



North East Quality Observatory Service

Population Health & Healthcare Surveillance

End of Life Care

March 2019 Update

Summary Dashboard

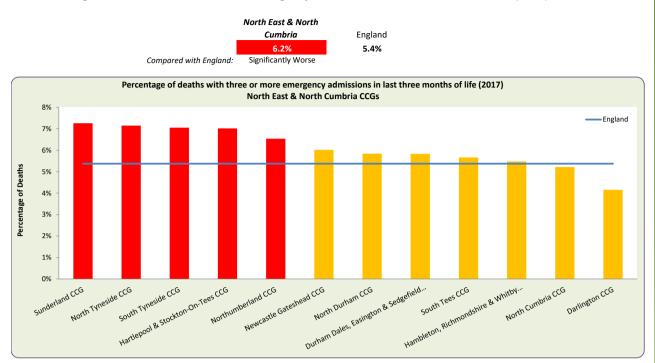
		Indicator	Time Period	North East Value	North East Rank	National Average	Direction of Travel
End of Life Care	45.	Percentage of deaths with three or more emergency admissions in last three months of life	2017	6.2%		5.4%	•
	46.	% Dying in hospital aged 65-74 years (all causes)	2016	49.1		49.2	******
	47.	% Dying in hospital aged 75-84 years (all causes)	2016	51.5		50.5	*********
	48.	% Dying in hospital aged 85+ years (all causes)	2016	45.7		43.8	*********
	49.	% of deaths with an underlying cause of Cancer that took place in Usual Place of Residence (all ages)	2016	49.6		44.5	******
	50.	% of deaths with an underlying cause of Circulatory disease that took place in Usual Place of Residence (all ages)	2016	44.3		44.8	*********
	51.	% of deaths with an underlying cause of Respiratory disease that took place in Usual Place of Residence (all ages)	2016	32.7		32.2	*********
	52.	% of deaths with an underlying cause of Dementia & Alzheimer's disease that took place in Usual Place of Residence (all ages)	2016	68.9		71.0	******
	53.	Care home beds per 100 people - ages 75+	2018	11.6		10.1	• • • • • • • • •
	54.	Nursing home beds per 100 people - ages 75+	2018	6.0		4.9	• • • • • • • •
		Compared with England Significantly Better Significantly Higher		Similar		Significantly Significantly	

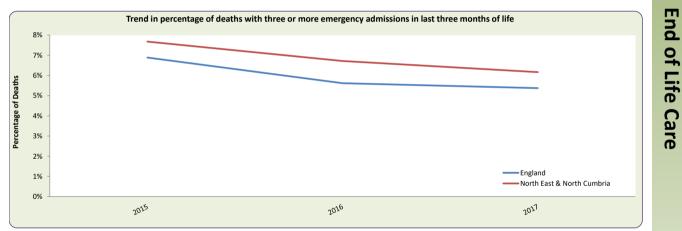
North East Rank amongst the 9 Regions 1 - Best 9 - Worst

What do the detailed pages show?

The following pages contain further information for each indicator, including, where available, data comparing each region in England, trend data over time for England and the region and the latest information at local authority or CCG level for the North East and Cumbria. A narrative section explains the key findings from the data and also includes data sources and definitions.

Significantly Worse





Data source: NHS Digital - CCG Improvement and Assessment Framework

Definitions / Notes

The purpose of the indicator is to encourage improvement in the quality of end of life and it is part of the CCG Improvement and Assessment Framework (CCG IAF 105c). The threshold of 3 or more is set to account for the fact that some unplanned needs may require emergency admission (e.g. an acute reversible event that may or may not be connected to the underlying condition, or an unexpected and sudden deterioration in symptom severity which requires urgent and close 24/7 medical and/or nursing management).

A high number of emergency admissions during the last 3 months of life could indicate that care is not being coordinated, that care planning conversations are not taking place or the appropriate level of support to deliver a care plan and manage potential crises is not in place.

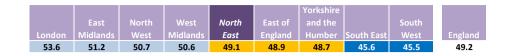
What is the data telling us?

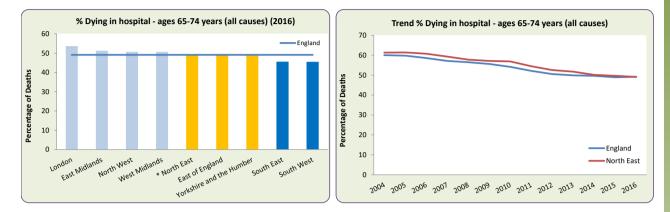
The data show that the percentage of deaths with three or more emergency admissions in the last three months of life was significantly higher in the North East and North Cumbria in 2017 than in the country as a whole (6.2% versus 5.4%). Although trend data indicate that this percentage is declining in the NENC area, the gap between the region and England has not narrowed as the England rate has fallen at a similar pace to that seen in the NENC area.

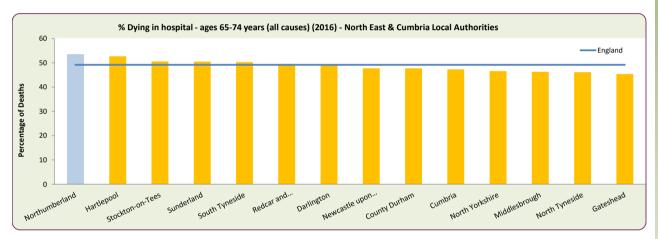
Similar

46. % Dying in hospital - ages 65-74 years (all causes) (2016)

The annual proportion of registered deaths in each area for persons aged 65 to 74 years and where the place of death is recorded as Hospital.







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

National studies indicate that, given the choice, most people would prefer to die at home. In practice, however, a considerable proportion of people die in hospital with implications for the quality of their end of life care.

What is the data telling us?

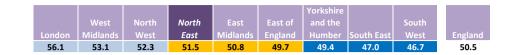
These data show that, in 2016, the proportion of people aged 65-74 years old in the North East region (49.1%) dying in hospital was similar to that in England (49.2%). The trend over time shows a reduction in the proportion of people in this age group who die in hospital.

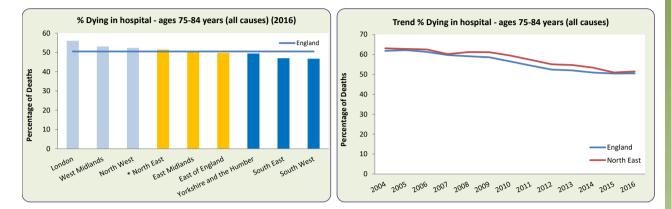
During this period, the majority of local authorities in the North East and Cumbria were also similar to England. There was one exception: Northumberland was significantly higher than England. This variation may depend on the availability of community hospitals and hospices in each area.

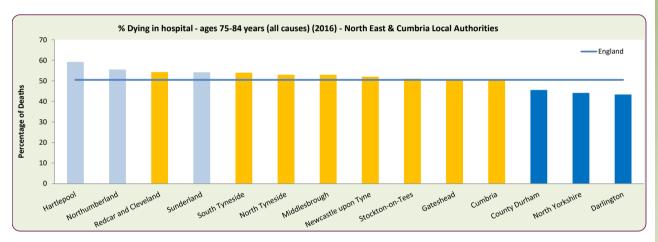
Similar

47. % Dying in hospital - ages 75-84 years (all causes) (2016)

The annual proportion of registered deaths in each area for persons aged 75 to 84 years and where the place of death is recorded as Hospital.







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

National studies indicate that, given the choice, most people would prefer to die at home. In practice, however, a considerable proportion of people die in hospital with implications for the quality of their end of life care.

What is the data telling us?

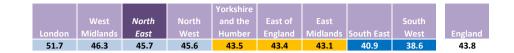
These data show that in 2016, the proportion of people aged 75-84 years old in the North East region (51.5%) dying in hospital, was similar to that in England (50.5%). The trend over time shows a reduction in the proportion of people in this age group who die in hospital.

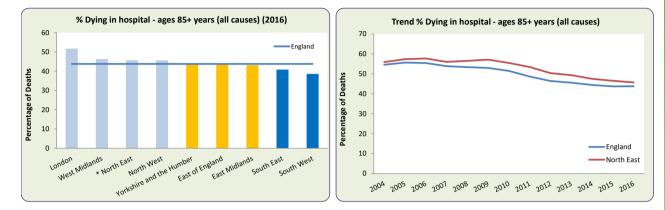
During this period, there was variation within the region. In 2016 Hartlepool had the highest percentage dying in hospital at 59.2%, whilst the Local Authority area with the lowest percentage dying in hospital was Darlington at 43.4%. This variation may depend on the availability of community hospitals and hospices in each area.

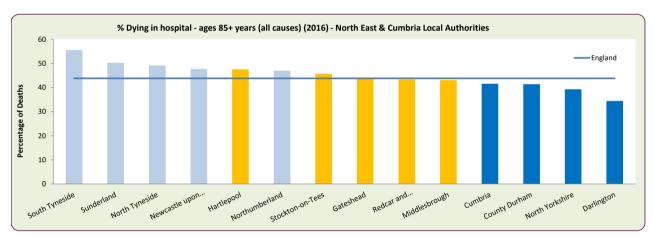
End of Life Care

48. % Dying in hospital - ages 85 years and over (all causes) (2016)

The annual proportion of registered deaths in each area for persons aged 85 years and over and where the place of death is recorded as Hospital.







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

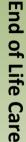
Definitions / Notes

National studies indicate that, given the choice, most people would prefer to die at home. In practice, however, a considerable proportion of people die in hospital with implications for the quality of their end of life care.

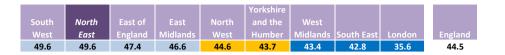
What is the data telling us?

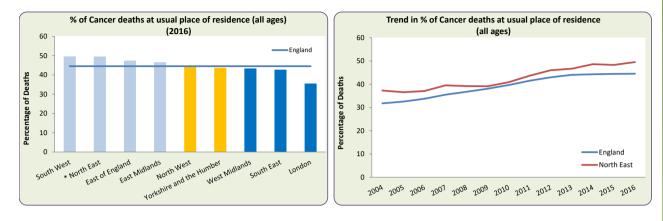
These data show that in 2016, the proportion of people aged 85+ years old in the North East region (45.7%) dying in hospital was significantly higher than that in England (43.8%). The trend over time shows a reduction in the proportion of people in this age group who die in hospital.

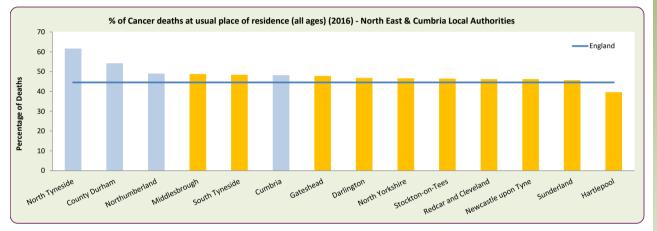
During this period, there was variation within the region. In 2016 South Tyneside had the highest percentage dying in hospital at 55.6%, whilst the lowest percentage was in Darlington at 34.4%.



49. % of deaths with an underlying cause of Cancer that took place in usual place of residence (all ages) (2016)







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

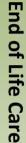
Definitions / Notes

Usual residence is defined as: home, care homes (local authority and non-local authority) and religious establishments.

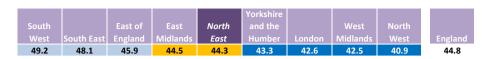
What is the data telling us?

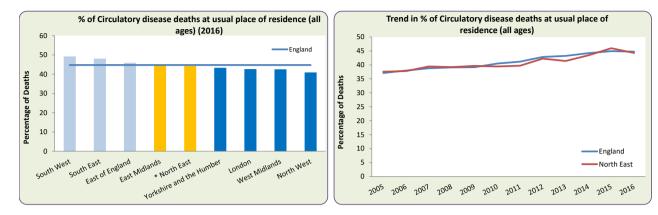
These data show that in 2016, the proportion of cancer deaths in the North East region that occurred at the usual place of residence (49.6%) was significantly higher than that in England (44.5%). The trend in this measure over time at national and regional level is that there has been an increase in the proportion of deaths from cancer that take place in the usual place of residence for the patient.

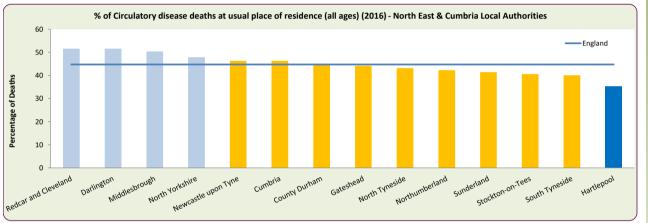
In 2016 there was variation within the region. North Tyneside had the highest proportion of cancer patients dying at the usual place of residence at 61.6%, whilst the lowest percentage was in Hartlepool at 39.6%.



50. % of deaths with an underlying cause of Circulatory disease that took place in usual place of residence (all ages) (2016)







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

Usual residence is defined as: home, care homes (local authority and non-local authority) and religious establishments.

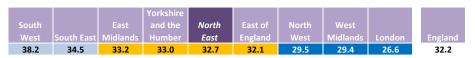
What is the data telling us?

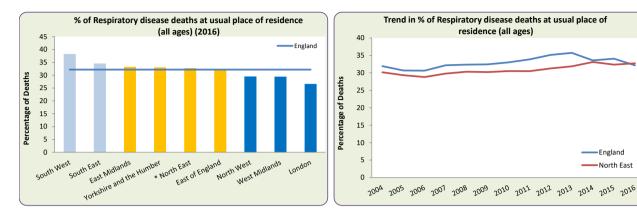
These data show that in 2016, the proportion of circulatory disease deaths in the North East region that occurred at the usual place of residence (44.3%) was similar to that in England (44.8%). The trend in this measure over time at national and regional level has generally been upwards, although in the North East, in 2016, the proportion of deaths from circulatory disease that took place in usual place of residence declined slightly from the 2015 figure.

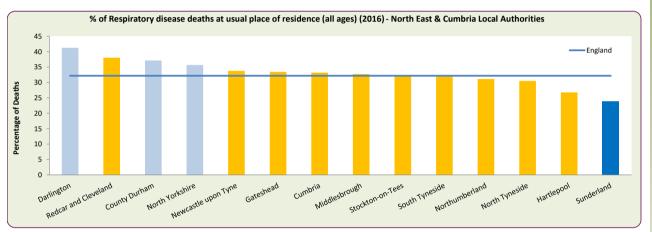
In 2016 there was variation within the region. Redcar and Cleveland had the highest percentage dying at the usual place of residence at 51.6%, whilst the lowest percentage was in Hartlepool at 35.2%.

End of Life Care

51. % of deaths with an underlying cause of Respiratory disease that took place in usual place of residence (all ages) (2016)







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

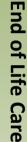
Usual residence is defined as: home, care homes (local authority and non-local authority) and religious establishments.

What is the data telling us?

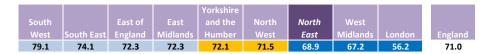
These data show that in 2016, the proportion of respiratory disease deaths in the North East region that occurred at the usual place of residence (32.7%), was similar to that in England (32.2%).

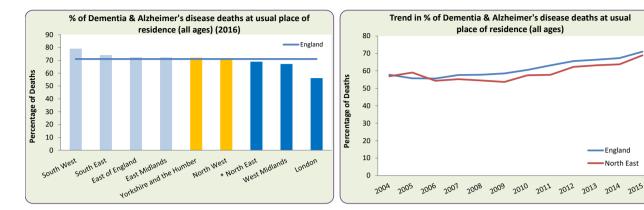
From 2007 until 2013/2014 there was a slow increase in the proportion of deaths from respiratory disease that took place in the usual place of residence for the patient but in recent years this has plateaued in the North East and appears to be declining in England.

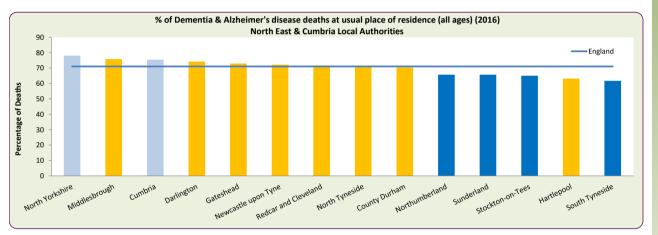
In 2016 there was variation within the region. Darlington had the highest percentage dying at the usual place of residence at 41%, whilst the lowest percentage was in Sunderland, 23.9%.



52. % of deaths with an underlying cause of Dementia & Alzheimer's disease that took place in usual place of residence (all ages) (2016)







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

Usual residence is defined as: home, care homes (local authority and non-local authority) and religious establishments.

What is the data telling us?

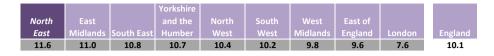
These data show that in 2016, the proportion of Dementia & Alzheimer's disease deaths in the North East region that occurred at the usual place of residence (68.9%) was significantly lower than that in England (71.0%). The trend in this measure over time at national and regional level is that there is an increase in the proportion of deaths from dementia and Alzheimer's disease that take place in the usual place of residence for the patient.

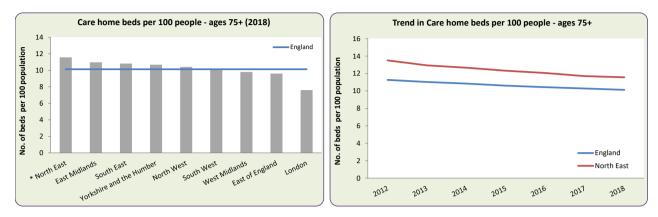
In 2016 there was variation within the region. North Yorkshire had the highest percentage dying at the usual place of residence at 78.1%, whilst the lowest percentage was in South Tyneside at 61.7%.

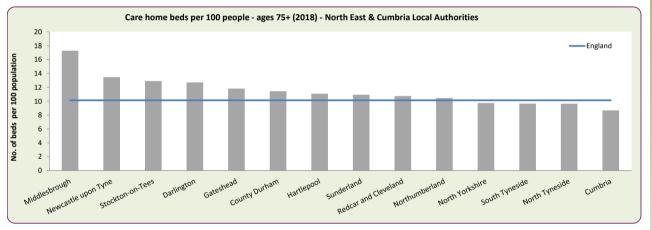
End of Life Care

53. Care Home Beds per 100 people - ages 75+ (2018)

The number of beds in care homes (all care homes - nursing or residential) per 100 population aged 75 and over







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

Within each area, the number of beds available at fiscal year end (31st March) in care homes (nursing and residential), as recorded by CQC, is reported as a percentage of the ONS mid year estimated population aged 75 and over in that area for the previous year (e.g. beds data for end March 2018 is associated with population data for mid year 2017).

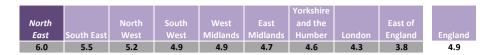
What is the data telling us?

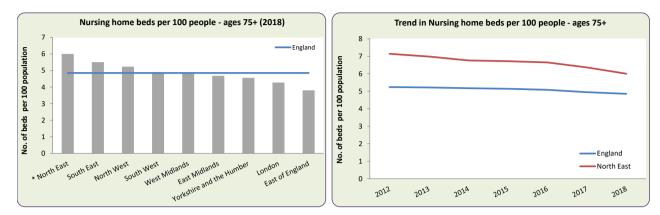
These data show that in 2018, the number of care home beds per 100 population aged 75 and over was the highest in England. The trend data shows that the North East region has consistently had a higher number of beds per population than the England average, although both rates have been falling since 2012.

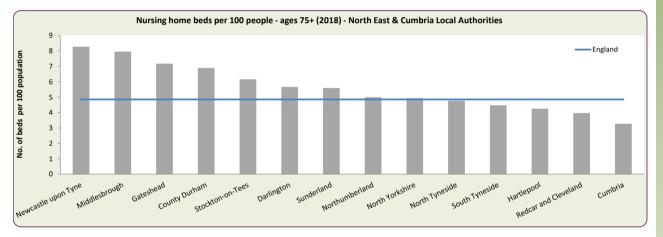
In 2018 there was variation within the region. Middlesbrough had 17.3 care home beds per 100, whilst the lowest rate was in Cumbria with 8.7 beds per 100 people aged 75 and above.

54. Nursing Home Beds per 100 people - ages 75+ (2018)

The number of beds in nursing homes per 100 population aged 75 and over







Data source: Public Health England - End of Life Profiles Indicator Portal (https://fingertips.phe.org.uk/profile/end-of-life).

Definitions / Notes

Within each area, the number of beds available at fiscal year end (31st March) in nursing homes, as recorded by CQC, is reported as a percentage of the ONS mid year estimated population aged 75 and over in that area for the previous year (e.g. beds data for end March 2018 is associated with population data for mid year 2017).

It should be noted that the data reported for this metric (nursing home beds only) is a subset of that reported for the previous metric which related to both residential and nursing home beds.

What is the data telling us?

These data show that in 2018, the number of nursing home beds per 100 population aged 75 and over was the highest in England. The trend data shows that the North East region has consistently had a higher number of beds per population than the England average, although both rates have been falling since 2012.

In 2018 there was variation within the region. Newcastle upon Tyne had 8.3 beds per 100, whilst the lowest rate was in Cumbria with 3.3 beds per 100 people aged 75 and above.