Projections of care needs for + England under different disability scenarios



Carol Jagger, Andrew Kingston Raphael Wittenberg, Bo Hu

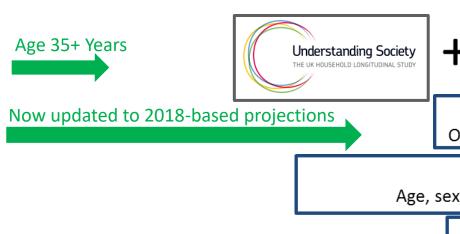








Population Ageing & Care Simulation (PACSim)





<u>Survival</u>

ONS 2014 population projections

Sociodemographic factors

Age, sex, education, marital status, occupation

Lifestyle factors

Smoking, physical activity, BMI

Morbidity

CHD, hypertension, diabetes, arthritis, stroke, respiratory disease, cancer, depression, **dementia**, cognitive impairment, visual impairment, hearing impairment

Dependency

High (requires 24 hr care)
Medium (requires care daily)
Low (requires care < daily)
Independent



Cognitive Function & Ageing Study

CPEC Model

unpaid & formal care, associated expenditure

More detail in Kingston et al. Lancet PH 2018, Wittenberg et al. Age Ageing 2020

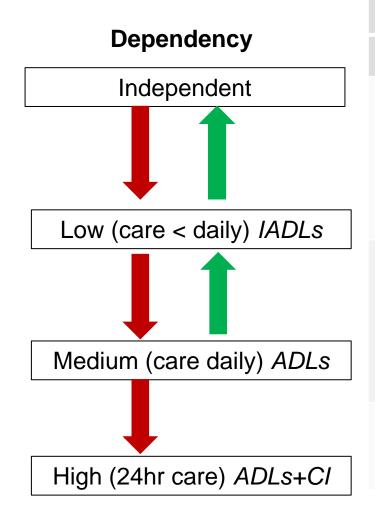








Disability scenarios*



Scenarios			
В	С	D	E
Increase low to independent (10%, 20%)	Reduce independent to low Increase low to independent (both 10%)	Increase independent to low Reduce low to independent (both 10%)	As D with low LE variant
Reduce low to medium (10%, 20%)	Reduce low to medium Increase medium to low (both 10%)	Increase low to medium Reduce medium to low (both 10%)	As D with low LE variant
	Reduce medium to high (10%)	Increase med to high (10%)	As D with low LE variant
	Increase low to independent (10%, 20%) Reduce low to medium	Increase Iow to independent (10%, 20%) Reduce low to medium (10%, 20%) Reduce low to medium (10%, 20%) Reduce low to medium Increase medium to low (both 10%) Reduce medium to high	Increase low to independent to low independent (10%, 20%) Reduce low to independent (both 10%) Reduce low to medium (10%, 20%) Reduce low to medium (10%, 20%) Reduce low to medium (both 10%) Reduce low to medium (both 10%) Reduce low to medium (both 10%) Reduce medium to low (both 10%) Reduce medium to low (both 10%) Reduce medium to high

*modelled only IADL/ADL progression not CI; all scenarios applied to annual probabilities of transitions from 2020







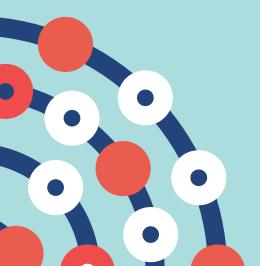








Research findings



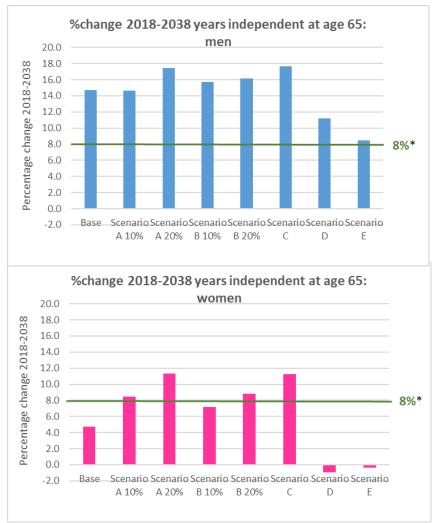








Changes in years independent at age 65, 2018-38



Men at age 65

- All scenarios result in increases in years independent exceeding Ageing Society Grand Challenge*
- Most optimistic scenario (C) results in increase of 17.7%, most pessimistic (E) increase of 8.5%

Women at age 65

- Only 4 scenarios result in increases in years independent exceeding Ageing Society Grand Challenge
- Most optimistic scenario (C) results in an increase of 11.2%
- Two pessimistic scenarios result in decreases in years independent of 0.9% (D) and 0.3% (E)

*Ageing Society Grand Challenge of 5 extra years independent at birth is equivalent to an increase of 8% in years independent at age 65



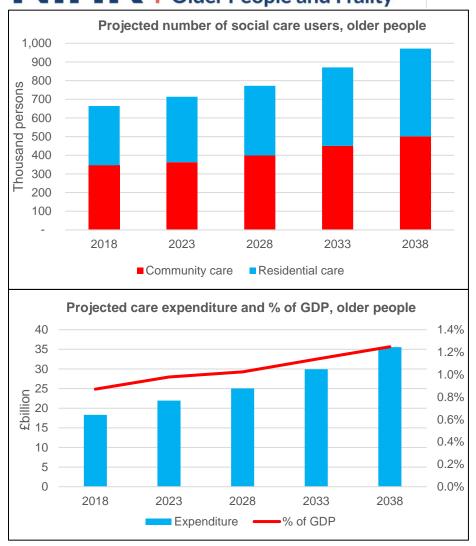
author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.







NIHR | Policy Research Unit Older People and Frailty



Base case projections of social care users and expenditure

We project that:

- The number of community care users will increase by 45%, from 350,000 in 2018 to 500,000 in 2038;
- The number of care home residents will increase by 48%, from 320,000 in 2018 to 470,000 in 2038.

Social care expenditure

- Is projected to increase by 94.1%, from £18.3 billion in 2018 to £35.5 billion in 2038;
- This represents a rise from 0.87% of GDP in 2018 to 1.25% of GDP in 2038.

Funding acknowledgement and disclaimer

This study/project is funded by the National Institute for Health Research (NIHR) Policy Research Unit Older People and Frailty (project reference PR-PRU-1217-21502). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

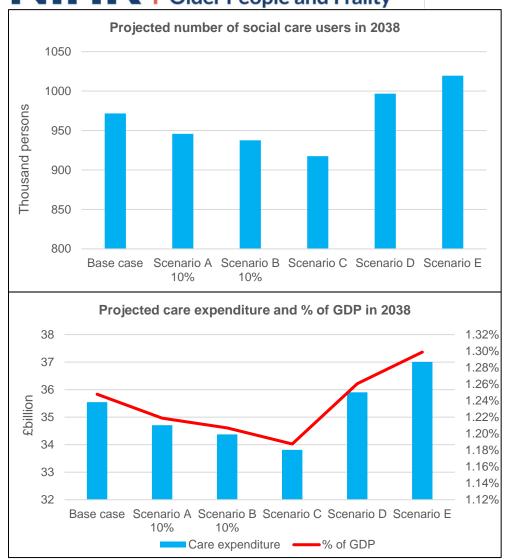






Policy Research Unit Older People and Frailty

Scenario analysis of social care users and expenditure



Projected number of social care (community care and residential care) users in 2038

- Most optimistic scenario (C) results in the lowest number of social care users – 920,000 people;
- Most pessimistic (E) results in the highest number of social care users – 1.02 million people
- Base case: 970,000 people

Projected social care (community care and residential care) expenditure in 2038:

- Most optimistic scenario (C): £33.8 billion and 1.21% of GDP;
- Most pessimistic scenario (E): £37.0 billion and 1.30% of GDP;
- Base case: £35.5 billion and 1.25% of GDP

Funding acknowledgement and disclaimer

This study/project is funded by the National Institute for Health Research (NIHR) Policy Research Unit Older People and Frailty (project reference PR-PRU-1217-21502). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.









CONCLUSIONS

- In the context of population ageing, social care demand will keep rising fast in the following two decades
- Projected social care expenditure is sensitive to the varied trends in disability in the future
- Interventions that slow down the progression of disability, as well as improving recovery, could significantly
 - reduce the expected increase in demand for social care and care expenditure
 - contribute towards meeting the Ageing Society Grand Challenge of increasing healthy independent years of life by 5 years by 2035
- Our results highlight the great societal and economic value of the continued efforts to promote healthy ageing.















