



Joint Strategic Needs Assessment 2021

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A separate Joint Strategic Needs Assessment for Children and Young People was developed to support the preparation of the Integrated Children's Services Plan in 2020.

Introduction

The Joint Strategic Needs Assessment (JSNA) is a key element of the process of preparing the East Dunbartonshire Strategic Plan. This is a technical document that includes both quantitative and qualitative information to provide an assessment and forecast of needs, enabling investment to be linked to agreed outcomes. The JSNA informs the planning and nature of future services. This document has been produced as part of a process to support the preparation of a new Health and Social Care Partnership (HSCP) Strategic Plan for the period 2022-25.

The purpose of the JSNA is to draw together a collection of data from a wide range of sources that inform the identification of Strategic Plan priorities, and guide the commissioning of a broad range of health and social care services.

The JSNA provides an overview of the current and projected population demographic across East Dunbartonshire. It also provides information relating to life circumstances, health behaviours, and health and social care status. The most current, robust data available were used to inform this needs assessment, including comparisons to the national Scottish average, and available trend data. In addition, available locality level information has been provided to aid local planning. Due to the various data publication dates, some data may appear to be a year or two old but were the most up to date available during the preparation of this document. A key data source is the national Census which was last undertaken in 2011, so some of this data is now quite dated.

The JSNA can only provide a snapshot in time of available health and social care information. It is recognised that there are gaps in the data, and the findings will often raise as many questions as answers that will require to be explored through further analysis. Over time, local systems will be developed to enable the JSNA to more accurately assess the health and social care needs of the East Dunbartonshire local population in order to plan, deliver and commission local quality services to individuals and our communities.

The Covid-19 pandemic in early 2020 will have a significant but not yet fully understood impact on the health and well-being of the local population and in the planning of provisions and services. The pandemic will also have impacted on some of the data in this publication, where this coincided with the period of impact. Data for 2020-21 may therefore not be representative of pre-existing activity or previously anticipated trends.

East Dunbartonshire HSCP is very grateful to the Public Health Scotland LIST Team for their support in the preparation of this document.

1. Summary of Key Points and Implications for Service Planning

Key Points

Demographics

- East Dunbartonshire has an aging population with 22.5% of the total population aged over 65, slightly above the national average (19.1%);
- Large increases in population are projected for those aged over 65yrs, and in particular, the number of persons aged 85yrs+ which was predicted to increase by 48% between 2018 and 2030, the largest increase in Scotland;
- Life expectancy at birth of 80.5 for males in East Dunbartonshire (Scotland 77.1) and 83.7 for females (Scotland 81.1);
- An ageing population and higher life expectancy are expected in combination to increase demand for health & social care services.

Population Health

- 41.1% of East Dunbartonshire residents reported feeling in 'very good health' compared with 34.4% for Scotland
- The proportion of the East Dunbartonshire population prescribed drugs for anxiety, depression or psychosis has increased from 13.6% in 2010/11 to 18.4% in 2019/20 (Scotland increased from 15% to 19.7%)
- 5.6% of the adult population in East Dunbartonshire reported a disability (Scotland 6.7%)
- Of those with a reported disability, 48% were related to sensory impairment.

Long Term Conditions

- 28% of East Dunbartonshire residents identified themselves as having one or more long term conditions (Scotland 30%);
- 6% of individuals on East Dunbartonshire GP registers had a diagnosis of cancer in 2018/19;
- Arthritis, cancer and CHD were the most prevalent conditions in East Dunbartonshire, though prevalence was lower than the Scotland figures for all.

Hospital Activity

- 52% of patients in East Dunbartonshire who had an emergency admission to hospital in 2018/19 were aged over 65yrs (Scotland 44%)
- Of those with multiple emergency admissions 49% were aged 65 years or over (Scotland 41%)
- The East Dunbartonshire A&E attendance rate increased slightly from 255.9 per 1,000 in 2017/18 to 260.7 in 2019/20, however still remained below the Scotland rate of 285.1
- The number of people with multiple emergency admission (2+) decreased by 7% between 2014/15 and 2018/19 (Scotland experienced a 6% increase)
- East Dunbartonshire had an elective admission rate of 166.7 per 1,000 in 2019/20, around 50% higher than the Scotland rate of 111 per 1,000
- 17.1% of elective hospital admissions in East Dunbartonshire were for 'General Surgery' and 13.7% for 'Gastroenterology'.

Deaths

- 71.8% of deaths in East Dunbartonshire in 2019 occurred in those aged 75+ (Scotland 63.0%)
- The most common cause of death in East Dunbartonshire for 2019 was cancer, which accounted for 29.6% of all adult deaths
- For those who died, 89% of people in East Dunbartonshire spent the last 6 months of their life at home or community setting (Scotland 88%)

Impact of Coronavirus

- As at 19th April 2021, there has been 281 COVID-19 related deaths in East Dunbartonshire;
- 53% of the deaths occurred in a hospital setting, with care homes accounting for 42%;
- 56% of the deaths were females.

Summary of Planning Implications

Despite relatively low levels of deprivation, East Dunbartonshire faces challenges in terms of demand for health and social care services. These demands are in a

significant part due to an ageing population and high life expectancy. 22.5% of the population are aged 65+ which is slightly above the national average of 19.1% but with the largest growing 85+ population in Scotland, which is the age-group most in receipt of services.

Life expectancy at birth in East Dunbartonshire is 80.5 for males (Scotland 77.1) and 83.7 females (Scotland 81.1). Older people are more likely to be affected by long-term conditions such as cancer and arthritis that can lead to further health complications. This is supported by the finding that 52% of emergency admissions in East Dunbartonshire were aged 65+ compared with 44% for Scotland. East Dunbartonshire also has a higher elective hospital admission rate of 166.7 per 1,000 in 2019/20, around 50% greater than the Scotland rate of 111 per 1,000. This higher rate of elective admission is also associated with an ageing population¹.

Large increases in population are projected for those aged 65+, and in particular, the number of people aged 85+ was predicted to increase by 48% between 2018 and 2030, which is a steeper rise than any other HSCP in Scotland. It should therefore be expected that East Dunbartonshire will continue to see a rise in elective admissions in the coming years. With the COVID-19 pandemic causing a backlog of elective admissions nationally, this may be particularly felt in East Dunbartonshire which may result in demand for community-based services.

The COVID-19 pandemic is already demonstrating its impact on health and wellbeing. Higher rates of mental illness, alcohol and drug use and public protection referrals have all been experienced in East Dunbartonshire over the period of the pandemic, and likely to have a number of yet unknown consequences on both population health, which should be taken into account for future planning. Some of these trends pre-date the pandemic; for example: the proportion of the East Dunbartonshire population prescribed drugs for anxiety, depression or psychosis increased from 13.6% in 2010/11 to 18.4% in 2019/20. For comparison the Scotland proportion increased from 15% to 19.7%. It will be incumbent upon the HSCP and all of its partners to work together to meet both the pre-existing and new challenges post-pandemic.

¹ ANALYSIS OF TRENDS IN EMERGENCY AND ELECTIVE HOSPITAL ADMISSIONS AND HOSPITAL BED DAYS: 1997/98 TO 2014/15, R Wittenberg et al, 2015

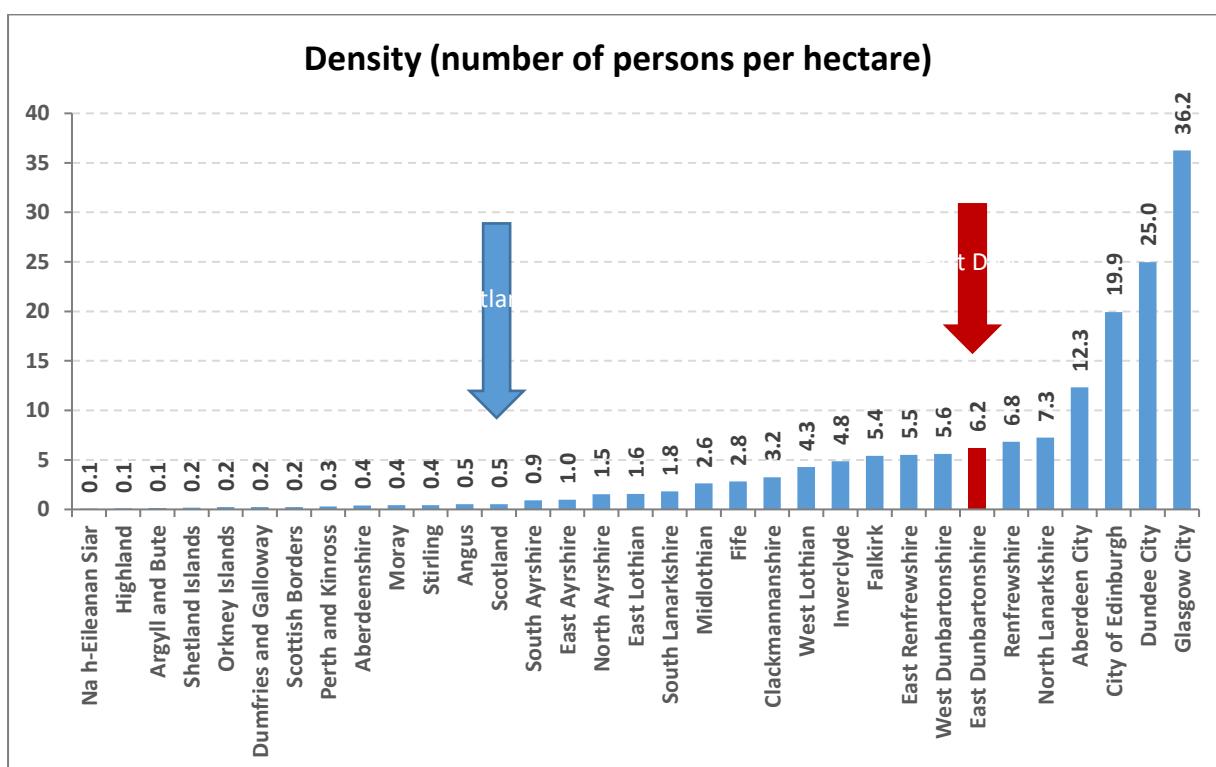
2. Profile of East Dunbartonshire

2.1 Area Profile

East Dunbartonshire covers an area of 17,449 hectares. It is mainly dominated by large urban/other urban areas of over 10,000 people (88.1%), and although there are several small villages, there are no remote small towns or rural areas more than a 30-minute drive from one of the larger towns Scottish Government Urban Rural Classification 2013-14).

There were 6.2 individuals per hectare in 2019 (Scotland 0.7 persons per hectare), which made East Dunbartonshire the 7th most densely populated region in Scotland.

Figure 1: Population Density 2019



Source: NRS, gov.scot

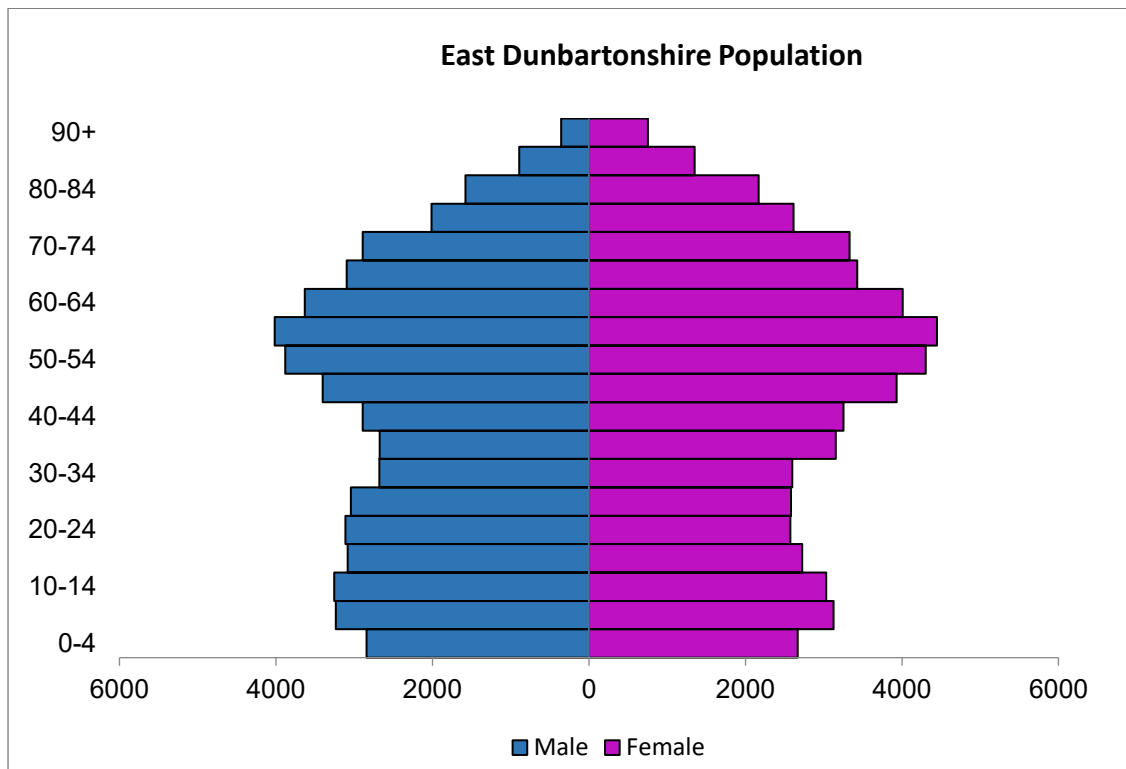
2.2 Demographic Profile

The health and social care needs of any population depend on the size and age of the population. The 2019 population estimate showed that East Dunbartonshire had a population of 108,640 people, an increase of 0.3% from the 2018 estimate. The estimated number of older people was higher than the national average with 22.5%

aged over 65yrs (Scotland 19.1%), and 10.8% aged over 75yrs (Scotland 8.5%). The population aged 16-29yrs was 14.6% (Scotland 17.5%).

The chart below shows the population breakdown of East Dunbartonshire by age and gender.

Figure 2: Population pyramid by age and gender 2019



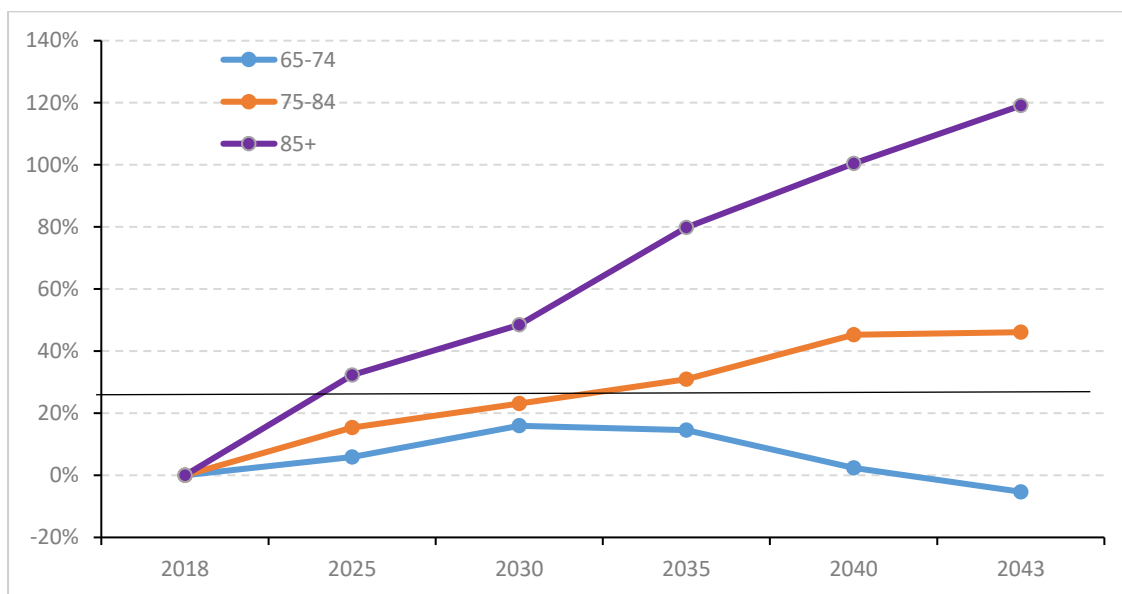
Source: NRS 2019 mid-year population estimate

2.3 Population Projections

The National Records of Scotland (NRS) population projections suggest there will be an increase of 7.6% in the overall population of East Dunbartonshire from 2018 – 2043 due to significant estimated rise in the population aged over 65yrs.

The figure below shows the proportion of increase projected in the older population from 2019-2043. The largest increase is in individuals aged over 85yrs, which is projected to rise by over 100% from 3,203 to 7,017 people. This projected rise in East Dunbartonshire’s older population, many of whom will be vulnerable with complex needs, suggests that demand for health and social care services will rise accordingly.

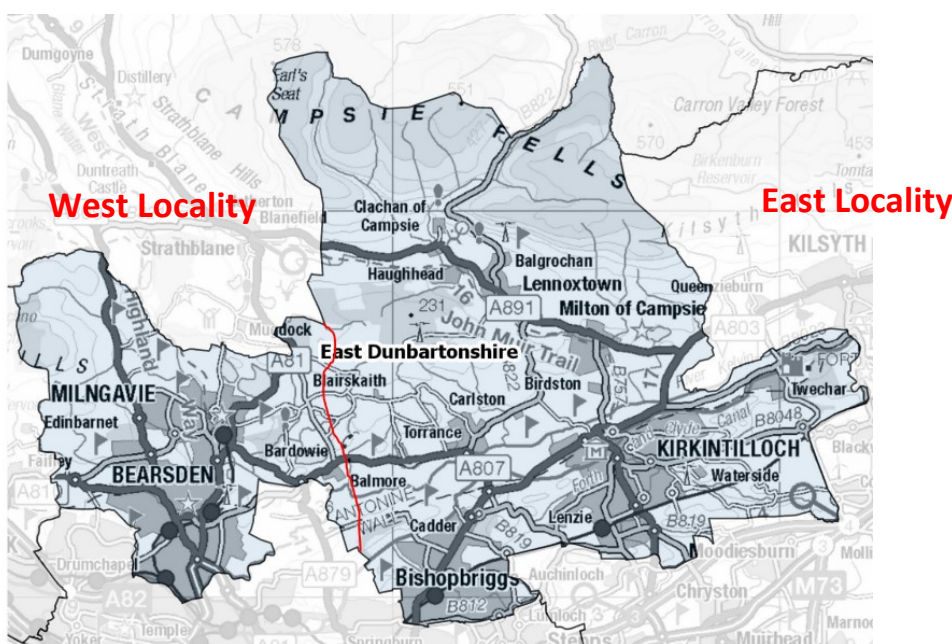
Figure 3: East Dunbartonshire population projection % by age group 2018-2043



2.4 Localities

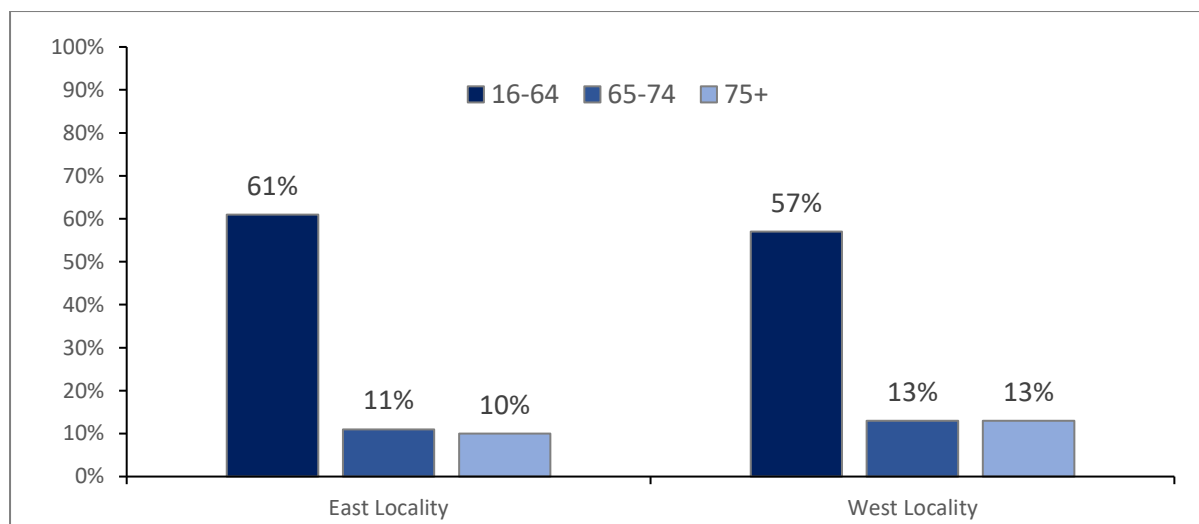
To allow the Health and Social Care Partnership (HSCP) to plan and deliver services which meet the differing needs within East Dunbartonshire, the area has been split into two geographical localities; East Dunbartonshire (East), hereafter referred to as East locality and East Dunbartonshire (West), hereafter referred to as West locality. The most recent information available by Locality has been used throughout this document.

Figure 4: East Dunbartonshire Locality Map



The East Locality includes 62% (66,911) of East Dunbartonshire’s population, while the West Locality accounts for 38% (41,729) of the population. The demographic breakdown by locality showed a slightly older population in the West locality for ages 65+.

Figure 5: Population breakdown by locality 2019



General Practitioner (GP) Services

There are 16 GP practices serving the East Dunbartonshire area; 10 practices are located in the East Locality and 6 in the West Locality. A total of 109,006 people were registered with an East Dunbartonshire GP in October 2019. There were 23,341 individuals (21%) aged 65yrs registered with a GP practice which compared to the estimated population of East Dunbartonshire for that age group.

Table 1: GP Population 1st January 2021 by Age Group

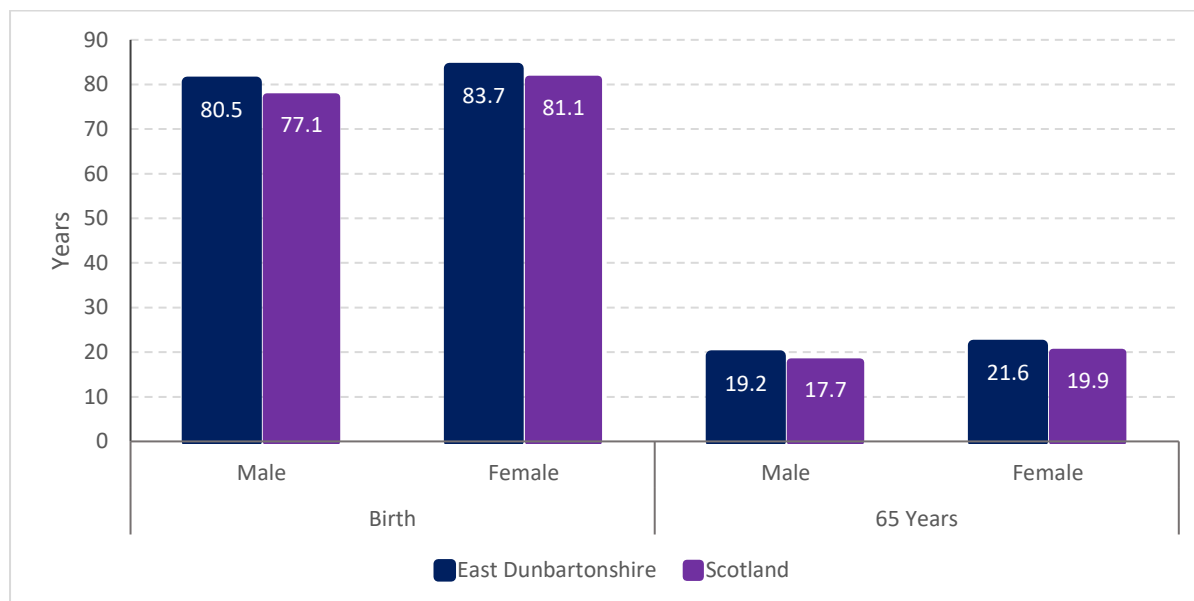
Age Group	East Locality		West Locality		East Dunbartonshire	
	Number	%	Number	%	Number	%
0-4	3,347	4.8	1,842	4.7	5,189	4.8
5-14	7,941	11.4	4,607	11.7	12,548	11.5
15-24	7,146	10.2	3,936	10.0	11,082	10.2
25-44	17,730	25.4	8,569	21.8	26,299	24.1
45-64	19,708	28.3	10,839	27.6	30,547	28.0
65-74	7,596	10.9	4,798	12.2	12,394	11.4
75-84	4,575	6.6	3,241	8.3	7,816	7.2
85+	1,685	2.4	1,446	3.7	3,131	2.9
ALL	69,728	64.0	39,278	36.0	109,006	100.0

Source: ISD

2.5 Life Expectancy

The NRS publication showed that East Dunbartonshire continued to have the highest life expectancy at birth in Scotland for males and the second highest for females. The life expectancy of females at birth in East Dunbartonshire is around 3 years higher than males. Life expectancy at the age of 65 years was also higher than Scotland for both male and females in East Dunbartonshire.

Figure 6: Life expectancy at birth and 65 (3-year average 2017-2019)



Source: NRS/ScotPHO

Life expectancy and healthy life expectancy provide useful measures for planning services. Healthy life expectancy estimates the number of years an individual will live in a healthy state. Therefore, the number of years people are expected to live in 'not healthy' health is the difference between life expectancy and healthy life expectancy. Table 2 shows the number of years people were estimated to live in 'not healthy' health, with East Dunbartonshire having a lower estimate than Scotland.

Table 2: Number of years 'not healthy' health (3-year average 2017-19)

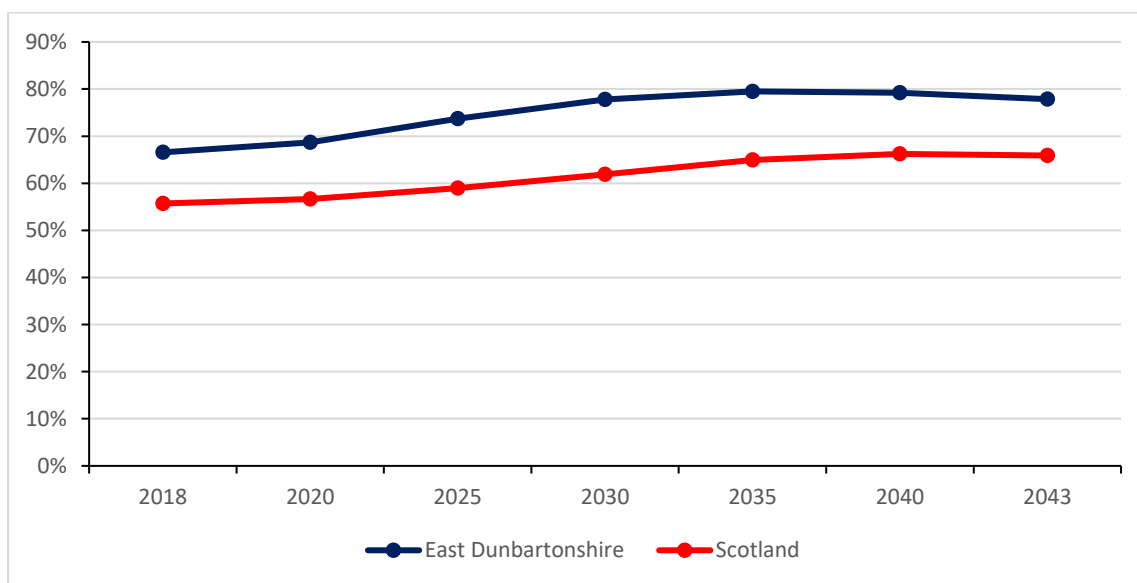
Local Authority	Expected period in ' <u>not healthy</u> ' health	
	Males	Females
East Dunbartonshire	10.7	17.2
Scotland	15.4	19.2

Source: NRS

2.6 Population Dependency Ratio

The population dependency ratio refers to the proportion of the dependent population (0-16 years and over 65 years or non-working age) in relation to the independent population (16-64 years or “working age”). The higher the dependency ratio, the lower the working age population compared to the proportion of “dependents”. This can have resource implications on health and social care service provision. The population dependency ratio was calculated using recent NRS population estimates projected to 2043, taking into account changes in the State pension age. As the total number of dependants in East Dunbartonshire was increasing faster than the working age population, the population dependency ratio was projected to increase to 77.9% in 2043 (Scotland 65.9%).

Figure 7: East Dunbartonshire dependency ratio; 2018 - 2043

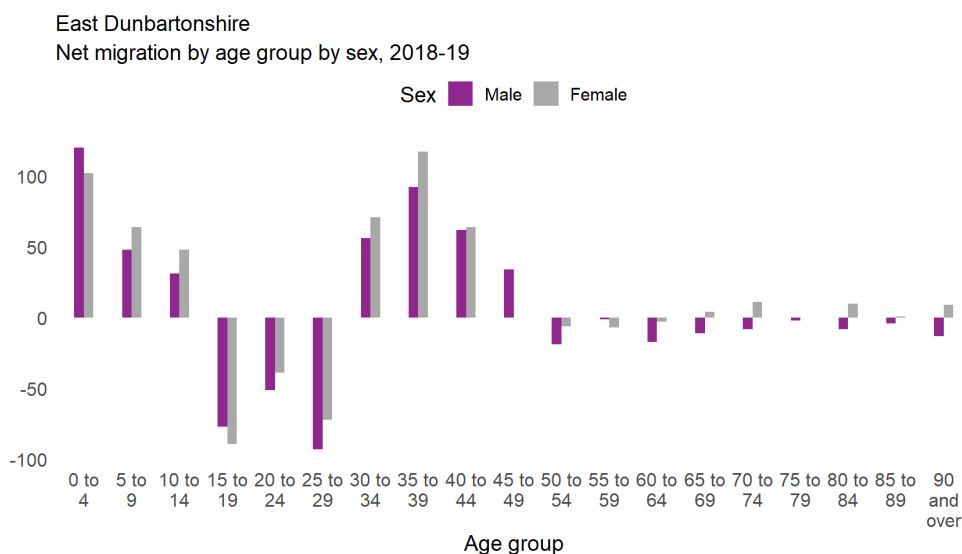


Source: NRS

2.7 Migration

Over the last 5 years there has been a higher number of people moving into East Dunbartonshire (4,060 per year) than those moving out (3,510 per year). Individuals aged 0 to 15 accounted for the largest group of in-migrants, while individuals aged 65+ were the largest group of out-migrants.

Figure 8: East Dunbartonshire Net Migration 2018/19



Source: NRS

2.8 Ethnicity

The 2011 Census showed 5.4% of East Dunbartonshire’s population were from a minority ethnic group, an increase of around 2% since the last census in 2001, with the Asian population constituting the largest minority ethnic group.

Table 3: East Dunbartonshire population by Ethnicity

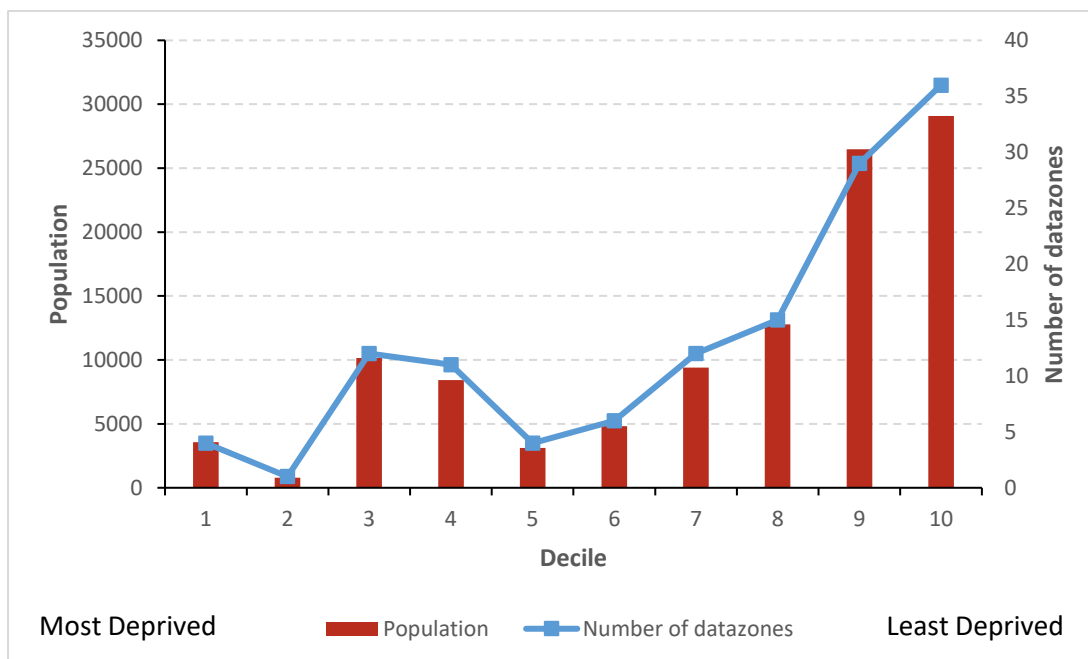
East Dunbartonshire	Number	%
White Scottish, British or Irish	99,325	94.6%
White Polish or Other White	1297	1.2%
Indian, Pakistani or Other Asian	2736	2.6%
Chinese	701	0.7%
Mixed	420	0.4%
African, Caribbean or Black	241	0.2%
Arab	170	0.2%
Other	136	0.1%

Source: Census 2011

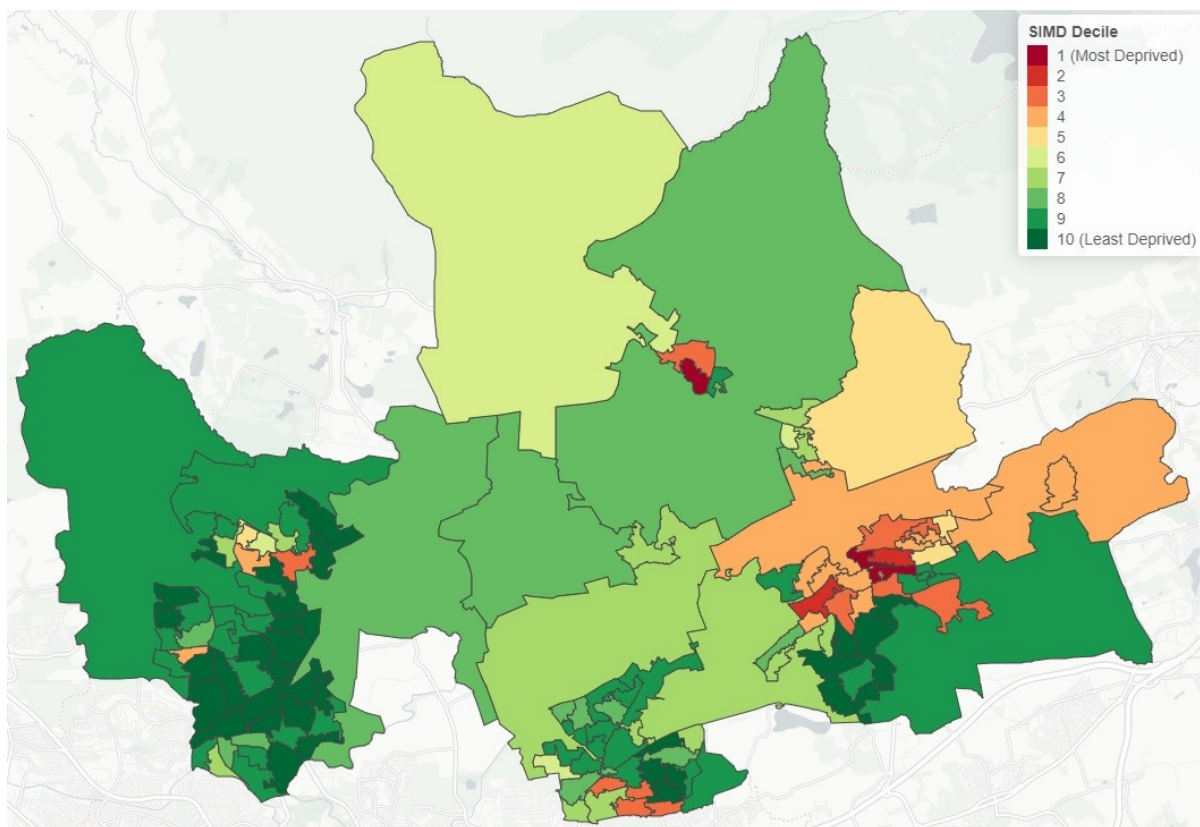
2.9 Deprivation

The Scottish Index of Multiple Deprivation (SIMD) ranks datazones (small areas with an average population of 800 people), from the most deprived to the least deprived. Using deciles, with 1 being the most deprived and 10 being least deprived, the chart below illustrates the number of people and datazones in each decile in East Dunbartonshire.

Figure 9: East Dunbartonshire population by SIMD decile



Although the majority of the population lived in the least deprived deciles, there were 4 datazones areas in East Dunbartonshire categorised amongst the most deprived in Scotland, three in the Hillhead area of Kirkintilloch and one in Lennoxton. These are indicated by the darkest red coloured areas in the map below.



2.10 Housing

In 2019, there were 46,228 households in East Dunbartonshire. This was an increase of 7.1% since 2009 (Scotland 6.1%). The table below shows the number of households in East Dunbartonshire and Scotland and changes over the years.

Table 4: Households in East Dunbartonshire and Scotland

	2019	Change 2018 to 2019		Change 2009 to 2019	
		Number	%	Number	%
East Dunbartonshire	46,228	205	0.4%	3,057	7.1%
Scotland	2,495,623	18,348	0.7%	143,843	6.1%

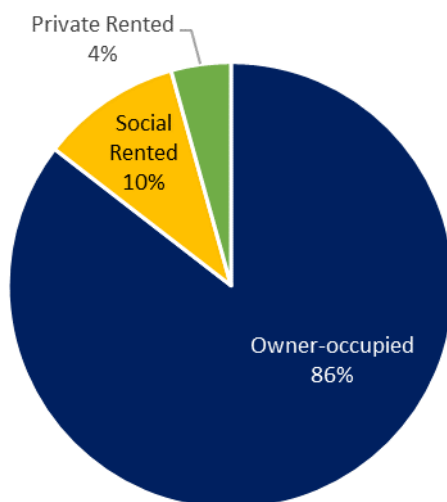
Source: NRS

The total number of households in East Dunbartonshire was projected to increase by 5% by 2043, compared to a projected increase of 10% across Scotland.

2.10.1 Housing Tenures

East Dunbartonshire was dominated by owner occupants at 85% of the population. House prices remained high largely due to the geography of the area and close proximity to Glasgow. This suggest that many households on low incomes cannot afford to purchase in the area.

Figure 10: East Dunbartonshire housing tenure



Source: Scottish Government

2.10.2 Social Rented Sector

The pressure in the small, social rented sector was quite high. The Council manage a housing stock of approximately 3,500 houses while the housing list was around 2,400 applicants in 2019, a reduction of 34% from 2018.

2.10.3 Private Rented Sector

Due to the high pressures in both social rented and owner occupation housing tenures, there has been an increase in the use of the private rented sector to meet housing need. However, the Local Housing Allowance for East Dunbartonshire was one of the highest in Scotland, meaning that tenures were unaffordable for some households and they move out of the area to rent or buy.

2.10.4 Local Housing Strategy

The East Dunbartonshire Local Housing Strategy 2017-22 aims to work with its partners to meet the following priorities:

- Enable a suitable, efficient and affordable supply of housing
- Enhance the role of housing options in preventing homelessness
- Encourage independent living
- Address housing condition, fuel poverty and regeneration
- Improve service delivery, quality and value for money

2.10.5 Housing Needs and Demand Assessment

Care and Repair in East Dunbartonshire operates across the local authority to assist older and disabled people living in private sector housing to remain in their own homes independently by having aids and adaptation carried out as well as some minor works if required. The service works closely with the Council's Occupational Therapy service and contributes to the alleviation of delayed hospital discharge.

Social Landlords carry out aids and adaptations to properties which they own where the tenant has an identified need. The adaptation service enables tenants' to live safely and comfortably in their homes.

2.10.6 Homelessness

During 2019/20 There were 420 homeless applications made to East Dunbartonshire Council. The temporary housing stock for homelessness included around 185 properties.

People who were homeless were more likely than the general population to have a health problem, including mental health, and/or addiction issues. They were also more likely to be fuel poor.

2.10.7 Aids and Adaptions

Care and Repair in East Dunbartonshire operates across the local authority to assist older and disabled people living in private sector housing to remain in their own homes independently by having aids and adaptation carried out as well as some minor works if required. The service works closely with the Council’s Occupational Therapy service and contributes to the alleviation of delayed hospital discharge. Social Landlords carry out aids and adaptations to properties which they own where the tenant has an identified need. The adaptation service enables tenants’ to live safely and comfortably in their homes.

2.11 Fuel Poverty

A household is considered to be in fuel poverty if in order to maintain a satisfactory heating regime, total fuel costs necessary for the home are more than 10% of the household’s adjusted net income. Extreme poverty is considered to be more than 20% of adjusted net income.

A fifth of households in East Dunbartonshire were considered to be living in fuel poverty (Scotland 24%) and 8% of households were living in extreme fuel poverty (Scotland 12%). For the older population fuel poverty was 22% and extreme fuel poverty was 10%.

Table 5: Fuel poverty in East Dunbartonshire households

	Fuel Poverty		Extreme Fuel Poverty	
	All Households	Older Households	All Households	Older Households
East Dunbartonshire	20%	22%	8%	10%
Scotland	24%	27%	12%	14%

Source: Scottish House Condition Survey 2017-2019

2.12 Summary

East Dunbartonshire has a high number of people living in the least deprived SIMD quintiles compared with the rest of Scotland. It has a greater proportion of people aged 75+ compared with Scotland as a whole and a higher life expectancy. People living longer means the demand for health and social care service’s is increased.

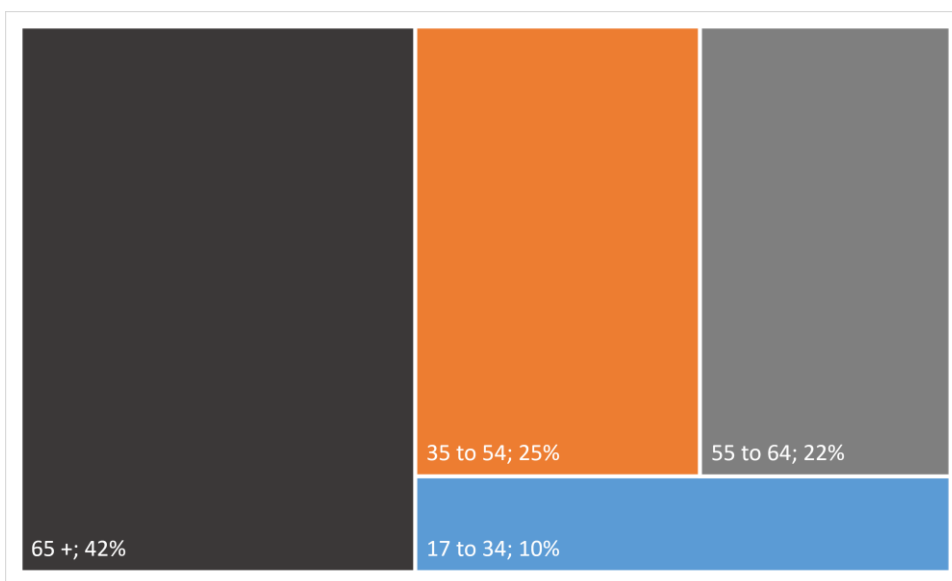
3. What People Told Us

3.1 Scottish Health & Care Experience Survey

In October 2020 the Scottish Government published the Scottish Health & Care Experience Survey (HACE) covering the period 2019/20. This survey reported on people’s experiences over the previous 12 months of accessing and using their GP practice and other local healthcare services, receiving care, support and help with everyday living. Just over half of forms were completed by post (52%) with 47% completing it online, the rest were completed by telephone and the language line.

A total of 3,064 people responded to the survey in East Dunbartonshire which was a response rate of 32%. The response rate for Scotland as a whole was 26%. A significantly lower number of people responded to the questions relating to Care, Support and Help with Everyday Living and Informal Caring, which makes accurate comparison difficult, so these figures should be viewed as approximate only.

Figure 11: Percentage respondents by age



Source: Scottish Health & Care Experience Survey 2019-20

64% of the responses were from those aged 55 and above, 42% of whom were male and 58% female. 74% of the respondents rated their health as good or very good.

3.2 The GP Practice

Overall, the majority of respondents in East Dunbartonshire rated their experience with local GP practices and the service provided as positive. 91% responded positively to a question about how easy it was for them to contact their GP practice compared with 85% in Scotland. Similarly, the overwhelming majority of people responded positively to questions around being able to see a doctor urgently and the care provided by their GP practice.

Figure 12: HACE GP Practice Survey Responses



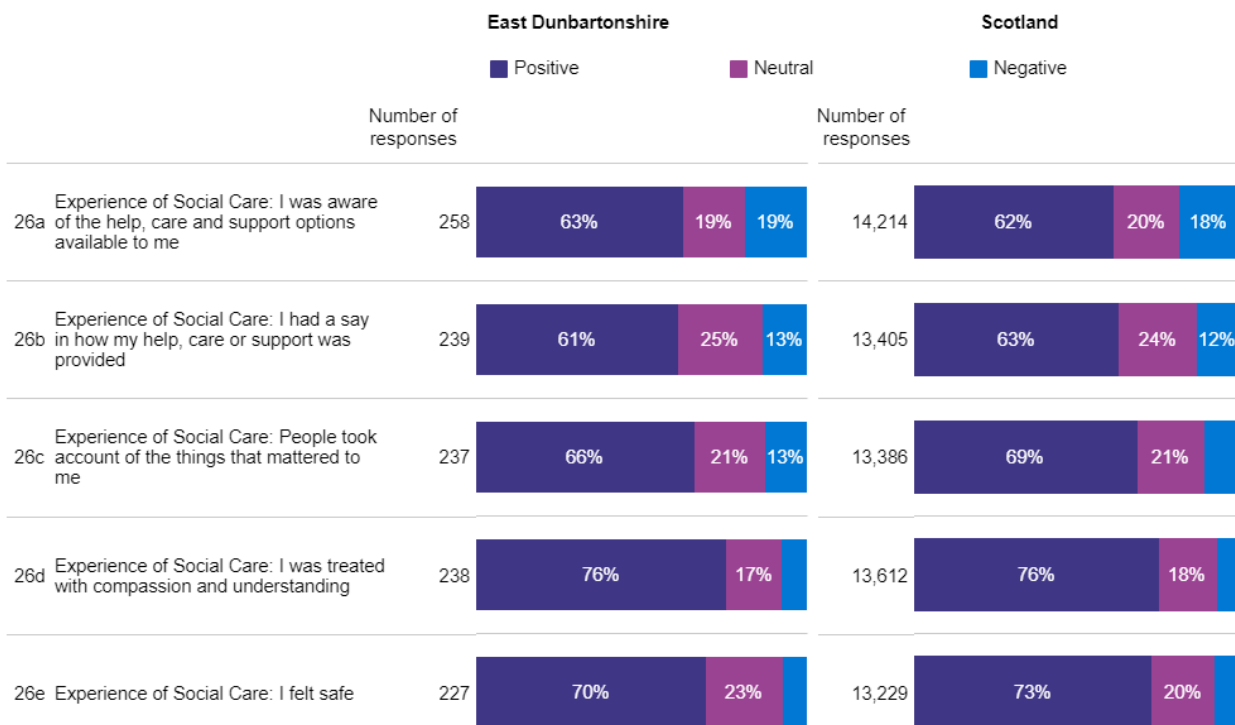
Areas in which people responded negatively were questions related to arrangements for getting to see physiotherapist, mental health professionals and community link

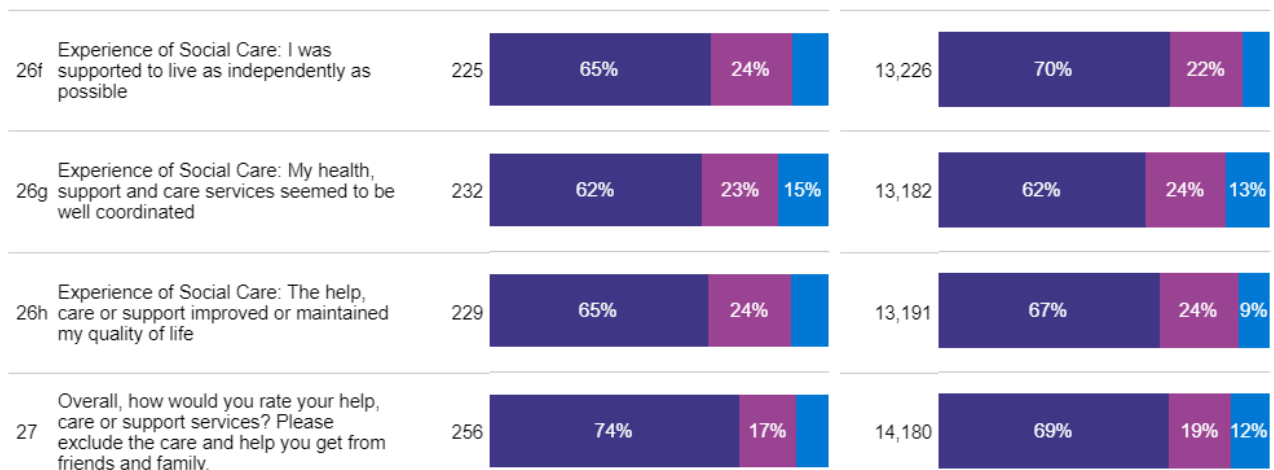
workers at their GP practice. 33% of responses were negative for physiotherapist compared with 30% for Scotland. 36% of responses were negative for mental health, which was slightly lower than the 38% for Scotland and 24% negative for community link worker compared with 19% for Scotland.

3.3 Care, Support and Help with Everyday Living

The proportion of positive responses for questions related to experience of social care services was lower in comparison with the GP Practice questions. However, it is important to note that there was also a smaller proportion of positive responses for Scotland as a whole. The small sample number means that comparison with Scotland should be treated cautiously with small percentage points of a difference not being statistically significant.

Figure 13: HACE Social Care Responses





63% responded positively to a question about being aware of the help, care and support options available to them and 61% responded positively to having a say in how this help, care and support was provided to them. This was comparable to the proportion of positive responses in Scotland as a whole. 65% responded positively to a question regarding how they were supported to live as independently as possible, which was lower than the Scotland figure of 70%. However as stated above the small sample number for these questions means that small percentage points of a difference between local and national responses are not statistically significant. During reviews of social care support in 2020-21 involving 149 East Dunbartonshire service users, 100% expressed satisfaction with their involvement in the design of their care, which is an increase over previous years and above the target of 95%. Using the same locally derived satisfaction data, during 277 reviews of social care supporting 2020-21, 97% of service users expressed satisfaction with the quality of care provided.

3.4 Caring Responsibilities

The caring responsibilities section of the survey received the lowest proportion of positive responses in both East Dunbartonshire and Scotland. 63% responded positively to a question regarding the balance between caring and other things in their life which was similar to Scotland figure of 64%. Only 40% of people responded positively to a question regarding how well coordinated the services for the person they look after are which, 38% for Scotland. Similarly, only 38% responded positively when asked if they felt supported to continue caring, slightly higher than the Scotland figure of 34%. It is important to note the limitations of the survey due to small numbers, which introduces a margin of error at a local level. Comparison of “performance” using this data should therefore be seen as an approximation. A

rolling survey undertaken by the HSCP reflects a more positive picture however where out of 83 reviews of social care support in 2020-21, 98% of carers indicated that they felt supported to continue in their caring role, which was an increase from 94% the previous year.

Figure 14: HACE Caring Responsibilities Responses



3.5 Summary

Looking at the survey as a whole, people in East Dunbartonshire generally responded positively to questions around their experience of health and social care services. Responses were particularly positive in relation to access to GP practices and the services they provided. Areas for improvement appear in relation to access to mental health professionals and also in supporting those who help care for a relative.

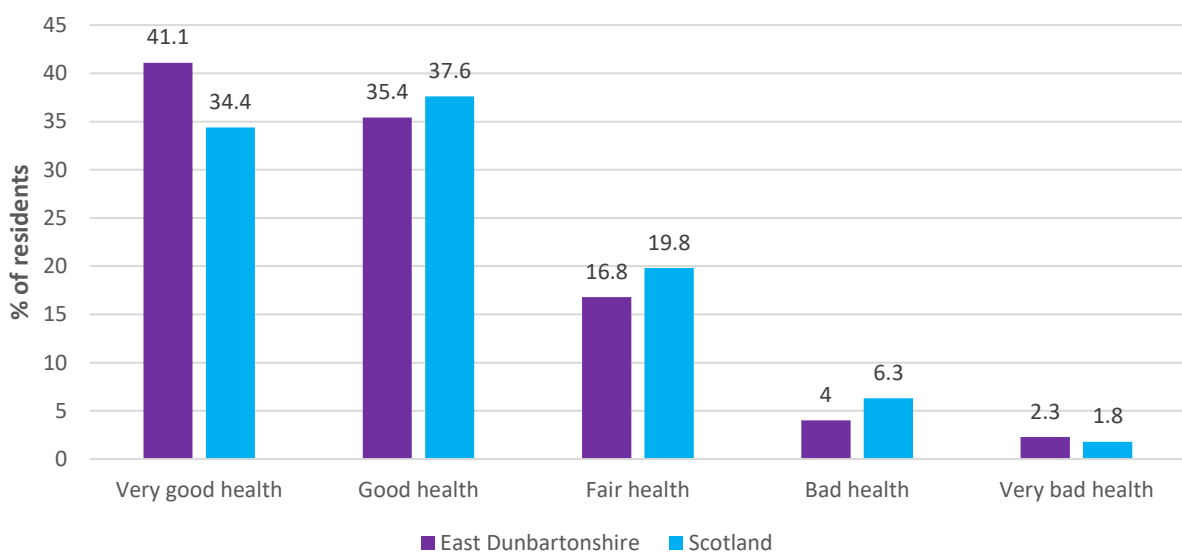
4. Population Health

4.1 General Health

This section examines the general health of residents in East Dunbartonshire. Naturally, there are many different factors which could be considered here. One important aspect is self-perception of general health.

Figure 15 shows the self-reported general health of people living in this area compared to Scotland as a whole.

Figure 15: General health of residents 2019



Source: Scottish Surveys Core Questions 2019

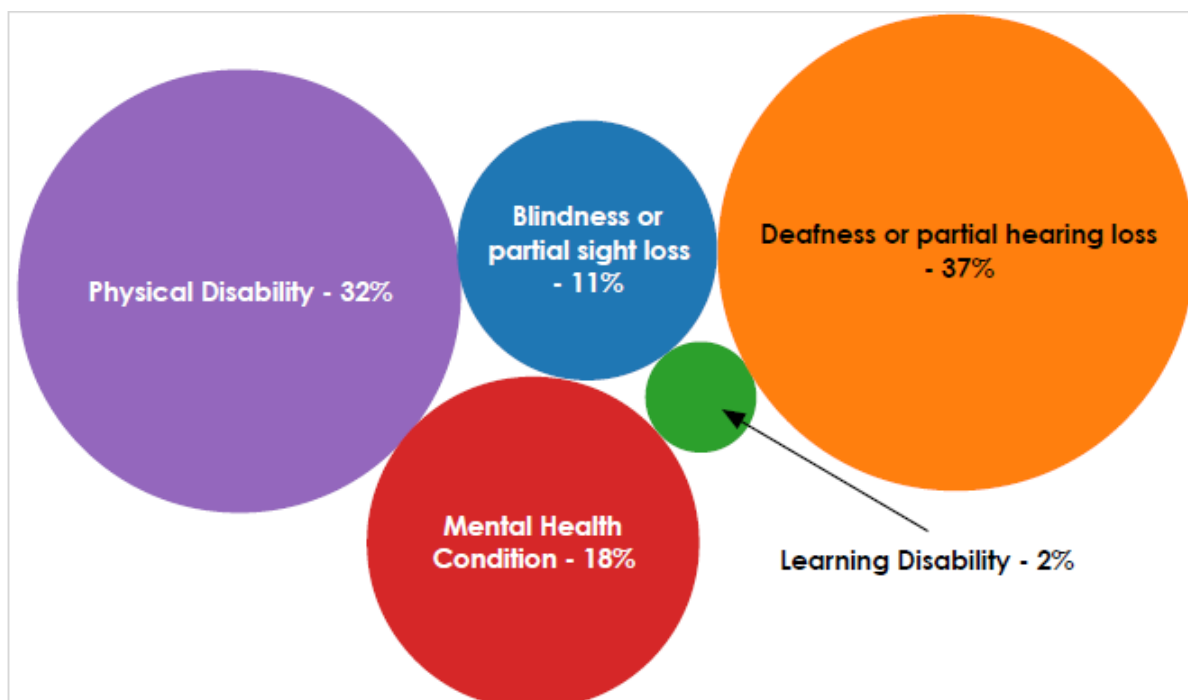
A higher proportion of East Dunbartonshire residents reported feeling in 'very good health' than in Scotland overall (41.1% of residents compared to 34.4% for Scotland). Looking at the first two categories combined, 76.5 of residents in East Dunbartonshire stated their health was very good or good, compared to 72% of the Scottish population. This indicates that the perception of general health is slightly higher in East Dunbartonshire compared with Scotland as a whole.

4.2 Disability and Mental Ill-Health

The 2011 Census included a question on particular disabilities including sensory impairments, physical disability, mental health condition or learning disability. Individuals with disabilities are likely to require short or long term support from services that support them in remaining independent within their community

5.6% of the adult population in East Dunbartonshire reported a disability (Scotland 6.7%). Just under half of reported disabilities (48%) were sensory impairment, while 32% related to a physical disability.

Figure 16: Percentage of reported disability and mental ill-health in East Dunbartonshire 2011



Source: Scotland Census 2011

(N.B. data does not indicate if people reported more than one disability).

4.3 Sensory Impairment

Sensory impairment includes blindness, partially sighted, deafness, hard of hearing or multiple categories and was the main disability reported in the 2011 Census (48% reported disability). Sensory impairment increases significantly with age and the number of people aged over 65yrs registered in East Dunbartonshire with a sensory impairment was more than double the number of adults aged 18-64 years with sensory impairment.

Table 6: No. of adults in East Dunbartonshire registered blind/partially sighted (March 2014-15)

Age/Gender	Blind		Partially Sighted	
	Number	%	Number	%
18-64	83	30.4%	71	25.0%
65+	187	68.5%	203	71.5%
Male	112	40.6%	113	39.6%

Female	164	59.4%	172	60.4%
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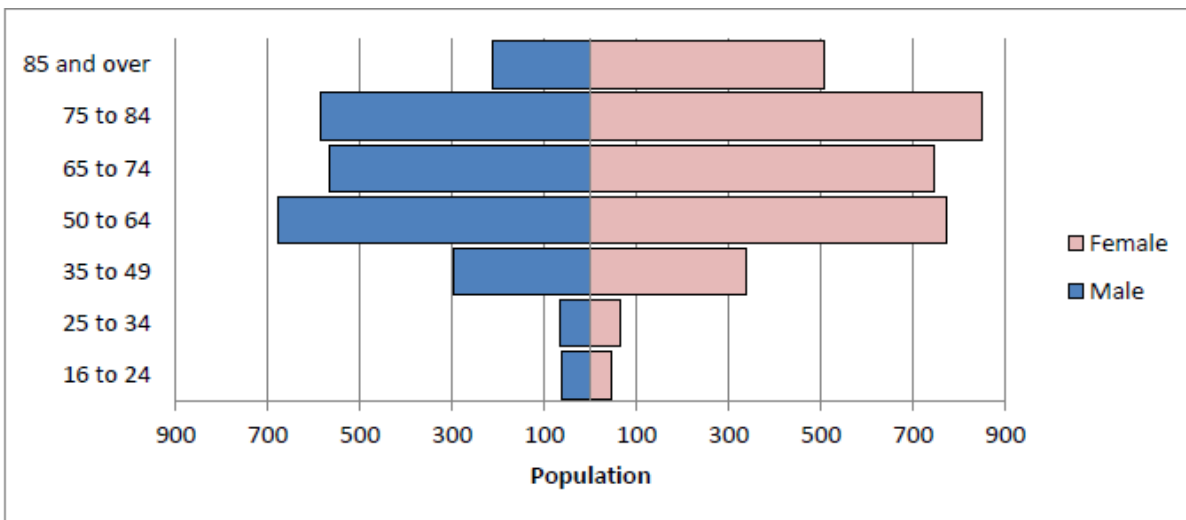
Source: CareFirst

With its rising ageing population the number of people living with a sensory impairment can be expected to have increased over time. Based on the 2011 census figure of 5.6% of the adult population in East Dunbartonshire reporting a disability and 48% of these being sensory impairments we can estimate the number of people living with a sensory disability in East Dunbartonshire to be around 2,300 in 2021.

4.4 Physical Disability

The figure below shows the age and gender distribution of those who identified themselves with a physical disability at the 2011 Census (32% reported physical disability). Physical disability in East Dunbartonshire increased with older age and there were slightly more females identified. Again, East Dunbartonshire’s ageing population means the number of people with a physical disability can be expected to have increased since 2011 and likely to increase significantly in the future.

Figure 17: Physical disability by age and gender



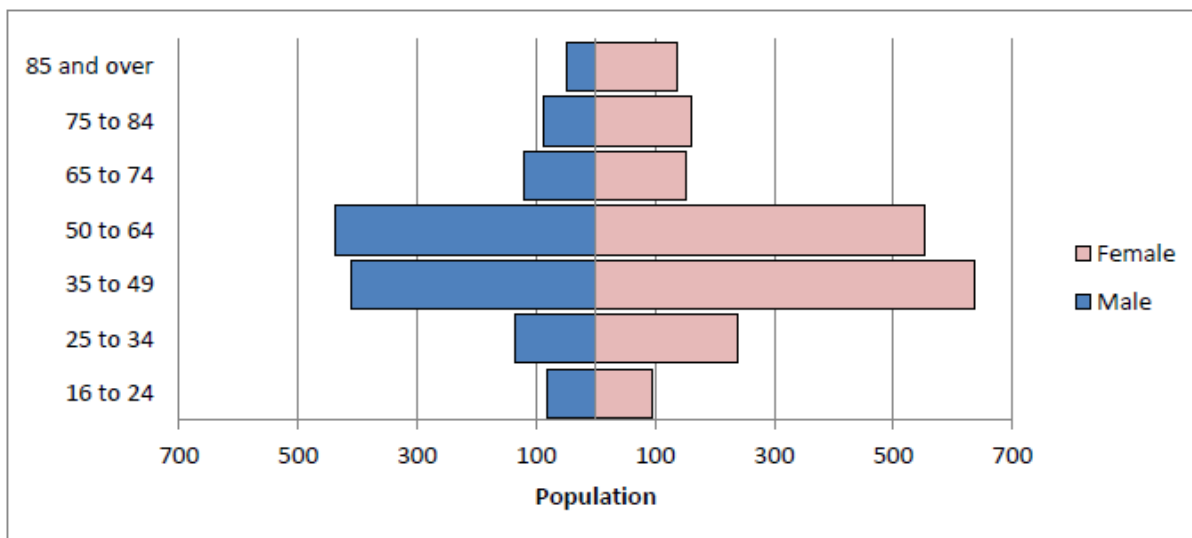
Source: Scotland Census 2011

4.5 Mental Health

A total of 3.2% (3,341) of East Dunbartonshire’s population identified themselves as having a mental health condition that has lasted, or would last for more than 12 months, in the 2011 Census. Self reported identification varied by gender and age. A higher proportion of females (59%) reported having a mental health condition compared to males (41%). Across all age groups, there was a gradual increase in the proportions of mental health identified, with the highest proportions seen in individuals aged 35-49 (31%) and 50-64 (30%) years old, thereafter decreasing in

older adults. Poor mental health, including mental disorder, has a considerable impact on individuals, their families and the wider community.

Figure 18: Long term mental health condition by age and gender



Source: Scotland Census 2011

The prevalence of mental health in East Dunbartonshire over a 5-year period was lower than the Scottish average.

Figure 19: Prevalence of mental health per 100 Patients registered on QOF

Local Authority	2009/10	2010/11	2011/12	2012/13	2013/14
East Dunbartonshire	0.6	0.6	0.7	0.7	0.7
Scotland	0.8	0.8	0.9	0.9	0.9

Source: QOF, ISD

There was a slightly higher rate of those registered with a mental health condition within the East locality.

Figure 20: Mental health conditions by locality (2014)

	East Locality	West Locality
Number of People	458	259
Rate per 1,000 Population	7.1	6.3

Source: QOF, ISD

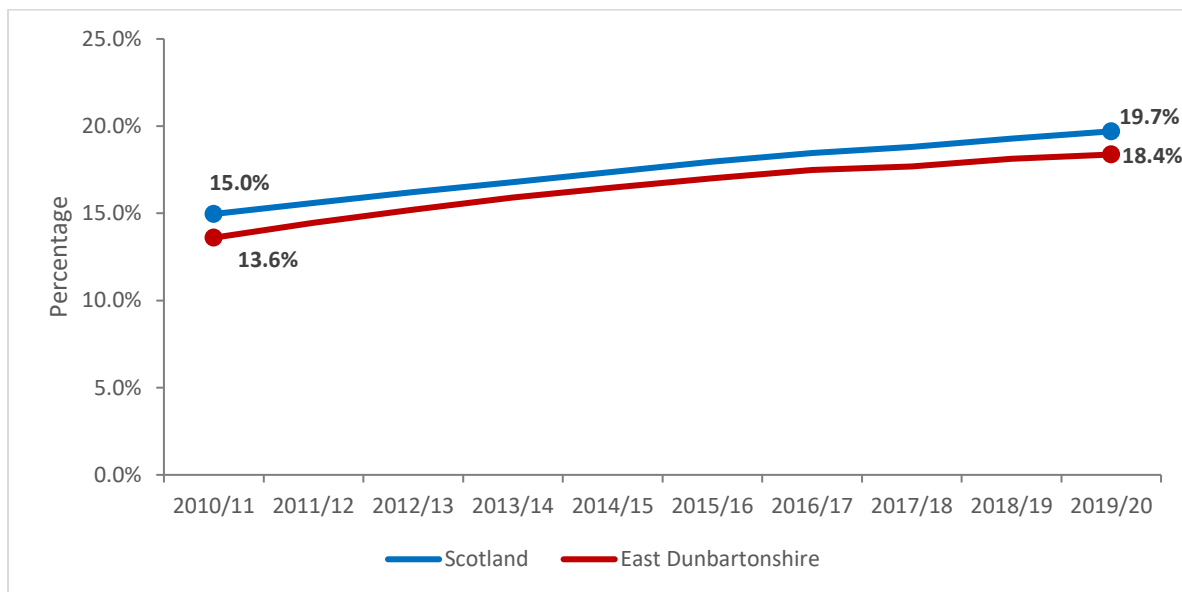
Due to limited availability of data, it is difficult to get an up to date picture of the current status of mental health in East Dunbartonshire. However, we know anecdotally that mental health is an increasing challenge across the whole of Scotland and East Dunbartonshire will be inevitably be impacted too. In the

following section we see evidence of this in terms of increasing numbers of people being prescribed mental health related drugs in East Dunbartonshire.

4.5.1 Depression

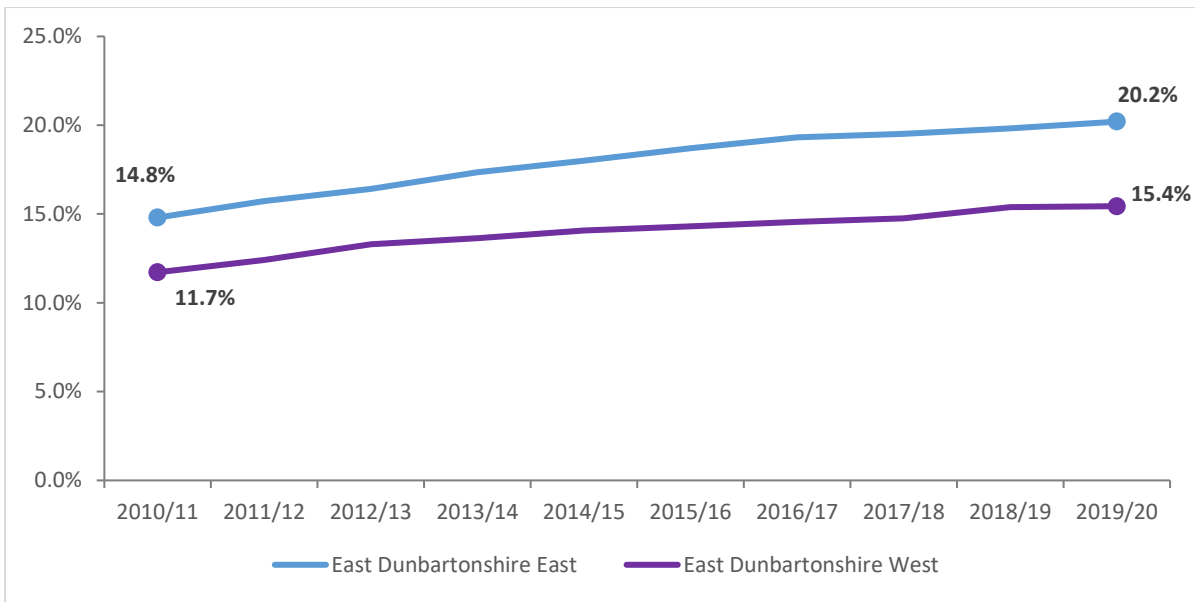
The percentage of the East Dunbartonshire population prescribed drugs for anxiety, depression or psychosis increased from 13.6% in 2010/11 to 18.4% in 2019/20. This is still lower than Scotland percentage of 19.7%

Figure 21: % population prescribed drugs for anxiety/depression/psychosis



When broken down by the locality the proportion of people prescribed drugs for anxiety, depression or psychosis in the East locality was 20.2%, which was greater than the Scotland figure.

Figure 22: % population prescribed drugs for anxiety/depression/psychosis by locality

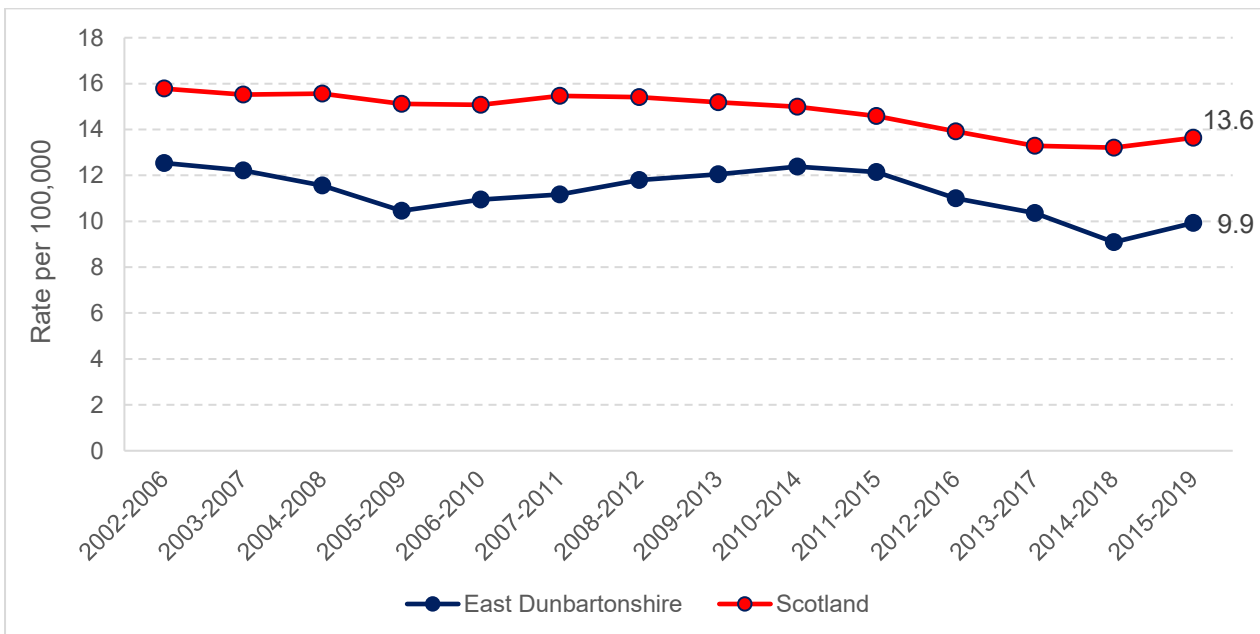


4.5.2 Suicide

Recorded death rates due to suicide were lower in East Dunbartonshire than in Scotland as a whole. In the latest five year period 2015-2019, there were 9.9 deaths per 100,000 population (Scotland 13.6).

Deaths from Suicide

Figure 23: Age-sex standardised rate per 100,000 population of deaths from suicide (5-year aggregate)



Source: ScotPHO

4.6 Alcohol and Drugs

In 2020-21, 768 people were receiving services from East Dunbartonshire Alcohol & Drug Recovery Service (ADRS), of which 622 (80%) were from the East locality while 146 (20%) were from the West locality.

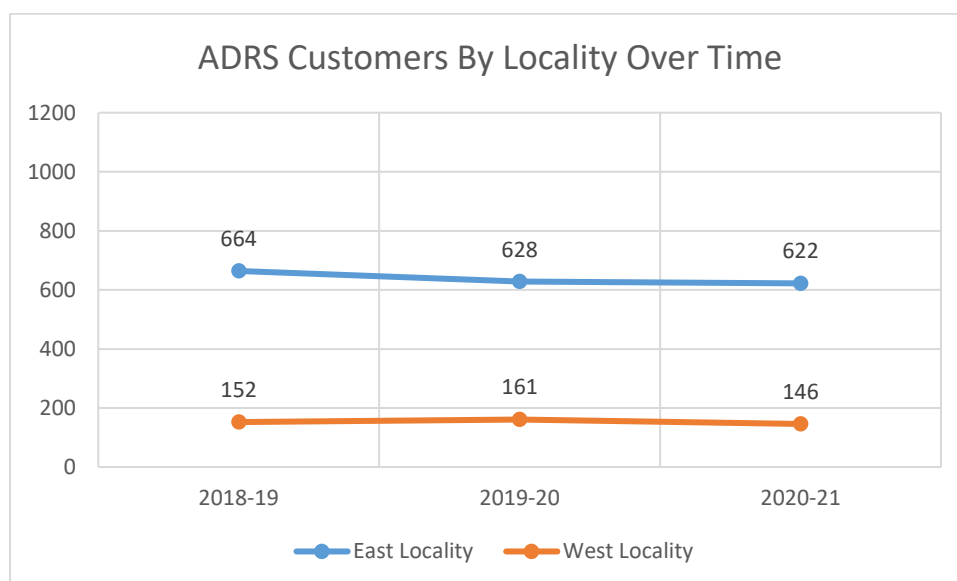
Table 7: ADRS Service Users by Locality (2020-21)

	East Locality	West Locality
Number of People	622	146
Rate per 1,000 Population	9.8	3.9

Source: CareFirst

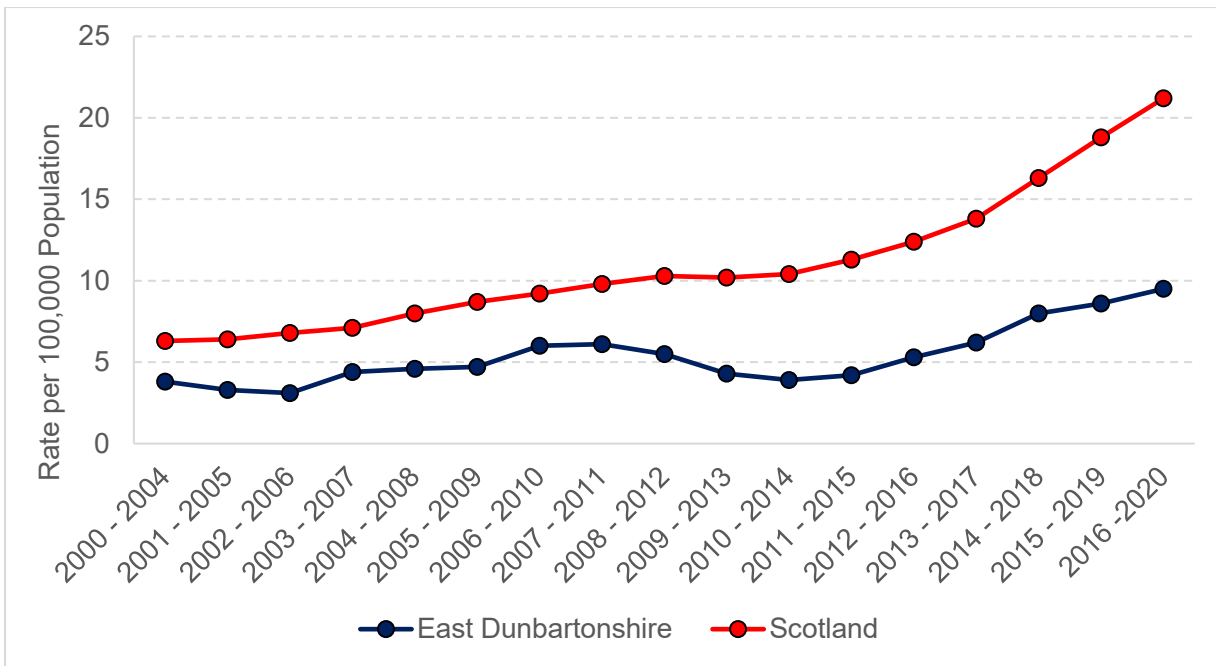
The chart below shows trends in the number of people receiving an alcohol or drugs service over recent years.

Figure 24: Number of people receiving services by locality



Source: CareFirst

Figure 25: Age standardised rate per 100,000 population of drug related deaths (5-year aggregate)



Source: NRS

Figure 25 (above) illustrates the age standardised rate per 100,000 population of drug related deaths in East Dunbartonshire compared to Scotland for 2000-2004 to 2016-2020. Although there has been an over increase in the rate of drug related deaths for both areas, the rate for East Dunbartonshire has been consistently lower than the Scotland rate across all reporting periods.

Figure 26: Age-sex standardised rate per 100,000 population of alcohol specific deaths (5-year aggregate)

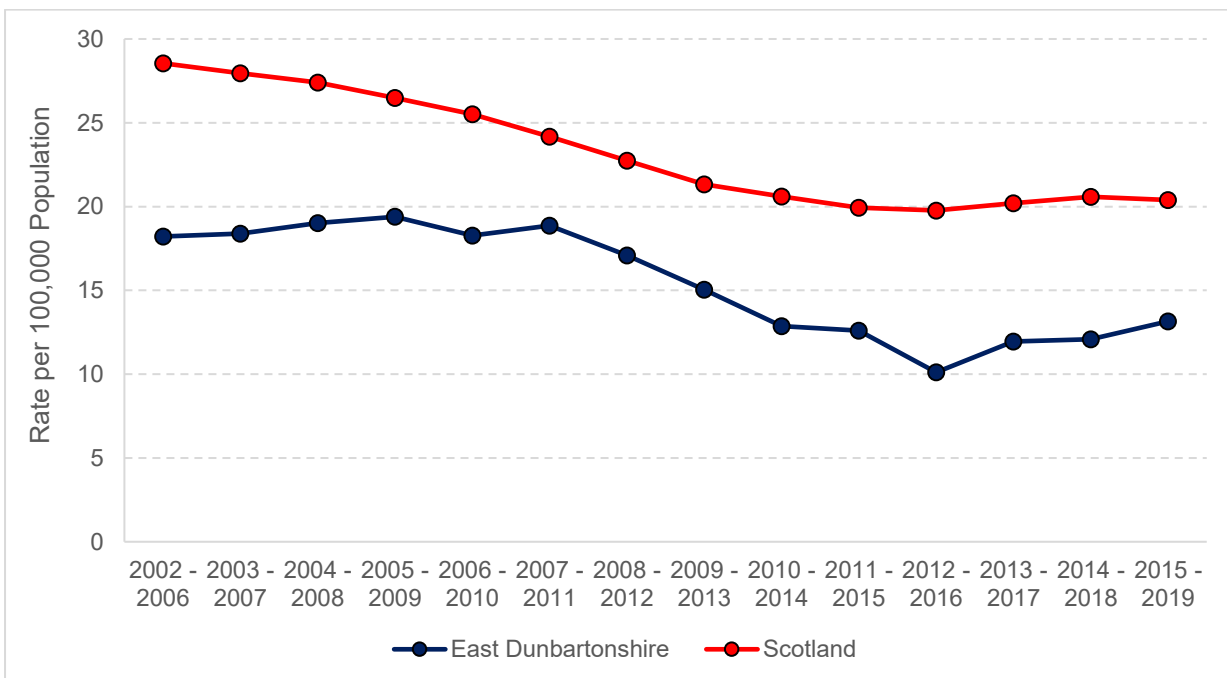


Figure 26 (above) illustrates the age-sex standardised rate per 100,000 population of alcohol specific deaths in East Dunbartonshire compared to Scotland for 2002-2006 to 2015-2019. An overall decrease in the rate of alcohol specific deaths is evident for both areas and the recorded rate for East Dunbartonshire has been consistently lower than the Scotland rate across all reporting periods.

4.7 Learning Disability

There were 403 adults (18+) with a learning disability who had some support from the east Dunbartonshire Joint Learning Disability Team during the year. This prevalence is in line with the Scottish average. The table below gives a numerical breakdown by age and gender:

Learning Disability by Age and Gender

Age Range	Female	Male	Total people in age range	Age Range as a % of total
18-29	53	76	129	32.0
30-44	48	72	120	29.8
45-59	43	44	87	21.6
60-74	22	27	49	12.2
75+	9	9	18	4.5
Total Gender	175	228	403	100.0
Gender as a % of total	43.4	56.6	100.0	

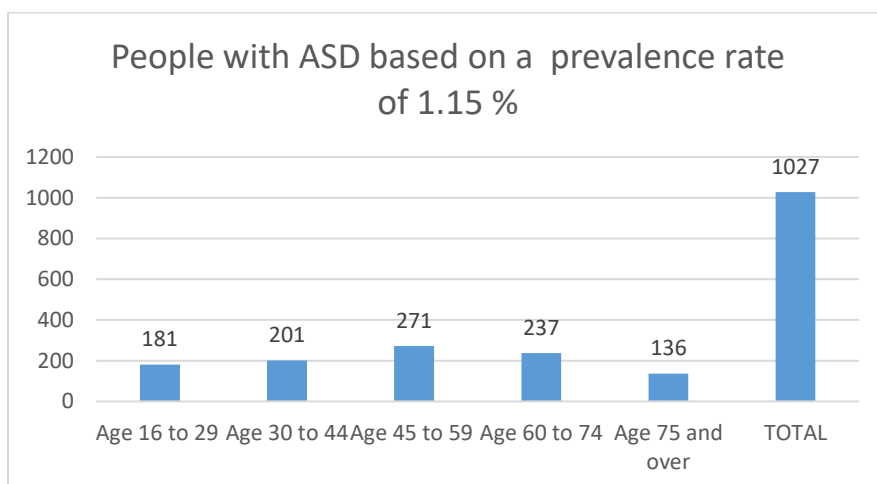
Source LDSS 2020/21

Most customers with Learning Disability are male: 56.6 % Male and 43.4% Female. The largest prevalence by age is 18-29 with 32% of the total and the lowest for 75+ with 4.5% of the total.

4.8 Autism

Autism is a lifelong developmental disorder, sometimes referred to as autistic spectrum disorder (ASD). Autism affects the way an individual understands, communicates and relates to other people and the environment and includes Asperger’s Syndrome. The East Dunbartonshire Autism Strategy highlights the challenges in understanding and recording the true prevalence of autism. Previously a prevalence rate of 1.1% of the population was used, but more recent research suggests that the rate is higher, at 1.57 % of population. On this basis, it is estimated that there are 1,027 people across all adult age groups (16+) with autism in East Dunbartonshire in 2012 of which around two thirds are male.

Figure 27: Estimated number of adults in East Dunbartonshire with autism by age group



Source: East Dunbartonshire Autism Strategy 2014-2024

Adults included in the LDSS annual return for the year 2020/21 with a diagnosis of Autism and having some contact with Social work during the year was 172 (18+). It is generally recognised though that the recording of Autism is under-represented on health and social care information systems.

4.9 Summary

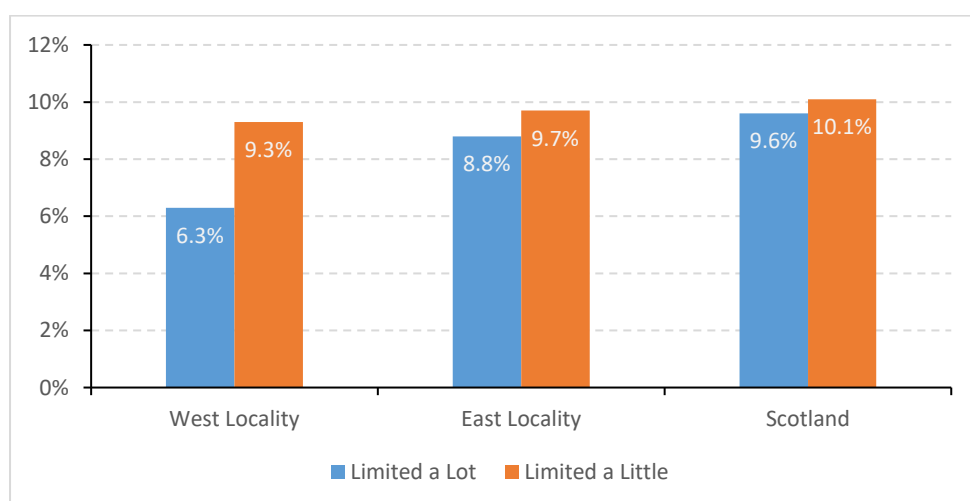
Overall, the majority of East Dunbartonshire residents have an above average self-reported general health and well-being compared with the rest of Scotland. With its ageing population an increase in the number of people with sensory impairment and other physical disabilities can be expected. Mental health has been identified as a key area of concern, with the proportion of people receiving prescriptions for conditions such as depression/anxiety increasing significantly in the past few years.

5. Long Term Conditions

Long term conditions refer to those conditions that generally last for a year or longer and may impact upon a persons' life. In the 2011 Census, 28% of East Dunbartonshire's residents identified themselves as having one or more long term conditions of which 9.5% were limited a little (Scotland 10%) and 7.8% were limited a lot (Scotland 9.5%) by their condition

There was a difference in the percentage of those who described their day-to-day activities as limited between the two localities.

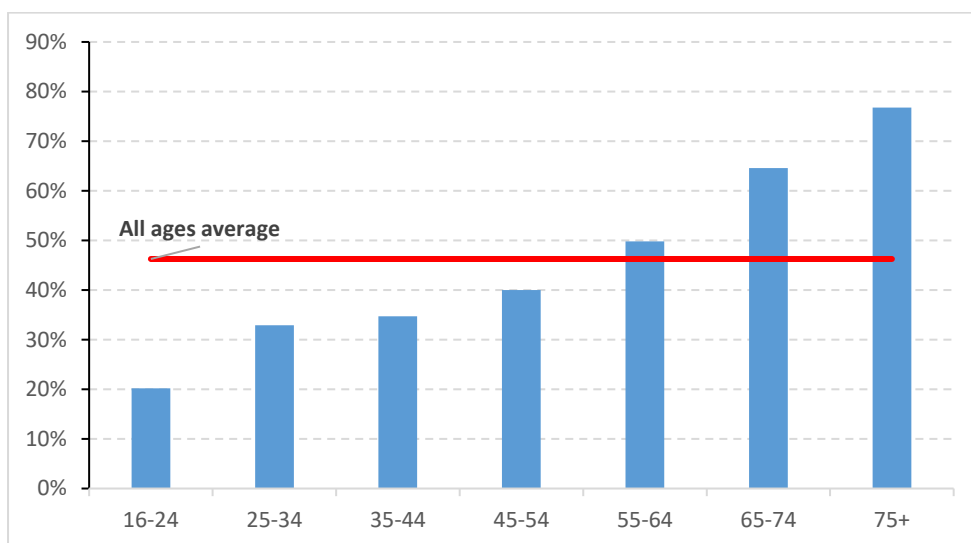
Figure 28: Activities pattern by locality



Source: Scotland Census 2011

The Health and Wellbeing survey in 2014 demonstrated the relationship between the prevalence of long term conditions and increased age.

Figure 29: Percentage being treated for at least one condition by age



Source: PHS Source

Another important factor in the prevalence of long term conditions was deprivation. The Health and Wellbeing Survey 2014 suggested that 49% of those in the 20% most deprived datazones in East Dunbartonshire were more likely to be receiving treatment for at least one long term condition compared to 35% in the remaining datazones.

5.1 Focus on Specific long term health conditions

This section examines specific long term conditions relevant to East Dunbartonshire's population such as dementia, cancer, chronic obstructive airways disease (COPD), asthma, coronary heart disease (CHD), stroke and diabetes. These conditions can have a significant impact on hospital and social care resources as well as the overall health and wellbeing of a population. It is estimated that around 19% of the East Dunbartonshire population have one or more long term condition.

The SOURCE dataset, maintained by Public Health Scotland, links acute, A&E, outpatient and community prescription data. The number of people with a given LTC is estimated from this dataset by counting the number of people who have been in contact with secondary care or collected a prescription in a given year and have a relevant diagnosis recorded at any point in their lifetime hospital records.

Important limitations to be aware of in interpreting the estimates are that:

1. SOURCE estimates will not include patients who have never been admitted to hospital in relation to their condition.

2. SOURCE estimates will only count patients annually who have had contact with secondary care or collected a prescription that year. For most, but not all with an LTC, a prescription is likely to be collected. However, an individual with diabetes who is diet and exercise controlled may be missed if they had no contact with secondary care services that year, for example.

3. SOURCE estimates may overestimate conditions which affect individuals for a period of time but not for their lifetime. For example, a cancer patient who has been in remission for twenty years would still be counted if they had contact with secondary care or collected a prescription (for any reason).

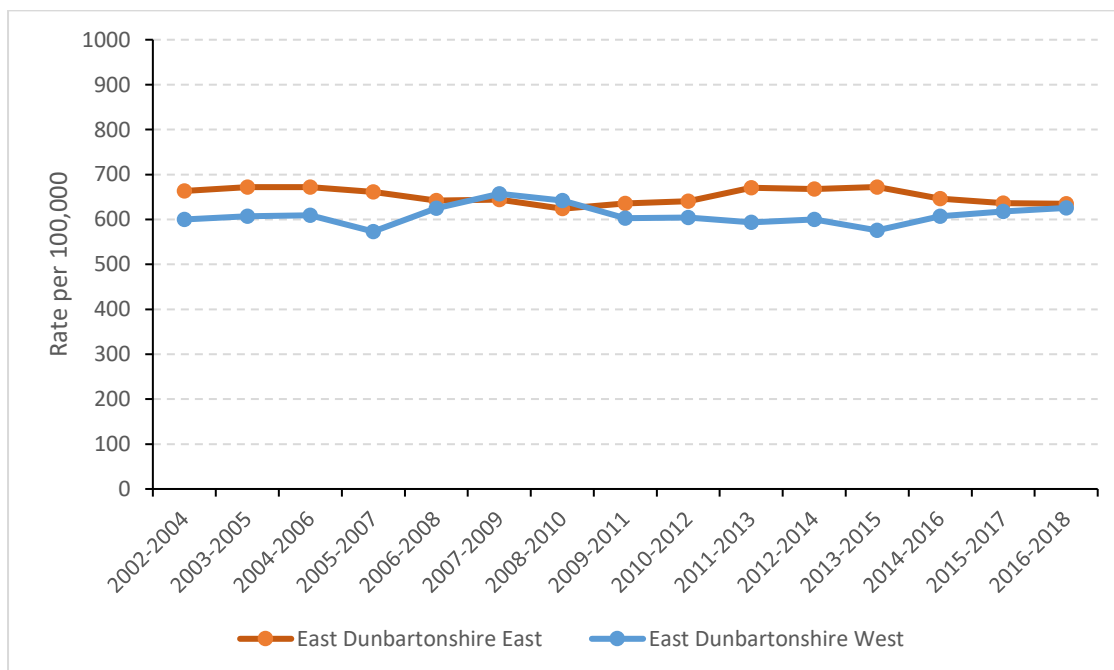
5.1.1 Cancer

Cancer is one of the most prevalent LTCs with around 6% of individuals from East Dunbartonshire on GP registers with a diagnosis of cancer in 2018/19.

Trends in cancer diagnosis

From 2016-2018 there were, on average, 632.6 (per 100,000 pop) people with a new diagnosis of cancer in East Dunbartonshire (Scotland 638.7). The table below shows trends in the rate of new diagnosis of Cancer in East Dunbartonshire localities from 2002-04 to 2016-18 using 3-year averages.

Figure 30: Patients registered with cancer rate per 100,000 by locality (3-year average)



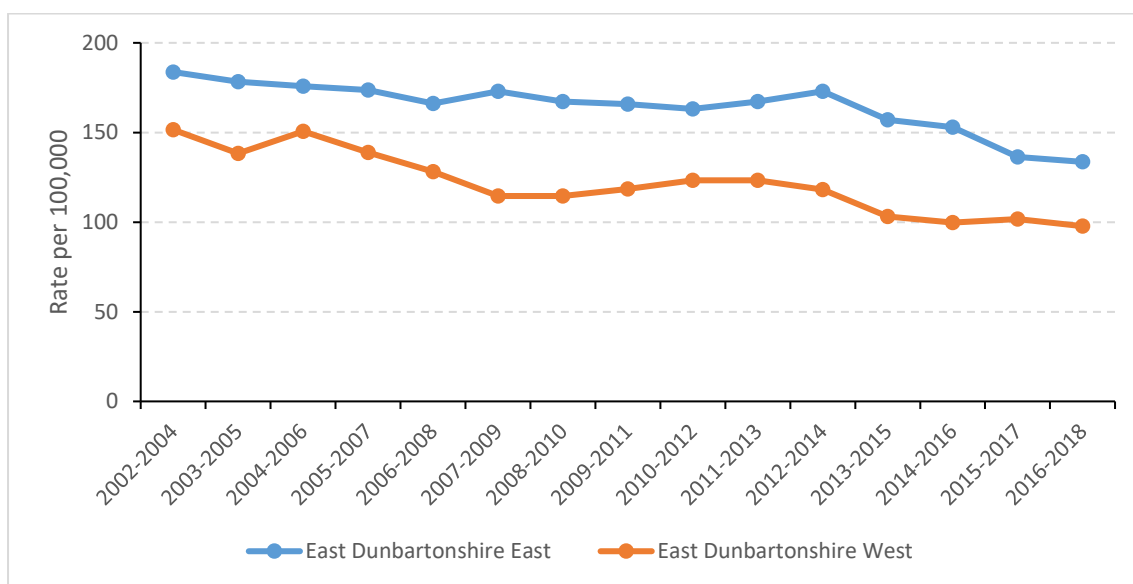
Source: ScotPHO

Early deaths from Cancer

People aged under 75 years who die as a result of cancer are considered to be an early death. The average early deaths in East Dunbartonshire over the period 2016-18 were 113.9 per 100,000 population (Scotland 154.6).

The trends in rates of early deaths from Cancer using 3-year averages are provided in figure 25. There was an overall decrease in the rates of early deaths in both localities.

Figure 31: Early deaths from cancer rate per 100,000 by locality (3-year averages)

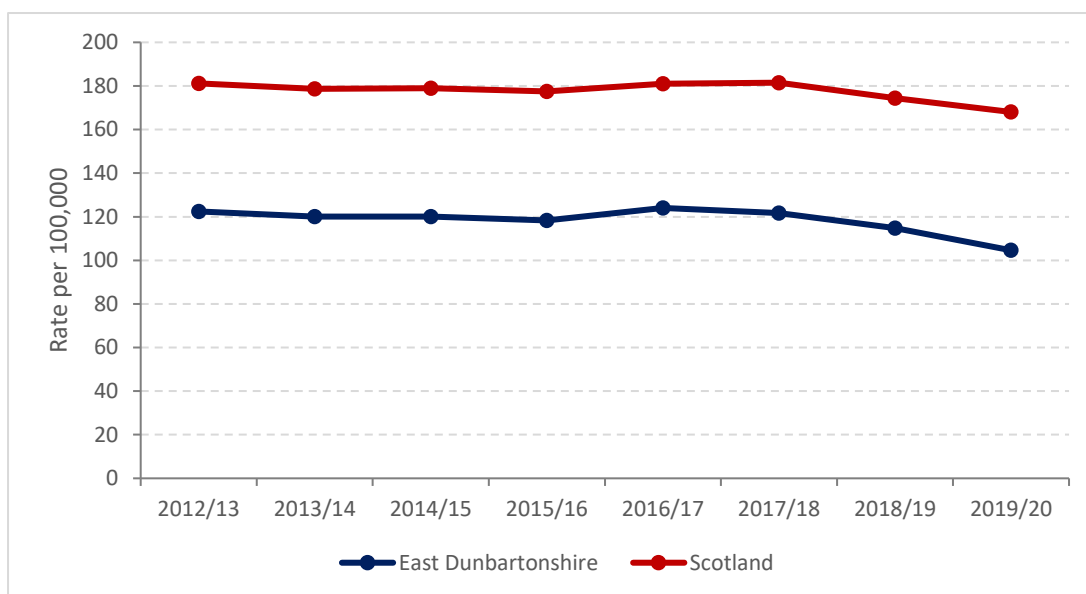


Source: ScotPHO

5.1.2 Chronic Obstructive Pulmonary Disease (COPD)

East Dunbartonshire had a COPD incidence rate per 100,000 (3 year average) of 104.6 in 2019/20 compared with the Scotland rate of 168 per 100,000. COPD incidence rates in both East Dunbartonshire and Scotland had decreased over the past few years.

Figure 32: COPD incidence rates per 100,000 (3 year average)

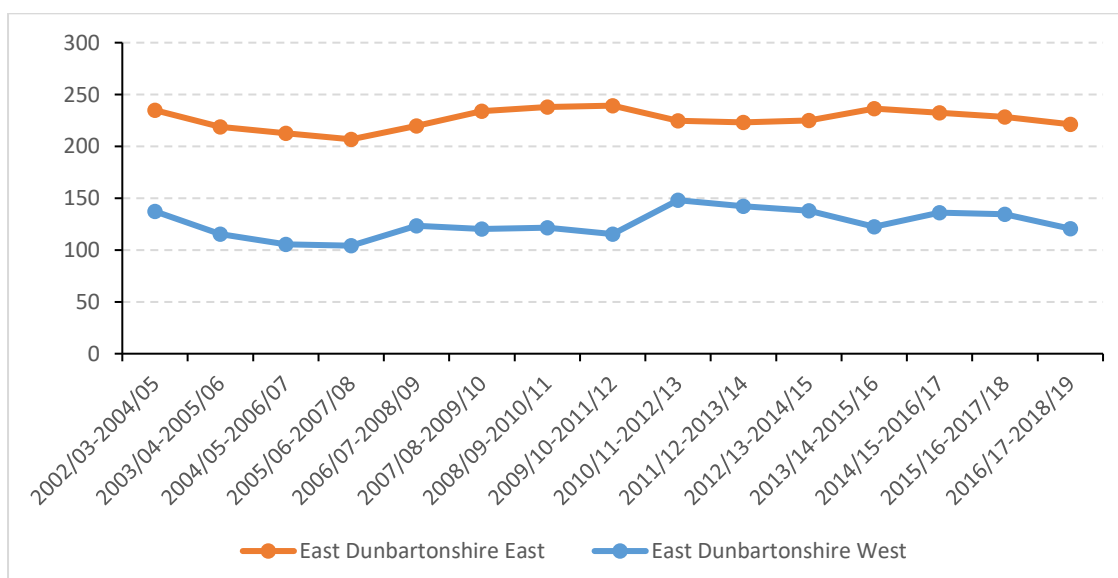


Source: ScotPHO

COPD Hospitalisation

The rate for COPD hospitalisation in East Dunbartonshire was 179.2 per 100,000 population (Scotland 286.6). There were higher hospitalisations from the East locality, 221 per 100,000 compared with 120 per 100,000 in the West locality.

Figure 33: COPD hospitalisations by locality (3-year average)



Source: ScotPHO

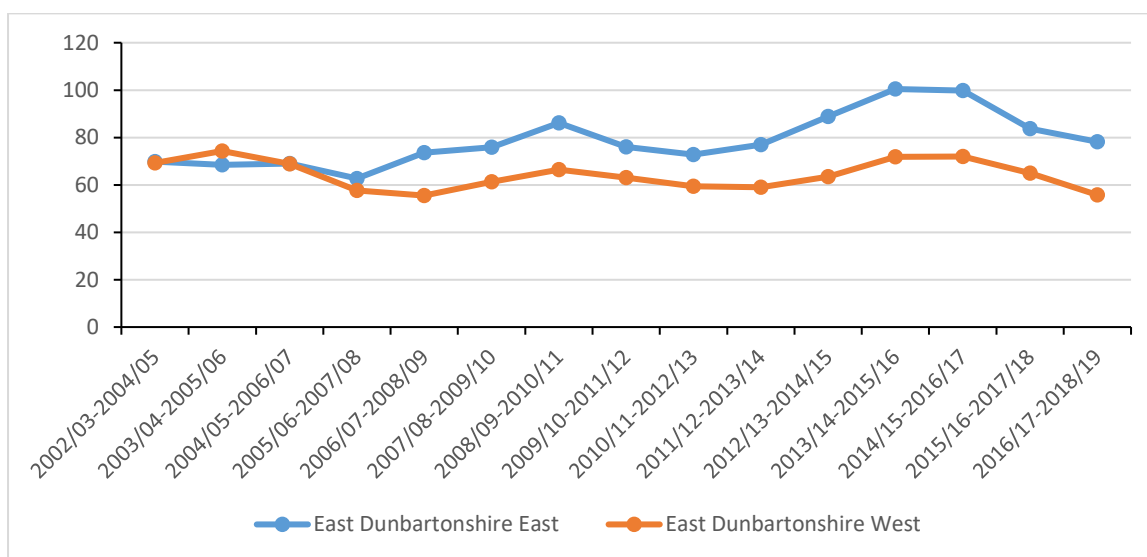
5.1.3 Asthma

The prevalence of asthma in individuals from East Dunbartonshire on GP registers was around 3 per 100 in 2018/19.

Asthma Hospitalisations

The rate for Asthma hospitalisation in East Dunbartonshire was 75.7 per 100,000 population (Scotland 90.7). There were higher hospitalisations from the East locality, 78.1 per 100,000 compared with 55.8 per 100,000 in the West locality.

Figure 34: Asthma Hospitalisations by locality (3-year average 2003-2018)



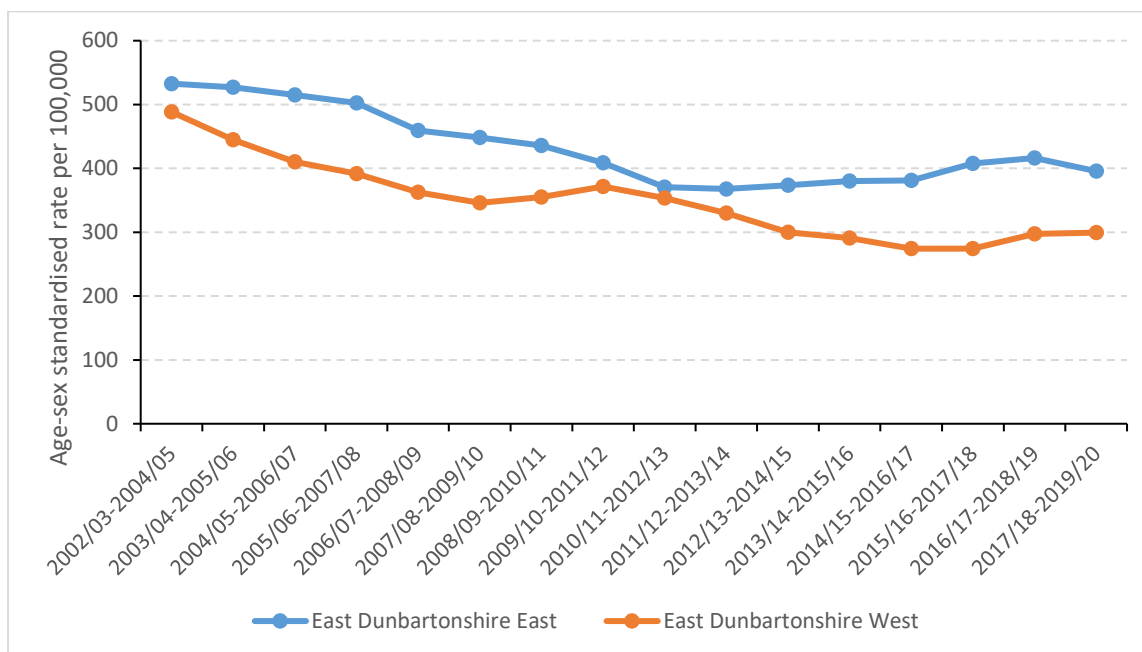
5.1.4 Coronary Heart Disease (CHD)

The prevalence of CHD in individuals from East Dunbartonshire on GP registers was around 4.4 per 100 in 2018/19.

CHD Hospitalisations

The rate for CHD hospitalisation in East Dunbartonshire was 356.8 per 100,000 population (Scotland 372.5). There were higher hospitalisations from the East locality, 395.4 per 100,000 compared with 299.3 per 100,000 in the West locality.

Figure 35: CHD Hospitalisations by locality (3-year average 2003-2018)

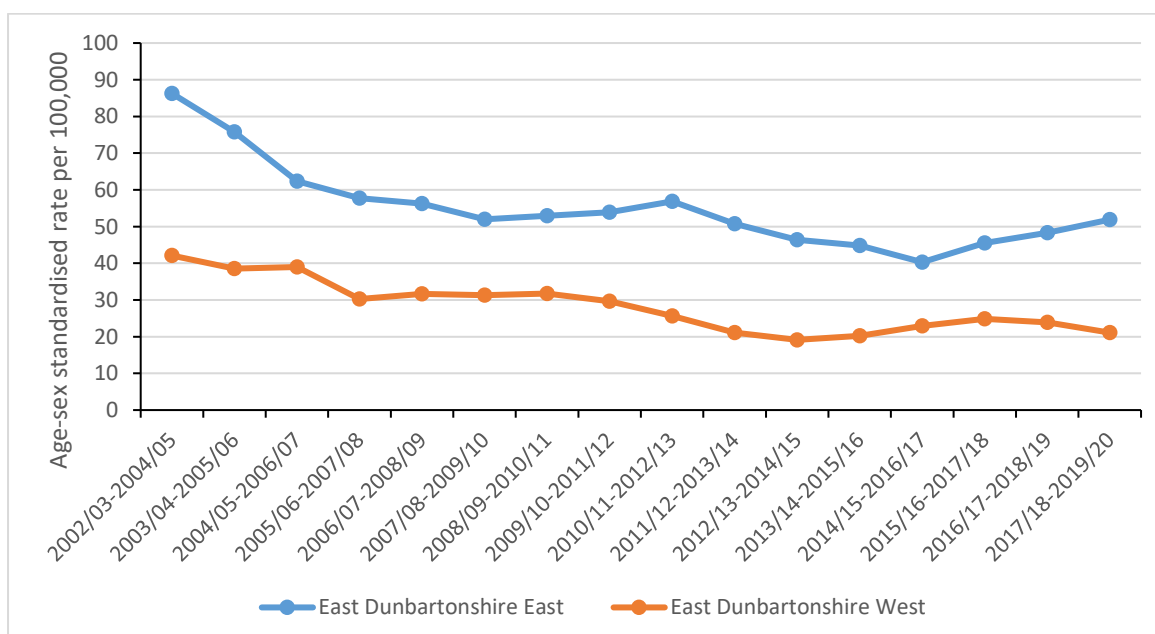


Source: ScotPHO

Early deaths from CHD

The rate of early deaths for individuals with CHD in East Dunbartonshire was 39.6 per 100,000 population (Scotland 50.4). In the East locality the rate of early deaths from CHD was 51.8 per 100,000 population compared with 21.1 in the West locality.

Figure 36: Early Deaths from CHD by Locality (3-year average 2003-2019)



5.1.5 Summary

The long term conditions most prevalent in East Dunbartonshire are arthritis, cancer and CHD. It is important that the necessary health and social care provisions are provided for residents with long term conditions as it will help reduce hospital admissions and bed days.

6. Hospital Activity

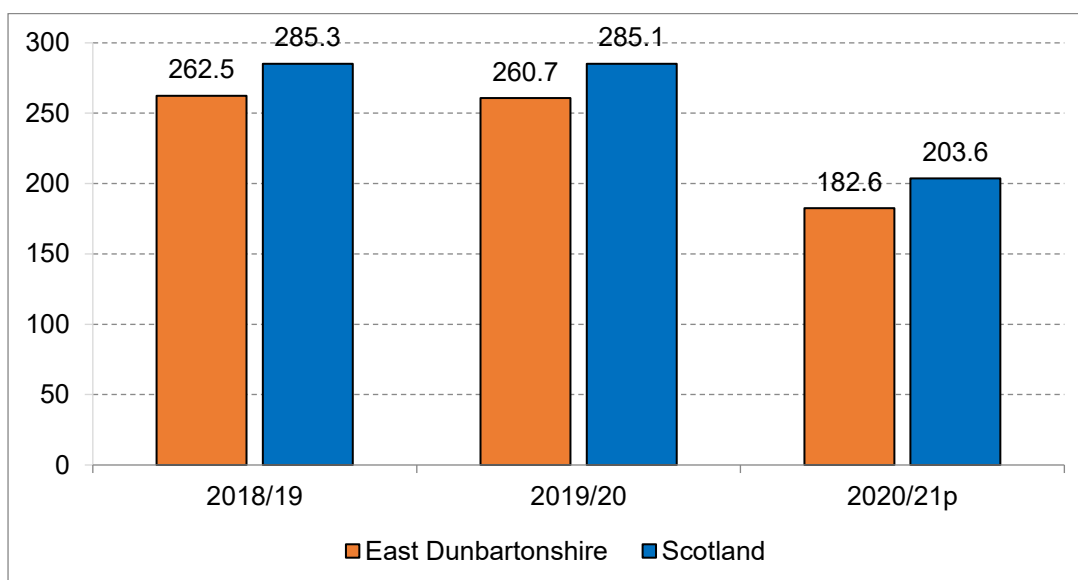
6.1 Unscheduled Care

Unscheduled care is the unplanned treatment and care, such as A&E attendance or an emergency hospital admission resulting from an urgent event. The Scottish Government included the reduction of unscheduled care as a key priority

6.1.1 Accident & Emergency Attendance (A&E)

The East Dunbartonshire A&E rate increased slightly from 255.9 per 1,000 population in 2017/18 to 260.7 per 1,000 population in 2019/20. However, this still remains lower than the Scotland rate of 285.1 per 1,000 population.

Figure 37: A&E Attendance rate per 1,000 population 2017/18 – 2020/21p

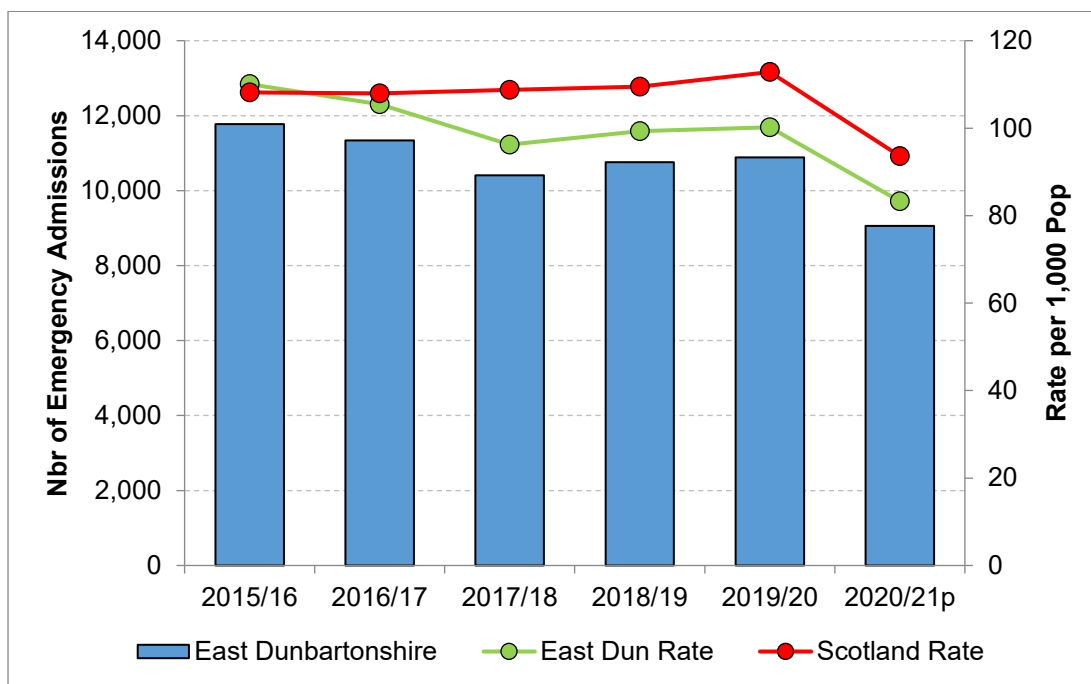


Source: ISD

6.1.2 Emergency Admissions to Hospital

The rate of emergency admissions to hospital for people in East Dunbartonshire has declined from 2014/15 to 2018/19. In comparison, the Scotland rate has remained fairly constant throughout this time.

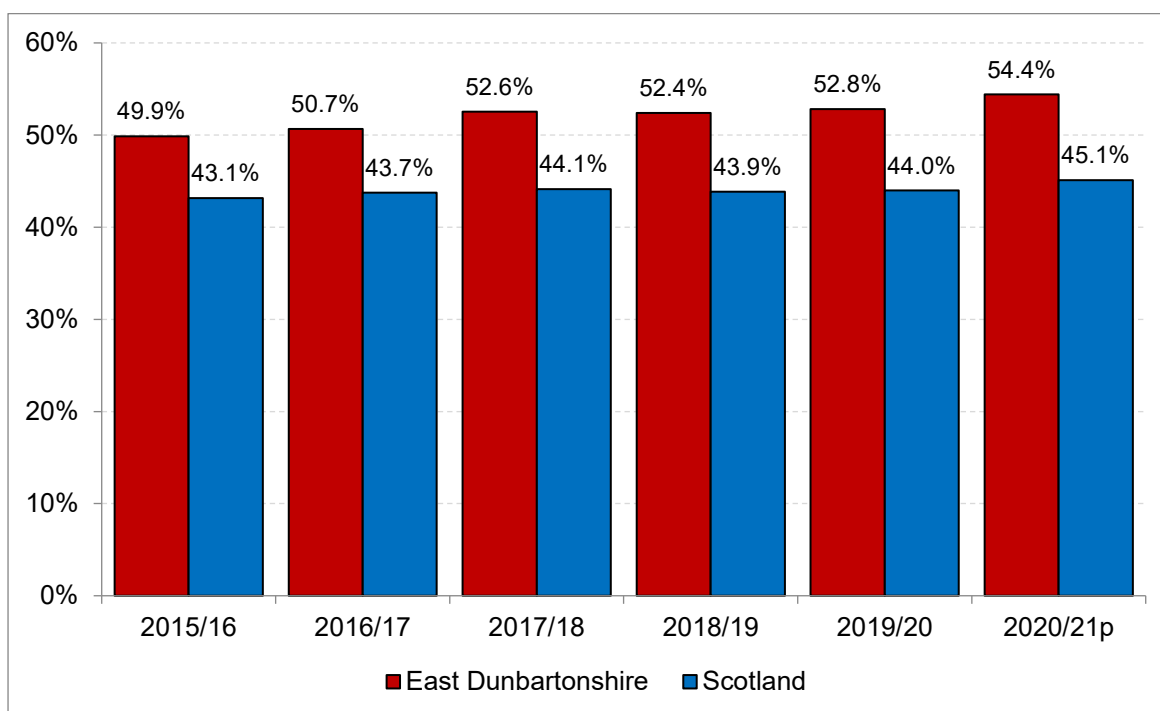
Figure 38: Emergency Admissions and Rates 2014/15 to 2020/21p



Source: ISD

Over half (52%) of patients in East Dunbartonshire who had an emergency admission in 2018/19 were aged over 65 years (Scotland 44%). Of those with multiple emergency admissions, 49% were aged 65 years or over (Scotland 41%).

Figure 39: Adults aged 65+yrs as a Percentage of All Emergency Admissions, 2015/16 to 2020/21p

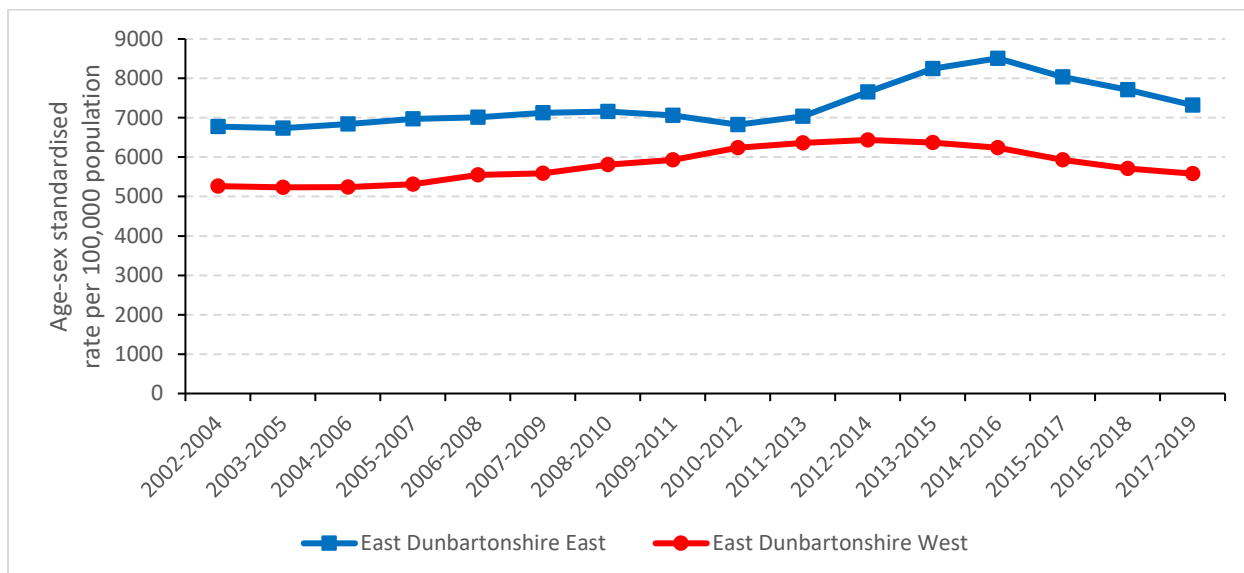


Source: ISD

Emergency Admissions by Locality

Between 2002-2019, the rate of emergency admissions increased greater in the East Locality than in the West Locality.

Figure 40: Emergency Hospitalisations by Locality (3-year average 2002-2019)

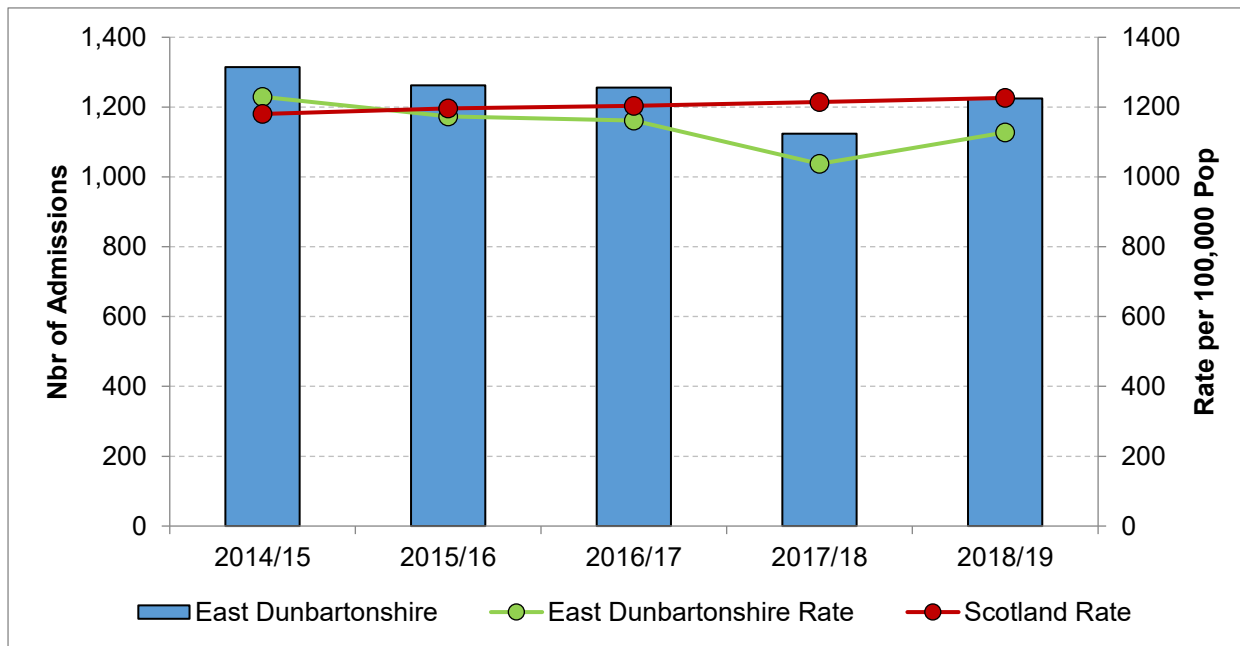


Source: ScotPHO

6.1.3 Multiple Emergency Admissions

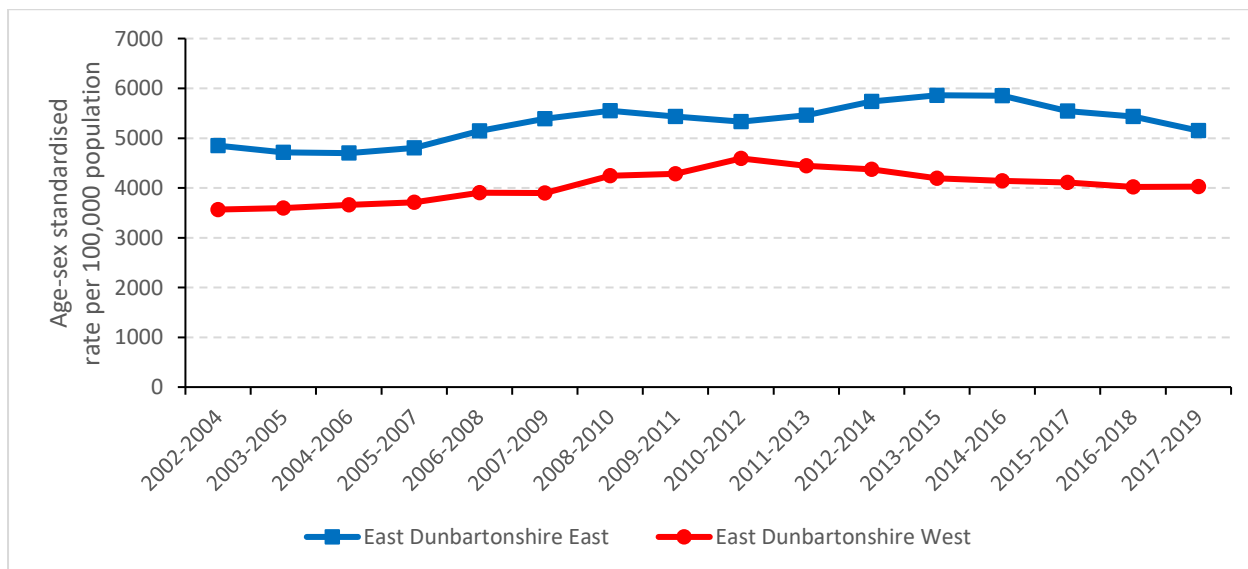
The rate of multiple emergency admissions to hospital decreased from 2014/15 to 2018/19. In comparison there was an increase in Scotland rate in the same time period. The actual number of people with 2 emergency admissions decreased by 7% in East Dunbartonshire between 2014/15 and 2018/19, Scotland seen an increase of 6%, There was a smaller decrease of 6% in the number of people with 3 or more admissions in East Dunbartonshire, Scotland's increase was 7%.

Figure 41: Rate and no. of Patients with 2 Emergency Admissions 2014/15 to 2018/19



Source: ISD

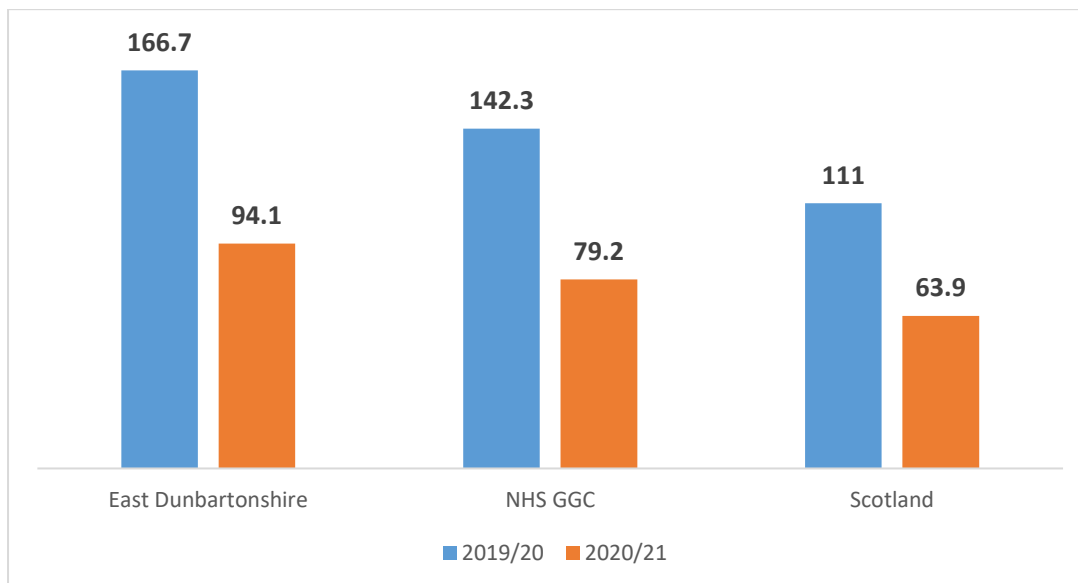
Figure 42: Adults Aged 65+ yrs with Multiple Emergency Admissions by Locality, 2002-19 (3-year average)



Source: ScotPHO

Elective Hospital Admissions

Figure 43: Elective Hospital Admissions Rate per 1,000



East Dunbartonshire’s elective admission rate is higher than both the NHS GGC and Scotland rates for 2019/20 and 2020/21. The decrease in rates across the board in 2020/21 was due to the Covid-19 pandemic. East Dunbartonshire is likely to have a significant backlog of elective admissions in the next few years.

In 2019/20 the top 5 admissions by specialty were as follows:

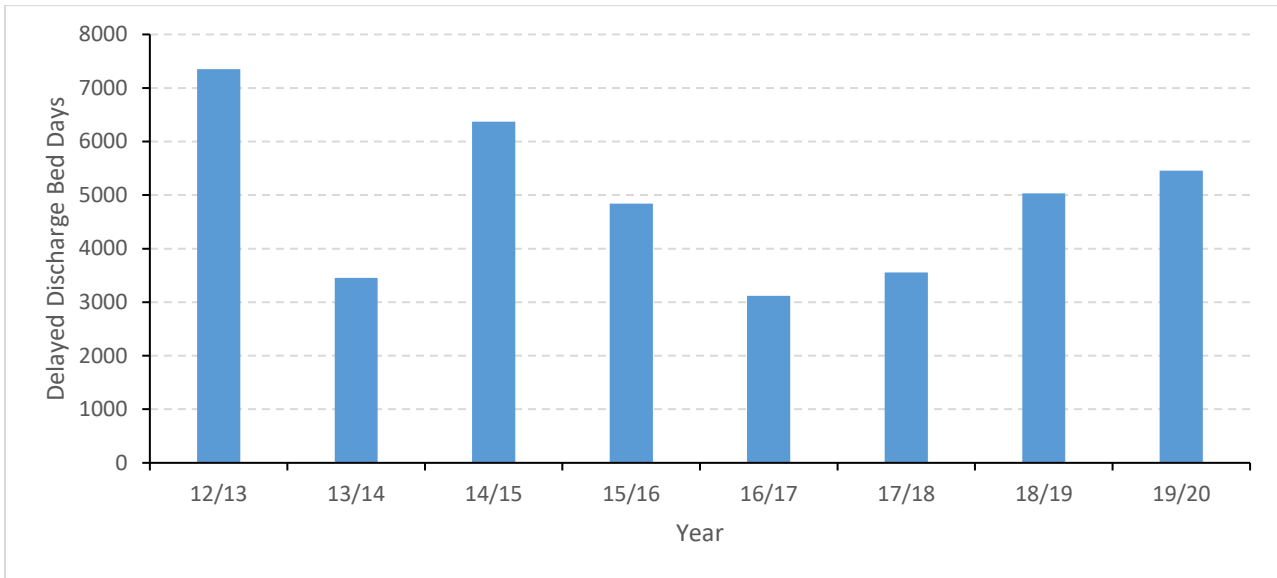
Specialty	No. Admissions	% Overall Admissions
General Surgery	3092	17.1%
Gastroenterology	2487	13.7%
Urology	1975	10.9%
Haematology	1846	10.2%
Medical Oncology	1610	8.9%

6.2 Delayed Discharges

A delayed discharge occurs when a patient, clinically ready for discharge, cannot leave hospital as a result of legal impediments to the person being moved to a non-acute place of care, or in some cases where the other necessary care, support or accommodation for them is not readily accessible and/or (very rarely) where funding is not available, for example to purchase a care home place. Sometimes delays can also be due to family issues.

Overall from 2013/13-2019/20 acute discharge bed days has decreased. Since 2016/17 the amount of bed days has increased per year.

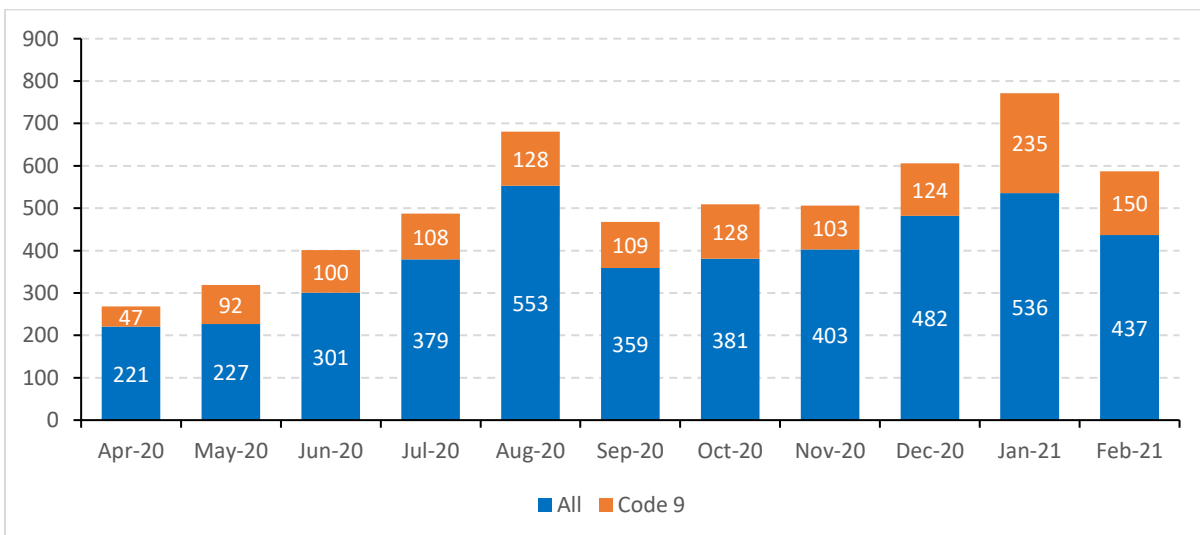
Figure 44: Acute Delayed Discharge Bed Days 2012/13-2019/20



Source: ISD (Note definitional changes were made to the recording of delayed discharge information from 1st July 2016)

The table below illustrates the increase in the number of bed days occupied due to standard delayed discharged and also delays of people who lack capacity (Code 9) for East Dunbartonshire, up to February 2021 (most up to date available).

Figure 45: Bed Days Lost to delayed Discharges (April-20 to February-21)



Source: ISD

The total bed days resulting from delayed discharges in east Dunbartonshire and Scotland for all adults from April 2020-February 2021 demonstrated that the majority

of delayed discharges were people aged 75 and over. In East Dunbartonshire, 73.4% of delays were aged 75+ (Scotland 63.4%) of which 25.6% were classified as Code 9 delays (Scotland 19.2%).

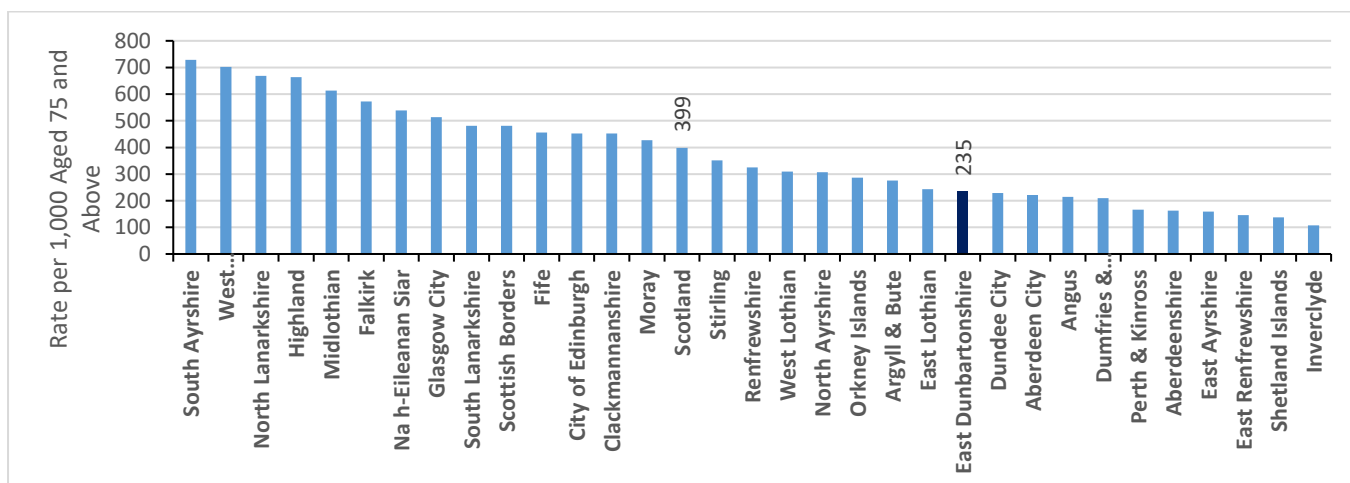
Table 8: Bed Days Occupied by Delayed Discharge, by Age and Delay Type

April 2020 - February 2021						
Local Authority	All Ages		18-74yrs		75+yrs	
	All	Code 9	All	Code 9	All	Code 9
East Dunbartonshire	76.4%	23.6%	21.3%	5.3%	47.8%	25.6%
Scotland	75%	25%	22.4%	14.2%	44.2%	19.2%

Source: ISD

The figure below shows bed days occupied by adults aged 75 and above due to delayed discharges in East Dunbartonshire and across Scotland.

Figure 46: Bed Days Occupied by Delayed Discharge Patients aged 75+yrs (per 1,000 Population) Apr-20 – Feb-21



Source: ISD

6.3 Summary

East Dunbartonshire has done well to decrease its emergency admission rate over the past few years despite having an older population compared with the rest of Scotland. However, caution should be taken with delayed discharges which have increased over the past few years. It should be noted that a backlog of elective admissions is likely due to the Covid-19 pandemic. This will particularly affect East Dunbartonshire which already has a higher rate of elective admissions than Scotland.

7. Deaths

There were 1,137 deaths recorded in East Dunbartonshire in 2019, accounting for approximately 2% of deaths in Scotland. As East Dunbartonshire residents have the second highest life expectancy in Scotland, the majority of deaths occurring in East Dunbartonshire were among those aged over 75 years while deaths occurring in individuals aged under 74 years were lower in comparison to Scotland.

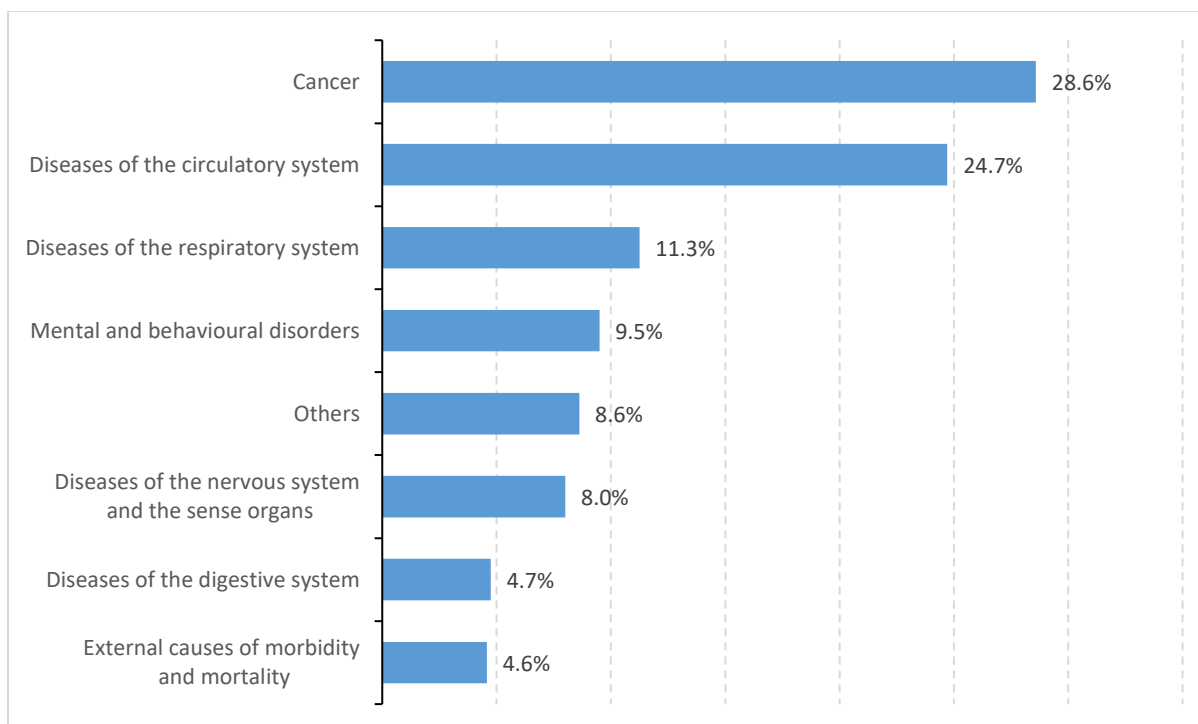
Table 9: Deaths in 2019 by age group

Local Authority	<65	65-74	75+	Total
East Dunbartonshire	12.9%	15.3%	71.8%	1,137
Scotland	18.7%	18.3%	63.0%	58,108

Source: NRS

The most common cause of death in East Dunbartonshire in 2019 was cancer, which accounted for 29.6% of all deaths, followed by diseases of the circulatory system (24.7%) and respiratory system (11.3%).

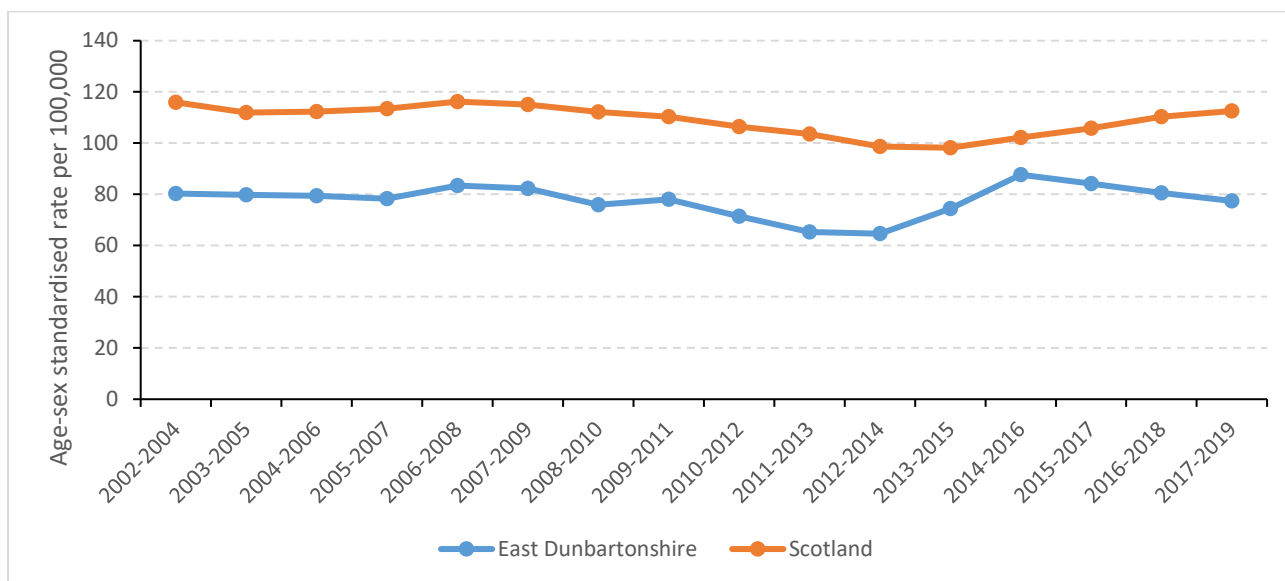
Figure 47: Causes of Death in East Dunbartonshire in 2019



Source: NRS

Deaths from all causes in 15-44 year olds were lower than the Scottish average. In 2017-19, there were 77.4 deaths per 100,000 population among this age group (Scotland 112.5).

Figure 48: All Cause Mortality Among 15-44 Year Olds (3-year average 2002-2019)

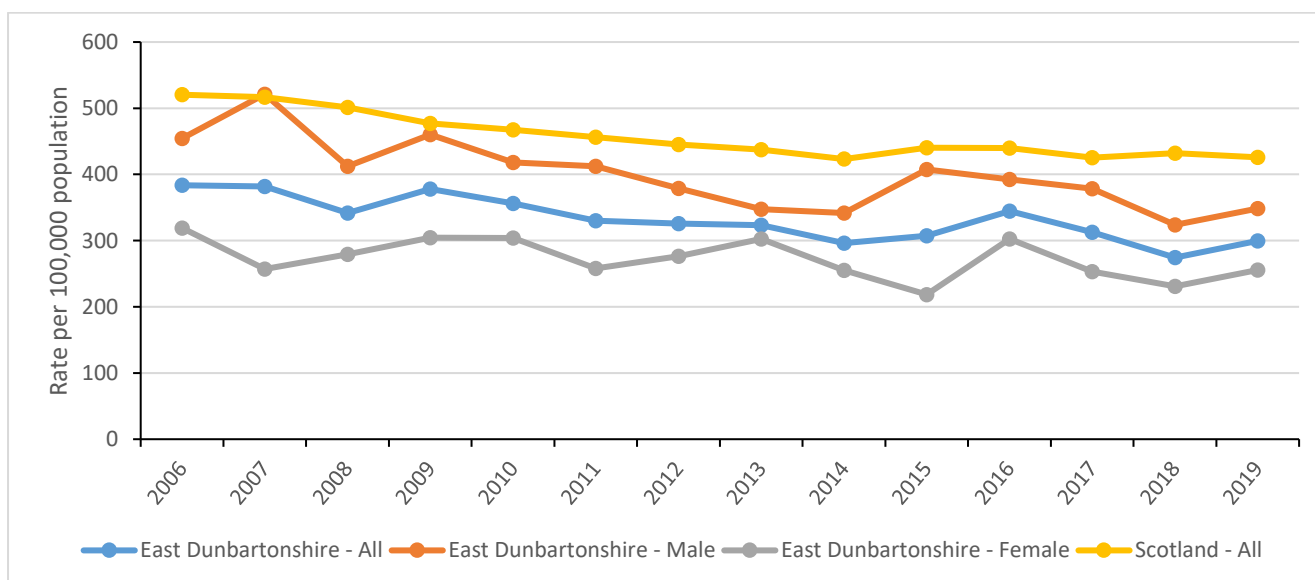


Source: ScotPHO

7.1 Premature Mortality

A decrease in premature mortality over time demonstrates an improvement in the health status of the population as a whole. In East Dunbartonshire, the age-standardised mortality rate in those less than 75 years decreased over time and remained lower than the rate for Scotland.

Figure 49: Age Standardised Death Rates in Individuals Less Than 75 Years

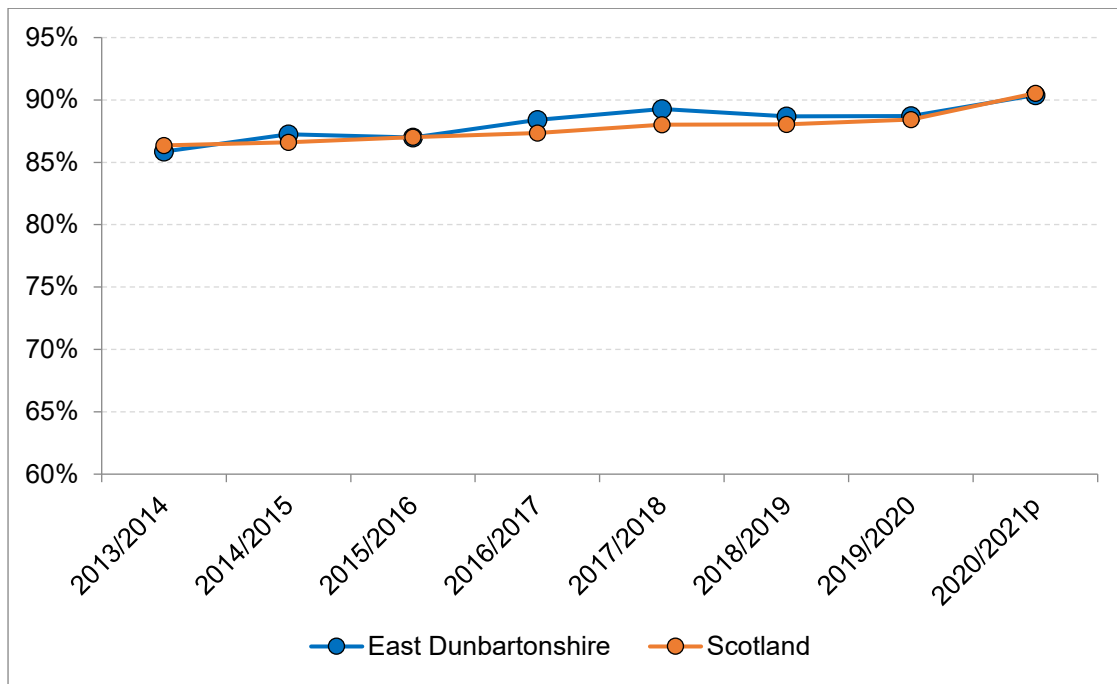


Source: NRS, Vital Events

7.2 End of Life Care

End of life care indicates whether plans and structures have been put in place to allow patients to spend their last six months or life at home or in the community rather than an acute hospital setting. For people in East Dunbartonshire, the percentage of the last 6 months of life spent at home or in the community setting was lower than the Scottish average until 2016/17.

Figure 50: Percentage of Last 6 Month of Life at Home or Community Setting



7.3 Summary

- The vast majority of people dying in East Dunbartonshire are aged 75+
- Cancer is the leading cause of death in East Dunbartonshire

8. Adult Social Care Provision

8.1 General

The majority of social care services are delivered to people aged 75 and over: around 70% of home care customers are over 75, with the majority of these 85+. Specialist services are also delivered to younger adults, often by joint teams.

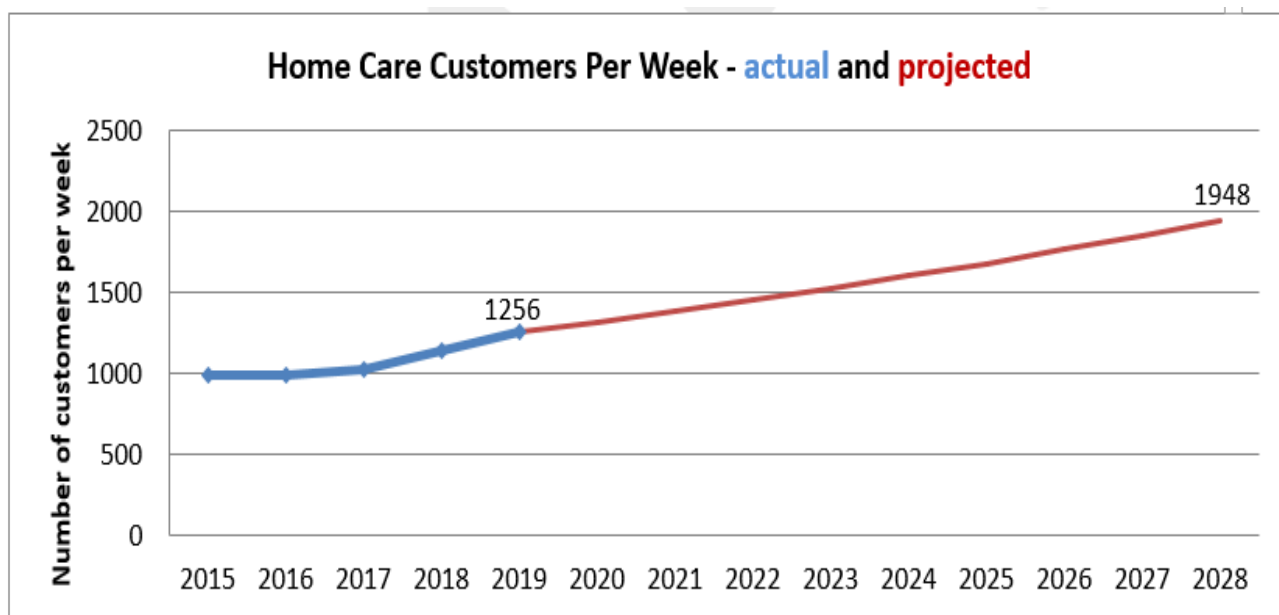
Approximately 40% of people 85+ in receipt of at least one social/personal care at home service. The most intensive support is provided to this age-group.

East Dunbartonshire has the fastest growing 85+ population, with a 5% increase in people aged over 85 each year since 2008 and onwards to the end of the decade.

8.2 Home Care

The number of people receiving care in their own homes from a homecare service increased by around a quarter between 2014 to 2019, equating to 5% per year. With the projected increase in demographic-based demand, it is expected that demand for home care will continue to grow at around 5% per year until at least the end of the decade. Figure 48 below illustrates projected demand, but this was carried out before the Covid-19 pandemic. The trend is likely to continue but may steepen in the short term due to the impact of the pandemic on the care home sector.

Figure 51: Homecare Customer Numbers: Actual and Projected



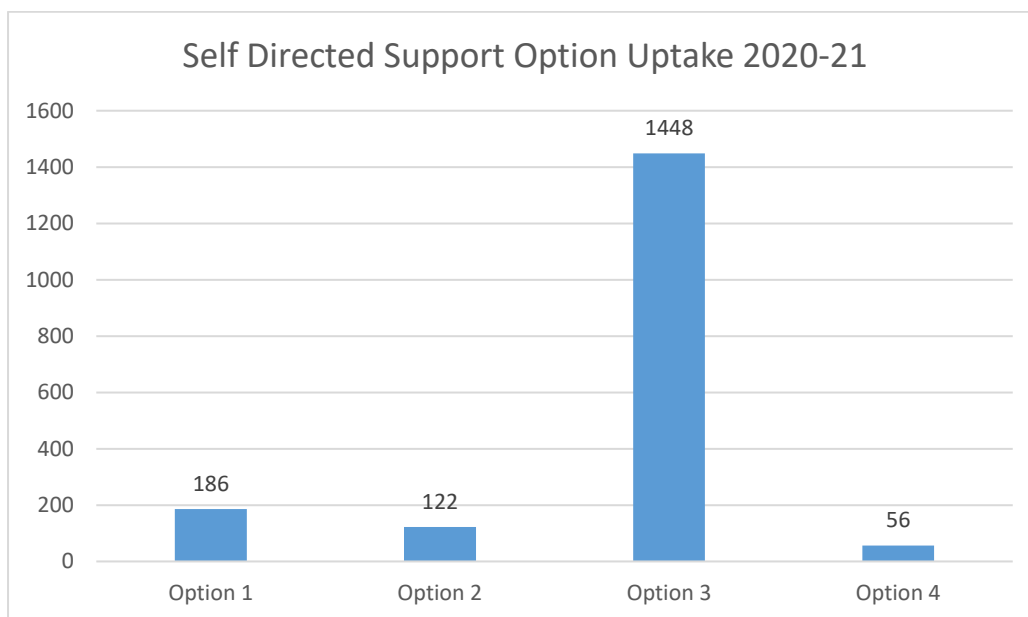
Source: NHS Social Care Information Dashboard

The majority of clients receiving home care in East Dunbartonshire are in the physical and sensory disability group (57%) followed by Elderly/Frail group and Other, both accounting for 13%.

8.3 Self Directed Support (SDS)

The number of direct payments in East Dunbartonshire has increased from 40 in 2007/08 to 186 in 2020/21. The chart below shows the breakdown of SDS options at 2020-21:

Figure 52: Self Directed Support in East Dunbartonshire



8.4 Care Homes

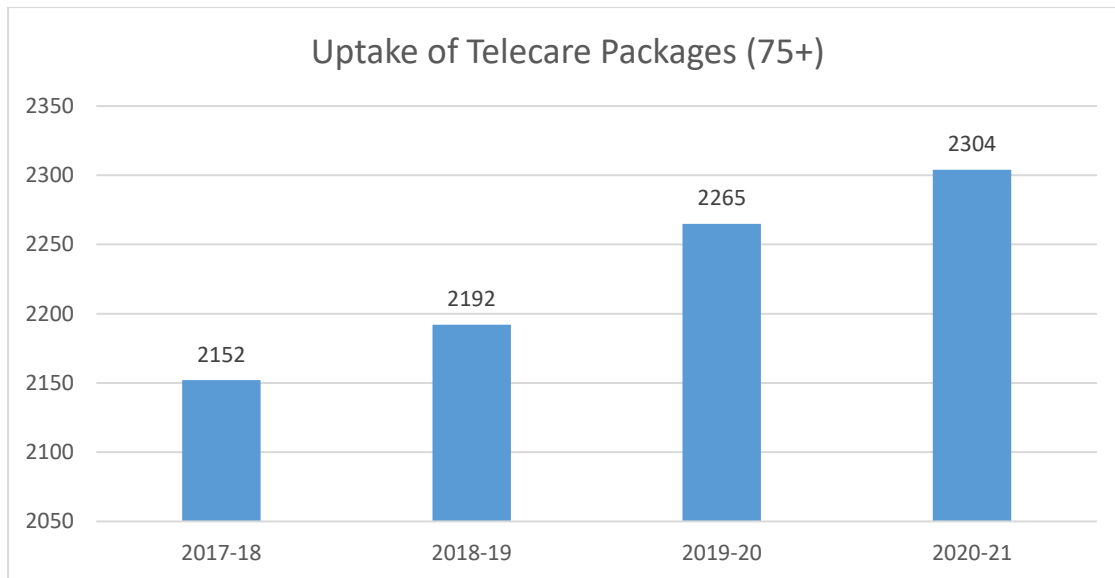
Care home residents have been particularly affected in very tragic terms, during the Covid-19 pandemic. This has resulted in a change to the trends of increasing demand for care home places. It is expected that post-pandemic, the sector will nonetheless recover and grow in line with the demands of the ageing population. The projections pre-pandemic were following a trajectory very similar to Figure 48 above relating to home care demand. Analysis will be carried out to revise these projections as a result of the pandemic impact.

8.5 Telecare & Telehealth Technology

Telecare packages provided within East Dunbartonshire increased from 1390 in 2015/16 to 2307 in 2020-21 (fig 51). This is in line with expectations, as the

population of people in East Dunbartonshire aged 75+ increases and telecare opportunities are maximised.

Figure 53: Telecare services in East Dunbartonshire



Source: NHS Social Care Information Dashboard

8.6 Summary

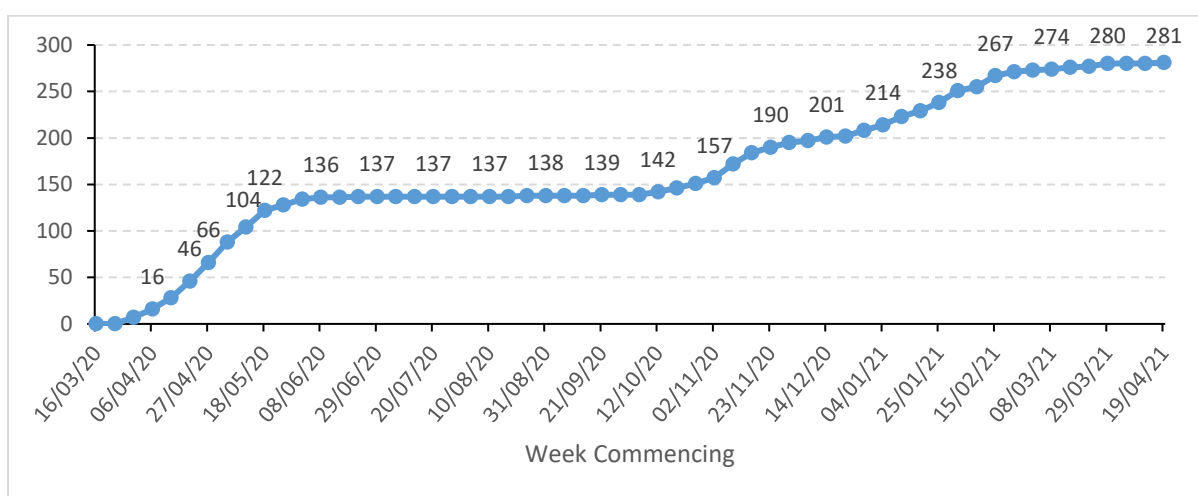
The demand for social care services is likely to increase significantly over the long term due to a combination of its ageing population and potential consequence from the Covid-19 pandemic. Previous analysis has indicated that a 5% increase in home care can be expected, with a return to the 5% per annum increase in care home admissions also likely post-pandemic.

9. Impact of Coronavirus

The Covid-19 pandemic is likely to have a major impact on the demand for health and social care services over the next few years. At this stage, it is too early to predict the precise impact it will have though early indications include a substantial backlog in hospital appointments and community-based services.

Since the first registered death in Scotland in the week commencing 16th March 2020 to week commencing 19th April 2021, there has been 281 COVID-19 related deaths in East Dunbartonshire. The figure below shows weekly cumulative deaths.

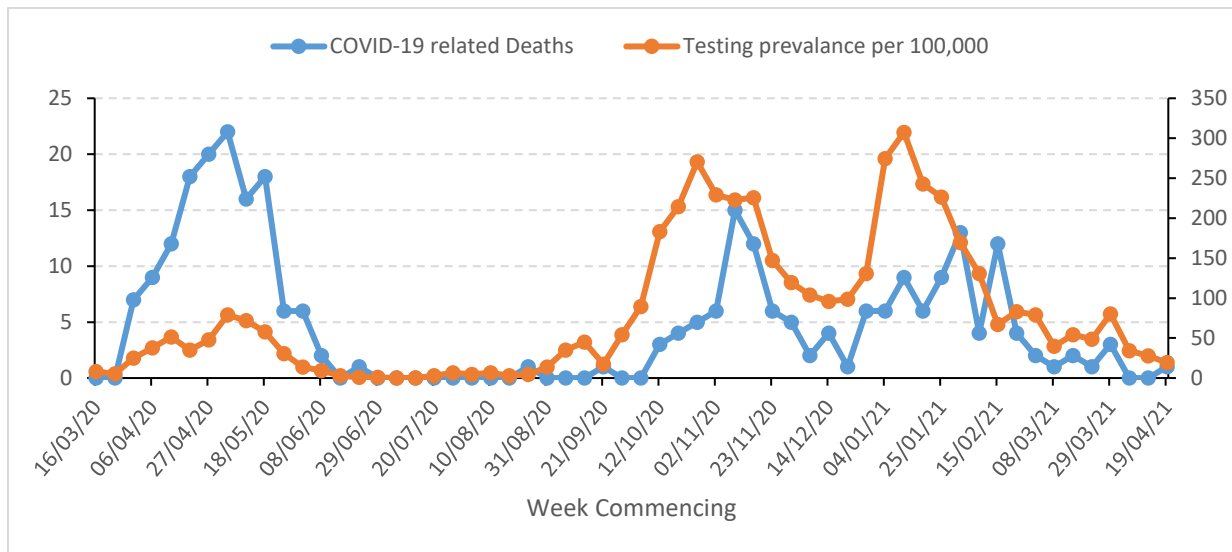
Figure 54: Weekly Cumulative Deaths Involving COVID-19



Source: NRS

At the start of the pandemic there were a large number of weekly deaths until week ending 8th June. This period accounted for 136 deaths. The second wave brought a rate of positive tests at a higher level than the first wave in East Dunbartonshire. However, the number of deaths were not as high as the first wave due in part to measures put in place to support pressures in care homes.

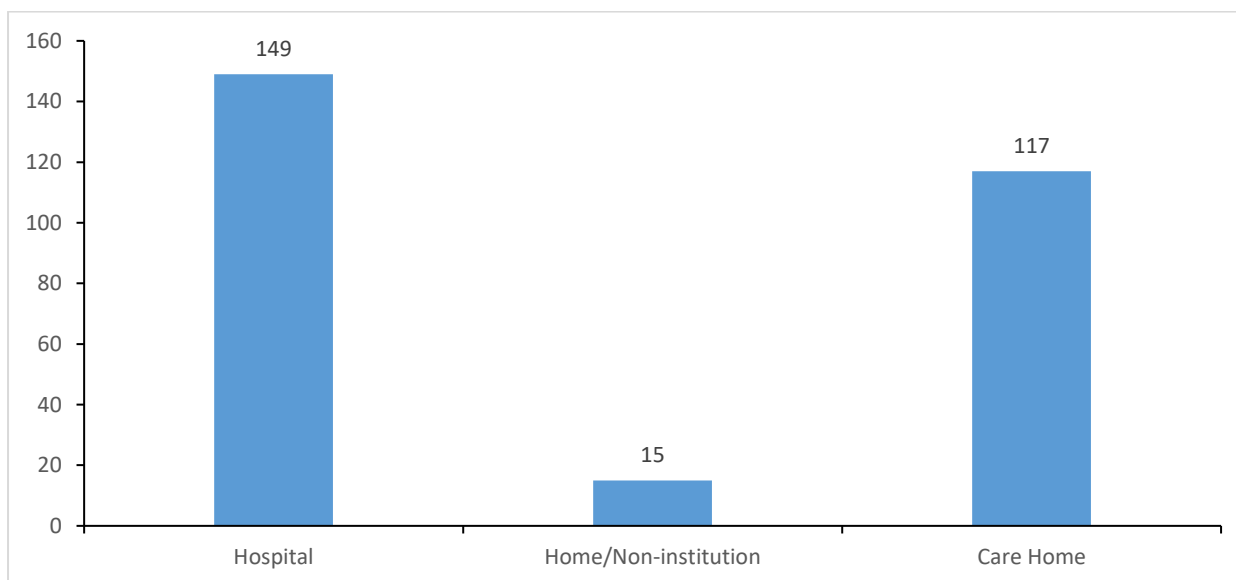
Figure 55: Weekly Deaths Involving COVID-19 with Weekly Positive Test rate per 100,000 Population



Source: NRS

As of 25th April 2021, 53% of COVID-19 related deaths have occurred in hospital, with care homes accounting for 42% and deaths in the home/non-institution making up 5% of deaths

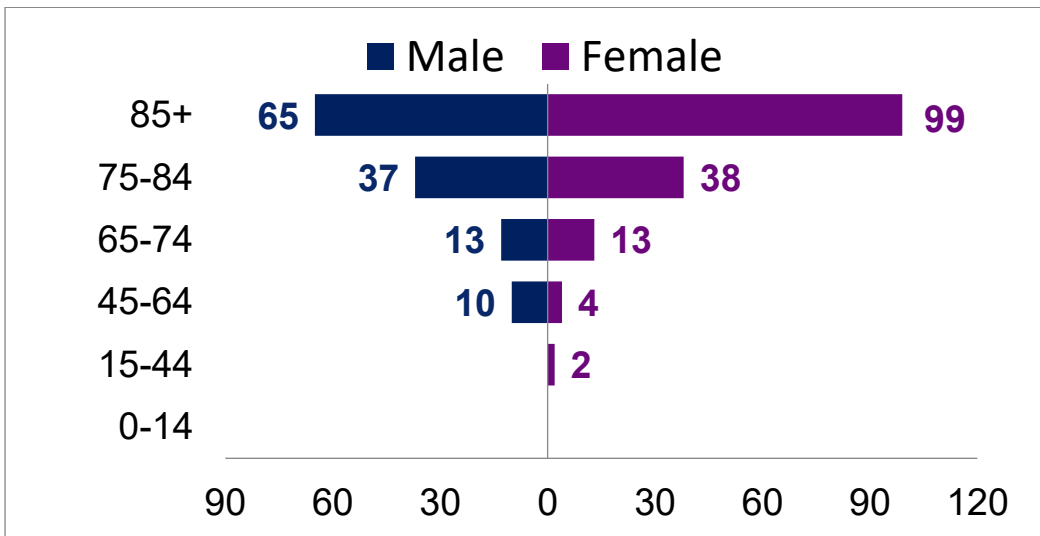
Figure 56: Number of Deaths Involving COVID-19 by Location of Death



Source: NRS

In total up to 25th April 2021 there have been 125 deaths for males and 156 deaths for females. The figure below shows the breakdown for each gender by age group.

Figure 57: Deaths involving COVID-19 by Age Group and Gender



Source: NRS