

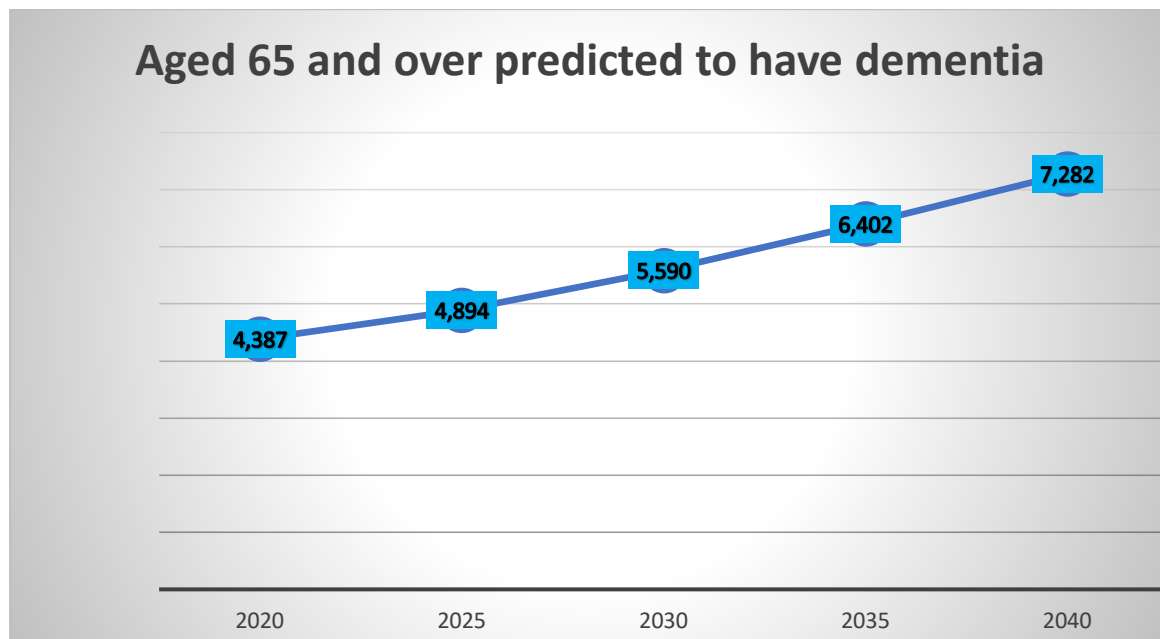
Dementia Needs Assessment

The Dementia Needs Assessment is intended to inform the Dementia Strategy developments and commissioning intentions by describing the health of population; identify inequalities in health and access to services. It presents information and analysis from a variety of sources relating to dementia prevalence and care including nationally published data and research.

DEMENTIA PROJECTIONS

Currently 4,387 people aged over 65 are estimated to live with dementia in Barnet and this is projected to increase to 7,282 by 2040 which is an increase of 66% over 20 years.

Graph 1: People aged 65 and over predicted have dementia by 2040

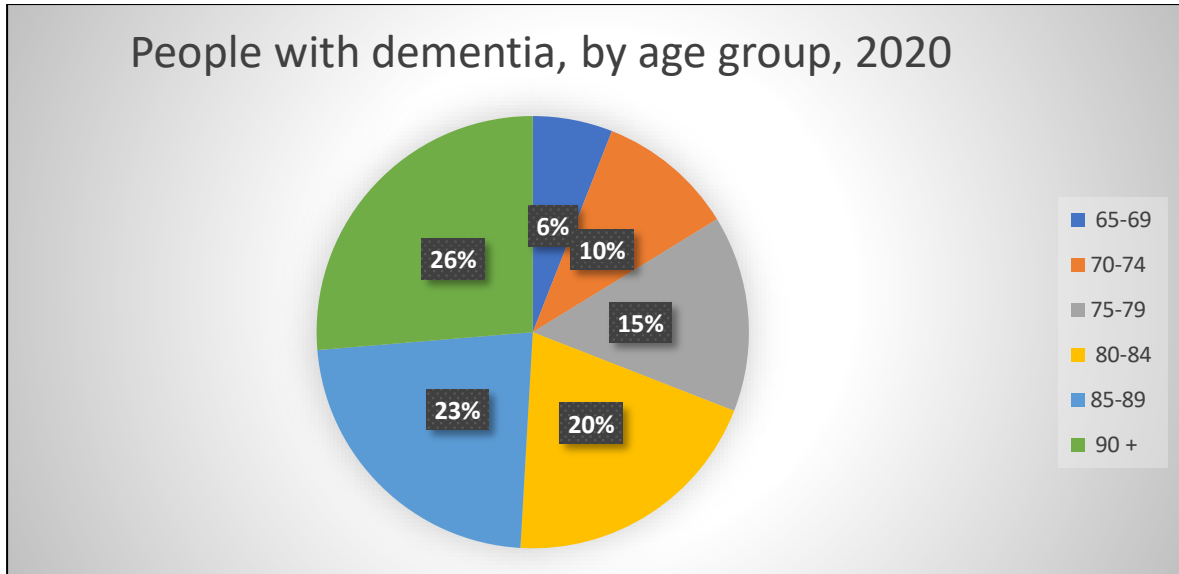


Source: POPPI (based on ONS data). Available at: <http://www.poppi.org.uk/>

Graph 2 shows how this population is broken down by 5-year age group. Older age groups account for larger proportions of the dementia population in Barnet.

Graph 2: People with dementia aged 65+ in Barnet, by 5-year age group, 2020

People with dementia, by age group, 2020



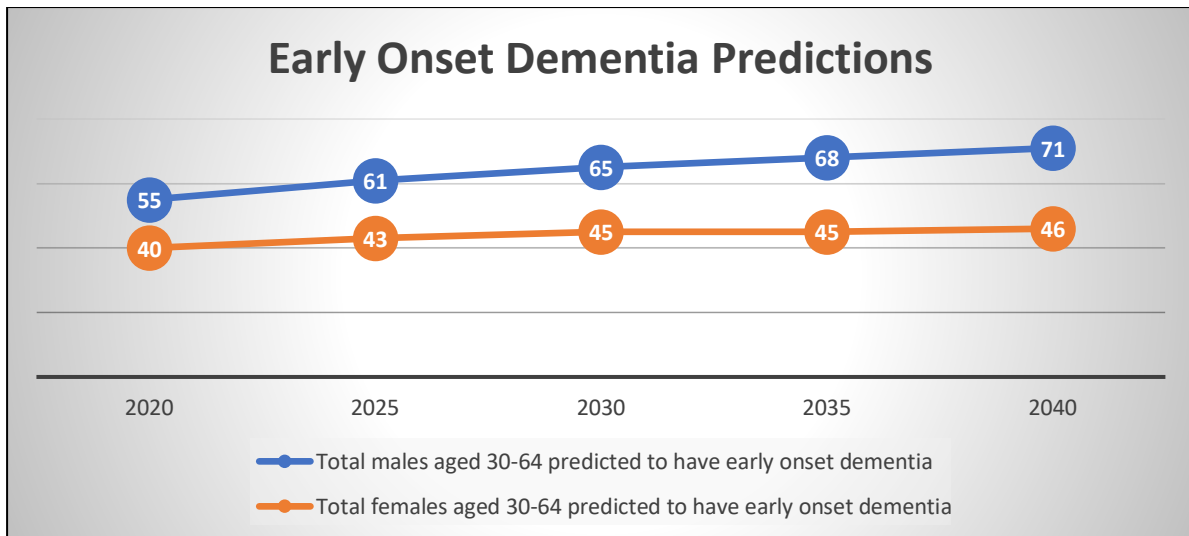
In Barnet, based on 2020 population estimates (4,387) amongst people with dementia aged 65+, approximately 877 (20%) who have vascular dementia, 658 (15%) Lewy bodies and 219 (5%) frontotemporal dementia.

Type of dementia	Numbers
Alzheimer's disease	2,633
Vascular dementia	877
Lewy bodies	658
Frontotemporal dementia	219

Source: NICE Clinical Knowledge Summaries; Dementia; Causes. National Institute for Clinical Excellence website

As the population increases, the number of people with early onset (under 65 years old) dementia is also projected to increase. Between 2020 and 2040, the number of younger people living with early onset dementia will rise from 55 to 71 for males and 40 to 46 for females.

Graph 3: Estimated number of people predicted to have early onset dementia in Barnet



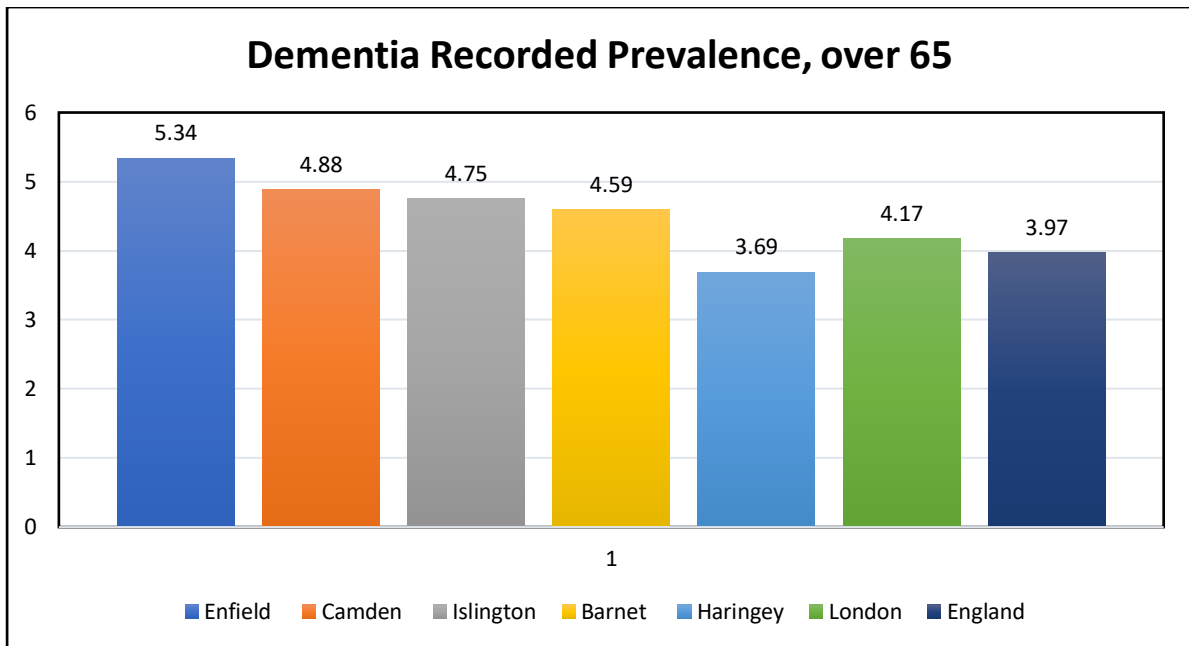
Source: PANSI (based on ONS data). Available at: <http://www.pansi.org.uk/>

PREVALENCE

The recorded dementia prevalence provides an indication of the number of people aged 65 or older who have been diagnosed and who are now living with dementia. This information is crucial to inform local service planning as to the scale of services required to provide treatment, care and support as needed, so those with dementia can live well with the condition.

In Barnet, the diagnosed dementia rate for people aged 65 and over is 4.59%. This equates to 2,721 people. This is higher than both London 4.17% and England 3.97%.

Graph 4: Diagnosed dementia rates (aged 65+) in North Central London, London and England, September 2022



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

In September 22, Barnet had the 6th highest level of diagnosed dementia of all the London boroughs and 4th highest amongst our statistical neighbours.

Graph 5: Diagnosed dementia rates (aged 65+) in Barnet and its 15 nearest statistical neighbours in London

Area	Recent Trend	Neighbour Rank	Count	Value	95% Lower CI	95% Upper CI
England	-	-	422,973	3.97*	3.96	3.99
Neighbours average	-	-	28,508	4.31*	4.26	4.36
Enfield	-	5	1,718	5.34	5.10	5.59
Wandsworth	-	12	1,693	4.72	4.50	4.94
Sutton	-	10	1,491	4.66	4.44	4.90
Barnet	-	-	2,721	4.59*	4.42	4.76
Croydon	-	1	2,488	4.51	4.34	4.69
Bromley	-	6	2,738	4.43	4.28	4.60
Ealing	-	3	2,133	4.24	4.07	4.42
Bexley	-	14	1,722	4.20	4.01	4.40
Hillingdon	-	7	1,814	4.19	4.01	4.38
Redbridge	-	4	1,697	4.15	3.96	4.35
Brent	-	13	1,871	4.07	3.89	4.26
Richmond upon Thames	-	11	1,412	4.01	3.81	4.22
Merton	-	9	1,117	4.01	3.78	4.25
Harrow	-	2	1,524	3.93	3.74	4.12
Hounslow	-	8	1,331	3.85	3.66	4.06
Kingston upon Thames	-	15	1,038	3.85	3.62	4.08

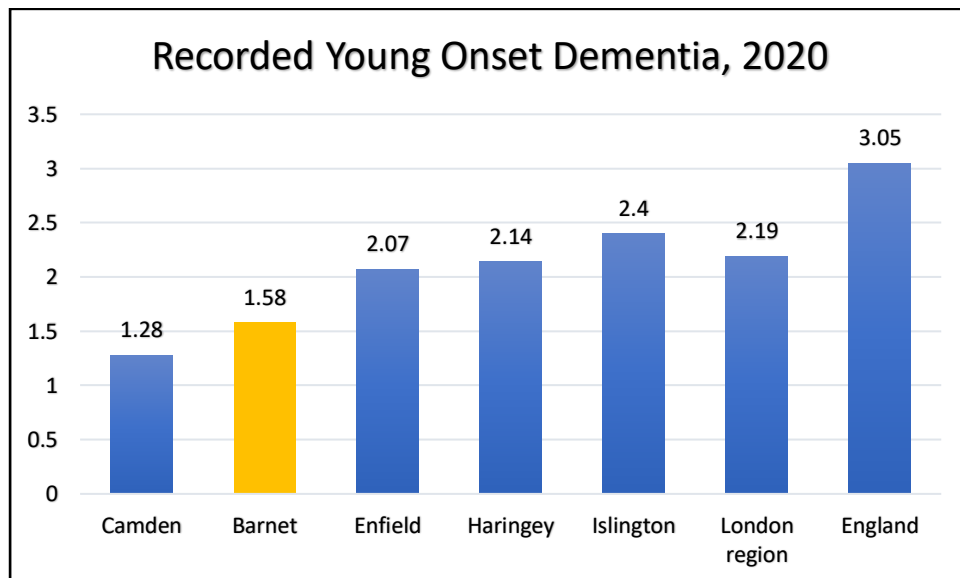
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

Young Onset Dementia

Young-onset dementia (also known as early or working age dementia) refers to dementia that is diagnosed before the age of 65. People diagnosed with dementia under the age of 65 have different needs and commitments, they often follow a different clinical pathway, and may also need different forms of support, compared to people diagnosed with dementia over the age of 65.

For 2020, the crude recorded prevalence of dementia (based on GP registers) for young onset patients (aged under 65 years) in Barnet is 1.58 per 10,000 (approximately 47 people) which is significantly lower than both London (2.19 / 10,000) and England (3.05 /10,000).

Graph 6: Crude Recorded Prevalence (aged under 65 years) per 10,000



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

PREVENTING WELL: STEPS TO REDUCE RISKS

Risk factors for dementia

There are many factors that may increase our chances of developing dementia. About a third of Alzheimer's diseases are estimated to be attributable to potentially modifiable risk factors¹. The Lancet Commissions on Dementia Prevention,

¹ Norton S et al. 'Potential for primary prevention for Alzheimer's disease: an analysis of population-based data', *Lancet Neurology* (2014)

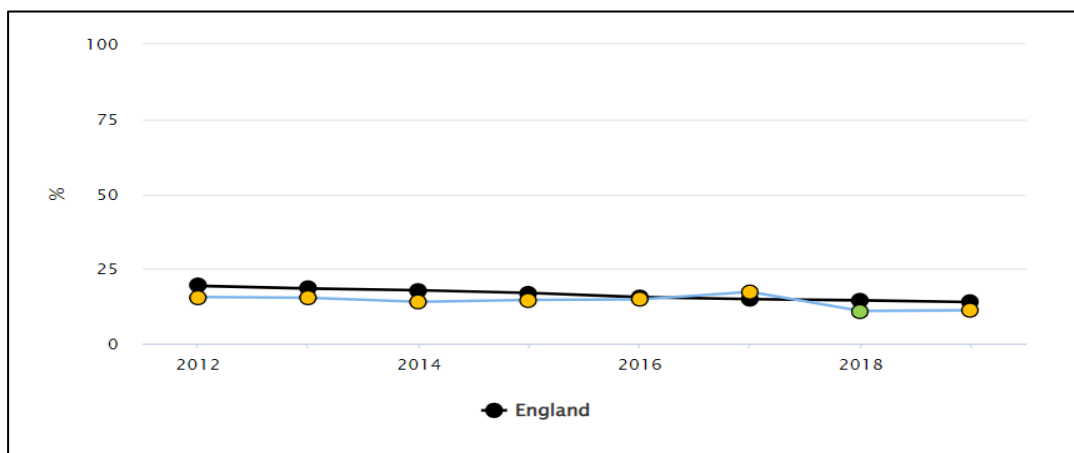
Intervention and Care (LCDPIC) identified 35% of dementia was attributable to a combination of the following risk factors².

- Midlife hearing loss can increase stress to brain and social isolation. It is estimated that hearing loss can be responsible for 9.1% of the risk of dementia onset;
- Cardiovascular risk factors for dementia include: hypertension, diabetes and obesity;
- Lifestyle and psychological risk factors include: depression, smoking, lack of physical activity and alcohol consumption;
- Preventative factors include educational and occupational attainment and social isolation.

Smoking

Smoking doubles the risk for developing dementia. Smoking prevalence for adults in Barnet adults has gone down from 15.6% in 2012 to 11.1% in 2019 which is lower than both London 12.9% and England 13.9%.

Graph 7: Smoking Prevalence in adults (18+) - current smokers 2019



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

Excess weight

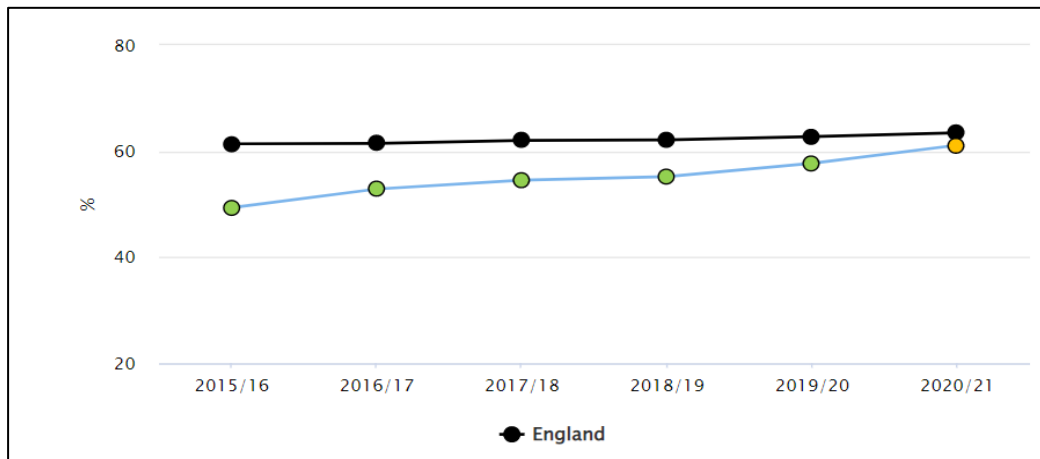
Excess weight in adults, which is recognised as a major determinant of premature mortality and avoidable ill health.

61.1% of adults in Barnet have excess weight (i.e. are classified as either overweight or obese with a BMI ≥ 25 kg / m²), as of 2020/21. This proportion is significantly lower than the national average (63.5%) and significantly higher than London figure

² Livingston et al. 'Dementia prevention, intervention, and care'. *The Lancet* (2017) 390: 2673-734.

(56.0%). The proportion of adults with excess weight has been rising from 49.4% in 2015/16.

Graph 8: Percentage of adults (aged 18+) classified as overweight or obese 2020-21



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Physical Activity

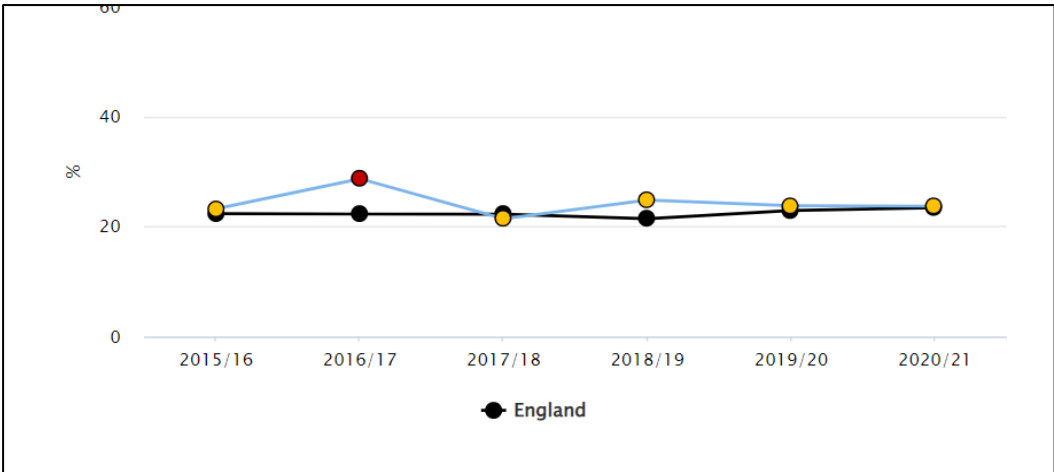
In the UK, physical activity was estimated to have the greatest influence of the risk factors studied. A study found that 21.8% of the Alzheimer’s cases were estimated to be attributable to physical inactivity. These could potentially be prevented if people were more active³.

Physical inactivity is defined as engaging in less than 30 minutes of physical activity per week.

For 2020/21, 23.7% of adults in Barnet (59.8%) were significantly inactive (i.e. engaging in less than 30 minutes of activity per week). This was similar to England 23.4% and slightly lower than London 24.3%.

Graph 9: Percentage of physically inactive adults, 2020-21

³ Norton S et al. ‘Potential for primary prevention for Alzheimer’s disease: an analysis of population-based data’, *Lancet Neurology* (2014)



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

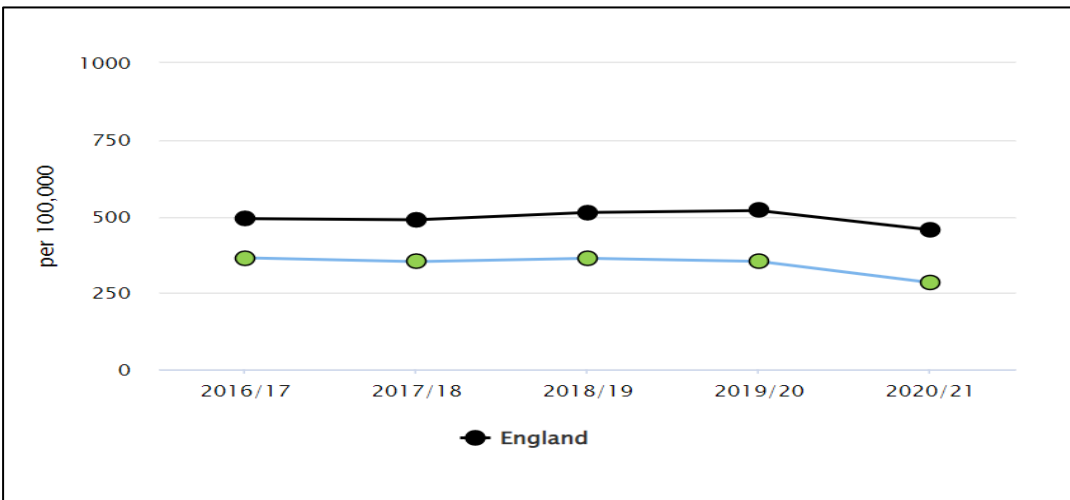
Alcohol

Drinking more than the recommended limit for alcohol increases a person's risk of developing common types of dementia such as Alzheimer's disease and vascular dementia.

Admission episodes for alcohol-related conditions (Narrow)

This is a measure of hospital admissions where the primary diagnosis (main reason for admission) is an alcohol-related condition. Barnet has the 3rd lowest rate for hospital admissions (284 per 100,000) due to alcohol related conditions in London (348 per 100,000). Barnet's rate is significantly England 456 per 100,000.

Graph 10: Trend in hospital admissions to due to alcohol-related conditions, 2016 - 2020



Source: [Local Alcohol Profiles for England - Data - OHID \(phe.org.uk\)](https://phe.org.uk/local-alcohol-profiles)

Alcohol-related brain damage (ARBD)

Alcohol-related brain damage is a brain disorder caused by regularly drinking too much alcohol over several years. The term ARBD covers several different conditions including alcoholic dementia. Most people with ARBD who receive good support and remain alcohol-free make a full or partial recovery.

Reliable figures of the number of people with ARBD in Barnet are not available and the condition is likely to be under-diagnosed. This is partly because having problems with alcohol still carries a stigma within society, so people may not seek help. Awareness of ARBD even among professionals also varies widely.

Post-mortem studies show that about 1 in 200 of the general adult population in the UK are affected by ARBD⁴.

People with ARBD tend to be middle-aged, typically in their 40s or 50s, although they can be younger or older. Alcohol-related brain damage is thought to cause more than 10 per cent of 'dementia' in adults under 65 years of age.

Korsakoff's syndrome is the most well-known form of ARBD and much less common - about one in eight people with alcoholism affected by this syndrome.

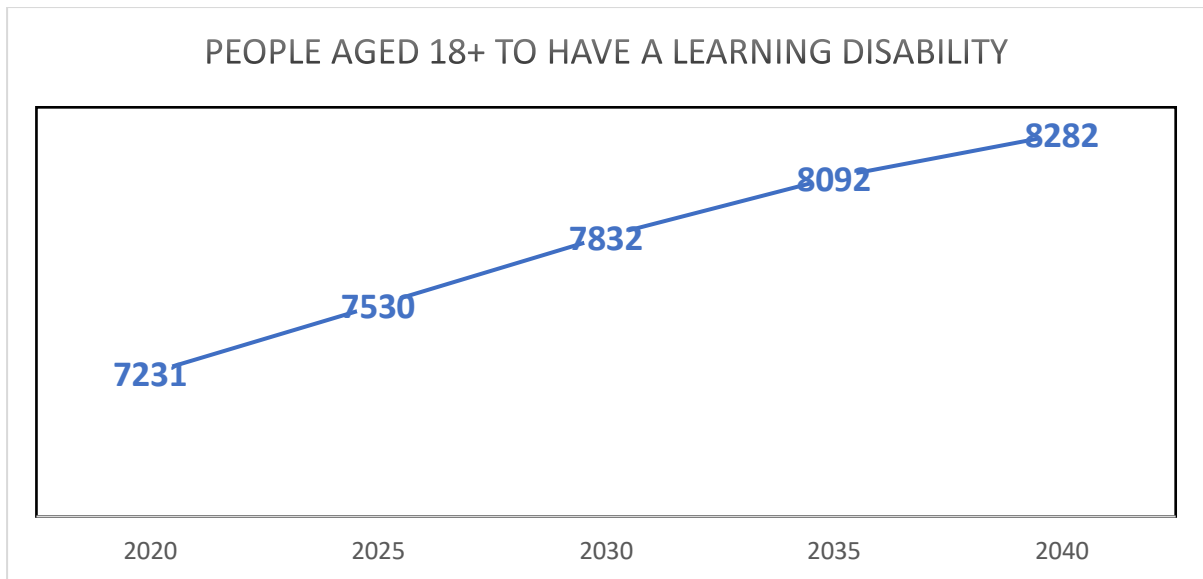
Learning Disability

There are predicted to be 7,231 adults aged 18 and over living with a learning disability in Barnet, in 2020.

As the population increases, the number of adults (aged 18+) with learning disability in Barnet is predicted to increase by 7,231 from 8, 282 in 2040. This represents 15% increase by 2040.

Graph 11: Number of adults (aged 18+) in Barnet with learning disability, 2020-2040

⁴ <https://www.alzheimers.org.uk/about-dementia/types-dementia/who-develops-arbd#content-start>



Source: POPPI and PANSI (based on ONS data). Available at: <https://www.poppi.org.uk/> and <https://pansi.org.uk>

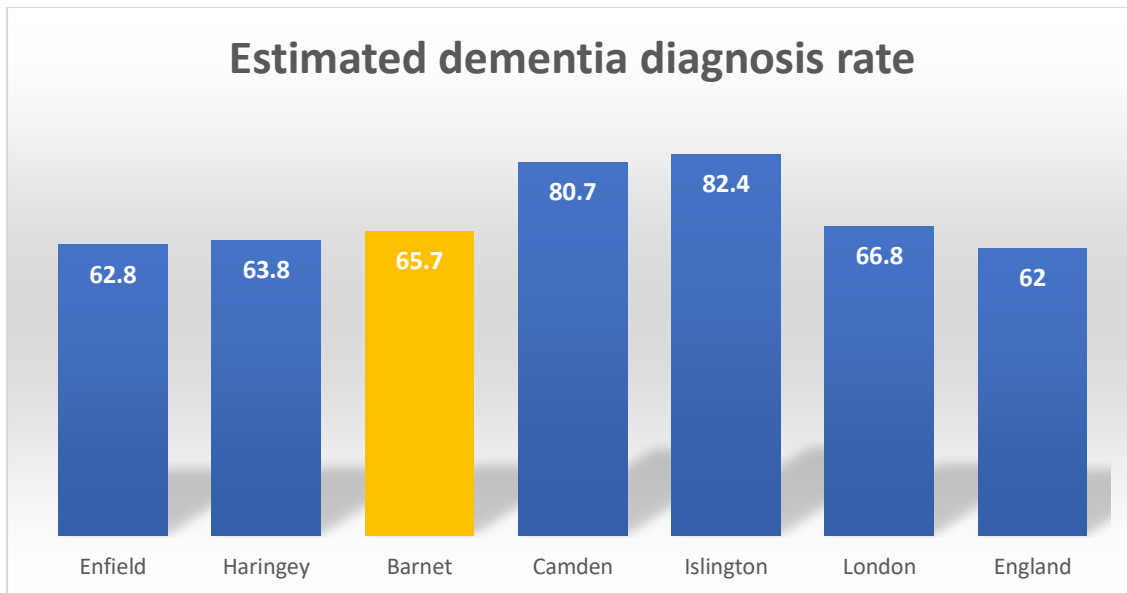
DIAGNOSIS

Estimated diagnosis rate

A timely diagnosis enables people living with dementia, their carers and healthcare staff to plan accordingly and work together to improve health and care outcomes.

In 2022, the estimated percentage of older people (aged 65+) living with dementia in Barnet who have a formal diagnosis is 65.7%. This is not significantly different from either London 66.8% or England 62%. Islington has the best diagnosis rate in North Central London and London.

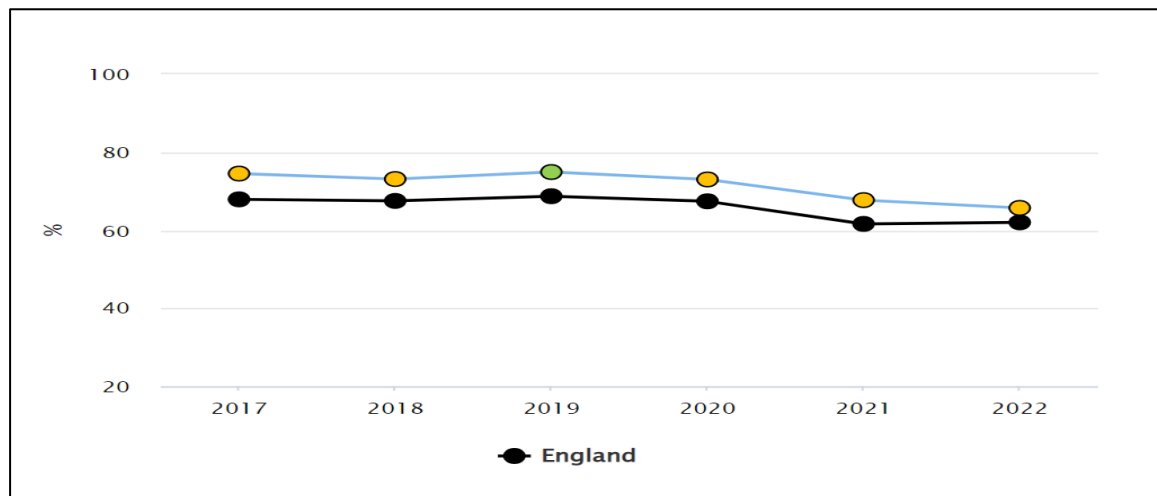
Graph 12: Estimated dementia diagnosis rate (aged 65 and over) 2022



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

Graph 13 below shows that in Barnet dementia diagnosis rate has gone down from 74.5% in 2017 to 65.7% in 2022.

Graph 13: Trends in estimated dementia diagnosis rate (aged 65 and over)

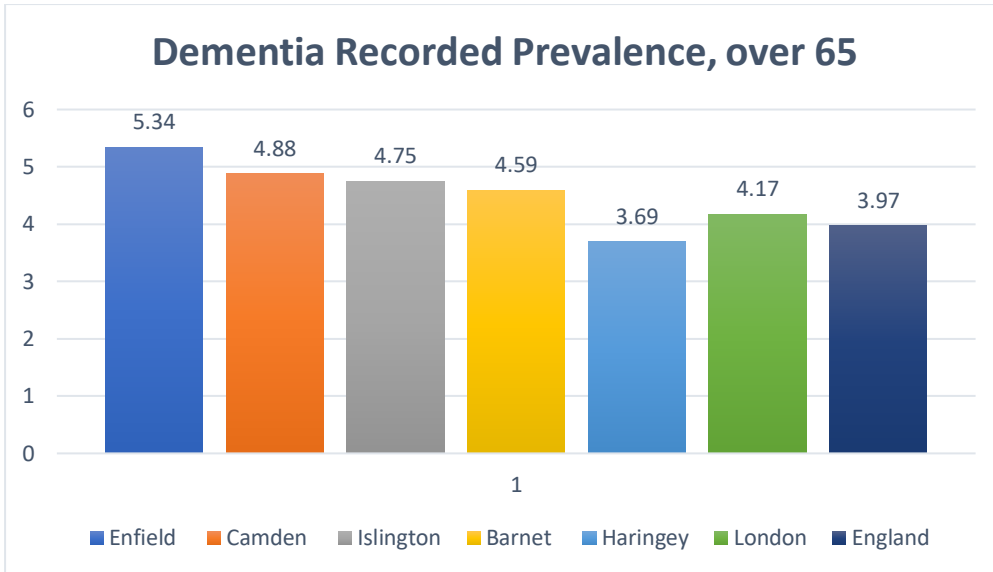


Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

Recorded Prevalence

Graph below shows that based on the 2020-21 data, the percentage of patients (aged 65+) with dementia as recorded on GP practice disease registers is 4.6. This is better than London and England average but lower than Enfield, Camden and Islington.

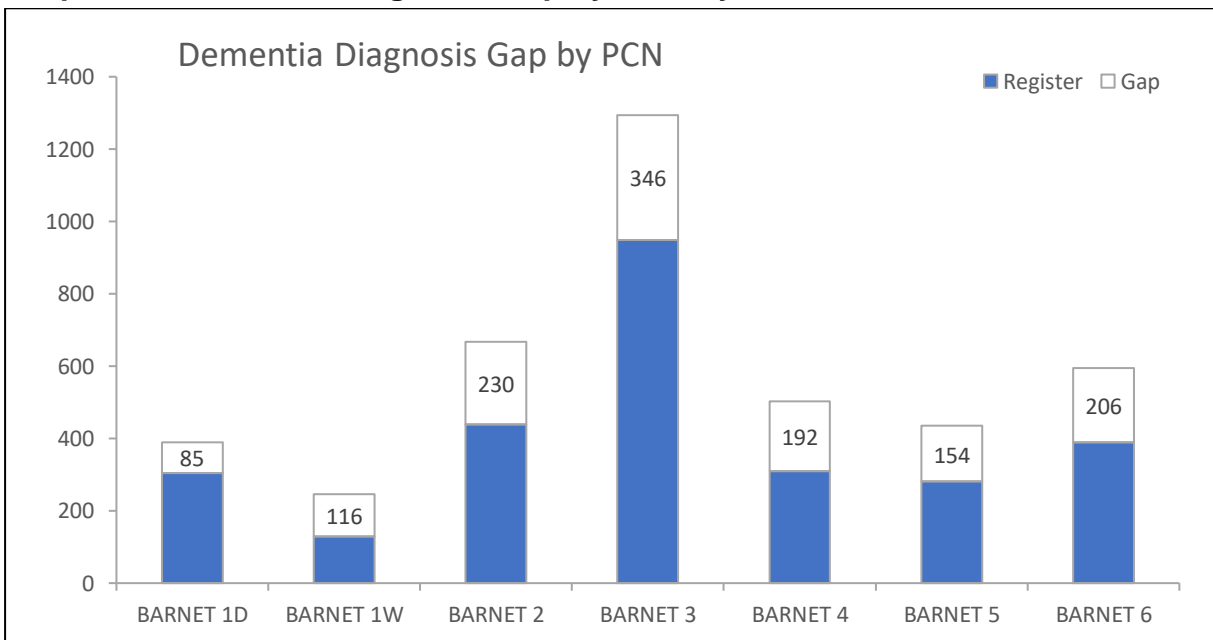
Graph 14: Dementia recorded prevalence, over 65, 2020-21



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

Whilst the majority of people are likely to have access to appropriate support and care, there are still some more we can do to find those who are undiagnosed. Graph 15 below, shows the gap in diagnosis within each Primary Care Networks.

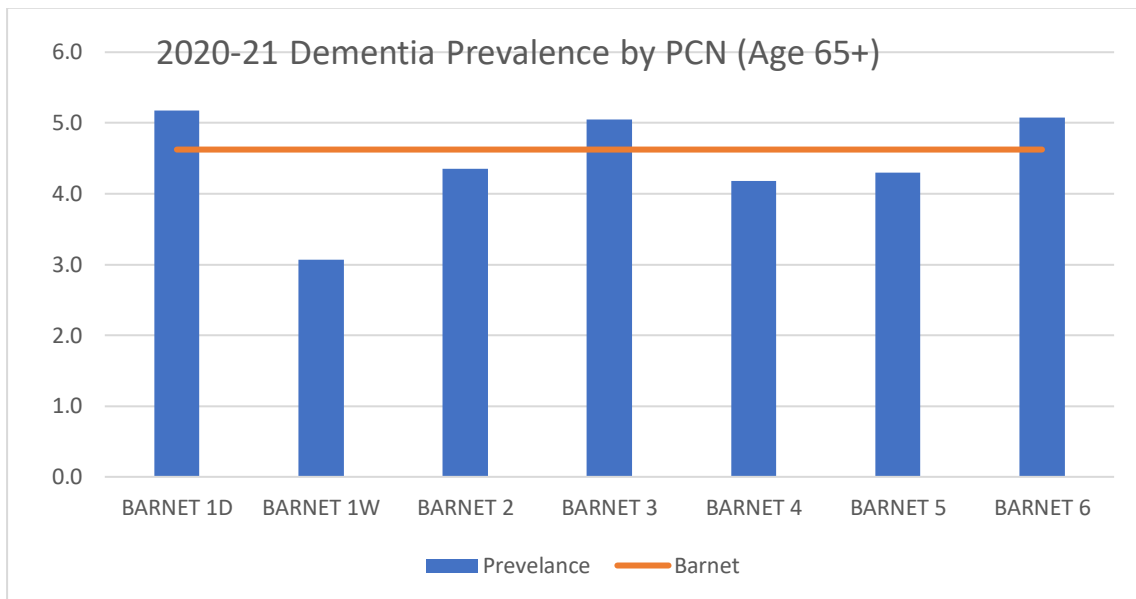
Graph 15X: Dementia Diagnosis Gap by Primary Care Networks



Source: QOF 2020-21

Graph below shows dementia recorded prevalence by Primary Care Networks against Barnet average.

Graph 16: Dementia recorded prevalence by Primary Care Networks, 2020-21



Source: QOF 2020-21

POST-DIAGNOSTIC SUPPORT

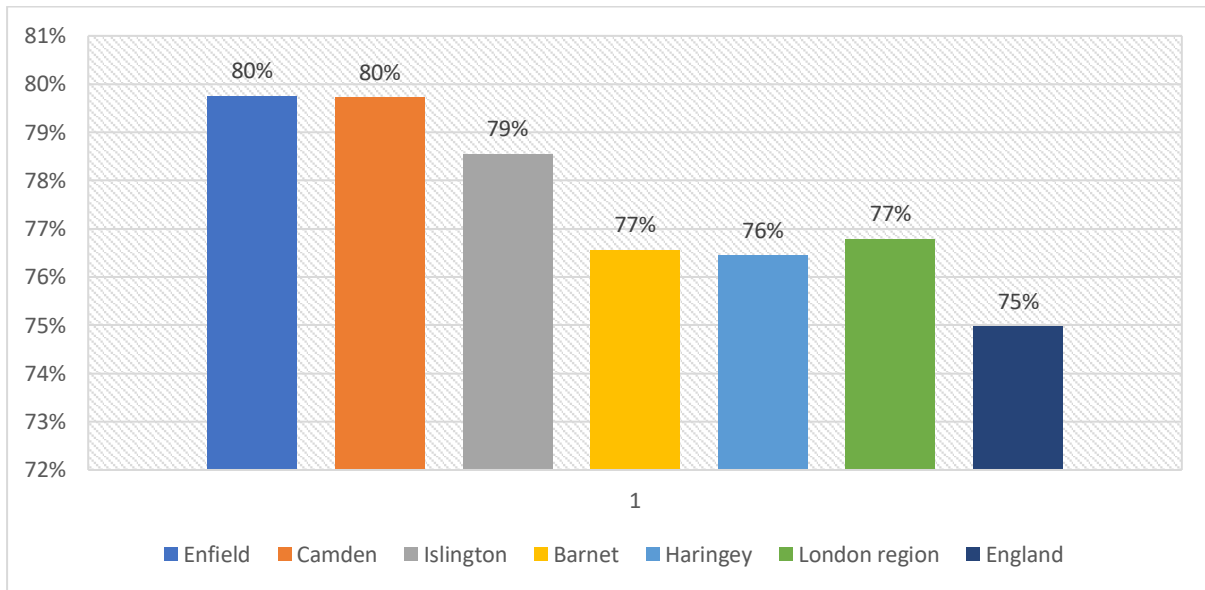
Care plan reviews

A face-to-face review of the support needs of both dementia patient and their carer is an important element of their care plan. In particular the review should address four key issues:

- an appropriate physical and mental health review for the patient
- if applicable, the carer's needs for information commensurate with the stage of the illness and his or her and the patient's health and social care needs
- if applicable, the impact of caring on the care-giver
- communication and co-ordination arrangements with secondary care (if applicable).

The graph below shows the percentage of patients diagnosed with dementia whose care plan was reviewed in a face-to-face review in the preceding 12 months. Barnet had a lower percentage of patients whose care plan had been reviewed by GPs in the last 12 months than Enfield, Camden and Islington, similar to London and slightly higher than Haringey and England.

Graph 17: Dementia care plan has been reviewed in the last 12 months, North Central London



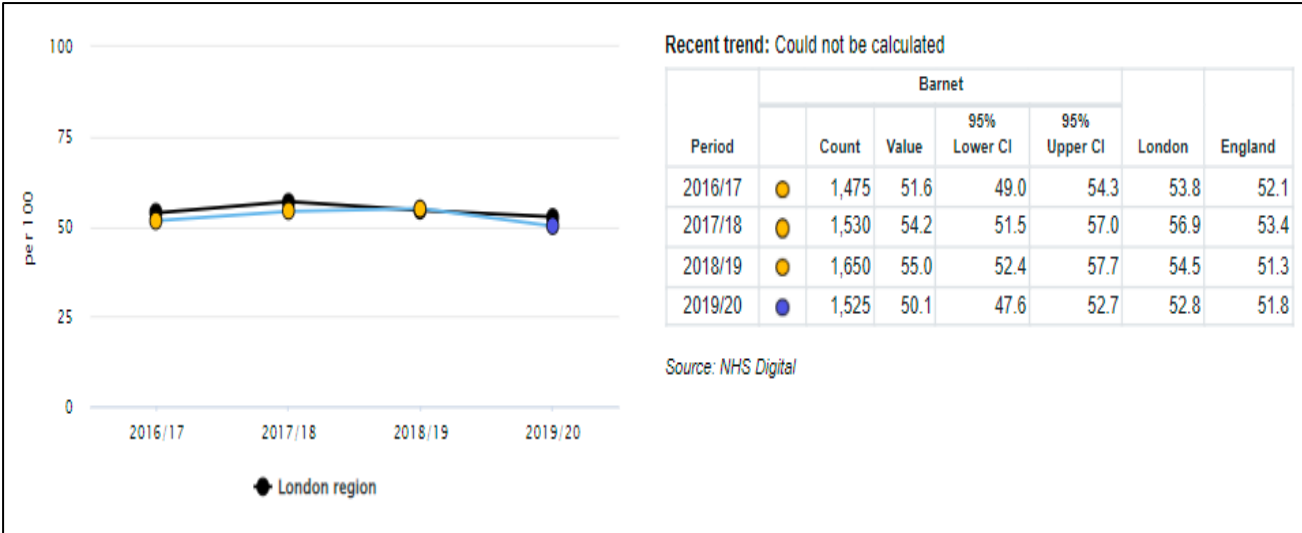
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

In-patient admissions

This data provides an indication of the use of inpatient general hospital services for people diagnosed with dementia or Alzheimer's.

Out of every 100 people on the dementia registers in GP practices in Barnet, 50.1% were admitted as inpatients during 2019/20. This ratio of inpatient service use to recorded diagnosis is lower than both London 52.8% and England 51.8%. With regards to trends since 2018, the ratio of inpatient use for dementia patients in Barnet fell significantly from 55% to 50.1%.

Graph 18: Trend in ratio of inpatient service use to recorded diagnoses, Barnet and London, all ages.



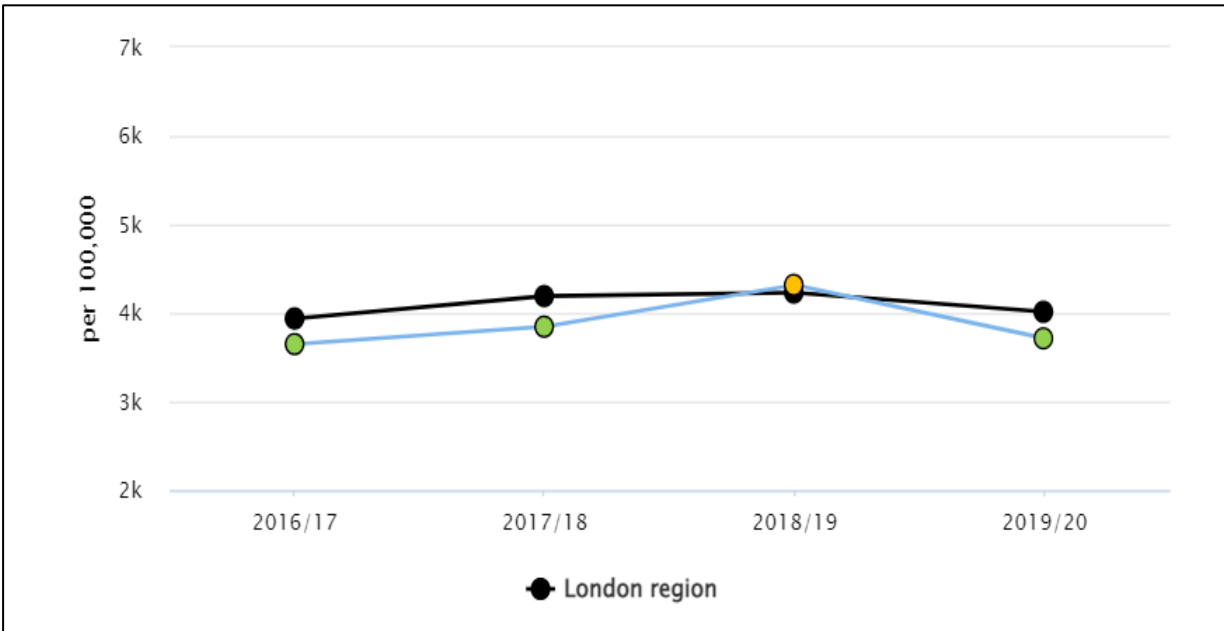
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Emergency admissions

Some emergency admissions could be avoided if patients underlying cause are managed well and individuals are well supported. This indicator helps understanding the variation in the provision of care of people with dementia in England.

Barnet rates for emergency admission with a mention of dementia for people aged 65 years and over are significantly lower than London and has been steady since 2016/17 with exception of a slight increase in 2018/19.

Graph 19: Trend in the Directly Standardised Rate (DSR) of emergency admissions with a mention of dementia, Barnet and London, aged 65+, 2016/17 – 2019/20.



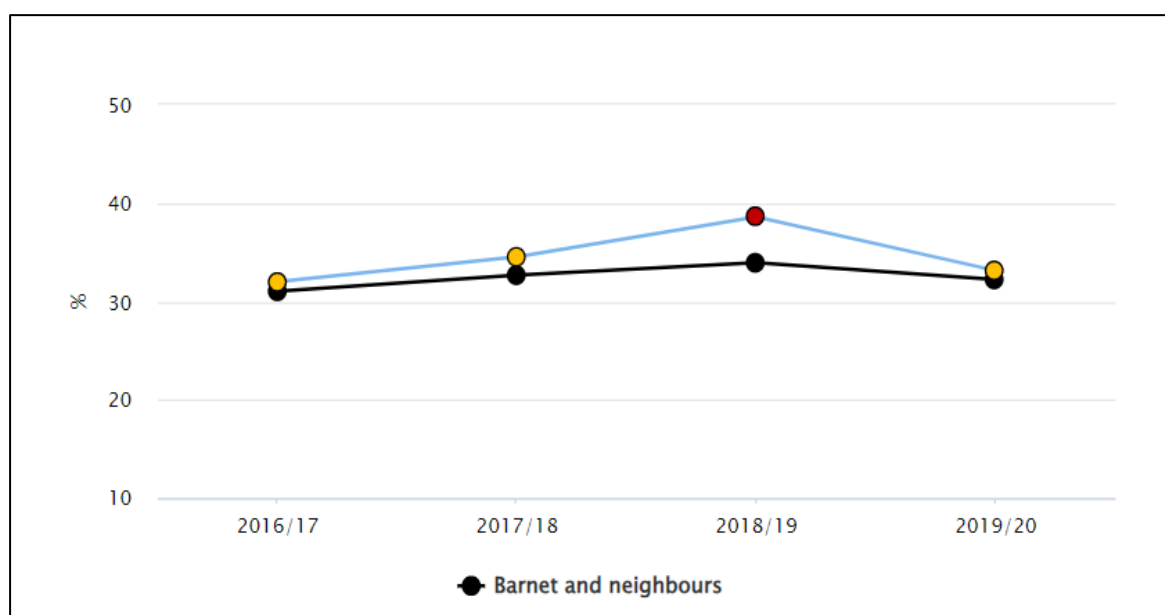
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Short stay emergency admissions

Changes in the surrounding environment can increase the levels of anxiety and stress for an individual. People with dementia and Alzheimer's can be more susceptible to these changes, which can cause additional distress. Short stay emergency inpatient admissions (of one night or less) therefore should be avoided if possible.

The graph below shows that Barnet's rate of short stay emergency admissions for those aged 65 year was 33.1% in 2019/20. This is slightly higher than statistical neighbours 32.2% and England 31.4% but this is not statistically significant.

Graph 20: Short stay emergency admissions (aged 65 years and over)



Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk/dementia-profile)

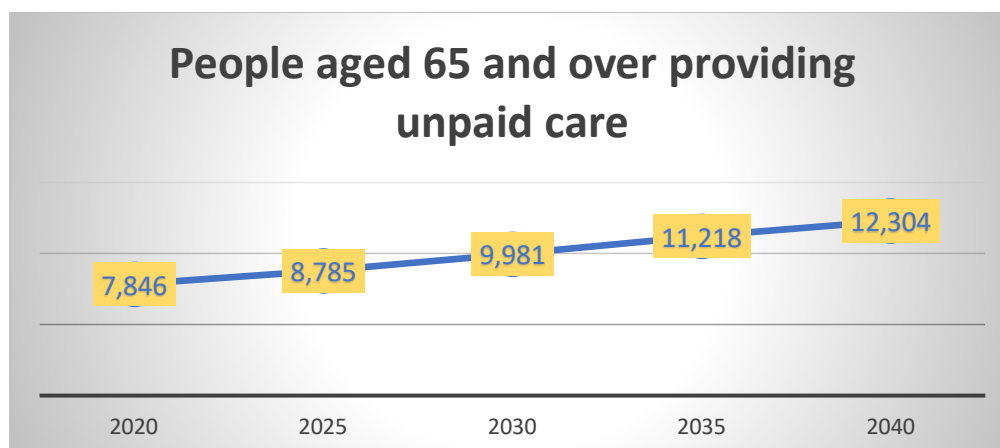
LIVING WELL WITH DEMENTIA

Unpaid care

Ensuring that carers are supported and valued in their role enables them to continue to provide support, preventing admissions and prolonging the time that people can remain independent in their own homes. Carers of people with dementia should be made aware of and offered the opportunity for respite, education, training, emotional and psychological support so that they feel able to cope with their caring responsibilities and to have a life alongside caring.

Graph below shows the number of people in Barnet aged 65+ providing unpaid care. Between 2020 and 2040, this number is predicted to rise from 7,846 to 12,304, which is a 57% increase. These figures are not specific to carers of people living with dementia, nevertheless, they are useful to help us to understand the size of the challenge.

Graph 21: Number of older people in Barnet (aged 65+) providing unpaid care, 2020-2040



Source: POPPI (based on ONS data). Available at: <http://www.poppi.org.uk/>

Carers with dementia

Total number of carers have increased 83% since 2018-19. Total number of carers with dementia have increased only 33% within the same time period. The proportion of total carers with dementia against total number of carers, however, have gone down from 4.10% in 2018-19 to 3% in 2021-22.

	Number of Carers				Number of Carers with Dementia							
	Under 18	18-64	65+	Total Carers	Under 18	Under 18 % of all Carers	18-64	18-64% of all Carers	65+	65+ % of all Carers	Total Carers with Dementia	% of Carers with Dementia
18-19	4	527	739	1270	0	0%	1	0.20%	51	6.90%	52	4.10%
19-20	0	589	629	1218	0	0%	2	0.30%	37	5.90%	39	3.20%
20-21	0	483	505	988	0	0%	1	0.20%	24	4.80%	25	2.50%
21-22	0	1174	1154	2328	0	0%	2	0.20%	67	5.80%	69	3.00%

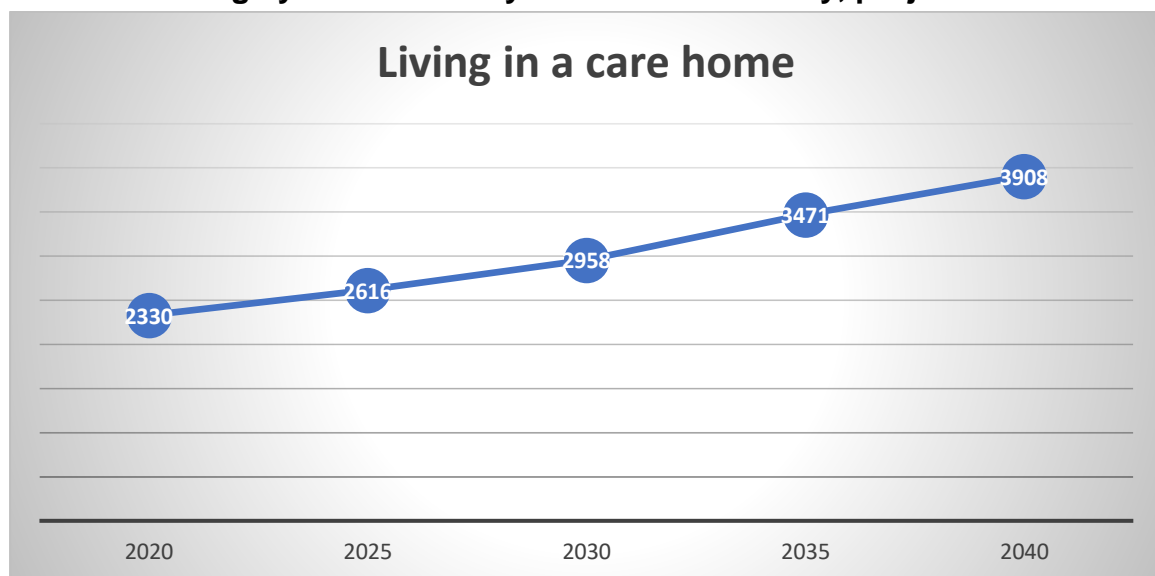
Source: Adults and Communities Mosaic Database

Living in a care home

People living with dementia tend to want to stay in their own homes and retain as much independence as possible. But as the condition progresses full-time care can be needed and many people with dementia move into care and nursing homes. People with dementia should have access to safe and high-quality long-term care services⁵.

Barnet had an estimated 2,330 people living in care homes with or without nursing by local authority or non-local authority in 2020; this is expected to rise by almost 68% to 3,908 people by 2030.

Graph 22: Total population aged 65 and over living in a care home with or without nursing by local authority / non-local authority, projected to 2040



Source: POPPI (based on ONS data). Available at: <http://www.poppi.org.uk/>

The Alzheimer’s Research UK suggests that 69% of people living in care homes have dementia diagnosis⁶. In Barnet, this equates to approximately 2,697 people living in care homes will have dementia diagnosis by 2040.

Adult Social Care Service Users

Quality rate of residential and nursing home care

The graph below shows that 83.9% of residential and nursing home beds in Barnet, suitable for older dementia patients (aged 65+), were rated as “Good” or “Outstanding” by the Care Quality Commission during 2020. This was significantly higher than both England 74.1% and statistical neighbours average 76.7%.

⁵ Prime Minister’s Challenge on Dementia 2020 Implementation Plan: 2016

⁶ Prince, M et al (2014) Dementia UK: Update Second Edition report produced by King’s College London and the London School of Economics for the Alzheimer’s Society

Graph 23: Quality rating of residential care and nursing home beds (aged 65 years and over), 2020

Area	Value	Lower CI	Upper CI
England	74.1	74.0	74.3
Neighbours average	76.7*	76.1	77.4
Harrow	97.8	96.6	98.6
Richmond upon Thames	95.9	94.0	97.2
Kingston upon Thames	91.6	89.7	93.3
Merton	89.6	87.0	91.7
Redbridge	88.7	86.3	90.7
Wandsworth	86.0	83.9	87.8
Barnet	83.9	82.2	85.5
Bromley	82.1	79.7	84.3
Croydon	77.3	75.3	79.1
Hounslow	74.2	70.4	77.7
Brent	71.9	68.5	75.1
Enfield	71.6	69.1	74.1
Sutton	70.3	67.3	73.2
Hillingdon	63.0	60.2	65.7
Ealing	55.2	52.2	58.1
Bexley	47.5	44.7	50.3

Source: Care Quality Commission

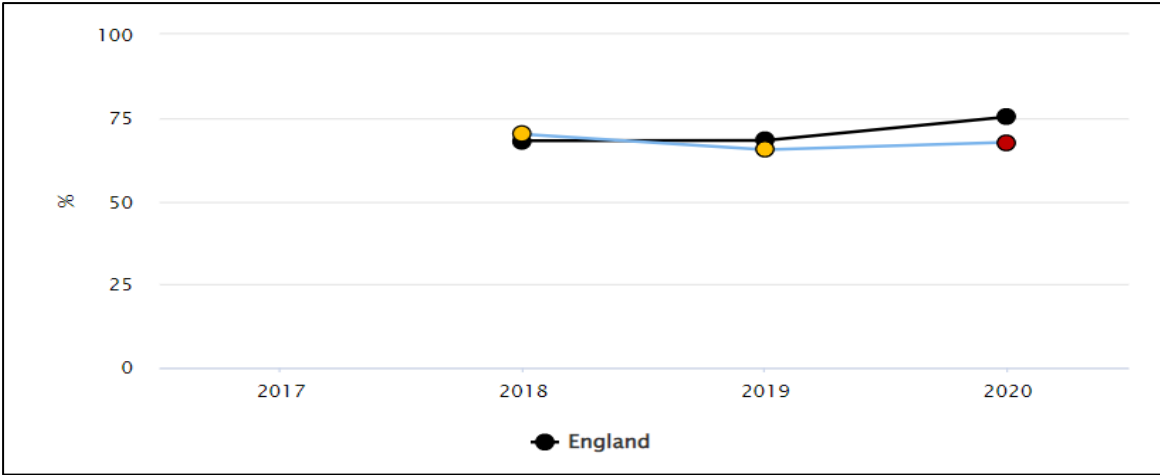
This should be interpreted together with the 'Dementia: Residential care and nursing home bed capacity (aged 65+)' (see next Graph below)

Residential care and nursing home bed capacity (aged 65 years and over)

It is estimated that 70% of people with dementia may eventually require long-term residential care. Therefore, this indicator provides information which will allow local service commissioners to address bed capacity issues where appropriate. This indicator illustrates the number of residential care and nursing home beds, per 100 persons registered with dementia (aged 65 +) per local authority.

Below graph shows that Barnet rate for residential and nursing home beds capacity was 67.7% in 2020. This is significantly higher than London 51.9% but lower than England 75.3%. Since 2017 Barnet's bed capacity has gone down from 70% to 67.7%.

Graph 24: Trend in residential care and nursing home bed capacity (aged 65 years and over)



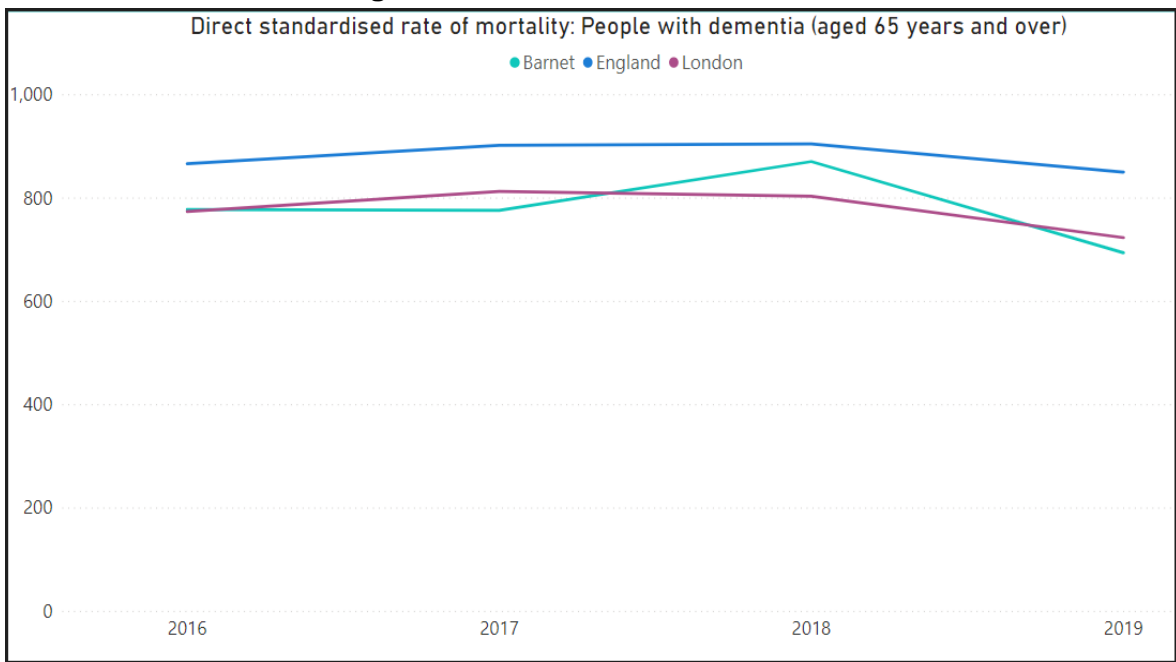
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

DYING WELL

Dementia mortality

In 2019, the directly age standardised mortality rate (DSR) for people in Barnet aged 65+ with dementia was 693 per 100,000, which was significantly lower than DSR for London 722.5 per 100,000 and England DSR of 849.3 per 100,000. The DSR for mortality in Barnet for people aged 65+ with dementia, has been going down since 2016.

Graph 25: Direct standardised rate of mortality people with dementia aged 65+, Barnet vs. London and England 2016-19



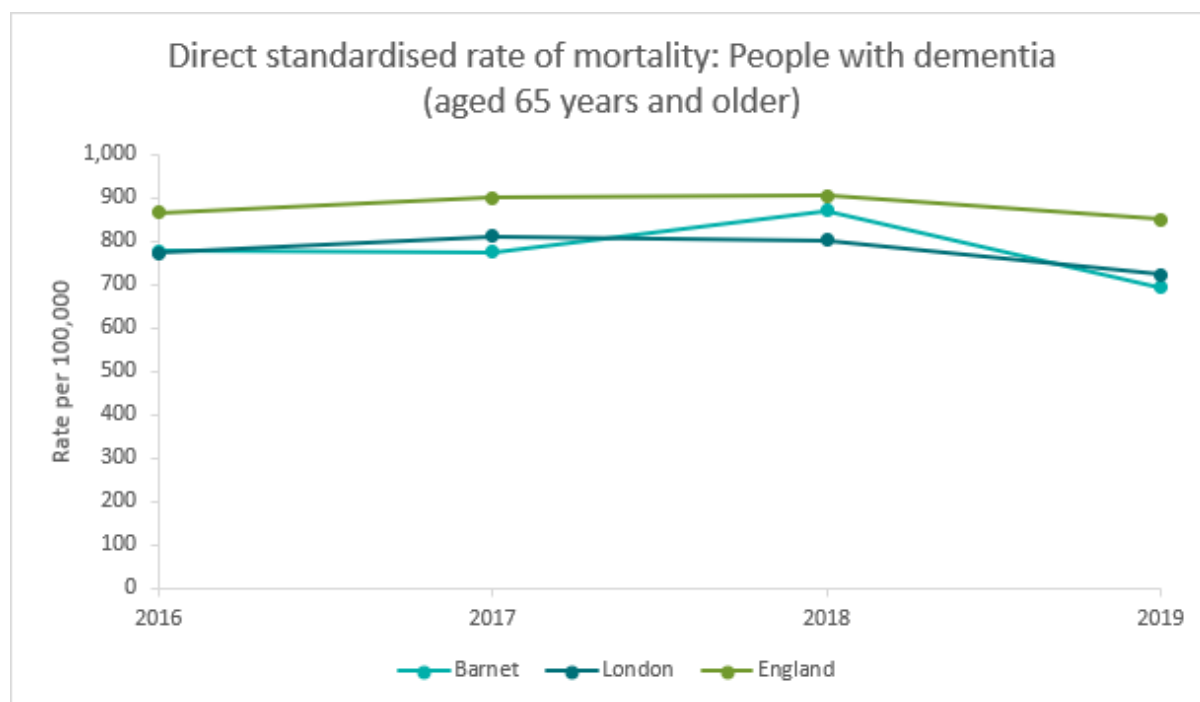
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Death in Usual Place of Residence

The proportion of all dementia and Alzheimer deaths which took place in their usual place of residence is a measure of the quality of end-of-life care for people with dementia aged 65+. Usual residence is defined as: home, care homes (local authority and non-local authority) and religious establishments.

The graph below shows that the percentage of people aged 65+ with dementia in Barnet who died in their usual place of residence in 2019 was 65.9%, which was higher than London average 60%, but significantly lower than the national average 70.3%. There is a slight increase in people who died in usual place of residence since 2016 but this is not significant.

Graph 26: Trend in percentage of people aged 65+ with dementia dying in usual place of residence, Barnet vs. London and England, 2016-2019.



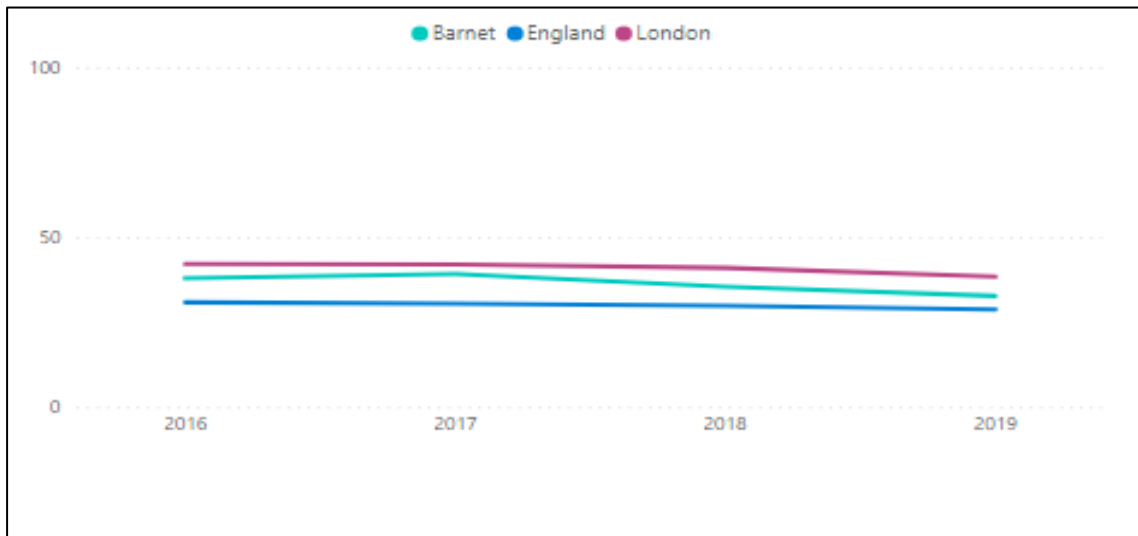
Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Place of death in hospital

The graph below show that percentage of people aged 65+ with dementia in Barnet who died in hospital in 2019 was 32.8%, which was higher than the national average

28.7% and lower than London average 38.4%. There is a slight downward trend since 2016 but the change is not significant.

Graph 27: Trend in percentage of people aged 65+ with dementia dying in hospital, Barnet vs. England, 2016-2019

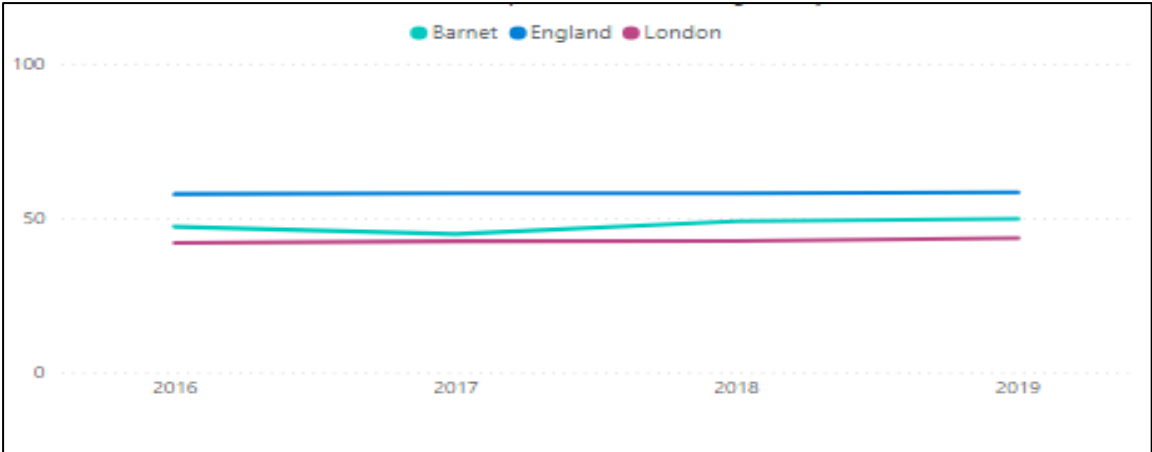


Source: [Dementia Profile - OHID \(phe.org.uk\)](https://phe.org.uk)

Place of death - care home

In 2019, the percentage of people aged 65+ with dementia in Barnet who died at care home was 49.8%, which was higher than London 43.6% but significantly lower than England 58.4%.

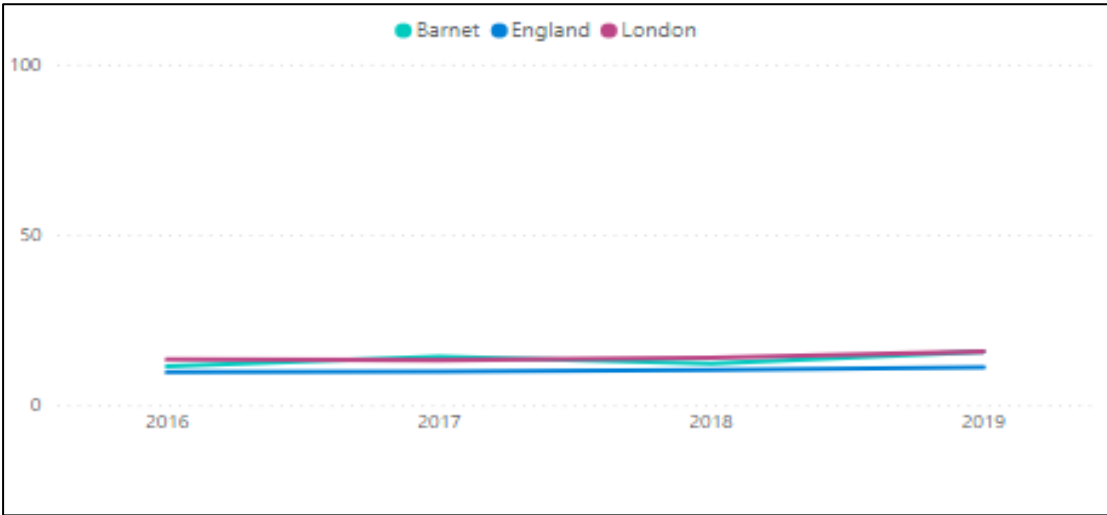
Graph 28: Trend in percentage of people aged 65+ with dementia dying in care home, Barnet vs. England, 2016-2019



Place of death – home

In 2019, the percentage of people aged 65+ with dementia in Barnet who died at home was 15.7%, which was similar to London 15.8% but higher than England (11.2). The proportion of people aged 65+ with dementia in Barnet dying at home did not change significantly between 2016 and 2019.

Graph 29: Trend in percentage of people aged 65+ with dementia dying at home, Barnet vs. England, 2016-2019



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