

Adults at Risk

Strategic Needs

Assessment

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Executive Summary

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect. Local authorities have safeguarding duties. They must lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens. Safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs);
- Is experiencing, or is at risk of, abuse or neglect and,
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

The purpose of Sefton's Adults at Risk Strategic Needs Assessment is to identify local needs and views to support local strategy development and service planning. The needs assessment is a systematic process for determining and addressing needs, or "gaps" between current conditions and desired conditions. This should then inform local priorities, policies, and strategies that in turn inform local commissioning priorities that will improve outcomes for Adults at Risk and reduce inequalities throughout the Borough. In order to understand whether we are achieving good outcomes locally it is useful to benchmark outcomes in Sefton against the national average and look at trends over time and link with other stakeholders and partners.

It should be remembered that the safety of Adults at Risk along with their health and wellbeing is paramount and any issues can often only be tackled by taking a multi-departmental and multi-agency approach to solutions. Factors influencing outcomes include not only health and care services but also the wider determinants of population health and wellbeing such as community development and social relationships; poverty; and family support.

This report primarily covers Adults at Risk, with health, lifestyles and wider determinants being

covered in more detail in the associated thematic Needs Assessments. The overall local picture of matters affecting Adults at Risk in the Borough is summarised below.

The core figures in this document reflect the latest information available and come from several sources including Adult Social Care Outcome Framework, Sefton MBC, Merseyside Police and Office for Health Improvement & Disparities Fingertips.

Key Issues

Having reviewed the data available for comparison nationally and regionally the report finds the following are areas where Sefton has figures above or below our neighbours and the national average, based on the latest available annual information. These may be areas that warrant further investigation and strategic consideration. Note that several of these measures are highlighted as key for Adults at Risk as many direct measures are not available nationally.

- Sefton continually has higher than average standardised rates of both young adults (aged 18 to 64) and older adults (aged 65 and older) receiving long term support through residential and nursing home care, with the Borough being higher than the regional and national rates.
- Some Lower-Level Super Output Areas (LSOA) within the Borough have some of the highest levels of income deprivation affecting older people with 31/189 LSOAs are in the top 10% of most deprived areas nationally.
- The number and rate of domestic abuse offences reported / dealt with by Merseyside Police have seen a year-on-year increase from 2017/18 to 2021/22. There has been a decrease in the number of cases discussed at multi-agency risk assessment conference (MARAC) when comparing 2021/22 to the previous year, with an overall increase of 25% across the past five years.
- Deafness and hearing loss in 2020 in the Borough is significantly higher than that seen nationally, with levels predicted to increase over the next 20 years.

- The Borough has a lower percentage of working age adults with learning disabilities in paid employment than the North West and England, with rates showing minimal change over the past five years.
- After taking account of differences in the age profile between Sefton and England, Sefton has a higher rate of mortality from all causes in adults aged 18 to 74 with a severe mental illness. There is a notable increase from 2017-19 to 2018.
- The quality outcome framework prevalence of mental health illnesses (including patients with schizophrenia, bipolar affective disorder and other psychoses as recorded on practice disease registers) in Sefton (1.2%) falls within the highest 20% of Local Authorities nationally and is significantly higher than the rates seen across the North West and England.
- The rate of residents claiming Personal Independence Payments (PIP) for psychiatric disorders is higher in the Borough than seen regionally and nationally and has shown year on year increases with an overall rise of 73% (from April 2018 to April 2022).
- Emergency hospital admission rates for intentional self-harm in Sefton are significantly higher than those of the North West and England. After adjusting for age differences, the admission rate in Sefton has been significantly above the England average since 2014/15.

Sefton has significantly higher rates of emergency hospital admissions due to falls in older adults (aged 65 and over) than seen regionally and nationally, with counts seeing an overall increase of 16% (when comparing 2016/17 to 2020/21). The 65+ rate for hospital admission for hip fracture has been in line with the national average for the past decade with a gradually reducing trend.

Key Findings

Based on the statistical quantitative evidence available, it would suggest:

With the high and possibly increasing levels of adults receiving long term support through residential and nursing homes, further investment is ensure alternatives are available i.e.,

community services and assisted living and extra care housing

Domestic abuse offences have increased year on year in the Borough. Continued joint working with other agencies including Merseyside Police is needed, with clear signposting being made to the public where help is available.

Sefton hearing loss and deafness levels are higher than seen across England and is predicted to increase over the next 20 years. Cross agency working is needed to determine the cause of these losses and to interact with the public highlighting the causes and effects and how these can be avoided.

Due to the low levels of working age people with a learning disability in paid employment in Sefton, joint working with agencies including Sefton CVS is needed to improve levels.

The rate of mental illness in patients registered with GPs in Sefton is significantly higher than the England average. Understanding these issues and the impacts they have is a priority along with working with agencies and the community to improve services for those affected.

Falls leading to emergency hospital admissions in those aged 65 and over have shown overall increases from 2016/17 to 2020/21 in Sefton, with rates being higher than seen across the North West and England. Joint work across services needs to be carried out to establish reasons for the higher levels and identify possible initiatives to reduce these.

The Navajo Merseyside & Cheshire LGBT+ Charter Mark is an equality mark sponsored by In-Trust Merseyside and supported by the LGBT+ community networks across Merseyside – a signifier of good practice, commitment and knowledge of the specific needs, issues and barriers facing LGBT+ people across Merseyside.

The recent Sefton Substance Use Strategic Needs Assessment concluded that the next steps for Sefton's Combating Drugs Partnership is to determine priorities from the analysis of the data contained in this needs assessment, to inform the Sefton Substance Misuse Strategy. Initial analysis suggests the following possible priorities, prevention, early intervention and behaviour changes, collaborating to keep communities safe,

better recovery and the creation of a Vision, Strategy, Plan and Performance Framework.

Further details affecting adults can be found in separate chapters of the Joint Strategic Needs Assessment (JSNA) including:

- Drugs and Alcohol
- Health
- Wider Determinants

The Cheshire and Merseyside Integrated Care Board was created on 1 July 2022. Deborah Butcher, the Executive Director for Adult Social Care and Health Services has been appointed as the Sefton Place Director to the Cheshire and Merseyside Partnership Integrated Care Board (ICB). The role is a joint appointment between the NHS and Sefton Council and she takes this role on in addition to her current duties as Executive Director for the Council. Place Directors will have statutory responsibilities in both the ICB and the relative Local Council. Good progress has been made in year in respect of integration between health and social care. There is a Place Delivery Plan being formulated.

As of April 2023, the Care Quality Commission (CQC) will independently review and assess all Local Authority Adult Social Care Services.

Introduction

There are significant pressures on all social care services nationally as noted by a parliamentary committee “The crisis in adult social care is two-fold. Firstly, systemic underfunding of adult social care combined with rising demand has meant both that more and more people are not getting the care they need, and many people that do receive care are experiencing a reduction in quality. Second, people who spend a long time in the care system can face unpredictable and catastrophic costs since social care is means-tested, rather than free at the point of use as in the NHS.” Long-term funding of adult social care - Parliament. UK

These pressures are particularly acute in Sefton due to its high proportions of older people (with Census 2021 showing that in Sefton 23% of residents are aged 65 and over, with Sefton ranked 79th highest of 309 lower tier local authorities in England) and some areas of intense deprivation.

Sefton addresses the concerns and needs of Adults at Risk in several strategies, including:

The Health and Wellbeing Strategy 2020-2025

[the-health-and-wellbeing-strategy-2020-2025.pdf \(sefton.gov.uk\)](#)

2030 Vision

[Vision and Core Purpose \(sefton.gov.uk\)](#)

The Sefton Community Learning Service (SCLS) Safeguarding and Prevent Policy 2020/21

[Safeguarding Adults at Risk Policy \(sefton.gov.uk\)](#)

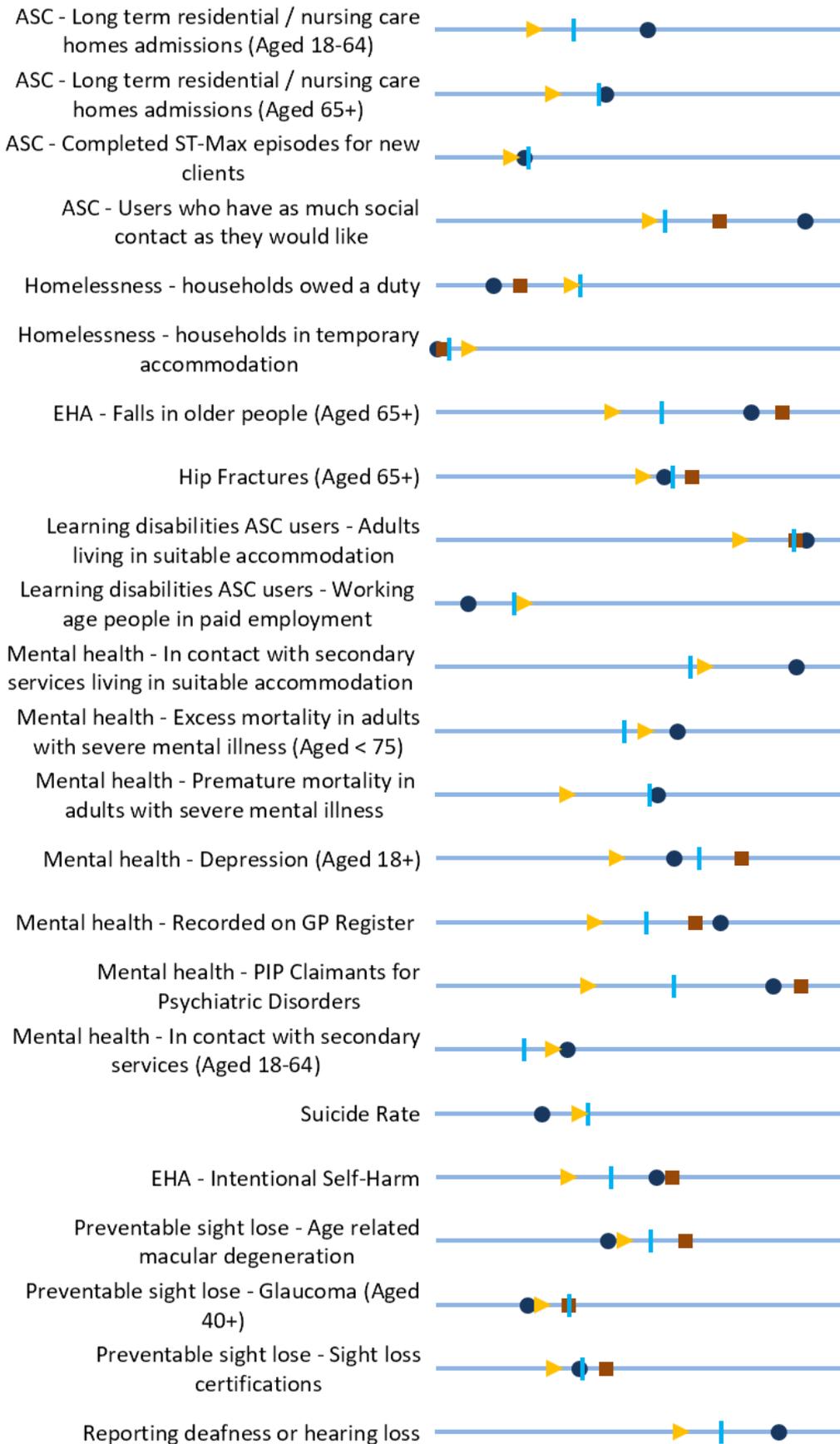
Sefton Carers Strategy 2014-2019

[Sefton Carers Strategy - Annex 1.pdf](#)

Comparative National Position

The following chart illustrates the relative positions of Sefton (●) compared to the range of values for all local authorities nationally, and highlights the England (▶), North West (|), and Liverpool City Region (■) rates where available.

The horizontal blue bars represent the range of values for each indicator (lowest on left to highest on right). The vertical bars show where England, the North West, and Liverpool City Region average values lie on the range of values and the blue dot is Sefton. This chart is designed to show where Sefton is more or less similar compared to other populations (NW, LCR, England) and whether the value of Sefton's indicators is higher or lower compared to other areas. The individual indicators are covered in more detail in the report including trends and this chart only represents the status ‘now’ and does not show ‘volumes’ of people affected.



Adult Social Care

Long-term support needs

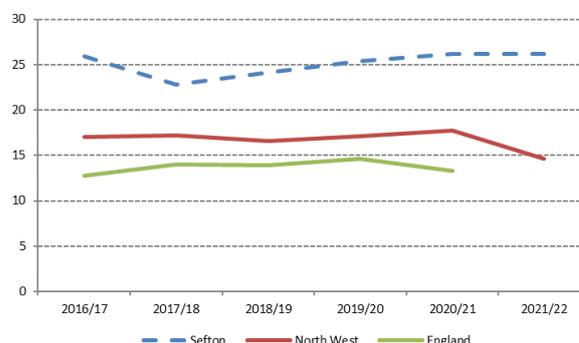
“Avoiding permanent placements in residential and nursing care homes is a good indication of delaying dependency, and local health and social care services will work together to reduce avoidable admissions. Research suggests where possible people prefer to stay in their own home rather than move into residential care.” *Office for Health Improvement & Disparities*

Admissions to Long-term Care

Across the past five years (2016/17 to 2020/21) Sefton has continually had higher rates of younger adults (aged 18 – 64) admitted to residential and nursing homes for long term support, than those seen regionally and nationally (Figure / Table 1). In 2020/21, Sefton was ranked 139 (out of 152 upper tier Local Authorities - LAs in England) for levels of younger adults admitted to long term residential and nursing homes for long term support (where the LA ranked 1st has the lower levels). Sefton have access to 2021/22 data for the Borough and region only, which shows the increases in rates of admissions continue in Sefton with the North West reducing.

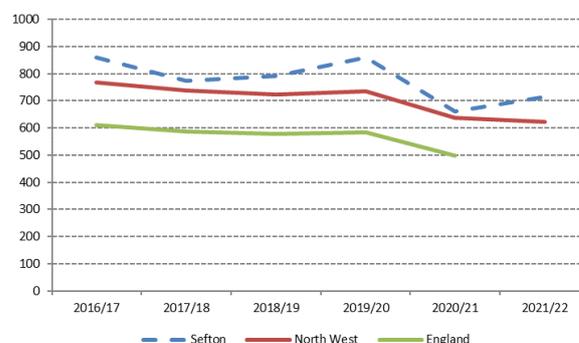
Similarly, Borough rates of older adults (aged 65+) receiving long term support via admissions to residential and nursing homes are higher than national and regional (Figure / Table 2). With Sefton being ranked 120 (out of 152 upper tier LAs in England) for older adults receiving long term support via admissions to residential and nursing homes in 2020/21. In 2021/22 there has been a slight increase in levels of admissions for those 65 and over in the Borough (possibly due to the end of the COVID1-9 pandemic) compared to a slight reduction regionally.

Figure / Table 1: Long-term support needs for younger adults (aged 18-64) met by admissions to residential and nursing care homes (crude rate per 100,000 population 18 - 64)



Period	Sefton	North West	England
2016/17	25.9	17.0	12.8
2017/18	22.8	17.2	14.0
2018/19	24.1	16.6	13.9
2019/20	25.4	17.1	14.6
2020/21	26.2	17.7	13.3
2021/22	26.2	14.6	

Figure / Table 2: Long-term support needs for older adults (aged 65+) met by admissions to residential and nursing care homes (crude rate per 100,000 population 65 and over)



Period	Sefton	North West	England
2016/17	860.9	769.0	610.7
2017/18	774.0	737.8	585.6
2018/19	790.2	722.7	577.6
2019/20	859.9	736.1	584.0
2020/21	661.4	637.6	498.2
2021/22	713.4	621.8	

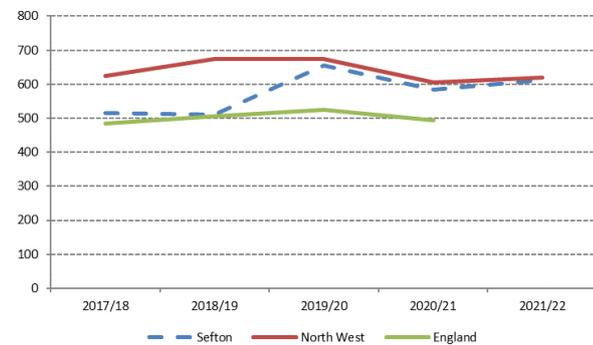
Short Term Care to Maximise Independence (ST-Max)

‘A primary aim of ST-Max is to provide short term rehabilitative support allowing a client to avoid ongoing long term support needs.’ NHS Digital

With NHS Digital stating that nationally ‘Around a third of all completed episodes (32.8%) resulted in the client having no identified needs (down from 35.3% in 2019-20), therefore they had no further ongoing requirement for adult social care support.’

From 2017/18 through 2020/21 the crude rate of ST-Max episodes in adults aged 18 and over remained higher in Sefton compared to the England average but was lower than the North West average. Rates in Sefton increased by 19% during this period. Figures have stabilised over the last two years in both Sefton and the North West (Figure / Table 3).

Figure / Table 3: Completed ST-Max episodes or new adult clients (crude rate per 100,000 population 18 and over)



Period	Sefton	North West	England
2017/18	515	625	485
2018/19	510	675	505
2019/20	655	675	525
2020/21	585	605	495
2021/22	613	619	

Domiciliary Care

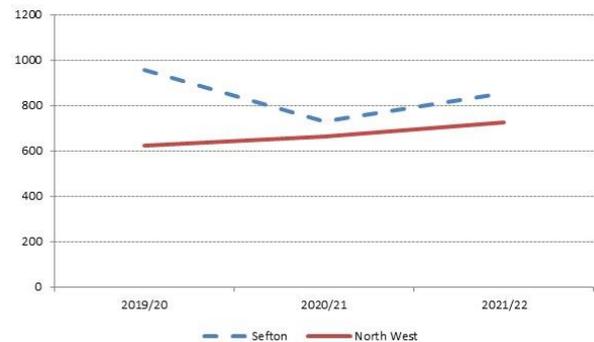
Domiciliary care also known as home care or home help is help provided at home by a paid carer.

Over the past three years (2019/20 to 2021/22) Sefton has commissioned a higher weekly number of domiciliary care hours per adult than the North

West. During this time the Borough showed an overall reduction of 11% compared to an increase seen regionally (Figure / Table 4).

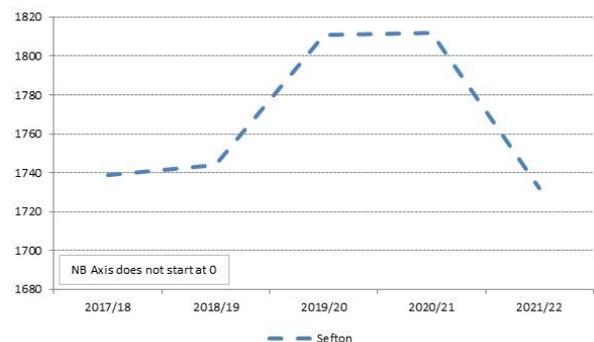
The number of adults receiving domiciliary care in the Borough increased by 4% between 2017/18 and 2020/21, these counts have now fallen back in line with pre-pandemic figures (Figure / Table 5).

Figure / Table 4: Total commissioned hours (weekly) for adults receiving domiciliary care (crude rate per 100,000 population 18 and over)



Period	Sefton	North West
2019/20	957.1	622.1
2020/21	728.4	662.7
2021/22	856.3	725.3

Figure / Table 5: Adults receiving domiciliary care end of year (count)



Period	Sefton
2017/18	1739
2018/19	1744
2019/20	1811
2020/21	1812
2021/22	1732

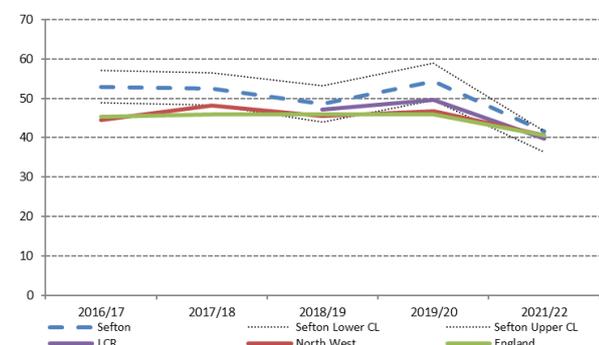
Adult Social Care (ASC) Users Survey – Social Isolation

“There is clear link between loneliness and poor mental and physical health. A key element of the Government’s vision for social care is to tackle loneliness and social isolation, supporting people to remain connected to their communities and to develop and maintain connections to their friends and family.” *Office for Health Improvement & Disparities*

In 2021/22, Sefton saw a decline in Adult Social Care users feeling they have as much social contact as they would like, though it is still slightly higher than the national average. This fall in levels is possibly an after effect of the Covid Pandemic since reductions have also been seen in LCR, the North West and England. The Borough levels are now similar to the three comparator areas (Figure / Table 6).

Please note there was no questionnaire completed in 2020/21 due to the COVID-19 pandemic.

Figure / Table 6: ASC users who have as much social contact as they would like according to the ASC users survey (% of users surveyed)



Period	Sefton			LCR	NW	England
	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	52.9	48.8	57.0		44.5	45.4
2017/18	52.4	48.3	56.5		48.1	46.0
2018/19	48.6	44.0	53.2	47.2	45.5	45.9
2019/20	54.3	49.6	59.0	49.7	46.7	45.9
2021/22	41.7	36.3	41.7	39.7	40.7	40.6
	Better than England		Similar to England	Worse than England		

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

Better – England’s rate is below Sefton’s Lower CL

Similar – England’s rate is within Sefton’s CL limits

Worse – England’s rate is above Sefton’s Upper CL

ASC Users Survey 2021/22 North West – Adult Social Care Outcomes Framework (ASCOF) Measures

The ASC users survey for 2021/22 is not yet available on a national level, Sefton together with LAs from the North West have collaborated to create a North West benchmarking tool for ASCOF measures.

The benchmarking tool provides the percentages for the 23 North West LAs, a North West average and breaks the LAs into quartiles with quartile 1 being the better performing LAs and quartiles 4 the worst performing.

Sefton results for each ASCOF measure in 2021/22 were as follows (Table / Figure 7):

1A Social care-related quality of life

- Sefton had a similar level to that of the North West
- With the Borough being in quartile 2

1B The proportion of people who use services who have control over their daily life

- Sefton was higher than the North West
- With the Borough being in the best performing quartile (1)

111 The proportion of people who use services who reported that they had as much social contact as they would like

- Sefton was higher than the North West
- With the Borough being in quartile 2

1J Adjusted Social care-related quality of life - impact of Adult Social Care Services

- Sefton was similar to the North West
- With the Borough being in the worst quartile (4)

3A Overall satisfaction of people who use service with their care and support

- Sefton was higher than the North West
- With the Borough being in the best performing quartile (1)

3D1 The proportion of people who use services who find it easy to find information about services

- Sefton was similar to the North West
- With the Borough being in quartile 3

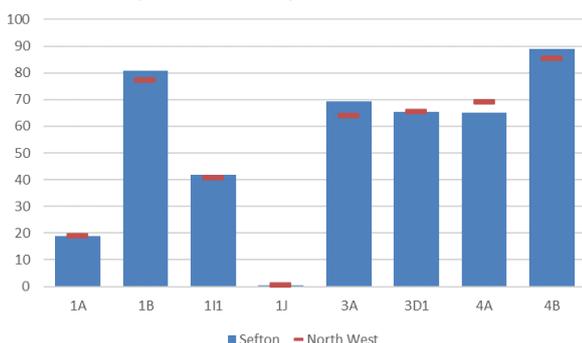
4A The proportion of people who use services who feel safe

- Sefton was lower than the North West
- With the Borough being in the worst quartile (4)

4B The proportion of people who use services who say that those services have made them feel safe and secure

- Sefton was higher than the North West
- With the Borough being in the best performing quartile (1)

Figure / Table 7: ASC user survey ASCOF measures results (% of users surveyed)



ASCOF Measure	Sefton		North West
	Percentage	Quartile*	
1A Social care-related quality of life	19.0	2	18.9
1B The proportion of people who use services who have control over their daily life	80.8	1	77.1
1I1 The proportion of people who use services who reported that they had as much social contact as they would like	41.7	2	40.7
1J Adjusted Social care-related quality of life - impact of Adult Social Care Services	0.39	4	0.41
3A Overall satisfaction of people who use service with their care and support	69.4	1	63.9
3D1 The proportion of people who use services who find it easy to find information about services	65.3	3	65.5
4A The proportion of people who use services who feel safe	65.2	4	68.9
4B The proportion of people who use services who say that those services have made them feel safe and secure	88.9	1	85.5

* North West quartile Sefton falls into

Deprivation

A long-term study of people aged 50 and over, carried out by Brunel University London found “that those who live in the poorest areas are significantly more likely to suffer from loneliness than those who live in the wealthiest, independent of other factors”.

With the Office of Health Improvement & Disparities stating, “Deprivation is one of the strongest predictors for health throughout the life course.”

This can be seen when comparing the life expectancy levels of the most deprived ward in Sefton (Linacre) to the least deprived ward (Harington) with a difference of over 11 years in the expected live span of residents (Figure / Table 8).

For more in-depth information relating to life expectancy please see Sefton’s Health Strategic Needs Assessment.

The Indices of Deprivation (IoD) measures levels of deprivation across seven domains. The higher the score the more affected or ‘deprived’ an area is.

The Income Deprivation Affecting Older People Index (IDAOP) is a supplementary index to the IoD.

Across the past five measurement periods Sefton has had a higher IDAOP score than that seen nationally and is on par with the North West levels. Scores peaked in 2010 and have shown reductions from this point indicating income deprivation affecting older people is reducing (Figure / Table 9).

The 2019, the distribution of IDAOP scores vary considerably across the Borough (Map 1) with 31 of the 189 Sefton Lower Super Output Areas (LSOA) falling within the top 10% most deprived areas nationally (one being in the top 1%, with a further nine being in the top 5%). In comparison 23 LSOAs are in the least deprived 10% nationally (one being in the lowest 1%, with a further 13 being in the lowest 5%).

Of the 31 LSOAs in the most 10% deprived IDAOP areas nationally:

- Two are located in North Sefton

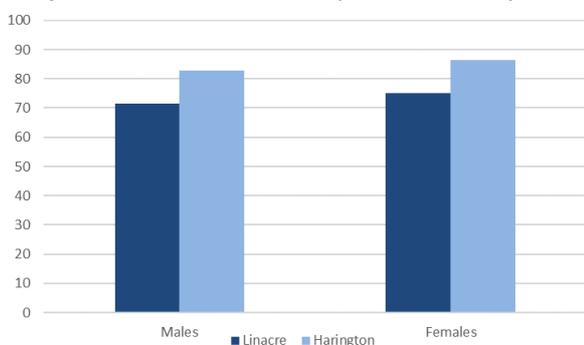
- 11 are located in Central Sefton (one in the top 5%)
- 18 are located in South Sefton (eight in the top 5%, with one in the top 1%)

Of the 23 LSOAs in the least deprived 10% IDAOPi areas nationally:

- 17 are located in North Sefton (nine in the least 5%, with one in the bottom 1%)
- Six in Central Sefton (four in the least 5%)
- There are none located in South Sefton

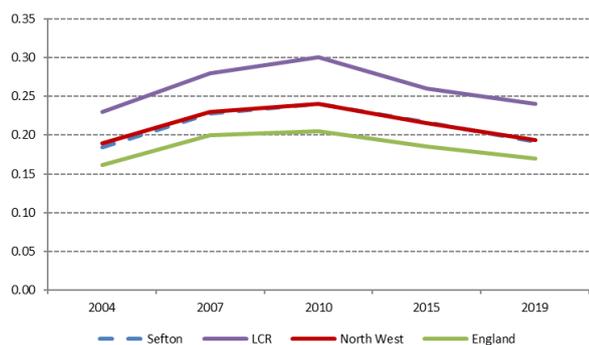
Period	Sefton	LCR	North West	England
2004	0.18	0.23	0.19	0.16
2007	0.23	0.28	0.23	0.20
2010	0.24	0.30	0.24	0.20
2015	0.22	0.26	0.22	0.19
2019	0.19	0.24	0.19	0.17

Figure / Table 8: Average Life expectancy at birth in Sefton's most and least deprived wards (years)

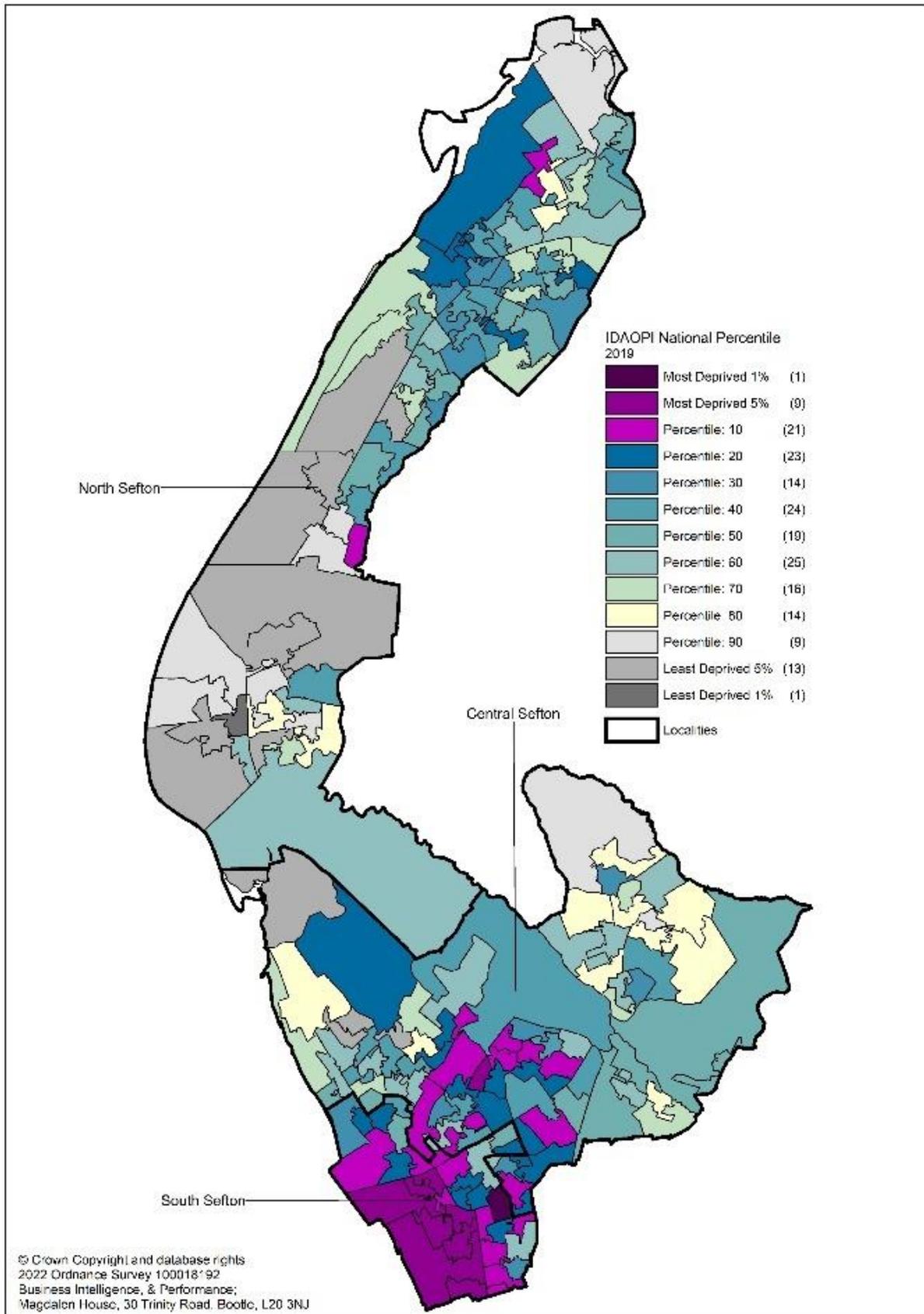


2016-2020	Linacre	Harington
Males	71.4	82.8
Females	75.2	86.5

Figure / Table 9: Income deprivation affecting older people index – IDAOPi (Score)



Map 1: Income deprivation affecting older people index – IDAOPI (National Percentile)



Domestic Abuse

“Domestic abuse as an incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence, in the majority of cases by a partner or ex-partner, but also by a family member or carer. It is very common. In the vast majority of cases it is experienced by women and is perpetrated by men.” *Women’s Aid*

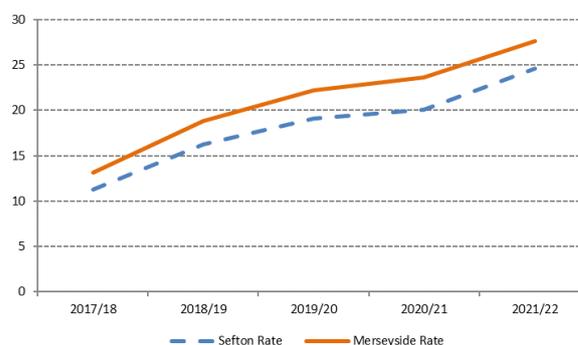
According to Women’s Aid domestic abuse may have an impact on the survivor, their family and children mentally, emotionally, physically, socially, and financially. Along with the wider costs to society (including police and health). With those living in poverty or of black and minority ethnicities being more vulnerable.

During 2021/22 there were 5,612* domestic abuse crimes in Sefton handled by Merseyside Police, equating to 25 crimes per 1,000 residents aged 16 and over (a crime is where a criminal offence has been committed). The rate of reported offences has increased year on year across the past five years (2017/18 to 2021/22), more than doubling with an overall increase of 119% (Figure / Table 10).

In comparison, the number of domestic abuse incidents (anything other than a criminal offence i.e. Anti-Social Behaviour), reported to Merseyside Police across Sefton has dropped year on year, with an overall reduction of 45% from 2017/18 to 2021/22. Again, Sefton is continually lower than the rates seen in Merseyside (Figure / Table 11).

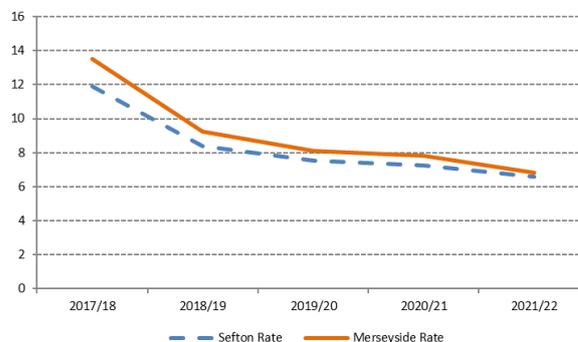
Sefton MARAC (Multi-Agency Risk Assessment Conference) - a key component of Sefton’s Domestic Abuse Strategy - discussed 674 cases between April 2021 and March 2022 a decrease of 9% when compared to the previous year. Although across the past five years (2017/18 to 2021/22) there has been an overall increase of 25% (Figure / Table 12).

Figure / Table 10: Merseyside Police domestic abuse crimes (crude rate per 1,000 population 16 and over)



Period	Sefton		Merseyside
	Count	Rate	Rate
2017/18	2559	11.3	13.1
2018/19	3705	16.3	18.9
2019/20	4356	19.1	22.2
2020/21	4569	20.1	23.6
2021/22	5612	24.7	27.7

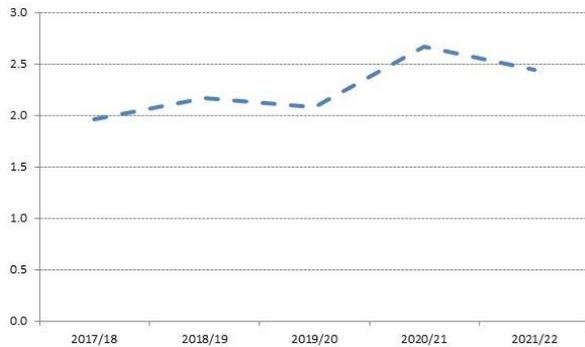
Figure / Table 11: Merseyside Police domestic abuse Incidents (crude rate per 1,000 population 16 and over)



Period	Sefton		Merseyside
	Count	Rate	Rate
2017/18	2705	11.9	13.5
2018/19	1910	8.4	9.3
2019/20	1718	7.5	8.1
2020/21	1647	7.2	7.8
2021/22	1500	6.6	6.8

*Please note crime / ASB data included in this report is taken from a live system (Merseyside Police Delphi database) and figures may change slightly from that received (last data download was received on 06th July 2022).

Figure / Table 12: Domestic Abuse Cases Discussed at MARAC (crude rate per 1,000 population 16 and over)



Period	Sefton	
	Count	Rate
2017/18	540	2.0
2018/19	596	2.2
2019/20	575	2.1
2020/21	737	2.7
2021/22	674	2.4

Homelessness

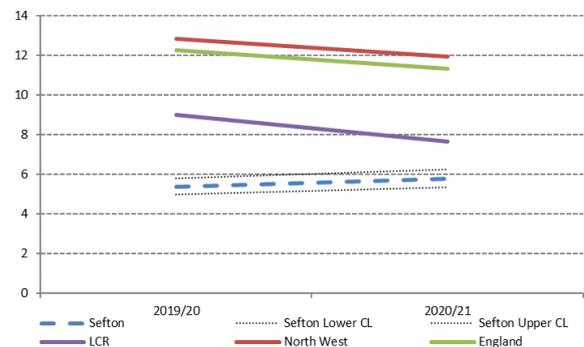
“Homelessness is associated with severe poverty and is a social determinant of health. It often results from a combination of events such as relationship breakdown, debt, adverse experiences in childhood and through ill health.

Homelessness is associated with poor health, education and social outcomes, particularly for children.” *Office of Health Improvement & Disparities*

The rate of households owed a duty under the Homeless Reduction Act in Sefton is significantly lower than that seen nationally as well as across the North West and LCR areas. Levels have seen a slight increase (8%) from 2019/20 to 2020/21, unlike the reductions seen in the three comparator areas (Figure / Table 13).

The number of households in temporary accommodation in the Borough have also increased across the past two years (96%), but again Sefton, is significantly below the LCR, North West and England rates (Figure / Table 14).

Figure / Table 13: Homelessness – households owed a duty under the Homeless Reduction Act (crude rate per 1,000)

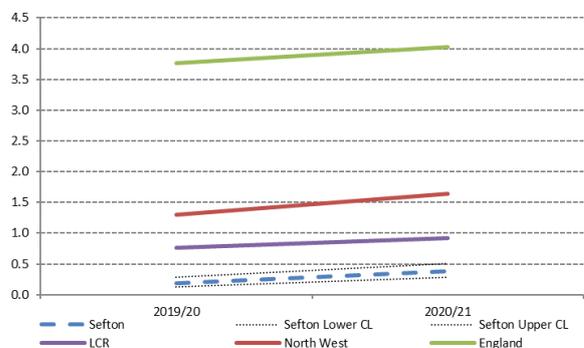


Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2019/20	654	5.4	5.0	5.8	9.0	12.8	12.3
2020/21	705	5.8	5.4	6.2	7.7	11.9	11.3
		Better than England	Similar to England		Worse than England		

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

- Better – England’s rate is above Sefton’s Upper CL
- Similar – England’s rate is within Sefton’s CL limits
- Worse – England’s rate is below Sefton’s Lower CL

Figure / Table 14: Homelessness - households in temporary accommodation (crude rate per 1,000)



Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2019/20	24	0.2	0.1	0.3	0.8	1.3	3.8
2020/21	47	0.4	0.3	0.5	0.9	1.6	4.0
		Better than England	Similar to England		Worse than England		

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

- Better – England’s rate is above Sefton’s Upper CL
- Similar – England’s rate is within Sefton’s CL limits
- Worse – England’s rate is below Sefton’s Lower CL

Hospital Admissions

“Falls are the largest cause of emergency hospital admissions for older people, and significantly impact on long term outcomes, e.g. being a major precipitant of people moving from their own home to long-term nursing or residential care.”

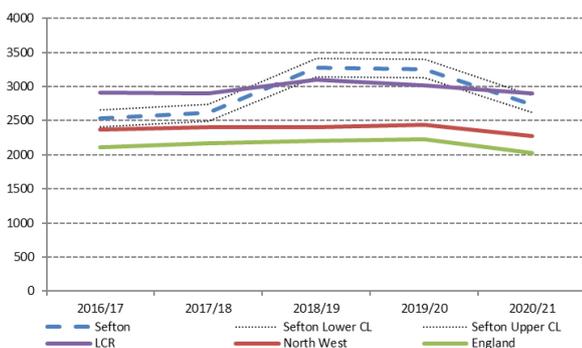
Office for Health Improvement & Disparities

Sefton has significantly higher rates of emergency hospital admissions (EHA) relating to falls in residents aged 65 and over than the regional and national rates, even following adjustment for age differences in these populations. There has been an overall increase of 16% across the past five years (2016/17 to 2020/21) in the Borough, though rates have fluctuated during this time (Figure / Table 15). In assessing this trend it is important to note that hospital admissions for non-covid conditions tended to be lower than average during 2020 and 2021.

“Hip fracture is a debilitating condition – only one in three sufferers return to their former levels of independence and one in three ends up leaving their own home and moving to long-term care. Hip fractures are almost as common and costly as strokes and the incidence is rising. In the UK, about 75,000 hip fractures occur annually at an estimated health and social cost of about £2 billion a year.” *Office for Health Improvement & Disparities*

In contrast to the rate of falls in Sefton, the rate of hip fractures in those aged 65 and over is similar in the Borough to those of LCR, the North West and England, with an approximately stable trend from 2016/17 to 2020/21 (Figure / Table 16).

Figure / Table 15: Emergency hospital admissions due to falls in people aged 65 and over (directly standardised rate per 100,000 population aged 65 and over)



Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	1658	2529.1	2407.9	2654.7	2915.5	2372.9	2113.8
2017/18	1751	2615.3	2493.4	2741.6	2901.4	2398.5	2170.4
2018/19	2215	3273.0	3137.0	3413.2	3101.8	2404.2	2198.8
2019/20	2270	3258.5	3124.9	3396.3	3016.7	2437.4	2221.8
2020/21	1915	2739.0	2616.8	2865.4	2894.4	2272.5	2023.0
	Better than England		Similar to England		Worse than England		

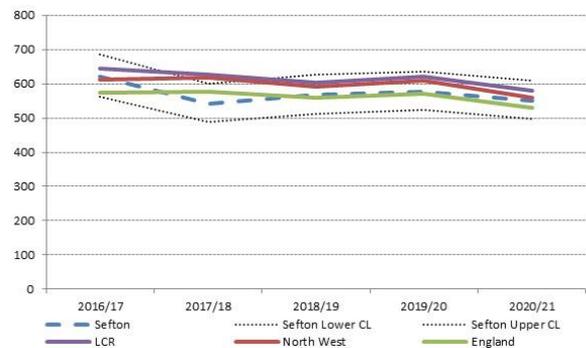
Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

Better – England’s rate is above Sefton’s Upper CL

Similar – England’s rate is within Sefton’s CL limits

Worse – England’s rate is below Sefton’s Lower CL

Figure / Table 16: Hip fractures in people age 65 and over (directly standardised rate per 100,000 population aged 65 and over)



Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	406	620.9	561.6	684.8	643.6	612.4	575.0
2017/18	367	541.8	487.4	600.6	627.1	617.2	577.8
2018/19	390	568.7	513.3	628.5	603.5	590.9	558.5
2019/20	410	577.5	522.4	636.7	620.0	610.4	571.6
2020/21	390	550.9	497.3	608.6	580.5	559.2	528.7
	Better than England		Similar to England		Worse than England		

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

Better – England’s rate is above Sefton’s Upper CL

Similar – England’s rate is within Sefton’s CL limits

Worse – England’s rate is below Sefton’s Lower CL

Learning Disabilities

“Compared to the general population people with a learning disability are much more likely to have a significant health problem, including epilepsy, health issues linked to nutrition and weight, psychiatric illness, visual or hearing impairment. Women with learning disability die on average 27 years before the national average life expectancy.” *All Our Health - GOV.UK (www.gov.uk)*

“We know that for people with a learning disability, appropriate accommodation has a strong impact on their safety and overall quality of life, while also reducing social exclusion.” *Nuffield Trust*

The Transforming Care Programme created by NHS England, Local Government Association and Association of Directors of Adult Social Service aims to significantly increase housing options for those with Learning Disabilities. £100 Million was made available by NHS England to support this.

Sefton levels of adults receiving ASC services who have a learning disability who live in stable and appropriate accommodation are continuously higher than those seen nationally, there were slight reductions seen between 2016/17 to 2019/20. Rates have risen in 2020/21, where there were 761 adults in stable and appropriate accommodation 89% of all those with learning disabilities (Figure / Table 17). 2021/22 has seen a slight reduction in levels compared to the previous year in Sefton LCR and the North West.

Mencap state that those with learning disabilities in paid employment will largely benefit from increased income, improved wellbeing, and greater confidence.

Levels of working age adults receiving ASC services in paid employment with a learning disability in Sefton are much lower than those seen regionally and nationally across the last five years (2016/17 to 2020/21), with rates showing minimal change in the Borough across this time period (Figure / Table 18). The 2021/22 figures show a slight rise in the Borough levels compared to a fall seen regionally.

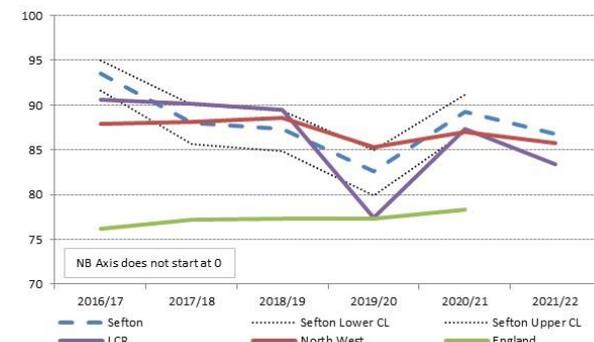
In 2020/21, Sefton was ranked 126 (out of 152 upper tier LAs in England) for levels of working age adults in paid employment with a learning disability (where the LA ranked 1st has the better levels).

POPPI and PANSI data predicts that the rate of people aged 18 and over with a learning disability in Sefton will remain similar across the next 20 year (approximately 2%), with the Borough having similar rates to that of LCR, the North West and England (Figure / Table 19).

Similarly, the predicted rates of adult residents with a spectrum disorder in the Borough will

remain static and similar to the three comparator areas (Figure / Table 20).

Figure / Table 17: ASC users – Adults with a learning disability who live in stable and appropriate accommodation (% of ASC users with learning difficulties)

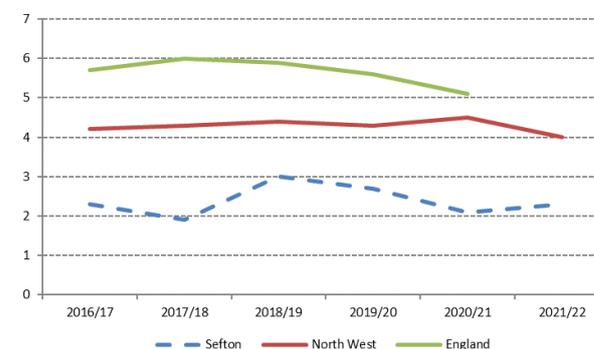


Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	762	93.5	91.6	95.0	90.6	88.0	76.2
2017/18	733	88.0	85.6	90.0	90.1	88.2	77.2
2018/19	736	87.3	84.9	89.4	89.5	88.6	77.4
2019/20	729	82.6	79.9	84.9	77.4	85.3	77.3
2020/21	761	89.2	87.0	91.1	87.3	87.0	78.3
2021/22	711	86.8			83.4	85.8	
		Better than England	Similar to England		Worse than England		

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England’s the confidence limits are used:

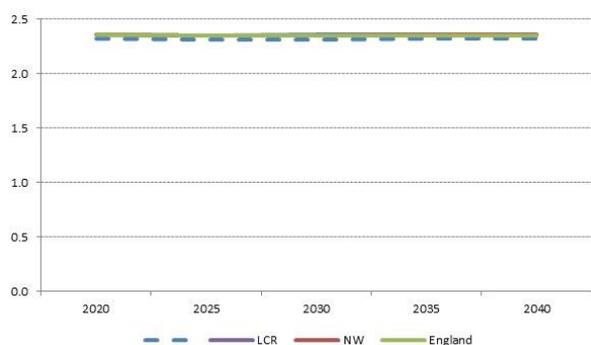
- Better – England’s rate is below Sefton’s Lower CL
- Similar – England’s rate is within Sefton’s CL limits
- Worse – England’s rate is above Sefton’s Upper CL

Figure / Table 18: ASC Users – Working age people with a learning disability in paid employment (% of ASC users aged 18-64 with learning difficulties)



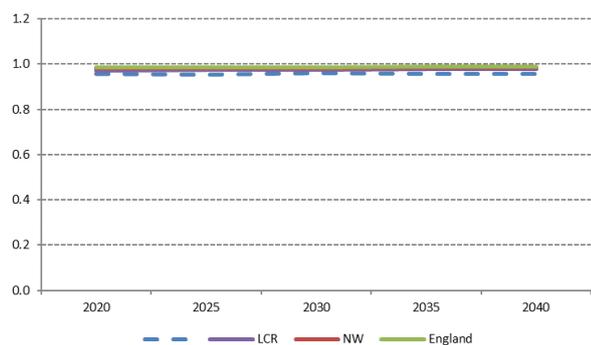
Period	Sefton	North West	England
2016/17	2.3	4.2	5.7
2017/18	1.9	4.3	6.0
2018/19	3.0	4.4	5.9
2019/20	2.7	4.3	5.6
2020/21	2.1	4.5	5.1
2021/22	2.3	4.0	

Figure / Table 19: Adults predicted to have a learning disability (% of population aged 18 and over)



Period	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2020	5161	2.3	2.4	2.4	2.4
2025	5212	2.3	2.4	2.3	2.4
2030	5313	2.3	2.4	2.3	2.3
2035	5431	2.3	2.4	2.4	2.4
2040	5497	2.3	2.4	2.4	2.4

Figure / Table 20: Adults predicted to have a spectrum disorder (% of population aged 18 and over)



Period	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2020	2113	0.96	0.97	0.98	0.98
2025	2119	0.95	0.97	0.98	0.99
2030	2133	0.96	0.98	0.98	0.99
2035	2164	0.96	0.98	0.98	0.99
2040	2190	0.96	0.98	0.98	0.99

Mental Health

The PHE (now Office for Health Improvement and Disparities) Strategy 2020-2025 identifies better mental health as being one of the key priorities: [PHE Strategy 2020 to 2025 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/441111/phe-strategy-2020-to-2025.pdf)

Adults (aged 18 to 69) in contact with secondary mental health services who live in stable and appropriate accommodation aims to “improve outcomes for adults with mental health problems in stable and appropriate accommodation by improving their safety and reducing their risk of social exclusion. Maintaining stable and appropriate accommodation and providing social care in this environment promotes personalisation and quality of life, prevents the need to readmit people into hospital or more costly residential care and ensures a positive experience of social care.” *Office for Health Improvement & Disparities*

Sefton has generally performed better than the North West and England for the rate of adults in contact with secondary mental health services who live in stable and appropriate accommodation (Figure / Table 21).

“People with a long-standing mental health problem are twice as likely to smoke, with the highest rates among people with psychosis or bipolar disorder. Compared with the general patient population, patients with severe mental illnesses (SMI) are at substantially higher risk of obesity, asthma, diabetes, chronic obstructive pulmonary disease (COPD) and cardiovascular disease. People with SMI make more use of secondary urgent and emergency care, and experience higher premature mortality rates.” *Office for Health Improvement & Disparities*

Excess mortality rates in adults aged 18 to 74 with SMI are increasing in Sefton with year-on-year rises seen between 2016-18 to 2018-20, Sefton moved non-significantly above both the North West and England (Figure / Table 22). The risk of dying before the age of 75 in those with an SMI in Sefton and England is around four times higher than in the general population.

Similarly, the rate of premature mortality in adults aged 18 to 74 with SMI has increased yearly in Sefton (along with the North West and England). However, the Borough is significantly worse than England (Figure / Table 23).

According to the NHS “Depression is a low mood that can last a long time or keep returning, affecting your everyday life”.

Depression can affect people at any age and is one of the most common mental health illnesses. Depression affects people in different ways including disturbed sleep, aches and pains, difficulty concentrating, and can lead to suicidal thoughts and / or self-harm.

According to the quality outcomes frame work the prevalence of depression as recorded on GP disease registers in those aged 18 and over residing in the Borough is significantly worse than that seen nationally (yet is lower than the city region and regional rates). The Borough is in the 2nd highest quintile out of the 152 upper tier authorities in England. Like the three comparator areas, Sefton has seen year on year rises in depression, with an overall increase of 51% in the Borough from 2016/17 to 2020/21 (Figure / Table 24).

The prevalence of serious mental illnesses in Sefton (including schizophrenia and bipolar affective disorder), is significantly higher than in England, with the Borough falling within the highest quintile out of the 152 English upper tier authorities. Rates have remained constant across the past five years in Sefton (Figure / Table 25).

The numbers and therefore rates of adults aged 16 to 64 claiming Personal Independence Payment (PIP) for psychiatric disorders in Sefton has risen considerably across the past five years (an overall increase of 73%), though some of this increase can be attributed to the changes in the benefits system (similar increases can be seen across the city region, regionally and nationally). The Borough continually has higher levels of PIP claimants for psychiatric disorders than the North West and England (Figure / Table 26).

“Meaningful work is important in helping people recover from a mental illness, but there are many barriers to employment for people with mental health problems, including stigma and prejudice.”
Nuffield trust

Levels of adults aged 18 to 64 in contact with secondary mental health services in paid employment have improved substantially across the past four years with the Borough now having higher rates than those seen regionally and

nationally, though rates are still low in at 10% (Figure / Table 27). Sefton is ranked 48 out of the 152 upper tier local authorities in England (where the LA ranked 1st has the better levels).

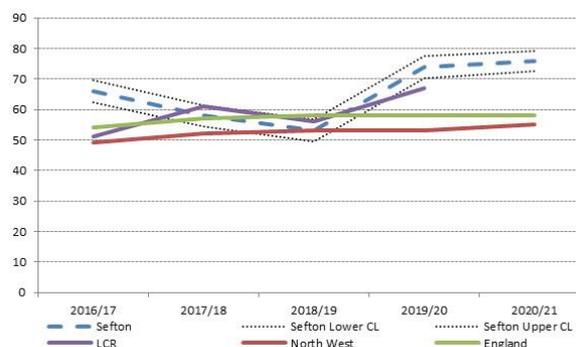
“Suicide is a significant cause of death in young BAME rates of mental ill-health. Suicide is a major issue for society and a leading cause of years of life lost. Suicide is often the end point of a complex history of risk factors and distressing events, but there are many ways in which services, communities, individuals and society as a whole can help to prevent suicides.” *Office for Health Improvement & Disparities*

Suicide rates in Sefton have fallen year on year across the last five time periods, with 2018-20 rates being lower than those seen regionally and nationally (Figure / Table 28).

“Self-harm results in approximately 110,000 inpatient admissions to hospital each year in England, 99% are emergency admissions. Self-harm is an expression of personal distress and there are varied reasons for a person to harm themselves irrespective of the purpose of the act. There is a significant and persistent risk of future suicide following an episode of self-harm.” *Office for Health Improvement & Disparities*

Self-harm rates in Sefton are significantly worse than England, with rates showing an overall increase (11%) across the past five years – 2016/17 to 2020/21 (Figure / Table 29). There is also a four-fold higher rate in Sefton and England in young females vs males [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk)

Figure / Table 21: Adults in contact with secondary mental health services who live in stable and appropriate accommodation (% of adults receiving secondary mental health services aged 18 to 69)



Period	Sefton			LCR	NW	England
	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	66.0	62.4	69.4	51.0	49.0	54.0
2017/18	58.0	54.5	61.4	61.0	52.0	57.0
2018/19	53.0	49.4	56.6	56.0	53.0	58.0
2019/20	74.0	70.2	77.4	67.0	53.0	58.0
2020/21	76.0	72.7	79.0		55.0	58.0
	Better than England		Similar to England		Worse than England	

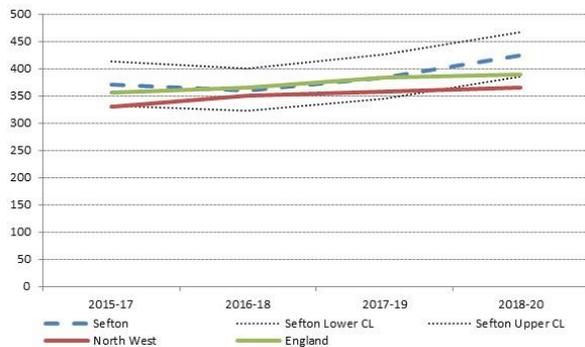
Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England's the confidence limits are used:

Better – England's rate is below Sefton's Lower CL

Similar – England's rate is within Sefton's CL limits

Worse – England's rate is above Sefton's Upper CL

Figure / Table 22: Excess mortality in adults under 75 with severe mental illnesses – SMI (% of excess risk)



Period	Sefton			NW	England
	Rate	Lower CL	Upper CL	Rate	Rate
2015-17	370.6	331.8	412.9	330.4	355.4
2016-18	359.8	322.6	400.4	350.3	365.2
2017-19	383.7	344.8	425.9	358.1	383.1
2018-20	425.0	385.2	468.0	364.6	389.9
	Better than England		Similar to England		Worse than England

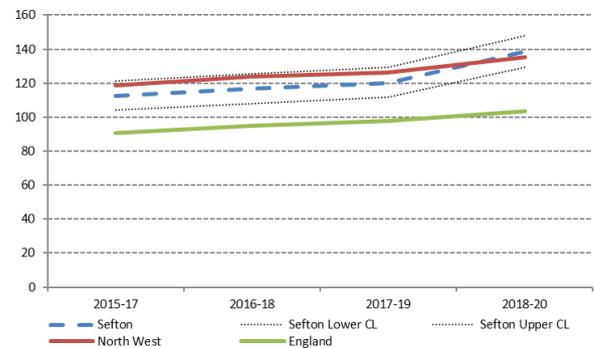
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Similar – England's rate is within Sefton's CL limits

Worse – England's rate is below Sefton's Lower CL

Figure / Table 23: Premature mortality in adults under 75 with severe mental illnesses – SMI (directly standardised rate per 100,000 aged 18 to 74)



Period	Sefton				NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate
2015-17	690	112.7	104.4	121.5	118.7	90.5
2016-18	725	116.6	108.2	125.4	124.1	94.8
2017-19	755	120.2	111.7	129.2	126.1	97.8
2018-20	880	138.5	129.4	148.1	135.3	103.6
	Better than England		Similar to England		Worse than England	

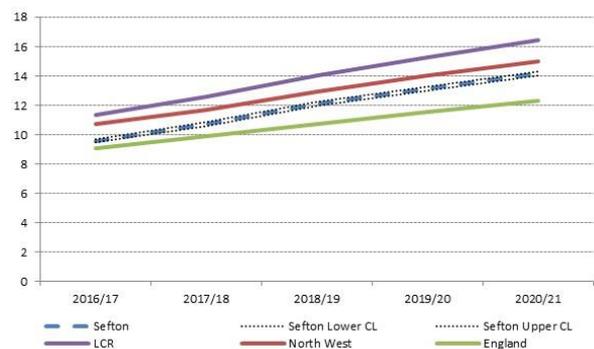
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Similar – England's rate is within Sefton's CL limits

Worse – England's rate is below Sefton's Lower CL

Figure / Table 24: Recorded prevalence of depression (% of population aged 18 and over)

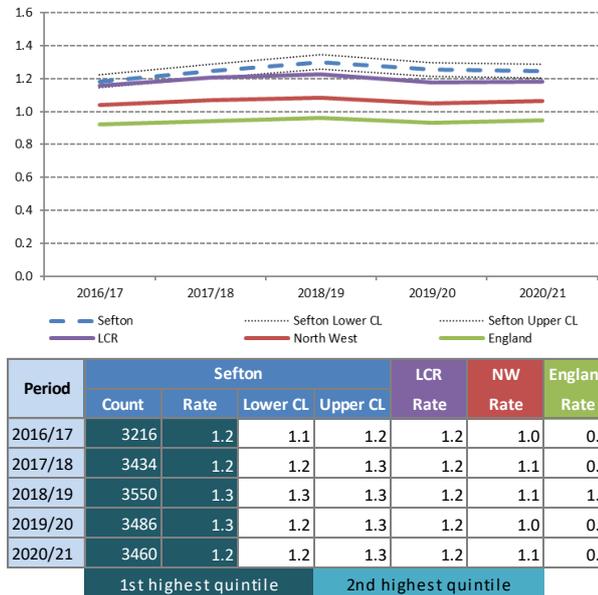


Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	21228	9.6	9.5	9.7	11.3	10.7	9.1
2017/18	24115	10.7	10.6	10.8	12.6	11.7	9.9
2018/19	26917	12.1	12.0	12.2	14.1	12.9	10.7
2019/20	29744	13.1	13.0	13.3	15.3	14.0	11.6
2020/21	32145	14.2	14.0	14.3	16.4	15.0	12.3
	1st highest quintile		2nd highest quintile				

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between.

The Office for Health Improvement Disparities breaks down the County and Upper LAs into quintiles with the 1st highest quintile being the LAs with the highest rates and 5th quintile being the LAs with the lowest rates.

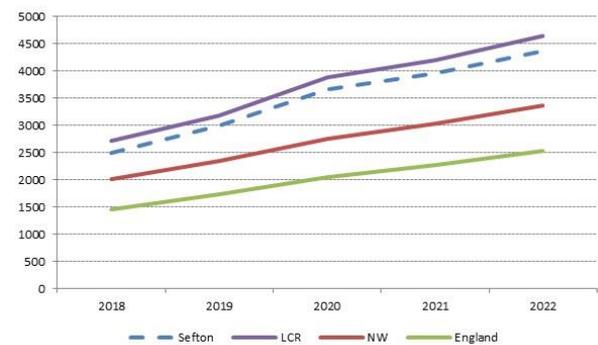
Figure / Table 25: People with schizophrenia, bipolar affective disorder and other psychoses recorded on GP register (% of population aged 18 and over)



Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between.

The Office for Health Improvement Disparities breaks down the County and Upper LAs into quintiles with the 1st highest quintile being the LAs with the highest rates and 5th quintile being the LAs with the lowest rates.

Figure / Table 26: Personal independence payment claimants for psychiatric disorders (crude rate per 1,000 aged 16 to 64)



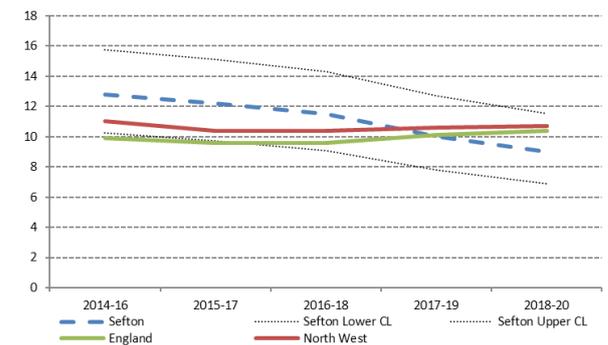
April	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2018	4083	2497.9	2718.4	2018.8	1454.1
2019	4874	2989.8	3184.5	2348.4	1729.2
2020	5927	3654.4	3874.4	2759.8	2051.9
2021	6429	3963.9	4200.4	3029.0	2262.8
2022	7062	4354.2	4633.9	3363.4	2526.8

Figure / Table 27: Working age people in contact with mental health services in paid employment (% of those aged 18-64 in contact with mental health services)



Period	Sefton	NW	England
2017/18	5.0	5.0	7.0
2018/19	6.0	7.0	8.0
2019/20	7.0	5.0	9.0
2020/21	10.0	7.0	9.0

Figure / Table 28: Suicide rate (directly standardised rate per 100,000)



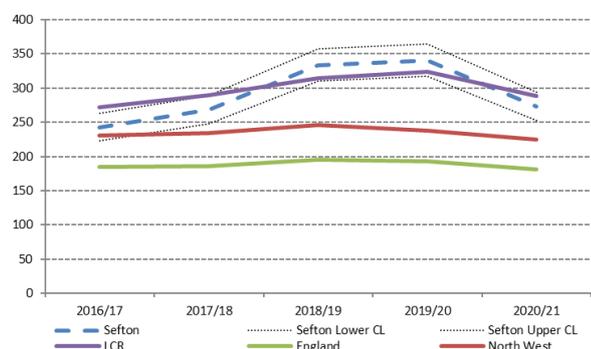
Period	Sefton				NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate
2014-16	92	12.8	10.3	15.7	11.0	9.9
2015-17	87	12.2	9.7	15.1	10.4	9.6
2016-18	82	11.5	9.1	14.3	10.4	9.6
2017-19	71	10.0	7.8	12.7	10.6	10.1
2018-20	64	9.0	6.9	11.5	10.7	10.4

Better than England
Similar to England
Worse than England

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- Similar – England's rate is within Sefton's CL limits
- Worse – England's rate is below Sefton's Lower CL

Figure / Table 29: Emergency hospital admissions for intentional self-harm (directly standardised rate per 100,000)



Period	Sefton				LCR Rate	NW Rate	England Rate
	Count	Rate	Lower CL	Upper CL			
2016/17	616	242.6	223.6	262.7	272.1	231.0	185.3
2017/18	671	268.4	248.3	289.7	290.0	234.5	185.5
2018/19	825	333.3	310.8	357.0	314.5	246.1	196.0
2019/20	855	340.6	318.0	364.4	323.8	237.6	192.6
2020/21	685	273.0	252.8	294.3	288.7	225.0	181.2

Better than England
 Similar to England
 Worse than England

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England's the confidence limits are used:

- Better – England's rate is above Sefton's Upper CL
- Similar – England's rate is within Sefton's CL limits
- Worse – England's rate is below Sefton's Lower CL

Visual and Hearing Loss

Visual

"Prevention of sight loss will help people maintain independent lives as far as possible and reduce needs for social care support, which would be necessary if sight was lost permanently. Research by the Royal National Institute for Blind People (RNIB) suggests that 50% of cases of blindness and serious sight loss could be prevented if detected and treated in time. Whilst this is mainly due to uncorrected refractive error and untreated cataract, the research implies that the take-up of sight tests is lower than would be expected. This is particularly the case within areas of social deprivation. Low take-up of sight tests can lead to later detection of preventable conditions and increased sight loss due to late intervention." *Office for Health Improvement & Disparities*

Sefton's age-related macular degeneration (in residents aged 65 and over) have shown year on year reductions with the Borough moving below

the region and national rates for the first time in the last five years (Figure / Table 30).

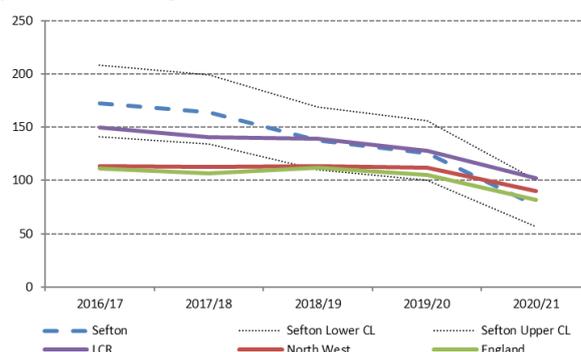
Glaucoma rates in those aged 40 and over in the Borough have fluctuated across the past five years, though there has been an overall reduction of 43% (numbers are relatively low in the Borough) except for 2020/21 Sefton has had a slightly higher rate than those seen nationally (Figure / Table 31).

The number and rates of sight loss certificates issued in Sefton have shown year on year reductions from 2017/18 to 2020/21, with the Borough moving in line with the three comparator areas (Figure / Table 32).

Levels of serious visual impairment are predicted to increase over the next 20 years with an overall growth of 37% in Sefton. The Borough rates will remain considerably higher than LCR, the North West and England (Figure / Table 33).

Note that the crude rate does not take account of the larger than average proportion of Sefton's over 65s who are in the older part of that population eg 85+. As Age Related Macular Degeneration (AMD) is age-related it might be expected that Sefton would have a higher rather in comparison to other areas and where this is not the case it might be a function of under-detection.

Figure / Table 30: Preventable sight loss – Age related macular degeneration – AMD (crude rate per 100,000 aged 65 and over)



Period	Sefton				LCR Rate	NW Rate	England Rate
	Count	Rate	Lower CL	Upper CL			
2016/17	108	172.5	141.5	208.3	150.2	113.3	111.3
2017/18	104	164.3	134.2	199.1	140.4	113.0	106.7
2018/19	88	137.4	110.2	169.3	139.4	113.3	112.3
2019/20	82	125.9	100.1	156.3	127.8	111.7	105.4
2020/21	50	76.4	56.7	100.7	102.2	90.3	82.0

Better than England
 Similar to England
 Worse than England

Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are

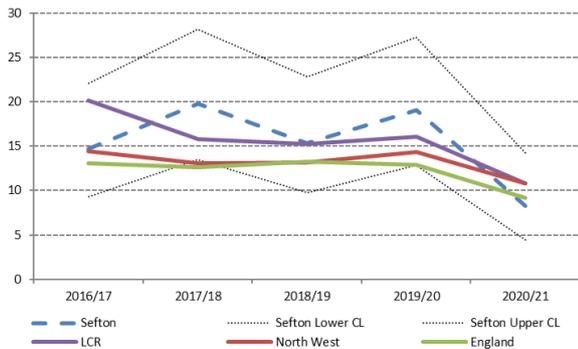
significantly better, similar to or worse than England's the confidence limits are used:

Better – England's rate is above Sefton's Upper CL

Similar – England's rate is within Sefton's CL limits

Worse – England's rate is below Sefton's Lower CL

Figure / Table 31: Preventable sight loss – Glaucoma (crude rate per 100,000 aged 40 and over)



Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	23	14.7	9.3	22.1	20.2	14.4	13.1
2017/18	31	19.8	13.5	28.1	15.8	13.1	12.6
2018/19	24	15.3	9.8	22.8	15.2	13.2	13.2
2019/20	30	19.1	12.9	27.3	16.0	14.3	12.9
2020/21	13	8.3	4.4	14.2	10.8	10.8	9.2
	Better than England		Similar to England		Worse than England		

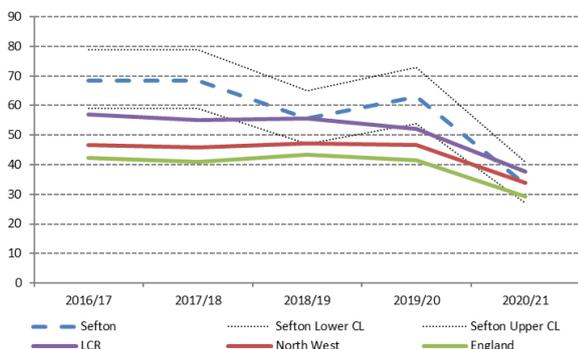
Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England's the confidence limits are used:

Better – England's rate is above Sefton's Upper CL

Similar – England's rate is within Sefton's CL limits

Worse – England's rate is below Sefton's Lower CL

Figure / Table 32: Preventable sight loss - Sight loss certifications (crude rate per 100,000)



Period	Sefton				LCR	NW	England
	Count	Rate	Lower CL	Upper CL	Rate	Rate	Rate
2016/17	188	68.4	59.0	78.9	57.0	46.7	42.4
2017/18	188	68.5	59.0	79.0	55.1	45.8	41.1
2018/19	153	55.6	47.1	65.1	55.6	47.3	43.4
2019/20	174	62.9	53.9	73.0	52.0	46.7	41.4
2020/21	92	33.3	26.9	40.9	37.7	33.8	29.2
	Better than England		Similar to England		Worse than England		

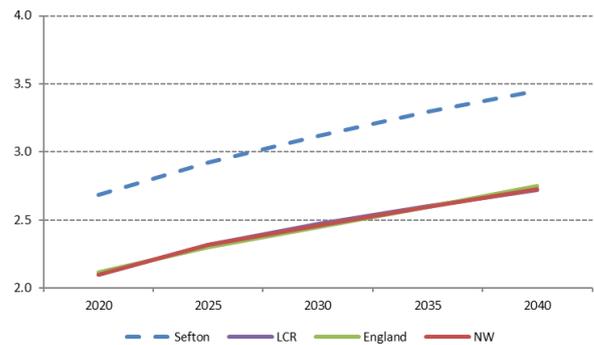
Confidence Limits (CL) are the range of values that 95% of the results are expected to fall between. To determine if Sefton rates are significantly better, similar to or worse than England's the confidence limits are used:

Better – England's rate is above Sefton's Upper CL

Similar – England's rate is within Sefton's CL limits

Worse – England's rate is below Sefton's Lower CL

Figure / Table 33: People Predicted to have a Serious Visual Impairment (% of adults aged 18 and over)



Period	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2020	5975	2.7	2.1	2.1	2.1
2025	6583	2.9	2.3	2.3	2.3
2030	7162	3.1	2.5	2.5	2.4
2035	7716	3.3	2.6	2.6	2.6
2040	8168	3.4	2.7	2.7	2.8

Hearing

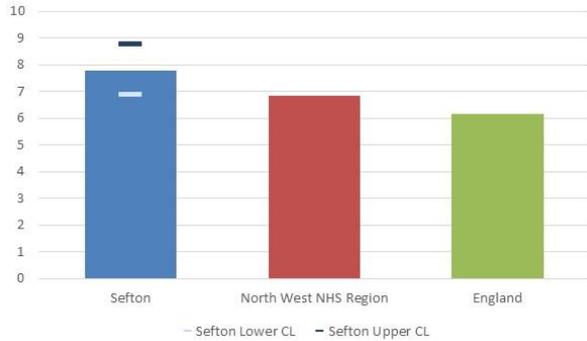
“Hearing loss can impair the exchange of information, thus significantly impacting everyday life, causing loneliness, isolation, dependence, and frustration, as well as communication disorders.”

National Library of Medicine

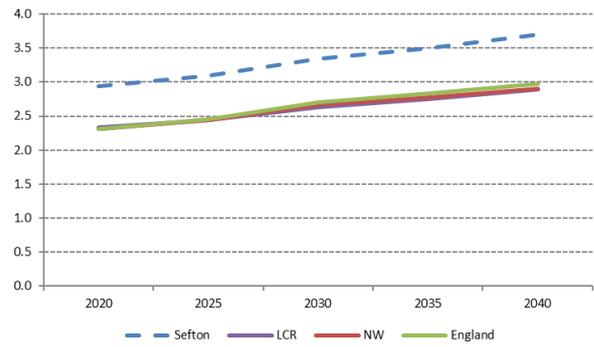
In 2020, 8% of Sefton's adult population (aged 16 and over) reported deafness or hearing loss, significantly higher than the North West NHS region – 7% and England – 6% (Figure / Table 34).

Data sourced from the Projecting Older People Population Information (POPPI) and Projecting Adult Needs and Service Information (PANSI) systems show levels of some hearing loss in Sefton residents aged 18 and over is set to rise throughout the next 20 years, with the Borough being higher than the three comparator areas (Figure / Table 35). Similarly, severe hearing loss is also set to increase and be above the LCR, North West and England percentages (Figure / Table 36).

Figure / Table 34: Reported deafness or hearing loss (% of population aged 16 and over)

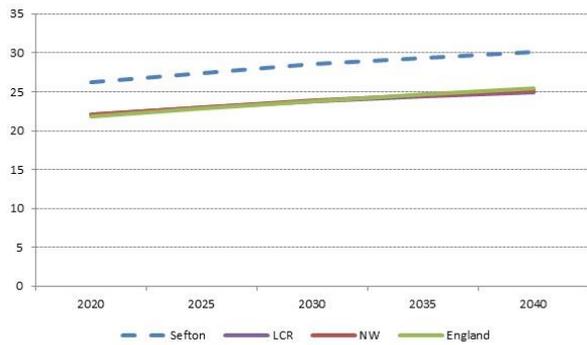


Period	Sefton	NW NHS Region	England
2020	7.8	6.8	6.2



Period	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2020	6541	2.9	2.3	2.3	2.3
2025	6967	3.1	2.4	2.4	2.5
2030	7677	3.3	2.6	2.7	2.7
2035	8179	3.5	2.7	2.8	2.8
2040	8758	3.7	2.9	2.9	3.0

Figure / Table 35: Predicted some hearing loss (% of population aged 18 and over)



Period	Sefton		LCR	NW	England
	Count	Rate	Rate	Rate	Rate
2020	58487	26.3	22.1	22.1	21.8
2025	61815	27.4	22.9	23.0	22.8
2030	65438	28.5	23.7	23.8	23.8
2035	68733	29.3	24.4	24.5	24.7
2040	71222	30.1	24.9	25.1	25.4

Figure / Table 36: Predicted severe hearing loss (% of population aged 18 and over)

Conclusions

Although the current quantitative data requires supplementing with qualitative data from our communities (potentially through universal and targeted consultation activity) a few key areas for focus over the short to medium term are clear. This includes a need to understand and act on issues including:

- Levels of adults receiving long term support be admissions to residential and nursing homes is considerably higher in the Borough than seen nationally.
- Though the IDAOPI scores has decreased in Sefton there are still areas in the Borough which are in the top most affected nationally.
- Increasing rates of domestic abuse offences reported/dealt with by Merseyside Police across the Borough.
- Working age adults with learning difficulties are less likely to be in paid employment in Sefton than regionally and nationally.
- Mental health registrations and premature mortalities are higher in Sefton than England, with PIP claimants due to psychiatric disorders showing year on year increases in the Borough.
- Falls leading to hospital admissions in those aged 65 and over have increased considerably in the Borough with rates being significantly higher than seen regionally and nationally. There is joint work underway and a Falls Strategy will be produced as part of Place delivery.

Supporting Information & Context

Drugs & Alcohol Assessment

Health Assessment

Wider Determinants Assessment

JSNA Webpage

[https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/joint-strategic-needs-assessment-\(jsna\).aspx](https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/joint-strategic-needs-assessment-(jsna).aspx)

Population Projections

<https://www.sefton.gov.uk/media/1436091/sefton-population-projections-v3.pdf>

Review of Poverty in Sefton

https://www.sefton.gov.uk/media/1405220/Welfare_Reform_and_Anti-Poverty_v3.pdf

Sefton Local Plan

<https://www.sefton.gov.uk/localplan>

Ward profiles on Sefton's website

<https://www.sefton.gov.uk/your-council/plans-policies/business-intelligence,-insight,-performance/Borough-ward-profiles.aspx>

Glossary of Terms / Acronyms

AMD – Age related macular degeneration

ASC – Adult Social Care

ASCOF – Adult Social Care Outcomes Framework

CL – Confidence Limits

CVS – Council of Voluntary Services

EHA – Emergency Hospital Admissions

IDAOPi – Income Deprivation Affecting Older People

IoD – Indices of Deprivation

LA – Local Authority

LCR – Liverpool City Region

LSOA – Lower Super Output Areas

LTRN – Long Term Residential and Nursing

MARAC – Multi Agency Risk Assessment Conference

NHS – National Health Service

NW – North West

PANSI – Projecting Adult Needs and Service Information

PIP – Personal Independence Payment

POPPI – Projecting Older People Population Information

RNIB – Royal National Institute for Blind People

SCLS – Sefton Community Learning Service

SMI – Severe Mental Illnesses

ST-Max – Short Term Care to Maximise Independence

Sources

Introduction

Long-term funding of adult social care

[Long-term funding of adult social care - Levelling Up, Housing and Communities Committee \(parliament.uk\)](#)

Health and social care integration: joining up care for people, places and populations – policy paper

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Adult Social Care

Permanent admissions to residential and nursing care homes

[Public health profiles - OHID \(phe.org.uk\)](#)

Long-term support needs for younger adults (aged 18-64) met by admissions to residential and nursing care homes ASCOF: 2A1

2016/17 to 2020/21 – [Measures from the Adult Social Care Outcomes Framework, England - 2020-21 - NHS Digital](#)

2021/22 – Sefton MBC Joshua Cross

Long-term support needs for older adults (aged 65+) met by admissions to residential and nursing care homes ASCOF: 2A2

2016/17 to 2020/21 – [Measures from the Adult Social Care Outcomes Framework, England - 2020-21 - NHS Digital](#)

2021/22 – Sefton MBC Joshua Cross

ST-Max

[3. Short term care - NHS Digital](#)

Completed episodes of ST-Max

2017/18 Table 24 – [Adult Social Care Activity and Finance Report, England - 2017-18 \[PAS\] - NHS Digital](#)

2018/19 Table 24 – [Adult Social Care Activity and Finance Report, England - 2018-19 \[PAS\] - NHS Digital](#)

2019/20 Table 24 – [Adult Social Care Activity and Finance Report, England - 2019-20 - NHS Digital](#)

2020/21 Table 24 – [Adult Social Care Activity and Finance Report, England - 2020-21 - NHS Digital](#)

2021/22 – Sefton MBC Joshua Cross

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Unison Survey – [Staffing levels in care ‘dangerously low’ with dying residents denied dignified end, says UNISON survey | News, Press release | News | UNISON National](#)

Care worker pay – [Pay rates \(skillsforcare.org.uk\)](#)

ODI – [Staffing shortages in the UK’s care sector: a sign of things to come | ODI: Think change](#)

Total commissioned hours (weekly) for individuals (18+) who are receiving domiciliary care

Sefton MBC

Number of clients accessing domiciliary care

Sefton MBC

Social isolation

2015/16 to 2019/20 – [Wider Determinants of Health - Data - OHID \(phe.org.uk\)](#)

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ASC users who have as much social contact as they would like

[Crisis Care Profile - OHID \(phe.org.uk\)](#)

Deprivation

Lonesome towns – Brunel University London

[Lonesome towns: Older people in deprived areas more likely to feel lonely | Brunel University London](#)

Office of Health Improvement & Disparities - Deprivation

[Local Health - OHID \(phe.org.uk\)](#)

Life Expectancy

Male – [Local Health - Office for Health Improvement and Disparities - Indicators: maps, data and charts](#)

Female – [Local Health - Office for Health Improvement and Disparities - Indicators: maps, data and charts](#)

Income deprivation affecting older people (IDAOP)

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2010 – [English indices of deprivation 2010 - GOV.UK \(www.gov.uk\)](#)

2007 – [\[ARCHIVED CONTENT\] Indices of Deprivation 2007 - Communities and neighbourhoods - Communities and Local Government \(nationalarchives.gov.uk\)](#)

2004 – [\[ARCHIVED CONTENT\] Indices of deprivation 2004 - Communities and neighbourhoods - Communities and Local Government \(nationalarchives.gov.uk\)](#)

Domestic Abuse

Women's Aid

[What is domestic abuse? - Women's Aid \(womensaid.org.uk\)](#)

Domestic abuse crime & incidents

Merseyside Police – Karen Carmichael

MARAC

Sefton MBC – Louise O'Rourke

Hearing Loss

The impact of hearing loss on the quality of life of elderly adults

[The impact of hearing loss on the quality of life of elderly adults - PMC \(nih.gov\)](#)

Deafness or hearing loss

[National General Practice Profiles - Data - OHID \(phe.org.uk\)](#)

Predicted some / severe hearing loss

[Projecting Adult Needs and Service Information System \(pansi.org.uk\)](#)

Homelessness

Homelessness

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Homelessness – households owed a duty under the Homeless Reduction Act

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Homelessness - households in temporary accommodation

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Hospital Admissions

Emergency hospital admissions due to falls

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Emergency hospital admissions due to falls in people aged 65 and over

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Hip fractures in people age 65 and over

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Learning Disabilities

Adults with learning disabilities who live in their own home or with their family

[Adults with learning disabilities who live in their own home or with their family | The Nuffield Trust](#)

Adults with learning disabilities who live in stable and appropriate accommodation

2016/17 to 2020/21 – [Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

2021/22 – Sefton MBC Joshua Cross

People with a learning disability have a right to work

[Employment - what we think | Mencap](#)

Working age people with a learning disability in paid employment – ASCOF 1E

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Adults predicted to have a learning disability

[Projecting Older People Population Information System \(poppi.org.uk\)](#)

Adults predicted to have a spectrum disorder

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Mental Health

Adults in contact with secondary mental health services who live in stable and appropriate accommodation

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Adults in contact with secondary mental health services who live in stable and appropriate accommodation

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[Mortality Profile - Data - OHID \(phe.org.uk\)](#)

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[Mortality Profile - Data - OHID \(phe.org.uk\)](#)

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[What are the signs and symptoms of depression? \(rethink.org\)](#)

Recorded Prevalence of Depression

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Recorded Prevalence of Mental Health

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PIP claimants for Psychiatric Disorders

[Stat-Xplore - Log in \(dwp.gov.uk\)](#)

Employment and mental illness

[Supporting people in employment | The Nuffield Trust](#)

Adults in contact with secondary mental health services in paid employment

[Measures from the Adult Social Care Outcomes Framework, England - 2020-21 - NHS Digital](#)

Suicide

[Mortality Profile - Data - OHID \(phe.org.uk\)](#)

Suicide rates

[Mortality Profile - Data - OHID \(phe.org.uk\)](#)

Intentional Self-Harm

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Emergency Hospital Admissions for Intentional Self-Harm

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Visual and Hearing Loss

Sight Loss

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Preventable Sight Lose - Age Related Macular Degeneration

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Preventable Sight Lose – Glaucoma

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Preventable Sight Lose - Sight Loss Certifications

[Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)

Predicted Serious Visual Impairment

[Projecting Adult Needs and Service Information System \(pansi.org.uk\)](#)

[Projecting Older People Population Information System \(poppi.org.uk\)](#)

The impact of hearing loss on the quality of life of elderly adults

[The impact of hearing loss on the quality of life of elderly adults - PMC \(nih.gov\)](#)

Deafness or hearing loss

[National General Practice Profiles - Data - OHID \(phe.org.uk\)](#)

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