

# Current and predicted chronic conditions and predicted need for help

Southampton City Council





# Southampton population forecasts



Southampton populations estimates are **261,729** residents, of which **133,357** (51.0%) were **male** and **128,372** (49.0%) were **female** (2021)

Population Aged 0-15 – **45,335** (17.3%) Aged 16-64 – **178,225** (68.1%) Aged 65 and over – **38,169** (14.6%)

#### Percentage of population by gender for Southampton

2021

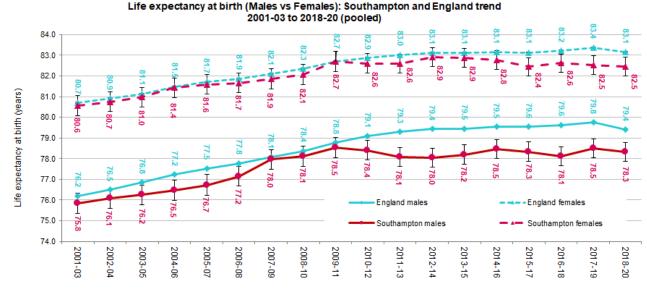
#### Population for Southampton 2021

● Female ● Male					
Aged 90+		1.3%	0.6%		
Aged 85-89		1.7%	1.1%		
Aged 80-84		2.3%	1.8%		
Aged 75-79		3.0%	2.6%		
Aged 70-74		3.9%	3.4%		
Aged 65-69		3.9%	3.5%		
Aged 60-64		4.7%	4.4%		
Aged 55-59		5.6%	5.4%		
Aged 50-54		5.5%	5.4%		
Aged 45-49		5.4%	5.5%		
Aged 40-44		5.6%	5.8%		
Aged 35-39		6.4%	7.1%		
Aged 30-34		7.3%	8.2%		
Aged 25-29		8.0%		9.0%	
Aged 20-24	11.	3%	11.8%		
Aged 15-19		7.9%	7.7%		
Aged 10-14		5.3%	5.4%		
Aged 05-09		5.6%	5.7%		
Aged 00-04		5.4%	5.4%		

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Age group	Female	Male	Total
Aged 00-04	6,952	7,180	14,132
Aged 05-09	7,201	7,614	14,815
Aged 10-14	6,768	7,201	13,969
Aged 15-19	10,100	10,304	20,404
Aged 20-24	14,514	15,717	30,231
Aged 25-29	10,329	11,990	22,319
Aged 30-34	9,382	10,952	20,334
Aged 35-39	8,206	9,404	17,610
Aged 40-44	7,190	7,759	14,949
Aged 45-49	6,872	7,362	14,234
Aged 50-54	7,041	7,186	14,227
Aged 55-59	7,127	7,218	14,345
Aged 60-64	6,063	5,928	11,991
Aged 65-69	4,988	4,728	9,716
Aged 70-74	4,952	4,598	9,550
Aged 75-79	3,910	3,512	7,422
Aged 80-84	2,935	2,422	5,357
Aged 85-89	2,172	1,442	3,614
Aged 90+	1,670	840	2,510
Total	128,372	133,357	261,729

Data source: Hampshire County Council, Small Area Population Forecasts(SAPF) 2020 base

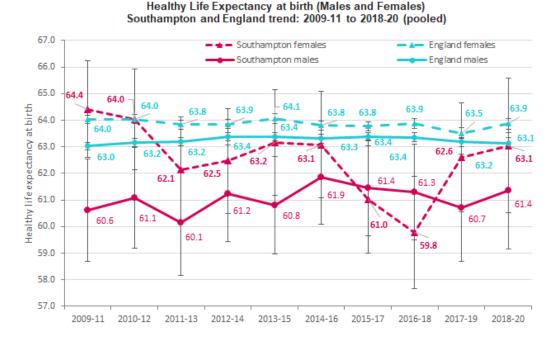




Source: Office for Health Improvement and Disparities (OHID)

- Increases in life expectancy over the last few decades mean that people are living longer
- However, lower levels of healthy life expectancy suggest, people live longer with long term conditions and an extended period of poor health / disability

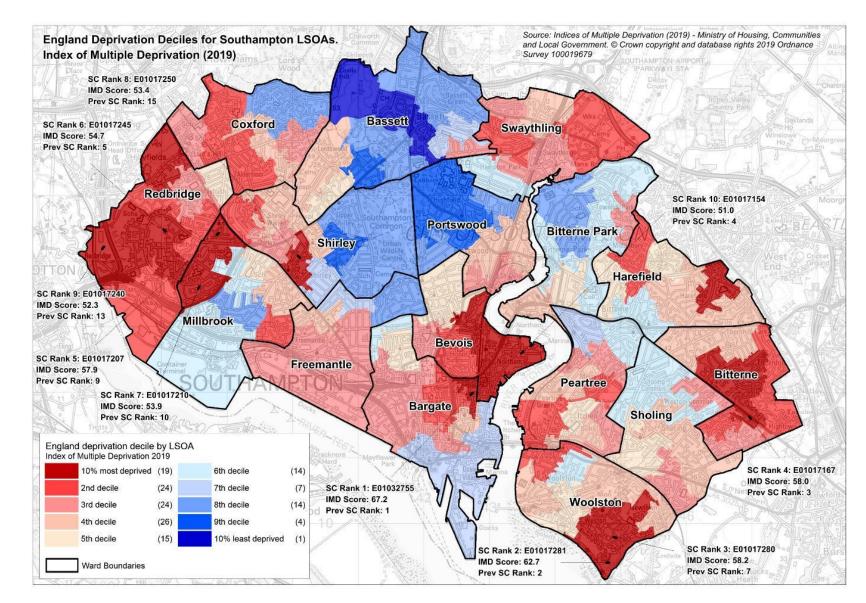
Increases in **life expectancy** appear to have now **plateaued**, although the **number of years** spent in **poor health** continues to be **substantial** 





#### Deprivation





- Southampton is ranked 55th (previously 54th) most deprived out of 317 local authorities
- Around 12% of Southampton's population live in neighbourhoods within the 10% most deprived nationally (18% for the under 18 population)
- Southampton is ranked 3rd worst in the country for crime deprivation and is in the worst 20% of local authorities for 5 other deprivation domains

#### Long term conditions in Southampton

patients

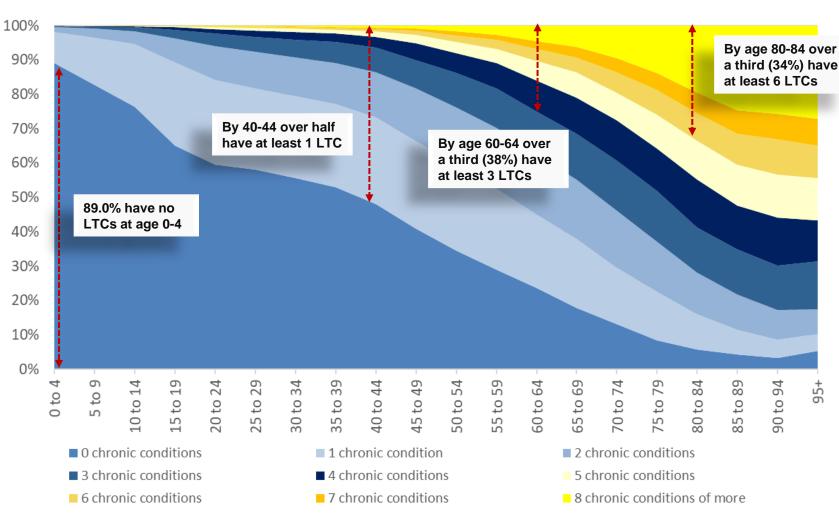
of registered

2



Approximately **10,300** residents have moderate or severe frailty and are at higher risk of adverse outcomes such as falls, disability, admission to hospital, or the need for longterm care. (CHIE)

In Southampton, in 2021, by the age of 40 to 44 years, over half of Southampton registered patients have at least one chronic health condition; by the age 60 to 64, over a third have at least three chronic conditions and by the age 80 to 84, almost a third have at least 6 chronic conditions.



Number of chronic conditions by age band

Southampton patients February 2021

Source: Sollis Clarity Health Analytics (ACG version 11.1/11.2) February 2021

#### southampton dataobservatory .

Proportion of patients with 5 or more chronic conditions by age

### Long term conditions – Multi-morbidity

Proportion of patients with **3 or more chronic conditions** by age group and IMD national quintile: Southampton - February 2021



- Multi-morbidity increases with age, BUT it also appears to be occurring earlier in life.....particularly for those in the **most deprived** areas
- Comparing 20% most deprived and 20% least deprived areas for prevalence of **3+ and 5+** chronic conditions:
  - differences appear at an early age and gradually narrow (relatively) as the population ages
  - differences begin to appear in the early 20's and peak between the mid-30's and mid-40's, where prevalence is more than double for those with **3+ conditions** and more than triples for **5+ conditions**

Causes	Southampton	Portsmouth	Hampshire	Isle of Wight	England
Low back pain	1	1	1	1	1
Diabetes	2	2	2	2	2
Depressive disorders	3	3	3	3	3
Headache disorders	4	4	4	4	4
Neck pain	5	5	6	6	5
Gynecological diseases	6	6	9	13	9
Other musculoskeletal	7	7	8	10	7
Anxiety disorders	8	8	11	12	10
Age-related hearing loss	9	9	5	5	6
Asthma	10	11	12	8	14

Top 10 causes attributed to Years Lived with Disability (YLDs)

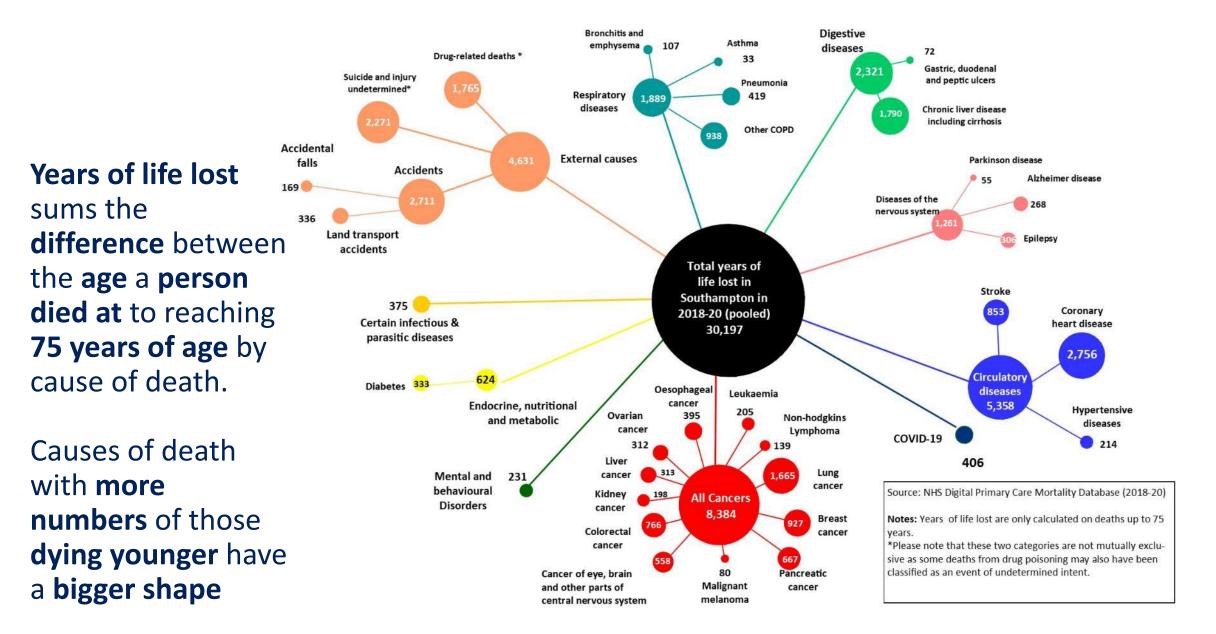
Low back pain and diabetes are the two leading causes of disability across the Southampton and neighbouring areas

<b>Risks Factors</b>	Southampton	Portsmouth	Hampshire	Isle of Wight	England
High body-mass index	1	1	1	2	1
High fasting plasma glucose	2	2	2	1	2
Smoking	3	3	3	3	3
Alcohol use	4	4	4	4	4
Drug use	5	5	5	5	5
Occupational ergonomic	6	6	8	8	7
High blood pressure	7	7	6	6	6
Low bone mineral density	8	8	7	7	8
High processed meat	9	9	9	9	9
Particulate matter	10	10	10	12	10

Top 10 Risk Factors attributed to Years Lived with Disability (YLDs)

**High body mass index** and **high fasting plasma glucose** are the **two leading risk** factors causing disability across the Southampton and neighbouring areas









The cause of death behind what people die from also varies by deprivation quintile **Mortality rates** by **cause** comparing the **most deprived** quintile with the **least...** 



**All Causes** 

All age mortality **1.4x higher** Premature (u75) mortality **2.0x higher** 



Cancer

All age mortality **1.4x higher** Premature (u75) mortality **1.5x higher** 



#### **Circulatory Disease**

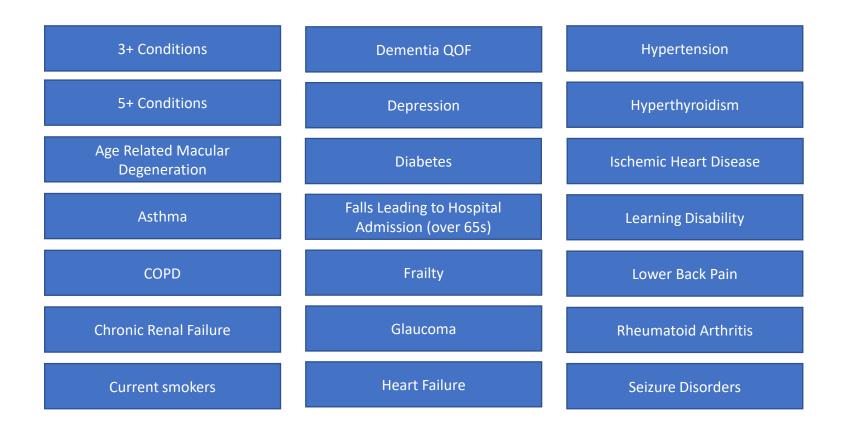
All age mortality **1.3x higher** Premature (u75) mortality **1.9x higher** 







# **Current Long Term Conditions**





The following set of maps shows the **most common diseases/conditions** in the city by **neighbourhood (LSOA).** The **percentage** (or **prevalence**) of a **disease** in each LSOA (a neighbourhood of 1,500 to 2,000 people) has been calculated using **GP data**.

We have **ranked** the **prevalence highest** to **lowest** for each **neighbourhood** and **split** the city by prevalence into **fifths** or **quintiles**, colouring neighbourhoods by which **quintile** the **neighbourhood prevalence ranks** within.

The top 5 LSOA's for a disease/condition with the **highest prevalence** are 'called out' with labels showing the LSOA codes, rank and prevalence.

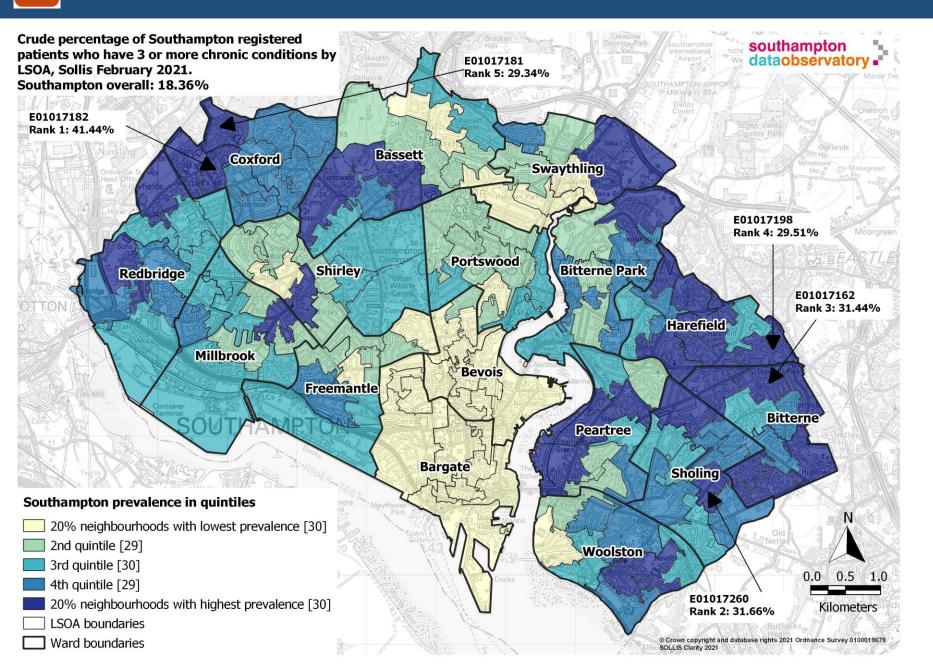
Sometimes we use **quintiles** when looking at **deprivation**, the **quintiles** used **here** are **NOT deprivation related**, but used to show where the **top 20%** and **bottom 20% neighbourhoods** are, that have **residents** with a particular **disease** or **condition**. The **GP data set** records if people have a **prescription** for a condition (**Rx**), been **diagnosed** for a condition (**ICD**) or **both (BTH)**.

Below is the **coding frame** for the **GP data set** used to create the maps:

- Persistent asthma and Depression use **BTH**
- Rheumatoid Arthritis, Chronic Renal Failure, Chronic Heart Failure, Hyperlipidaemia, Hypertension, Age Related Macular Degeneration, Glaucoma, Hyperthyroidism, Immunosuppression/ Transplant, Osteoporosis, Parkinsons Disease, Seizure Disorder and Diabetes uses ICD, BTH and Rx.
- Low Back Pain, COPD, Ischemic Heart Condition and Bipolar Disorder use **ICD**.
- Patient with yes/no flags for Smokers, Learning Disability and frailty are used for these categories

#### 3 or more chronic conditions

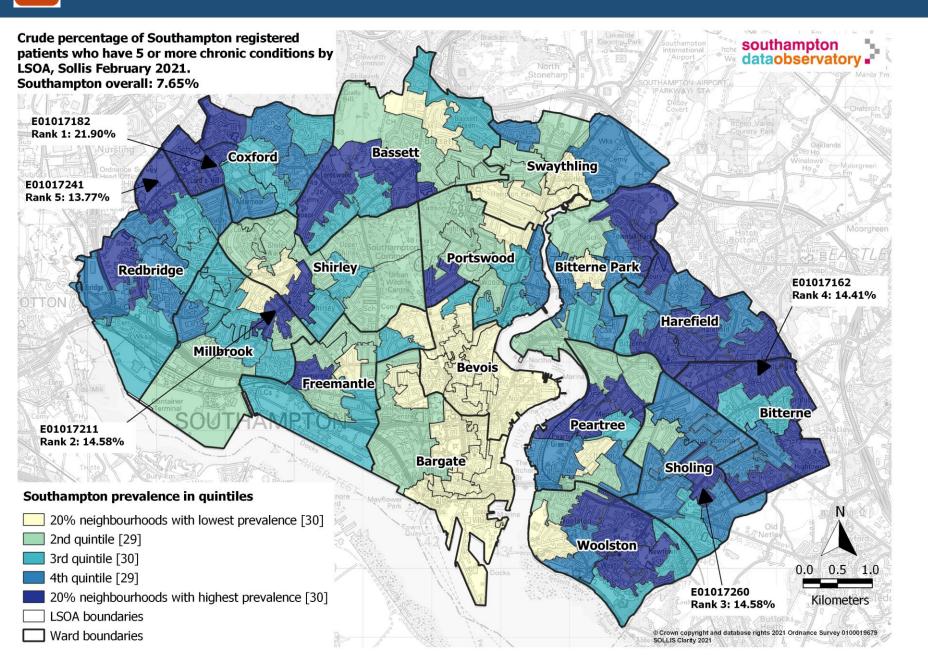




Southampton's overall crude percentage of registered patients who have 3 or more chronic conditions is 18.36%.

All **top 5 LSOA's** are the **more deprived area's** of the city. In the **top LSOA**, E01017182, **two-fifths** of patients have 3 or more chronic conditions.

#### 5 or more chronic conditions



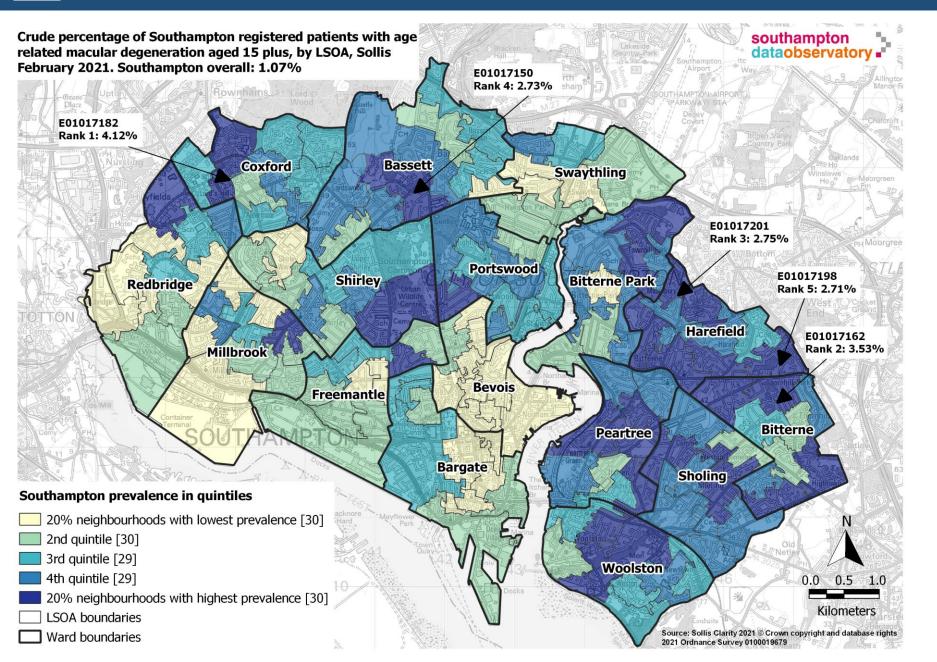
Southampton's **overall prevalence** of registered patients who have **5 or more chronic conditions** is **7.65%**.

All top 5 LSOA's are the more deprived area's of the city. In the top LSOA, E01017182, Just over a **fifth** of patients have **5 or more chronic conditions**.



#### Age-related macular degeneration



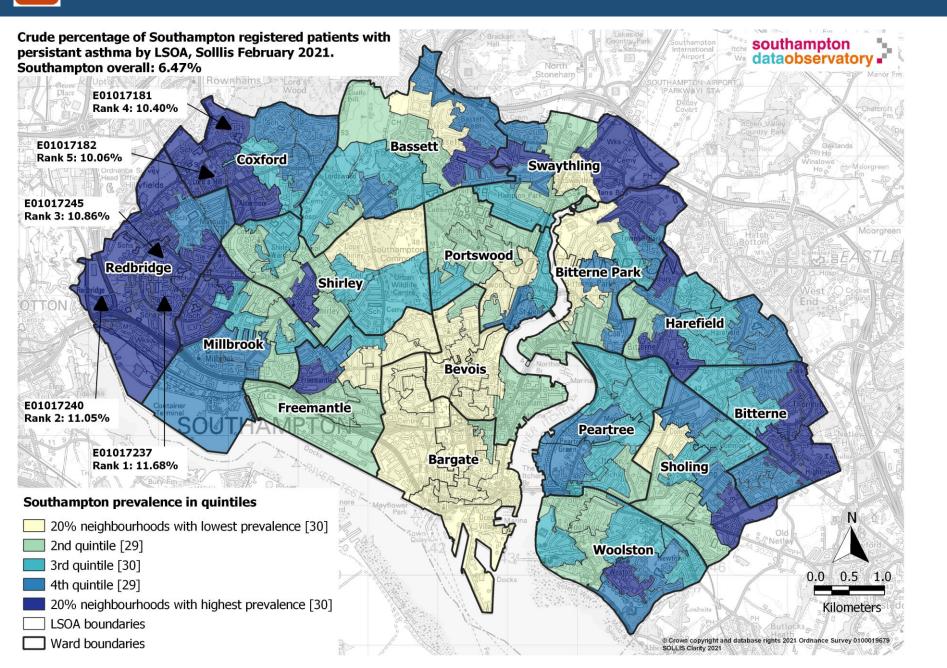


Three out of the top five LSOA's with a high prevalence of age related macular degeneration are within the East side of the city.

The **overall prevalence** of registered patients with age related macular degeneration in **Southampton** is **1.07%.** 





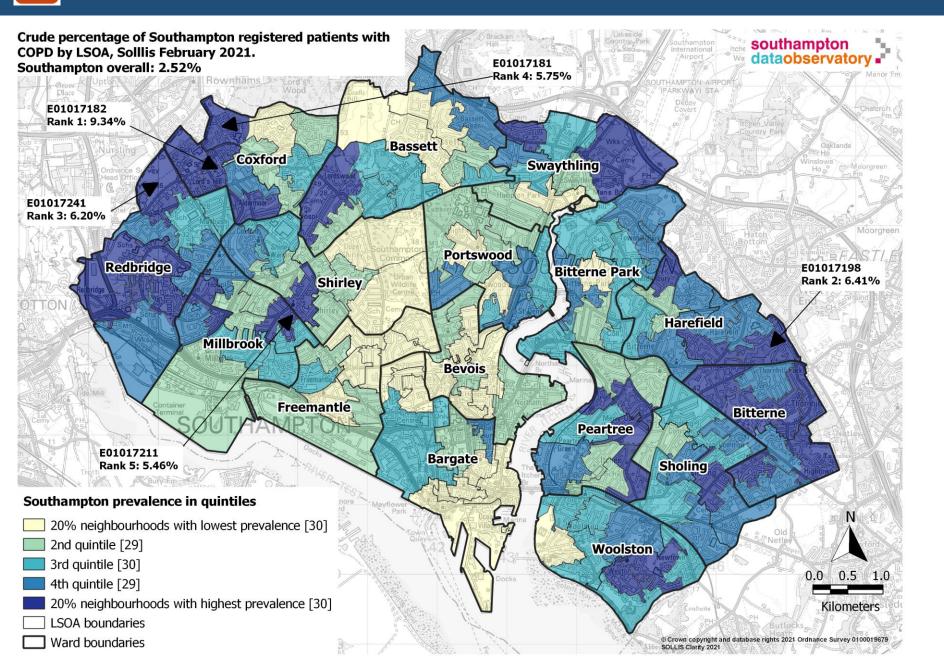


In February 2021, the Sollis Clarity data shows there were 14,553 people on GP asthma registers in Southampton giving a crude prevalence for **asthma** of **6.47%**.

The top 5 LSOA's with the highest prevalence are all on the West side of the city, with the top 3 LSOA's with the highest prevalence in the Redbridge ward.

#### **Chronic Obstructive Pulmonary Disease (COPD)**





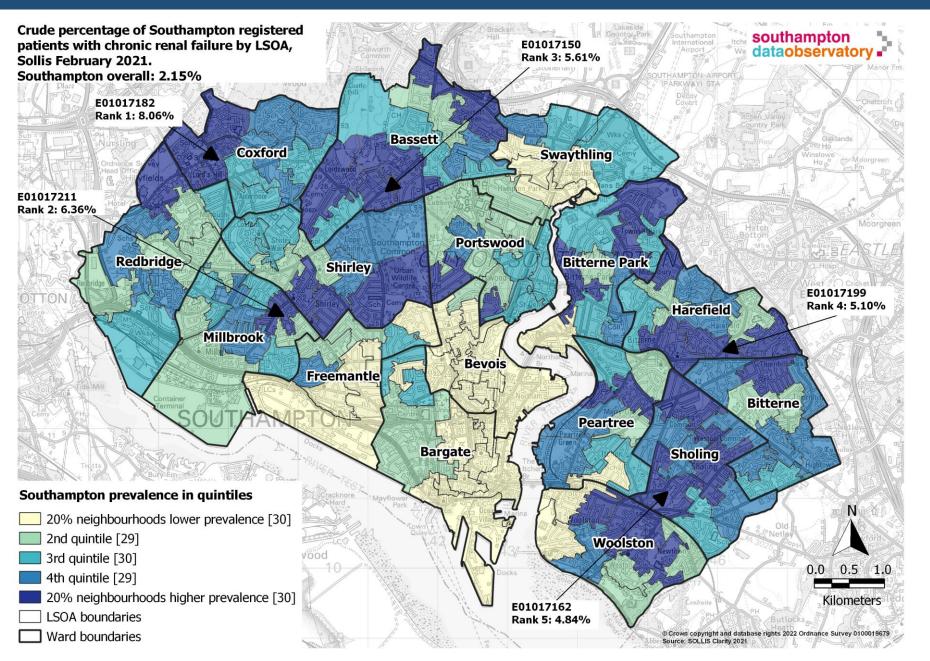
In February 2021, there were 5,666 registered patients recorded by Southampton GPs on COPD registers in Southampton. The **overall prevalence** of people with **COPD** in Southampton is **2.52%**.

There is a **higher prevalence** within the LSOA's that are **more deprived** on the edges of the city.



#### **Chronic Renal Failure**



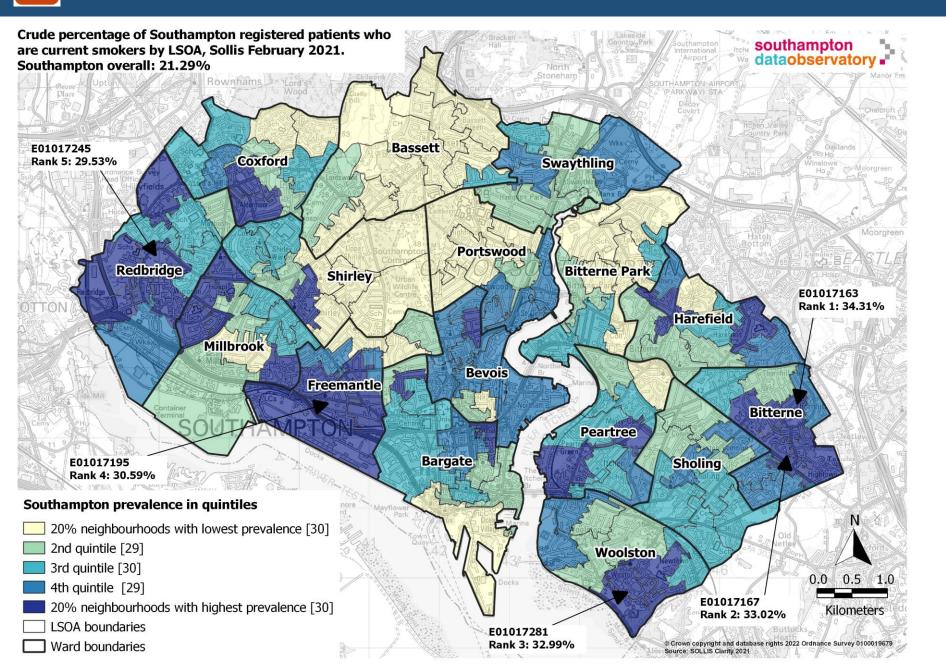


The overall prevalence of people in Southampton with chronic renal failure in February 2021 was 2.15%.

Patients with chronic renal failure is spread across the city. The LSOA with the **highest prevalence** is E01017182, situated in the **Coxford ward**.







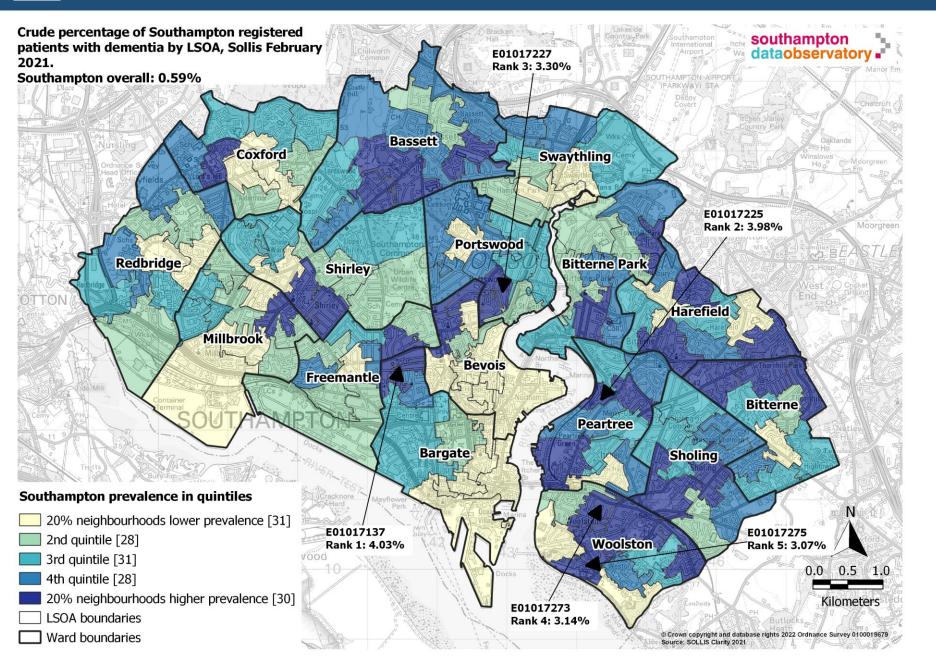
The overall prevalence of GP registered patients who said they currently smoke is 21.29%. Ex smokers is 18.95% and non-smokers is 59.76%.

The **top 3 LSOA's** with the **highest prevalence** are on the **East side** of the city. The **top LSOA**, E01017163, situated in the **Bitterne ward** has a crude percentage of **34.31%**.



#### **Dementia QOF**





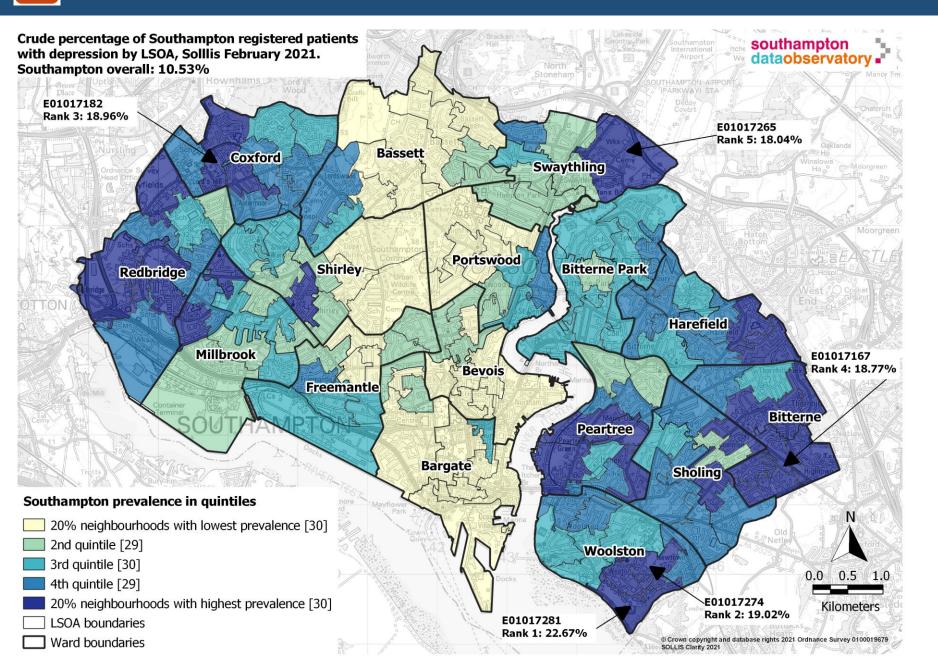
The overall prevalence of people in Southampton with dementia in February 2021 was 0.59%.

The LSOA with the **highest prevalence** is E0101737, situated in the **Bargate ward**.

The top 5 LSOA's with the highest prevalence are in the central and east side of the city.





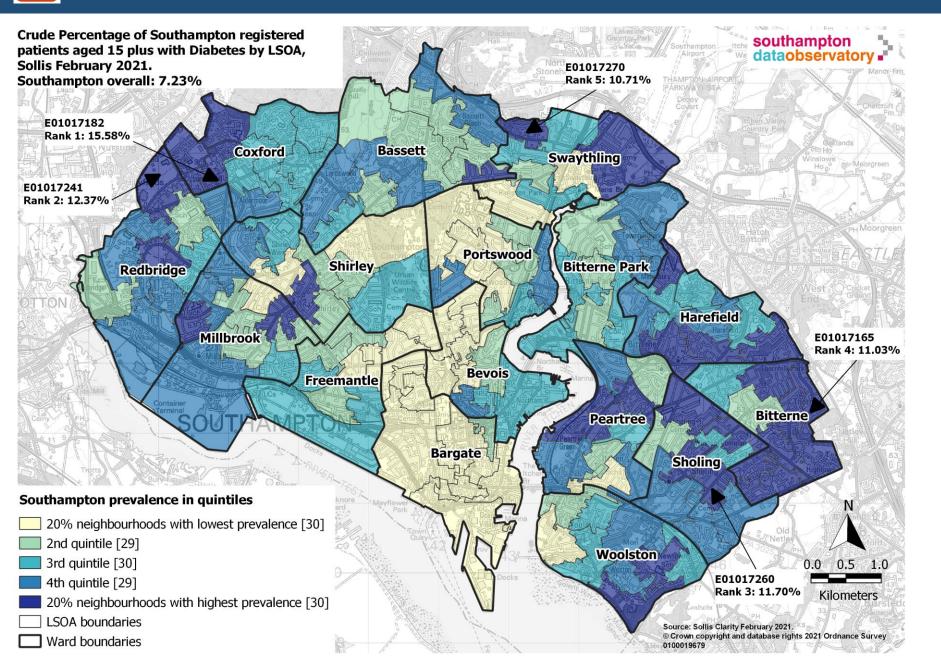


For **depression**, the Southampton overall prevalence is 10.53%.

3 of the top 5 LSOA's are in the **East side** of the city, 2 LSOA's situated in Woolston ward and 1 in Bitterne ward

LSOA F01017281 has the **highest prevalence** of 22.67% and is also the 3<sup>rd</sup> most deprived LSOA in Southampton.



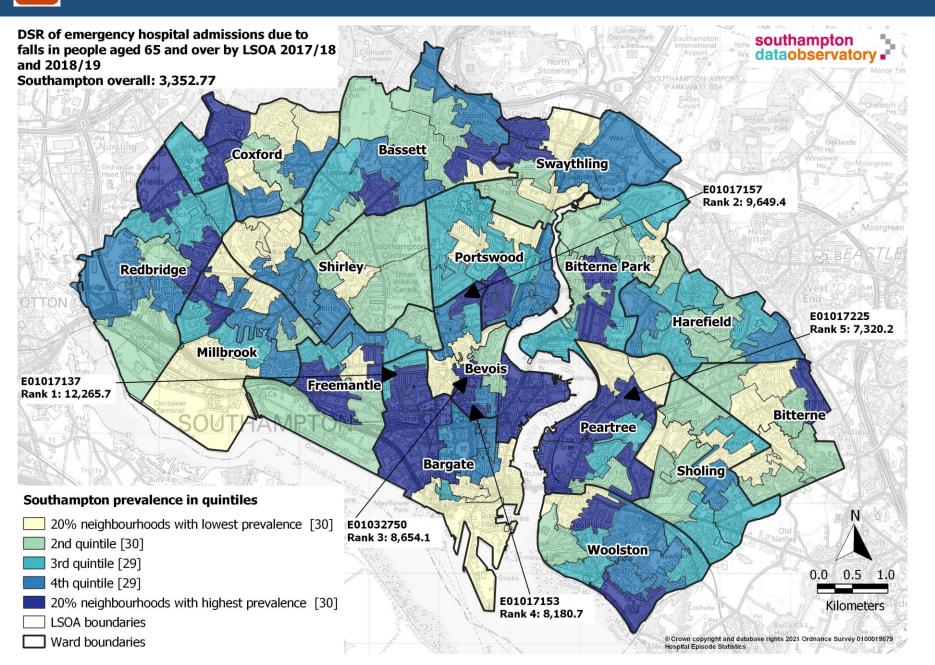


Southampton's **overall prevalence** rate for registered patients **aged 15+** with **diabetes** is **7.23%**.

The **top 5 LSOA's** with the highest prevalence are **spread across the city**. The top 2 LSOA's are in the **West** of the city. LSOA E0107182 has the **highest prevalence of 15.58%**.

#### Falls leading to hospital in over 65s

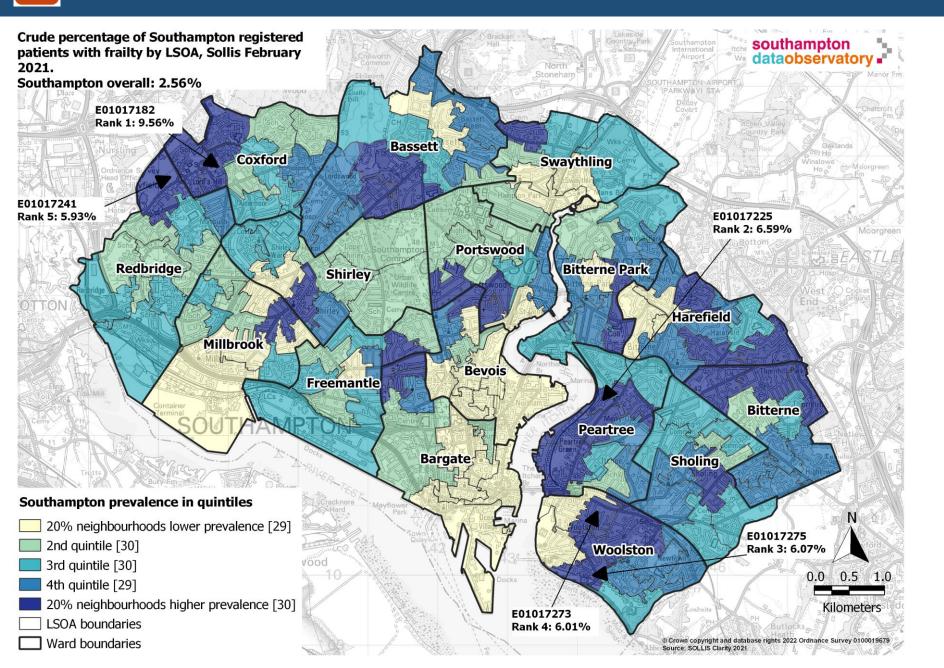




The overall directly standardised rate (DSR) of emergency hospital admissions due to falls in people aged 65 and over for 2017/18 and 2018/19 was 3,352.77.

The LSOA with the highest DSR is E01017137, situated in the Bargate ward. Central Southampton has 4 of the top 5 LSOA's with the highest DSR rate. Frailty



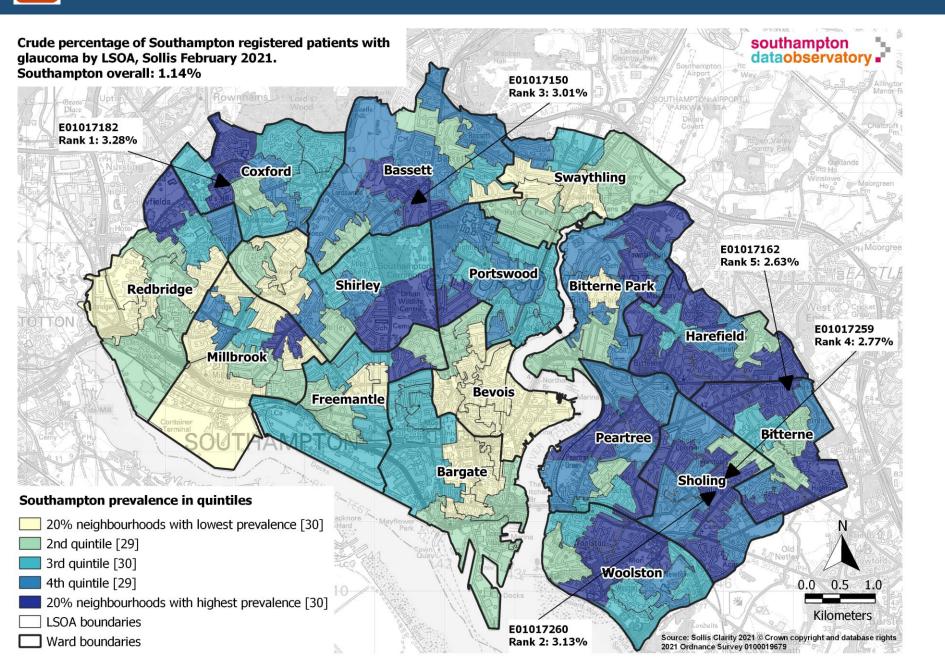


The **overall prevalence** of people in Southampton with **frailty** in February 2021 was **2.56%.** 

The LSOA with the highest prevalence is E0101782, situated in the Coxford ward. The top 5 LSOA's are situated in the East and West of the city.



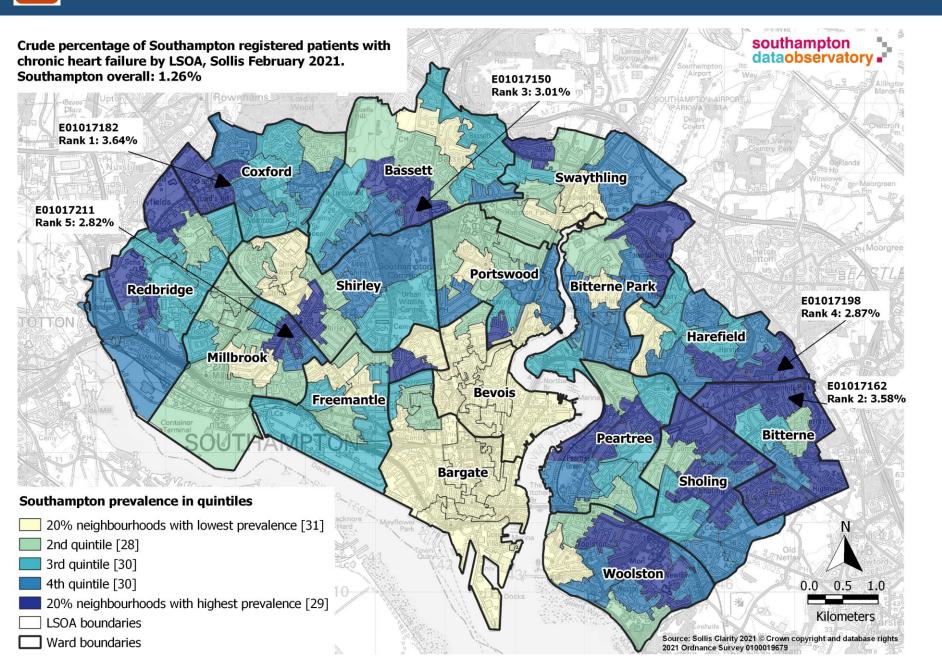




Registered patients with **glaucoma** seem to be spread across the city. The **overall prevalence** is **1.14%**.

Three of the top five LSOA's are within the Sholing and Bitterne ward. The highest prevalence by LSOA is 3.28% in Lordshill area, Coxford.





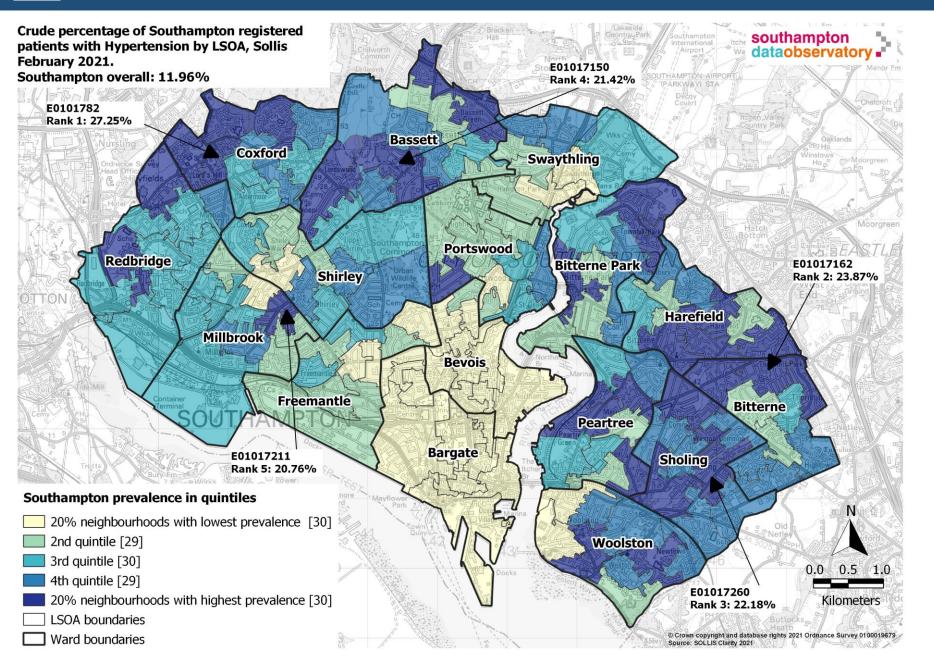
#### The overall prevalence of people in Southampton with chronic heart failure in February 2021 was 1.26%.

Patients with chronic heart failure are spread across the city. The LSOA with the **highest prevalence** is E01017182, in the **Lordshill** area, situated in the **Coxford ward**.



#### Hypertension





The **overall prevalence** of registered patients with **hypertension** in Southampton is **11.96%**.

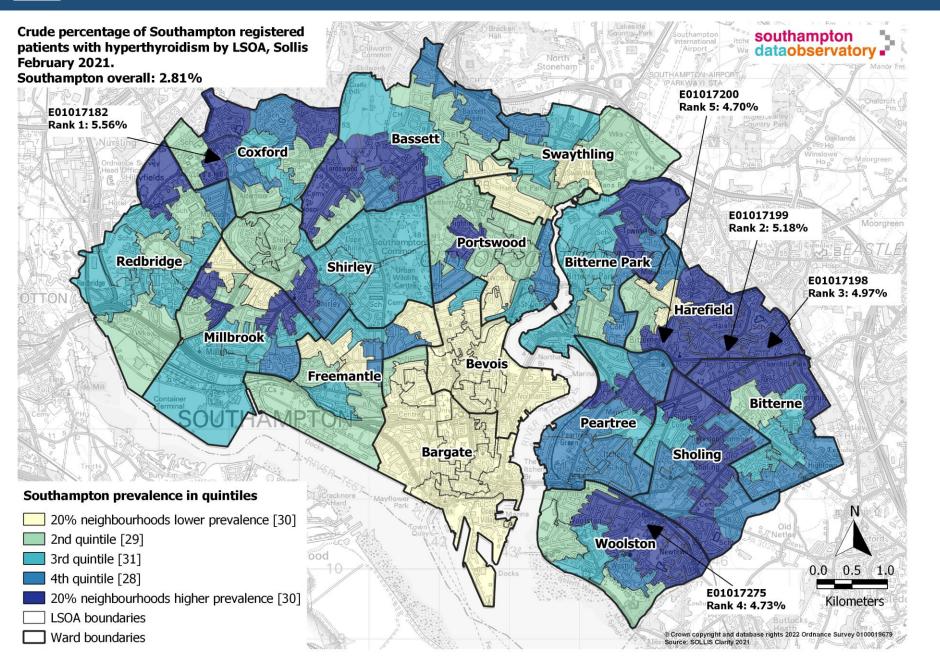
There is a **higher prevalence** of hypertension within the **East side** of the city, however, the top 5 LSOA's with the **highest** prevalence are **spread across Southampton**.

The highest prevalence rate by LSOA is **27.25%** in the **Coxford ward**.



#### Hyperthyroidism



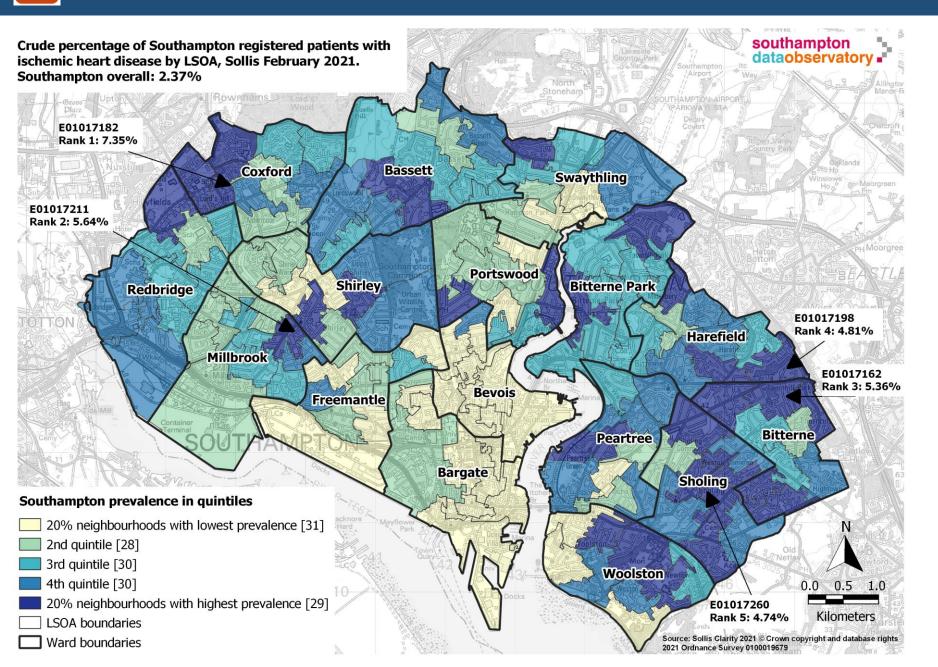


There is a **higher prevalence** of **hyperthyroidism** within the **East** of Southampton with **four** of the **top five** LSOA's here.

The overall prevalence of registered GP patients with hyperthyroidism is **2.81%** and the highest LSOA percentage being **5.56%** in Lordshill, Coxford ward.



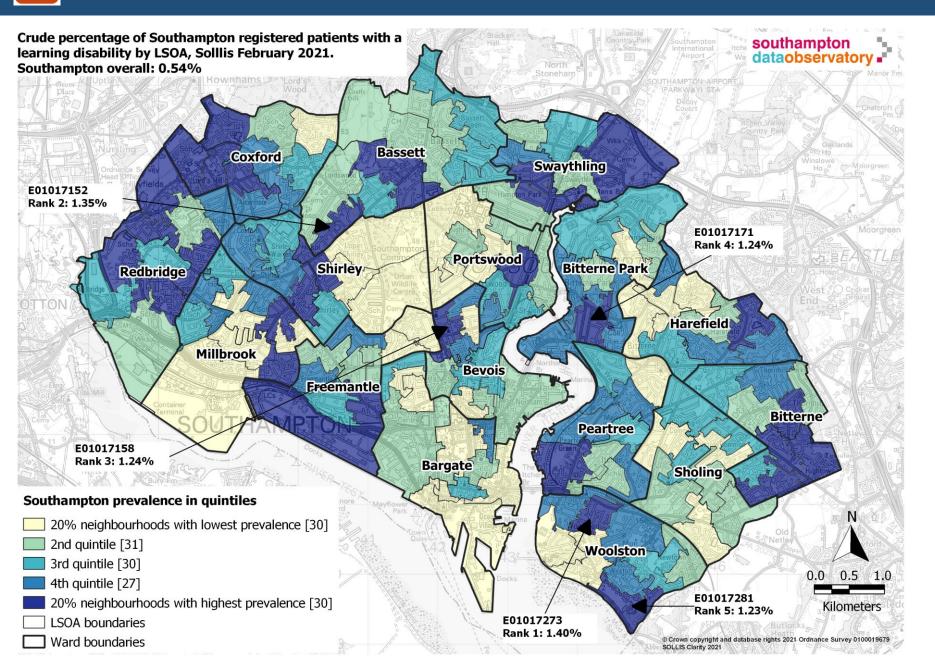




The **overall prevalence** of registered patients with **ischemic heart disease** in Southampton is **2.37%.** 

There is a **higher prevalence** of ischemic heart disease within the **East** side of the city with 3 out of the top 5 LSOA's being here. The **top LSOA** is situated in the **Coxford ward** with a crude percentage of **7.35%**.

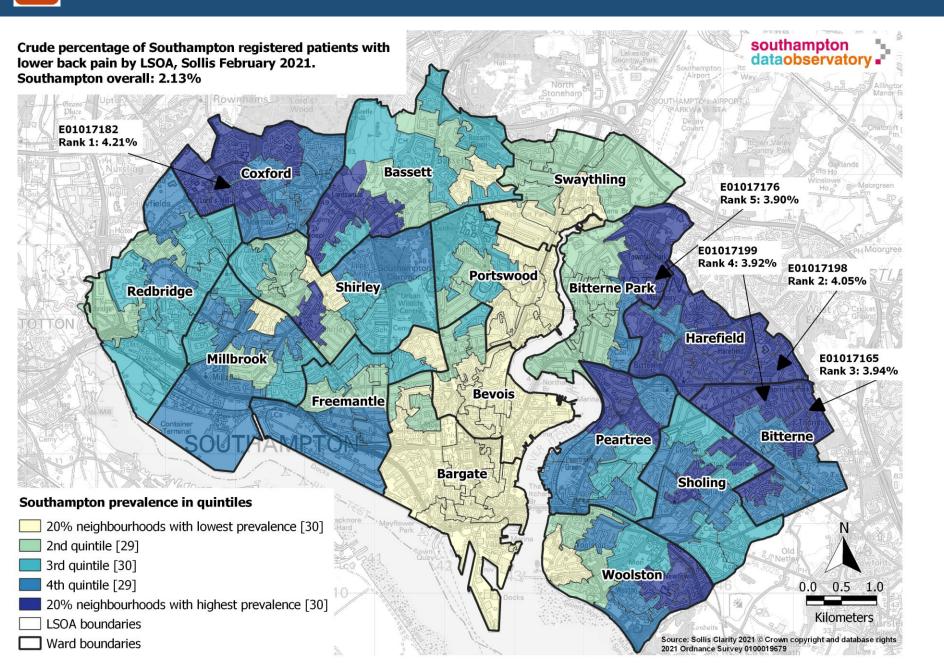




The **overall prevalence** of patients who have a **learning disability** in Southampton is **0.54%**.

The **top 5 LSOA's** are **spread across the city,** with the highest LSOA prevalence being **1.40%**.





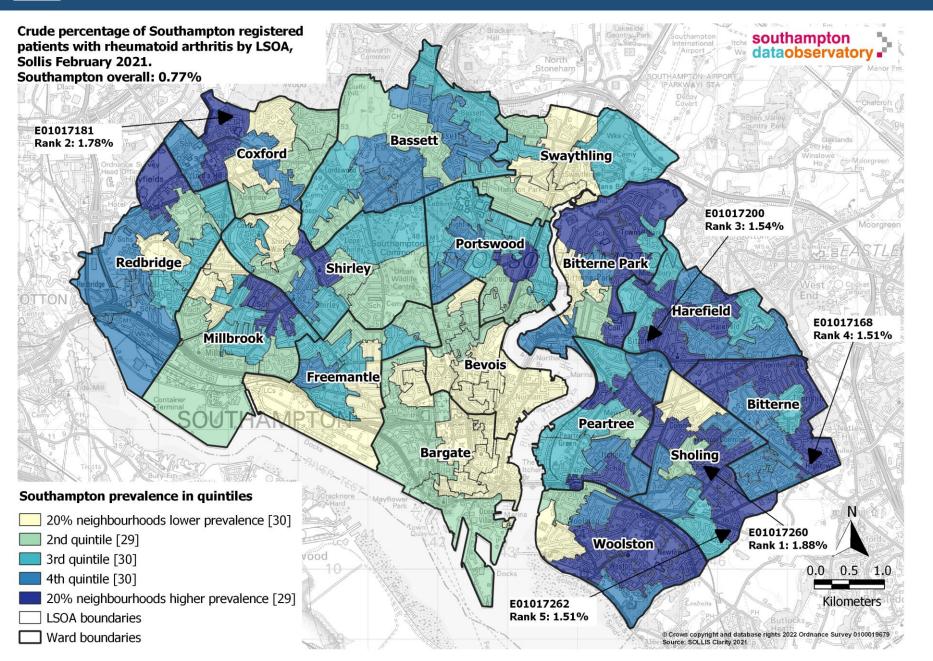
The overall prevalence of **lower back pain** in Southampton is **2.13%**.

2 of the top 5 LSOA's with the highest prevalence are situated in the Bitterne Ward. However the LSOA with the highest prevalence (4.21%) is in the Coxford ward.



#### **Rheumatoid Arthritis**





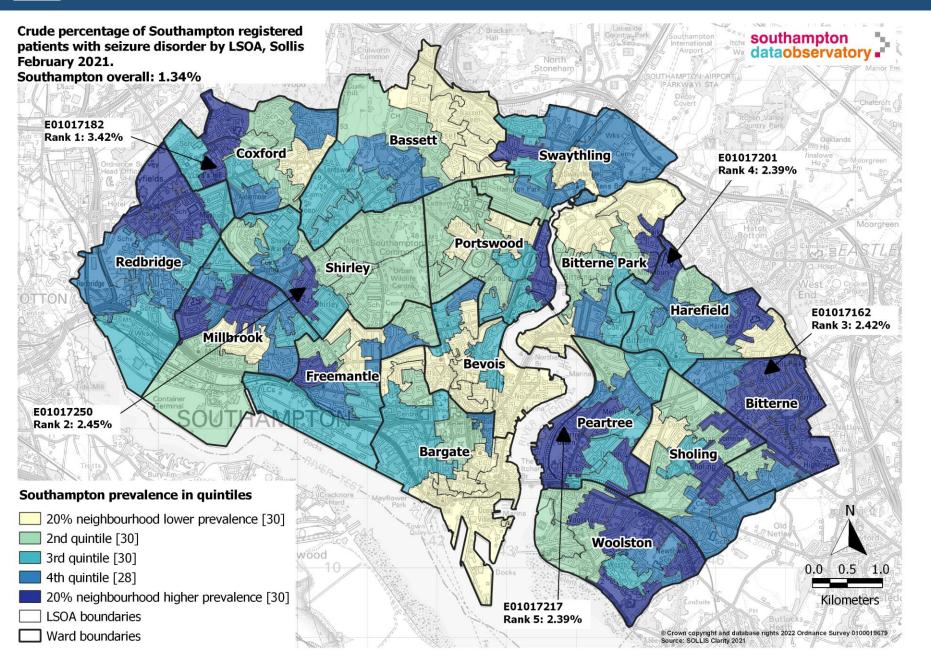
The overall prevalence of patients in Southampton with arthritis in February 2021 was 0.77%.

The LSOA with the **highest prevalence** is E01017260, situated in the **Sholing ward**. There is a higher prevalence of people with arthritis in the East of the city.



#### **Seizure Disorders**





The prevalence of **seizure disorder** seems to be spread across the city with an **overall prevalence** of **1.34%**.

The top LSOA with the **highest prevalence** is E01017182, which is within the **Coxford ward**, with a prevalence of **3.42%.** 





# **Forecasted Long Term Conditions**



- In light of an ageing population, increases in morbidity and a reduction in resources, future projections of chronic conditions and how this translates into demand for services are needed
- 2 areas of modelling; CCG and SCC perspectives have been considered
  - CCG chronic conditions and long-term support
  - SCC adult social care by primary support reason
- Two types of forecast
  - Level of underlying need in the population
  - Volume of need which may require service provision
- All forecasts are based on Southampton *resident* population due to the nature of the readily available population forecasts



## **Fixed Prevalence Modelling**

The **current prevalence** rate for each condition is combined with future population forecast to calculate future number of cases.

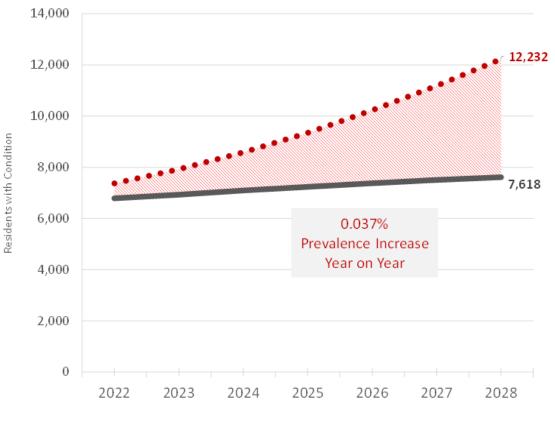
(this has been calculated for all conditions)

## **Variable Prevalence Modelling**

The current prevalence rate for each condition is combined with **recent trend** in prevalence and future population forecast to calculate future number of cases.

The recent trend is used to forecast future prevalence rates. These results need extra caution, recent changes in prevalence may be due to other factors.

(this has been calculated for conditions where recent trend data is available)







Total percentage change between 2021 and 2028 Southampton

6.3%

Aged 0-15 change between 2021 and 2028 Southampton

-2.7%

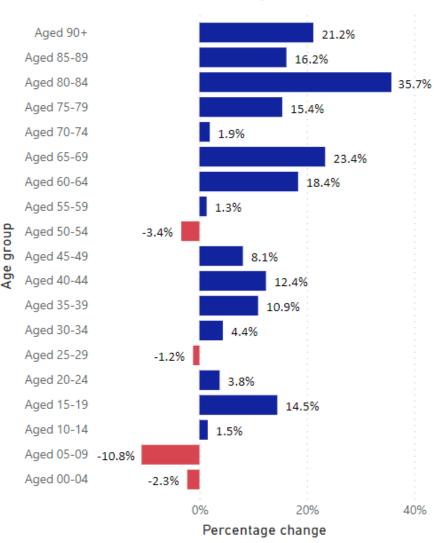
Aged 16-64 change between 2021 and 2028 Southampton

6.2%

Aged 65+ change between 2021 and 2028 Southampton

17.4%

Percentage change in population between 2021 and 2028 Southampton

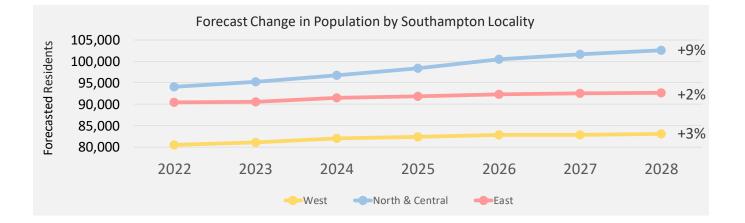


# Change by age groups between 2021 and 2028 Southampton

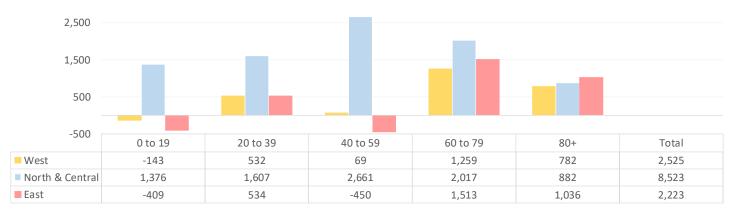
Age group	Female	Male	Total
Aged 00-04	-222	-98	-320
Aged 05-09	-702	-894	-1,596
Aged 10-14	129	87	216
Aged 15-19	1,381	1,576	2,957
Aged 20-24	496	639	1,135
Aged 25-29	-265	1	-264
Aged 30-34	206	680	886
Aged 35-39	731	1,191	1,922
Aged 40-44	791	1,060	1,851
Aged 45-49	633	518	1,151
Aged 50-54	-317	-165	-482
Aged 55-59	124	68	192
Aged 60-64	1,111	1,091	2,202
Aged 65-69	1,166	1,107	2,273
Aged 70-74	104	79	183
Aged 75-79	572	572	1,144
Aged 80-84	946	968	1,914
Aged 85-89	215	370	585
Aged 90+	210	322	532
Total	7,309	9,172	16,481

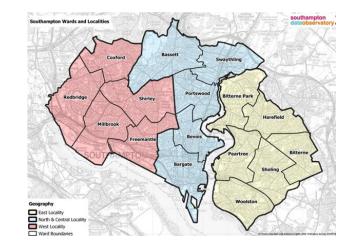
Data source: Hampshire County Council, Small Area Population Forecasts(SAPF) 2021 base





Forecast Change in Population by Age-Band and Southampton Locality (2022 - 2028)





- North & Central Southampton population growing at a faster rate (+9% by 2028)
- Most growth for West & East is in people over 60
- Significant growth for North & Central across all age-bands, highest in 40 to 59 age-band

Data source: Hampshire County Council, Small Area Population Forecasts(SAPF) 2021 base

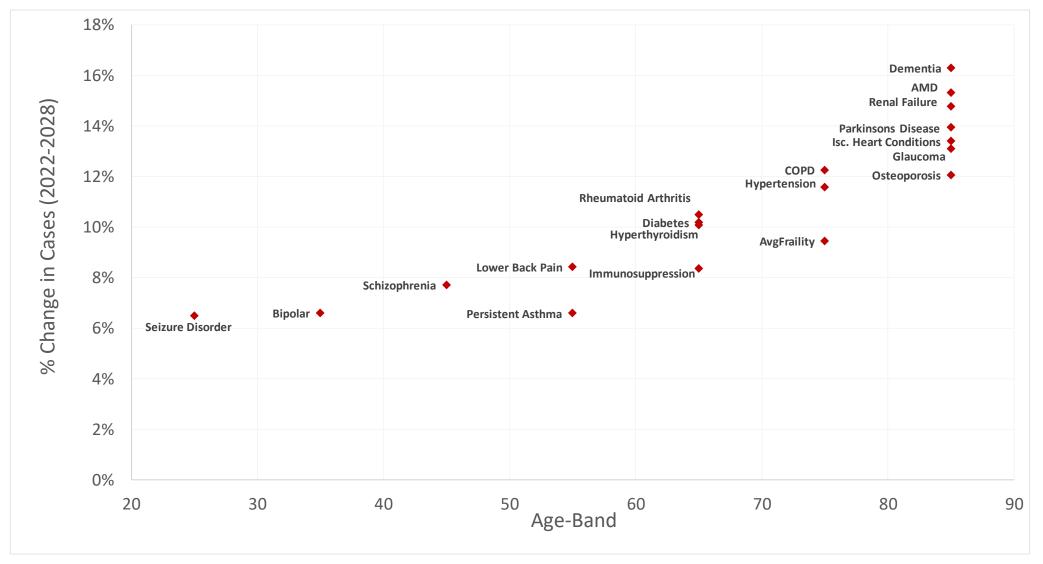




# **Chronic condition forecasts**



## Forecasted Change in Number of Cases (2022-2028) vs. Largest Age-Band for Each Condition\*



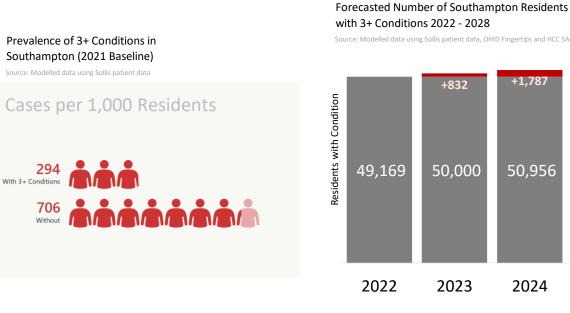


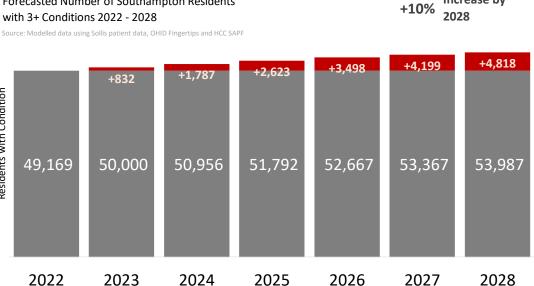
3+ Conditions	Diabetes	Hyperthyroidism	Parkinson's Disease
5+ Conditions	Diabetes (Variable Prevalence)	Hyperthyroidism (Variable Prevalence)	Persistent Asthma
Age Related Macular Degeneration	Falls Leading to Hospital Admission (over 65s) Forecasts	Immunosuppression	Persistent Asthma (Variable Prevalence)
Bipolar	Frailty	Ischemic Heart Conditions	Rheumatoid Arthritis
Chronic Renal Failure	Glaucoma	Learning Disability	Rheumatoid Arthritis (Variable Prevalence)
COPD	Heart Failure	Learning Disability (Variable Prevalence)	Schizophrenia
COPD (Variable Prevalence)	Heart Failure (Variable Prevalence)	Lower Back Pain	Seizure Disorder
Dementia	Hypertension	Osteoporosis	Need for Help with 5 or More ADL
Dementia (Variable Prevalence)	Hypertension (Variable Prevalence)	Osteoporosis (Variable Prevalence)	



# **3+ Conditions**

Increase by

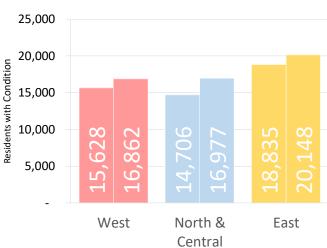




## Forecasted Southampton Residents with 3+ Conditions by Locality (2022 vs 2028)

with

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with 3+ Conditions by Age-Band (2022 vs 2028)

	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
12,000							× 1 592	<sup>20</sup> +570 <sup>20</sup>		
5 10,000						N M	71,362	2	058	
Conditio									×1,692	
6,000			2 8	58 53	7202 +437 CC					
Gesiden 600,4			<sup>20</sup> +33 <sup>20</sup>	₹ 100 100 100 100 100 100 100 10						028
2,000	052	2028 2028 68+ 2022								+325 ×
0	-13									



Increase by

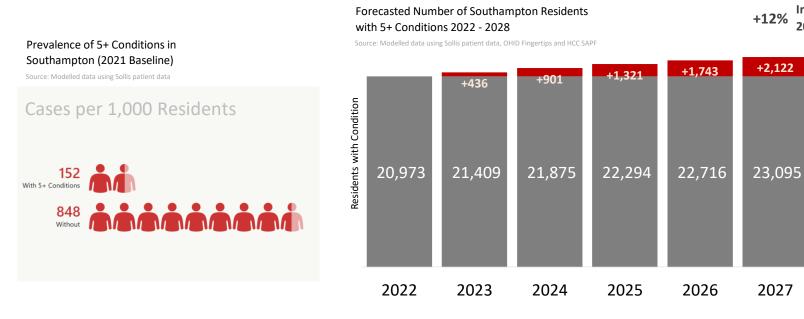
+2,462

23,436

2028

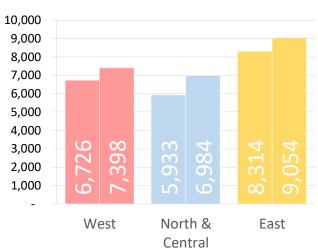
**Residents with Condition** 

2028



## Forecasted Southampton Residents with 5+ Conditions by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with 5+ Conditions by Age-Band (2022 vs 2028)

	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
7,000								28	~	
6 <i>,</i> 000							58	<sup>20</sup> +312 <sup>20</sup>	2028	
000,5 guditio							<sup>20</sup> +715		+1,075	
ਤੱ ਜ਼੍ਹ 4,000						~ ~ ~	2		_	
st 3,000						202 -38 202				~
<sup>Esig</sup> 2,000				028	707 +116 707 8707 8707 8707 8707 8707 8707 8707					+220 20
1,000	022		0 CT 0	22028 +48	<b>5 111 5</b>					
0	<sup>2</sup> −2	<mark>♀ +12 ♀</mark>								

Prevalence of AMD in

29

With AMD

97 Without

Southampton (2021 Baseline)

Source: Modelled data using Sollis patient data

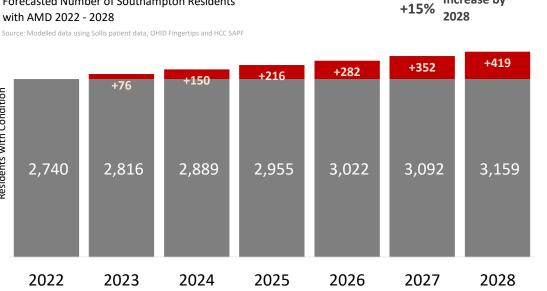
Cases per 1,000 Residents

# **Age Related Macular Degeneration**

Increase by

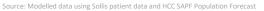
## Forecasted Number of Southampton Residents with AMD 2022 - 2028

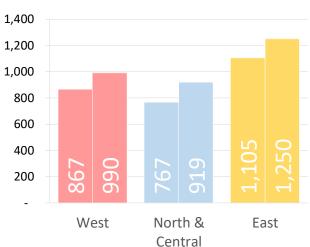
**Residents with Condition** 



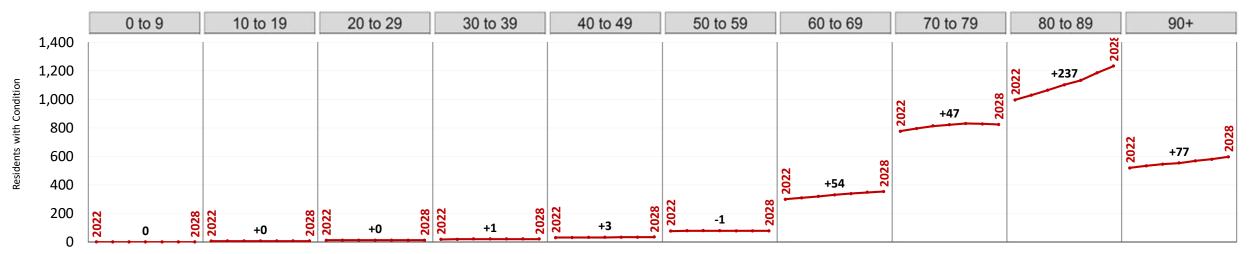
## Forecasted Southampton Residents with AMD by Locality (2022 vs 2028)

Residents with Condition





## Forecasted Southampton Residents with AMD by Age-Band (2022 vs 2028)





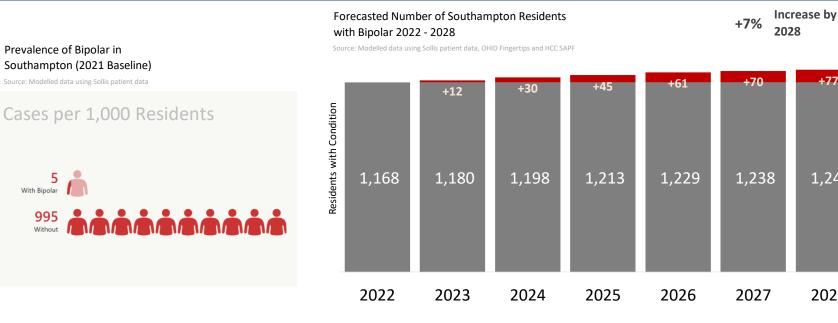
5

With Bipolar

995

Without





## Forecasted Southampton Residents with Bipolar by Locality (2022 vs 2028)

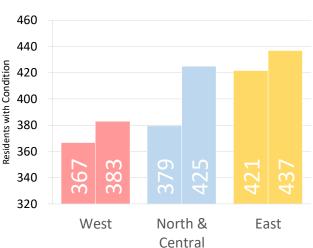
+77

1,245

2028

Resid

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



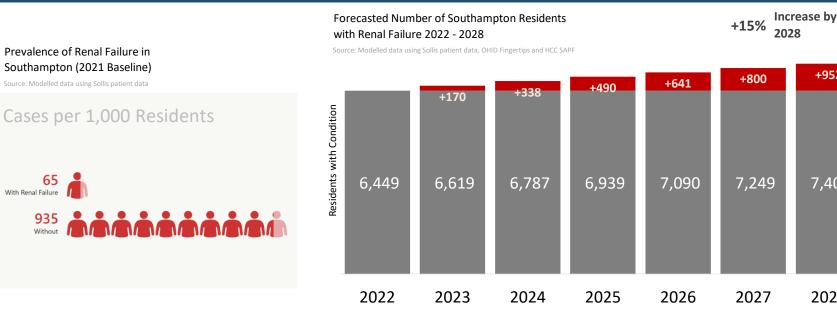
## Forecasted Southampton Residents with Bipolar by Age-Band (2022 vs 2028)

		0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
	300				8202 +14 202						
5	250					028	5028 -4 502	0			
Condition	200			502 +1 502		<sup>2</sup> <sup>2</sup> <sup>2</sup> <sup>2</sup> <sup>2</sup> <sup>2</sup>	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<sup>202</sup> +28			
ts with	150								22 28		
Residen	100								202 +5 202	028	
	50	2	288 2028 +2 5022							202 <sup>+13</sup>	22
	0	0 50									



# **Chronic Renal Failure**

southampton dataobservatory



## Forecasted Southampton Residents with Renal Failure by Locality (2022 vs 2028)

+952

7,401

2028

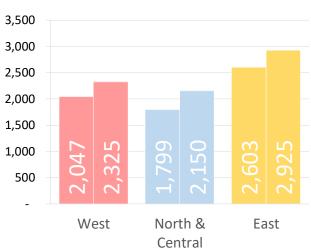
dition

G

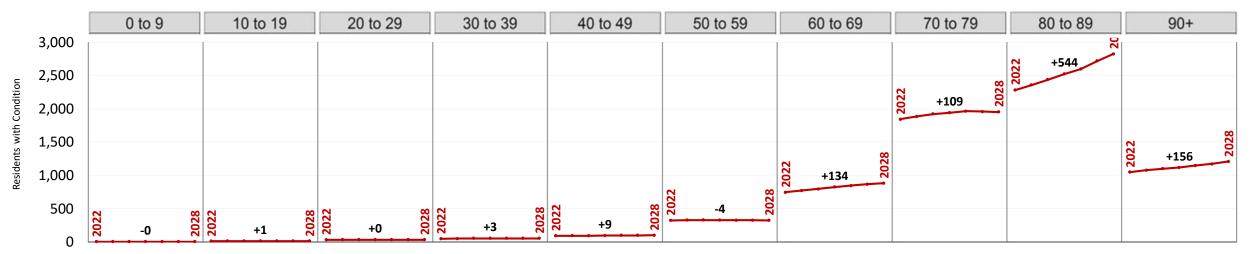
is wi

Resider

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Renal Failure by Age-Band (2022 vs 2028)





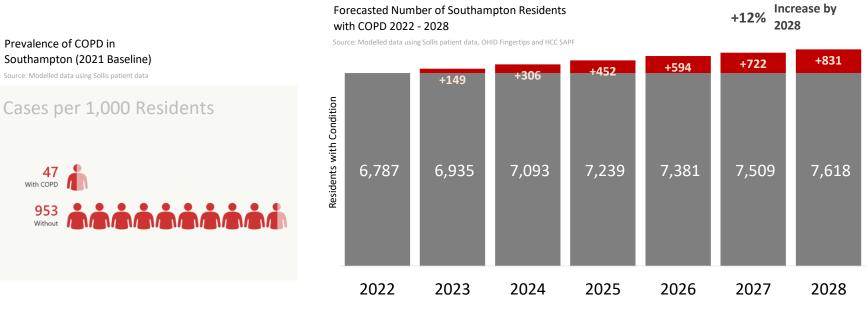
47

With COPD

953

Without





## Forecasted Southampton Residents with COPD by Locality (2022 vs 2028)

dition

G

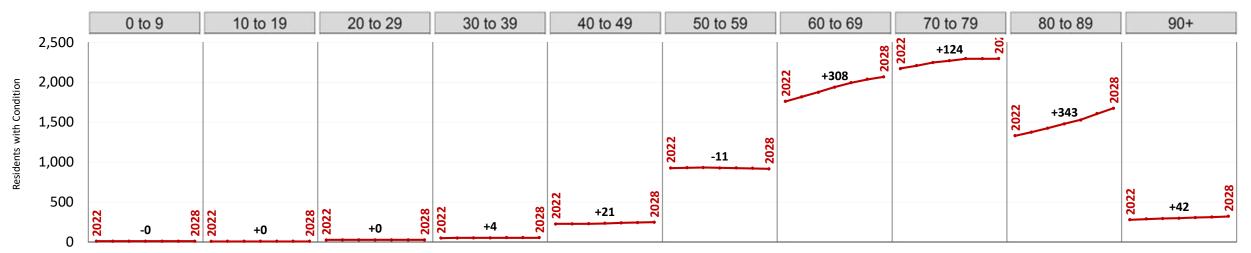
ts with

Resider

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with COPD by Age-Band (2022 vs 2028)

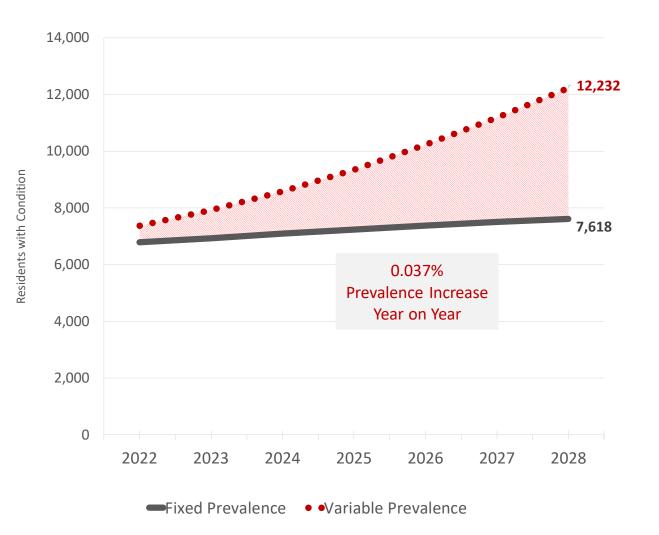






#### with COPD 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF

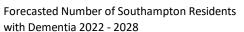


- Local GP QOF data identified a recent **increase** in the prevalence of COPD
- Equivalent to 0.037% increase per year / 4,614 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



# Dementia

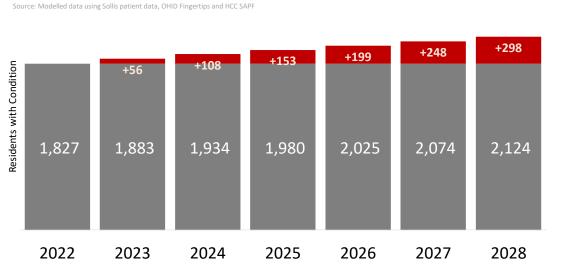




#### Prevalence of Dementia in Southampton (2021 Baseline)

Source: Modelled data using Sollis patient data

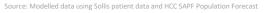




## Forecasted Southampton Residents with Dementia by Locality (2022 vs 2028)

Ë

Res





## Forecasted Southampton Residents with Dementia by Age-Band (2022 vs 2028)

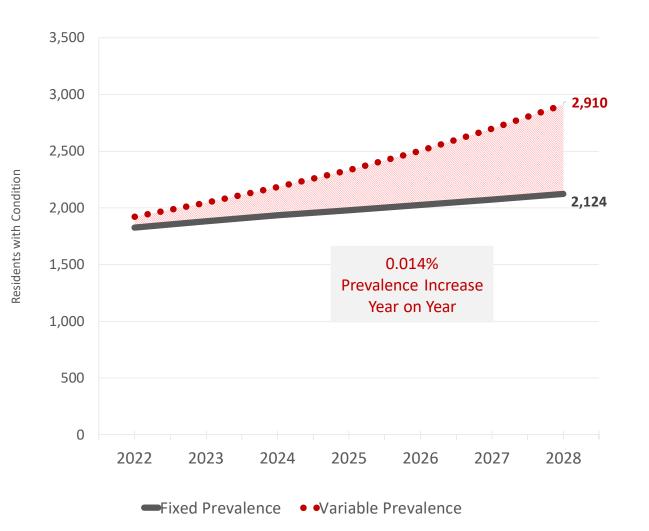
			0 to 9		10 to	19	2	20 to 29		30 to 3	39	4(	0 to 49	9	50 to 5	59	60 to 69	9	70 to 79	80 to 89	90+
1,2	00																				8707
1,0 gitiou	00																			20 +185	
Conditi 8	00																			No.	
9 with 0	00																		58 58		700 +72
ents	00																		×28 ×		
Re																2		8			
2		022	0	2028	0	038	2022	0	028	+0	2028	022	+0	2028	-0	028	+14	1 202			
	0	Ň	0	N N			N N	U	Ñ Ñ	+0	N N	~	τU	N N	-0						





#### with Dementia 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of dementia
- Equivalent to 0.014% increase per year / 786 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



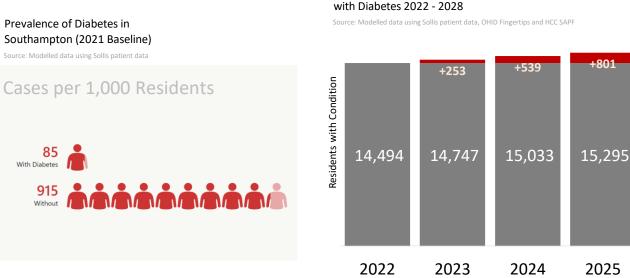
85

915

Without

With Diabetes





## Forecasted Number of Southampton Residents



+1,287

15,781

2027

+1,067

15,561

2026

+1,475

15,969

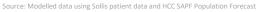
2028

dition

Col

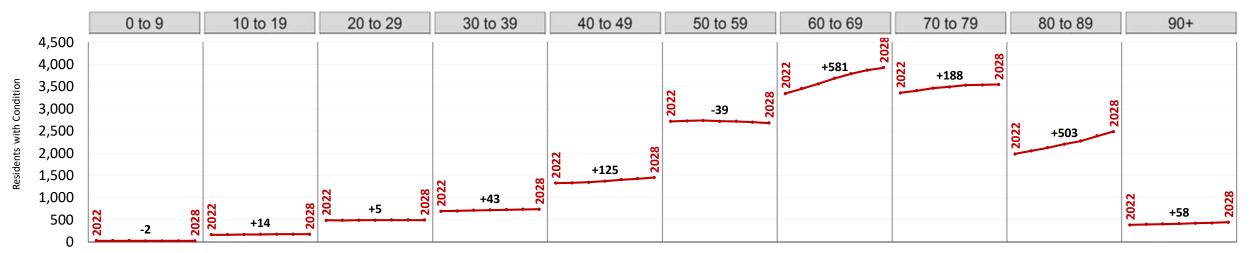
≧

## Forecasted Southampton Residents with Diabetes by Locality (2022 vs 2028)





## Forecasted Southampton Residents with Diabetes by Age-Band (2022 vs 2028)

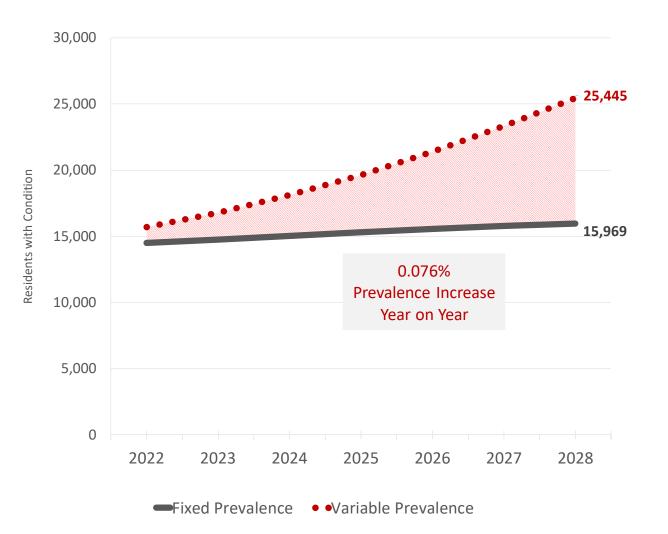






#### with Diabetes 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of diabetes
- Equivalent to 0.076% increase per year / 9,476 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



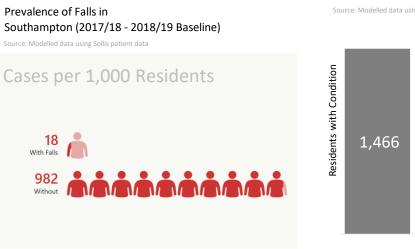
# Falls Leading to Hospital Admission (over 65s)

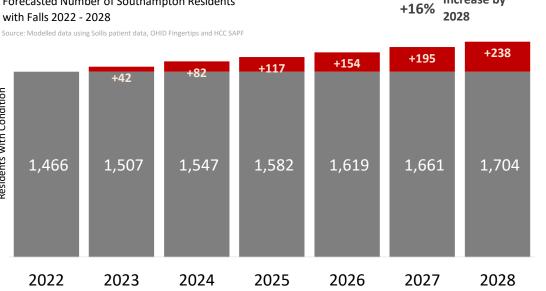
Increase by

Forecasted Number of Southampton Residents



## 2017/18 - 2018/19 Prevalence





## Forecasted Southampton Residents with Falls by Locality (2022 vs 2028)

ondit

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast

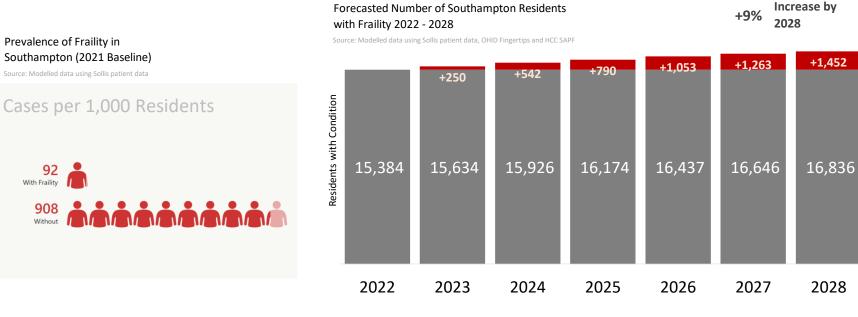


## Forecasted Southampton Residents with Falls by Age-Band (2022 vs 2028)

		0 to 9		10 to 19	)	20 to 2	9	30 to 39	)	40 to 4	9	50 to 59		60 to 69	70	to 79	80 to 89	90+
800																	20	
700																	+139	
009 dition																	~	00
ວຼິ້ 500															2	28		<b>50</b> +58 <b>5</b>
<sup>11</sup> 5 400															2022	-21		
GOS dent																		
<sup>2</sup> 200													52		028			
100	022		2028 2022		2028	1	2028 2022		2028 2022		2028 2022		2028	+19	12			
0		0	50	0	5	0	5 S	0	50	0	50	0	50					







## Forecasted Southampton Residents with Fraility by Locality (2022 vs 2028)

Condition

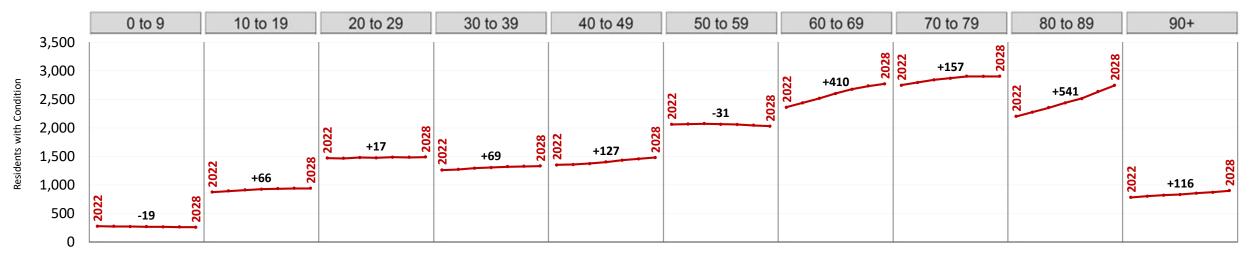
≧

Pesid

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Fraility by Age-Band (2022 vs 2028)





# Glaucoma

Increase by

+431

3,730

2028

Condition

**Residents with** 

2028

+13%

+369

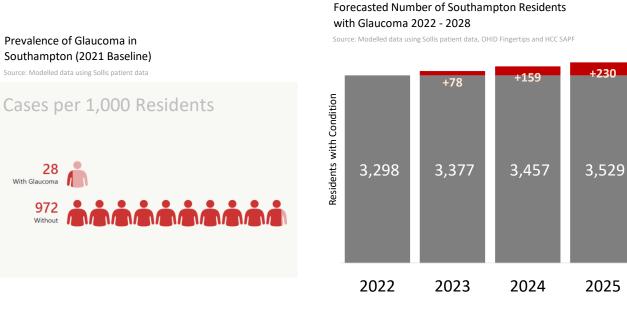
3,667

2027

+302

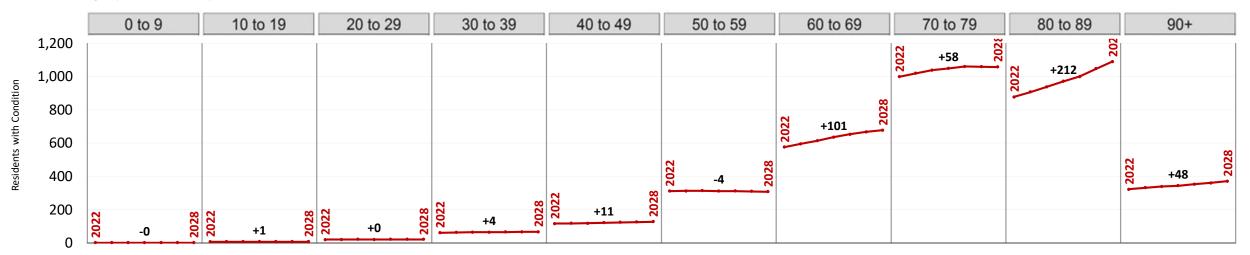
3,600

2026

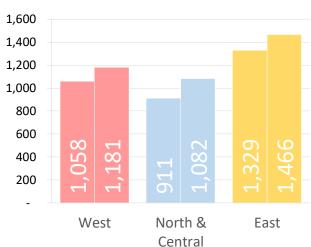


## Forecasted Southampton Residents with Glaucoma by Age-Band (2022 vs 2028)

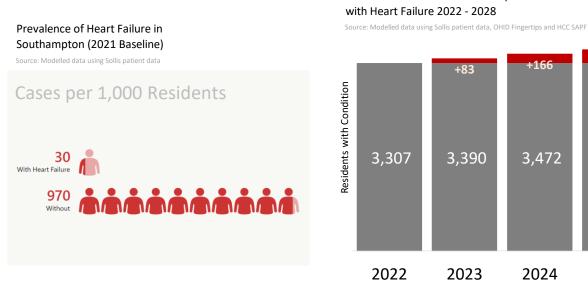
Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast

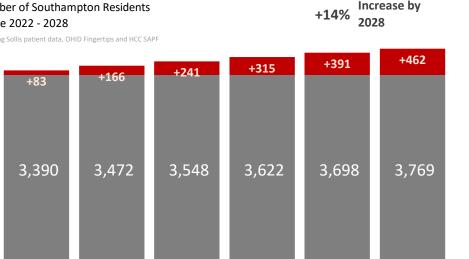


Forecasted Southampton Residents with Glaucoma by Locality (2022 vs 2028)









2026

2027

Increase by

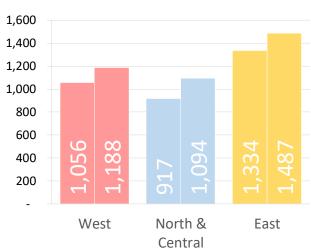
2028

## Forecasted Southampton Residents with Heart Failure by Locality (2022 vs 2028)

Condition

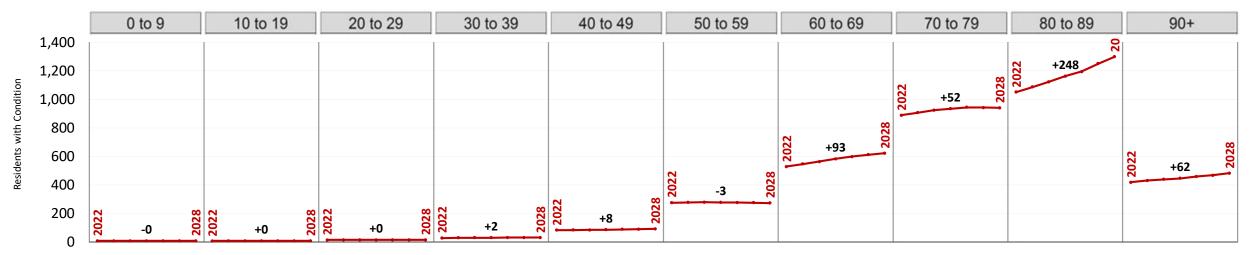
**Residents with** 

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Heart Failure by Age-Band (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



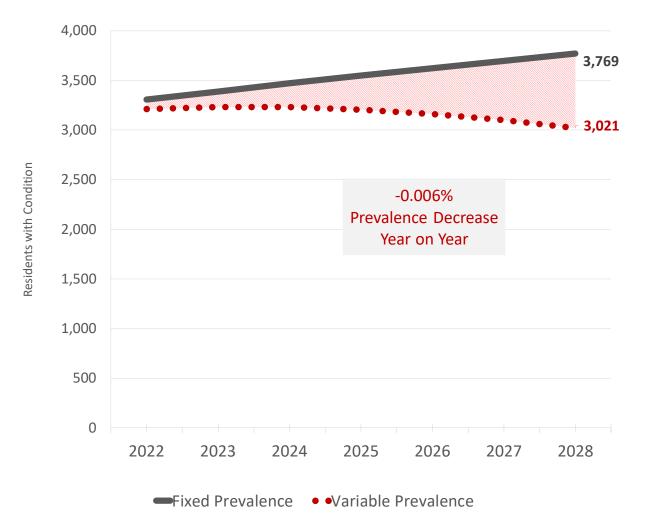
2025





#### with Heart Failure 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

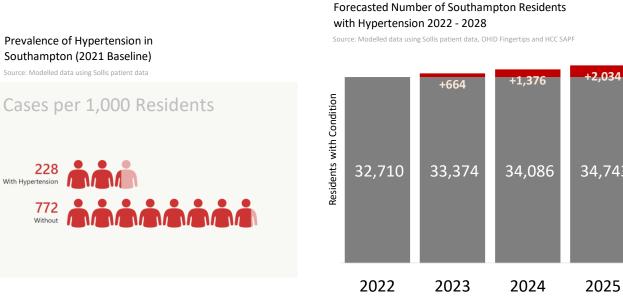
Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **decrease** in the prevalence of heart failure
- Equivalent to 0.006% decrease per year / 748 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario





# 1112 112% 1112

2026

Increase by

2027

2028

## Forecasted Southampton Residents with Hypertension by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Hypertension by Age-Band (2022 vs 2028)

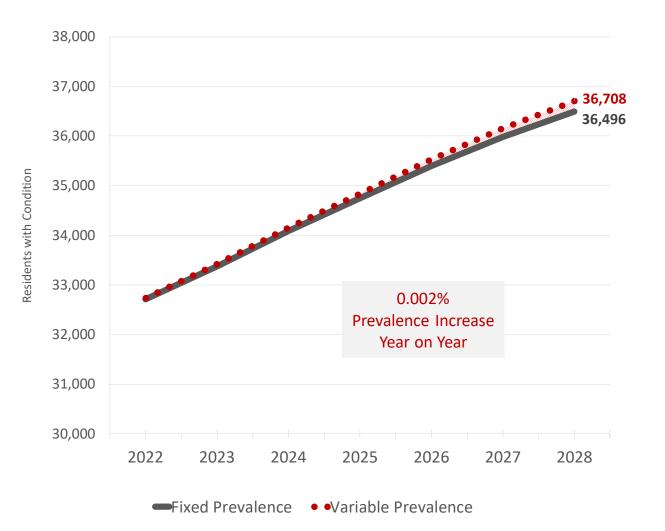
	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
10,000 9,000							202	× +507 ×	-	
							+1,313		2028	
8,000 7,000						2 8			22 +1,513 22	
6,000 5,000						-74 505			-	
4,000										
ž 3,000					20 20 20 20 20 20 20 20 20 20 20 20 20 2					200 +280 20 100 +280 20
2,000	2	8 8	<sup>38</sup> 53	50 +50 50 50 F						
1,000 0	<sup>0</sup> <sup>0</sup> <sup>2</sup> <sup>-1</sup>	2028 +3								





#### with Hypertension 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

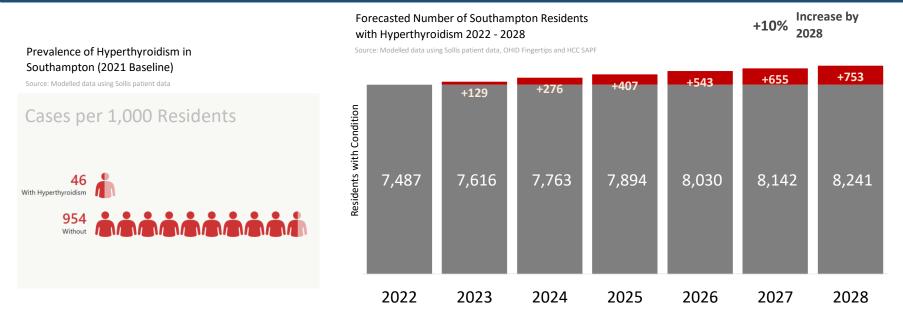
Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of hypertension
- Equivalent to 0.002% increase per year / 212 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario





#### Forecasted Southampton Residents with Hyperthyroidism by Locality (2022 vs 2028)

dition

Col

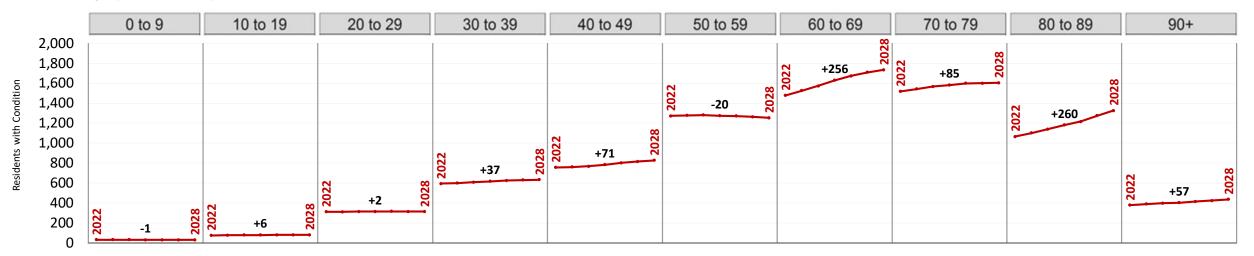
Š

Reside

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Hyperthyroidism by Age-Band (2022 vs 2028)

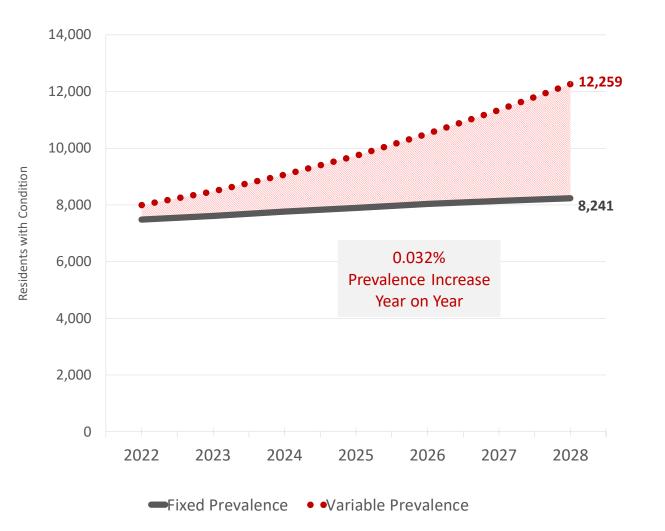






#### with Hyperthyroidism 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of hyperthyroidism
- Equivalent to 0.032% increase per year / 4,018 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario

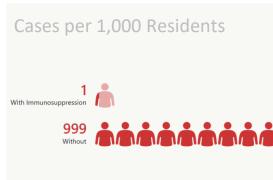


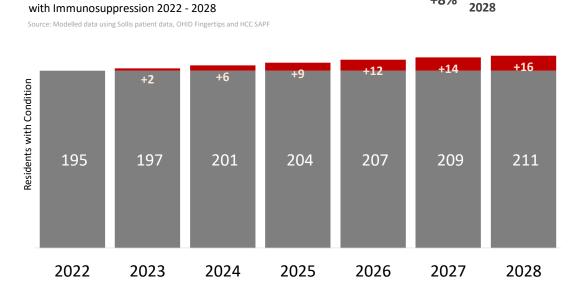
Increase by

+8%

## Prevalence of Immunosuppression in Southampton (2021 Baseline)





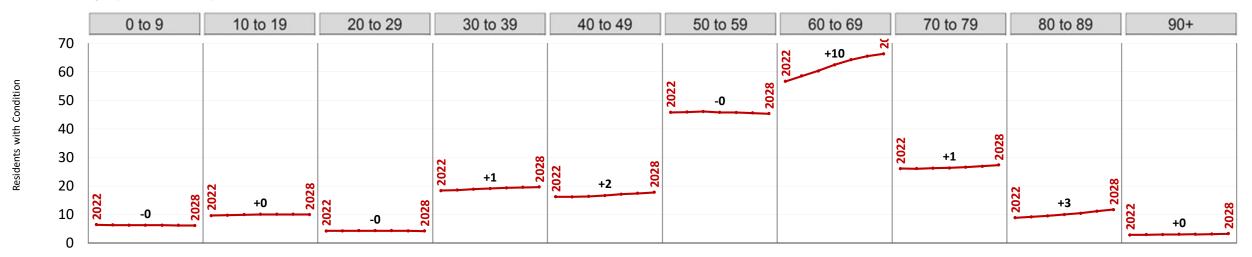


## Forecasted Southampton Residents with Immunosuppression by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Immunosuppression by Age-Band (2022 vs 2028)







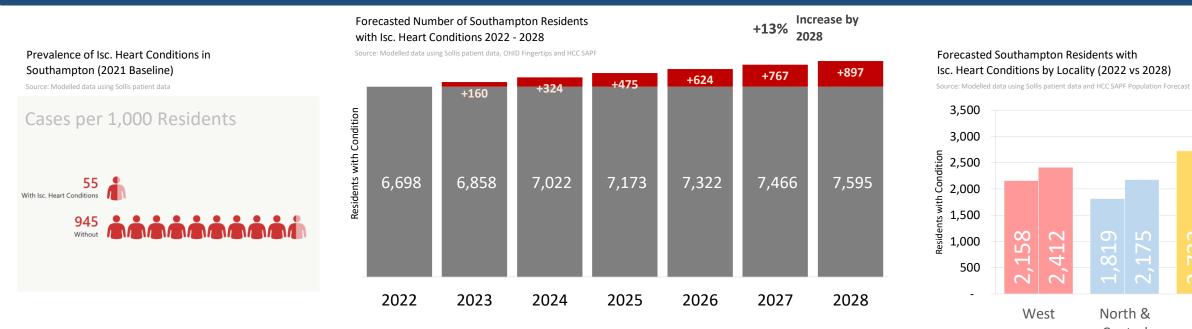
Õ

East

,412

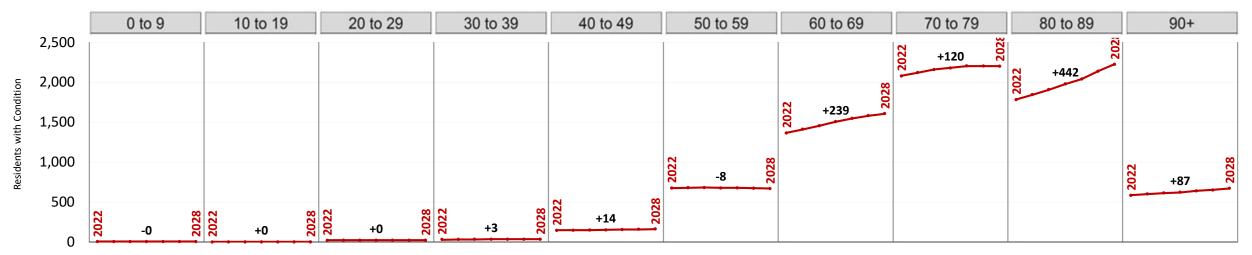
North &

Central



## Forecasted Southampton Residents with Isc. Heart Conditions by Age-Band (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



Data source: Hampshire County Council, Small Area Population Forecasts(SAPF) 2021 base



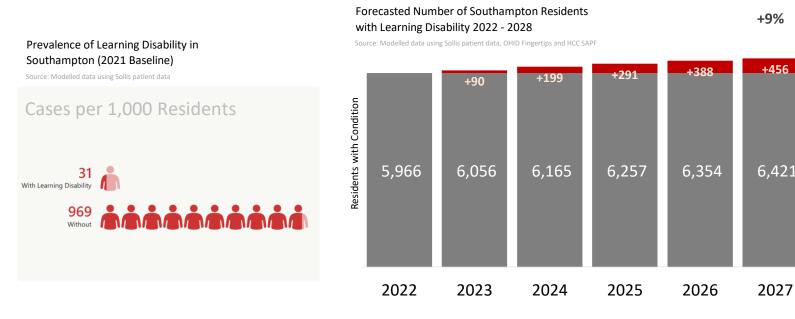
Increase by

+513

6,479

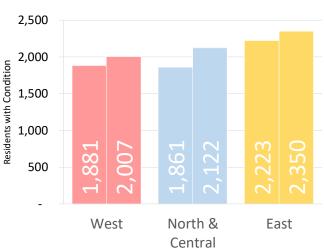
2028

2028



#### Forecasted Southampton Residents with Learning Disability by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Learning Disability by Age-Band (2022 vs 2028)

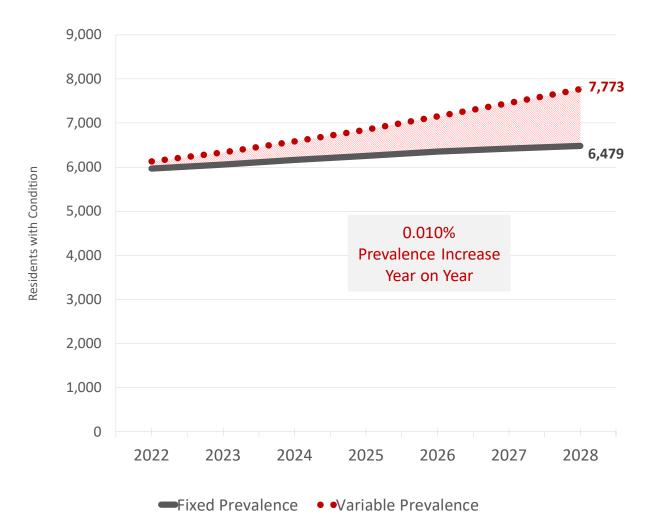
	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
1,200						<b>28 1 023</b>	S +162	œ		
<sub>ទ</sub> 1,000				28	2028	₽ <u></u> -17 02		+51 50	0	
008 addition				<sup>202</sup> +46					<sup>20</sup> +150	
009 vith			2022 2022 2028						+150	
ents										
400 gesig		5028 +17 5028	3							20 +24 <sup>80</sup>
200	3		i I							2 +24 ×
0	0- 50	1 20								





#### with Learning Disability 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of learning disability
- Equivalent to 0.01% increase per year / 1,294 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



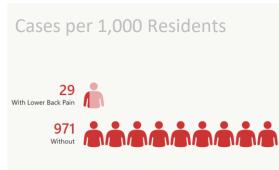
# **Lower Back Pain**

Forecasted Number of Southampton Residents with Lower Back Pain 2022 - 2028



## Prevalence of Lower Back Pain in Southampton (2021 Baseline)

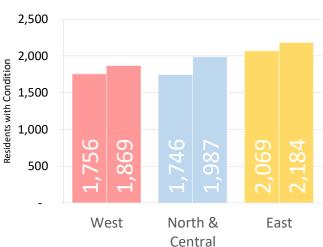
Source: Modelled data using Sollis patient data



Sou	rce: Modelled data usir	ng Sollis patient data, OH	ID Fingertips and HCC SA	APF			
with Condition		+78	+176	+259	+349	+413	+469
Residents wi	5,571	5,649	5,747	5,830	5,920	5,984	6,040
	2022	2023	2024	2025	2026	2027	2028

## Forecasted Southampton Residents with Lower Back Pain by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



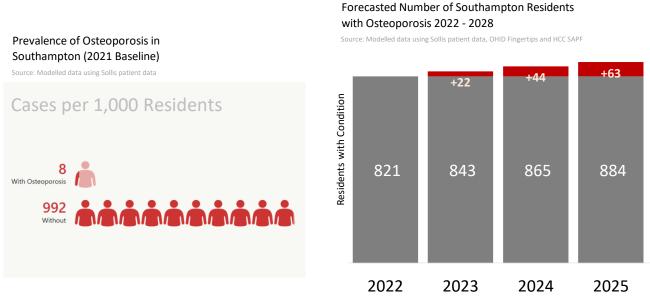
## Forecasted Southampton Residents with Lower Back Pain by Age-Band (2022 vs 2028)

	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
1,200						22 28	28			
<sub>5</sub> 1,000				58 5	028		<sup>20</sup> +141 <sup>20</sup>	22 228		
Conditi 008 Conditi			0 00		2027 +73		2	+45 07	2028	
009 <sup>∞</sup>			<sup>202</sup> +6						+141	
ssidents 400										
<u>ب</u> 200		022								2202 +27 202
200	2022 0 <sup>-</sup> 2028									

# Osteoporosis

902

2026



# +81 +99 +115 Fore source

+14% 2028

920

2027

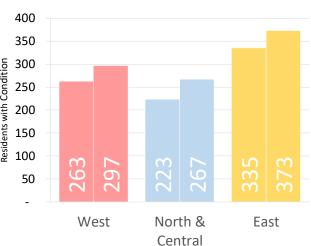
Increase by

936

2028

## Forecasted Southampton Residents with Osteoporosis by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Osteoporosis by Age-Band (2022 vs 2028)

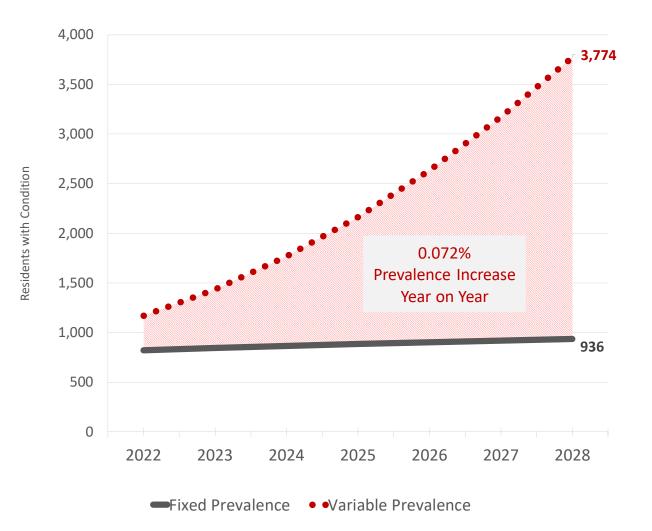
		(	0 to 9		10 to 19	9	20	to 29	] :	30 to 39	)	4	0 to 4	9	50	to 59		60 to 69	9	70 to	79	8	80 to 89		9	90+	
3	350																				8			20			
-	800																			+16	202	2022	+63				
2 ditior	250																			N							
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	50	2022		028 022		028	52	28	2		2028	52		28		- ,											
	0	50	0	20	0	20		2 0	50	0	20	50	0	20													





#### with Osteoporosis 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of osteoporosis
- Equivalent to 0.072% increase per year / 2,838 more cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



# **Parkinsons Disease**

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Forecasted Number of Southampton Residents with Parkinsons Disease 2022 - 2028



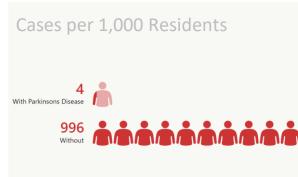
## Forecasted Southampton Residents with Parkinsons Disease by Locality (2022 vs 2028)

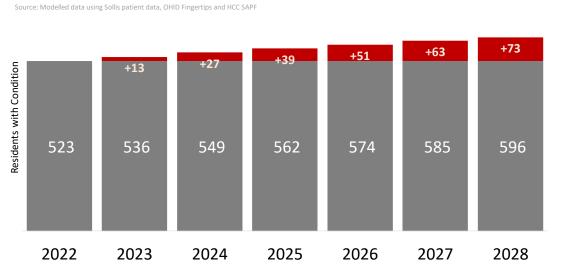




## Prevalence of Parkinsons Disease in Southampton (2021 Baseline)

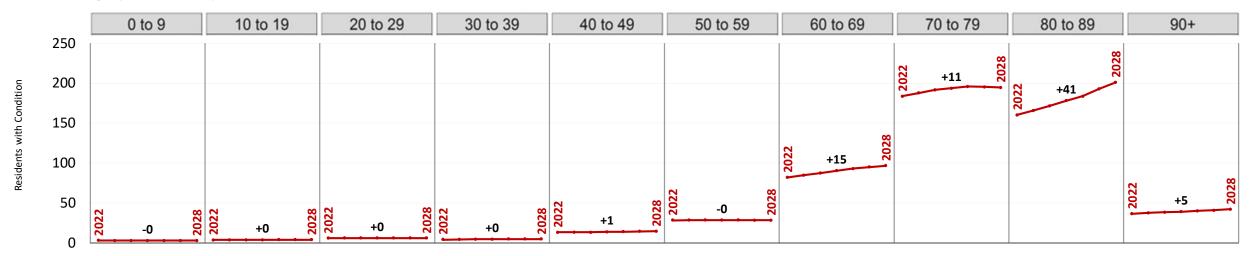






## Forecasted Southampton Residents with Parkinsons Disease by Age-Band (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast

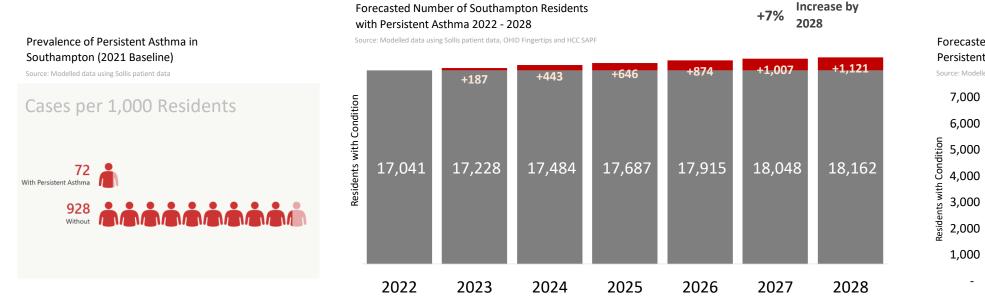


Data source: Hampshire County Council, Small Area Population Forecasts(SAPF) 2021 base



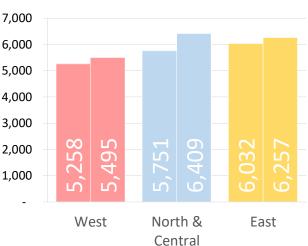
# **Persistent Asthma**





## Forecasted Southampton Residents with Persistent Asthma by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



## Forecasted Southampton Residents with Persistent Asthma by Age-Band (2022 vs 2028)

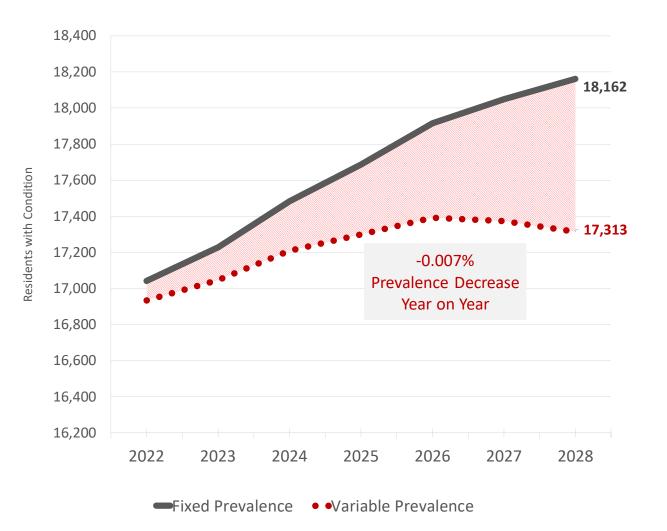
	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
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<sup>igi</sup> 1,000	202 202 202 202								<sup>7</sup>	
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0										·





#### with Persistent Asthma 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **decreases** in the prevalence of persistent asthma
- Equivalent to 0.007% decrease per year / 849 fewer cases by 2028 vs fixed prevalence forecast

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



# **Rheumatoid Arthritis**

southampton dataobservatory

665

West

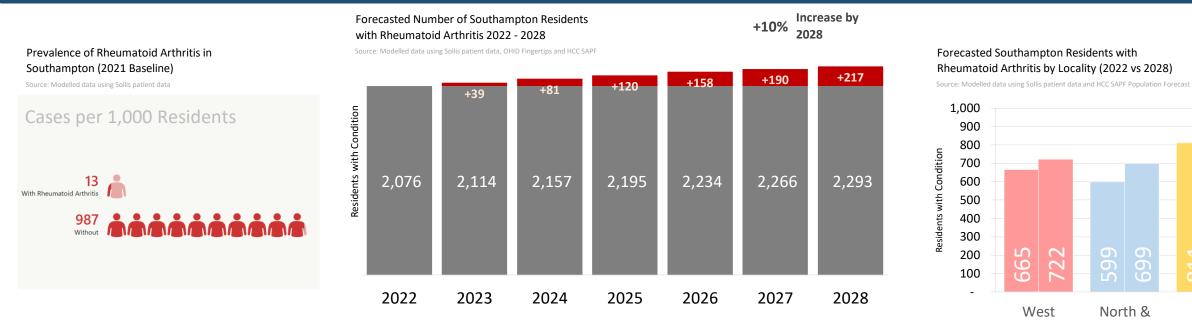
0

J D

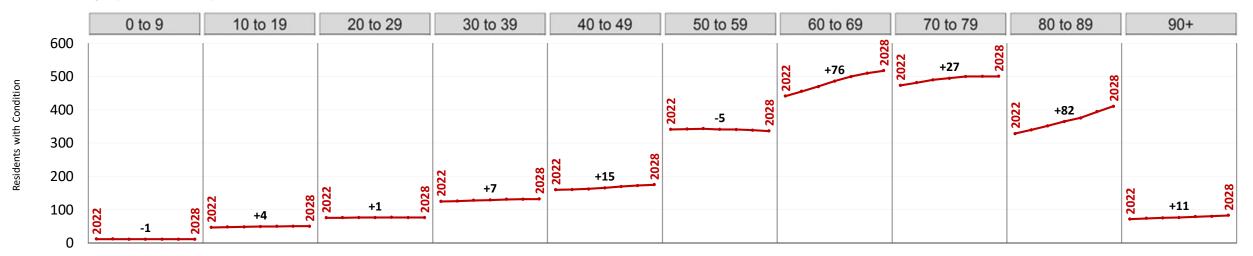
North &

Central

East



#### Forecasted Southampton Residents with Rheumatoid Arthritis by Age-Band (2022 vs 2028)

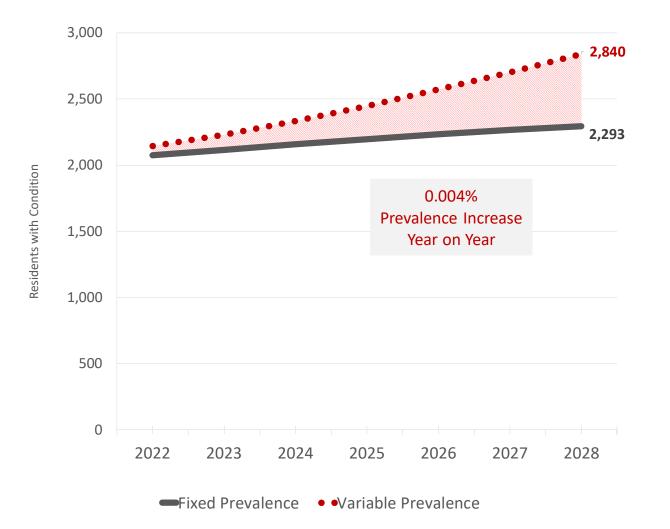




#### Forecasted Number of Southampton Residents

#### with Rheumatoid Arthritis 2022 - 2028 (Fixed Prevalence & Variable Prevalence)

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



- Local GP QOF data identified a recent **increase** in the prevalence of rheumatoid arthritis
- Equivalent to 0.004% increase per year / 547 more cases by 2028 vs fixed prevalence forecast

### **Caution is needed with these projections**

- Changing prevalence may be as a result of a change in recording by GPs; rather than a true change in prevalence
- Uncertain how realistic it is to expect current trend to continue, but may provide 'best / worst case' scenario



## Schizophrenia

Forecasted Number of Southampton Residents with Schizophrenia 2022 - 2028

Source: Modelled data using Sollis patient data, OHID Fingertips and HCC SAPF



#### Prevalence of Schizophrenia in Southampton (2021 Baseline)

Source: Modelled data using Sollis patient data



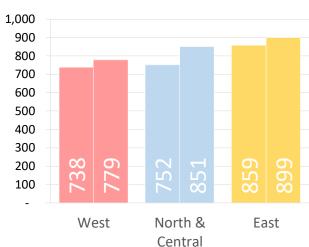
ondition		+30	+69	+101	+137	+160	+181	
Residents with Condition	2,349	2,379	2,417	2,450	2,486	2,509	2,529	
	2022	2022	2024	2025	2026	2027	2020	
	2022	2023	2024	2025	2026	2027	2028	

#### Forecasted Southampton Residents with Schizophrenia by Locality (2022 vs 2028)

Condition

Residents with

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast

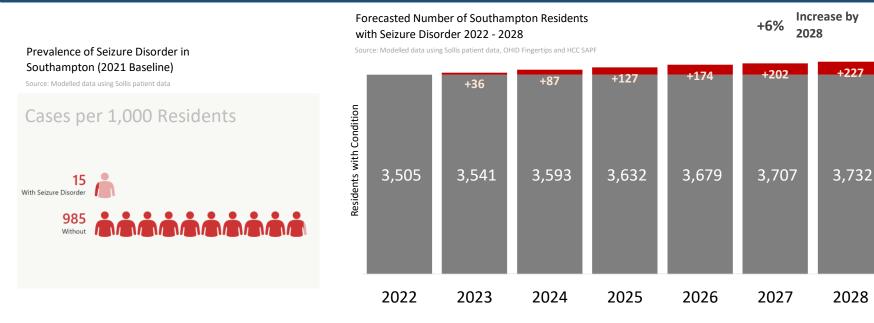


#### Forecasted Southampton Residents with Schizophrenia by Age-Band (2022 vs 2028)

	0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
500					202 +39 <sup>202</sup>	2028 8- 202	8			
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<sup>g</sup> 200 <sup>g</sup> 150									2	028
100	8 00	028 D22								8 +10 8
50 0	203 0- 203	2								



# Seizure Disorder



#### Forecasted Southampton Residents with Seizure Disorder by Locality (2022 vs 2028)

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



#### Forecasted Southampton Residents with Seizure Disorder by Age-Band (2022 vs 2028)

		0 to 9	10 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90+
6	00			+6 6	028 028	8	20 <u>6</u> 20	28			
dition 2	00				×26 ₹	2202 +42 07		×73 × 73	58 57		
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_	00	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~									2022 8+ 2028
	0										



### **Chronic condition forecast (All Southampton Localities)**



		Total Number of Cases in Southampton			Change vs 2022				
		2022	2025	2028	2025	(%)	2028	(%)	
1	Hypertension	32,710	34,743	36,496	2,034	6%	3,787	12%	
2	Diabetes	14,494	15,295	15,969	801	6%	1,475	10%	
3	AvgFraility	15,384	16,174	16,836	790	5%	1,452	9%	
4	Persistent Asthma	17,041	17,687	18,162	646	4%	1,121	7%	
5	Renal Failure	6,449	6,939	7,401	490	8%	952	15%	
6	Isc. Heart Conditions	6,698	7,173	7,595	475	7%	897	13%	
7	COPD	6,787	7,239	7,618	452	7%	831	12%	
8	Hyperthyroidism	7,487	7,894	8,241	407	5%	753	10%	
9	Learning Disability	5,966	6,257	6,479	291	5%	513	9%	
10	Lower Back Pain	5,571	5,830	6,040	259	5%	469	8%	
11	Heart Failure	3,307	3,548	3,769	241	7%	462	14%	
12	Glaucoma	3,298	3,529	3,730	230	7%	431	13%	
13	AMD	2,740	2,955	3,159	216	8%	419	15%	
14	Dementia	1,827	1,980	2,124	153	8%	298	16%	
15	Falls	1,823	1,970	2,116	147	8%	293	16%	
16	Seizure Disorder	3,505	3,632	3,732	127	4%	227	6%	
17	Rheumatoid Arthritis	2,076	2,195	2,293	120	6%	217	10%	
18	Schizophrenia	2,349	2,450	2,529	101	4%	181	8%	
19	Osteoporosis	821	884	936	63	8%	115	14%	
20	Bipolar	1,168	1,213	1,245	45	4%	77	7%	
21	Parkinsons Disease	523	562	596	39	7%	73	14%	
22	Immunosuppression	195	204	211	9	4%	16	8%	
	Total	140,330	148,373	155,224	8,042	6%	14,894	11%	
	Need for Help	2,740	2,955	3,159	216	8%	419	15%	
	3+ Conditions	49,169	51,792	53,987	2,623	5%	4,818	10%	
	5+ Conditions	20,973	22,294	23,436	1,321	6%	2,462	12%	



### **Chronic condition forecast (West Locality)**



		Total Number of Cases in Southampton			Change vs 2022				
		2022	2025	2028	2025	(%)	2028	(%)	
1	Hypertension	10,601	11,168	11,614	567	5%	1,013	10%	
2	Diabetes	4,676	4,893	5,051	216	5%	375	8%	
3	AvgFraility	4,818	5,035	5,189	217	5%	371	8%	
4	Renal Failure	2,047	2,193	2,325	146	7%	278	14%	
5	Isc. Heart Conditions	2,158	2,295	2,412	138	6%	255	12%	
6	Persistent Asthma	5,258	5,420	5,495	163	3%	238	5%	
7	COPD	2,206	2,333	2,435	127	6%	228	10%	
8	Hyperthyroidism	2,403	2,514	2,594	111	5%	191	8%	
9	Heart Failure	1,056	1,127	1,188	71	7%	132	13%	
10	Learning Disability	1,881	1,960	2,007	78	4%	125	7%	
11	AMD	867	931	990	64	7%	123	14%	
12	Glaucoma	1,058	1,125	1,181	67	6%	123	12%	
13	Lower Back Pain	1,756	1,825	1,869	69	4%	113	6%	
14	Dementia	570	617	661	47	8%	91	16%	
15	Falls	579	622	664	43	7%	85	15%	
16	Rheumatoid Arthritis	665	698	722	33	5%	57	9%	
17	Seizure Disorder	1,082	1,114	1,130	32	3%	48	4%	
18	Schizophrenia	738	764	779	26	4%	41	6%	
19	Osteoporosis	263	281	297	19	7%	34	13%	
20	Parkinsons Disease	168	179	189	11	7%	21	13%	
21	Bipolar	367	378	383	12	3%	16	4%	
22	Immunosuppression	64	66	67	2	3%	4	6%	
	Total	44,680	46,917	48,603	2,237	5%	3,922	9%	
	Need for Help	2,740	2,955	3,159	216	8%	419	15%	
	3+ Conditions	15,628	16,346	16,862	718	5%	1,234	8%	
	5+ Conditions	6,726	7,101	7,398	375	6%	672	10%	



### Chronic condition forecast (North & Central Locality)



		Total Num	ber of Cases in Sou	uthampton			Change vs 2022		
		2022	2025	2028	2025	(%)	2028	(%)	
1	Hypertension	8,977	9,844	10,648	867	10%	1,671	19%	
2	Diabetes	4,127	4,492	4,830	365	9%	704	17%	
3	AvgFraility	4,810	5,164	5,493	354	7%	683	14%	
4	Persistent Asthma	5,751	6,096	6,409	345	6%	658	11%	
5	Isc. Heart Conditions	1,819	2,004	2,175	185	10%	356	20%	
6	Hyperthyroidism	2,177	2,360	2,533	183	8%	356	16%	
7	COPD	1,822	2,008	2,175	186	10%	353	19%	
8	Renal Failure	1,799	1,978	2,150	179	10%	351	20%	
9	Learning Disability	1,861	1,999	2,122	138	7%	260	14%	
10	Lower Back Pain	1,746	1,870	1,987	125	7%	241	14%	
11	Heart Failure	917	1,008	1,094	91	10%	178	19%	
12	Glaucoma	911	1,001	1,082	90	10%	172	19%	
13	AMD	767	845	919	77	10%	151	20%	
14	Seizure Disorder	1,182	1,250	1,313	68	6%	132	11%	
15	Falls	504	556	606	52	10%	102	20%	
16	Dementia	521	573	623	52	10%	102	20%	
17	Rheumatoid Arthritis	599	652	699	52	9%	100	17%	
18	Schizophrenia	752	803	851	51	7%	100	13%	
19	Bipolar	379	403	425	23	6%	45	12%	
20	Osteoporosis	223	247	267	23	10%	43	19%	
21	Parkinsons Disease	143	158	171	15	10%	28	20%	
22	Immunosuppression	56	60	65	4	8%	9	16%	
	Total	41,421	44,906	48,136	3,484	8%	6,715	16%	
	Need for Help	2,740	2,955	3,159	216	8%	419	15%	
	3+ Conditions	14,706	15,884	16,977	1,178	8%	2,271	15%	
	5+ Conditions	5,933	6,479	6,984	546	9%	1,051	18%	



### **Chronic condition forecast (East Locality)**



		Total Num	ber of Cases in Sou	uthampton			Change vs 2022		
		2022	2025	2028	2025	(%)	2028	(%)	
1	Hypertension	13,131	13,732	14,234	600	5%	1,103	8%	
2	AvgFraility	5,756	5,974	6,154	218	4%	398	7%	
3	Diabetes	5,691	5,910	6,087	219	4%	396	7%	
4	Renal Failure	2,603	2,767	2,925	165	6%	323	12%	
5	Isc. Heart Conditions	2,722	2,874	3,007	152	6%	286	10%	
6	COPD	2,758	2,897	3,008	139	5%	250	9%	
7	Persistent Asthma	6,032	6,170	6,257	138	2%	225	4%	
8	Hyperthyroidism	2,907	3,020	3,114	113	4%	206	7%	
9	Heart Failure	1,334	1,413	1,487	79	6%	153	11%	
10	AMD	1,105	1,179	1,250	74	7%	145	13%	
11	Glaucoma	1,329	1,403	1,466	74	6%	137	10%	
12	Learning Disability	2,223	2,298	2,350	75	3%	127	6%	
13	Lower Back Pain	2,069	2,134	2,184	65	3%	114	6%	
14	Falls	741	792	846	52	7%	106	14%	
15	Dementia	736	789	841	53	7%	105	14%	
16	Rheumatoid Arthritis	811	845	872	34	4%	60	7%	
17	Seizure Disorder	1,242	1,269	1,288	27	2%	47	4%	
18	Schizophrenia	859	883	899	24	3%	40	5%	
19	Osteoporosis	335	356	373	20	6%	38	11%	
20	Parkinsons Disease	212	225	236	13	6%	24	11%	
21	Bipolar	421	431	437	10	2%	15	4%	
22	Immunosuppression	76	78	80	2	3%	4	5%	
	Total	54,385	56,706	58,643	2,322	4%	4,258	8%	
	Need for Help	2,740	2,955	3,159	216	8%	419	15%	
	3+ Conditions	18,835	19,562	20,148	726	4%	1,313	7%	
	5+ Conditions	8,314	8,714	9,054	400	5%	740	9%	





# Need for home care / physical support



- Need defined as unable to carry out 5 or more activities of daily living (ADL)<sup>1</sup>
- National data is available from Health Survey for England (HSE)

ADLs	Instrumental ADLs
Getting up and down stairs	Shopping for food
Having a bath or shower	Doing routine housework or laundry
Dressing or undressing	Getting out of the house
Getting in and out of bed	Doing paperwork or paying bills
Getting around indoors	
Taking medicine	
Using the toilet	
Eating, including cutting up food	
Washing face and hands	

Need defined as being unable to carry out the activity on own i.e. • *"I can only do this with help from someone"* 

southampton

dataobserv

or

"I cannot do this"

<sup>1</sup> Bolton, J. Predicting and managing demand in social care. Discussion paper. April 2016. Oxford Brooks University Institute of Public Care.





• Using HSE data a national model of need for help with 5 or more activities of daily living (ADL) was developed

Chose predictive variables also available on ACG dataset. These included: age, sex, deprivation quintile, normalised number of chronic conditions and smoking status (yes/no)

• National model equation applied to Southampton ACG data 2017

To predict probability of need for help in Southampton by age band

- Combined with HCC population forecasts to produce counts of people for each year between 2022 and 2028
- This is considered to be the **underlying** demand in the population

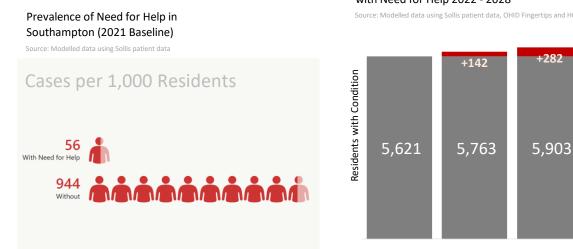


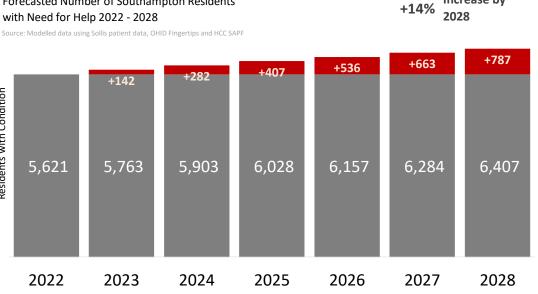
# Need for Help with 5 or More ADL

Increase by

Forecasted Number of Southampton Residents







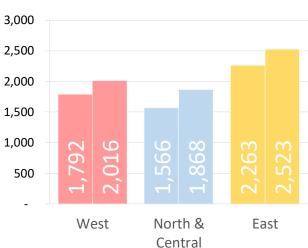
#### Forecasted Southampton Residents with Need for Help by Locality (2022 vs 2028)

Condition

with

Residen

Source: Modelled data using Sollis patient data and HCC SAPF Population Forecast



#### Forecasted Southampton Residents with Need for Help by Age-Band (2022 vs 2028)

