Long Term Conditions
Joint Strategic Needs Assessment
(February 2014)

Summary of Key Findings and Strategic Actions

A 'long term condition' is defined by the Department of Health as:

'Any condition that can not be cured but can be managed with medication or therapy'

Long term conditions (LTCs), such as diabetes, heart disease, and chronic obstructive pulmonary disease, are chronic illnesses that have a limiting impact on a person's lifestyle.

Number of People with Long Term Conditions

Key Findings

- In England 41% men and 43% women have longstanding illness

- Prevalence of long term illness increases with age

- Older people are more than likely to experience more than one longstanding illness

- Longstanding illness prevalence increases with income and deprivation

- It is estimated that in Sandwell approximately 27% of people (15 years and older) with longstanding illness smoke

- People with long term conditions smoke more heavily when compared to those who don't

- People with long term conditions have a higher prevalence of obesity compared with general findings

- Current estimates suggest that in Sandwell there may be as many as
    - 110,000 adults* with long term conditions
    - 60,000 adults* with limiting long term conditions.
    - 50,000 adults* with multiple long term conditions

- The number of patients diagnosed long term conditions is likely to increase in the future which place increased demand for lifestyle services

- The number of people on hypertension, diabetes, hypothyroidism, cancer and chronic kidney disease has increased

- Women have higher prevalence of dementia, depression, cancer, hyperthyroidism and chronic kidney disease
- Men have higher prevalence of CHD and learning disabilities

Strategic Actions

- Target people with long term conditions with lifestyle interventions
- Ensure that people with long term conditions are referred to stop smoking services

Prediction of uptake of Lifestyle Services

Key Findings

- 10,000 adults with long term conditions might be ready to access Sandwell smoking cessation services
- 11,000 adults with long term conditions might access physical activity and weight reduction programmes (according to current trends in uptake rates from the cardiovascular screening programme).
- Currently it is likely that lifestyle services engage less than 10% of this estimated number of people.
- Current data suggests that the male population is much less likely to access lifestyle services than the female population.

Strategic Actions

- Explore ways of increasing uptake of lifestyle services by men
- Increase the number of integrated lifestyle services available for families as some research suggests that men are more likely to feel comfortable undertaking lifestyle interventions as a family
- Promote workplace brief interventions signposting to existing services
- Promote workplace lifestyle services where appropriate
- Explore maximising the uptake of lifestyle services by the Sandwell population via secondary and primary care practitioners

Multiple Long Term Conditions and Multiple Morbidities

Key Findings

- 21,983 (7.6%) people in Sandwell have one long term condition
- 8,280 (2.9%) have two or more (multiple) long term conditions
- The number of females (4,287) who have multiple long term conditions is higher compared to males (3,992)

- Prevalence of multiple LTC increases with age in both males and females
- The white (75.5%), Asian (13.5%) and Black (5%) ethnic groups have the highest prevalence of long term conditions
- The prevalence for multiple long term conditions in Sandwell is 2.9%
- Rates of multiple LTCs are associated with deprivation
- Majority of those aged over 65 years have two or more long term conditions
- Those aged 75 and over have three or more long term conditions

CHD

- 4,842 (58.5%) people have multiple long term conditions with CHD
- Diabetes was the most prevalent co-morbidity with CHD
- 1,293 people were identified with both CHD and diabetes
- The crude rate per 100,000 population of [CHD + diabetes + renal disease] was 99.46 per 100,000 population

Diabetes

- 5,257 (63.5%) people have multiple long term conditions with diabetes
- CHD was the most prevalent co-morbidity with diabetes
- 1,293 people were identified with both CHD and diabetes
- The crude rate per 100,000 population of [diabetes + renal disease + CHD] was 99.46 per 100,000 population

Renal disease

- 2,600 (31.4%) people have multiple long term conditions with renal disease
- Diabetes was the most prevalent co-morbidity with renal disease
- 720 people were identified with both renal disease and diabetes
- The crude rate per 100,000 population of [renal disease + diabetes + CHD] was 99.46 per 100,000 population

Chronic Obstructive Pulmonary Disease

- 2,222 (26.8%) people have multiple long term conditions with COPD
- CHD was the most prevalent co-morbidity with COPD
- 605 people were identified with both COPD and CHD
- The crude rate per 100,000 population of [COPD + CHD + diabetes] was 51.12 per 100,000 population

Asthma

- 4,640 (56%) people have multiple long term conditions with asthma
- Diabetes was the most prevalent co-morbidity with asthma
- 501 people were identified with both asthma and diabetes
- The crude rate per 100,000 population of [asthma + diabetes + CHD] was 40.34 per 100,000 population

Epilepsy

- 977 (11.8%) people have multiple long term conditions with epilepsy
- Asthma was the most prevalent co-morbidity with epilepsy
- 109 people were identified with both epilepsy and asthma
- The crude rate per 100,000 population of [epilepsy + CHD + diabetes] was 6.61 per 100,000 population

Thyroid disorders

- 2,576 (31%) people have multiple long term conditions with thyroid disorders
- Diabetes was the most prevalent co-morbidity with thyroid disorders
- 474 people were identified with both epilepsy and asthma
- The crude rate per 100,000 population of [thyroid disorders + asthma + diabetes] was 17.74 per 100,000 population

Depression

- 1,459 (17.6%) people have multiple long term conditions with depression
- Asthma was the most prevalent co-morbidity with depression
- 193 people were identified with both depression and asthma
- The crude rate per 100,000 population of [depression + asthma + diabetes] was 6.61 per 100,000 population

Diverticulus

- 1,091 (13.2%) people have multiple long term conditions with diverticulus
- CHD was the most prevalent co-morbidity with diverticulus
- 167 people were identified with both diverticulus and CHD
- The crude rate per 100,000 population of [diverticulus + CHD + diabetes] was 11.82 per 100,000 population

Strategic Actions

- The following strategic actions have been identified by previous multi-agency work (NHS, SMBC and PH) and remain current. These include the need to commission for
  - Lifestyle behaviour change programmes aimed at changes risk factors (including weight management, physical activity and environmental options)
  - Education programmes designed to improve self management and self care
  - Early recognition, prompt diagnosis and treatment services in primary and community care
  - Psychological and emotional support programmes to ensure appropriate support
  - Community based access and support services including intermediate care
  - Emergency and acute services to meet the needs of patients based on best practice
  - Integration across health and social care in reablement and rehabilitation services and support independence
  - Services to support carers
  - Appropriate and culturally sensitive end of life services
- Consider recommendations for commissioning high quality care (National Institute of Health Research 2013).