

The London Borough of Hammersmith & Fulham

Older People's Needs Assessment 2024

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1. EXECUTIVE SUMMARY

In this needs assessment, we outline the older population (people aged 65 years and over) in Hammersmith & Fulham (H&F) and examine factors affecting their health and social care needs.

The older population

Hammersmith & Fulham is home to **18,983 residents aged 65 years and older** and has one of the lowest proportions of older people within its total population (10%), ranking as the joint fifth lowest in London. However, this has increased by 16% since 2011 when the figure was 16,413. The older population in H&F is predicted to further increase by 36% by 2032. This will be a driver of demand for health and social care.

Healthy life expectancy is worked out using both self-reported health status and mortality rates. Healthy life expectancy at 65 years in H&F for both men (11.2 years) and women (11.3 years) is statistically similar to the London averages of 10.3 years for men and 11.2 years for women. Nationally, tobacco poses the greatest risk, making the largest contribution to years lost for both sexes followed by high body mass index, high cholesterol and high blood pressure.¹

Of the residents who classify themselves as **disabled**, 28% are aged 65 years and above. Almost a quarter (24%) of older people in H&F were paid the Disability Living Allowance (DLA) in 2021/22. **Arthritis** was the main disabling condition for almost a third (29%) of these individuals but almost a third (32%) of older people receiving DLA stated 'Other' as their main disabling condition. One form of arthritis, osteoarthritis, is likely to have an impact on a person's overall wellbeing and ability to live independently due to the complications associated with the disability. These include, joint deformity, functional limitation (e.g. risk of fall, ability to climb stairs, writing, opening jars etc.).²

Hammersmith & Fulham is home to 2,140 armed forces veterans, with 38% aged 65 years and older. According to the Census 2021, a higher proportion of veterans than non-veterans aged 70 years and over provided unpaid care in England and Wales.³ Veterans are also more likely to report bad or very bad general health than non-veterans.⁴ These two factors should be an important consideration for NHS and local authorities when assessing the needs of the local unpaid care population and the 2,140 veterans living in H&F.

The majority of people being **cared for through unpaid care in according to the H&F Survey of Adult Carers 2022 results** were older people (54%), but older people

¹ [Understanding the drivers of healthy life expectancy: report - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/91222/Understanding_the_drivers_of_healthy_life_expectancy_report.pdf)

² [Complications | Background information | Osteoarthritis | CKS | NICE](#)

³ [UK armed forces veterans, health and unpaid care, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/people-population/military-armed-forces/veterans/health-and-unpaid-care)

⁴ [UK armed forces veterans, health and unpaid care, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/people-population/military-armed-forces/veterans/health-and-unpaid-care)

made up only 4% of recipients of the Carer's Allowance in 2022.⁵ This is because when people reach state pension age, they cannot claim the full Carer's Allowance and their State Pension at the same time.⁶ Unpaid care provision is generally higher in the north of the borough than the south.⁷

The majority of older people (47%), currently live in the south of the borough, which is **wealthier** than the north. Older people from **ethnic minority backgrounds** make up less than a third (27%) of the older persons' population in H&F, and older people from ethnic minority backgrounds are more likely to live in the north of the borough.

The majority of those over 60, who experience **income deprivation** live in the north of the borough. This suggests that older people from ethnic minority backgrounds are more likely to experience deprivation than White older people. Of the older population in H&F, 5% have **difficulties speaking English**, so this cohort may have challenges accessing vital services emphasising the importance of providing information in different languages, for example via GPs, hospitals, health centres, family hubs and community centres.

Wider determinants of health

In terms of the wider determinants of health for older people in Hammersmith & Fulham, in 2021, only 3% of the economically active population were aged 65 years and older. This accounts for 17% of all people aged 65 years and over in H&F.

The proportion of older people who are economically active in H&F has increased dramatically between 2011 and 2021, with a 454% increase for men and 770% increase for women. This has been increasing across the UK, in 2000 people aged 65 and over made up 5.2% of the workforce, in 2023 the ONS Labour Force Survey put the figure at 11.6% nationally.⁸

A higher proportion of older people (60 years old and above) are income deprived in Hammersmith & Fulham, (25.6%), compared to England (14.2%). There are no equivalent data available for London to assess if this is in line with our statistical neighbours. Income deprivation for older adults is greatest in the north of the borough, and this is true across all age groups. Poorer health is generally higher in the north of the borough than the south and disability is generally higher in the north and central sub area of the borough than in the south.⁹ This demonstrates the impact income deprivation has on poorer health outcomes.

In Hammersmith & Fulham, 11.3% of households were in fuel poverty under the government definition in 2021 – this compares to 13.4% nationally, and 11.9% across London. In 2019/20, the proportion of older people receiving winter fuel payments was

⁵ Department for Work and Pensions, Carer's Allowance. Stat-Xplore.

⁶ Carer's Allowance: Eligibility - GOV.UK (www.gov.uk)

⁷ Census 2021 - Health in H&F (lbhf.gov.uk)

⁸ Work | The State of Ageing 2023-24 | Centre for Ageing Better (ageing-better.org.uk)

⁹ Census 2021 - Health in H&F (lbhf.gov.uk)

87.9%, which is lower than in London (90%) and England (94.1%). This combined with the fact that H&F has higher than average numbers of older people experience income deprivation, suggests that there are eligible older people in the borough who are **not receiving winter fuel payments**.

Fuel poverty also varies hugely across the borough, with fuel poverty rates reaching close to 1 in 5 households in the north of the borough, whilst being closer to 1 in 20 in more affluent areas in the south of the borough. Cold homes can increase the prevalence of minor illnesses such as cold and flu, and they can make pre-existing conditions such as asthma and arthritis worse, which puts older people at greater risk as they are more likely to have arthritis and are more at risk of ill health from seasonal viruses than younger adults.¹⁰ For a more detailed analysis of fuel poverty in H&F please see the [H&F 2030 Fuel Poverty Strategy](#).

It is estimated that in 2023, 28% of older adults in H&F were living alone, of which 4% were aged 85 years and over. This is predicted to increase to 35% and 6% respectively, by 2033. Living alone and lack of a support network are factors contributing to feelings of loneliness, a social determinant of poor health.¹¹ Loneliness is an issue in all population groups and ages but especially in older people because of loss of friends, family, mobility or income. Loneliness is very harmful to health. It has been linked to the onset of dementia (Holwerda and other authors, 2012) and is associated with depression. It increases as people become less able to undertake routine activities. People who are lonely or isolated are more likely to be admitted to residential or nursing care (Social Care Institute for Excellence, 2011).

Older age is not a risk factor that increases an individual's risk of mental illness, but it is an important determinant of wider health. More information on mental health in H&F can be found in our [H&F Mental Health Factsheet \(lbhf.gov.uk\)](#).

The 65+ age group has the lowest prevalence of current smokers (7.8%) but the highest number of ex-smokers (33.5%).¹² For more information on the population who smoke in H&F please see [H&F smoking factsheet \(lbhf.gov.uk\)](#).

Older people are less likely to use substances than those aged than those aged 35-64, therefore substance misuse services are normally targeted at a younger cohort. However, this does not mean that older people do not have substance misuse issues. Providers and practitioners interacting with older people should still be informed about where people can get support and be diligent in spotting any signs of misuse.

Health conditions

The estimated **dementia diagnosis rate** for Hammersmith & Fulham was 61.3% in April 2023. This gives an estimated total number of people living with dementia in the borough (diagnosed and undiagnosed) of approximately 1,419. According to the latest

¹⁰ [H&F 2030 Fuel Poverty Strategy](#).

¹¹ [Measuring National Well-being - Office for National Statistics \(ons.gov.uk\)](#)

¹² [H&F smoking factsheet \(lbhf.gov.uk\)](#).

mortality data from ONS, Dementia and Alzheimer's disease was the third most common cause of death in people aged 65 years and over, accounting for a mortality rate of 38 per 10,000 for this population. Improving support for people with dementia and their carers', along with rates of dementia diagnosis for H&F as set out in the [Dementia Strategy 2021-2024](#). For more detailed information on Dementia in H&F please read our [H&F Dementia Report - September 2021 \(lbhf.gov.uk\)](#).

Use of services by older people

Health

The number of primary care consultations per patient has increased by 60% in Hammersmith & Fulham in the last decade in those aged 85+, which is the highest increase of any age group.¹³

In 2022 nearly one third (33%; 12,997) of the hospital inpatient spells in Hammersmith & Fulham were residents aged 65 years and over, of which 16% (2,061) were aged 85 years and over.¹⁴ In 2022 there were 39,343 inpatient hospital spells by North West London Integrated Care Board registered patients who are residents of Hammersmith & Fulham.¹⁵ This is an increase of 16% from the previous year across all age groups.

Despite the increasing inpatient rates, the rate of emergency hospital admissions across all age groups for Hammersmith & Fulham residents has decreased in the past five years from 7,332 per 100,000 population in 2018 to 6,416 per 100,000 population in 2022. Compared to all other age groups the rate of emergency hospital admissions is highest amongst those aged 85 years and above and has fallen from 7,212 per 10,000 population in 2018 to 5,090 per 10,000 population (Figure 22).¹⁶

In 2022/23 Hammersmith & Fulham had a **high rate of A&E admissions due to falls** for those 65 and over (2,469 per 100,000) which is above the London (2,071 per 100,000) and England (1,933 per 100,000).¹⁷ In London, emergency hospital admissions due to falls for people aged 65 and over have decreased since 2010/11 (2,280 per 100,000) but peaked in 2018/19 at (2,477 per 100,000).¹⁸

Though London rates have come down since 2018/19, H&F rates have not and were 2,390 per 100,000 in 2018/19, which was below the London average. This indicates that there are greater preventative measures H&F could take to reduce the rate of falls in older people and the borough in line with the London average.

¹³ Whole Systems Integrated Care (WSIC). De-identified database. Accessed May 2022.

¹⁴ Whole Systems Integrated Care (WSIC). De-identified database. Accessed May 2022.

¹⁵ 'An ICB is a partnership responsible for ensuring that the NHS in its area can meet local need. ICBs have members from NHS Trusts, Local Authorities and General Practitioners.' [How Will Integrated Care Systems Work? | The King's Fund \(kingsfund.org.uk\)](#)

¹⁶ Whole Systems Integrated Care (WSIC). De-identified database. Accessed May 2022.

¹⁷ [Fingertips | Department of Health and Social Care \(phe.org.uk\)](#)

¹⁸ [Fingertips | Department of Health and Social Care \(phe.org.uk\)](#)

Care

The number of older people offered **reablement services** has fallen from 4.8% in 2014/15 to 1.6% in 2021/22, and H&F was 2.7% below the London average (4.3%) in 2021/22. This fall in service in 2019/20 may be due to the changes to service delivery during the pandemic, as many social care services reduced their face-to-face delivery to reduce infection risk to the public and social care workers. Indeed, the trend in Hammersmith & Fulham appeared to be rising again in 2022/23.

H&F ranks 9th across London for the proportion of older people who were still at home 91 days after being discharged from hospital into a reablement service. This means we perform favourably and are in the 2nd quartile against other respective local authorities for this measure. Hammersmith & Fulham's Reablement Service is rated Outstanding by the Care Quality Commission (CQC).

Since the pandemic the number of older people receiving a short-term service followed by no ongoing support has decreased in H&F from 72.6% in 2019/20 to 48.3% in 2022/23 and was below the London average (73.4%) in 2019/20 and (73.8%) for 2022/23 meaning we rank 4th lowest across London. For this measure, we would want to be in-line London, closer to our performance pre 2019/20. The increase could be due to social care needs increasing during the pandemic as outdoor exercise was limited, there was limited access to face-to-face services, and there was increased pressure on health and care services.

Older people in Hammersmith & Fulham make up the majority (66%) of **long-term social care clients**, and a small minority (1%) of these older people have a learning disability.

In April 2023, **older people who self-funded** either a nursing or residential placement accounted for only 7% of those in nursing or residential placements in H&F. Nationally for care home placements only, the older population self-funding was estimated at 48.9% for 2022/23.¹⁹

One reason for the **low numbers of self-funders** compared to the national average could be that the borough's policy for not charging for homecare enables people to stay at home for longer, therefore preventing the demand for a residential placement. We also perform well on reablement, as set out above, which may also contribute to delaying the demand for paid care services.

Additionally, older people who make their own arrangements either in or out of the borough to **self-fund their own care home placement** may not arrange via adult social care, which would mean that their placement is not recorded by the local authority.

¹⁹ [Care homes and estimating the self-funding population, England - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

Hammersmith & Fulham is lower than the London average for use of direct payments for people aged 65 years and over. The figure for H&F is 15% and the London average (17%). Direct payments give individuals **more choice and control over the type of care they receive and who provides it**. They were intended as a key route to reform of social care in the Care Act 2014, therefore we want to increase usage. To do this we have a Direct Payments Steering Group which is co-chaired by residents to promote the value of taking a direct payment.

Safety

The total number of Safeguarding concerns in Hammersmith & Fulham in 2021/22 was 2,235, rising by 110% from the previous year (1,065 in 2020/21). This rise could be explained by people having more access to face-to-face services post pandemic and therefore more safeguarding concerns being detected. Hammersmith & Fulham had a 39% rate of conversion of enquiries/concerns to investigations. This is similar to the London rate of 37% but is lower than the 45% rate for the borough in 2020/21.

There has been a 22% increase in violent crimes against older people aged above 61 between 2018-2022. The age specific rate of violent crime against a person is highest amongst people 25-30 years.

Data summary of the key findings

Key Finding	Source
18,983 residents are aged over 65 years in 2021. (Up from 16,413 in 2011; 16% increase).	ONS 2021 and 2011 census
The 65+ population is predicted to increase by 36% in total from 22,780 in 2023 to 30,882 in 2033.	ONS 2011 Census
Majority (47%; 8,974/18,973) of older people currently live in the South of the borough.	ONS 2021 Census
The largest ethnic minority group amongst older people is Black, Black British, Black Welsh, Caribbean or African (11%; 2,156).	ONS 2021 Census
2,140 armed forces veterans live in Hammersmith and Fulham, 38% (819/2,140) are aged 65 years and older.	ONS 2021 Census
Healthy Life Expectancy for males (11.2 years) and females (11.3 years) in Hammersmith & Fulham are statistically similar to the London average figures of 10.3 years for males and 11.2 years for females.	OHID, Productive Healthy Ageing Profile.
28% (6,160/22,219) of those who are disabled under the equality act are aged 65 years and above.	ONS 2021 Census
Arthritis was the main disabling condition for almost a third (29%) of older people paid Disability Living Allowance.	DWP 2023
In 2021/22 only 4% of recipients of carer's allowance were aged 65 years and above.	DWP 2023
In 2022, the carer's survey results showed that majority of people being cared for were aged 65+ (54%; 101/187).	LBHF ASC BI Survey of Adult Carers in England 2021/2022
17% (3,256/18,983) of people aged 65 years and over were economically active in 2021.	ONS 2021 Census
25.6% (6,413) of older adults aged 60+ are income deprived. Majority of adults over 60 years or over who experience income deprivation live in the North of the borough.	MHCLG. English indices of deprivation 2019.
It is estimated that in 2023, 28% of the older adults aged 65 years and over are living alone.	ONS. Household projections for older people. 2020.
In Hammersmith & Fulham, 11.3% of households are in fuel poverty under the government definition in 2021 – this compares to 13.4% nationally, and 11.9% across London.	Government sub-regional fuel poverty statistics - Sub-regional fuel poverty 2022
The estimated dementia diagnosis rate for Hammersmith & Fulham is 61.3% in April 2023. This gives an estimated total number of people living with dementia in the borough (diagnosed and undiagnosed) of approximately 1,419.	NHS Digital. Recorded Dementia Diagnoses April 2023.

In 2020/21 there was a total of 375 emergency hospital admissions due to falls in Hammersmith & Fulham for people aged 65 years and over, this is equivalent to a rate of 1,845 per 100,000 population.	OHID, Productive Healthy Ageing Profile
Since 2014/15 the proportion of older people offered reablement services in Hammersmith & Fulham has fallen from 4.8% (144/2,995) to 1.6% (51/3,185) in 2021/22.	ASCOF 2B2
The majority (66%; 1,805/2,716) of long-term social care clients are older people aged 65 years and over, of which 1% (24/1,805) have learning disabilities.	MOSAIC SALT 2021/22
The latest annual figure from 2021/22 shows that 85% (1,423/1,667) of older adults receiving long term support are within the community setting.	MOSAIC SALT 2021/22
In 2021/22, 15% (213/1,423) of clients aged 65 years and over were accessing long-term support via direct payments.	MOSAIC SALT 2021/22
The total number of Safeguarding concerns in Hammersmith & Fulham in 2021/22 was 2,235.	LBHF ASC BI Service. Safeguarding Adults Benchmarking Report. 2021-22
In 2021/22 there were 370 Deprivation of Liberty Safeguarding (DoLS) applications received. 82% (220/270) of the applications were granted.	Hammersmith & Fulham ASC BI Service. DoLS Benchmarking Report. 2021-22

2. INTRODUCTION

2.1 Purpose of this document

The needs analysis focuses on the older population (people aged 65 years and over) in Hammersmith & Fulham and examines the factors affecting older people's health, wellbeing, and social care needs.

The report is organised under the following broad theme headings:

- **The older population (chapter 3)**

The number and demographic characteristics of older people living in Hammersmith & Fulham and how this has changed in recent years.

- **Wider determinants of health (chapter 4)**

The factors that are closely linked to health and wellbeing, such as the physical and social environment, income and deprivation.

- **Health conditions (chapter 5)**

The number of older people with long term conditions and the main causes of death.

- **Service use (chapter 6 and 7)**

The number of older people receiving health and social care, and access to services.

- **Safety (chapter 8)**

The number of adult safeguarding concerns, deprivation of liberty applications and number of older victims of violence.

- **Summary and Recommendations (chapter 9)**

Overall summary of the needs assessments highlighting implications for services and recommendations with an overview of current work in progress.

3. THE OLDER POPULATION

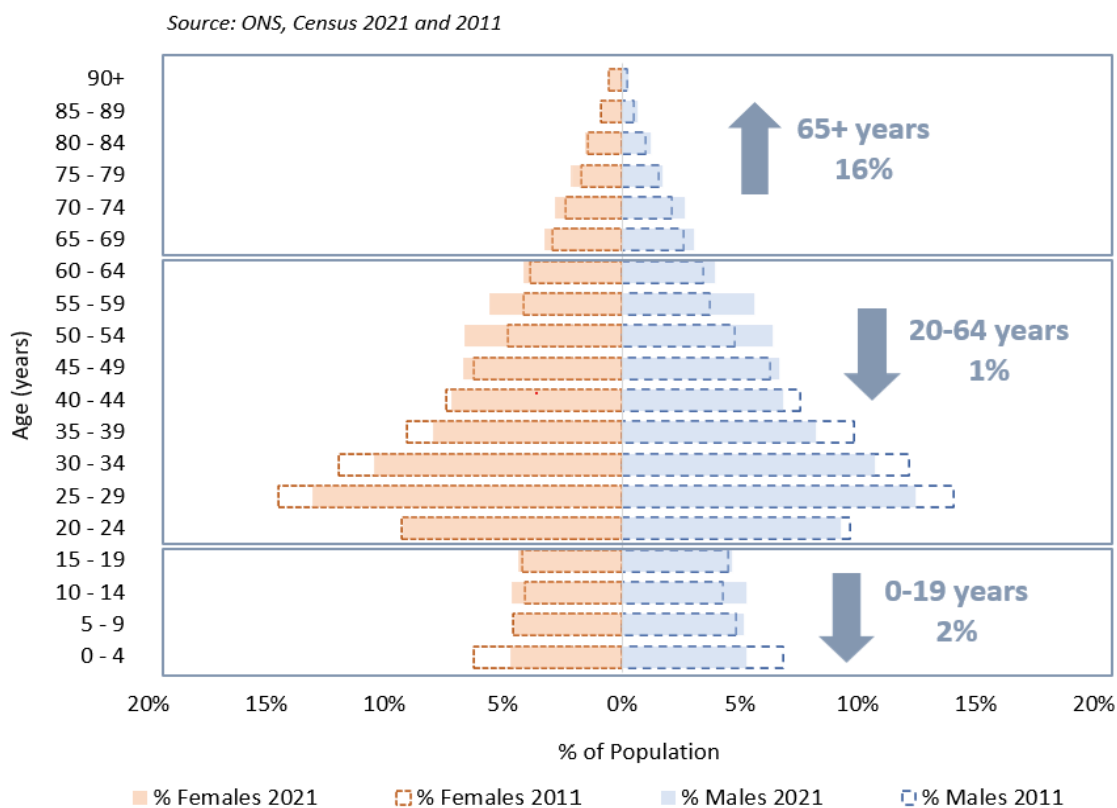
3.1. Change in the number of older people

According to the Census in 2021 the number of older people aged 65 years and over living in Hammersmith & Fulham is approximately **18,983**.²⁰ The size of this age group has **increased** by **16%** since the 2011 census, when the number of older people was approximately 16,413. Conversely, the 20-64 and 0-19 age groups have decreased by 1% and 2%, respectively since 2011 (Figure 1).

We define the Ageing Well population as people aged over 65. Older age is generally considered to be 65 years and above, and then subdivided into young-old (65 to 74), old (75 to 84) and old-old (85 and over).

In **2021**, the population size of Hammersmith & Fulham is 183,153 this is a 0.4% increase since 2011 when the population size was 182,493.

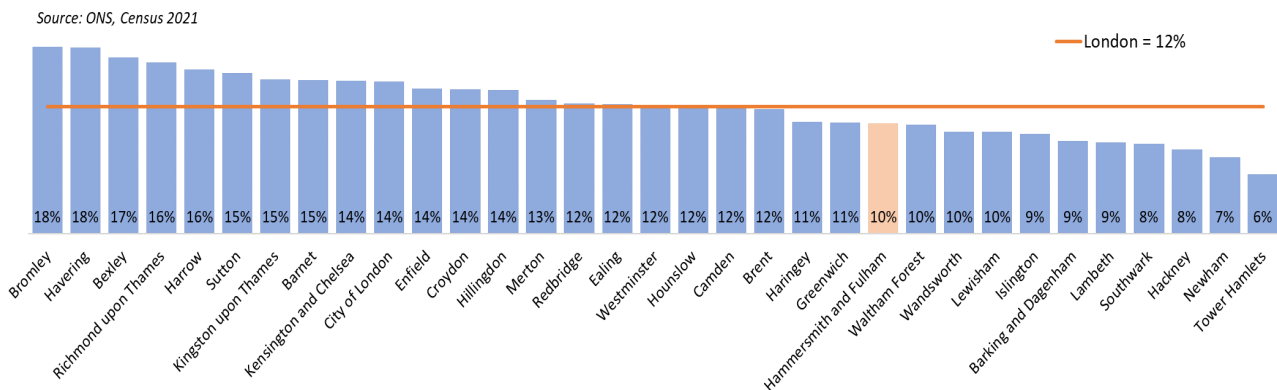
Figure 1. H&F age and gender profile in 2011 and 2021, and percentage change in population size by broad age groups.



²⁰ ONS, Census 2021 and 2011.

Hammersmith & Fulham has one of the lowest proportions of older people within its total population (10%), ranking as the joint fifth lowest in London with other boroughs including Waltham Forest, Wandsworth, and Lewisham. This is similar to the London figure of 12% (figure 2).

Figure 2. Proportion of people aged 65 years and over in London boroughs.

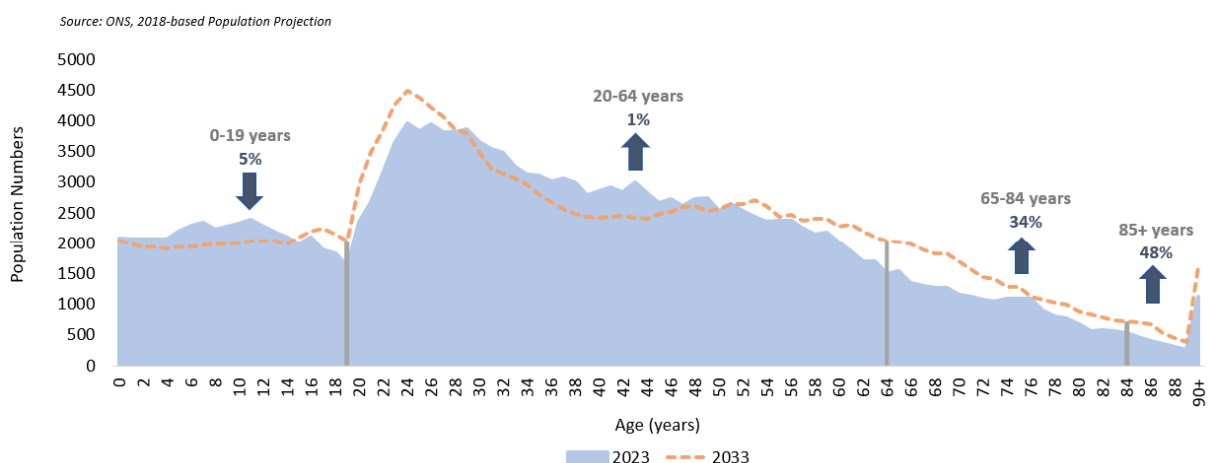


3.1.1 Predicted population growth

At the time of writing this report the projected population growth data derived from the Census 2021 figures, were not yet available. As a result, the ONS 2018-based population projections, which are based on the Census 2011 data has been used, to gain insight into the expected changes in the Hammersmith & Fulham population in the next decade.

The population of over 65s is the projected number of older people in 2023, is 193,202. This is projected to increase to 201,089 by 2033. **The 65+ population is predicted to increase by 36% in total from 22,780 in 2023 to 30,882 in 2033.** Those aged 85 years and over, living in the borough will increase by 48% from 2,939 in 2023 to 4,362 in 2033 (figure 3).

Figure 3. Projected population change in the Hammersmith & Fulham population, 2023 and 2033.



Although 'older age' does not necessarily reflect 'functional ability', understanding the size of older population provides some basis for commissioners to plan services that meet the needs of older people now and in the future.

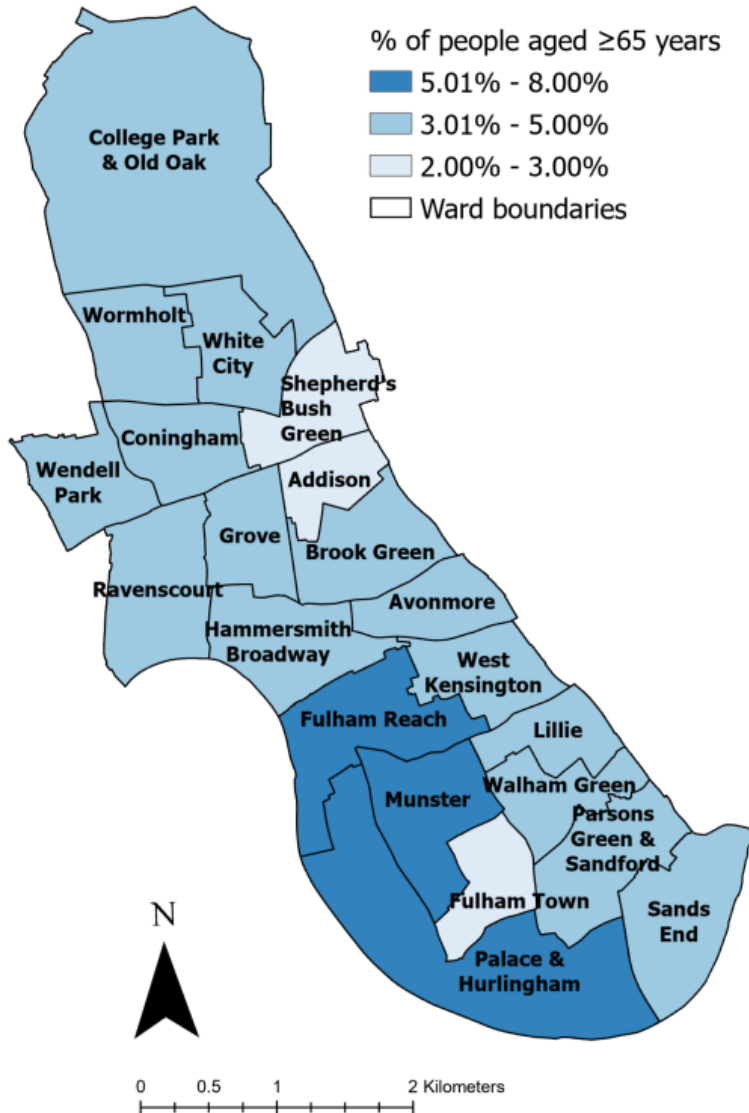
The size and age of the borough population have a huge influence on the needs and demands for healthcare and related services. Although services will be used by people of all ages, certain ages require higher levels of health care involvement. These groups include people in old age who face an increased likelihood of developing conditions.

3.1.2 Geographical distribution of older people

The Census 2021 data shows that **majority (47%; 8,974/18,973) of older people currently live in the south of the borough.** The wards with the greatest proportion of older people are Palace & Hurlingham (8%; 1,583/18,973) and Fulham Reach (8%; 1,433/18,973), both are relatively wealthier parts of the borough.²¹

Figure 4. Geographical distribution of older people aged 65 years and over across Hammersmith & Fulham wards.

²¹ ONS. Census 2021

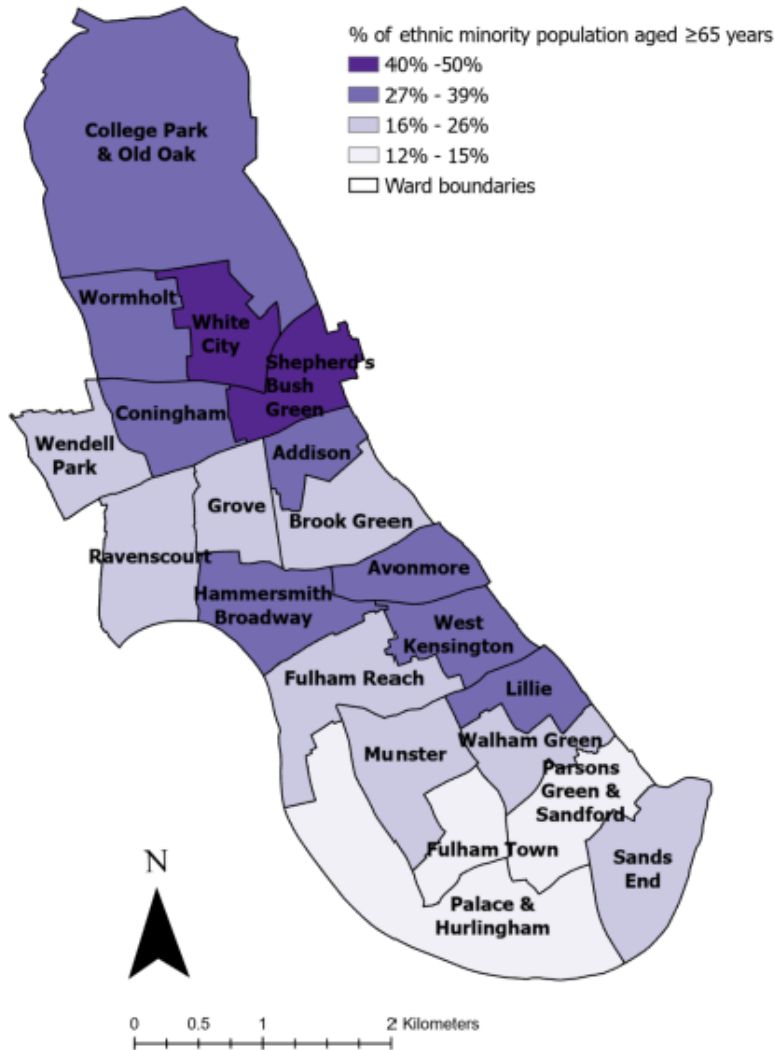


3.2. Ethnicity

As reported by the Census in 2021, **5,156** older people aged 65 years and over are from an **ethnic minority background**, comprising **27%** of the older population. **White City** and **Shepherd's Bush Green** have the highest proportions of older people from an ethnic minority background; 50% and 45% respectively. Wards in the south have the smallest proportion of older people from ethnic minority backgrounds despite having the largest proportion of older people in the borough.²²

Figure 5. Percentage of older people from ethnic minority backgrounds in each ward in Hammersmith & Fulham.

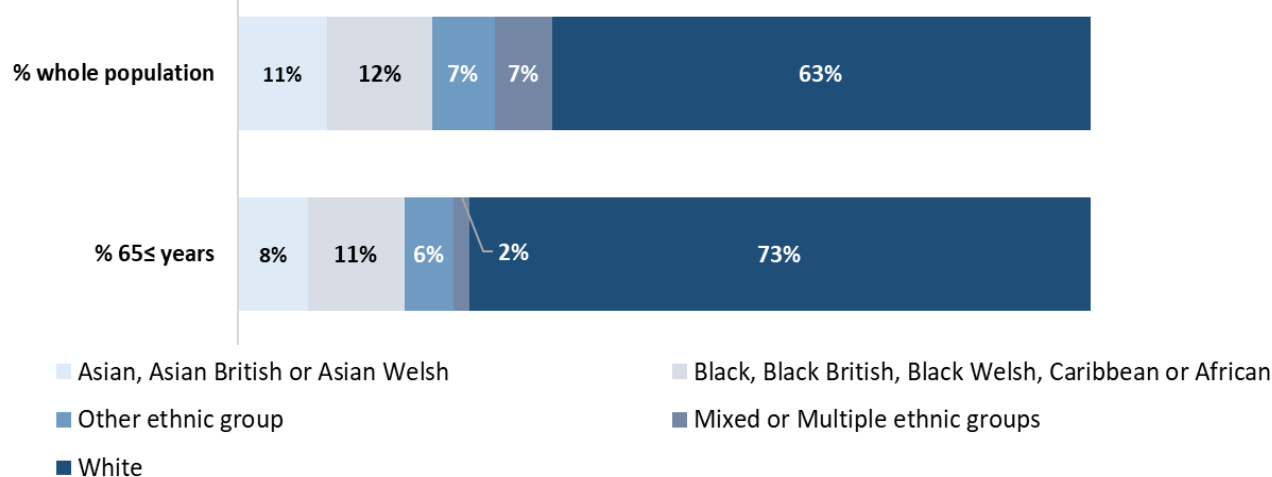
²² ONS. Census 2021



Almost three quarters of older people are White (73%; 13,837). This is larger than the proportion of White people in the overall population (63%; 115,675) in Hammersmith & Fulham. **The largest ethnic minority group amongst older people is Black, Black British, Black Welsh, Caribbean or African (11%; 2,156).**

Figure 6. Percentage of older people and whole population by ethnic group in Hammersmith & Fulham.

Source: ONS, Census 2021



The demographic profile of our older people contrasts with that of our younger residents. It is a more homogenous group in terms of ethnicity and contains higher proportions of more affluent households. Consequently, the areas with high populations of older people are different to those with high populations of younger people.

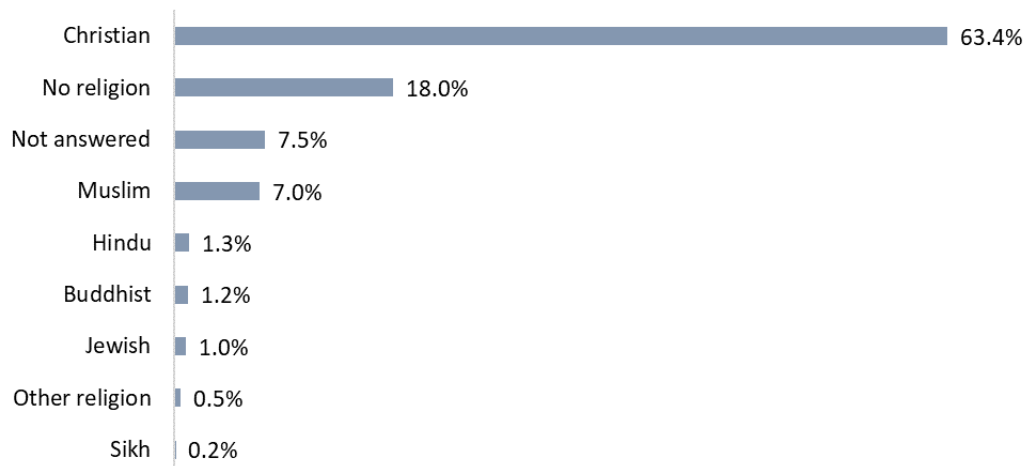
3.3. Religion

The Census 2021 survey shows that in **Hammersmith & Fulham a higher proportion (63.3%; 12,025/18,984) of older people identified as Christians**, when compared to 46% of the overall Hammersmith & Fulham population and 58% of the London-wide older adult population. The majority of Christians in the borough are aged below 65 (86%;71,655/83,680) compared to older adults (65+) in the borough (14%;12,025/83,680).

Almost a fifth (18%) of older people identified as having no religion (Figure 7), compared to 31% of the overall population and 16% of the London older adult population. Lastly, Muslims make up a sizable population within the borough at 12%, but lower than the London proportion (15%). The majority of Muslims in Hammersmith and Fulham are aged under 65 (94%;19,960/21,245), with Muslims making up only 7% (1,285/18,984) of the older adult population, as evidenced in Figure 7.

Figure 7. Percentage of older people (65+ years) by religion

Source: ONS, Census 2021



3.4

Language

Not being proficient in English can impact a person’s ability to interact, access and engage healthcare and other services, potentially worsening existing health inequalities.

At the time of the Census 2021 survey, there were 4,282 people in Hammersmith & Fulham where their first language was not English and could not speak English well or at all. This included 1,033 people aged 65+, which makes up almost 25% of those with difficulties speaking English in the borough and 5% of all older adults across Hammersmith and Fulham (1,033/18,987). As age is associated with increased co-morbidities and utilisation of healthcare services, 5% of the borough’s older population may have challenges accessing vital services due to language barriers.

3.5. Veterans

The Census 2021 survey data shows that there are **2,140 armed forces veterans** living in Hammersmith & Fulham. **38% (819/2,140) are aged 65 years and older.**

Of the older aged population in the borough, 3% (635/18,987) previously served in the armed forces and 1% (184/18,987) served in the reserved armed forces. **95% of older people have not previously served in any UK armed forces.**

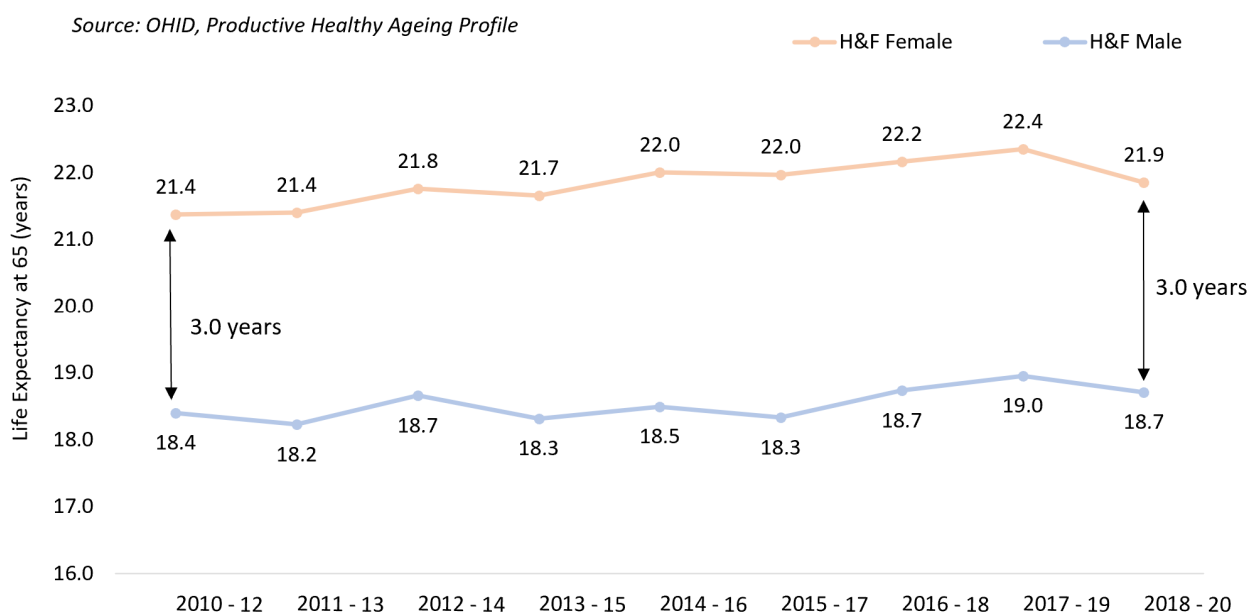
3.6. Sexual Orientation

510 people aged 65 years and older identify as Lesbian, Gay, Bisexual or Other in Hammersmith & Fulham. **This is equivalent to 3% of the older population**, and similar to the overall population (5%). The majority of older people identify as heterosexual (86%; 16,335/18,984).

3.7. Life Expectancy at age 65

The most recent set of 3-year data for life expectancy at 65 years shows that between 2017-19 and 2018-2020 life expectancy decreased for both males and females (figure 8). This was similar to the life expectancy at birth for both males and females.

Figure 8. Trends in life expectancy for males and females at age 65 years in Hammersmith & Fulham.



3.8. Healthy Life Expectancy at age 65

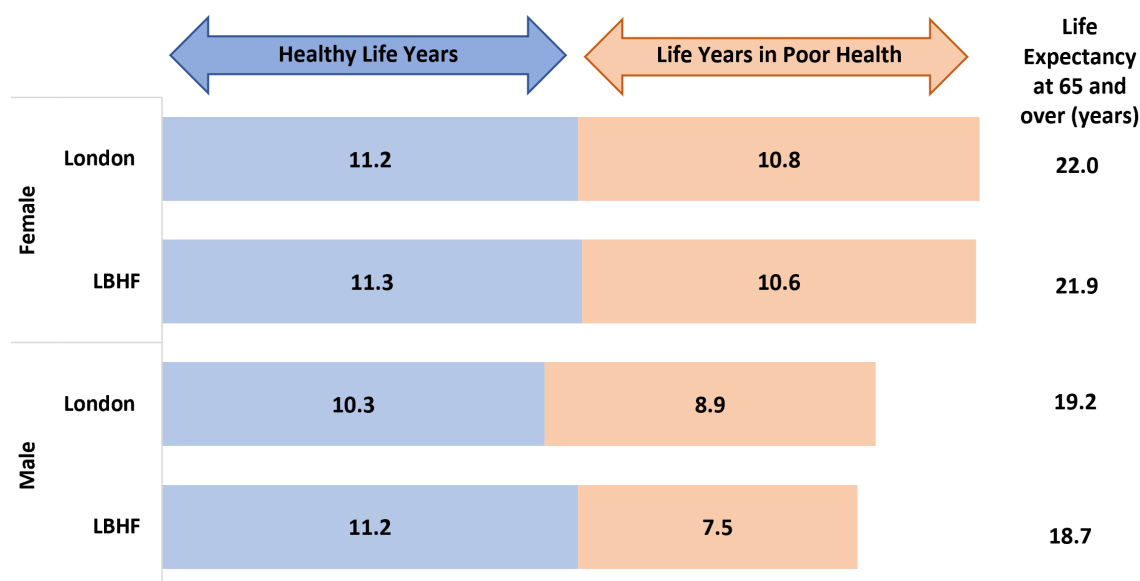
Healthy life expectancy is an estimate of the number of years a person can expect to live in good health (rather than with a disability or in poor health).

Both Life Expectancy and Healthy Life Expectancy for males and females in Hammersmith & Fulham are statistically similar to the London average figures (Figure 9). Life years in poor health is greater in females than in males for both Hammersmith & Fulham and similar to London. This can, in part, be explained due to women having higher average life expectancies than males and living longer with long-term conditions, experiencing a greater burden from mental health conditions, and greater socioeconomic disadvantages, including higher rates of poverty.

The combination of longer life expectancies and the ageing of the baby boom generation means that the population aged 65 and over is growing at a much faster rate than those under 65. It is very important to recognise that many residents of Hammersmith and Fulham have more than one health condition and consequently can have very complex health needs. People with multiple conditions use a lot of health services.

In the long term it is important to reduce the number of people with multiple conditions through prevention activity.

Figure 9. Life Expectancy and Healthy Life Expectancy at 65 years in 2018-20, LBHF and London (years)²³



3.9. Disability

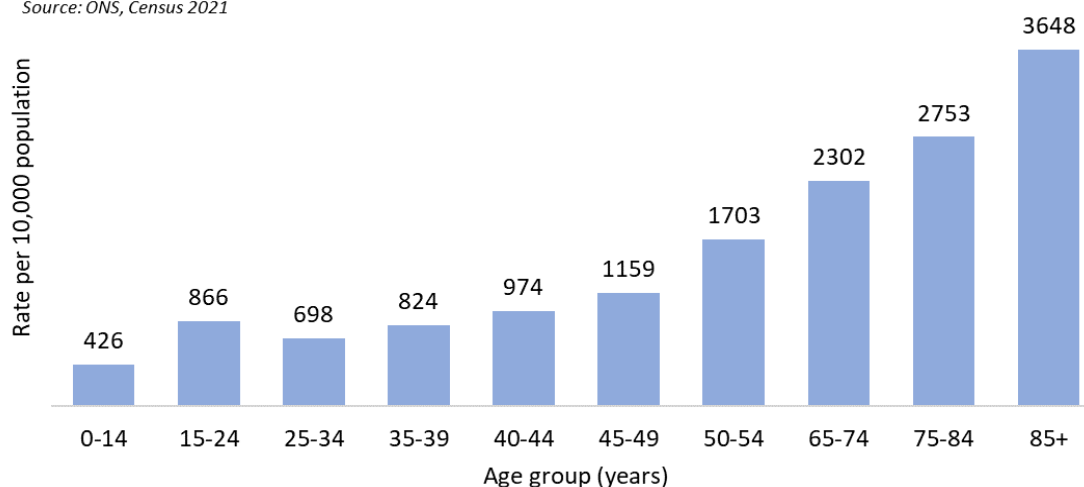
3.9.1 Census 2021 data on disability

At the time of the 2021 Census there were a total of 22,219 people who were classified as disabled under the equality act. A disability under the Act is defined as a physical or mental impairment that has a significant and long-term adverse (negative) effect on your ability to carry out normal day-to-day activities. **Of the 22,000 residents living in H&F who identify as disabled, 28% (6,160/22,219) are aged 65 years and above.** People in older age groups have higher rates of disability than compared to younger age groups, the rates of disability vary significantly by age (Figure 10). We can see an age gradient in the rates per 10,000 population of people disability in the borough, with disability rates increasing as people get older. Those aged 85 years and older have a disability rate 4 times higher than those aged 15 to 24 years old. This phenomenon can be largely explained by the ageing process which increases the likelihood of developing disabilities or long-term, life-limiting conditions.

²³ OHID, Productive Healthy Ageing Profile.

Figure 10. Age-specific rate of people in Hammersmith & Fulham who are disabled under The Equality Act (2010) in 2021.

Source: ONS, Census 2021



3.9.2 Disability Living allowance (DLA)

A total of 4,641 older people were paid Disability Living Allowance (DLA) in 2021/22 in LBHF. This is almost a quarter of the older population (24%; 4,641/18,973) in Hammersmith & Fulham. **Arthritis was the main disabling condition for almost a third (29%) of these individuals** (table 1).

Table 1. Percentage and count of disability living allowance cases in payment in LBHF by main disabling condition in persons aged 65+ years, 2021/22.²⁴

	Percentage	Count
Arthritis	29%	1327
Psychosis	8%	393
Disease Of the Muscles, Bones or Joints	7%	336
Psychoneurosis	6%	287
Back Pain	5%	253
Heart Disease	4%	206
Stroke	4%	204
Spinal Osteoarthritis	3%	150
Other	32%	1,485
Total	100%	4,641

Musculoskeletal disorders such as arthritis is one of the biggest contribution to years lived with disability in later life. Physical activity is often recommended as a treatment for age-related conditions, such as arthritis, because it can reduce stiffness in joints and improve muscle strength, which is important for maintaining functional independence. Furthermore, strength-based activities improve bone strength

²⁴ Department for Work and Pensions. Stat-Xplore. DLA: Cases in Payment. Accessed 30.01.2023.

Public Health England (PHE) and the Centre for Ageing Better. Muscle and bone strengthening and balance activities for general health benefits: in adults and older adults [Internet] (July 2018). Available from: <https://www.gov.uk/government/publications/everybody-active-every-day-a-framework-to-embed-physicalactivity-into-daily-life> (Accessed 02/10/2023).

3.9.3 Disabled Person’s Freedom Pass

The Disabled Person’s Freedom Pass is a special travel permit that provides free or discounted travel for eligible individuals with disabilities. It is issued by local authorities and is intended to help disabled people access various public transportation options.

The pass is available to individuals with a permanent disability that makes it difficult for them to travel independently. This can include physical disabilities, visual impairment, and cognitive impairments. Some boroughs also issue discretionary Freedom Passes to disabled people who do not meet the statutory eligibility criteria. Table 2 below shows a total of **4,969 residents** in Hammersmith & Fulham currently hold a disabled person’s freedom pass, of which **12% (581/4,969)** are aged 65 years and above. Of the 581 older people who hold a freedom pass **7% (43/581)** are categorised as **discretionary disabled**.²⁵

Table 2. Number of Hammersmith & Fulham residents who currently hold a disabled person’s freedom pass, February 2023.

	Under 65	65+	Total
Disabled	3,807	538	4,345
Discretionary Disabled	581	43	624
Total	4,388	581	4,969

Improving the quality of life can broadly be divided into 1) things which reduce disability and ill health, and 2) things which can be done to adapt the environment to allow an individual with a set amount of disability in older age to live as independent and enjoyable a life as possible. In general, helping people maintain health is the role of public health, and medicine (Chief Medical Officer)

3.10. Carer’s

3.10.1 Carer’s Allowance

In 2021/22, 7,344 people were receiving Carer’s Allowance (CA) in Hammersmith & Fulham. Over three times as many females (5,499) were receiving CA compared to males (1,845). **4% of all recipients (313/7,344) were aged 65 years and above, almost three quarters were female (72%; 226/344).**²⁶

3.10.2 Carer’s Survey

²⁵ London Councils. Transport & Mobility Team data request.

²⁶ Department for Work and Pensions, Carer’s Allowance. Stat-Xplore.

In 2022, the carer's survey results showed that majority of people being cared for were aged 65+ (54%; 101/187). 76% of people being cared for were living with their carer. In 2022, there was a 30% increase in carers who reported they did not receive any support from social services in the last 12 months and a 22% decrease in carers satisfaction with social services support since 2019.²⁷

There was a 21% decrease in carers being 'able to spend their time as they want' and a 31% increase in carers not doing 'anything they value or enjoy'. 63% (118/187) of carers felt they had some control over their daily lives but not enough. 57% (107/187) of carers had some social contact but not enough – this increased by 17% from 2019. The largest health effect recorded was tiredness, reported by 78% (146/187) of carers. 60% (112/187) reported disrupted sleep, and 55% (103/187) reported general stress.

4. WIDER DETERMINANTS OF HEALTH

4.1. Work, income, and deprivation

4.1.1 Economically active older people

In 2021, **3,256** people aged 65 years and over were in employment. This is 3% (3,256/98,094) of the economically active population who are in employment, and **17%** (3,256/18,983) of people aged 65 years and over.²⁸ Majority of the population who are economically inactive in Hammersmith & Fulham are older adults; **32%** (15,601/48,858).

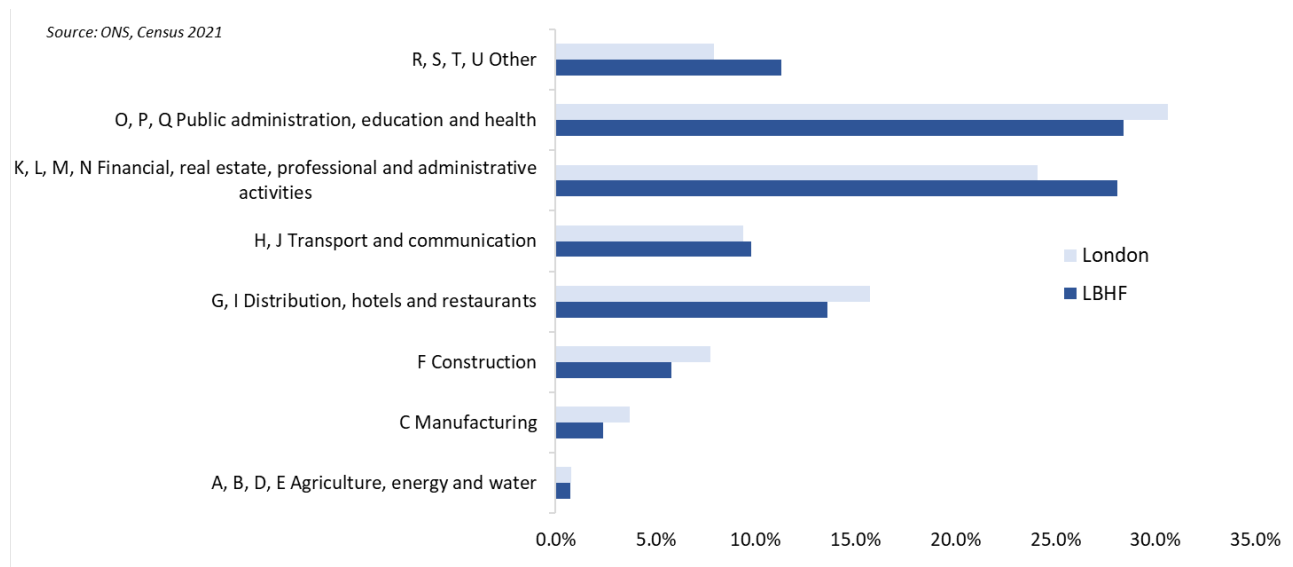
The broad industry sectors with the highest proportion of older people were:

1. Public administration, education and health – 28% (924/3,256)
2. Financial, real estate, professional and administrative activities – 28% (914/3,256)
3. Distribution, hotels, and restaurants – 14% (442/3,256)

²⁷ Hammersmith & Fulham ASC BI Service. Carer's survey. 2022

²⁸ ONS, Census 2021

Figure 11. proportion of workers aged 65 years and over in Hammersmith & Fulham vs London by broad industries.

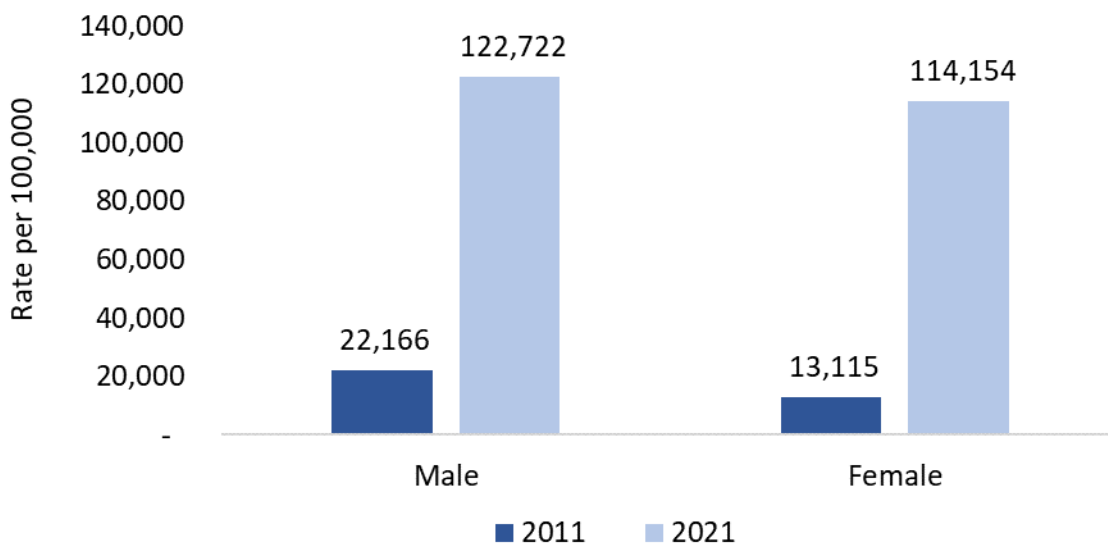


Overall, the proportion of workers aged 65 years and over in Hammersmith & Fulham by industry is similar to London. Compared to London, Hammersmith & Fulham had the highest proportion of older people working in 'financial, real estate, professional and administrative activities' (24% compared to 28%, respectively) (figure 11).

The rate of older people who are economically active at 65 years and over has increased between 2011 and 2021 for both men and women. Figure 12 shows an increase of 454% in the rate of older males economically active and an increase of 770% for the rate of older females from 2011 to 2021. The rise in economically active older people is phenomenon that is occurring across high income countries globally. There are several reasons for this:

1. People are living longer with more healthy life years resulting in them being able to remain in the workforce for longer.
2. The increase in state pension age in the UK has pushed people with lower retirement funds to work longer.
3. In recent years there has been economic pressures due to recession, and the rise in living costs has made it challenging for older people to retire comfortably. As a result, many older people are choosing to remain in the workforce to supplement their income.

Figure 12. Rate of economically active people aged 65 year and over in Hammersmith & Fulham, 2011 vs 2021.



4.1.2 Jobseeker’s Allowance

The latest data from Q4 2021/22 shows 16 people aged 65 years and over who were claiming Jobseeker’s allowance (JSA), this is 5% (16/347) of the total number of Jobseekers allowance claimants. 12% (40/347) of claimants were aged between 60-64 years and 18% (62/347) were aged between 55-59 years.²⁹

On average the number of older adults aged 65 years and over claiming JSA has remained the same since 2020/21, although the overall number of claimants of all ages has decreased by 62% from 906 in Q4 2020/21 to 347 in 2021/22.

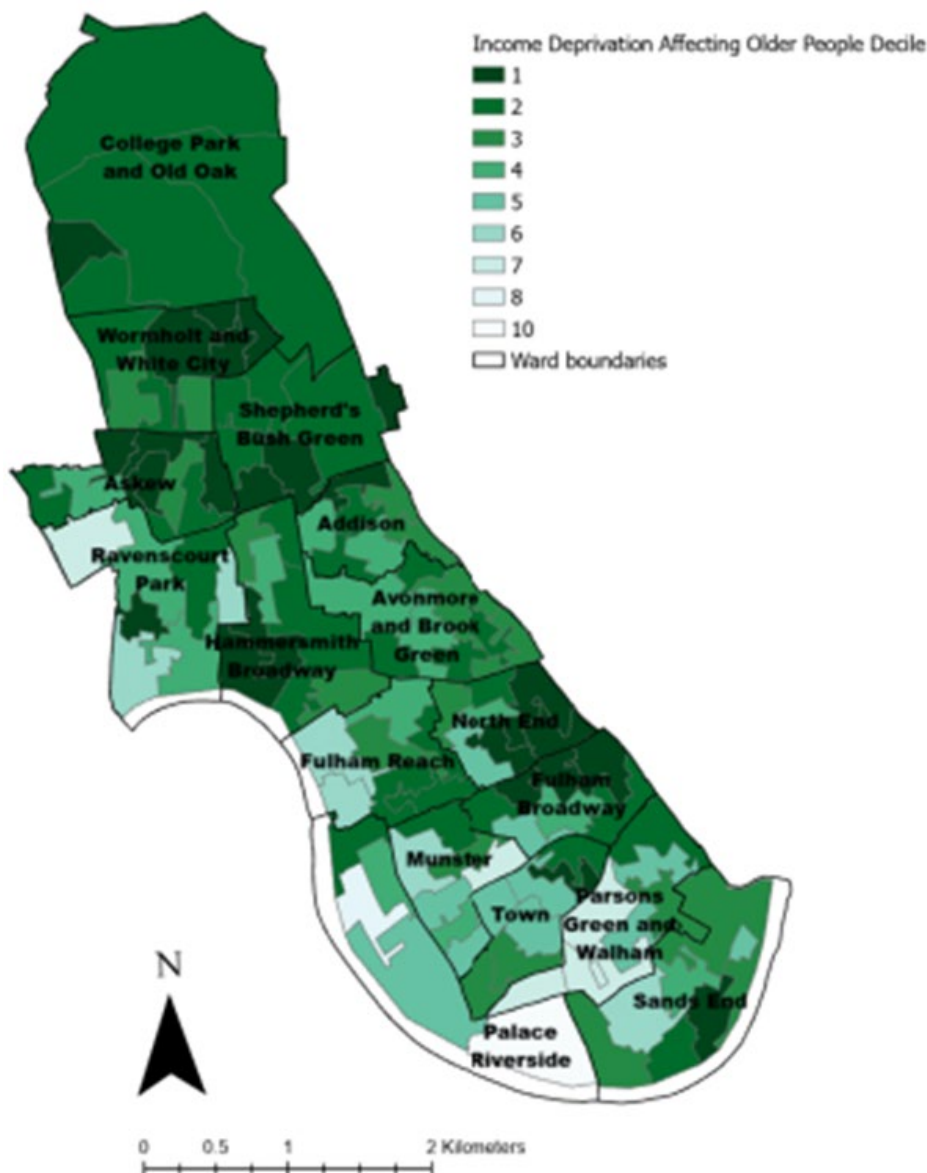
4.1.3 Income deprivation

The Income Deprivation Affecting Older People (IDAOPI) is supplementary index of the Indices of Multiple Deprivation 2019. **It is a measure of the proportion of adults aged 60 years or over who experience income deprivation.** In Hammersmith & Fulham, 25.6% (6,413) of older adults aged 60+ are income deprived, the proportion in England is 14.2% (no data is available for London) therefore, a higher proportion of older people living in Hammersmith are income deprived compared to the rest of the country. Majority of adults over 60 years or over who experience income deprivation live in the North of the borough (figure 13).³⁰ There are inequalities in the number of years lived in good health versus poorer health, with there being a strong link between deprivation and both the proportion, and the absolute, periods spent living in poorer health.

Figure 13. Income Deprivation Affecting Older People in Hammersmith & Fulham by ward.

²⁹ Department for Work and Pensions, Jobseekers Allowance. Stat-Xplore.

³⁰ Ministry of Housing, Communities & Local Government. English indices of deprivation 2019.



4.1.4 Pensions

The 2021 Family Resources Survey shows that nationally, there has been an **increase in the average income of pensioners between 1995 and 2021**.³¹ In 2021, pensioners had an average income of £361 after housing costs, which has increased from £333 in 2020. The survey also showed that pensioners under 75 years had an average weekly income that was higher than those who were 75 years and over.³²

Analysis by the ONS on long-term trends in income of retired households in the UK shows that **disposable incomes have increased as a result of private pensions**. The percentage of pensioners in the top half of the overall population income distribution has increased since 1995.³²

³¹ Pensioners' Incomes Series: An analysis of trends in Pensioner Incomes: 1994/95-2016/17, DWP published March 2018

³² Department for Work & Pensions. Pensioners' Incomes Series: financial year 2020 to 2021. March 2022. [Pensioners' Incomes Series: Financial year 2021 to 2022 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/pensioners-incomes-series-financial-year-2021-to-2022)

4.1.5 State Pension

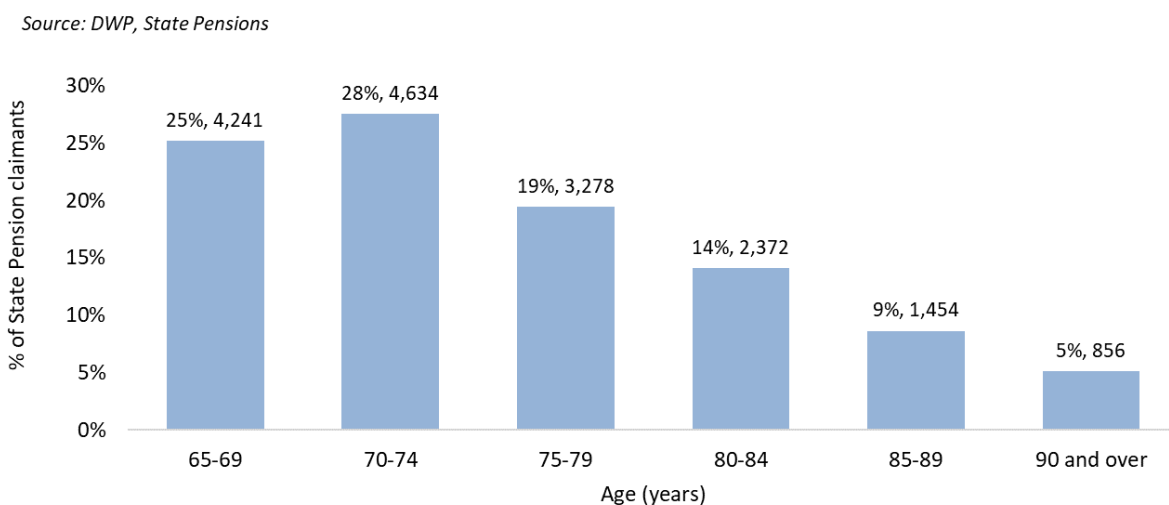
The state pension is a regular payment from the government made to people when they reach state pension age. The current state pension age is 66 years for both men and women but will increase to 67 years and eventually 68 years for those born after 5th April 1960.

The amount of basic state pension received depends on National Insurance contributions. The new full state pension amount for men born after April 1951 and women born after April 1953 is **£185.15 per week**.³³

1995 from 13% to 20% in 2021. The percentage of pensioners in the bottom fifth quintile has also decreased from 19% in 1995 to 14% in 2021.

In Q4 2019/20, approximately **16,835 people were claiming State Pension in Hammersmith & Fulham**, a fall of 2% from 17,212 claimants in 2009/10. The highest proportion (28%; 4,634/16,835) of State Pension claimants in Q4 2019/20 were aged between 70-74 years (figure 13).

Figure 13. Proportion (%) of State Pension claimants in Hammersmith & Fulham in Q4 2019/20.



4.2. Housing

4.2.1 Living arrangements

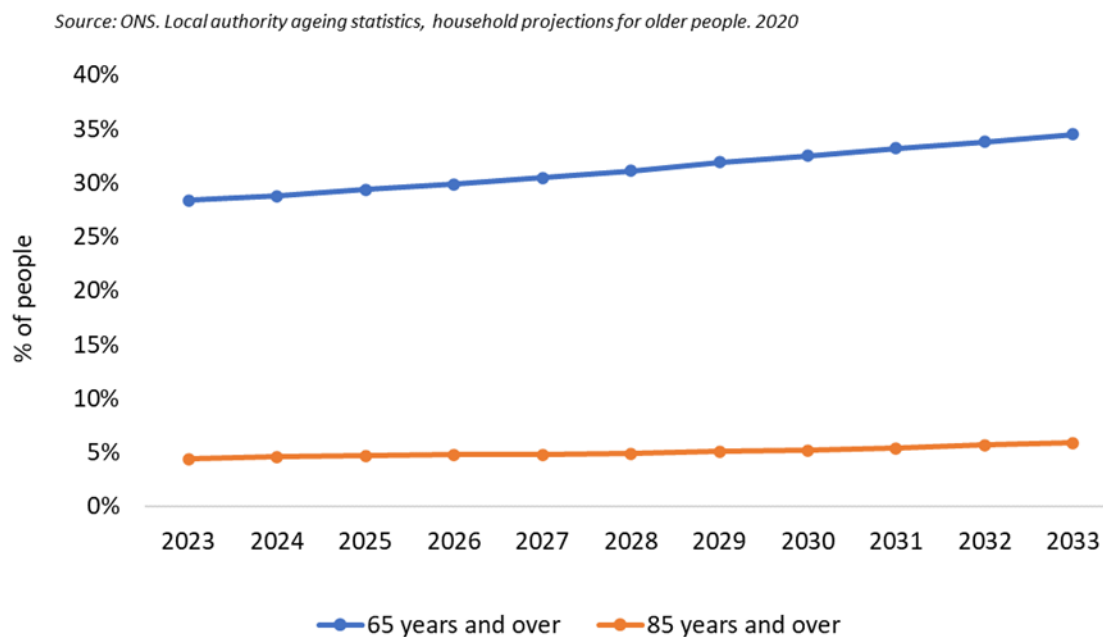
According to the 2021 census, 4% (7,351/180,584) of households were occupied by an older person living alone in Hammersmith & Fulham. This is the same as the London average of 4%.

Household projections by the ONS show that the percentage of older adults living alone is predicted to increase in the next 10 years. **It is estimated that in 2023, 28% of the older**

³³ Gov.uk. The new State Pension. [The new State Pension: What you'll get - GOV.UK \(www.gov.uk\)](https://www.gov.uk/the-new-state-pension)

adults aged 65 years and over are living alone, of which 4% are aged 85 years and over. This is predicted to increase to 35% and 6% respectively, by 2033 (figure 14).³⁴

Figure 14. Percentage of older people living alone aged 65 years and over and 85 years and over in Hammersmith & Fulham, 2023-2033.



4.2.1 Fuel Poverty

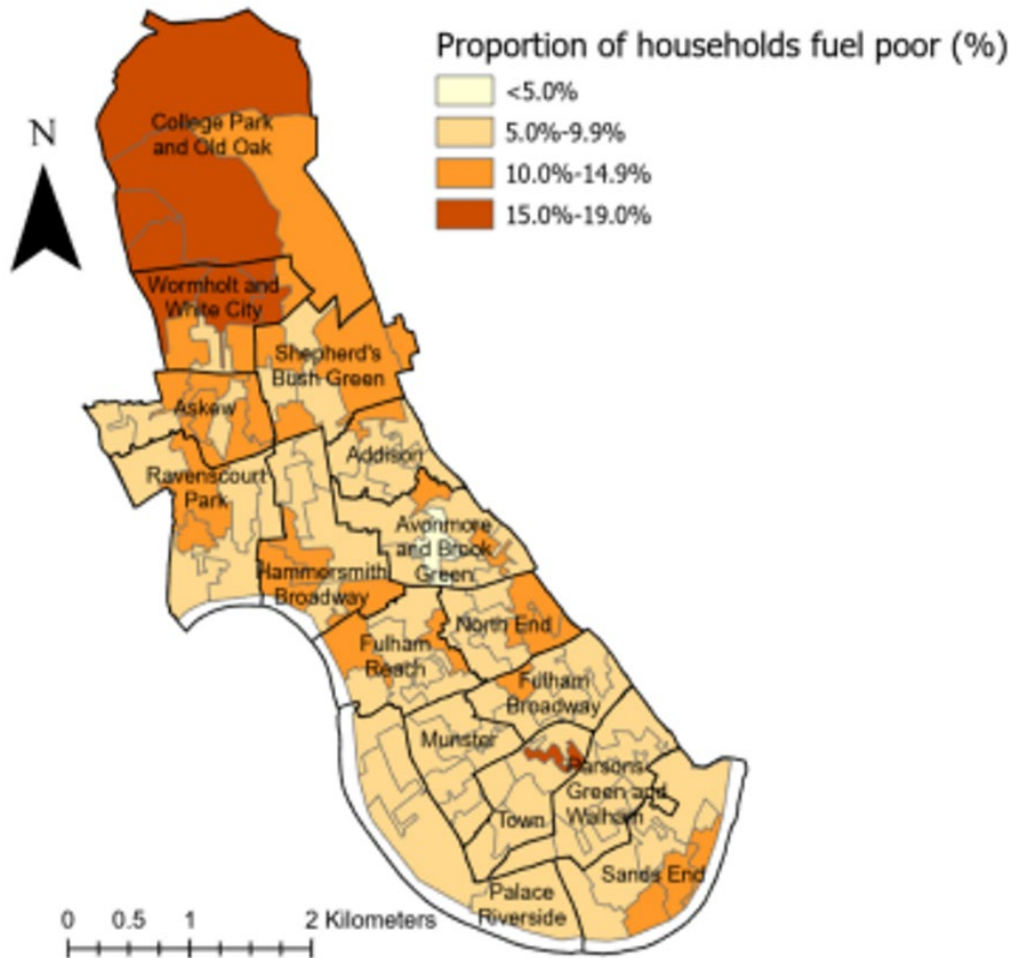
In Hammersmith & Fulham, 11.3% of households are in fuel poverty under the government definition in 2021 – this compares to 13.4% nationally, and 11.9% across London. This data pre-dates the energy price crisis that is currently ongoing, so we would expect fuel poverty to have risen since this snapshot. More recent data from the ONS shows that 23.3% of H&F residents are living in poverty, compared to 20.1% across England.

Fuel poverty also varies hugely across the borough, with fuel poverty rates reaching close to 1 in 5 households in the north of the borough, whilst being closer to 1 in 20 in more affluent areas in the mapping fuel poverty across the borough.

Figure 15. Proportion (%) of households in fuel poverty by London borough, 2020

Fuel poverty is highest in the north of the borough, with some pockets of fuel poor households in the south and central regions of the borough. The top ten fuel poor LSOAs are situated in three wards: Wormholt and White City, College Park and Old Oak, and Town. The LSOA with the highest proportion of fuel poor households is within Wormholt and White City ward with a figure of 17.9% (Figure 16)

³⁴ ONS. Local authority ageing statistics, household projections for older people.



4.2.2 Winter fuel payments

In 2019/20 the proportion of people aged 65 years and over in Hammersmith & Fulham receiving winter fuel payments was **87.9% (17,900/20,364)**. This is lower than the London (90%) and England (94.1%) averages; and a reduction of 3.3% from 2018/19 when payments were being received by 91.2% of people aged 65+ years.³⁵

³⁵ OHID, Productive Healthy Ageing Profile

5. HEALTH CONDITIONS

5.1 Dementia

In April 2023, there were **870** GP registered patients aged 65 years and over living in Hammersmith & Fulham who had a **recorded dementia diagnosis**. This is a **prevalence of approximately 3.9% of patients aged 65 years and above**, similar to both the London and England prevalence figures of 4.0%.³⁶

The **estimated dementia diagnosis rate** for Hammersmith & Fulham is **61.3%** in April 2023. This gives an estimated total number of people living with dementia in the borough (diagnosed and undiagnosed) of **approximately 1,419**.³⁶ Based on a prediction model for the UK, the number of people estimated to have dementia in Hammersmith & Fulham is **expected to rise by to approximately 1,900 by 2030**.³⁷ More information on dementia can be found in the [2021 Hammersmith & Fulham Dementia report](#).³⁸

5.2 Frailty

GP practices are required to use an appropriate tool, such as the electronic frailty index (eFI), to help identify patients over the age of 65 who are living with moderate and severe frailty.

The eFI uses routine health record data to automatically calculate a score which can help identify whether a person is likely to be fit, living with mild moderate or severe frailty. Early identification in addition to targeted support can help older people living with frailty stay well and live independently for as long as possible.

Currently there are 22,400 NWL ICB GP registered patients living in Hammersmith & Fulham aged 65 years and above. Almost a fifth are **moderately frail (17%; 3,914/22,400)**, and one tenth is **severely frail (10%; 2,335/22,400)**.³⁹

5.3 Falls

For the most recent data, in 2022/23 there were 455 emergency hospital admissions due to falls in Hammersmith & Fulham for people aged 65 years and over, this is equivalent to a rate of **2,469 per 100,000 population**. Majority of the admissions; 58% (265/455) were for people aged 80 years and over.³⁵

The Hammersmith & Fulham figure in 2022/23 is statistically higher than both London and England averages for people aged 65 years and over (Figure 17). The emergency hospital admissions rate for falls has started to increase again in the borough from 2020/21 where it was reported at 375 per 100,000 and rising since.

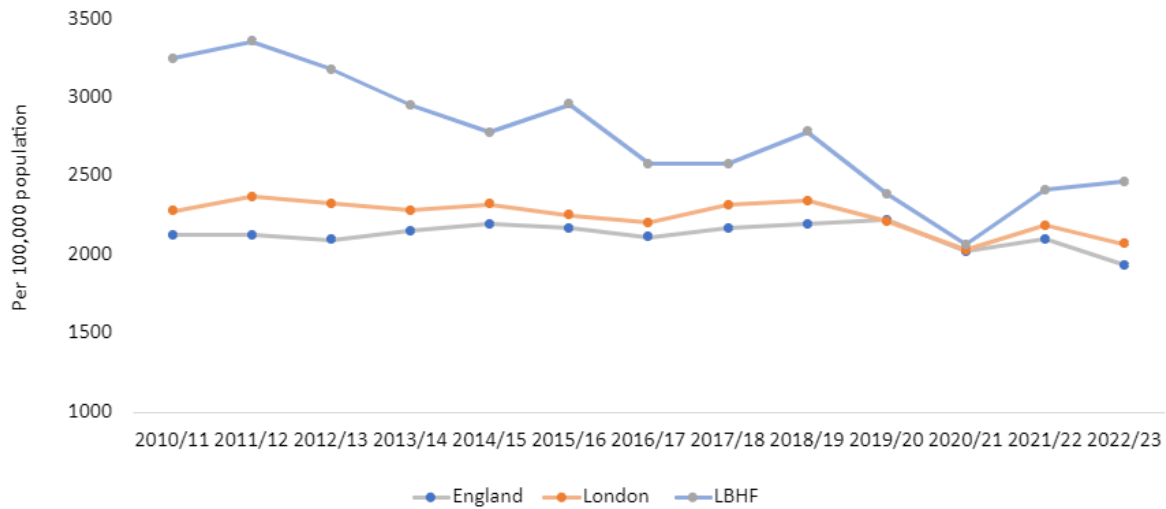
³⁶ NHS Digital. Recorded Dementia Diagnoses April 2023.

³⁷ Wittenberg, R, Hu, B, Barraza-Araiza, L, Rehill, A. Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019–2040. Care Policy and Evaluation Centre, London School of Economics and Political Science.

³⁸ LBHF BI service. Hammersmith & Fulham Dementia Report. September 2021. Available from: https://www.lbhf.gov.uk/sites/default/files/section_attachments/hf-dementia-report-september-2021.pdf

³⁹ Whole Systems Integrated Care, North West London Collaboration of Clinical Commissioning Groups. De-identified database.

Figure 17. Emergency hospital admissions rate due to falls in people aged 65 years and over in Hammersmith & Fulham, London, and England.



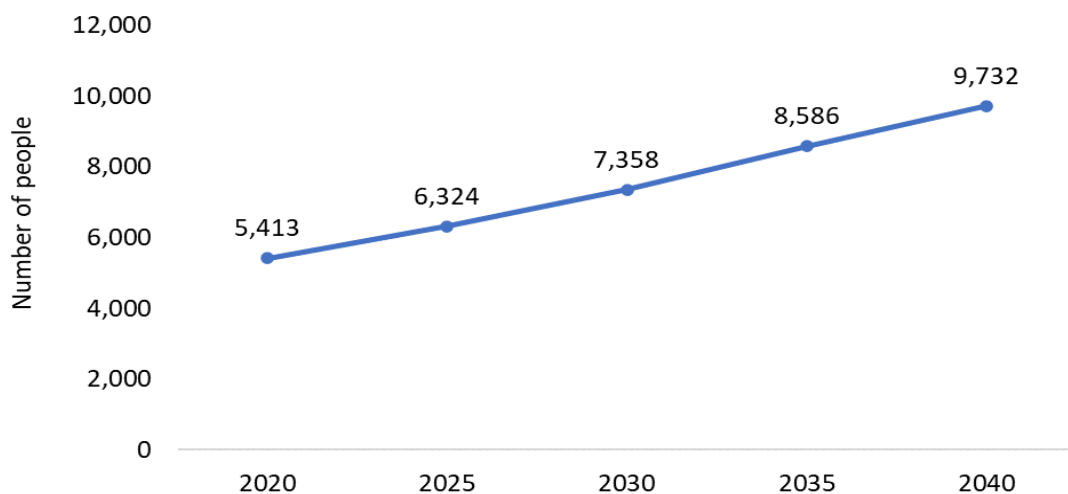
Source: Hospital Episode Statistics, OHID 2023

5.4 Limiting long term illness

Applying the prevalence of long-term health conditions from the 2011 Census to the predicted growth in the older population, suggests that there could be **9,732** people aged 65+ living with a limiting long term health condition in Hammersmith & Fulham by 2040, an increase of **4,319** (+80%) from 2020 (5,413).

Figure 18. People aged 65 and over with a limiting long-term illness, projected to 2040

Source: POPPI (Based on Census 2011 prevalence and forecast population growth)

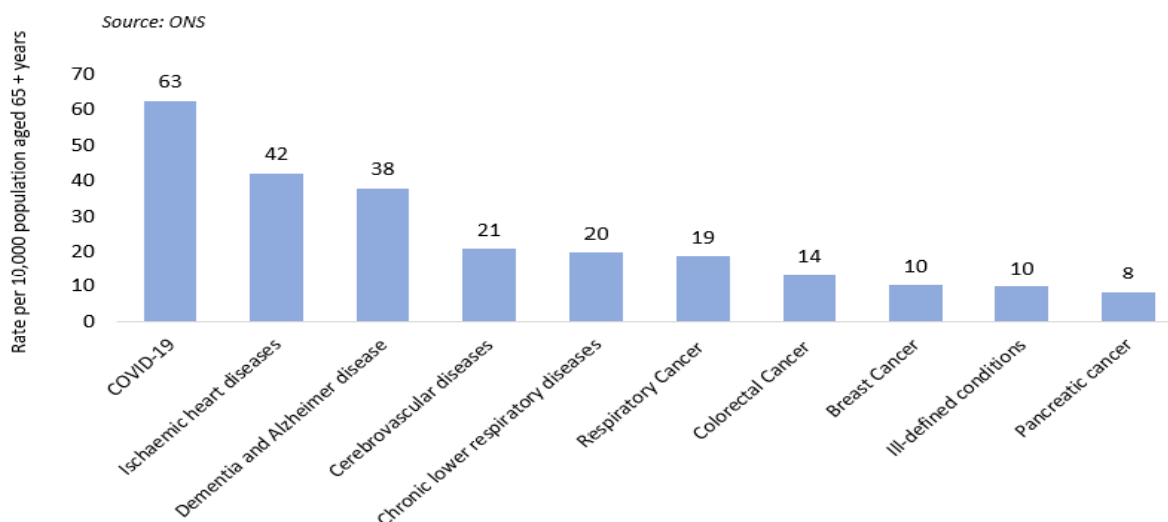


5.5 Causes of death

According to the latest age mortality data from the ONS, the most common causes of death in people aged 65 years and over in 2021 in Hammersmith & Fulham are:

1. **COVID-19:** This was the leading cause of death in 2021, accounting for a mortality rate of 63 per 10,000 population aged 65 years and over.
2. **Ischaemic heart disease:** This was the second most common cause of death, accounting for a mortality rate of 42 per 10,000 population aged 65 years and over.
3. **Dementia and Alzheimer’s disease:** This was the third most common cause of death in this age group, accounting for a mortality rate of 38 per 10,000 population aged 65 years and over.

Figure 19. Cause specific mortality rates by most common causes of death in people aged 65 years and over in Hammersmith & Fulham, 2021.



6.0 SERVICE USE

6.1 Primary care

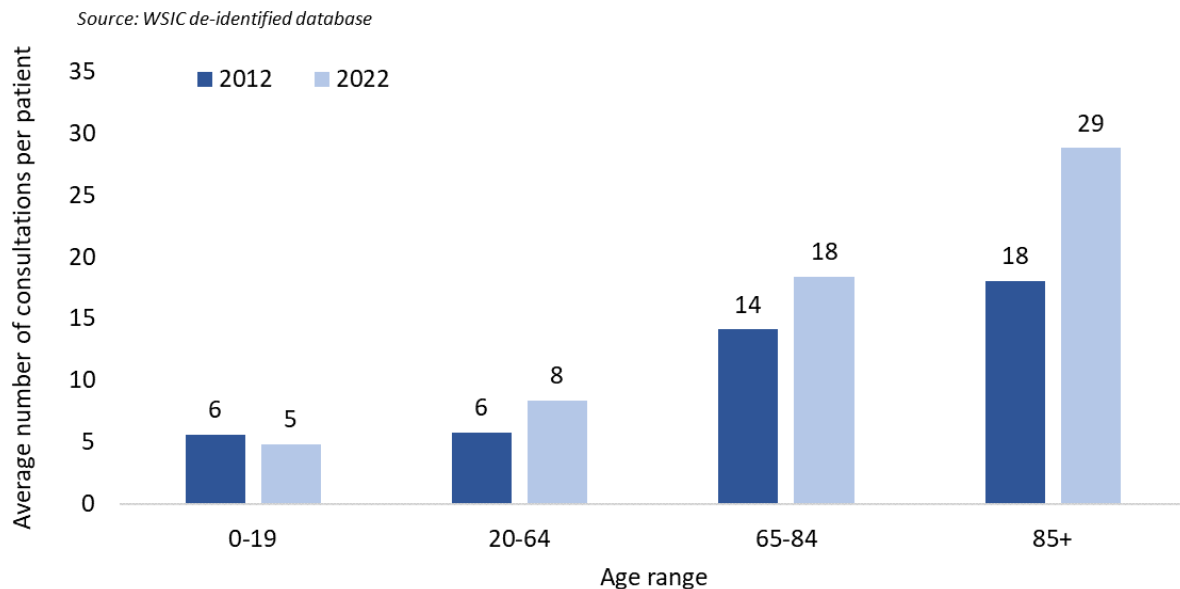
6.1.1 Primary Care consultations

The number of primary care consultations per patient per year has risen in the last decade, particularly in the older age group.

Compared to all other age groups figure 20 shows that the average number of consultations per person has increased the most in those aged 85+, by 60% from an average of 18 consultations in 2012 to 29 consultations in 2022.⁴⁰

⁴⁰ Whole Systems Integrated Care (WSIC). De-identified database. Accessed May 2022.

Figure 20. Change in the average number of primary care consultations per patient in Hammersmith & Fulham from 2012 to 2022



6.1.2 GP patient survey

The GP satisfaction survey is a national survey conducted by Ipsos MORI on behalf of NHS England. It assesses GP practices and involves sending out surveys to two million randomly selected people registered with a GP practice.⁴¹

For the most recent survey in 2022, around 720,000 people completed the survey, with 293,000 doing so online. The results are published online, allowing GP practices, patients, and the general population to review and compare data. The survey consists of 64 questions covering various categories related to local GP services, appointments, overall experiences, COVID-19, health, GP practice availability, NHS dentistry, and personal information.⁴¹

For Hammersmith & Fulham **only 11 practices of the 28 have information** for those aged 65-74 from the recent survey, and none had data for those aged over 74 years. Therefore, the data analysis has been performed on those practices that have responses from patients aged 65-74 years. Of the 64 questions on the survey, 8 were chosen to examine in further detail.⁴¹

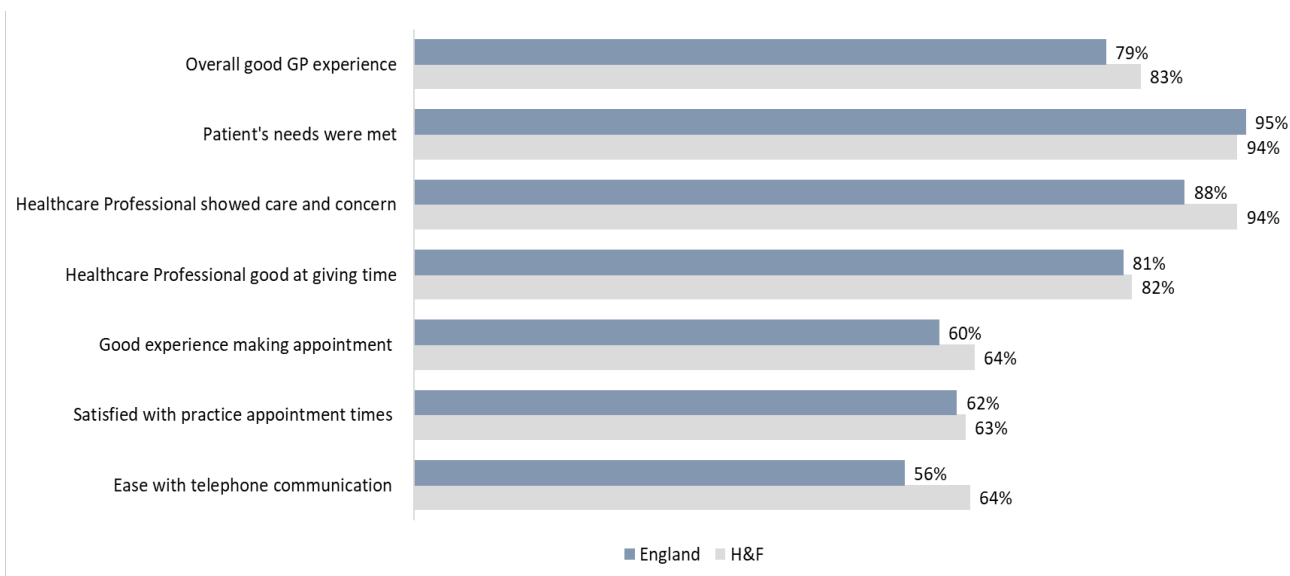
The survey results for those aged 65-74 years **Hammersmith & Fulham has scored higher than England in all areas except for meeting patient’s needs during consultations.** For this area Hammersmith & Fulham has a score of 94%, 1% below the national average figure of 95%.⁴¹

Nationally and across Hammersmith & Fulham there appears to be a **dissatisfaction with making appointments, the times being offered and the ease of telephone communication** with the practice. Within Hammersmith & Fulham there was a large disparity between how easily patients aged 65-74 years were able to contact their practice on the phone.

⁴¹ NHS England. GP Patient Survey. 2022. Available from: [GP Patient Survey \(gp-patient.co.uk\)](https://gp-patient.co.uk)

This ranged from 28% feeling they were easily able to get a hold of the practice, to around 95% at the best performing practice. For overall experience there was also some disparity between practices, with a range of 58-94%.⁴¹

Figure 21. Hammersmith & Fulham and England GP patient survey results for patients aged 65-74 years, 2022.



6.2 Secondary care

6.2.1 Hospital inpatients

In 2022 there were a total of **39,343 inpatient hospital spells** by NWL ICB registered patients who are residents of Hammersmith & Fulham. This is an **increase of 16% from the previous year**. In 2022, one third of the inpatient spells (33%; 12,997) were for Hammersmith & Fulham residents aged 65 years and over, of which 16% (2,061) were aged 85 years and over.

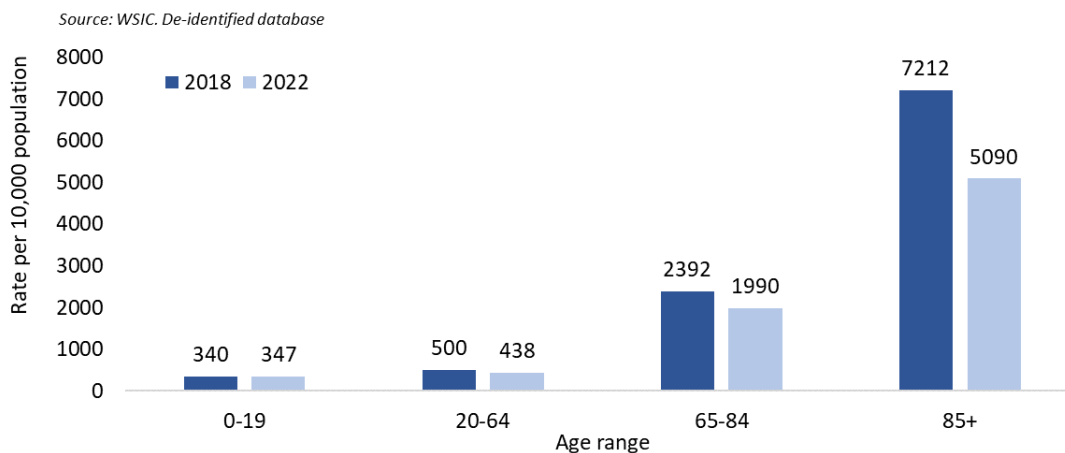
6.2.2 Emergency hospital admissions

The rate of emergency hospital admissions for Hammersmith & Fulham residents has decreased in the past five years from 7,332 per 100,000 population in 2018 to 6,416 per 100,000 population in 2022.

Compared to all other age groups the rate of emergency hospital admissions is the highest amongst those aged 85 years and above and has fallen from 7,212 per 10,000 population in 2018 to 5,090 per 10,000 population (Figure 22).⁴²

Figure 22. Age-specific rate of emergency hospital admissions per 10,000 population.

⁴² Whole Systems Integrated Care (WSIC). De-identified database. Accessed May 2022.



6.3 Social care

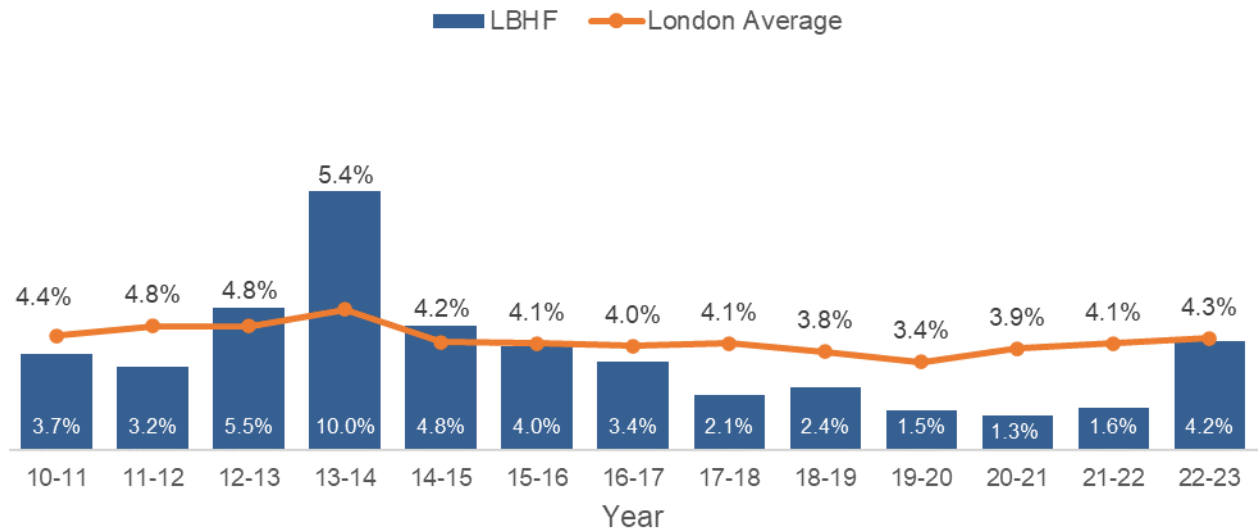
6.3.1 Short Term (Reablement) Adult Social Care

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

Since 2014/15 the proportion of older people offered reablement services in Hammersmith & Fulham has fallen from 4.8% (144/2,995) to 1.6% (51/3,185) in 2021/22 (figure 23).

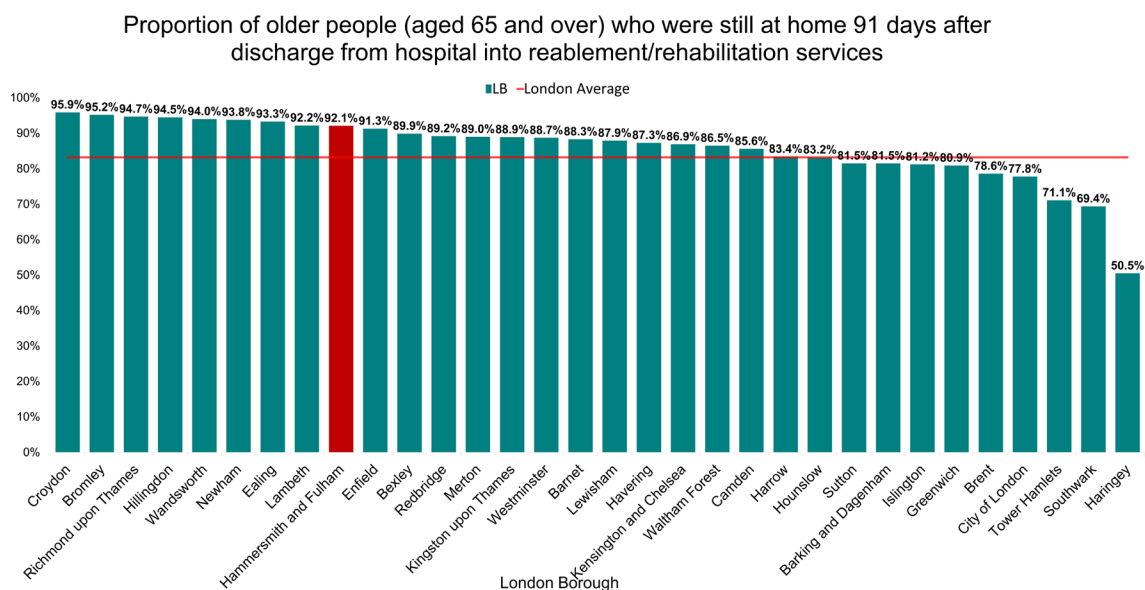
The proportion of older people offered reablement services in the borough since 2016/17 is below the London average. A greater difference between London and Hammersmith & Fulham can be observed in recent years, with a gap of 2.7% in 2021/22. The fall in services in 2019/20 is predominantly due the changes to service delivery during the pandemic. The trend in Hammersmith & Fulham appears to be rising again in 2022/23 (figure 23).

Figure 23. Proportion (%) of older people (aged 65+) offered reablement services following discharge from hospital in Hammersmith & Fulham and London.



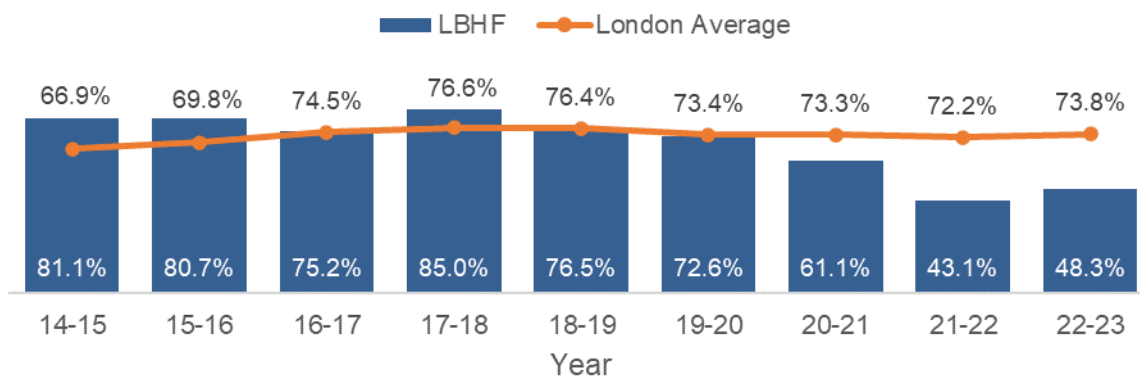
When we examine the proportion of older adults, who were at their own home or to a residential or nursing home for rehabilitation 91 days after being discharged from hospital, we can see the borough performs favourably in this metric. The current performance across Hammersmith and Fulham is 92.1%, ranking 9th across all London boroughs and within the 2nd quartile against the other respective local authorities (figure 24).

Figure 24. Proportion of older people (aged 65 and over) who were still at home 91 days after being discharged from hospital into reablement/rehabilitation services.



Lastly, when we examine the proportion of new clients that received short-term service followed by reduced or no ongoing support, Hammersmith and Fulham does not perform favourably. Current performance levels have the borough at 48.3% for 2022/23, ranking the 4th lowest across London boroughs. Additionally, performance in this metric in 2022/23 did improve compared to 2021/22, but much lower compared to the pre-pandemic levels of 2019/20 (72.6%) (figure 25).

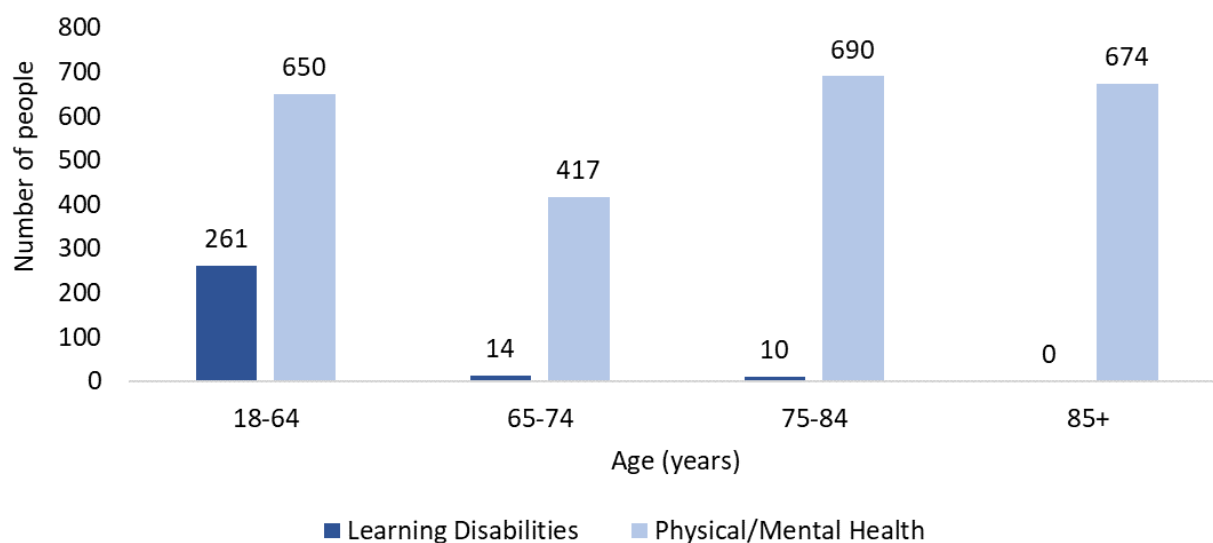
Figure 25: Proportion of those that received a short-term service during the year where the sequel to service was either no ongoing support or support of a lower level.



6.3.2 Long-term adult social care

At the end of February 2023 there were 2,716 adults receiving long-term social care in Hammersmith & Fulham. **The majority (66%; 1,805/2,716) of long-term social care clients are older people aged 65 years and over, of which 1% (24/1,805) have learning disabilities** (figure 26).⁴³

Figure 26. Number of adults receiving long-term social care services by broad age category, February 2023.



⁴³ Mosaic. Accessed February 2023.

On average the majority (72%; 1,805/2,716) of older people receiving long term care have been receiving services for over a year. Only 2% (31/1,805) have been receiving long term care for over 600 days.⁴³

In February 2023, 1,805 people aged 65+ were receiving long-term social care services provided by Hammersmith & Fulham Council. The demand for services is expected to continue to grow in the future as a result of the predicted growth in the older population.

Applying predicted growth in Hammersmith & Fulham’s population aged 65+ to the proportion of social care clients in the 65+ age group, gives a potential increase of approximately 648 clients aged 65+ by 2032 to a total of 2,453.

Table 3. Potential growth in the number of people aged 65+ needing long-term social care services in Hammersmith & Fulham by 2032

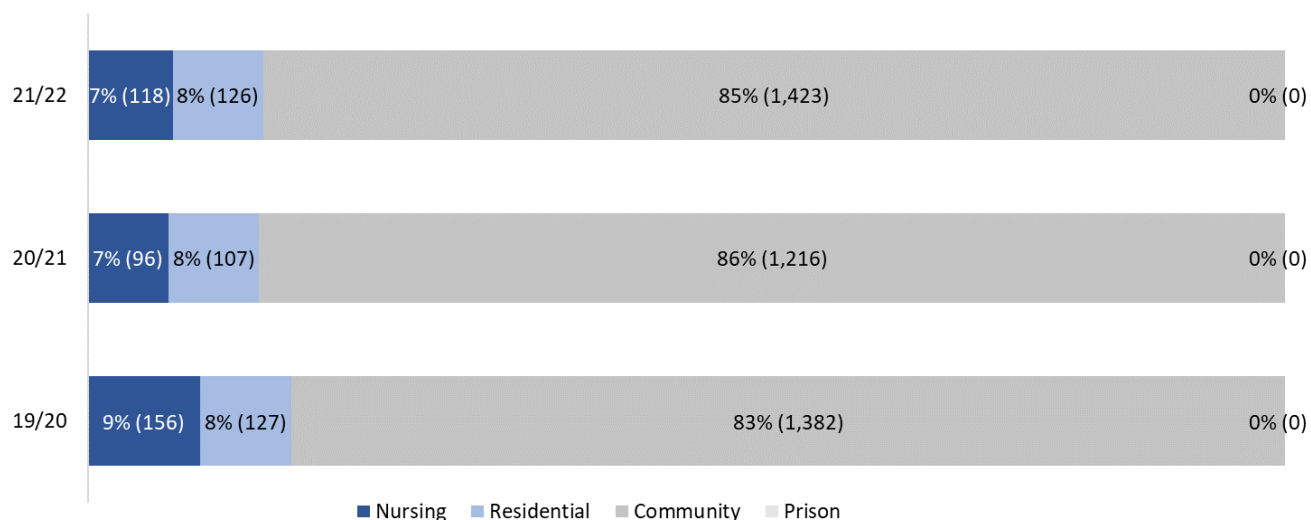
	2022	2032	Change
Population aged 65+	22,081	30,010	
Social care clients aged 65+	1,805	2,453	+648

6.3.3 Care Setting

Care setting can be grouped into four broad categories: **Nursing, Residential, Community and Prison**. Majority of older people receiving long term support are within the community setting. This includes those who are receiving direct payments only, part direct payments, local authority managed personal budgets and local authority commissioned support only. Community care settings aim to promote individuals' independence, autonomy, and social inclusion, while addressing their care and support needs.

The latest annual figure from 2021/22 shows that 85% (1,423/1,667) of older adults receiving long term support are within the community setting. This trend has remained relatively stable over the past three consecutive years. Of those receiving long term support 89% (1,464/1,667) were receiving personal care support as the primary support reason, 5% (90/1,667) were receiving mental health support and 2% (39/1,667) were receiving learning disability support.

Figure 27. Proportion of older adults (aged 65+) receiving long term support by care setting.



Current demand for residential and nursing care is around 370 beds per annum, this a combination of spot purchases (240 beds) and combined block purchases with the ICB, 130 beds. The capacity in the borough is 406 residential and nursing beds, these are not all block purchased and offer services to people from outside Hammersmith & Fulham.

If the in-borough nursing and residential bed capacity was only available to Hammersmith & Fulham residents, this would mean we have residential and nursing capacity for 19% of the 85 years and over cohort, which was 2,193 people according to the 2021 Census. If we look at the predicted increase of people aged 85 years and over in the borough by 2033, to 4,362 this means that the current capacity would meet only 9% of the 85 years and over cohort.

6.3.4 Adult and social care survey

In 2021/22, the social care related quality of life score in Hammersmith & Fulham was 18.2. This was higher than previous four years and the current London average score of 17.9.⁴⁴

The proportion of care users who were overall satisfied with their care and support in 2021/22 was 60.7%, this was above the London average of 54.9%. The proportion of respondents who find it easy to find information about services was 62.2%, this was similar to the London average of 62.5%.⁴⁴

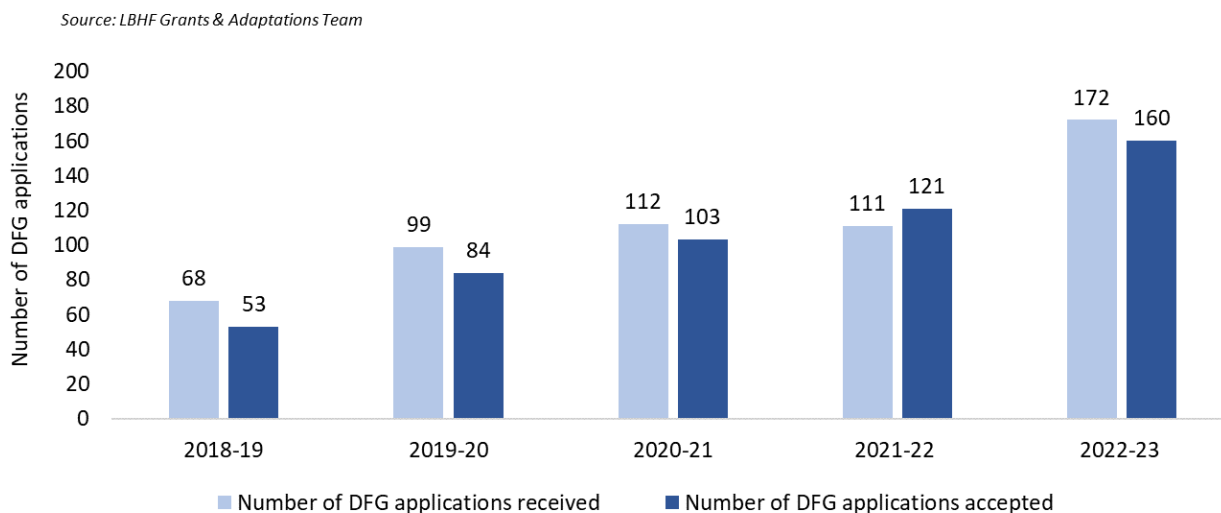
6.3.5 Disabled Facilities Grants

In 2022/23, there was a total of 172 applications for a Disabled Facilities Grant (DFG). This was a 55% increase in applications from the previous year. In 2022/23, 93% (160/172) of applications were accepted resulting in a DFG being awarded. The average time it took the council to make a decision on an application was 15 days. The number of DFG applications

⁴⁴ Adult Social Care Outcomes Framework (ASCOF), England 2021/22

received has increased in the last five years from 68 applications in 2018/19 to 172 in 2022/23 (figure 28).⁴⁵

Figure 28. The number of DFG applications received and accepted by LBHF from 2018/19 to 2022/23.



6.3.6 Self-funding care

In Hammersmith & Fulham currently, there are **18 older people who are self-funding their care**, and 12 in the process of becoming self-funders. This is **7% (18/244)** of the total number of people receiving long-term care in Hammersmith & Fulham.⁴⁶

Table 4. People aged 65 years and over who are self-funding long term care in Hammersmith & Fulham, April 2023.

Services	Funded by LBHF		Self-funded	
	Count	%	Count	%
Nursing	122	89%	14	11%
Residential	122	97%	4	3%
Total	244	93%	18	7%

In Hammersmith & Fulham we have high numbers of older people receiving support in the community and home care is free at the point of care to residents in the borough. The annual figure from 2021/22 shows that 85% (1,423/1,667) of older adults receiving long term support are within the community setting. This was equivalent to 8.8% of all older residents at the time of the 2021 Census. If this trend is maintained, the borough will have to significantly increase its community care capacity over the next 10 years in line with the ONS population projections of 4,362 residents aged 65 and older by 2033 (Figure 3). For long term care in a community setting this would mean an estimated 2,717 residents being supported (85% of total predicted older population), which is an extra 1,294 or 52% increase of service users by 2033.

⁴⁵ LBHF. Grants & Adaptations Team. FOI request. 2023

⁴⁶ Mosaic. Accessed March 2023.

This demand is likely to be further exacerbated by the anticipated 80% increase number of people aged 65 years and over living with a limiting long-term health condition, which is expected to increase from 5,413 in 2020 to 9,732 older people in 2040. This will place greater pressure on care in all settings, not just the community.

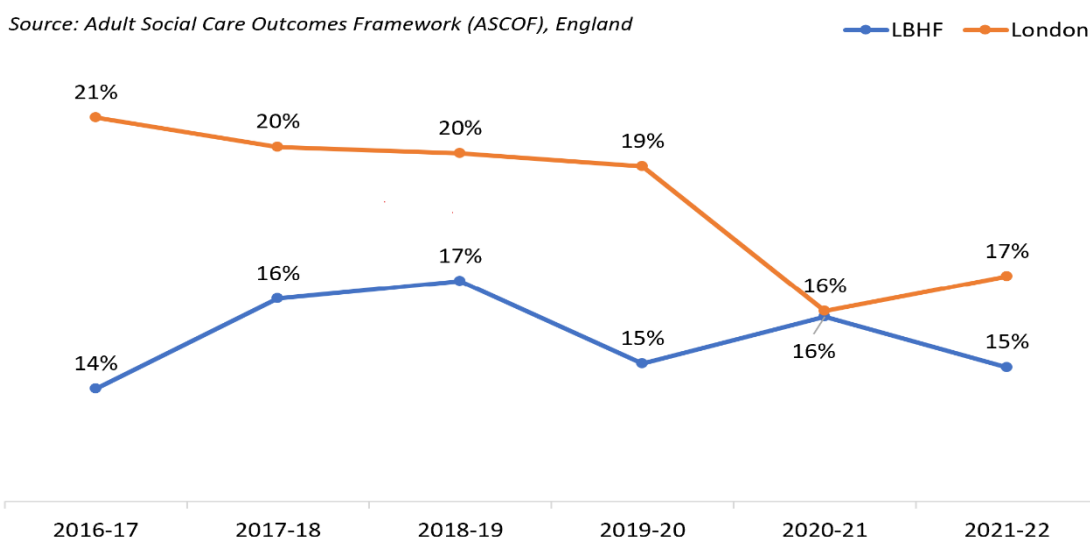
6.3.7 Direct payments

Direct payments are a way for individuals who are eligible for social care support to receive funding directly from their local authority to purchase and manage their own care and support services. Direct payments give individuals **more choice and control over the type of care they receive and who provides it**. They were intended as a key route to reform of social care in the Care Act 2014.

The proportion of clients in Hammersmith & Fulham aged 65 years and over accessing long-term support via direct payments in 2021/22 is 15% (213/1,423) this is almost as low as the figure in **2016/17** (14%; 201/1,387). And lower than the London average of 17% (6,500/38,259) in the same year (figure 29).

Despite government guidance that states local authorities should be as flexible as possible in their oversight of direct payments during Covid-19, the pandemic seems to have made little difference in the trend. There are likely to be several reasons for the low uptake. Opting for direct payments requires more involvement and responsibility than simply receiving a service, and people/their families may need support to manage one.

Figure 29. Proportion (%) of people using social care who receive direct payments aged above 65 years in Hammersmith & Fulham and London.



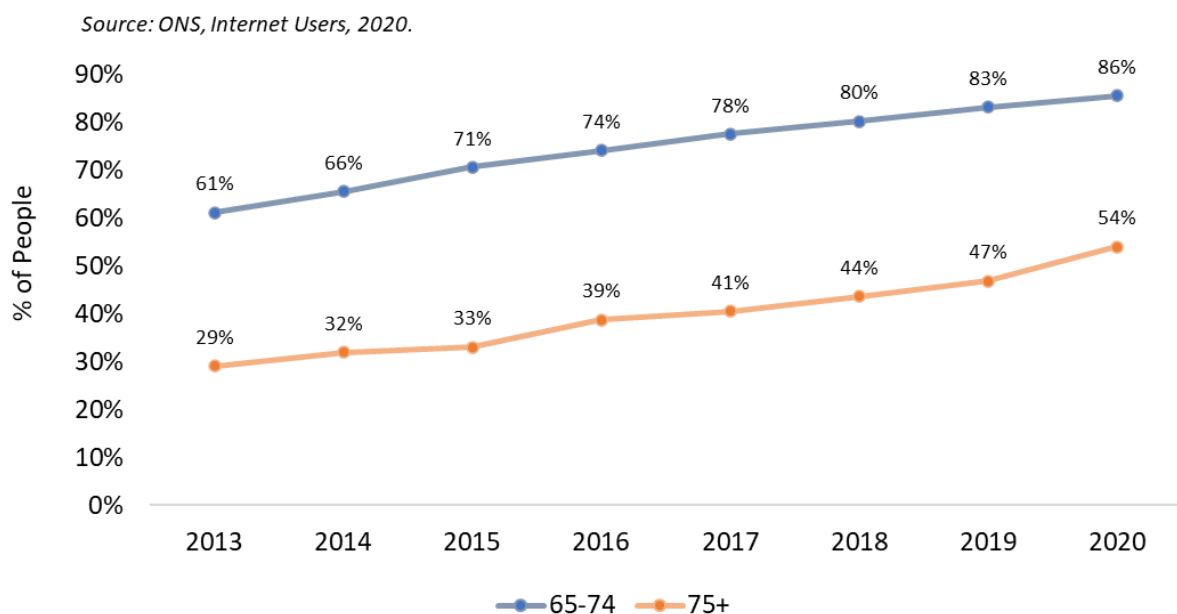
7. ACCESS TO SERVICES

7.1 Use of the internet

In 2020, 6.3% of adults in the UK had never used the internet, and of these 85% were aged 65 years and over.

The generation gap in internet usage is closing. Recent data from the ONS (figure 30) shows that the use of internet amongst those aged 65 to 74 years has increased from 61% in 2013 to 86% in 2020.⁴⁷

Figure 30. Recent Internet use by age group, 2013-2020, UK.⁴⁸



Applying national percentages to Hammersmith & Fulham's population gives an estimated **1,297 men and 2,315 women aged 75+ who have never used the internet in 2020**. But these figures are **likely to have decreased dramatically** since many services have now transitioned to digital platforms due to the pandemic which has increased the reliance and use of the internet. The shift towards digital services highlights the importance of digital connectivity in the post-pandemic era, particularly for the older age group who have previously been shown to have the highest proportion of non-internet users compared to any other age group.

7.2 Distance to health services

The Indices of Deprivation 2019 includes an indicator of the mean road distance to the closest GP surgery by Lower-layer Super Output Area (LSOA).⁴⁹ LSOAs typically comprise of 400 to 1,200 households and a resident population between 1,000 and 3,000 persons.⁵⁰

There are 28 GP practices in Hammersmith & Fulham covering a resident population of 193,202 in 2023. Hammersmith & Fulham has good access to GP practices. Of the 113 LSOAs

⁴⁷ ONS. Internet Users, 2020. Published in April 2021.

⁴⁸ Recent internet users are adults who have used the internet within the last three months.

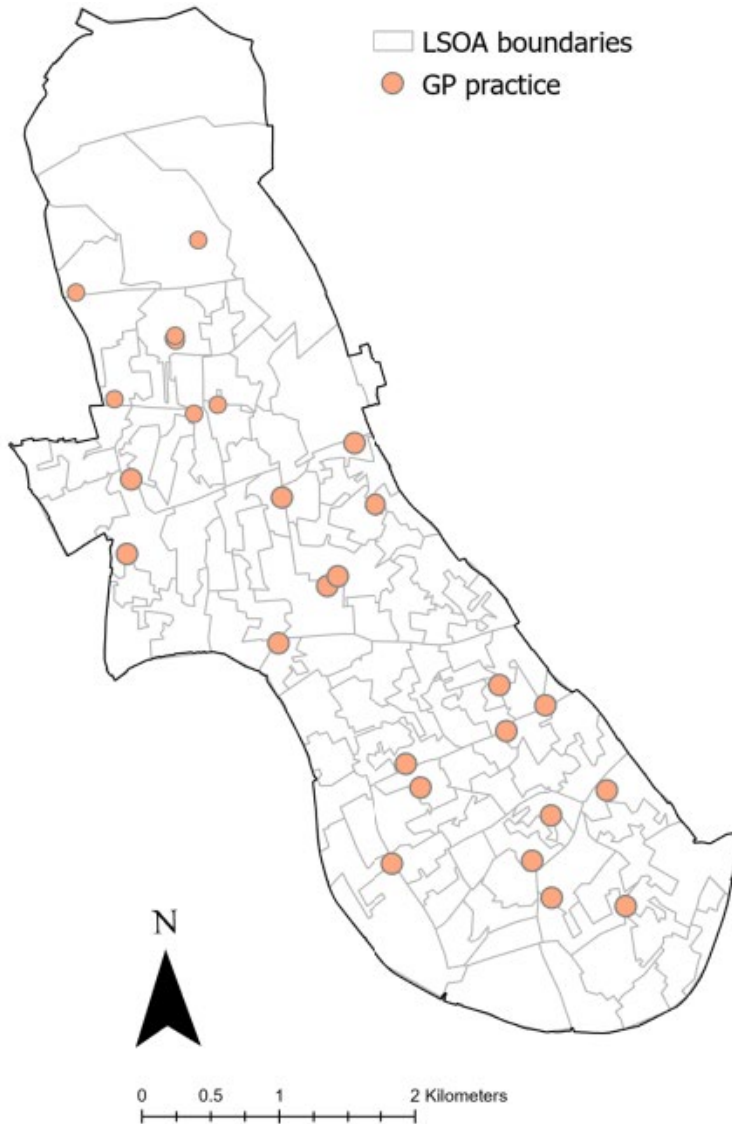
⁴⁹ Ministry of Housing, Communities & Local Government. English indices of deprivation 2019.

⁵⁰ ONS. Census 2021 geographies. Available from:

<https://www.ons.gov.uk/methodology/geography/ukgeographies/censusgeographies/census2021geographies>

in the borough in 2019 only 14 (12%) were located 0.5 miles (0.8 km) or more away from the nearest GP surgery. The map below (figure 31) shows the LSOAs overlaid with the locations of the 28 GP practices across the borough.

Figure 31. GP practice locations by LSOA in Hammersmith & Fulham.



8. SAFETY

8.1 Adult Safeguarding

Local authorities have a duty under the Care Act 2014 to ensure the safety and well-being of adults who are at risk of abuse or neglect. This duty is known as adult safeguarding.

When a local authority has reason to believe that an adult with care and support needs is at risk of abuse or neglect a Section 42 Safeguarding enquiry is initiated. This is a legal process under the Care Act 2014. The purpose of the Section 42 enquiry is to determine whether the adult is at risk, to identify any steps that can be taken to mitigate the risk and to determine what action should be taken to prevent any further harm.

The total number of Safeguarding concerns in Hammersmith & Fulham in 2021/22 was 2,235. The number of concerns rose by 110% from the previous year from 1,065 to 2,235. Hammersmith & Fulham had a 39% rate of conversion of enquiries/concerns to investigations. This is similar to the London rate of 37% and is lower than the 45% rate for the borough in 2020/21.⁵¹

The most common type of risk for concluded Section 42 enquiries was 'Neglect and Acts of Omission' (52%). This was 10% higher compared to the London local authority average of 42%. 61% of concluded Section 42 enquiries had a risk identified and an action taken. This compares to 79% in London.⁵¹

8.2 Deprivation of liberty safeguards (DoLS)

Deprivation of Liberty Safeguards (DoLS) is a legal framework that provides protection for individuals who are deprived of their liberty for their own safety or the safety of others. It applies to people who lack capacity to make decisions about their care and treatment, and who are being cared for in hospitals, care homes, or other similar settings.

DoLS ensures that individuals who lack capacity are not subjected to arbitrary or unnecessary restrictions on their liberty. It provides a framework for balancing the individual's rights and best interests with the need to protect them from harm.

In 2021/22 there were 370 applications received. 73% (270/370) of the applications were completed, of which 82% (220/270) were granted and 19% (50/270) were not granted. The most common reason for a deprivation of liberty authorisation not being granted was due to a change in circumstances (80%; 40/50).⁵²

8.4 Older victims of violence

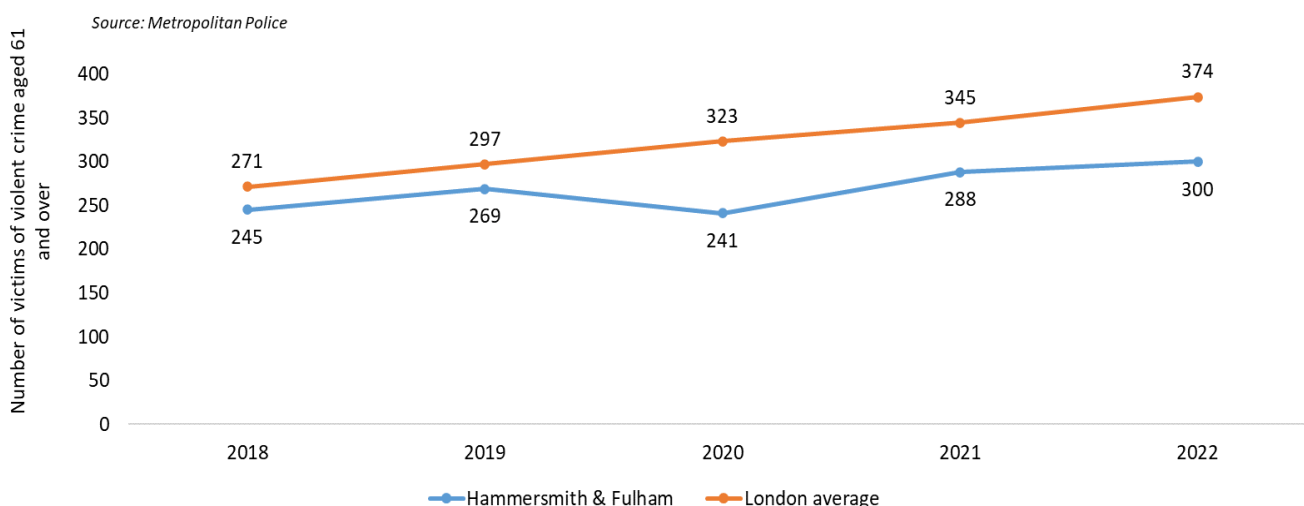
The number of violent crimes against people has risen in the last five years in all ages, from 5,237 recorded crimes in 2018 to 5,331 in 2022. In older people aged 61 years and over there has been a **22% increase in violent crimes**, from **245 victims of violent crimes in 2018 to 300 in 2022**. This is similar to the London average trend (figure 30).

⁵¹ Hammersmith & Fulham ASC BI Service. Safeguarding Adults Benchmarking Report. 2021-22

⁵² Hammersmith & Fulham ASC BI Service. DoLS Benchmarking Report. 2021-22

A violent crime against a person includes a range of offences ranging from less severe acts like harassment and common assault, to more grave offenses like murder, inflicting actual bodily harm, and causing grievous bodily harm.⁵³ The Hammersmith & Fulham figure of 300 in 2022 was lower than the London average figure of 374 (figure 32).⁵⁴

Figure 32. Number of victims of violent crimes aged 61 years and over.



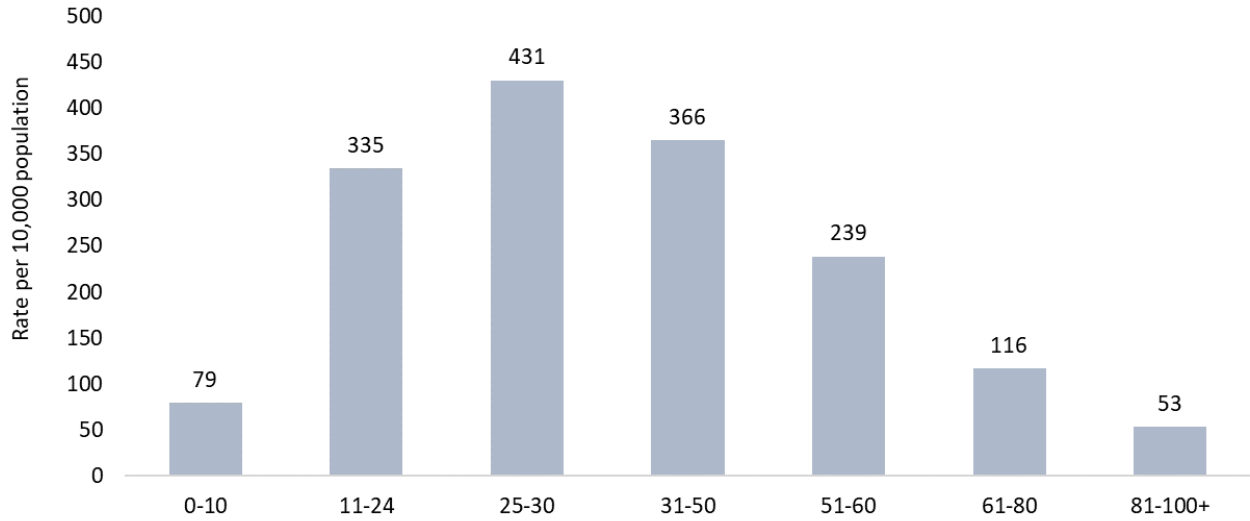
The age-specific rate of violent crimes against a person was highest amongst those aged 25-30 years (431 per 10,000 population), and lowest amongst those aged 81-100+ years (53 per 10,000) (figure 33).

⁵³ Metropolitan Police. Crime Type Definitions. <https://www.met.police.uk/sd/stats-and-data/met/crime-type-definitions/>

⁵⁴ Metropolitan Police. Data request via email

Figure 33. Rate age-specific of violent crime in 2022 in Hammersmith & Fulham by age category.

Source: Metropolitan Police



9. SUMMARY AND RECOMMENDATIONS

Older age is generally considered to be 65 years and above in most developed countries and then subdivided into young-old (65 to 74), old (75 to 84) and old-old (85 and over). Due to the projected increase in the number of older adults over the coming decades, an expected rise in the prevalence of age-related health conditions in the total population is also anticipated. As people age, they are at increasing risk of developing a range of chronic diseases and disability, and some organs begin to function less well. Therefore, there is a long list of health conditions typically associated with older adults.

In addition, we are dealing with multiple long-term conditions in older age currently not just in the borough but UK wide, which is referred to as co-morbidity, often or not an individual is seen to develop these quite rapidly with increasing age. For example, an individual with multiple skeletal disorders like arthritis (one of the biggest causes of disability in older age seen in the borough) could in addition develop early symptoms of dementia, which then adds to the complexity of care delivered by health care professionals and for those supporting at home or in a community setting.

Frailty is used to describe a state of health experienced by some generally older adults. It describes how some individuals lose their in-built reserves and become increasingly vulnerable to sudden changes in their health, which may be triggered by events such as an infection or change in medication or environment. Clinically, frailty is used to identify the group of older people who have the highest risk of adverse outcomes such as disability, falls, hospital admission, and the need for long-term care. Early identification of frailty can slow its progression and delay loss of independence. Frailty is not the same as multimorbidity.

These increases on demand are being dealt with by a whole-systems approach in terms of delivering clinical care nationally, but locally the borough will need to consider the implications for the delivery of Adult Social Care services.

Hence the impacts of old age and ill health go beyond health-related conditions and have implications for not just service use in health care settings but also for service providers including those delivering care in community settings i.e. nursing homes, residential care amongst others.

The fact that we have an ageing population, in line with the trends we are seeing regionally across London and nationally for England too, the emphasis is on improving quality of life and allowing individuals to live independently for as long as possible.

Through this needs assessment we have been presented with information and the latest statistics on how these increases will potentially affect services that are delivered across the borough. We have seen statistics in this report that show an increase of consultations in primary care settings, by 60% in recent years for those of older age. In-patient admissions has also increased by 33% for those over 65 years. Falls was one of the main causes of emergency admissions, hence a framework is currently being scoped to identify those individuals most at risk.

The demand on nursing and residential settings has been put forward within this report. Currently to mitigate a lack of supply in these settings, our colleagues in the Planning Department are collaborating with Adult Social Care to ensure that any new care homes

planning applications give due consideration to the needs of H&F residents and will provide value for money if the Local Authority wishes to place residents there.

Since 2015, Hammersmith & Fulham (H&F) has provided home care for free at the point of need, the only council in the country to do so. The initiative ensures cost does not hinder access to vital home support services, enabling residents to live more independently with greater choice and control over their lives. Older people are the largest group accessing Home Care, but also caters to younger residents with learning disabilities and mental health issues. This provision of care is currently being evaluated so to ensure that it is delivered effectively and for those that are in need of it most, along with a Position Statement on Support at Home.

In Hammersmith & Fulham we have high numbers of older people receiving support in the community and homecare is free at the point of care to residents in the borough. The annual figure from 2021/22 shows that 85% (1,423/1,667) of older adults receiving long term support are within the community setting. This was equivalent to 8.8% of all older residents at the time of the 2021 Census. If this trend is maintained, the borough will have to significantly increase its community care capacity over the next 10 years in line with the ONS population projections of 4,362 residents aged 65 and older by 2033 (Figure 3). For long term care in a community setting this would mean an estimated 2,717 residents being supported (85% of total predicted older population), which is an extra 1,294 or 52% increase of service users by 2033.

This demand is likely to be further exacerbated by the anticipated 80% increased number of people aged 65 years and over living with a limiting long-term health condition, which is expected to increase from 5,413 in 2020 to 9,732 older people in 2040. This will place greater pressure on care in all settings, not just the community.

Maintaining community care is heavily supported through unpaid carer most people being cared for are aged over 65 (54%). Though only 4% of recipients of CA were aged 65+, we do know that the peak age for caring is between 50-64 years (32.4%) (Census 2021). This will have implications for carers as they move into older age, as caring has an adverse impact on wellbeing, in the 2022 Survey of Adult Carers 78% reported tiredness, 60% reported disrupted sleep and 55% reported general stress. Investing in unpaid care will support carers and disabled people to live healthier for longer in the community.

As well as community, residential and nursing care, Extra care is another care option which provides a bridge between the community and residential care. This is suitable for residents over 55 years of age who have needs under the Care Act. This resource is currently underutilised in the borough and commissioners are exploring options to make best use of the space.

Hammersmith and Fulham also commissions day centre places for resident's aged 65 and over. There is capacity for 56 placements per week. 16 of these are with the Alzheimer's Society which is Dementia specific and 16 with Nubian Life with is for residents from the Caribbean or of Caribbean heritage, the other 25 for anyone with Care Act needs aged 65 and over. Most attendees across all services (37%) are in the 75-84 age group.

The predicted dementia diagnosis rate is expected to rise by 34% in Hammersmith and Fulham by 2030 (from 1,419 in 2023 to 1,900 in 2030). Though not all people with dementia will take up the offer of attending a day centre, currently our dementia day centre offer is only meeting demand for 1% of the target population. This will decrease as dementia becomes more prevalent unless the offer is scaled up.

Day opportunities provide respite for unpaid carers and offer attendees an opportunity to socialise and take part in activities. These are particularly important for people with dementia, as social isolation can greatly increase a person's risk of dementia.