b>	<b>71,684</b>	<b>77,228</b>	<b>84,831</b>	<b>90,573</b>	<b>93,250</b>

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