2017 JSNA

Dementia
January 2017

Dementia: Key findings

This briefing takes information from a variety of sources to provide a compendium of statistics about dementia in Stockport.

It provides analysis on prevention, prevalence, activity, mortality and costs.

PREVENTION
- The lifestyles of Stockport's population are improving overall, with recent decreases in the rate of smoking, and alcohol consumption; however the majority of people are not physically active enough.
- There are significant health inequalities for lifestyles, smoking rates in deprived areas and certain vulnerable groups (such as those with mental health problems) remain high and more than twice the average.

PREVALENCE
- **2,850 people in Stockport have a diagnosis of dementia**, an increase of more than 900 over the last five years partly as a result of the focus on improve detection.
- Dementia prevalence rates in Stockport are higher than the national average, and similar to the GM average.
- In Stockport around 75% of the people estimated to have dementia have been diagnosed, meaning there **are around 1,000 people living with dementia who have not yet been diagnosed**.
- By 2030 the expected prevalence of dementia is estimate to be 50% higher than currently.
- There is a **significant deprivation profile for dementia** in Stockport, rates in the most deprived area are more than double those in the least deprived areas. Due to the different age profiles and population sizes there are however more people living with dementia in the least deprived areas.
- Dementia prevalence by age by deprivation shows that the onset of dementia appears to start in the late 60s early 70s for people living in the most deprived quintile. For those living in **the least deprived quintile the onset appears to be delayed by up to 10 years** to the late 70s.

Dementia: Key findings

DIAGNOSING, LIVING & STAYING WELL

- **85% of patients with dementia known to GPs have had a care plan review in the last year**, higher than the national average.
- 86% of patients newly diagnosed with dementia have completed the full range of the appropriate diagnostic tests.
- Trends in prescribing volumes show that there has been a 72% increase over the last four years, compared to a 34% increase in prevalence; costs are going down however. There is variation in the average cost of prescribing by GP practices.
- **Around 30 care homes in Stockport offer provision for dementia**.
- Currently 8.4% of adult social care clients have needs relating to dementia, around 700-800 people. This is approximately 20% of those diagnosed. An audit suggests costs are in the region of £40m per year.
- Referrals to the **memory service** have been increasing, with the service now receiving around 60 referrals a month; with an average **active caseload of 425 at any one time**.
- Only a small proportion of carers of people with dementia either attend the carers information groups or are known to local support groups.
- There are **3,423 dementia friends in Stockport**, and 46 champions. Stockport has the 7th highest total number of dementia friends per 1,000 population in Greater Manchester.
- Emergency admissions to hospital for dementia as a primary diagnosis have more than doubled in Stockport residents in the last eight years. There are now over **2,200 emergency admissions for dementia a year.** As deprivation increases so does the emergency admission rate, the rate in the most deprived areas is almost double the Stockport average . Patients were most likely to be in hospital between 2 and 6 days.
- Where dementia is mentioned in any diagnosis code the most common primary diagnosis are for diseases of the urinary system which account for almost 10%, influenza and pneumonia (9%), injuries to the head (7%) and injuries to the hip and thigh (4%).

DYING WELL

- There are now approximately 350 deaths in Stockport each year with an underlying cause of dementia, which is a major cause of death in older people.

COSTS

- National evidence from Dementia UK 2014 suggests costs for Stockport based on the **expected prevalence are around £135million** and for **diagnosed prevalence are around £99m**. Approximately 16% of costs are born by the NHS, 39% by social care and **44% by unpaid carers.** By 2030 these costs could increase locally to £197million.

Dementia: Introduction

This briefing takes information from a variety of sources to provide a compendium of statistics about dementia in Stockport. It provides analysis on prevention, prevalence, activity and costs.

Dementia is a common condition. The risk of developing dementia increases as you get older, and the condition most frequently occurs in people over the age of 65.

Dementia is a syndrome (a group of related symptoms) associated with an ongoing decline of the brain and its abilities. This includes problems with:

- memory loss
- thinking speed
- mental agility
- language
- understanding
- judgement

Dementia is an umbrella term that describes a group of symptoms that are caused by many diseases that affect the brain, for example: Alzheimer's disease and vascular disease.

People with dementia can become apathetic or uninterested in their usual activities, and have problems controlling their emotions. They may also find social situations challenging, lose interest in socialising, and aspects of their personality may change.

A person with dementia may lose empathy (understanding and compassion), they may see or hear things that other people do not (hallucinations), or they may make false claims or statements.

As dementia affects a person's mental abilities, they may find planning and organising difficult. Maintaining their independence may also become a problem. A person with dementia will therefore usually need help from friends or relatives, including help with decision making.

Most types of dementia can't be cured, but if it is detected early there are ways you can slow it down and maintain mental function.

Dementia: Preventing dementia

There is evidence that some factors – particularly healthy lifestyles – can impact on the risk of developing dementia. To have the greatest impact on reducing dementia risk these factors should be controlled throughout middle age (45-64).

Smoking doubles the risk of dementia by:

increasing the risk of
- cardiovascular disease
- diabetes
- stroke
- narrowing the blood vessels in the heart and brain
- causing oxidative stress which damages the brain
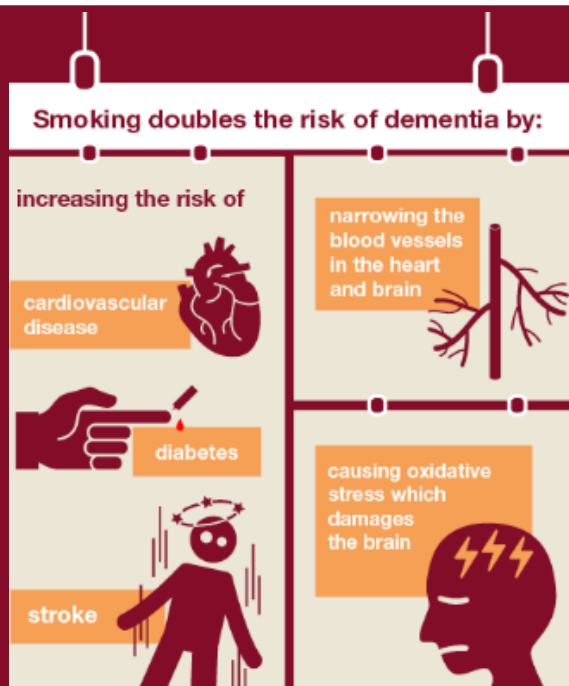
Smoking is one of the biggest lifestyle risk factors for dementia.

- **16%** smoke in Stockport
- Down from 20% in 2010
- **35%** of the 45-64 age group are current or ex-smokers

Drinking excessive amounts of alcohol can cause increased blood pressure and cholesterol which in turn increases risks for dementia.

- **25%** drink unhealthily in Stockport
- Down from 28% in 2009
- **7,400** alcohol related hospital admissions in 2015-16
- **46%** of alcohol specific admissions from 45-64 age group

Alcohol specific hospital admissions by age group; 2015-16 crude rate per 100,000

15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90+
422.0	629.6	600.1	713.8	1,469.8	1,424.5	1,651.6	1,652.4	1,272.8	1,851.3	1,410.5	1,058.5	877.4	332.9	611.6	112.2

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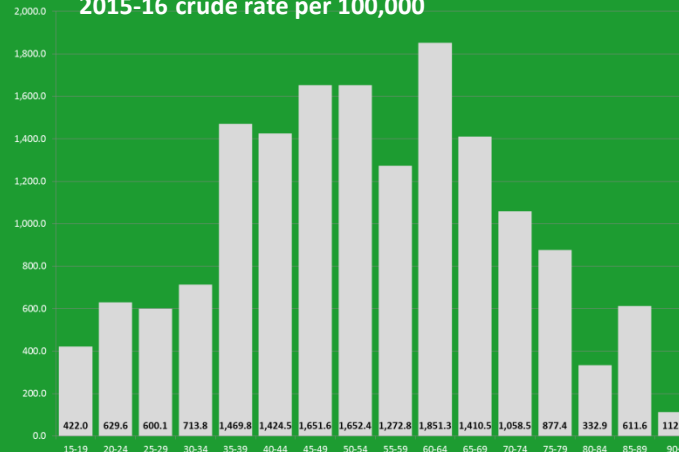
Dementia: Preventing dementia

Being overweight can increase blood pressure which increases the risk of some types of dementia. A low fat, low salt, high fibre diet can also help reduce the risk of certain dementias.

- o **22%** are obese in Stockport
- o **64%** are overweight or obese
- o **21%** eat the recommended 5 a day portions of fruit and vegetables
- o **19%** of 45-64 have high blood pressure

High cholesterol levels may also contribute towards the risk of developing some kinds of dementia. Therefore foods high in saturated fat should be limited.

Exercising regularly makes the circulatory system more efficient. It also helps lower cholesterol and keep blood pressure at a healthy level, decreasing the risk of developing some kinds of dementia. Exercise can also reduce the risk of type 2 diabetes which significantly and independently increases the risk of Alzheimer's disease.

- o **23%** are inactive in Stockport
- o **52%** are not active enough
- o **14,300** have type 2 diabetes
- o **7%** of 45-64 year olds have type 2 diabetes

Thirty minutes of moderate intensity exercise five times a week can reduce the chance of type 2 diabetes by up to 40%.

Although on the whole Stockport's population lifestyles are improving, and are similar to the national average there are significant inequalities. Smoking rates in deprived areas and certain vulnerable groups (such as those with mental health problems) remain high and more than twice the average.

For more information about adult lifestyles see: http://www.stockportjsna.org.uk/2016-jsna-analysis/adult-lifestyles/
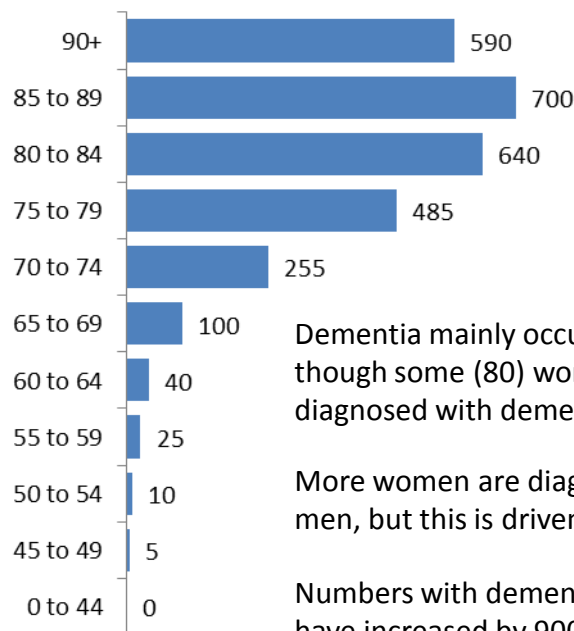
Stockport JSNA
joint strategic needs assessment

Data taken from the Stockport Health Record in July 2016 gives a current indication of the number of Stockport registered patients diagnosed with dementia and their demographic profile.

Number with Dementia			
	All	Female	Male
All	2,850	1,820	1,030
Age 0-19	-	-	-
Age 20-64	80	35	45
Age 65+	2,770	1,780	990

% of population with Dementia			
	All	Female	Male
All	1%	1%	1%
Age 0-19	0%	0%	0%
Age 20-64	0%	0%	0%
Age 65+	5%	6%	4%

Co-morbidities

54% Hypertension	21% Stroke/TIA	11% Anxiety
28% Fall	18% Diabetes	10% Cancer
23% CHD	15% AF	
23% CKD	13% Depression	

Dementia rates are higher in more deprived areas of Stockport. However because of the older age profile in less deprived areas, more people with dementia live in the areas with lower deprivation.

	Most Deprived	2nd Most Deprived	Mid Deprived	2nd Least Deprived	Least Deprived
Number	490	485	495	510	780
Crude %	1%	1%	1%	1%	1%
DSR per 100,000*	1,668.6	1,079.2	934.4	812.7	790.8

* Takes into account age/sex profile of populations and is best measure for comparison

Bar chart: Number with dementia by age group:
- 90+: 590
- 85 to 89: 700
- 80 to 84: 640
- 75 to 79: 485
- 70 to 74: 255
- 65 to 69: 100
- 60 to 64: 40
- 55 to 59: 25
- 50 to 54: 10
- 45 to 49: 5
- 0 to 44: 0

Dementia mainly occurs in older age groups, though some (80) working age people are diagnosed with dementia.

More women are diagnosed with dementia than men, but this is driven by those aged 85+.

Numbers with dementia identified by GPs have increased by 900 in the last 5 years.

Healthy eating, maintaining a healthy weight, physical activity, drinking only in moderation, stopping smoking and managing hypertension reduce the risk of developing some types of dementia.

Stockport JSNA
joint strategic needs assessment

Prevalence rates in Stockport have been consistently higher than England average, although this may be due to the older population. Rates have also risen significantly since 2010 – when the first Dementia Strategy was launched with a focus on detection.

Trends in GP diagnosis of dementia

Legend: Stockport - Number | Stockport - Crude rate | England - Crude rate

Year	Stockport - Number
2006/07	1442
2007/08	1472
2008/09	1475
2009/10	1538
2010/11	1679
2011/12	1844
2012/13	2044
2013/14	2389
2014/15	2667
2015/16	2735

Numer of people diagnosed with dementia (left axis)
Crude rate of people diagnosed with dementia (right axis)
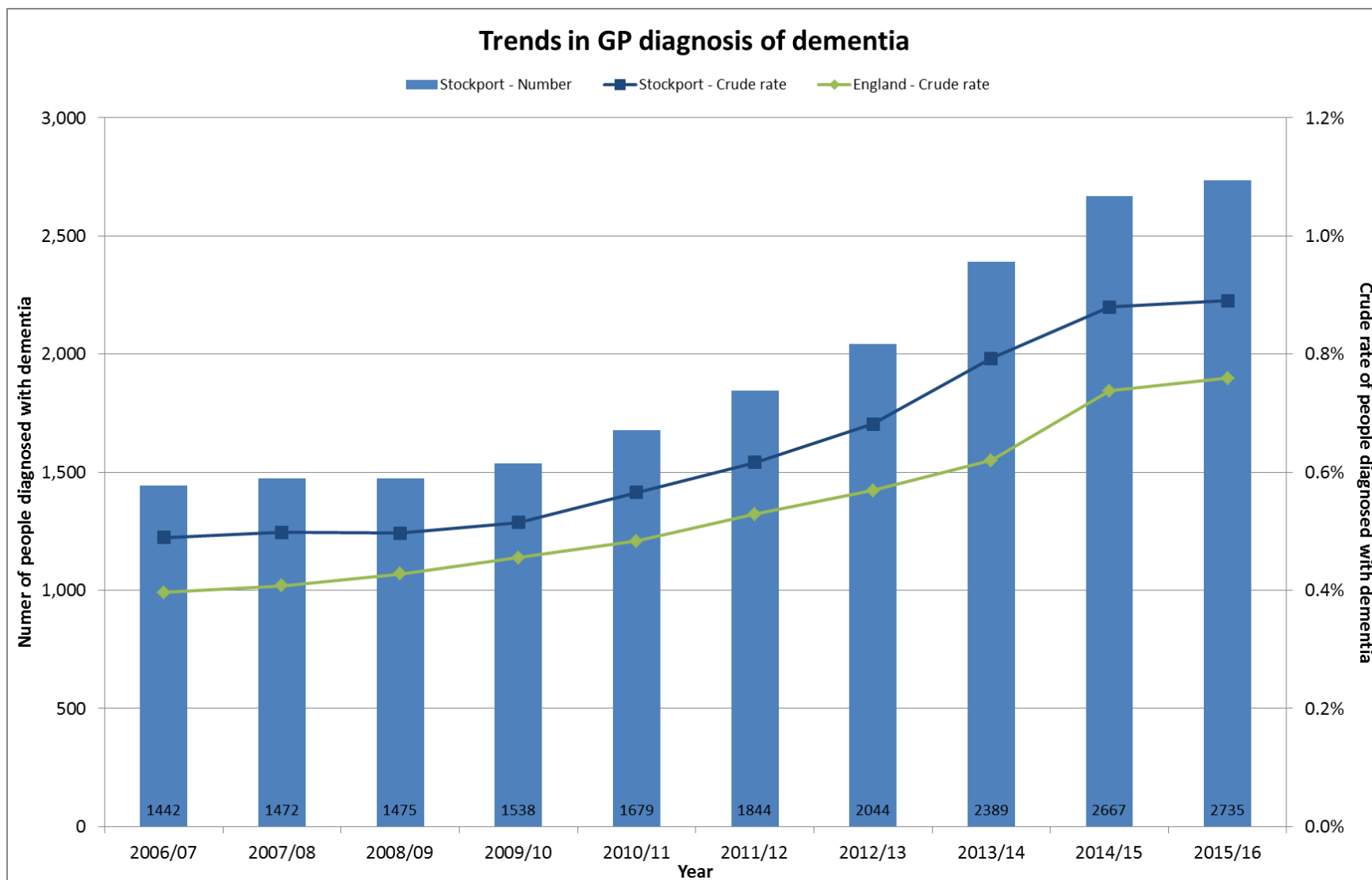
Benchmarking dementia prevalence

Dementia registers and estimated prevalence, aged 65+; Greater Manchester CCGs, November 2016

Legend: ■ Crude rate per 10,000 dementia registers   ■ Crude rate per 10,000 estimated dementia prevalence

CCG	Crude rate per 10,000 dementia registers	Crude rate per 10,000 estimated dementia prevalence
Salford	545.5	621.8
Bury	512.2	591.1
Oldham	489.6	594.3
South Manchester	482.2	636.5
Tameside & Glossop	481.9	648.1
Stockport	480.6	649.2
Central Manchester	477.9	517.5
Trafford	477.3	666.7
Bolton	468.1	595.6
North Manchester	461.0	472.5
Heywood, Middleton & Rochdale	409.9	604.3
Wigan	388.2	563.3

Crude rate per 10,000

When looking at a crude rate per 10,000 of dementia registers aged 65+, **Stockport has the 6th highest prevalence rate** amongst Greater Manchester CCGs.

However if the same was to be said of **estimated prevalence**, i.e. including the patients with dementia who have not been diagnosed, then Stockport would rank second highest, behind only Trafford. As Stockport has a relatively old population compared to the rest of Greater Manchester this is not especially surprising, but this suggests despite increasing diagnosis rates, there are still a significant number of people with dementia that have not been diagnosed.

Estimated dementia diagnosis rate, age 65+; Greater Manchester CCGs, November 2016

Legend: — Greater Manchester estimated diagnosis rate   — National estimated Dementia Diagnosis Rate

CCG	Dementia diagnosis rate
North Manchester	97.6%
Central Manchester	92.3%
Salford	87.7%
Bury	86.7%
Oldham	82.4%
Bolton	78.6%
South Manchester	75.8%
Tameside & Glossop	74.4%
Stockport	74.0%
Trafford	71.6%
Wigan	68.9%
Heywood, Middleton & Rochdale	67.8%

Stockport's dementia diagnosis rate (ratio between the known and expected prevalence) is 74%; meaning there are a **potential 1,000** further unknown cases

Stockport's diagnosis rate is significantly better than the England's but is significantly lower than the average of the 12 Greater Manchester CCGs.

North Manchester CCG has the highest diagnosis rate at 97.6% of all dementia patients recorded, although it has a much lower overall prevalence. Heywood Middleton and Rochdale has the lowest diagnosis rate at 67.8%.

Estimated and Forecast Prevalence

National estimated for prevalence (Dementia UK 2014 figures applied to local population data) also show there is still significant under diagnosis, though gap is closing. Forecasting prevalence show's that the expected number of dementia cases are to be 50% higher by 2030.

	2014	2015	2016	2017	2018	2020	2025	2030		GP	Diff
People aged 30-59 predicted to have early onset dementia	50	51	51	52	52	52	51	48		41	-10
People aged 60-64 predicted to have dementia	148	146	147	150	152	160	181	179		39	-108
People aged 65-69 predicted to have dementia	278	282	283	267	259	255	280	318		99	-184
People aged 70-74 predicted to have dementia	386	393	409	448	468	484	440	486		255	-154
People aged 75-79 predicted to have dementia	647	648	643	649	660	692	860	785		484	-159
People aged 80-84 predicted to have dementia	886	910	919	934	958	996	1,085	1,363		640	-279
People aged 85-89 predicted to have dementia	857	897	930	960	984	1,030	1,173	1,313		702	-228
People aged 90 and over predicted to have dementia	806	837	870	902	943	1,034	1,307	1,643		590	-280
Total population aged 60 and over predicted to have dementia	4,008	4,113	4,200	4,308	4,424	4,651	5,326	6,088		2,809	-1,391

Forecasts by severity

National evidence from Dementia UK 2014 suggests that 55.4% of people aged 65+ with dementia will have a mild form of the disease, 32.1% will have a moderate form and 12.5% will have severe dementia.

	2014	2015	2016	2017	2018	2020	2025	2030
People aged 65+ predicted to have mild dementia	2,220	2,279	2,327	2,387	2,451	2,577	2,951	3,373
People aged 65+ predicted to have moderate dementia	1,287	1,320	1,348	1,383	1,420	1,493	1,710	1,954
People aged 65+ predicted to have severe dementia	501	514	525	539	553	581	666	761

The proportions of subtype of dementia are:

- ❑ Alzheimer's disease   62%
- ❑ Vascular dementia   17%
- ❑ Mixed dementia   10%
- ❑ Dementia with Lewy bodies   4%

- ❑ Frontotemporal dementia   2%
- ❑ Parkinson's dementia   2%
- ❑ Other   3%

GP diagnosis of dementia by deprivation

Directly age standardised prevalence rate for dementia; Stockport resident registered by 2015 indices of multiple deprivation, all age
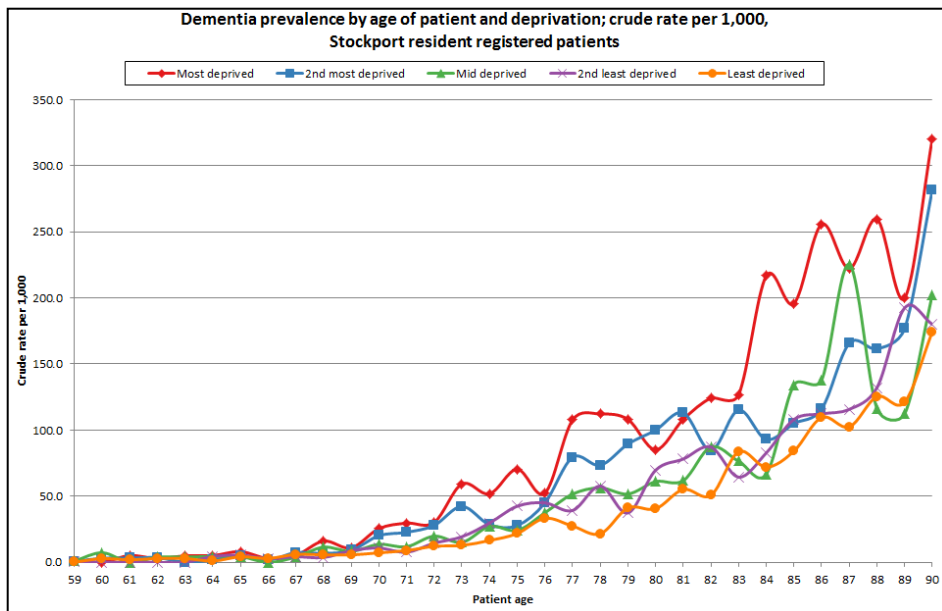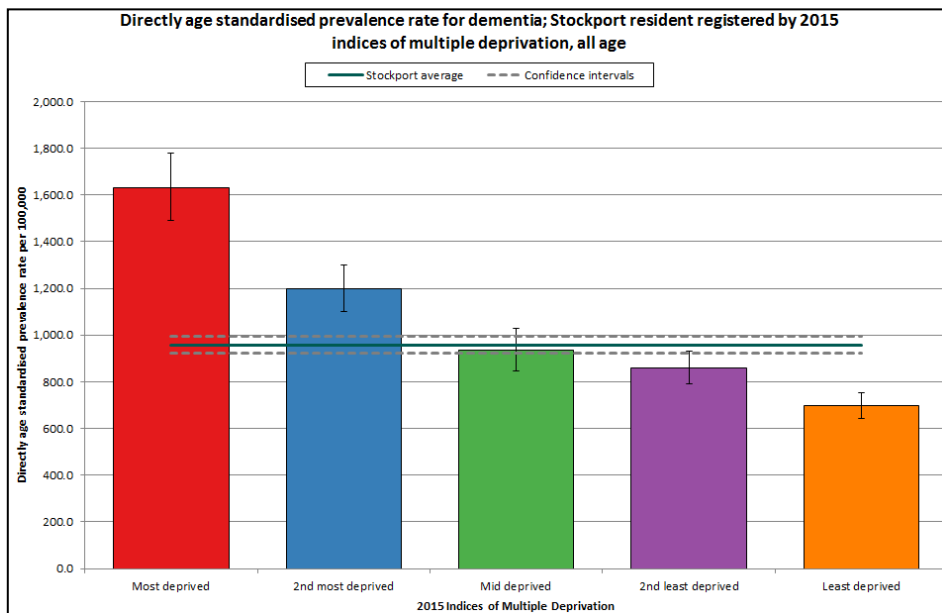
Stockport patients with a dementia diagnosis show a very clear **deprivation profile** when looking at rates

Rates in the 40% most deprived quintiles are significantly higher than the Stockport average.

Rates in the 20% most deprived area are more than double those in the least 205 deprived areas.

Due to the different age profiles and population sizes there are however more people living with dementia in the least deprived areas.

	Most Deprived	2nd Most Deprived	Mid Deprived	2nd Least Deprived	Least Deprived
Number	490	485	495	510	780

Dementia prevalence by age of patient and deprivation; crude rate per 1,000, Stockport resident registered patients

Dementia prevalence by age by deprivation shows that the **onset of dementia appears to start in the late 60s early 70s for people living in the most deprived quintile**. For those living in the least deprived quintile the onset appears to be delayed by up to 10 years to the late 70s.
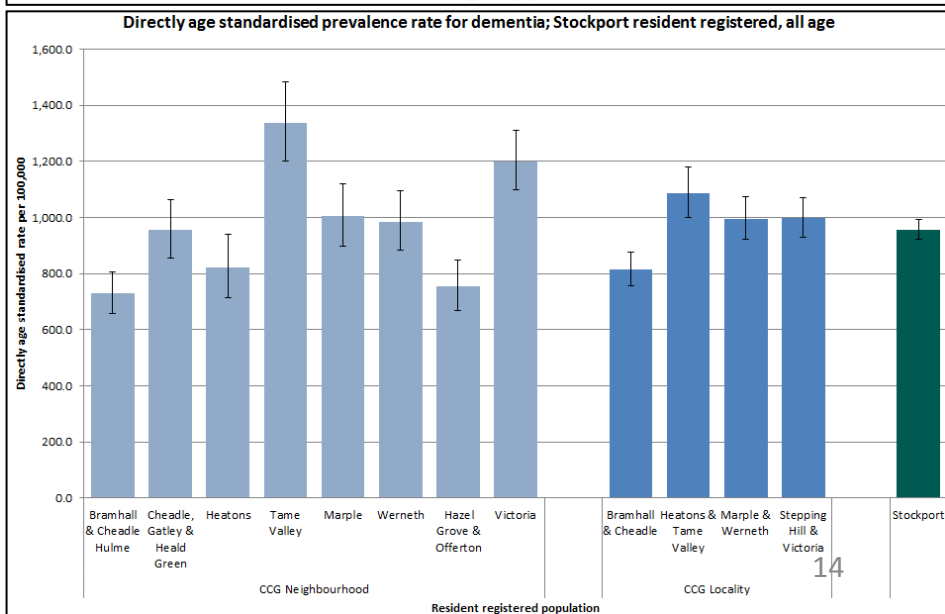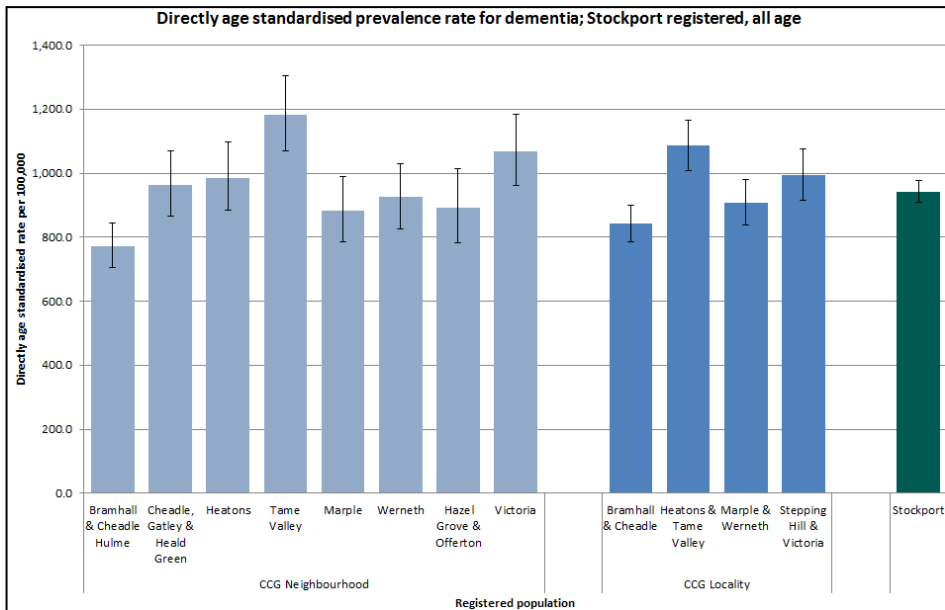
GP diagnosis of dementia by locality

Analysis by locality (on a registered and resident basis) shows that rates are highest in Tame Valley and Victoria, although the largest numbers are in Bramhall & Cheadle Hulme (registered basis).

Number of Cases of GP Diagnosed Dementia				
Locality of Registration	45-64	65-79	80+	Total
Bramhall & Cheadle Hulme	18	131	351	500
Cheadle, Gatley & Heald Green	9	88	261	358
Bramhall & Cheadle	27	219	612	858
Heatons	8	99	238	345
Tame Valley	10	128	270	408
Heatons & Tame Valley	18	227	508	753
Marple	10	109	182	301
Werneth	10	98	220	328
Marple & Werneth	20	207	402	629
Hazel Grove & Offerton	6	70	165	241
Victoria	9	115	245	369
Stepping Hill & Victoria	15	185	410	610
Stockport	80	838	1,932	2,850

Number of Cases of GP Diagnosed Dementia				
Locality of Resident address	45-64	65-79	80+	Total
Bramhall & Cheadle Hulme	12	102	283	397
Cheadle, Gatley & Heald Green	7	88	245	340
Bramhall & Cheadle	19	190	528	737
Heatons	4	57	152	213
Tame Valley	10	117	234	361
Heatons & Tame Valley	14	174	386	574
Marple	9	113	203	325
Werneth	10	103	222	335
Marple & Werneth	19	216	425	660
Hazel Grove & Offerton	7	74	195	276
Victoria	18	163	334	515
Stepping Hill & Victoria	25	237	529	791
Stockport	77	817	1,868	2,762

Directly age standardised prevalence rate for dementia; Stockport registered, all age

Directly age standardised prevalence rate for dementia; Stockport resident registered, all age

Quality & Outcomes Framework (QOF)

The % of patients diagnosed with dementia whose care plan has been reviewed in a face-to-face review in the preceding 12 months - QoF DEM004, 2015-16

The % of patients with a new diagnosis of dementia recorded in the preceding year with FBC, calcium, glucose, renal & liver function, thyroid function tests, serum vitamin B12 & folate levels recorded between 12 months before or 6 months after entering re

The Quality and Outcomes Framework (QOF) is a component of the GP contract where achievement is measured against certain indicators. Within the clinical domain there are three dementia indicators: clinical prevalence; the percentage of patients diagnosed with dementia whose care plan has been reviewed in a face-to-face review in the preceding 12 months (DEM004); and the percentage of patients with a new diagnosis of dementia recorded in the preceding 1 April to 31 March with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12 and folate levels recorded between 12 months before or 6 months after entering on to the register (DEM005).

For DEM004 the Stockport practices average **of 85.2% of patients with a care plan review** is higher than the England average of 83.8%. 24 of the 45 Stockport practices have a higher rate than the Stockport average and 28 are higher than the England average. 9 practices reported 100% of relevant patients had received the face-to-face review in the preceding 12 months; the lowest two practices achieved 71%. There is no immediately obvious deprivation profile to the figures.

For DEM005 the Stockport practice average of 86.2% of patients is higher than the England average of 84.6%. 25 of the 45 Stockport practices have a higher rate than the Stockport average and 28 are higher than the England average. 17 practices reported 100% of relevant patients had all measures required recorded in the appropriate time frame. The lowest 3 practices were around 65%. Again deprivation does not appear to be significant.

7 practices achieved 100% on both DEM004 and DEM005.

GP prescribing data

Stockport GP prescribing activity for dementia related items - 2012-13 to 2015-16
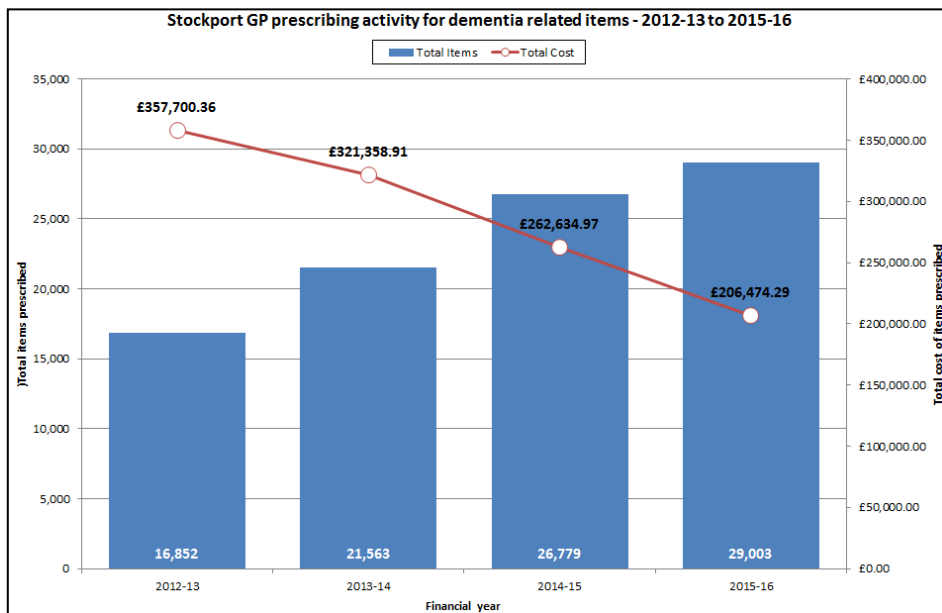
Analysis of prescribing data shows the volumes of prescribing have increased by 72% over the last four years, a level which is above the increase in the rate of diagnosis (34% over the same period). On average there are 10.6 items prescribed per diagnosis patient.

Although the number of items prescribed has increased the total cost has decreased, as the overall price of the drugs prescribed fell. The average cost per item in 2012-13 was £21 whereas in 2015-16 it was £7.

2015-16 Stockport GP prescribing activity for dementia related items
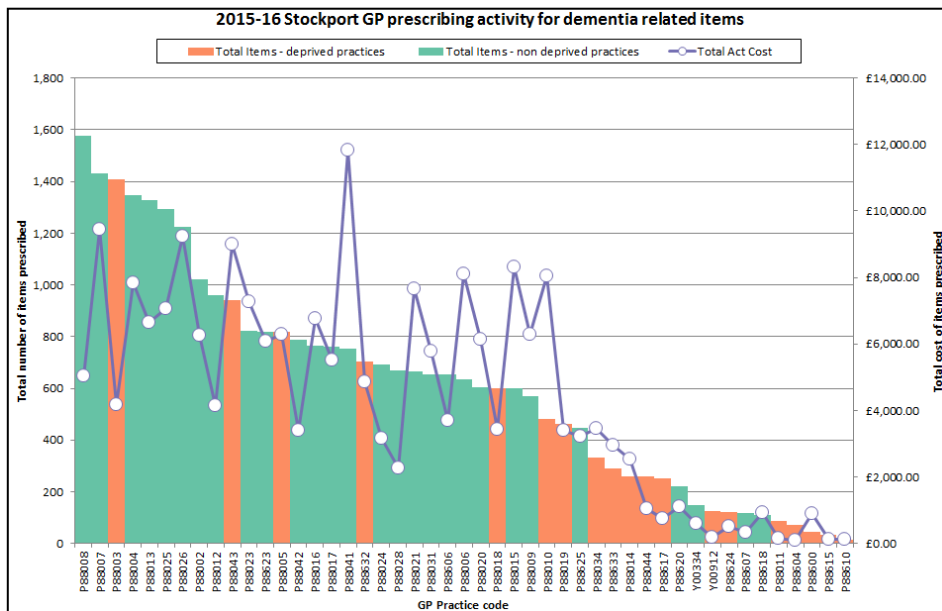
Looking at the individual practice activity in 2015-16 it is clear that the practices classed as being non-deprived are prescribing more items than those in the deprived areas. Although prevalence is higher in the more deprived areas the actual raw numbers are greater in the less deprived so it is not altogether unexplained.

However there appears to be a large discrepancy with the drugs prescribed as certain practices are prescribing much more expensive drugs than others. Some practices are prescribing items around £1.50 per item whilst others are dispensing items at £20 per item. As previously mentioned the average cost per item in 2015-16 was £7

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Care home provision

CCG Area	Number of homes	Number of available beds
Bramhall & Cheadle Hulme	2	47
Cheadle, Gatley & Heald Green	2	51
BRAMHALL AND CHEADLE	**4**	**98**
Heatons	2	50
Tame Valley	5	255
HEATONS AND TAME VALLEY	**7**	**305**
Marple	5	234
Werneth	5	244
MARPLE AND WERNETH	**10**	**478**
Hazel Grove and Offerton	4	114
Victoria	5	224
STEPPING HILL AND VICTORIA	**9**	**338**
Out of area agreements	2	81
Total	**32**	**1,300**

In depth data on care home provision is not readily available. However data from mid 2015 shows that there were 30 care and nursing homes in Stockport plus two outside the borough boundary that supported people with dementia. In total these homes provided a total of 1,300 beds (although some of these will be for residents with other needs).

Marple and Werneth had the greatest provision in terms of both number of homes and beds available. Bramhall and Cheadle was the area with least provision despite the area being having an older population than the Stockport average. It is important to note that these homes provided a level of care for dementia sufferers but that does not necessarily mean that all beds were available for patients with dementia. Therefore provision may actually be lower than the estimate.

Adult Social Care Services

Trends in Adult Social Care Clients - Stockport

Legend: — Physical disability, frailty and / or temporary illness — Learning Disability — Dementia — Sensory impairment

Source: NHS Digital, RAP
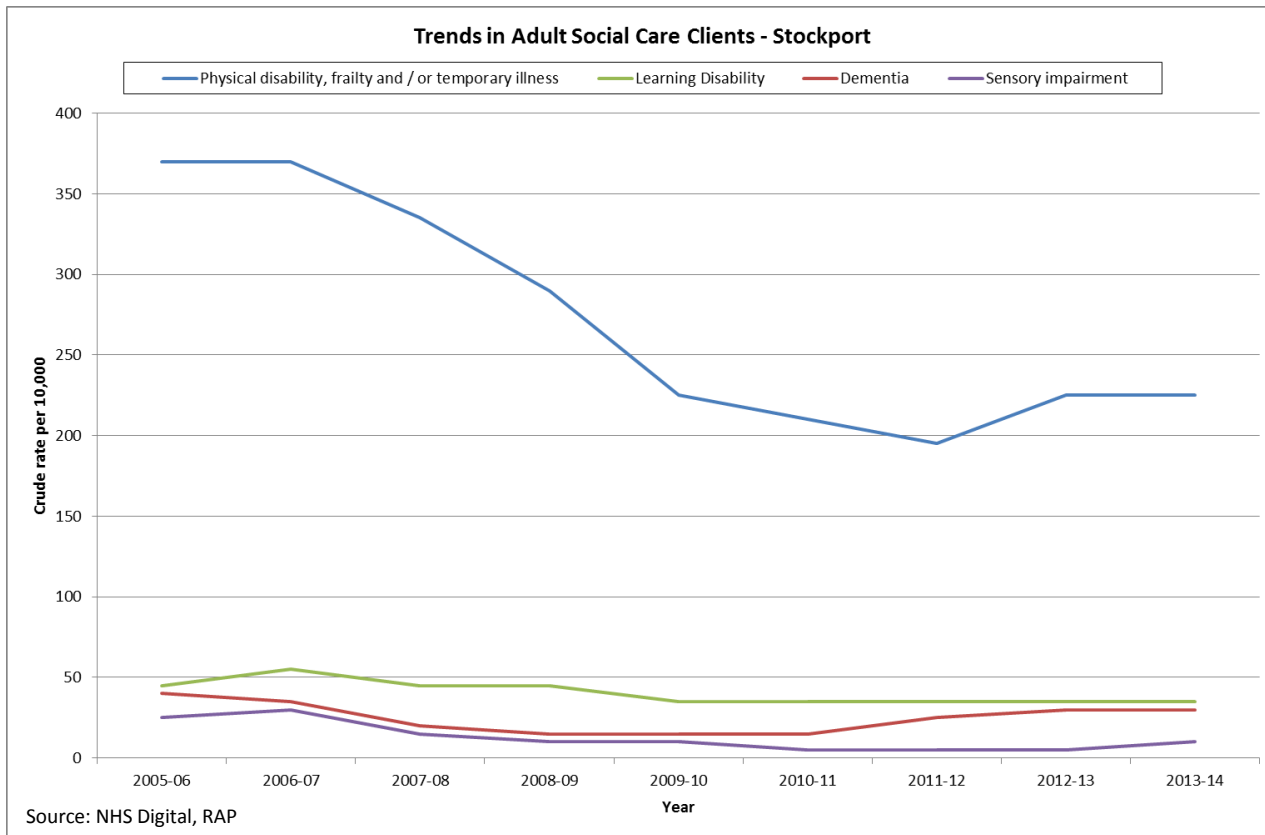
Currently 8.4% of adult social care clients have needs due to dementia - around 700 people – approximately 20% of those diagnosed.

The client need profile for adult social care has changed over the last decade with a rise in the rates and numbers of clients with needs relating to dementia while other categories have fallen.

The biggest single need category is still physical disability or frailty accounting for almost 60% of all clients.

Client need profile 2013-14	Number of clients	Proportion
Physical disability, frailty and/or temporary illness	5,015	59.3%
Learning disability	820	9.7%
Dementia	710	8.4%
Sensory impairment	175	2.1%
Other (majority are mental health excluding dementia)	1,735	20.5%
Total	**8,455**	

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A more in-depth audit showed 840 Adult Social Care clients who are likely to have dementia. Between them these clients cost the service £777k per week or £40.4m per year.

Adult Social Care clients with dementia; age profile

Age group	Number of clients
Unknown	3
95 +	67
90 to 94	159
85 to 89	226
80 to 84	177
75 to 79	110
70 to 74	62
65 to 69	18
60 to 64	9
55 to 59	8
50 to 54	1
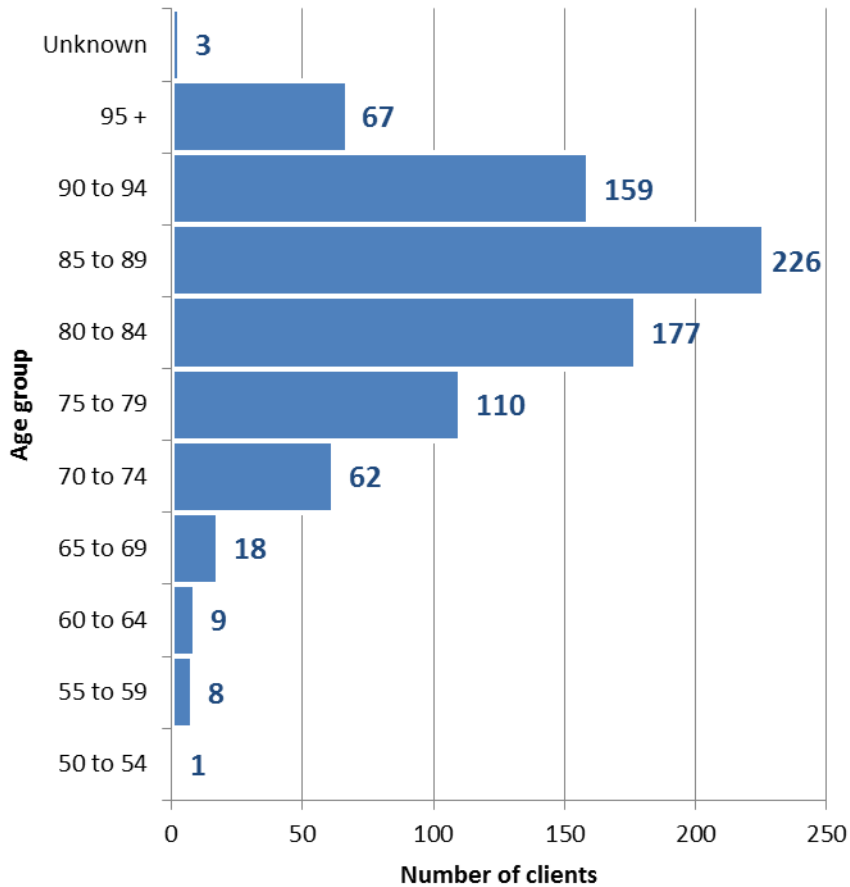
Estimated dementia service users		Services	Users
Low level services (community based)	E&A	59	59
	Telecare	62	61
	Transport	192	97
Short term & stability services	Intermediate care (home)	2	2
	Interm. care (residential)	9	9
	Re-ablement home care	31	26
Community based services	Community support	6	6
	Day care	70	59
	Direct Payment	103	73
	Home care	434	168
	Individual budget	0	0
	Meals	75	65
	Professional support	61	42
Other accommod based services	Adult placement	0	0
	Extra care	30	10
	Tenancy	2	2
Residential & nursing	Nursing	339	217
	Residential	1,056	587
		2,531	**1,483**

Stockport Memory Service

REFERRALS TO STOCKPORT MEMORY CLINIC

Year	Number of referrals
2011	234
2012	373
2013	480
2014	548
2015	557
2016 (up to Oct)	656

CASELOAD AT STOCKPORT MEMORY CLINIC

Year	Total caseload
2011	326
2012	389
2013	442
2014	396
2015	413
2016 (up to Oct)	461
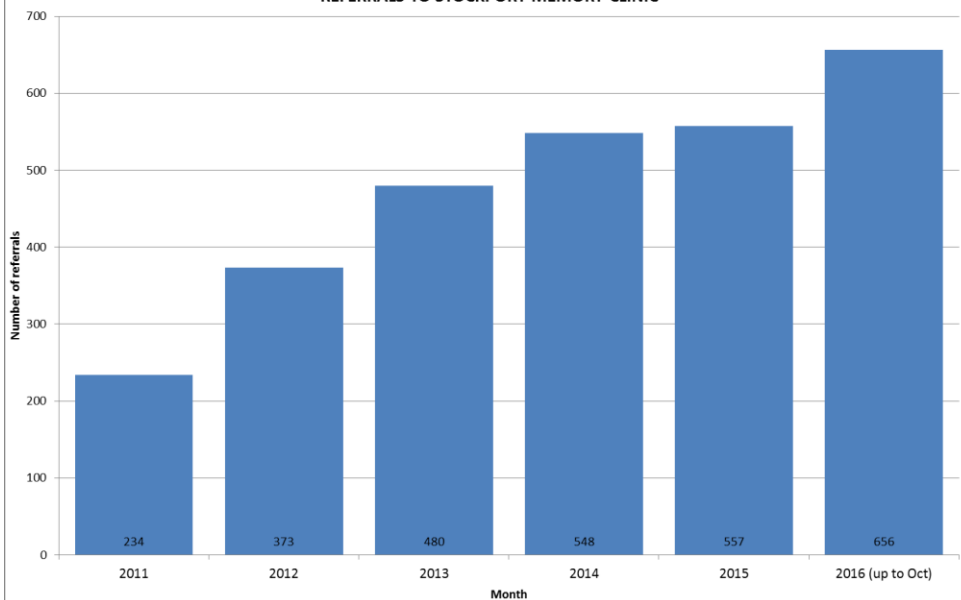
On average the Stockport Memory Service now receives 60 referrals a month, these numbers have risen since 2011 when the service started, stabilised for two years from early 2014, but have risen sharply throughout 2016.

The caseload for the service is a now an average of 425 active cases at any one time.

In total since January 2011, 2,848 referrals have been received by the service – which is a high proportion of the number of people with diagnosed dementia in Stockport (although some people may have accessed the service more than once).

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Carers services & dementia friends

Attendance at Carers Information Groups		
2010-11	**2012-13**	**2014-15**
104	129	189

People known to Alzheimer's Society			
	2015	**2016**	**Cases closed in last 12 months**
People affected by dementia	575	357	360
Carers	674	504	604

The number of carers known to services within Stockport would appear extremely low given the known and estimated prevalence of dementia sufferers.

Dementia Friends

Greater Manchester Dementia Friends figures (up to and including 5-Apr-16)

Area	Dementia Friends (face to face)		Digital Dementia Friends		Total (Face to face + digital)		Dementia Friends Champions	
Bolton	2,307	8.2 (per 1,000)	950	3.4 (per 1,000)	3,257	11.6 (per 1,000)	57	0.2 (per 1,000)
Bury	1,584	8.4	669	3.6	2,253	12.0	53	0.3
Manchester	8,451	15.9	1,442	2.7	9,893	18.7	110	0.2
Oldham	3,452	15.0	860	3.7	4,312	18.7	49	0.2
Rochdale	1,809	8.4	840	3.9	2,649	12.4	49	0.2
Salford	3,733	15.2	717	2.9	4,450	18.1	72	0.3
Stockport	2,506	8.7	917	3.2	3,423	11.9	46	0.2
Tameside	641	2.9	734	3.3	1,375	6.2	37	0.2
Trafford	1,583	6.8	663	2.8	2,246	9.6	45	0.2
Wigan	3,765	11.7	1,289	4.0	5,054	15.7	97	0.3
Greater Manchester	**28,031**	10.2	**8,493**	3.1	**36,524**	13.3	**575**	0.2

Stockport has the 7th highest total number of dementia friends per 1,000 population in Greater Manchester. The rate of 11.9 per 1,000 population is lower than the Greater Manchester average of 13.3. Stockport has been shown to have relatively high estimated prevalence in Greater Manchester.

Emergency hospital admissions

Emergency admissions to hospital for dementia have more than doubled in Stockport residents in the last eight years. There are now over 2,000 emergency admissions a year. Unspecified dementia is the most common recorded classification but dementia in Alzheimer disease is the fastest growing with an increase of 315%.

Dementia subtype	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Unspecified dementia	596	561	749	853	796	777	956	1,055	1,027
Vascular dementia	325	355	413	527	570	713	729	850	811
Dementia in Alzheimer disease	96	101	144	220	205	238	283	318	398
Dementia in other diseases	25	42	55	57	52	25	19	20	22
Emergency dementia admissions	**1,042**	**1,059**	**1,361**	**1,657**	**1,623**	**1,753**	**1,987**	**2,243**	**2,258**

Emergency hospital admissions for Dementia; Stockport resident aged 40+
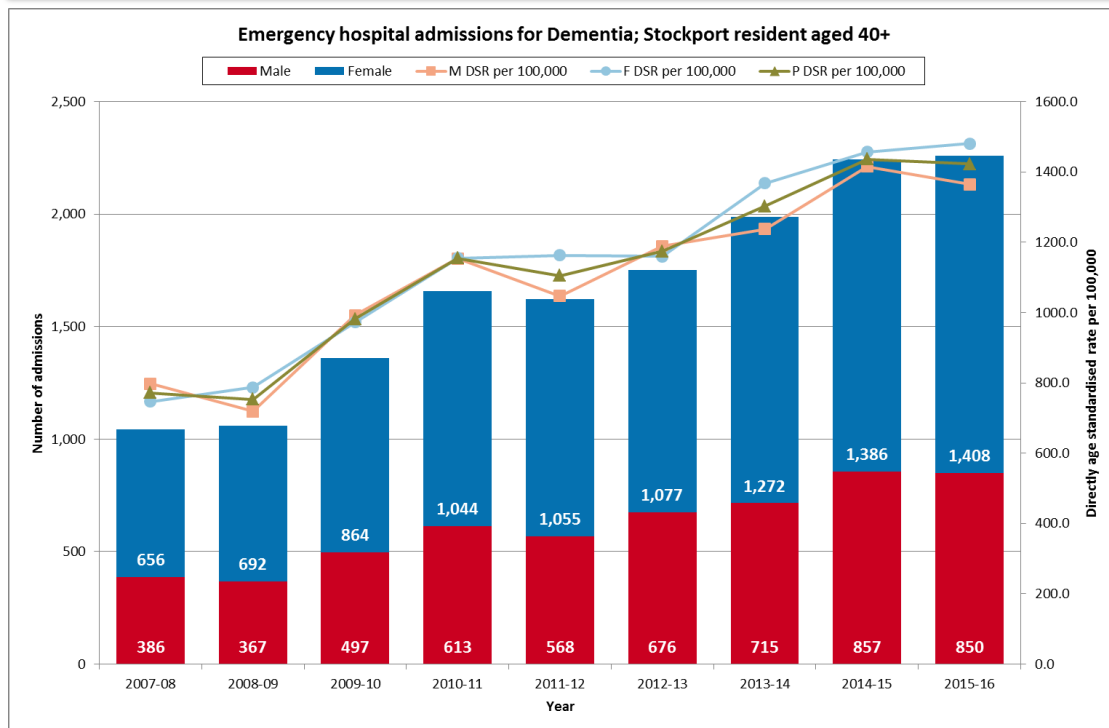
Females are over one and a half times as likely to be admitted to hospital in an emergency than males when solely looking at the number of admissions.

However when age standardising the rate for the forty plus population there is no significant difference between the two sexes. This is due to the fact that dementia admissions increase with age and, in Stockport, the ratio of females to males gets wider with every increasing age band.

Although the number of admissions has risen slightly quicker in males it is the female rate that has almost doubled compared to a 71% rise in males. Again this will be down to the structure of the ageing population in Stockport.

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Emergency hospital admissions

Emergency hospital admissions for Dementia; Stockport resident aged 40+ by 2015 Indices of Multiple Deprivation, 2015-16

Emergency hospital admissions for Dementia; Stockport resident aged 40+ directly age standardised rate per 100,000 by 2015 Indices of Multiple Deprivation, 2015-16
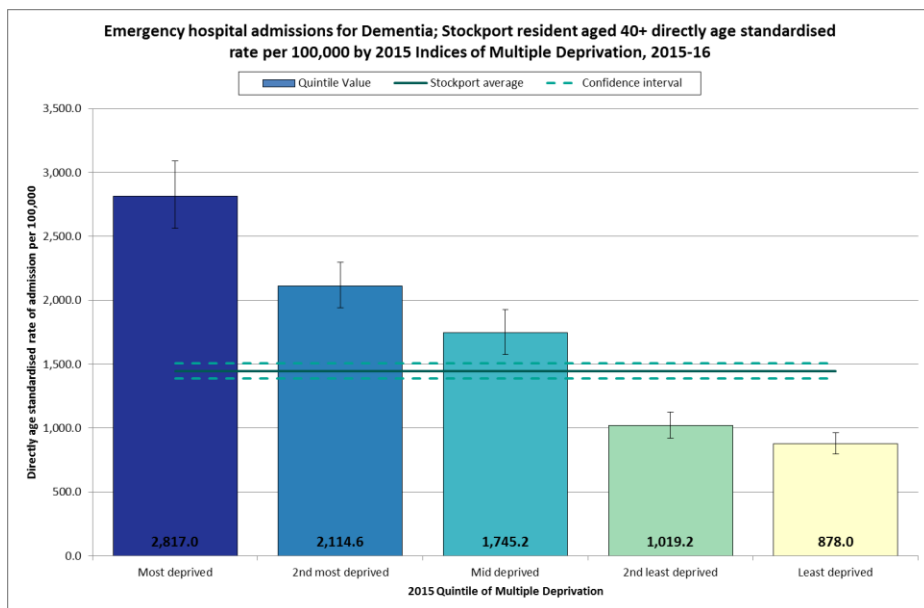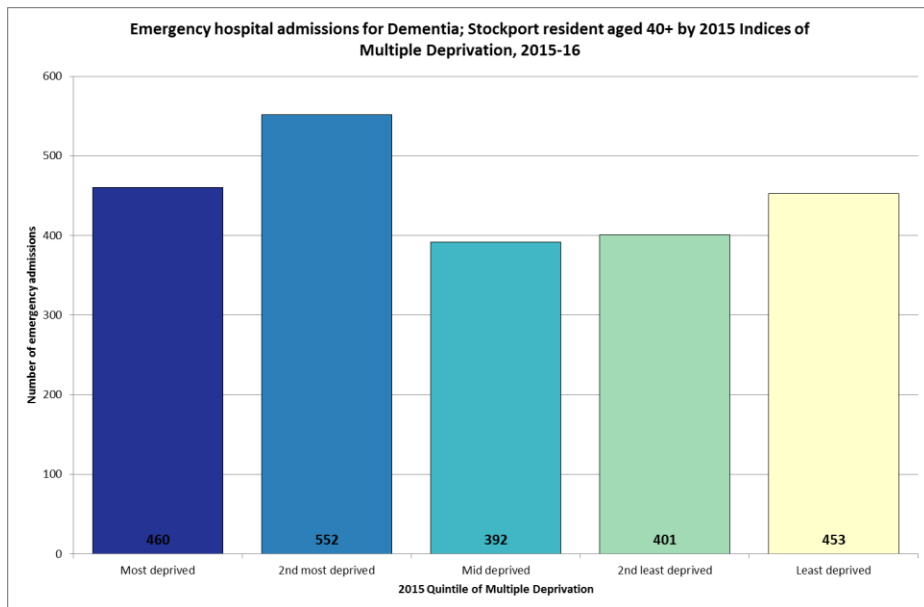
In the year 2015-16 there were a total of 2,258 emergency admissions to hospital with a dementia diagnosis code. Almost a quarter of admissions came from areas classified in the second most deprived quintile of deprivation. All other areas of Stockport have a significantly lower proportion of the emergency admissions than the second most deprived area. The mid deprived areas of Stockport had the lowest proportion of emergency admissions, accounting for 17%. This is a significantly lower proportion of emergency admissions than all other areas of Stockport bar the second least deprived areas.

When looking at the numbers of emergency admissions there is no deprivation profile and admissions are relatively evenly spread across the borough. However when the numbers are age standardised to take into account the varying population structures it is clear that as deprivation increases so does the emergency admission rate. Emergency admissions from the 60% most deprived areas of Stockport are significantly higher than the Stockport average whilst those from the 40% least deprived areas are significantly lower. **The rate in the most deprived areas is almost double the Stockport average (1,445.9) and over three times the rate of the least deprived areas**.

The rate, between 2007-08 and 2015-16, has grown fastest in the second most deprived area where it has almost trebled from 736.7. The rates in the most and mid deprived areas have risen by 80% and 125% respectively. The rates in the 40% least deprived areas have risen by 50% meaning the inequalities are widening.

Emergency hospital admissions

Emergency hospital admissions for Dementia; Stockport resident age on admission, crude rate per 10,0000

Legend: ■ Female ■ Male

Chart: horizontal bar chart showing crude rate per 10,000 (x-axis, 0.0 to 2,500.0) by Age group (y-axis).

Age group	Female	Male
40 to 55	~5	~5
55 to 59	~10	~15
60 to 64	~15	~25
65 to 69	~30	~55
70 to 74	~100	~130
75 to 79	~270	~260
80 to 84	~650	~640
85 to 89	~1,290	~1,080
90 +	~2,290	~1,920
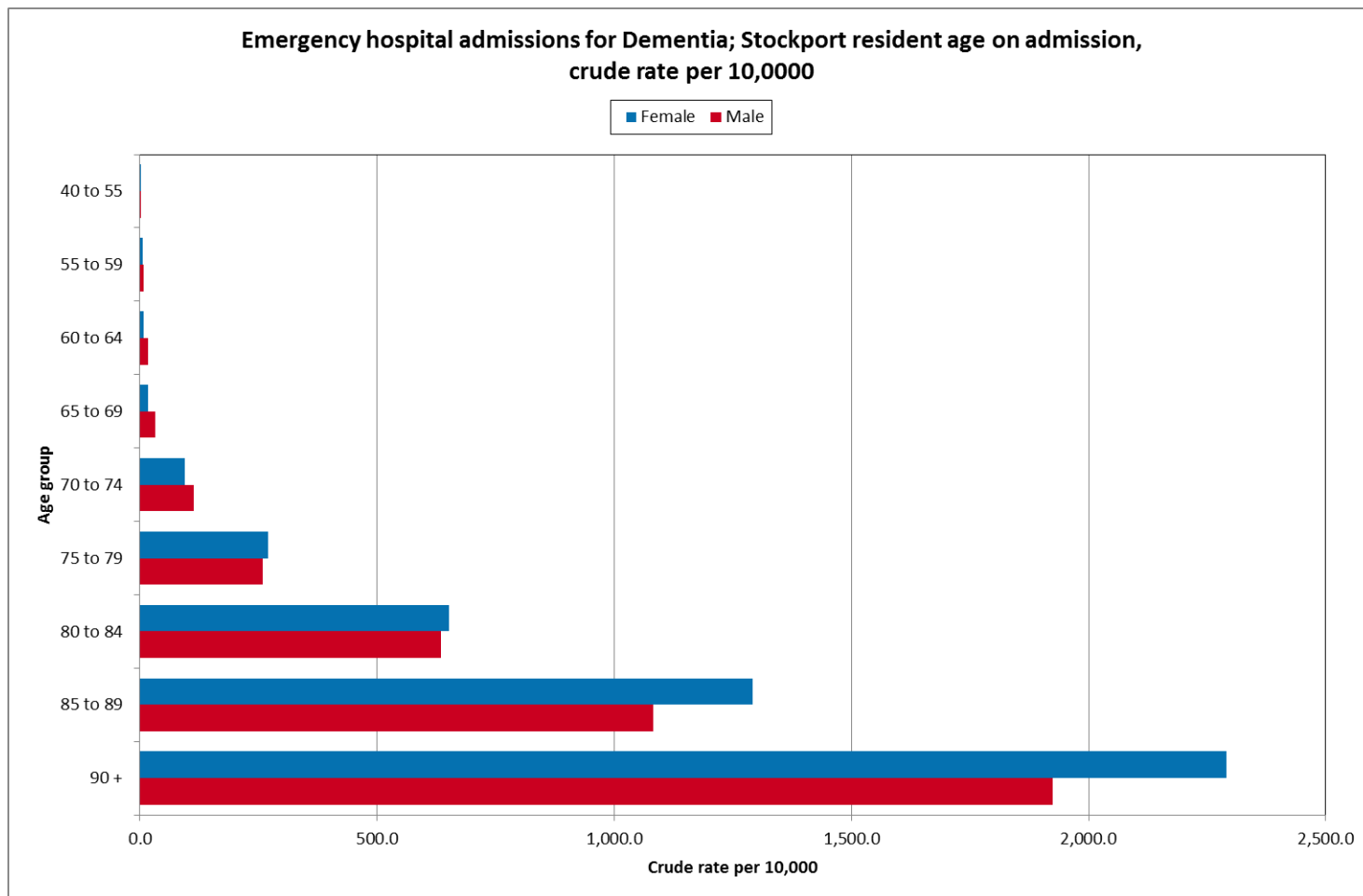
Males are more likely to be admitted to hospital in an emergency for dementia as a primary diagnosis than females up to the age of 74. At this point women are more likely to be admitted. Overall those aged over 90 are the most common age group admitted.

Emergency hospital admissions

Emergency hospital admissions for dementia; Stockport resident, length of Stay

Length of stay	Count
Discharged same day	697
Overnight stay	889
2 to 6 days	2,040
1 to 2 weeks	1,239
2 to 3 weeks	580
3 to 4 weeks	353
4 to 8 weeks	515
8 weeks and over	175
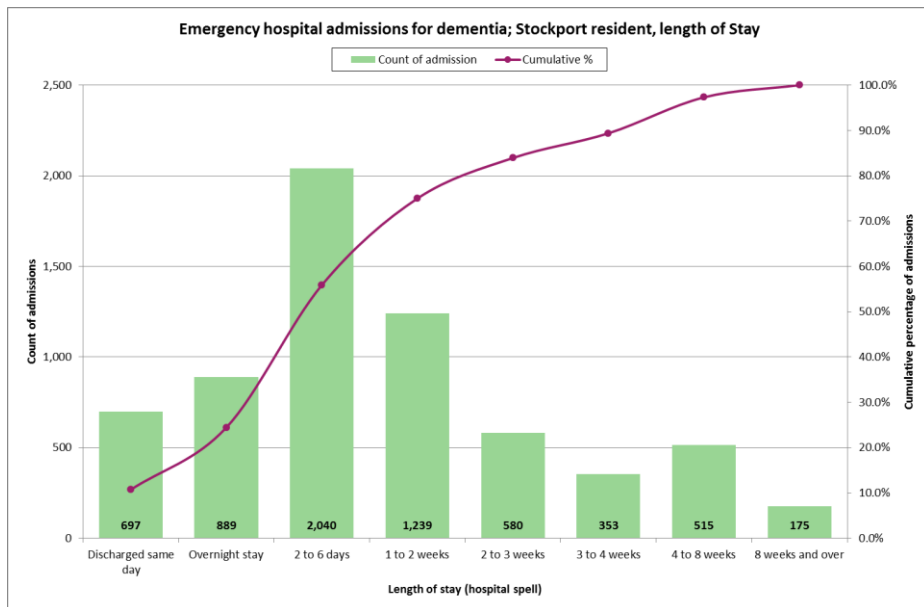
In the year 2015-16 50% of emergency admissions to hospital for dementia were discharged within one week. 90% of patients were discharged within one month of admission. Around 10% were discharged on the same day of admission and a further 15% (25% in total) by the next day. **Patients were most likely to be in hospital between 2 and 6 days.**

Emergency hospital admissions for dementia; Stockport resident, discharge destination

Discharge destination	Percentage
Usual place of residence	69.5%
Nursing / residential care home	17.4%
Patient died	7.8%
NHS hospital provider	3.4%
Temporary place of residence	1.5%
Non-NHS run hospital / hospice	0.4%
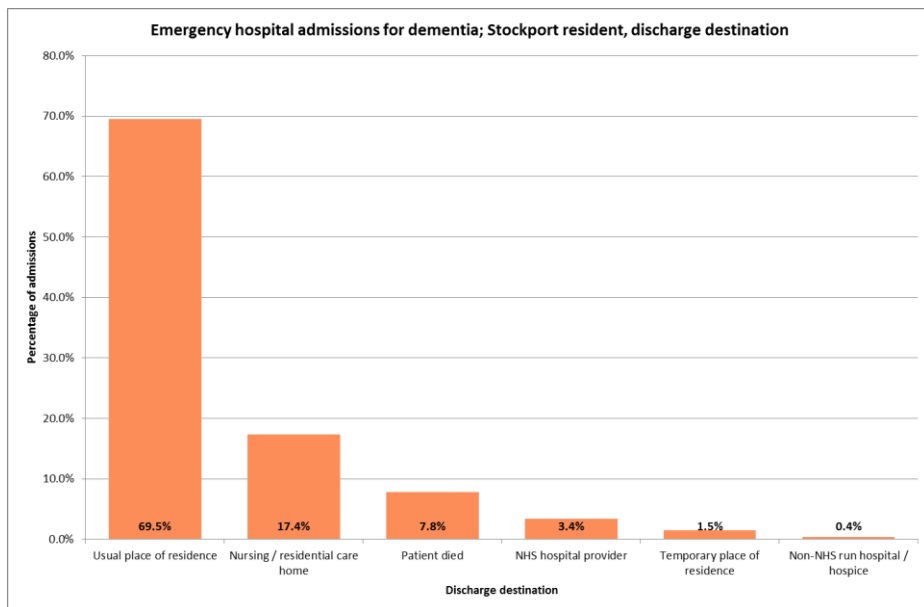
The vast majority of admissions (70%) were discharged (where known) to their usual place of residence when they left hospital in 2015-16. Almost 20% were discharged to a nursing or residential home. Just under 8% died in hospital.

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Emergency hospital admissions

Emergency hospital admissions for Dementia; Greater Manchester residents, directly age standardised rate aged 40+, 2015-16
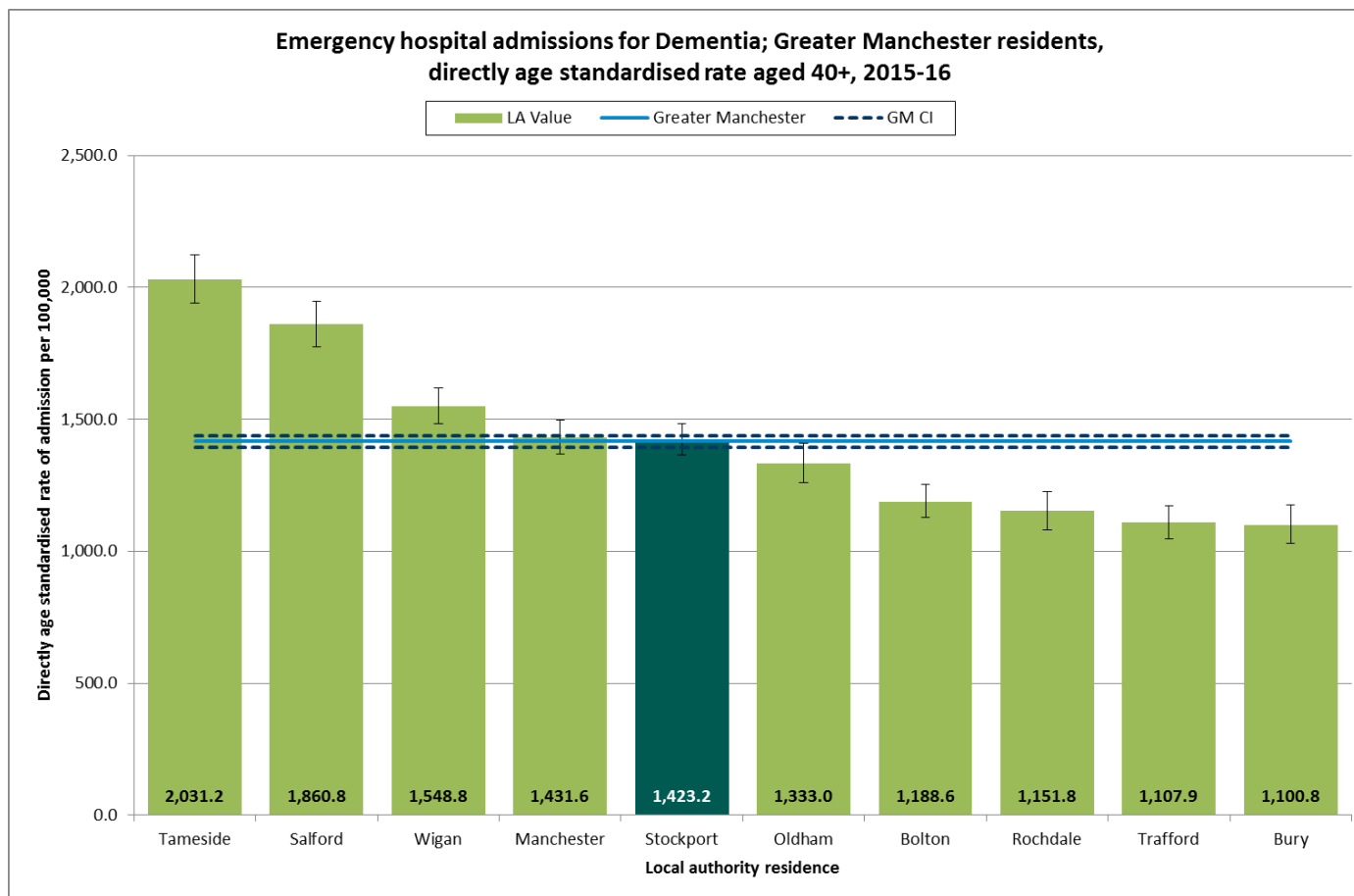
Benchmarking Stockport's directly age standardised emergency admission rate for dementia with other Greater Manchester local authorities shows that Stockport has no significant difference to the Greater Manchester average (1,415.9). Stockport ranks 5th out of the 10 local authorities with 1st having the highest rate. Stockport has significantly lower rates than three local authorities (Tameside, Salford and Wigan) but has significantly higher rates than the four local authorities with the lowest rates including statistical neighbours Bury and Trafford.

Hospital admissions with dementia in any diagnosis code

Hospital admissions with dementia in any diagnostic code; Stockport resident age 40+, 2015 Indices of Multiple Deprivation, 2013-14 to 2015-16
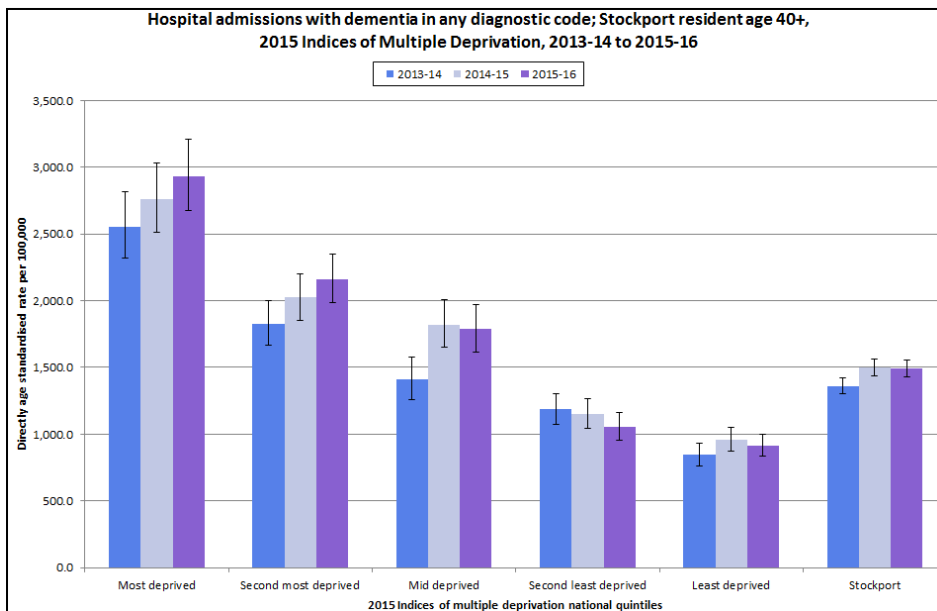
Looking at admissions where dementia is diagnosed in any diagnosis code shows similar trends as previously highlighted. Rates in the most deprived areas are three times that of the least deprived. Rates in the 60% most deprived have also been increasing although not significantly whereas in the 40% least deprived areas they have been relatively stable. This analysis can be a proxy for prevalence but does not take into account multiple hospital visits.

Top 5 primary diagnosis where dementia is mentioned in any code

Primary diagnosis	Number of admissions	Percentage
Other diseases of urinary system	557	9.4%
Influenza and pneumonia	539	9.1%
Injuries to the head	399	6.7%
Organic mental disorders	238	4.0%
Injuries to hip and thigh	237	4.0%

Where dementia is mentioned in any diagnosis code the most common primary diagnosis is for diseases of the urinary system which account for almost 10%. Injuries to the head and also to the hip and thigh perhaps highlight the fact that dementia sufferers are prone to falls that then require hospital admission.

Mortality rates for dementia have increased due to national changes in coding conventions – there are now approximately 350 deaths in Stockport each year and dementia is a major cause of death in older people.

Mortality from dementia in Stockport

Legend: ■ Number of deaths ■ Three year average directly standardised rate per 100,000

Year registered	Number of deaths
2001	75
2002	74
2003	92
2004	85
2005	106
2006	84
2007	95
2008	130
2009	116
2010	134
2011	195
2012	280
2013	279
2014	327
2015	339
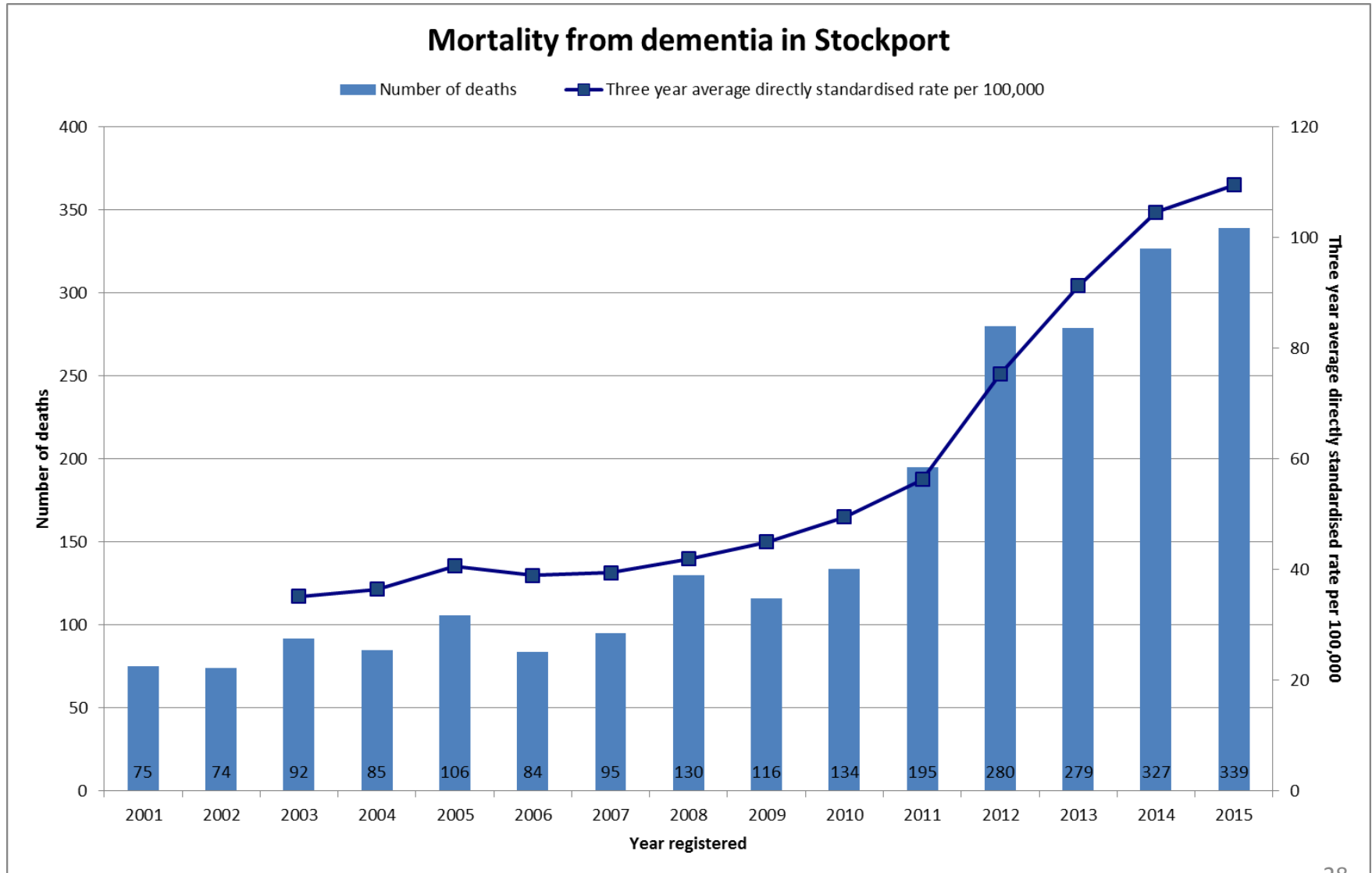
National evidence from Dementia UK 2014 suggests costs for the **expected prevalence are around £135million** and for **diagnosed prevalence are around £99milliin**, costs rise with severity and vary by sector. Approximately 16% of costs are born by the NHS, 39% by social care and **44% by unpaid carers.** By 2030 these costs could increase to £197million.

Costs if expected prevalence used

	2014	2015	2016	2017	2018	2020	2025	2030
Healthcare costs	£21,253,000	£21,809,000	£22,272,000	£22,845,000	£23,456,000	£24,662,000	£28,243,000	£32,280,000
Social care costs *	£50,620,000	£51,945,000	£53,049,000	£54,412,000	£55,868,000	£58,740,000	£67,269,000	£76,884,000
Unpaid care costs	£56,971,000	£58,462,000	£59,705,000	£61,239,000	£62,878,000	£66,110,000	£75,709,000	£86,531,000
Other costs	£547,000	£562,000	£574,000	£588,000	£604,000	£635,000	£727,000	£831,000
TOTAL Costs	**£129,391,000**	**£132,778,000**	**£135,600,000**	**£139,084,000**	**£142,806,000**	**£150,147,000**	**£171,948,000**	**£196,526,000**

 * Includes self-funded residential care - other costs = police, AUK research

Costs if actual prevalence used

	2014	2015	2016	2017	2018	2020	2025	2030
Healthcare costs	£17,346,000	£17,800,000	£18,179,000	£18,646,000	£19,145,000	£20,129,000	£23,052,000	£26,347,000
Social care costs	£43,476,000	£44,614,000	£45,563,000	£46,733,000	£47,984,000	£50,450,000	£57,776,000	£66,034,000
Unpaid care costs	£33,282,000	£34,153,000	£34,879,000	£35,775,000	£36,733,000	£38,621,000	£44,229,000	£50,551,000
Other costs	£365,000	£374,000	£382,000	£392,000	£403,000	£423,000	£485,000	£554,000
TOTAL Costs	**£94,471,000**	**£96,944,000**	**£99,004,000**	**£101,548,000**	**£104,265,000**	**£109,624,000**	**£125,543,000**	**£143,488,000**

Appendix
(dashboards and profiles)

https://fingertips.phe.org.uk/profile-group/mental-health/profile/dementia

Stockport JSNA

joint strategic needs assessment

Benchmark Value

| Lowest | 25th Percentile | 75th Percentile | Highest |

Compared with benchmark ● Lower ● Similar ● Higher ○ Not Compared

Prevalence

Indicator	Period	Stockport		PHE Centres (2013)	England		England		
		Count	Value	Value	Value	Lowest	Range		Highest
Dementia: Recorded prevalence (all ages)	2015/16	2,735	0.89%	0.72*	0.76	0.29%			1.35%
Dementia: Recorded prevalence (aged 65+)	Sep 2016	2,769	4.78%	4.64*	4.31	3.42%			5.50%

Preventing well

Local authority measures

Indicator	Period	Stockport		Region	England		England		
		Count	Value	Value	Value	Lowest	Range		Highest
Smoking Prevalence in adults - current smokers (APS)	2015	-	15.1%	18.6	16.9	9.5%			26.8%
Percentage of physically active and inactive adults - inactive adults	2015	-	28.4%	32.0	28.7	17.5%			43.7%
Excess Weight in Adults	2012	-	65.9%	66.0	63.8	45.9%			74.4%
Admission episodes for alcohol-related conditions (Narrow) - 40-64 yrs	2014/15	956	328.8	351.4	299.6	156.3			603.0
People receiving an NHS Health Check per year	2015/16	5,693	6.4%	9.1*	9.0	3.3%			19.6%
Hypertension: Recorded prevalence (all ages)	2015/16	44,946	14.6%	14.4	13.8	7.7%			17.9%
Stroke: Recorded prevalence (all ages)	2015/16	6,224	2.0%	1.9	1.7	0.7%			2.6%
Diabetes: Recorded prevalence (aged 17+)	2015/16	15,266	6.2%	6.9	6.5	3.8%			9.2%
CHD: Recorded prevalence (all ages)	2015/16	11,751	3.8%	3.8	3.2	1.3%			4.8%
Depression: Recorded prevalence (aged 18+)	2015/16	24,382	10.0%	9.6	8.3	4.5%			13.5%

Clinical commissioning group measures

Indicator	Period	Stockport		Sub-region	England		England		
		Count	Value	Value	Value	Lowest	Range		Highest
Smoking: Recorded prevalence (aged 15+)	2015/16	44,142	17.4%	20.5	18.1	11.7%			26.8%
Obesity: Recorded prevalence (aged 16+)	2014/15	21,893	8.8%	9.8*	9.0	4.0%			14.1%
Obesity: Recorded prevalence (aged 18+)	2015/16	20,996	8.6%	-	9.5	3.9%			14.8%
Hypertension: Recorded prevalence (all ages)	2015/16	44,946	14.6%	13.4	13.8	7.7%			18.4%
Stroke: Recorded prevalence (all ages)	2015/16	6,224	2.0%	1.7	1.7	0.7%			2.7%
Diabetes: Recorded prevalence (aged 17+)	2015/16	15,266	6.2%	7.0	6.5	3.6%			10.3%
CHD: Recorded prevalence (all ages)	2015/16	11,751	3.8%	3.4	3.2	1.3%			5.1%
Depression: Recorded prevalence (aged 18+)	2015/16	24,382	10.0%	9.4	8.3	4.5%			14.1%

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Stockport JSNA
joint strategic needs assessment

Benchmark Value

| Lowest | 25th Percentile | 75th Percentile | Highest |

Compared with benchmark   ● Lower ● Similar ● Higher   ○ Not Compared

Diagnosing well

Indicator	Period	Stockport		Sub-region	England	England			
		Count	Value	Value	Value	Lowest	Range			Highest
DEM005: Blood tests recorded (den.incl.exc.)	2015/16	423	57.5%	58.5	56.5	42.3%			69.6%

Living well

Local authority measures

Indicator	Period	Stockport		PHE Centres (2013)	England	England		
		Count	Value	Value	Value	Lowest	Range	Highest
Social Isolation: % of adult carers who have as much social contact as they would like	2014/15	-	46.7%	-	38.5	18.2%		52.6%
Carer-reported quality of life score for people caring for someone with dementia	2014/15	-	8.1	-	7.7	6.2		9.1

Clinical commissioning group measures

Compared with benchmark   ● Lower ● Similar ● Higher   ○ Not Compared   * a note is attached to the value, hover over to see more details

Benchmark Value

| Lowest | 25th Percentile | 75th Percentile | Highest |

📷 Export table as image

Indicator	Period	Stockport		Sub-region	England	England		
		Count	Value	Value	Value	Lowest	Range	Highest
DEM002: Dementia care has been reviewed last 12 months (den.incl.exc.)	2015/16	2,202	80.5%	80.3	78.1	43.9%		86.1%

PHE Dementia profile

Stockport JSNA
joint strategic needs assessment

Benchmark Value

| Lowest | 25th Percentile | 75th Percentile | Highest |

Compared with benchmark: ● Lower ● Similar ● Higher ○ Not Compared

Supporting well

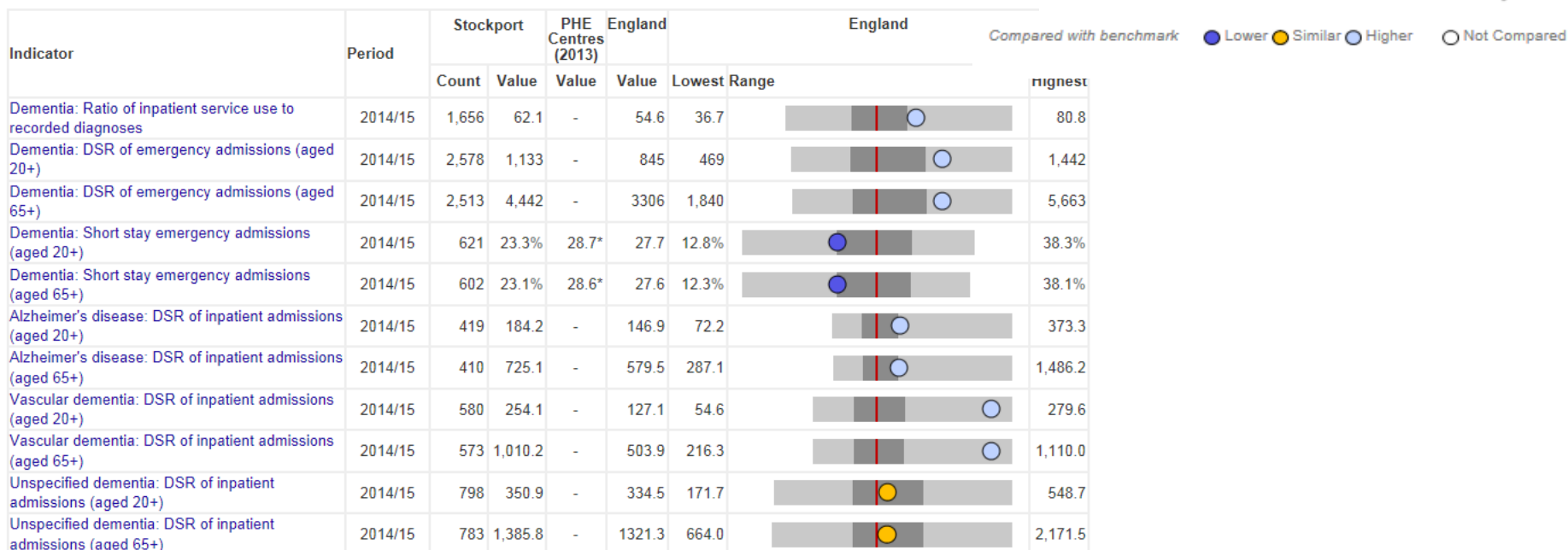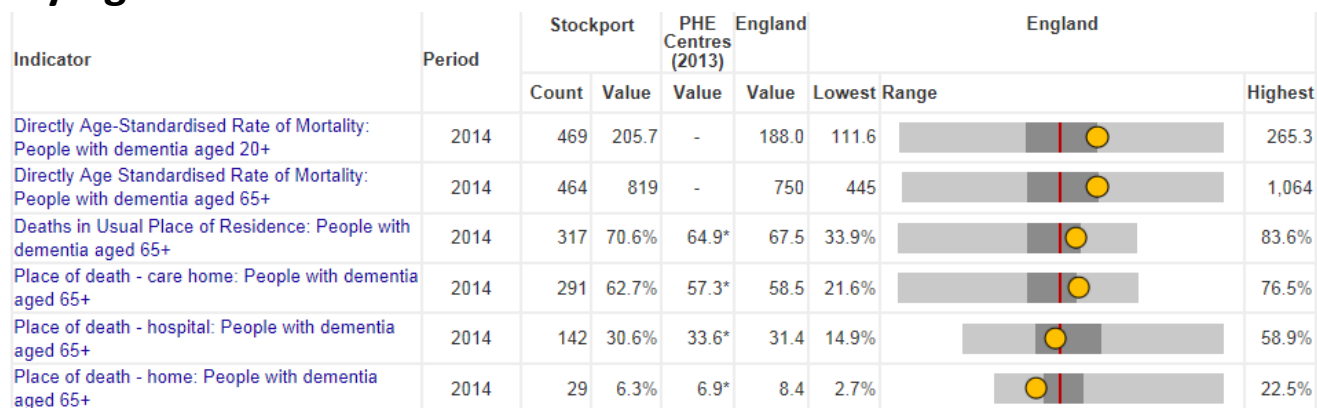| Indicator	Period	Stockport		PHE Centres (2013)	England		England		
		Count	Value	Value	Value	Lowest	Range		Highest
Dementia: Ratio of inpatient service use to recorded diagnoses	2014/15	1,656	62.1	-	54.6	36.7			80.8
Dementia: DSR of emergency admissions (aged 20+)	2014/15	2,578	1,133	-	845	469			1,442
Dementia: DSR of emergency admissions (aged 65+)	2014/15	2,513	4,442	-	3306	1,840			5,663
Dementia: Short stay emergency admissions (aged 20+)	2014/15	621	23.3%	28.7*	27.7	12.8%			38.3%
Dementia: Short stay emergency admissions (aged 65+)	2014/15	602	23.1%	28.6*	27.6	12.3%			38.1%
Alzheimer's disease: DSR of inpatient admissions (aged 20+)	2014/15	419	184.2	-	146.9	72.2			373.3
Alzheimer's disease: DSR of inpatient admissions (aged 65+)	2014/15	410	725.1	-	579.5	287.1			1,486.2
Vascular dementia: DSR of inpatient admissions (aged 20+)	2014/15	580	254.1	-	127.1	54.6			279.6
Vascular dementia: DSR of inpatient admissions (aged 65+)	2014/15	573	1,010.2	-	503.9	216.3			1,110.0
Unspecified dementia: DSR of inpatient admissions (aged 20+)	2014/15	798	350.9	-	334.5	171.7			548.7
Unspecified dementia: DSR of inpatient admissions (aged 65+)	2014/15	783	1,385.8	-	1321.3	664.0			2,171.5

Dying well

Indicator	Period	Stockport		PHE Centres (2013)	England		England		
		Count	Value	Value	Value	Lowest	Range		Highest
Directly Age-Standardised Rate of Mortality: People with dementia aged 20+	2014	469	205.7	-	188.0	111.6			265.3
Directly Age Standardised Rate of Mortality: People with dementia aged 65+	2014	464	819	-	750	445			1,064
Deaths in Usual Place of Residence: People with dementia aged 65+	2014	317	70.6%	64.9*	67.5	33.9%			83.6%
Place of death - care home: People with dementia aged 65+	2014	291	62.7%	57.3*	58.5	21.6%			76.5%
Place of death - hospital: People with dementia aged 65+	2014	142	30.6%	33.6*	31.4	14.9%			58.9%
Place of death - home: People with dementia aged 65+	2014	29	6.3%	6.9*	8.4	2.7%			22.5%

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CCG dementia dashboard

NHS Stockport Clinical Commissioning Group Dementia Dashboard — Summary

Name	Sum of Dementia Registers ALL AGES latest available	DDR EAS1 Sum of Dementia Registers 65 only latest available	DDR EAS1 Estimated Dementia Prevalence 65 only CFAS II	DDR EAS1 Dementia Diagnosis Rate
ENGLAND	439,275.00	425,556.00	639,002.80	66.60%
Greater Manchester	21,602.00	20,791.00	27,371.12	75.96%
NHS Stockport	2,782.00	2,705.00	3,745.63	72.22%
North of England	133,073.00	128,566.00	179,374.90	71.67%

Source: NHS England Dementia Monthly Workbook

	Prescribing		Admissions
	Actual cost per dementia patient	Total Cost of Drugs for Dementia	Emergency admissions with a dementia diagnosis per 100,000 registered pop in last 12 mths
NHS Stockport CCG	£86.43	£206,474	732.5
Cheadle & Bramhall	£115.50	£63,409	568.7
Heatons & Tame Valley	£215.75	£55,447	757.4
Marple & Werneth	£94.25	£48,541	977.2
Stepping Hill & Victoria	£73.40	£38,976	715.4

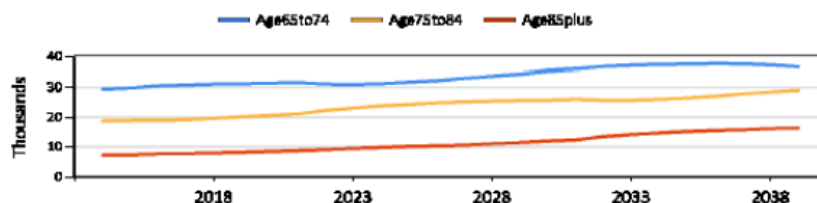ePACT.net (15/16 Q1-15/16 Q4)   SUS SEM(2015 07 - 2016 06)

Population+
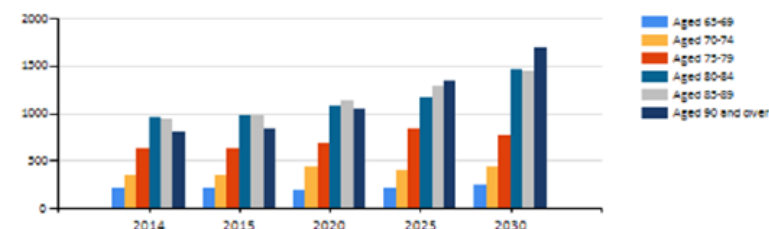
Stockport CCG Mid-2014 population estimate

Females - NHS Stockport
Females - ENGLAND
Males - NHS Stockport
Males - ENGLAND
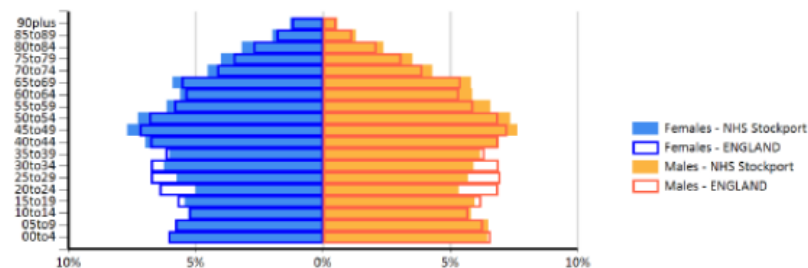
Source: ONS

NHS Stockport CCG 2014-based population projection of people aged 65 years+

Age65to74   Age75to84   Age85plus

Source: ONS

Projected prevalence of dementia

People aged 65 and over predicted to have dementia in Stockport projected to 2030

Aged 65-69
Aged 70-74
Aged 75-79
Aged 80-84
Aged 85-89
Aged 90 and over

Source: POPPI

Stockport Dementia Friends as at 1st August 2016	
Dementia Friend Champions	58
Information Sessions run	203
Face to Face Demtia Friends	3,066
Online Dementia Friends	1,218

Greater Manchester Dementia Register	June 2016
NHS Bolton	2299
NHS Bury	1827
NHS Central Manchester	845
NHS Oldham	1894
NHS Heywood, Middleton & Rochdale	1517
NHS Salford	2102
NHS North Manchester	1066
NHS South Manchester	1034
NHS Stockport	2782
NHS Tameside and Glossop	1968
NHS Trafford	1881

CCG dementia dashboard

NHS Stockport Clinical Commissioning Group Dementia Dashboard

CQUIN - Find, Assess, Investigate and Refer

	2014-15				2015-16				2016-17
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1
STOCKPORT NHS FOUNDATION TRUST									
% of patients aged 75 and over to whom case finding is applied	93.4%	98.1%	91.6%	93.2%	96.0%	97.9%	96.0%	96.4%	98.9%
Numerator	1380	1442	1128	1117	1167	1188	1360	1450	463
Denominator	1477	1470	1231	1198	1215	1213	1417	1504	468
% of patients identified who are appropriately assessed	60.3%	96.9%	100.0%	97.9%	95.2%	97.3%	87.3%	95.0%	97.3%
Numerator	41	63	33	46	59	71	55	95	36
Denominator	68	65	33	47	62	73	63	100	37
% of patients assessed who are referred for further diagnostic advice	96.3%	100.0%	100.0%	94.6%	NaN	NaN	NaN	NaN	95.2%
PENNINE ACUTE HOSPITALS NHS TRUST									
% of patients aged 75 and over to whom case finding is applied	85.2%	93.9%	94.2%	92.1%	93.8%	92.8%	91.1%	91.8%	90.7%
% of patients identified who are appropriately assessed	95.0%	90.4%	91.2%	91.7%	91.0%	91.8%	91.8%	92.6%	83.9%
% of patients assessed who are referred for further diagnostic advice	100.0%	100.0%	100.0%	98.7%	NaN	NaN	NaN	NaN	81.8%
GREATER MANCHESTER AREA TEAM									
% of patients aged 75 and over to whom case finding is applied	91.2%	94.4%	92.9%	92.1%	NaN	NaN	NaN	NaN	NaN
% of patients identified who are appropriately assessed	94.0%	96.9%	96.5%	97.1%	NaN	NaN	NaN	NaN	NaN
% of patients assessed who are referred for further diagnostic advice	99.2%	100.0%	100.0%	99.1%	NaN	NaN	NaN	NaN	NaN
England									
% of patients aged 75 and over to whom case finding is applied	86.2%	88.4%	89.0%	90.1%	90.4%	90.8%	90.0%	89.8%	90.2%
% of patients identified who are appropriately assessed	92.4%	93.2%	93.5%	94.8%	94.8%	95.4%	95.1%	95.0%	94.5%
% of patients assessed who are referred for further diagnostic advice	93.5%	96.3%	96.1%	96.4%	NaN	NaN	NaN	NaN	93.7%

% of patients where case finding is applied

% of patients who are appropriately assessed

% of patients who are assessed who are referred for further diagnostic advice
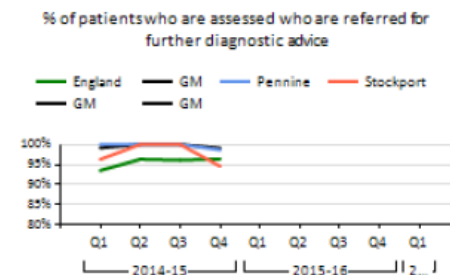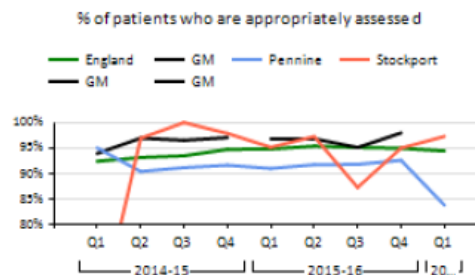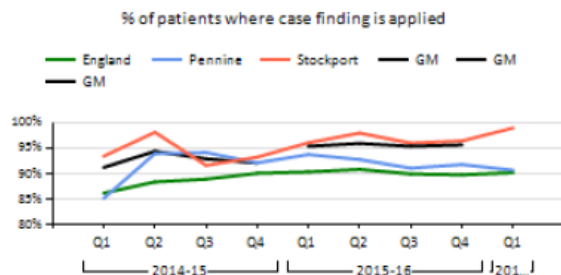
RAG rating of quarterly milestones reflects CQUIN guidance 2014/15 (February 2014). All elements of indicator achieve 90% | 1 or 2 elements of indicator achieve 90% | 0 elements of indicator achieve 90%
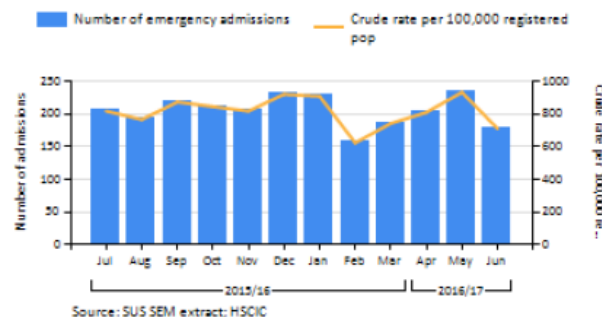
CCG dementia dashboard

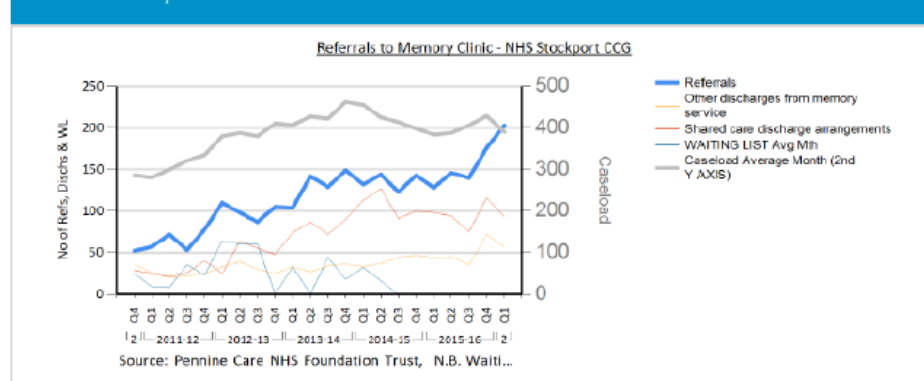## NHS Stockport Clinical Commissioning Group Dementia Dashboard — Unplanned admissions to hospital

NHS Stockport CCG	2013/14	2014/15	Apr	May	Jun	Q1	Jul	Aug	Sep	Q2	Oct	Nov	Dec	Q3	Jan	Feb	Mar	Q4	TOTAL	Apr	May	Jun	Q1	TOTAL
Source: SUS SEM extract. Data available up to 2016 06	TOTAL	TOTAL																						
Number of emergency admissions to patients aged 75yrs+	10826	11029	929	951	981	2861	974	930	927	2831	979	864	992	2835	915	838	949	2702	11229	898	861	864	2623	2623
with a length of stay of >72 hours	6445	6749	526	551	577	1654	571	545	539	1655	589	504	593	1686	581	506	552	1639	6634	539	478	406	1423	1423
with primary diagnosis of dementia	78	95	6	7	10	23	11	5	7	23	10	3	9	22	7	6	4	17	85	4	7	5	16	16

The 2013/14 and 2014/15 columns are TOTAL; the Apr–TOTAL columns span 2015/16; the final Apr–TOTAL columns span 2016/17.

	2015/16													2016/17			
	Jul	Aug	Sep	Q2	Oct	Nov	Dec	Q3	Jan	Feb	Mar	Q4	TOTAL	Apr	May	Jun	Q1
Emergency admissions with primary or secondary diagnosis of dementia (any age)	206	193	220	619	213	206	232	651	229	157	187	573	1843	204	235	179	618
Crude rate per 100,000 population	816.8	765.2	872.3	818.1	844.5	816.8	919.9	860.4	908.0	622.5	741.4	757.3	811.9	808.8	931.8	709.7	816.8
Number of those admissions with a fall in the diagnoses	43	33	45	121	51	47	36	134	55	31	35	121	376	49	52	31	132
% of those admissions with fall in the diagnoses	20.9%	17.1%	20.5%	19.5%	23.9%	22.8%	15.5%	20.6%	24.0%	19.7%	18.7%	21.1%	20.4%	24.0%	22.1%	17.3%	21.4%

Emergency admissions with a primary or secondary diagnosis of dementia by month — NHS Stockport CCG
Source: SUS SEM extract; HSCIC

Referrals to Memory Clinic — Referrals to Memory Clinic - NHS Stockport CCG
Source: Pennine Care NHS Foundation Trust, N.B. Waiti...

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Reference	Data Source	Linked Standards
1. NHS Health Checks	PHE Fingertips tool. Cumulative % of eligible pop who have received an NHS Health Check between Q1 2013/14 - 2015/16 Q4	Standard 1
2. Diagnostic Process	Dementia United GM System-Wide Expert Group Survey (June 2016)	Standards 2, 3
3. Estimated Rate of Dementia Diagnosis	Greater Manchester Aggregated Dementia Dashboard	Standard 2
4. Dementia Diagnosis Rates (June 2016)	HSCIC QOF monthly Dementia register (updated 31-July-16)	Standard 2
5. Commissioned or Provided Services	Dementia United GM System-Wide Expert Group Survey (June 2016)	Standards 3-5, 8-14
6. Clinical Support for Dementia	Dementia United GM System-Wide Expert Group Survey (June 2016)	Standards 1-5
7. Proportion of Dementia Friends	Figures provided by the Alzheimers Society (updated 28-June-16).*	
8. Dementia Home Care and Residential Care	Dementia United GM System-Wide Expert Group Survey (June 2016)	
9. Admissions (with Dementia in any diagnostic position)	Greater Manchester Aggregated Dementia Dashboard	
10. Proportion of People with Dementia who died in their usual place of residence	Public Health England (Office for National Statistics Mortality File) 2014. Accessed via PHE Fingertips tool**	Standard 15

These figures are being used as indicative figures in place of the locally reported data from the survey as several respondents were unable to provide any data, and others referred directly to this AS data. The data may differ from some locality-held data due to the nature of their recording - these data represent Dementia Friends who were trained in postcode areas within each locality. As some postcodes do not marry exactly to one locality, and some localities may have sent people outside of their areas for training, some minor variation is expected.

** Proportion of deaths with a mention of Dementia where the place of death is recorded as home, care home or religious establishment (excluding deaths from external causes) in any one calendar year*
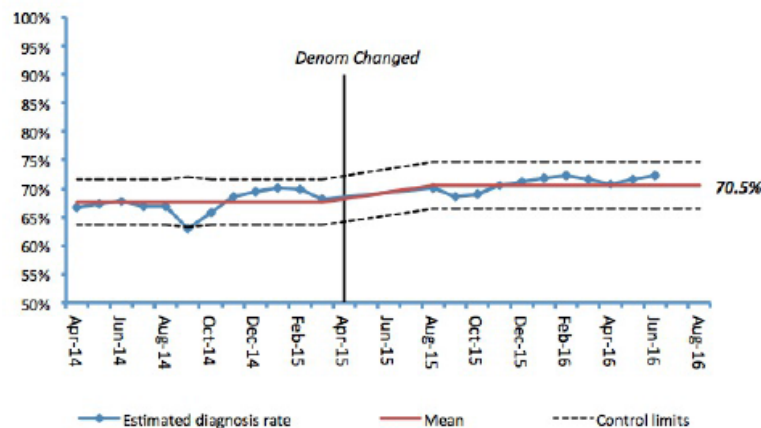
Preventing and Diagnosing Well

1. NHS Health Checks

35.69%   41.1%

● % Invited Pop. Who Received an NHS Health Check   ● % Total Eligible Pop. Who Have Received NHS Health Check (Cumulative)

3. Estimated Rate of Dementia Diagnosis

Denom Changed

70.5%

Estimated diagnosis rate —— Mean ---- Control limits

2. Diagnostic Process

Commissioned Memory Clinic	Pennine Care FT
Number of Referrals 2015-16	590
Waiting Time: Initial Contact > Diagnosis	6 Weeks or Less
% of Referrals Resulting in Dementia Diagnosis	[unknown] %

4. Dementia Diagnosis Rates (June 2016)

	Diagnoses of Dementia (65+) (Cumulative total)	Estimated prevalence (65+)	Dementia Diagnosis Rate ^
Salford	2035	2281	89.22%
Manchester	2797	3210	87.13%
Bury	1777	2041	87.07%
Oldham	1825	2254	80.97%
Bolton	2233	2915	76.60%
Stockport	2737	3746	73.06%
Tameside & Glossop	1892	2691	70.31%
Wigan	2338	3400	68.76%
Trafford	1836	2693	68.18%
HMR	1445	2139	67.55%

National Estimated Dementia Diagnosis Rate   66.9%

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Supporting and Living Well

## 5. Commissioned or Provided Services

● Diagnostic Support ● Clinical Support ● Social Support

| Dementia Nurse/s ✓ | Dementia Adviser/s ✓ | Memory Support ✓ | Info Signposting ✓ | Singing for the Brain ✗ | Assistive Tech ✓ | Peer Support ✗ | Respite Care ✓ |

| Memory Assessment Clinic ✓ | Meds Support ✓ | Falls Prevention ✓ | Research Opportunities ✓ | Advocacy ✓ | Counselling ✓ | Carer Training ✓ | Carer Support ✓ |

Dementia Friends

Locality Status: [None] (as a City; Marple is a DF Town)

7. Proportion of Dementia Friends
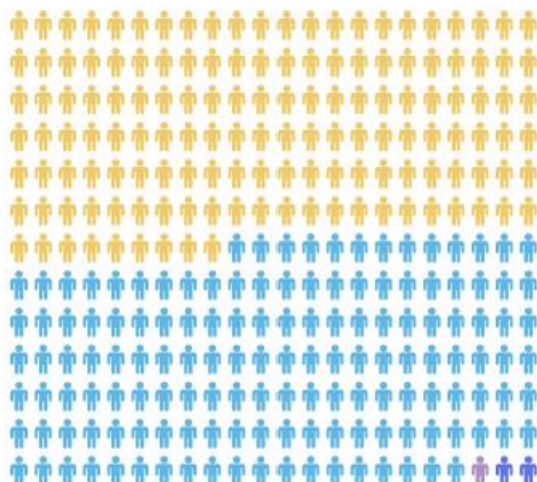
● People With Dementia (Estimated Prevalence) (3746) ● Dementia Friends (3757)
● Dementia Friends Organisations (19) ● Dementia Friends Champions (56)

6. Clinical Support for Dementia

	Number per 1000 pop. People with Dementia (diagnosed)
Dementia Nurse Specialists	1.5
Geriatric (Care of the Elderly) Nurses	[unknown]
Consultant Geriatricians	3.3

8. Dementia Home Care and Residential Care

People with Dementia (diagnosed): 280 | 174 | 2283

| 0 | 400 | 800 | 1,200 | 1,600 | 2,000 | 2,400 |

● Receiving Home Care ● Receiving Residential Care ● Receiving Neither Home nor Residential Care

9. Admissions (with Dementia in any diagnostic position)

	Rates per month	Numbers per month	Possible avoidance per month
Admissions	56.5 (per 1000 dementia pop)	206	51
Readmissions	19.9% (of admissions)	38	8
Length of Stay	11.8 (per admission)	2399	452

Dying Well

10. Proportion of people with Dementia who died in their usual place of residence

 70.6%